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46 clinics

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79,000 accredited providers

A network of accredited healthcare, aviation and security providers, ensuring we provide you with high standards of care in the air and on the ground.

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Fighting Ebola in West Africa

International SOS' medical experts talk about the Ebola outbreak and work on the ground to protect clients and local communities

Outside the classroom

From hiking in the Andes to sea kayaking in Sibiu – protection for students on field trips

In the face of a crisis

Taking action to keep clients safe in South Sudan and Ukraine

hotline

The magazine for International SOS | 2014 Vol.2



Welcome

Dear Reader,

A warm welcome to the latest edition of *Hotline*; International SOS' global customer magazine.

Wherever you are reading this magazine in the world, we aim to bring you the latest news from our experts on the frontline of medical and travel security risk services. In this edition you can read about how we are supporting our clients and local communities in the fight against Ebola in West Africa and how we are helping our members located in areas with high air pollution, like China. You will also find an article on our recent work in travel security and risk mitigation in the Ukraine and South Sudan.

We are always delighted to give you a behind-the-scenes view of the talent - the lifeblood - that drives our services to you. So in this edition we meet with one of our nurses to hear more about the crucial role she plays in protecting our clients.

At International SOS, we have a passion for people. All our articles are based on real events that involve real people all over the world. We would like to say a heartfelt thank you to our clients and colleagues for sharing their stories with us.

If you want to tell us about your story or share your feedback and thoughts on *Hotline*, please get in touch by emailing the editor on: hotline@internationalsos.com

Enjoy reading.

Arnaud Vaissie
Pascal Rey Herme

Arnaud Vaissie
Chairman & CEO

Pascal Rey Herme
Group Medical Director

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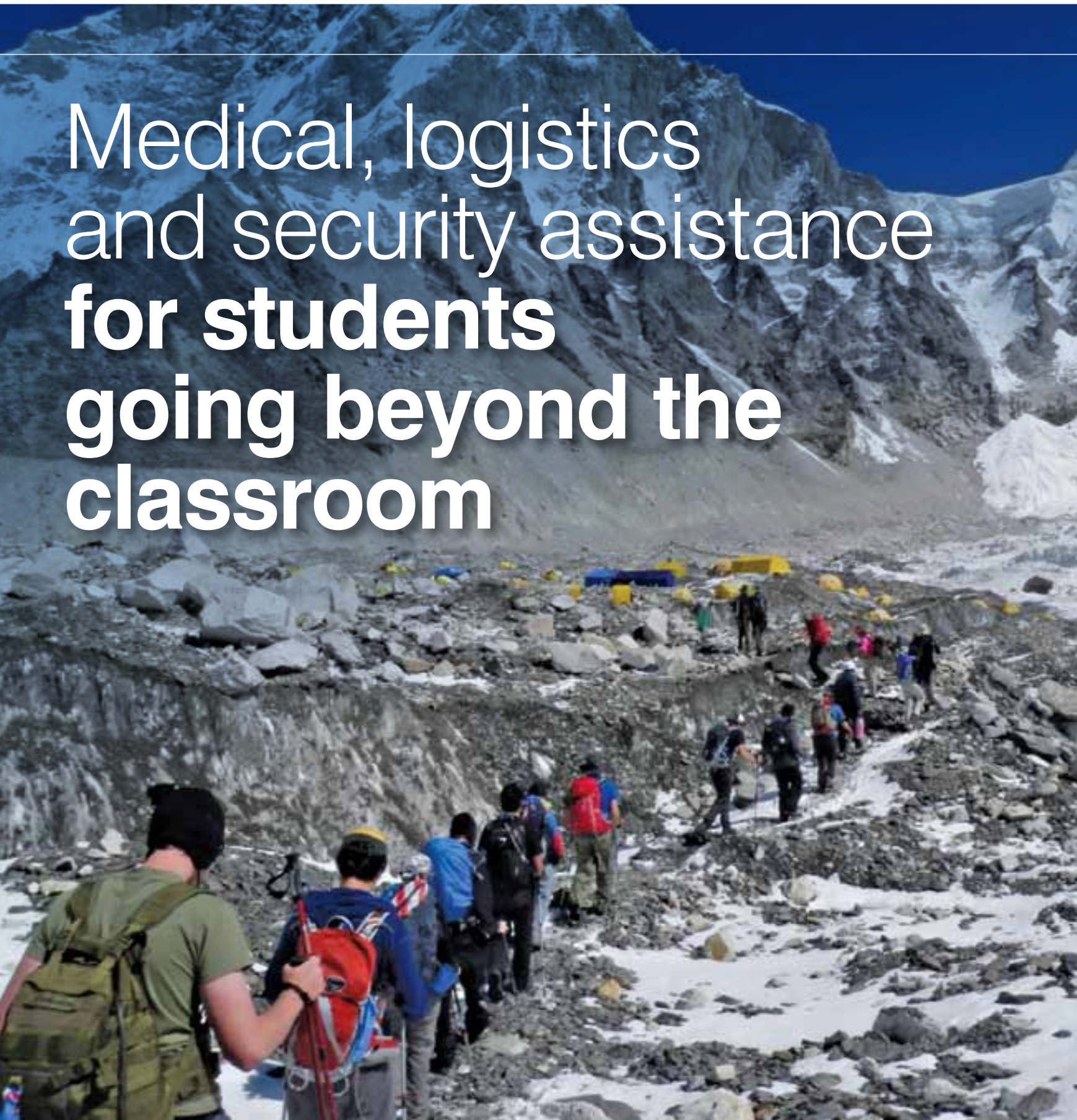
Exposure to emerging infectious diseases in the mining industry and how partnership work is helping to protect lives.



Cover:
Epauletted fruit bat hanging in a tree

PROTECTING TOMORROW'S FUTURE:

Medical, logistics and security assistance for students going beyond the classroom



Many international schools embrace the philosophy of outdoor education and experiential learning. School excursions and overseas expeditions provide rich experiences and vital preparation for life beyond academia. As one institutional mission statement asserts, “we think the learning that takes place while kayaking down a river in Chiang Mai is as important as the study of Shakespeare”.

Taking school children and youngsters to unfamiliar environments presents a unique set of challenges and responsibilities. Which is why more and more schools are turning to International SOS for medical, logistics and security support. International SOS helps ensure scholastic clients achieve their educational goals and visions while staying safe. Here, two of the company's key clients discuss the benefits of service agreements and explain how International SOS is helping them carry out their Duty of Care.



The United World College of South East Asia (UWCSEA) is part of the UWC movement, founded by the great German thinker and educationalist, Kurt Hahn. The school's guiding philosophy is to help students achieve “the independence and global perspective that will allow them to effectively lead by influence”, and to prepare them “not just for university, but for life”. To this end, ‘outdoor education’ is one of the five core elements of the UWCSEA learning programme. From its two campus locations in Singapore, the school coordinates 490 overseas trips annually, totalling 775,000 student hours of expeditions and travel each academic year.

“It’s a fairly unique institution,” says Patrick Read, Head of Outdoor Education and Director of Expeditions at UWCSEA. “At every grade level all our students (without exception) take part in the Outdoor Education programme. This starts at Grade One with a ‘sleep over’ at school and culminates with the students planning and running their own expedition in Grade Eleven. The students are very fortunate and travel to programmes all over SE Asia. In Grade Nine they have the opportunity to choose from 26 different locations including destinations in Europe, America, Australia and Asia – and we have an extensive carbon offset programme to compensate for such large

amounts of travel. They go trekking in rain forests and mountains, camping in the wild, canoeing or rafting on rivers. We believe these trips really open our students’ eyes and broaden their horizons, equipping them with skills and experiences that will stay with them for life.”

