

WMU STUDY ABROAD GROUP SAFETY PLAN

This safety plan is designed to help international travelers develop mitigation strategies for health, safety, and security risks.

The United States Department of State issued a new travel advisory system in January, 2018. Under the new system, every country, and in some cases specific locations and regions within countries, will have a Travel Advisory, providing levels of advice ranging from 1-4:

- **Level 1 Exercise Normal Precautions:** This is the lowest advisory level for safety and security risk.
- **Level 2 Exercise Increased Caution:** Be aware of heightened risks to safety and security.
- **Level 3 Reconsider Travel:** Avoid travel due to serious risks to safety and security.
- **Level 4 Do Not Travel:** This is the highest advisory level due to greater likelihood of life-threatening risks.

WMU Study Abroad will not authorize students to travel to countries at Level 4. Individuals and faculty-leaders who wish to travel to countries at Level 3 (or to countries at Level 2 with Level 3 locations and areas within) must submit this form to Dr. Lee M. Penyak, WMU Director of Study Abroad, after which it will be reviewed by members of the WMU International Security Health Advisory Counsel to determine if travel may occur. Individuals and faculty directors going to Level 1 countries or to Level 2 countries (without Level 3 areas within the country) do not need to submit this form.

This form is due 4 months prior to program start date.

Program Start Date:

Travel Group Information		
Submitter's Name:	Submitter's Email:	
Submitter's Daytime Phone Number:	Submitter's Organizational Role:	
Group Leader's Name (if different than submitter's name):	Group Leader's Email:	
Group Leader's Phone Number:	Group Leader's Affiliation:	
Type of Project/Experience:		
Group & Program Name – Provide the name of your group/department and the name of this experience:		

Program End Date:

List all countries and cities, and arrival and departure dates for each destination:

	Country	City	Department of State Travel Advisory Number	Arrival Date	Departure Date
1.					
2.					
3.					

Questionnaire 1: Program Details

- **1.** Briefly explain academic relevance and purpose, and provide an overview of planned activities during the program. Include compelling and urgent reasons for engaging in this project at this time.
- 2. Anticipated number of undergraduate students who will travel with this project experience:
- **3.** Anticipated number of graduate students who will travel with this project experience:
- **4.** Anticipated number of travelers who are non-WMU students. Please list their affiliations:

Questionnaire 2: Accommodations and Transportation

1. Accommodations:

List accommodations for each city on your travel itinerary, including in-transit cities. For each entry, list the address and phone number (including country and city codes) if applicable.

	Accommodation Name	Address	Anticipated Arrival Date	Phone Number
1.				
2.				
3.				

Provide a brief overview of the accommodations (hotel, hostel, host family, apartment, dorm, campsite, etc.), including how they were chosen and/or vetted for safety and security.

(etc.			
3. \	Will the group leader b	oe driving students du	iring any portion of the program?	
	Yes	No		
Que	estionnaire 3: Er	mergency Suppo	ort, Contact Information, and In-	
Cou	ıntry Communic	ation Plan		
For	each of the following	items, please indicate	whether that step has been completed:	
-	•		J.S. Embassy or Consulate (<u>www.usembassy.gov</u>)	
	for each destinatio		Fuch a soul Consollate Additions	
1	Country	City	Embassy/Consulate Address	
1.				
2.				
3.				
	2. Have you enrolled	in the STEP program ((step.state.gov/step)?	
	Yes No			
3	3. Have you collected	Embassy or Consulat	te contact information for any non-U.S. travelers?	
	Yes	No		
4	_		quivalent number for police, fire, and ambulance	
	geobluetravelinsur		<u>students-abroad/pdfs/911_ABROAD.pdf</u> or <u>www.</u>	
	Country	City	911 Emergency Equivalent Number	
1.		-		
2.				
3.				
Ľ.				

Describe the inter-city and intra-city transportation methods for each location on your itinerary, including transportation to and from the program site. Types of transportation include walking, public bus, night bus, taxi, chartered vehicle/personal driver, train, plane,

2. Transportation:

5	• Write the name, address, and phone number of the nearest GeoBlue facility for each site
	location (<u>www.geobluetravelinsurance.com/</u>):

	Site Location	Nearest GeoBlue Facility (Name and Address)	Phone Number
1.			
2.			
3.			

If the nearest GeoBlue facility is more than an hour away from your work and/or living site, list the name and address of the nearest medical facility to the site(s):

	Site Location	Nearest Medical Facility (Name and Address)	Phone Number
1.			
2.			
3.			

6. In-Country Partner, Your company, or Host Organization:

If applicable, provide the name of your in-country partner, host organization, and/or placement agency. Please list all partners if there are more than one.

