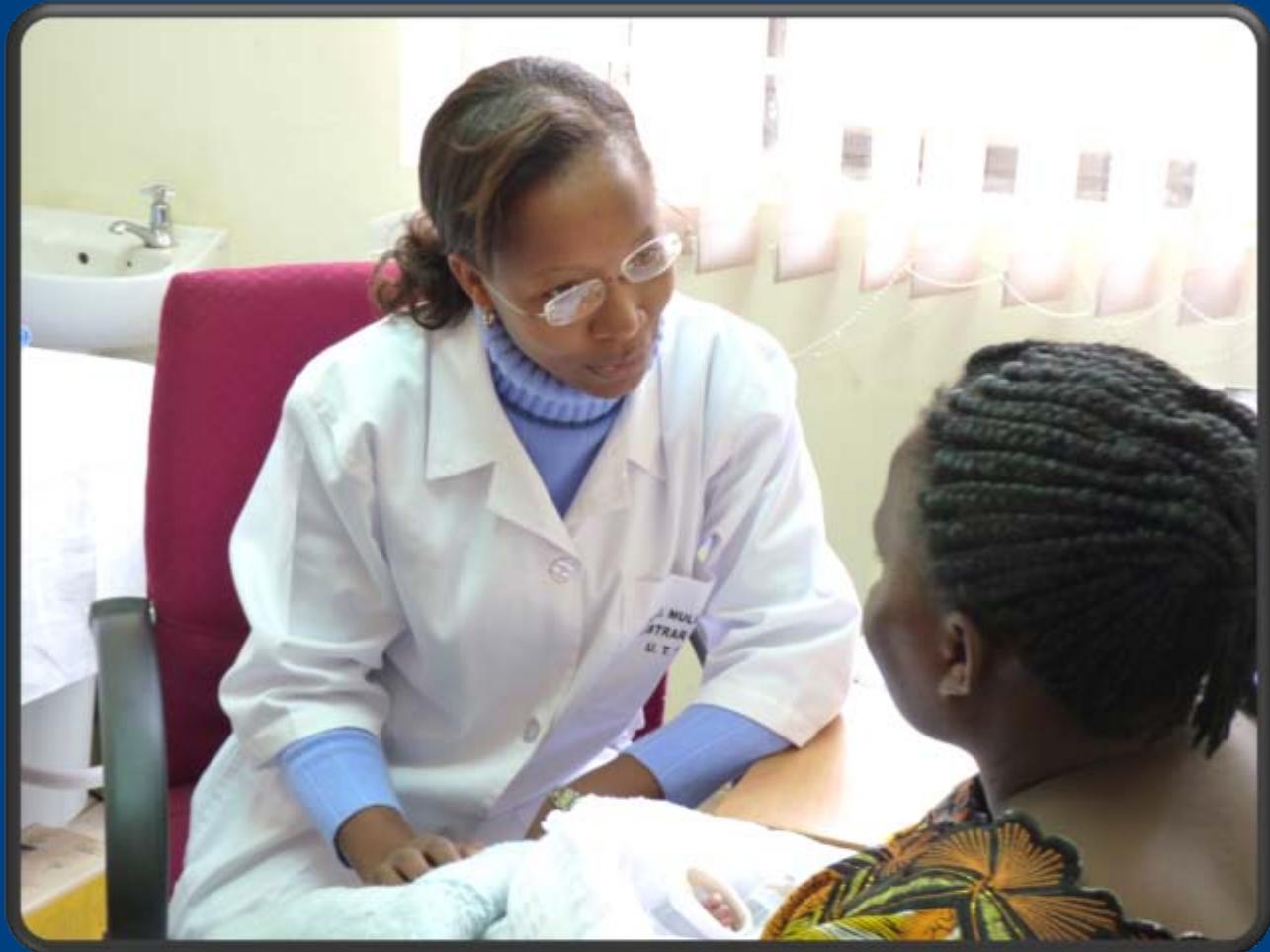




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Vanderbilt Institute for Global Health

# Zambia Travel Handbook



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James Carlucci, VUSM '09 during his Emphasis project in Zambia.