The flip side, of course, is that overseas travel with young people – particularly in the developing world – requires rigorous safety checks and organisational vigilance, as Read explains:

“In these locations, out in the field with a large party of schoolchildren, you never quite know what’s behind you or what’s coming. To run such an extensive programme of Outdoor Education we have a Duty of Care to our students and community, and robust emergency procedures are a central part of this. I’m from the UK originally, where we can call ‘999’ if we need assistance but out here we call International SOS.”

Longstanding relationship

UWCSEA has been using International SOS’ services for over ten years. The service agreements range from minimum-level travel insurance to top-flight, multifaceted contracts on a par with those taken out

LEFT:
Students from United World College of SE Asia (UWCSEA) trekking into the Everest Base Camp

BELOW, LEFT:
Students working with children in a home for street children in Delhi

BELOW, RIGHT:
Students from the English Schools Foundation (ESF) on a field trip



“All our instructors are highly skilled and experienced - but a sick child at night in the middle of nowhere is a frightening proposition for anyone.”

PATRICK READ - HEAD OF OUTDOOR EDUCATION AND DIRECTOR OF EXPEDITIONS, UWCSEA



FAR LEFT:
A student from UWCSEA climbing in China

LEFT:
ESF students on an eco-fieldtrip in Langkawi, Malaysia

LEFT BELOW:
Students from UWCSEA on a remote island near Sibul, Malaysia

RIGHT:
Muddy Grade Eight UWCSEA students in Chiang Mai

by multinational oil and gas companies or Non-Governmental Organisations (NGOs).

“When the young people come through the college gates, their parents expect the best educational experience for them,” says Read. “It’s the same when they exit the college gates with us on a trip; their parents expect the best levels of safety and instruction, and that’s what they get.”

The expert security and medical support provided by International SOS to UWCSEA is both proactive and reactive. In the first instance, Read and his team provide information about all upcoming excursions and journeys. They also supply the International SOS doctors with the necessary medical and security information relating to all students and staff for the duration of each trip.

International SOS then checks the school’s calendar online and sends relevant updates and text alerts, providing situational analysis for key areas and advising if circumstances look uncertain or in any way dangerous.

“They watch over us,” explains Read. “If anything is happening in one of the areas we’re due to visit, if there are fears about infection or bad weather or civil unrest, they will advise us how best to approach the situation, or whether we should reconsider our options. It’s incredibly reassuring; at the same time, we know they’re not superheroes, it’s not about International SOS performing miracles – it’s about a two-way flow of information that enables us to be prepared and pre-empt all scenarios.”

In the field

Once out in the field, the UWCSEA team of wilderness first-aiders and instructors have 24/7 telephone access to International SOS. If a child falls ill, injures themselves or develops an allergy of some kind, the team can call one of our medical experts for emergency advice and guidance. Within seconds of receiving a call, doctors can view individual student medical records via a highly advanced IT system. This enables both the doctor and the instructor to look at the same records simultaneously and has proved to be extremely valuable in the past.

“All our instructors are highly skilled and experienced,” says Read. “But a sick child at night in the middle of



nowhere is a frightening proposition for anyone. Having the International SOS team at the end of a phone really helps to put the guys on the ground at ease. You can see them visibly de-stress as they speak to the doctors.”

In extreme cases, UWCSEA can also call on International SOS to coordinate emergency airlifts and evacuations. Read recalls one memorable incident:

“We once had a girl on a trip in Nepal with suspected appendicitis. International SOS airlifted her to Kathmandu where local doctors wanted to operate. International SOS checked her medical records and they were sceptical; they triaged a call with her parents and the UWCSEA Duty Manager, and armed with multiple strands of information advised that we fly her back to Singapore. We did just that; the doctors there confirmed it wasn’t appendicitis but another, non-critical medical condition. If it hadn’t been for International SOS, that girl would probably have been operated on in Nepal unnecessarily. As it was, she was back in school on the Monday.”

Managing risks through information and knowledge

The English Schools Foundation (ESF) in Hong Kong is a not-for-profit organisation comprising 21 schools ranging from primary to secondary to special needs. Set up by the Hong Kong Government in 1967, ESF caters for 18,000 students from a wide variety of nationalities and cultural backgrounds, studying within the International Baccalaureate programmes and International GCSE curricula.

Like UWCSEA, ESF Hong Kong offers a range of overseas expeditions and activities in Hong Kong, China and mainly developing countries worldwide. The philosophy is to challenge students physically, creatively and through service to others. The scale of the operation involves some inherent risks. Each year, over 3,000 ESF secondary students take part in outdoor adventure and community service projects overseas, often in tropical environments. But according to Chris Durbin, School Development Adviser at ESF, until recently there was a reliance on teachers’ own expertise to plan and document risk mitigation strategies:

“We had a very strong system of risk assessment but our school trips and expeditions are naturally risky because most are to developing countries,” says Durbin. “It was clear we required professional risk mitigation advice and a more sustainable system for knowledge transfer and decision making, and these requirements led us to International SOS.”

Due diligence and Duty of Care

In its relationship with ESF, International SOS provides very precise and neutral information on school trip destinations which, as Durbin explains, is vital for helping to assuage parental fears:

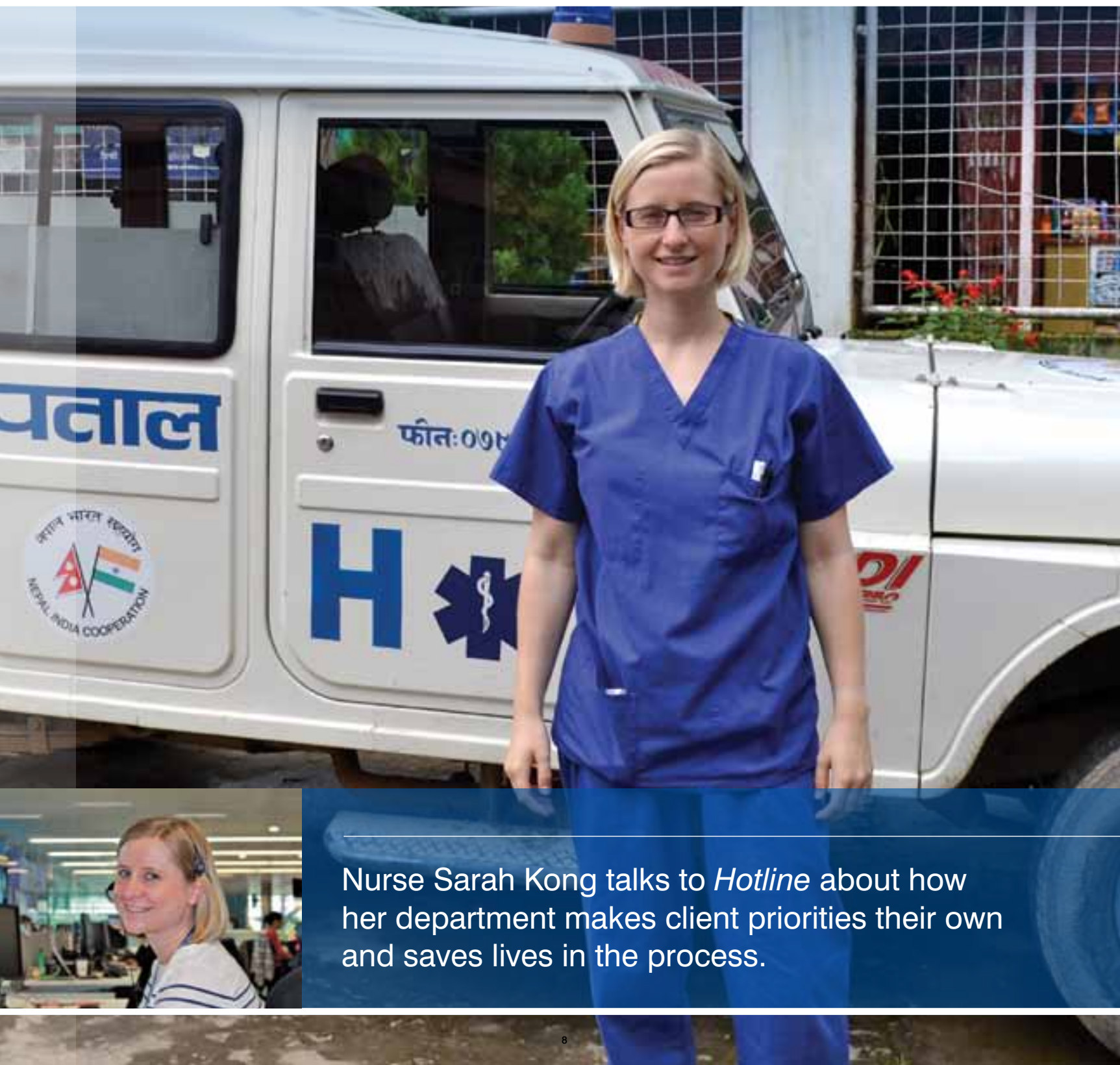
“It’s a huge responsibility, taking someone else’s child overseas. Naturally, parents worry – but often their fears are fuelled by overblown media reporting of events on the ground, as was the case during the H5N1 (bird flu) outbreak. What we get from International SOS is very clear, unbiased and non-alarmist information, which enables us to make informed judgements about risk potential.”