7. On-site Support Resources:

Describe on-site health, safety, and security support resources and services that are provided by your on-site host or others, if applicable. For example, on-site orientations, familiarization tour of the area, accompaniment of staff (if so, how often?), after-hours emergency number, local clinic, evacuation services, emergency protocols, etc.

Group On-Site Information

1. Group Leader Primary Local Mobile Phone Number – Group leaders are encouraged to have a mobile phone number that will work in all travel destinations. If the number is available at this time, please provide the phone number (include country code + city/area code).

If the number is not know at this time, please describe how and when the group leader will obtain a working cellphone. Please note that the group leader will need to email the respective area specialist in WMU Study Abroad with their phone number once available.

2.	Secondary Local Phone Number – Please list a second number, if available, where the group can be reached while abroad. This can be a co-leader's number, a landline, or the number of a partner who will know the group's whereabouts (include country code + city/area code).
3.	How can you be reached in the event of an emergency using other media (Facebook, Twitter, WhatsApp, etc.)? If you list social media, please list your username or other means of identification.
Co	mmunication Plan
1.	What is the in-country communication plan between the group leader and the group members? With your local contacts/hosts? In the event of an emergency? If the group anticipates being away from regular email or phone contact, please describe how you will overcome such challenges.
2.	Emergency <i>on-site</i> contact person(s) and number(s) (include country + city code). This can be a member of a partner organization/s, a personal contact, or anyone that a participant or WMU can contact in the event of an on-site emergency.
3.	WMU Communication Plan – What is the communication plan with the group's WMU Study Abroad Specialist? Please note contact should include a minimum of a check-in when the whole group has arrived on-site and a check-in email every Monday to the Study Abroad Specialist. If the group anticipates not having access to email or phones, please describe how you will overcome such challenges.

Risk Mitigation:

Risk Assessment:

Risk Mitigation:

Risk Assessment:

Risk Mitigation:

Risk Assessment:

Risk Mitigation:

D. Natural Disasters – Earthquakes, floods, landslides, etc.

etc.

and quality, etc.

Qu	estionnaire 4: Country Specific Health, Safety, and Security
1.	Travel Risk Assessment and Mitigation – For each of the following, please provide information on specific risks in the first box and strategies of how you intend to mitigate each risk in the second box. Consult these resources to supplement your prior knowledge when identifying these risks:
	U.S. Government Sources – <u>CDC</u> , <u>OSAC Crime and Safety Reports</u> , <u>OSAC</u> , <u>U.S. State</u> <u>Department Travel Warnings</u> , <u>U.S. State Department Country Profiles</u> Other Sources – <u>GeoBlue Insurance</u>
	A. Ground Transportation – Safety on highways, travel on mountain roads, night travel, public transportation concerns, etc.
	Risk Assessment:

B. Health Concerns – Immunizations needed, diseases, water quality, on-site medical access

C. Forms of Harassment – Gender inequality, nationality, race, religion, sexual orientation,

	E. Personal Safety – Fear of bodily harm, terrorism, violent crime, kidnapping, theft, safety issues in housing, etc.	
	Risk Assessment:	
	Risk Mitigation:	
	F. Political Unrest – Upcoming elections, history of demonstrations, political instability, etc Resource: <u>www.electionguide.org</u>	Ξ.
	Risk Assessment:	
	Risk Mitigation:	
	G. Risky Activities – High altitude, physical activity, swimming, traveling to unstable/travel restriction areas, etc.	
	Risk Assessment:	
	Risk Mitigation:	
	H. Other (Please Describe) – Project involves working with human subjects, photographing people, interviewing individuals in their homes, using expensive equipment, etc.	5
	Risk Assessment:	
	Risk Mitigation:	
2.	/accinations – Have you consulted the CDC's recommended vaccinations for each destination on your itinerary?	
	Yes No	
	Please note that Sindecuse Health Center can provide vaccinations, recommendations, and Fravax reports for travelers.	

3.		ountry is not primarily English-speaking, explain how your rs, i.e., level of language proficiency of the group leader g translator, etc.
4.	i.e., experience leading student tra	rience – Describe the group leader's leadership experience, evelers in a domestic context, international context, es, responding to conflict/emergencies, etc.
5.		st previous travel destinations including estimated time n the destinations listed on this itinerary:
6.		ng – Before departure, will the group participate in one or ainings to prepare for logistical, cultural, and safety issues
	Yes	No
7.	a minimum of group rules/expecta mitigation strategies, local suppor	up participate in an on-site orientation that will cover ations, emergency health, safety, and security risks, t resources, WMU resources including support for sexual tion plan, and emergency response plan?
	Yes	No
8.	Debrief Activities, Reports, and Evand/or team meetings, in addition	valuation – Will the group participate in on-site debrief to the on-site orientation?
	Yes	No