# Introduction to Zambia

The Republic of Zambia is a landlocked country in Southern Africa, neighbored by the Republic of Congo to the north, Tanzania to the northeast, Malawi to the east, Angola to the west, and Mozambique, Zimbabwe, Botswana and Namibia to the south. Located in south-central Zambia, the capital city of Lusaka contains the majority of the country's population, but many people are also concentrated around the Copperbelt Province to the northwest.

Originally inhabited by the Khoisan people, the region of modern Zambia was colonized during the Bantu expansion of the thirteenth century. After visits by European explorers in the eighteenth century, Zambia became the British colony of Northern Rhodesia towards the end of the nineteenth century. For most of the colonial period, the country was governed by an administration appointed from London with the advice of the British South Africa Company.

On 24 October 1964, the country declared independence from the United Kingdom and was renamed Zambia after the Zambezi River, which flows through the western region of the country and forms its southern border. Then-prime minister Kenneth Kaunda became the inaugural president, and Kaunda's socialist United National Independence Party (UNIP) maintained power from the 1964 until 1991. From 1972 to 1991, Zambia was a single-party state with the UNIP as the sole-legal political party, with the goal of uniting the nation under the banner of 'One Zambia, One Nation'. Frederick Chiluba of the Social-Democratic Movement succeeded Kaunda for Multi-Party Democracy in 1991, during which the country saw a rise in social-economic growth and increased decentralization of government. Chiluba selected

Levy Mwanawasa as his successor; Mwanawasa presided over the country from January 2002 until his death in August 2008, and is credited with initiating a campaign to reduce corruption and increase the standard of living. After Mwanawasa's death, Rupiah Banda presided as acting president before being elected president in 2008, and held office for only three years. Patriotic Front Party leader Michael Sata defeated Banda for presidency in the 2011 elections.

About 68% of Zambians live below the recognized national poverty line, with rural poverty rates standing at 78% and urban rates at 53%. Zambia ranked 117th out of 128 countries on the 2007 Global Competitiveness Index, which looks at factors that affect economic growth. Social indicators continue to decline, particularly in measurements of life expectancy at birth (about 40.9 years) and maternal mortality (830 per 100,000 pregnancies). The country's rate of economic growth cannot support its rapid population growth or the strain from HIV/AIDS-related issues (overall prevalence of HIV among adults is about 13.5%; this rate is closer to 20% in Lusaka).

The Zambian economy has historically been based on the copper mining industry, but the government is pursuing a diversification program to reduce the economy's reliance on this single industry, including promotion of agriculture, tourism, gemstone mining, and hydropower.

from <http://en.wikipedia.org/wiki/Zambia>



## Weather

**Dry Season:** May to October (temperatures drop at night, but landscape is green and lush)

**Hot Season:** October to mid-November (best time to see wildlife as flora is sparse)

**Wet Season:** mid-November to April (ideal for bird-watching)

Daytime temperatures may range from 23° to 31° C (73–88° F), dropping at night to as low as 5° C (41° F) in June and July. Lusaka, at 1,250 m (4,100 ft), has an average minimum of 9° C (48° F) and an average maximum of 23° C (73° F) in July, and an average minimum of 17° C (63° F) and maximum of 26° C (79° F) in January.



## Money

Zambia's unit of currency is the kwacha (k), sometimes listed as 'ZMK' or 'kw'. At the time of this manual's publication, 1 USD ≈ 5.2 ZMK. In January 2013, the Zambian currency changed and the value of the kwacha dropped 3 zeros (for example, what was 5200 ZMK is now equal to 5.2 ZMK).