During the imposition of martial law in Thailand, ESF cancelled all school trips to the area based on International SOS’ alerts and advice. Meanwhile, precise situational analysis following the typhoon that struck the Philippines in November 2013 enabled ESF to push on with a vital community service expedition:

“We learned from International SOS that the hotel our students were due to stay in was in the lee of a mountain; it was on safe ground and the local hospital was undamaged. This reassured us that it was safe to proceed. Our students performed five days of really valuable community service and had a great time, helping to restore vegetation as part of a local environmental project.

In the days before International SOS the trip would have been cancelled; now, using their accurate information and expert guidance, combined with teachers’ common sense, we can manage the risks safely and intelligently. In this way, parents and school leaders can rest assured we are showing due diligence and discharging our primary Duty of Care – which is to keep our students safe and well as we provide a unique and valuable educational experience that they will remember for the rest of their lives.”

The lifeblood of International SOS



Nurse Sarah Kong talks to *Hotline* about how her department makes client priorities their own and saves lives in the process.

HL: Can you give us an overview of the services you provide as a nurse at International SOS?

I joined International SOS three years ago and my role is to look after the American military and their family members across Europe, Africa and western Asia. I work alongside around 30 nurses in our London office, where we manage all medical assessments remotely over the phone. Speaking with a medical professional from a similar background is so important for clients who are working or travelling in an unfamiliar environment, and helps them overcome potential communication and cultural barriers to receive the same high quality healthcare assessment they expect back home.

Compared with my previous work in hospital settings, I now work with a much wider spectrum of medical scenarios and face new challenges every day. The variable level of healthcare facilities available in foreign countries can make matters much more complex. Thankfully we have a strong global network of healthcare providers that we can connect with in many areas, and these partners can update us on our clients' wellbeing when additional care is needed. We have 24/7 access to a Senior Medical Director to assist us with more complicated situations. I always feel 100% supported.

HL: What unique skillset do you need to perform this role?

As a nurse working remotely, my main challenge is to provide a thorough assessment using only conversation to understand the patient's condition. I don't have any visual cues, so I have to think on my feet and gather crucial information from the patient or their representative on the other end of the phone. We're always thinking about the best next step for the patient, whether that's a local face-to-face assessment with an expert or urgent evacuation.

Sometimes the symptoms are very straightforward and we can advise on the best course of action without making any further referrals. This saves time for patients and ensures medical professionals on the ground are available to deal with more pressing medical emergencies. For us the most important thing to remember is that the client's reason for calling is their utmost priority at that moment in their lives. Having a good listening ear and responding sensitively has a big impact on the way they feel during and after a call.

HL: Can you take us through the process of dealing with a new case?

In our initial phone assessment, it's important to get a complete picture of the patient's concern. We ask about the symptoms, how long they've been present, current medications and past medical history. Given many of our callers are frequent travellers, we also ask about their current location and any recent travel. This allows us to account for the possibility of diseases like malaria or yellow fever, if they've passed through affected regions.

We must also consider whether the patient is well enough for any upcoming travel, as it may be better to wait until their symptoms pass before travelling. Our expertise in this area is particularly important, especially as someone suffering with an ear or sinus infection is advised to postpone travel to prevent any serious pain or even rupturing of the eardrum due to pressure changes in a commercial aircraft.

HL: Do you receive further training to stay abreast of medical developments?

We have ongoing training via weekly medical team meetings. Our medical director Dr Ryan Copeland and members of the nursing team arrange for internal and external speakers to present on developments in different areas of medicine and nursing as well as changes to the medical situation in our core geographical regions. These meetings also give members of our team a chance to present their work on internal projects. I recently ran a review of our medical coding accuracy for cases, and it was important to update the team on any potential improvements.

Outside of work, there are other ways to develop our careers. The managers are very flexible and accommodating of training and academic development that relates to our roles. International SOS recently supported me as I completed a five-month Diploma in Tropical Nursing, during which I wrote a report soon to be published by The British Global and Travel Health Association. These successes help to emphasise how talented our team is, and remind me how proud I am of the work we do.

HL: That's fantastic, congratulations. How will your diploma help you achieve more in your current role?

We cover a massive geographical region stretching from the west coast of Africa to the western side of Asia, so many clients could be exposed to tropical diseases. If someone does contract a disease in a tropical country, the symptoms can be misleadingly similar to the signs of general influenza.

For personnel who are deployed overseas and cover vast areas in a relatively short space of time, for example, there's a chance they won't develop symptoms until they arrive in a non-tropical country. Being able to identify possible exposure to a tropical disease from a client's recent travel history can definitely help us make more informed medical recommendations.

HL: Do you recall any cases that highlight your value to International SOS clients?

I took one call involving a patient at sea who was suffering with intense abdominal pains, which turned out to be a burst stomach ulcer. Although the priority was to get him to land, I needed to maintain close contact with the medic on board to make sure his condition didn't worsen. We were constantly on the lookout for serious complications like internal bleeding.

Ultimately, it was our fast action, recommendations and constant monitoring that ensured the patient was evacuated, seen by an appropriate surgeon and restored to full health as quickly as possible.

HL: Finally, what do you like most about your job?

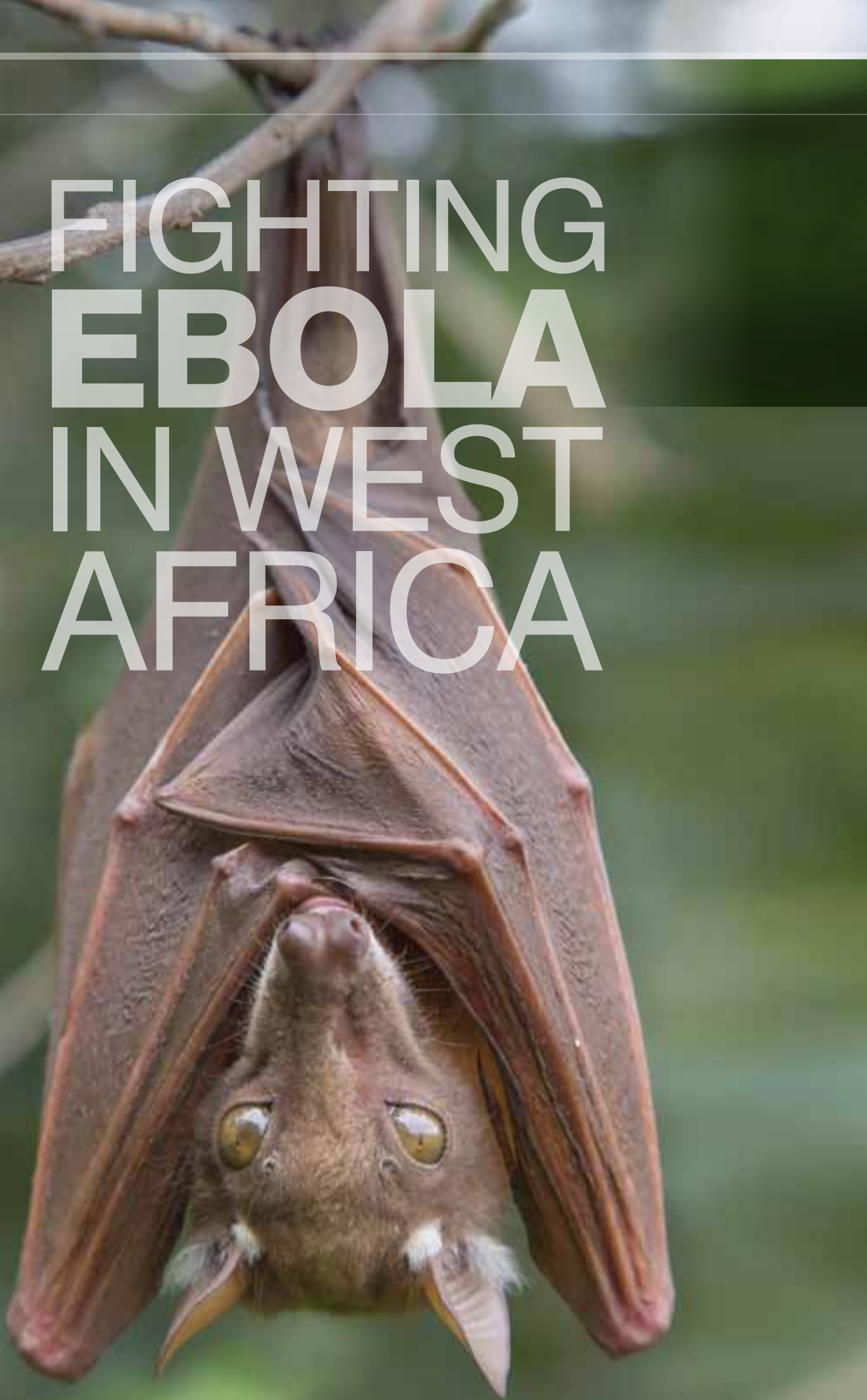
There are two things I really enjoy about working with International SOS. First, I'm lucky to work in a team where everyone has such an enthusiastic 'can-do' attitude to work and to life. Second, many of the clients we speak to are genuinely grateful for our assistance, which makes the job worthwhile and provides a constant source of positive reinforcement during a busy day!

"The most important thing to remember is that the client's reason for calling is their utmost priority at that moment in their lives. Having a good listening ear and responding sensitively has a big impact on the way they feel during and after a call."

SARAH KONG - INTERNATIONAL SOS, LONDON, UK



FIGHTING EBOLA IN WEST AFRICA



Ebola is a deadly haemorrhagic fever that can spread rapidly between humans and can kill up to 90% of those it infects. First identified in the Democratic Republic of Congo in 1976, the disease resurfaced again late in 2013 in the West African country of Guinea. Neighbouring Liberia, Sierra Leone and Nigeria – to which Ebola has now spread – are nations that are increasingly popular with mining companies because they're rich in resources like iron ore, gold and diamonds.

As the first of its kind in West Africa, the recent outbreak is proving to be one of the most challenging to contain in almost 40 years. International SOS has been with its clients at the frontlines to help fight the highly contagious disease.

International SOS was quick to take action when Ebola was first recognised in Guinea on 22 March 2014. Although the disease had been spreading for a few months, confirmation that it was Ebola was delayed because the disease had never before been seen in the area. Understanding the potential threat to its mining clients in Liberia and beyond, International SOS reacted quickly. It implemented rapid disease awareness training for staff, adapted its clinic layout to handle Ebola cases and developed educational tools to help reduce the spread of Ebola among local communities.



With no specific vaccine or cure for Ebola, prevention is paramount. *"It's one of the viral haemorrhagic diseases, of which Yellow Fever and Lassa Fever were better known in the area,"* says Dr Doug Quarry, Group Medical Director Medical Information and Analysis at International SOS. *"What we've learned since the first outbreak of Ebola in 1976 is that it occurs in sporadic outbreaks. It is thought that the disease circulates within the bat population, and is then contracted by humans when they eat infected bat meat or other bush animals. Ebola can then spread from human to human by direct contact with bodily fluids."*

For business travellers or expats who need medical assistance, going to a local hospital that might be caring for people with Ebola could be risky. *"Variable infection control practices in hospitals allow the disease to spread to healthcare workers,"* explains Dr Quarry. *"International SOS continues to monitor this and ensures we refer members to Ebola-free facilities."* Understanding the situation

and making precautionary calls to International SOS reduces the risk of infection and ensures clients receive safe, high-quality treatment from a secure medical centre.

When an individual falls ill from Ebola, initial symptoms typically appear after about seven days. These include fever, muscle pains, headache and sore throat. As the disease progresses, victims may experience vomiting, diarrhoea and bleeding – all highly contagious fluids as they contain large amounts of the virus. The risk of death may also be very high, with as few as 10% surviving. However, with general supportive measures like fluids and oxygen, the death rate can be reduced from 90% to about 60%. *"Because there's no specific treatment for Ebola, it is a serious public health issue requiring isolation, quarantine and education,"* says Dr Quarry. *"Every individual living in the affected area is responsible for containing the disease."*

Coordinated response in Liberia

It is crucial when responding to a threat like Ebola that International SOS works side by side with government health authorities and partners with them in their response. *"As Liberia is a low income nation with limited medical infrastructure, and had not had an Ebola outbreak before, there were no Ebola-specific processes in place. Therefore everyone was caught off guard,"* says Dr Andre Willemse, Regional Medical Director of Special Projects. *"We recognised the need for International SOS to step in and complement some of the existing responses by Médecins Sans Frontières (MSF) and the World Health Organisation (WHO), which were already very active in Guinea."*

International SOS used its Paris Assistance Centre as a collaborative headquarters and got to work quickly. A set of simple guidelines to educate medical staff and the local population was developed immediately. The guidelines help people recognise Ebola and prevent transmission to other individuals.