## Language

**Official language:** English

**Seven local languages:** Bemba (Luapula, the Copperbelt, and Muchinga, Northern, and Central provinces), Nyanja (Eastern province and Lusaka), Lozi (Western province), Tonga (Southern and Central provinces), and Kaonde, Luvale, and Lunda (Northwestern province). These seven languages are used, together with English, in early primary schooling and in some government publications.

**70+ dialects**

## **Religion**

**Protestant:** 67.8%

**Catholic:** 21.0%

**Other Christian:** 8.7%

**Other or Non-Religious:** 2.5%

Officially a Christian nation according to the 1996 Constitution; largest percentage of Seventh-Day Adventists per head in the world; approximately 1% Muslim (mostly living in urban areas)

## **Government**

Representative democratic presidential republic

**President:** Michael Sata

**Vice President:** Guy Scott

**U.S. Ambassador:** Mark C. Storella

**Next presidential election:** October 2016

## **Population**

**National:** 14.3 million

**HIV + National:** 13.5%

**Lusaka:** 2 million

**HIV + Lusaka:** 20%

## **Public Holidays**

**January 1:** New Year's Day

**March 12:** Youth Day

**Good Friday**

**Easter Monday**

**May 1:** Labour Day

**May 25:** African Freedom Day

**July 4:** Heroes' Day

**July 5:** Unity Day

**August 1:** Farmers' Day

**October 24:** Independence Day

**December 25:** Christmas Day

## **Reference Books**

**Bradt Travel Guide – Zambia.** Author Chris McIntyre, 2012. Available from Amazon.com and other online retailers

**Lonely Planet – Zambia & Malawi.** Authors Alan Murphy and Nana Luckham, 2010. Available from Amazon.com and other online retailers

**Global Health Training in Graduate Medical Education: A Guidebook,** 2nd Edition.

Available from the Global Health Education Consortium

## **Online General Information**

**US State Department:** [http://travel.state.gov/travel/cis\\_pa\\_tw/cis/cis\\_1062.html](http://travel.state.gov/travel/cis_pa_tw/cis/cis_1062.html)

**CIA fact book:** <https://www.cia.gov/library/publications/the-world-factbook/geos/za.html#>

**Wikipedia:** <http://en.wikipedia.org/wiki/Zambia>

**Lonely Planet:** <http://www.lonelyplanet.com/zambia>

## **Online National Newspapers**

**The Post Online:** <http://www.postzambia.com/post-index.php?page=home>

**Zambia Daily Mail:** <http://www.daily-mail.co.zm>

**Times of Zambia:** <http://www.times.co.zm>

**Lusaka Times:** <http://www.lusakatimes.com>

# Learning Objectives for International Rotations

## Patient Care

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1. Acquire accurate and relevant history from the patient in an efficiently customized, prioritized, and hypothesis driven fashion.
2. Obtain relevant historical subtleties that inform and prioritize both differential diagnoses and diagnostic plans, including sensitive, complicated, and detailed information that may not often be volunteered by the patient.
3. Routinely identify subtle or unusual physical findings that may influence clinical decision making, using advanced maneuvers where applicable.
4. Develop prioritized differential diagnoses, evidence-based diagnostic and therapeutic plan for common inpatient and ambulatory conditions specific to the region of practice.
5. Make appropriate clinical decisions based upon the results of common diagnostic testing used in the international practice setting.
6. Recognize situations with a need for urgent or emergent medical care including life threatening conditions.
7. Provide appropriate preventive care and teach patient regarding self-care.
8. With minimal supervision, manage patients with common clinical disorders specific to the practice setting seen in the practice of inpatient and ambulatory general internal medicine.
9. Manage patients with conditions that require intensive care.
10. Customize care in the context of the patient's preferences and overall health.

## Medical Knowledge

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1. Demonstrate sufficient knowledge to evaluate common ambulatory conditions seen in the practice setting.
2. Demonstrate sufficient knowledge to provide preventive care.
3. Demonstrate sufficient knowledge of socio-behavioral sciences including but not limited to health care economics, medical ethics, and medical education in the region.
4. Understand indications for and basic interpretation of common diagnostic testing used in the international practice setting.