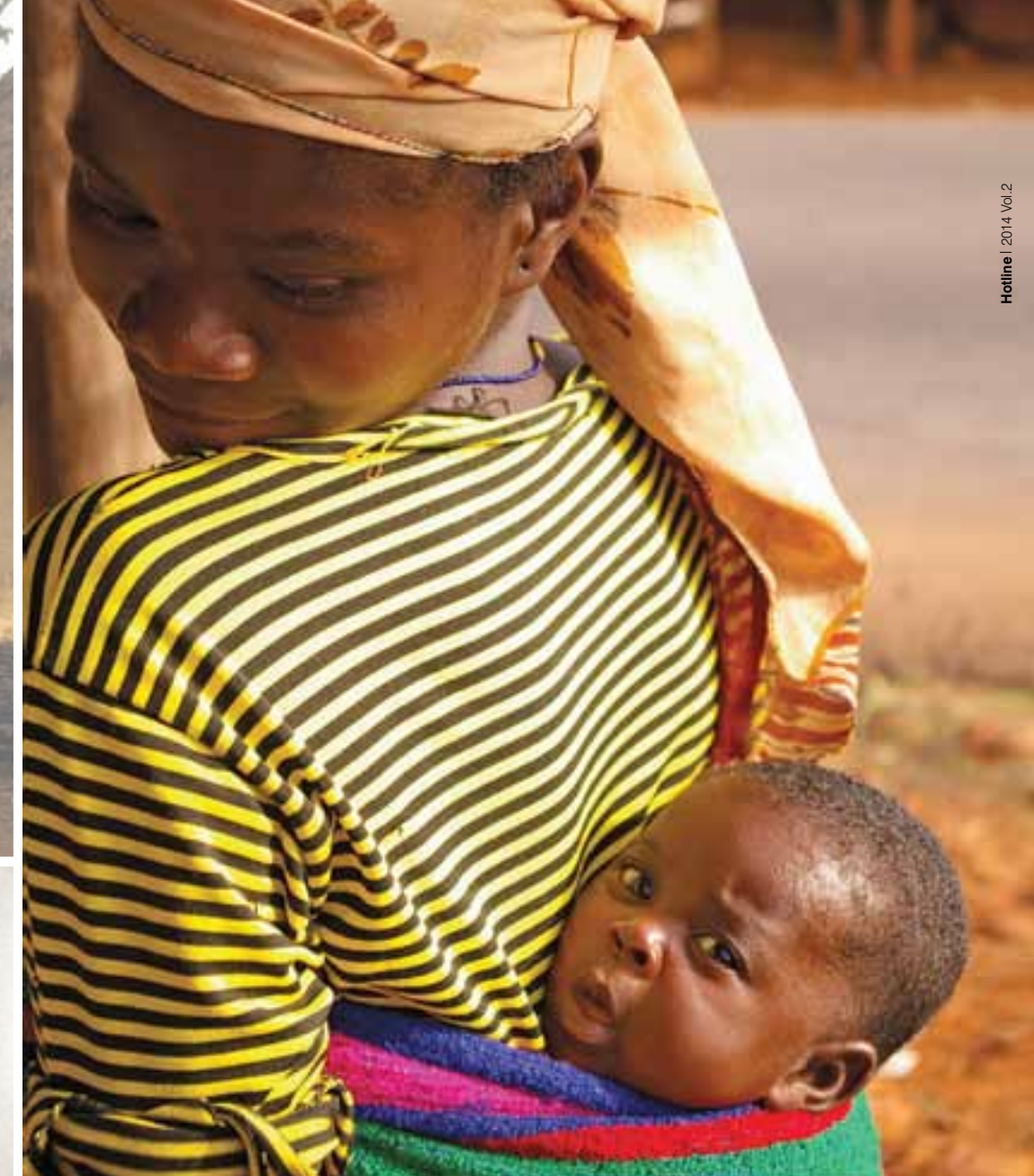
ABOVE:
The Ebola Virus. © CDC Public Health Image Library

OPPOSITE PAGE:
Epauletted fruit bat hanging in a tree



“As Liberia is a low income nation with limited medical infrastructure, and had not had an Ebola outbreak before, there were no Ebola-specific processes in place. Therefore, everyone was caught off guard.”

DR ANDRE WILLEMSE - REGIONAL MEDICAL DIRECTOR, SPECIAL PROJECTS AT INTERNATIONAL SOS



Dr Willemse also worked closely with an internationally-recognised South African physician specialising in Ebola and other viral haemorrhagic fevers. The expert was immediately flown to International SOS' Liberian clinic, where he ensured crucial training for medical personnel was carried out and the right protective equipment and isolation rooms were in place. He also acted as an advisor to both local and major city hospitals, and consulted the Liberian Ministry of Health & Social Welfare.

International SOS wanted to help the communities in the area in any way it could, and a fast response was critical. Shortly after the organisation released its guidelines, Ebola spread to Monrovia, after an infected woman caught a taxi to a hospital in the Liberian capital. Although the urgency of the situation increased, it was essential that everyone remained calm and collected. *“If medical personnel start to panic, they might fail to turn up to work and our high-quality healthcare could be compromised,”* explains Dr Willemse. *“We needed everyone to understand the protocol and feel safe in their working environment, so we coordinated daily calls between International SOS' medical directors and the professionals on the ground.”*

Steadfast communication

International SOS is in constant contact with its 30 clients in the affected areas and provides them with similar guidelines to those provided to medical personnel. A special team is working around the clock to provide the latest information and travel advice on a dedicated website, which is open to the public: internationalsos.com/ebola. *“On our trusted website we have free training materials, the latest news stories, country summaries and FAQs,”* says Dr Quarry. As International SOS continues to experience a large volume of requests for information, special webinars for clients and members all around the world are taking place on a regular basis.

Some client operations are at risk of disruption because employees become increasingly fearful of the situation and are considering leaving. International SOS assists them with dedicated educational materials to address concerns. *“Through regular training and communication sessions, using this developed training material and the presence of the Ebola expert on the ground, we can restore confidence to our clients' employees and help them to continue their work,”* reports Dr Willemse.

Equipped with the right advice and understanding, expatriates are at very low risk of contracting Ebola. The greater risk rests with national employees who may be exposed to the bodily fluids of Ebola victims. However, as a result of International SOS' diligent processes, not a single client or staff member has been infected with Ebola. *“We are well prepared and determined to remain vigilant about the wellbeing of everyone in the affected regions,”* adds Dr Willemse. *“Our clients expect International SOS to lead the way, and we have proven ourselves capable of doing that.”*

Members are encouraged to contact one of the 27 International SOS Assistance Centres if they have any concerns.

Cooperating with leading health authorities

In early August the World Health Organization (who.int/en/) declared the outbreak a “Public Health Emergency of International Concern”, meaning that it is a serious public health event that endangers international populations.

International SOS' medical experts have set up urgent meetings with representatives from the Liberian Ministry of Health and international organisations such as the United Nations, Red Cross, WHO and MSF. In this way, International SOS can align its own client-oriented responses with the country's response as a whole.

As part of the collective effort to contain Ebola, International SOS' guidelines have been made available to the United Nations and other organisations in the affected neighbouring countries.

Industry-leading capabilities

When asked about the key elements of the organisation's response to the West Africa Ebola outbreak, Dr Quarry cites the team's ‘collaboration’, ‘speed’ and ‘comprehensiveness’. Dr Willemse adds that International SOS' network of experts helped to direct its approach to the Ebola outbreak. *“We could immediately add to our existing provisions by just sending an e-mail or two to our friends in the medical field.”*

According to the WHO (as of 17 August 2014), there have been a total of 1,383 confirmed cases

and 760 deaths across Guinea, Liberia, Nigeria and Sierra Leone, and the numbers are still rising.

The key learning International SOS will apply to its ongoing response in West Africa and future epidemics is the need for clear and constant communication. International SOS has taken a lead role in providing timely advice to clients and the wider community in the affected regions, and maintains close contact with the WHO, the US and European Centres for Disease Control and Prevention to stay fully up-to-date with developments.

Ebola has become a new area of expertise for International SOS, joining a long list of other diseases for which it is a globally respected authority.

“International SOS has a strong epidemiology department that is responsible for monitoring disease outbreaks across the world. “It's part of our bread and butter,” says Dr Quarry. *“We provide information and guidelines for all diseases that can affect travellers and expats. We also have special websites for emerging respiratory viruses like bird flu and MERS, as well as Ebola.”*

International SOS' combination of disease preparedness and exceptional network of experts means clients can continue to expect steadfast support when they need it most.

ABOVE, FAR LEFT:
A fast response to these African communities was critical

ABOVE, LEFT:
International SOS' Dr Robert Quigley is interviewed by Today NBC

ABOVE:
Protecting the local population: International SOS developed simple guidelines to educate medical staff and African villagers immediately

THIS PAGE:
People in areas with high levels of air pollution and smog feel they have to wear masks

OPPOSITE PAGE:
International SOS Shanghai facilities and staff

A breath of FRESH AIR?

How International SOS is helping its customers to deal with air pollution and smog in China



In the last 30 years China has undergone rapid economic rebirth and industrial transformation. This process has led to rising prosperity and urban expansion and created a burgeoning middle class. China's emergence as a major player on the world stage – powered by mass industrialisation and energy production – has also been accompanied by less welcome developments: rising levels of smog and air pollution and an increase in respiratory disease, leading to heightened health risks for the hundreds of thousands of expats and business travellers in China and local communities.

Having operated in China since 1989, International SOS has witnessed these changes first-hand. International SOS' operational teams have seen a marked increase in requests relating to the country's air pollution levels, particularly since the World Health Organisation (WHO) classified outdoor air pollution "carcinogenic to humans" in 2013. With a strong network of five clinics, three offices and over 600 staff across the country, International SOS is playing a leading role in providing specific advice and support to its clients and their employees on this and other major health risks. As ever, International SOS specialist teams are working 24/7 to keep people safe and business moving.

How we help

In response to increasing concern about air pollution among client organisations, International SOS issue regular medical alerts and conduct proactive client outreach, including webinars and face-to-face training and information sessions. In addition, there is a dedicated International SOS air pollution website with a strong focus on China and Asia.

International SOS has relocated its Shanghai office to new, larger premises in Yangpu: A fast-developing commercial district gaining popularity among expats and multinationals. Here, state-of-the-art facilities are helping the company's teams deliver vital health messaging and coordinate response activities.

Dr Gordon Peters, International SOS' Regional Medical Director for North Asia, has worked in Asia on and off since 1990. He explains the company's priorities and approach: *"We care about the health and wellbeing of our clients and education and communication are critical. For us it starts with crucial pre-travel advice; then, once the client has arrived, we are in constant contact to update them on local situations, give advice and answer questions."*

In terms of preventative measures, Dr Peters and his team recommend common-sense behaviours that can minimise the impact of air pollution, such as avoiding excess exercise on hazardous days, not taking long bike rides and limiting exposure when pollution levels are high.

"Through simple, sensible actions and behaviour modification, people can dramatically mitigate the risks. There's a lot of panic and media attention surrounding this issue, and people often feel they have to rush out and buy masks and air purifiers. We don't actively recommend these devices, as there's not yet any hard scientific evidence to back up their efficacy, but we do offer some guidance if people are determined they want this."

Additionally, International SOS advises client organisations on their Duty of Care to expat employees in relation to air pollution, and helps formulate and validate corporate plans for dealing with this issue. As air pollution particularly affects those considered medically 'at risk', International SOS recommends that clients' rigorously screen their employees before sending them on assignment.

"Those with previous respiratory complications, or those with children who are predisposed, will be vulnerable if exposed to high air pollution levels," says Dr Peters. "If companies have assignees with severe asthma or conditions such as early onset chronic obstructive pulmonary disease (COPD), we strongly recommend they reconsider their options."

New Shanghai facilities

With double the available floor space as the previous Shanghai office, International SOS' new Yangpu site can accommodate over 100 employees. It is fitted out with state-of-the-art technology, back-office facilities and conference rooms – all designed to help



International SOS look after the health, wellbeing and safety of its members.

"The new office has enabled us to ramp up our services, particularly from a client engagement and communications perspective," says Dr Tim Foggin, International SOS' Deputy Medical Director of Network Partnerships in China. "We're able to coordinate our medical information and host seminars for corporate clients. Being able to bring clients here is hugely beneficial, and so much more impactful than using hotel function rooms. We give talks on air quality, disseminate materials and provide advice on prevention. And the clients get to see our operations up close, which helps to reassure them they're in good hands."

The new Shanghai office is equipped to provide communications and assistance on a multiplicity of health issues, ranging from food and water quality to gastroenteritis, road accidents and rabies. As Dr Foggin explains:

"Air pollution is a concern, but it's one of several key health issues we work to prevent and treat in Shanghai. For example, outbreaks like the H7N9 (bird flu) virus are a recurrent issue, so it's crucial that our clients be on alert and are ready to react if they need to. We run webinars and provide pre-emptive information services, covering pandemic plans or crisis management – whatever we can do to mitigate risk further down the line."

From its specialist hub in Yangpu, the Shanghai team makes use of every available communication channel to deliver timely and relevant information to its members. Through a series of daily email alerts, live-streaming and tailored mobile apps, they help keep people abreast of developing situations and signpost routes to further support via the Assistance Centres.

"Whether it's routine medical advice or emergency guidance, we're available 24/7 to provide the support and help people require," says Dr Foggin. "What's more, with multiple languages spoken on site, there's no fear of critical information getting lost in translation."

And so whatever the smog and visibility levels in China, International SOS' clients have a clear view now of the actions and information they need to discharge their Duty of Care to staff.

WHAT IS AIR POLLUTION?

Air pollution consists of unwanted gases, dust and particles known as 'pollutants' that are potentially harmful to humans. Natural sources of air pollution include sand, wind-blown dust and smoke from fires, while man-made air pollutants arise from industrial and vehicle emissions and certain agricultural processes.

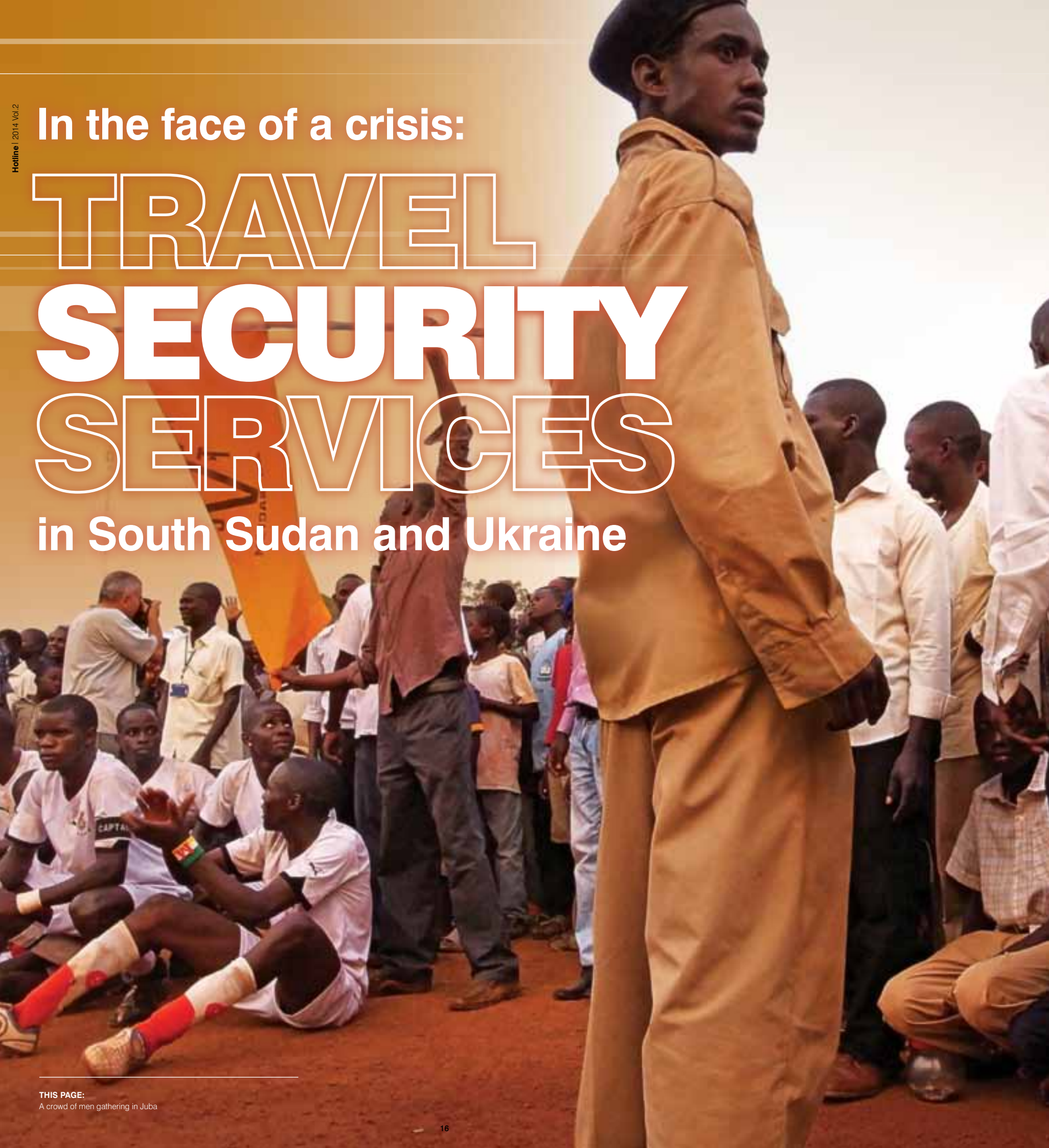
Air pollution in China is reflected primarily in the amount of particulate matter (PM) that is found in the air, the subscript (10 or 2.5) referring to the size in microns of the particles. This measured amount of PM is converted to an Air Quality Index (AQI) which is widely reported. In recent years, the PM (and associated AQI) levels in China's Northern provinces have risen dramatically, creating dense peasouper smog the likes of which has not been seen in Europe for many decades. *"Today in Paris and London", says Dr Gordon Peters, "an AQI of 50-70 is a bad day; yet in Beijing, where I work, an AQI of 120 is a beautiful day."*