## **Practice-Based Learning and Improvement**

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1. Appreciate the responsibility to assess and improve care collectively for a panel of patients in the specific practice setting.
2. Access available medical information resources to answer clinical questions.
3. Actively seek feedback from all members of the health care team.

## **Systems-Based Practice**

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1. Recognize health system forces that increase the risk for error including barriers to optimal patient care specific to the international practice setting.
2. Seek to understand reasons for the differences between health care practices in various settings, including resource limitations, differing disease epidemiology, external validity of available evidence, and cultural norms.

## **Interpersonal Communication Skills**

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1. Effectively use verbal and non-verbal skills to create a therapeutic relationship with patients/families.
2. Actively seek to understand patient differences and views and reflects this in respectful communication and shared decision-making with the patient and the healthcare team.
3. Effectively communicate with other caregivers in order to maintain appropriate continuity during transitions of care.
4. Engage in collaborative communication with all members of the health care team.

## **Professionalism**

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1. Provide service and leadership within a team that respects patient dignity and autonomy.
2. Understand and respect cultural and professional differences between the U.S. and the international practice setting.

# Vanderbilt in Zambia

## **Center for Infectious Disease Research in Zambia (CIDRZ)**

CIDRZ was cofounded in 2000 by Dr. Sten Vermund, Director of the Vanderbilt Institute for Global Health. Located in Lusaka and internationally acknowledged as a leader in HIV/AIDS treatment and research, maternal-child health care and studies, and cervical cancer, malaria and tuberculosis practice, CIDRZ has remained rooted in local community health care while becoming a world-renown resource for infectious disease understanding and breakthroughs. A three-pronged approach brings both short and long term solutions:

- **Clinical Care** is given to patients, using the highest quality services and practices;
- **Research** is conducted using international standards, but always informed by local practice;
- **Training** is ongoing, increasing the level of knowledge and understanding of both African and expatriate doctors, as well as researchers and health workers.

For more information, visit <http://www.cidrz.org>.

## **University of Zambia (UNZA)**

Founded in 1966, the University of Zambia (UNZA) is Zambia's largest university with a student population of about 10,000. UNZA is divided into the following schools: Agricultural Sciences, Engineering, Education, Humanities and Social Sciences, Law, Mines, Medicine, Natural Sciences, and Veterinary Medicine. Its main campus—the Great East Road Campus—is on the Great East Road, about 7 km from Lusaka City. UNZA also has the Ridgeway Campus within Lusaka City located at the University Teaching Hospital, which specifically houses students pursuing medical and health science courses.

For more information, visit <http://www.unza.zm>.



**Vanderbilt faculty and UNZA students**

November 2012

## **University Teaching Hospital (UTH)**

The University Teaching Hospital in Lusaka is the largest hospital in Zambia, with approximately 2000 beds and a full range of primary, secondary, and tertiary health and medical services on both an inpatient and outpatient basis. Serving almost 300,000 patients annually, UTH is the national specialty referral center and principle medical training institution for medical students, interns, and postgraduate doctors. UTH has four core departments (Pediatrics, Obstetrics and Gynecology, Medicine, and Surgery) and four supportive departments (Pathology and Microbiology, Radiology, Pharmacy and Physiotherapy). The Cancer Diseases Hospital located within UTH grounds is the only cancer facility in Zambia.

## **Fogarty International Supported Programs**

Through the Fogarty International Global Health Fellows Program, the Vanderbilt Institute for Global Health has paired American and Zambian scholars and fellows to enhance their clinical research skills. The new Global Health Fellows Program has replaced the Fogarty International Clinical Research Scholars and Fellows (FICRS-F) program, but collaborations continue with the UNZA University Teaching Hospital (UNZA/UTH) as a designated training site.