And whereas the World Health Organization recommends a safe level of 25 micrograms of PM2.5 per cubic metre, in Beijing in February 2014 this figure hit 505. *"On some days", says Dr Peters, "I can look out of my apartment and see the windows of the hotel 500 metres away. On other days I can't even see the hotel."*

The short-term health effects of air pollution include headaches, eye irritation, coughing, wheezing and shortness of breath, with more extreme cases resulting in cardiovascular disease, lung cancer and low birth weight. It can of course prove fatal, and the World Health Organization estimates that over two million deaths are caused by air pollution globally each year.



For more information on air pollution, go to the dedicated International SOS air quality site:
internationalsos.com/air-pollution/



In the face of a crisis:

TRAVEL SECURITY SERVICES

in South Sudan and Ukraine

THIS PAGE:
A crowd of men gathering in Juba

“The quality of our response in these situations is built on months if not years of background work and analysis. Our knowledge of the history and politics of each country, and the network relationships we build, enable us to understand potential scenarios and to spell out the consequences of certain actions.”

ROBERT WALKER - HEAD OF INFORMATION AND ANALYSIS, INTERNATIONAL SOS AND CONTROL RISKS

On the surface, South Sudan and Ukraine have little in common: one a newly-formed and developing African nation, the other a developed ‘strategic country’ located at the crossroads of Russia and Europe. In late 2013 however, both countries erupted in violence simultaneously after months of simmering political tension, leading to rapidly deteriorating security situations that required swift and decisive interventions from International SOS and Control Risks. In each case, operational requirements and responses were on a scale not seen since the Arab Spring of 2011.

With clients operating in both countries, crisis management teams and medical, security and logistics providers were mobilised to deliver vital assistance. From the provision of timely strategic guidance to the coordination of air evacuations, the actions of International SOS’ and Control Risks’ joint venture helped to ensure that clients remained safe as the dual crises unfolded.

South Sudan is the world’s youngest nation. Gaining independence in 2011, the country comprises regions that have been riven by political and tribal hostilities for decades. Tensions have often led to violence, although incidents have generally remained localised and without any major escalations. On 15 December 2013 an exchange of gunfire between rival units of the presidential guard in the country’s capital, Juba, suddenly spiralled out of control. Accusations of an attempted coup led to a rapid intensification of fighting, and within days the violence had spread to other parts of the country. Land borders with neighbouring Uganda and Kenya were closed and the only accredited medical provider in Juba was shut down. The closure and reopening of the country’s international airport also led to transport chaos and overwhelming demand for outbound flights.

Monitoring the situation closely, International SOS and Control Risks raised the country evacuation level to ‘STAND BY’ as requests for assistance began flooding in. “We received confirmation of the violence and the first client calls on 16 December,” says Heimo Grasser, Coordinating Security Manager, Middle East and North East Africa (MENE) for International SOS and Control Risks. “It was clear this was far more than a routine outbreak of hostilities, and by 17 December our Dubai

Regional Crisis Management Team had been activated. From our assistance centre in Dubai we liaised with London, Paris, Frankfurt and other international assistance centres to coordinate regional and global resources in anticipation of mass evacuations.”

As the security situation deteriorated, International SOS and Control Risks raised the evacuation level to ‘EVACUATE: NON-ESSENTIAL STAFF’. “The priority,” explains Grasser, “was to evacuate people from Juba and get them to international safe havens in Uganda, Kenya and South Africa. This involved organising chartered flights, commercial flights and transportation to the airport. We also had to relocate people internally from remote rural areas to the capital.”

While the evacuations got underway, International SOS and partner Control Risks sent regular information updates to clients via online and mobile channels. “It was critical that we could deliver reliable information,” says Glen Ransom, Regional Security Analyst for International SOS and Control Risks. “We called upon our accredited on-the-ground provider to help verify intelligence and provide a clear situational picture for our clients. It’s this kind of partnership work that really sets us apart in these situations.”

In the days that followed, the crisis management team delivered 32 security updates, purchased hundreds of mobile airtime minutes for clients in remote locations, and evacuated 237 people from 25 organisations to international safe zones.

“We knew South Sudan was a volatile place”, says Grasser, “but the combination of our country intelligence and quick mobilisation of network resources enabled us to protect people on the ground.”



Escalation in Ukraine

As South Sudan dissolved into political violence, another security situation was unfolding in Ukraine. The second largest country in Eastern Europe, Ukraine is a nation of major 'geostrategic significance', with access to the Black Sea via the Crimea and land borders with Russia, Hungary, Poland and Slovakia, among other countries.

In November 2013, Ukraine's then President Victor Yanukovych, announced his decision to abandon a trade agreement with the European Union. This move sparked mass street protests that would eventually lead to Yanukovych's downfall and the annexation of Crimea by Russia. Throughout late 2013 and early 2014, events moved quickly and unrest spread as clashes between opposition activists, Government troops and pro-Russian forces intensified. In late February, Kiev saw its worst day of violence in 70 years, with at least 88 people killed.

"Ukraine was previously a low-risk, stable destination," says Robert Walker, Head of Information and Analysis at International SOS and Control Risks. "There had been longstanding client interest in the country, good infrastructure and no

real issues for international travellers. But then, after the Kiev protests, all that changed."

With growing uncertainty around Russia's intentions and ongoing violence across the country, clients operating in Ukraine became increasingly concerned for the wellbeing of their employees.

"Our response involved working closely with Control Risks and utilising their providers on the ground," says Walker. "In this way we were able to deliver expert logistical and security support. We monitored the road and air routes out of the country and provided a continual flow of intelligence to ensure clients got the assistance and advice they required."

Through the collaboration of International SOS Assistance Centres in Dubai, London, Moscow and Frankfurt, the crisis management team was able to help and advise 107 companies between February and March, delivering 104 situational reports, including six special advisories to support critical management decisions.



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OPPOSITE PAGE:
Mass anti-government protests in Kiev, Ukraine

THIS PAGE:
The House of Trade Unions is set alight during a protest camp on Independence Square in Kiev, Ukraine

Situational preparedness

While the events in both South Sudan and Ukraine happened quickly, International SOS and Control Risks were able to respond swiftly and effectively due to its unique in-country knowledge, resources and preparedness.

"The quality of our response in these situations is built on months if not years of background work and analysis," says Walker. "Our knowledge of the history and politics of each country, and the network relationships we build, enable us to understand potential scenarios and to spell out the consequences of certain actions. We're able to look ahead and see how clients could prepare for situations as they unfold."

Utilising its foresight and preparedness, International SOS and Control Risks were able to anticipate the rapid deterioration of events in Ukraine and South Sudan. In Ukraine especially, the two companies' expertise in political risk analysis meant it was well positioned to respond.

"We've built strong strategic alliances with political and global analysts specialising in countries along Russia's borders," says Walker. "And via our mobile apps, emails and webinars for risk managers operating in the region, we're able to deliver truly world-class guidance and support."

Cutting through the noise

The clarity and neutrality of the information delivered during these crises was essential to the success of International SOS' and Control Risks' operations. In each case, the company used its provider network to cut through the noise and determine which sources of information were credible, as Glen Ransom concludes:

"With our eyes and ears on the ground, we're able to verify intelligence and provide contextual information that is not skewed by commercial media agendas. This means we can give accurate, proportionate and entirely neutral advice, the sole intention of which is to provide maximum value to our clients and keep their people safe."

BREAKING NEW GROUND:

Managing the risk of emerging infectious diseases in the Democratic Republic of Congo

THIS PAGE:
A mining site in the DRC

“The Infectious Disease Risk Assessment Management is all about protecting local communities and looking after our clients’ people, operations and reputations.”

Outbreaks of emerging infectious diseases (EIDs) present a significant public health challenge. Causing widespread human suffering and community devastation, EIDs also pose major problems for individuals and organisations working in affected areas (typically resource-rich ‘tropical hotspots’ in the developing world), leading to disrupted operations and productivity losses.

To help manage the risk of EIDs in the Katanga Province of the Democratic Republic of Congo (DRC), International SOS is taking part in a multi-stakeholder initiative focusing on the extractive industry. Providing expert fieldwork coordination, project management and client liaison, International SOS is helping assess and prevent the impact of EIDs. This work enables the local mining companies to carry out their Duty of Care to employees and host communities.

The Infectious Disease Risk Assessment Management (IDRAM) initiative is an EID project led by the Centre for Global Health Security at Chatham House in London, with funding from USAID – the US Government agency that works to end extreme global poverty. The initiative is part of USAID’s Emerging Pandemic Threats program (EPT), which aims to pre-empt or combat at their source EIDs of animal origin that pose a threat to human health.

Approximately 75% of new human infectious diseases are thought to be linked to animal sources, and as mining companies push deeper into ‘animal habitats’ in the developing world they are increasingly coming into contact with EIDs such as rabies, cholera and haemorrhagic fevers. Indeed, certain research suggests that the socio-economic and environmental changes associated with extractive industry operations (e.g. land clearance, road development, labour camp construction and workforce immigration) alter the equilibrium between wildlife and human populations. This could facilitate the spread of disease, with

2% of all EID events since 1940 taking place specifically among mining companies or their host communities.

Over the years, many mining companies – and particularly those in Katanga Province – have demonstrated their commitment to strengthening local health system capacity and carried out impact health assessments (HIA) of their operations, as well as financed Corporate Social Responsibility (CSR) programmes to tackle infectious diseases. And in Katanga, the majority of resource companies adhere to the International Finance Corporation (IFC) Sustainability Framework and actively support the achievement of the Millennium Development Goals (MDGs). The 2014 Ebola crisis in West Africa (see pages 10-13 for more information) has demonstrated that despite such efforts EIDs can still have a devastating impact locally and pose major threats to extractive industry personnel and activities.

As Francesca Viliani, International SOS’ Head of Public Health Consulting Services and Community Health Programs, explains:



“We need to understand the potential for disease prevention and transmission reduction – which will help inform future responses to any large-scale outbreaks, should they occur.”

FRANCESCA VILIANI - HEAD OF PUBLIC HEALTH CONSULTING SERVICES AND COMMUNITY HEALTH, INTERNATIONAL SOS



“EID outbreaks and associated morbidity result in losses on all levels. Number one, there’s the potential tragic loss of human life. Then there are other associated impacts such as quarantines or isolation measures, plus extensive and costly decontamination procedures, all of which can contribute to operational disruptions and corporate reputational damage. So it’s crucial we understand how vulnerable people are to the threats, and whether there’s a risk of foreign workers transmitting these diseases back home. That’s why we’re involved in the IDRAM initiative, which aims to assess and reduce risk vulnerability and address business continuity issues. We saw what happened earlier this year as Ebola spread through Guinea, Liberia and Sierra Leone; neighbouring countries like Mali and Senegal closed their borders and mining ground to a halt. IDRAM is all about protecting local communities and looking after our clients’ people, operations and reputations.”

Fieldwork testing and toolkits

As a core member of the IDRAM initiative, International SOS has been enlisted to coordinate the pilot fieldwork project in Katanga and provide a vital interface between the mining companies, the provincial health and veterinary authorities, the University of Lubumbashi and various research teams. As medical services provider to many of the mining companies in Katanga, one of International SOS’ main tasks is to help test ‘vulnerability toolkits’ that were developed over the last three years to enable resource companies to examine their potential exposure to disease. In this way, International SOS will be assessing whether previous EID work carried out in the area is fit for purpose, and whether additional benefits can be extended to their clients in the field.

“The tools we’re looking at were developed by subject matter experts but never tested in a real life situation,” says Viliani. “Our task now is to bring all interests together and ensure that the recommendations are feasible and implementable and that everybody can be better protected and prepared to respond if needed. With our knowledge of the mining sites in Katanga and our good relationships with the multiple parties involved – NGOs, private companies, local leaders – we’re well placed to oversee this project and ensure it runs smoothly and scientifically.”

The testing will involve an in-depth qualitative study of EID risk perception in Katanga, including interviews with mining companies to understand how prepared they are for a potential outbreak.

“We need to understand the potential for disease prevention and transmission reduction,” says Viliani, “which will help inform future responses to any large-scale outbreaks, should they occur. Armed with this information, we can start to expand the current programmes beyond malaria control to address the full spectrum of EIDs for the benefit of our client organisations, local people and the extractive industry as a whole.”

Political interest and support

The IDRAM initiative in the DRC got underway in April 2014, when Francesca Viliani (acting as Project Director), Dr Myles Neri (International SOS Medical Director and member of the Project Steering Group) and Dr Paul Mawaw (Senior Doctor at International SOS DRC and Project Field Manager) presented the project to the Governor of Katanga.

“The Governor was hugely supportive from the outset,” says Dr Myles Neri. “He’s behind us 100% and has

committed to present the IDRAM project at the Africa Down Under Conference in Perth in September 2014.”

Additionally, interest from DRC’s Ministry of Health has provided a wider national dimension and increased project momentum, as Dr Neri explains:

“There’s a real opportunity in Katanga to leverage the mining companies’ CSR efforts, their past collaborations with NGOs, as well as regional and national government support, and make IDRAM an exemplar project for the extractive industry. International SOS is privileged to manage a global health project of this importance on behalf of USAID and to support our mining company clients. Managing the risk of emerging infectious disease and outbreaks is a vital part of their commitment to assist the public health infrastructure of Katanga province and protect their host communities.”

Indeed, by developing collaborative dialogue and robust health and risk mitigation strategies, International SOS’ work in Katanga could pave the way for more EID-orientated projects in other global hotspots, as Francesca Viliani concludes:

“We’re looking at what mining companies can do to monitor and prevent transmission and how they can enforce behaviour change among their workforce – for example, by avoiding bush meat, which is often a source of disease transmission – with a view to building EID awareness, prevention and best practice into extractive industry culture.”

ABOVE:
A International SOS clinic site in DRC

OPPOSITE PAGE, RIGHT:
Workers on a mining site

OPPOSITE PAGE, TOP RIGHT:
Local children near a mining site in Katanga