Another Fogarty supported training initiative, the newly awarded Vanderbilt-Zambia Network for Innovation in Global Health Technologies (VZNIGHT), will provide postdoctoral research training in development of malaria diagnostic technologies to assist the Zambian health systems in reaching the objective of a malaria-free country.

## **Vanderbilt-CIDRZ AIDS International Training and Research Program (AITRP)**

For 14 years the VU-CIDRZ AIDS International Training and Research Program (AITRP) has selected Zambian physicians with research potential and supported them as they received graduate degrees. To date, 31 Zambians have received graduate degrees and returned to Africa where they serve in government, international agencies, academic or non-governmental organization positions. Currently, VU-CIDRZ AITRP supports nine Zambian scholars pursuing graduate degrees through Vanderbilt University or distance education courses at the London School of Hygiene and Tropical Medicine. The VU-CIDRZ AITRP collaboration has provided intensive training through in-country workshops on data management, ethics, and grant and manuscript writing. It also supports exemplary researchers presenting their research at international conferences.



**Dr. Ben Andrews and UNZA students**

In addition to supporting AITRP's effort, Vanderbilt's Dr. Benjamin Andrews provides clinical and research mentoring to Master of Medicine students at the University of Zambia (UNZA). Dr. Andrews, Dr. Yusuf Ahmed, MMed Research Coordinator, and the Vanderbilt Institute for Global Health worked with UNZA's Assistant Dean Dr. Selestine Nzala to develop a research methods course, which serves as the cornerstone for more than 15 Master of Medicine program disciplines.

# Zambian Culture

## Greetings

Zambians love to shake hands, and you should oblige them. Holding your right wrist or elbow with your left hand as you shake is a sign of respect. Do not expect a firm handshake as this is considered aggressive; likewise, do not be too firm in yours. Zambians often like to hold hands for the duration of a conversation, which should not be interpreted as anything romantic; they are merely trying to "connect" with you. If you feel uncomfortable, simply pull your hand away.

When meeting a Zambian, even to ask a quick question, you should always say hello and ask how he or she is doing. Properly greeting a Zambian is very important, as they are generally uncomfortable with the Western notion of simply "getting to the point."

Eye contact can be considered aggressive and disrespectful, particularly when children are speaking to elders. You can make eye contact but do not hold it; you can slide your eyes away, but do not face away.

Pointing with the index finger should not be done; it is considered vulgar.

## Respect

Zambians follow a strict patriarchal society—men are afforded more respect than women, and older men are respected more than younger men. However, you might find that a white person, of any gender or age, is granted the most respect of all. A holdover from colonial times, this might make a traveler uncomfortable, but this is largely a Zambian's way of being courteous.

Zambians are a curious people. To a Western mindset, this might be interpreted as unnecessarily staring at you or talking about you in front of you. Be prepared to be greeted by kids yelling "*mzungu, mzungu*" (literally, *white man*) and answer lots of questions about yourself.

## What to Wear

Zambia is a conservative country, and the people dress very professionally in work and school environments. Many men wear suits on a daily basis, and students from grade school to college are not allowed in the classroom unless they are dressed professionally. It is generally unacceptable for men or women to wear shorts. While at work, men should at least wear slacks and a button-up shirt. It is permissible for women to wear pants, but all skirts should be at least knee-length. Women should not wear tank tops or revealing shirts.

Light and neutral-colored clothing is best (khaki, green, and brown), as white clothing gets dusty and dirty quickly. Avoid blue clothing, because tsetse flies are most attracted to this color. *Wearing camouflage and military clothing at any time is illegal for civilians and visitors.*

## **Photography**

It is essential to always ask permission before taking a picture. In general, most Zambians will oblige to have their picture taken if they are asked first. All ethical and confidentiality issues pertinent to photographing patients in a clinical setting should be followed in Zambia as you would in the U.S. or anywhere else.

Travelling to military areas and photographing military facilities, airports, bridges, and other facilities deemed to be of security relevance is prohibited. Often, these sites are not clearly marked and the first notification that a tourist would receive is a police officer demanding his/her camera disk and/or camera.

You should ask an on-site security guard permission before photographing and buildings or facilities. Exceptions are the CIDRZ, UNZA, and UTH buildings, as it is acceptable to take pictures of the without asking permission first.

## **Traditional Ceremonies**

**Kuomboka:** Kuomboka is a word in the Lozi language, literally meaning ‘to get out of water.’ This ceremony takes place at the end of the rainy season, when the upper Zambezi River floods the plains of the Western Province. The festival celebrates the move of the Litunga, king of the Lozi people, from his compound at Lealui in the Barotse Floodplain of the Zambezi River to Limulunga on higher ground.

**Ncwala:** Each February, the Ngoni people of Zambia's Eastern Province celebrate the first harvest of the year with an Ncwala ceremony. Wearing outfits and headdresses made from animal furs, twelve local chiefs and their best dancers travel to a village called Mutenguleni to perform a warrior dance for the chief.



**Kulamba:** On the last Saturday in August, the Chewa people from Zambia, Malawi, and Mozambique throng their headquarters at the Mkaika palace to pay homage to Paramount Chief Kalonga Gawa Undi. ‘Kulamba’ is a word in the Chewa dialect that means ‘paying homage.’

**Umtomboko:** Held on the last Saturday of July each year, the Mutomboko Festival may attract over 20,000 visitors. The tradition started in its present form in 1971 to mark the tenth anniversary of the installment of Mwata Kazembe XVII Paul Kanyembo Lutaba. The festivities include dances symbolizing the migration of the Luba-Lunda and the conquest of the Luapula valley by the first chiefs.

**Likumbi Lya Mize:** This Makishi ceremony occurs on the last weekend of August each year. The event takes place on both sides of the Zambezi River and has vibrant market stalls where baskets, metalwork, traditional fabric, and carvings can be bought. Masked dances and theatrical performance take place throughout the festival, culminating with a royal Makishi parade for the Chiefs.

## **Staple Foods**

**Nshima:** made from ground maize (corn) flour known locally as mealie-meal, and eaten with a variety of vegetables, beans, meat, fish, or sour milk; similar to ugali/posho of East Africa, sadza of Zimbabwe, pap of South Africa, and fufu of West Africa

**Rape:** a dark green, slightly bitter leaf similar to chard

### **Beans and rice**

**Ifisashi:** dish made from greens and other vegetables in a peanut sauce, usually served with nshima; sometimes meat is added

**Alcohol:** many local lagers are available and relatively cheap (Mosi Lager is the most popular); all wines are imported and a bit more expensive



A typical Zambian meal: nshima, rape, and chicken

# Travel to Zambia

## Flight

Flight tickets to Lusaka can get expensive in the high season (especially U.S. summer and Christmas), and typically range from \$2,000-2,500. Airline offices in Lusaka include South African Airlines, Ethiopian Air, and British Airways. Changes with any other airline have to be managed over the phone or through the travel agent you bought the ticket from, if you used one. In the past, Ethiopian Air has been the most reasonably priced from the U.S., but you can also find some flights through Delta. One of the least expensive ways to get to Lusaka is to take a major airline to Johannesburg, South Africa, and then fly South Africa Airways from Johannesburg to Lusaka. The easiest way to book a flight is on the South African Airways website (<http://www.flysaa.com>).

## Visa

A single-entry visa may be obtained at the port of entry for \$50—**make sure you have this cash in U.S. dollars on hand when you arrive!** Travelers must apply in advance at a Zambian Embassy or consulate for a multiple-entry visa. U.S. citizens who wish to engage in voluntary service in Zambia, even on a short-term basis, are reminded that they must enter Zambia on a business visa. Business visas may be obtained by presenting a letter of invitation from the organization that is sponsoring the volunteer. If you engage in volunteer activities on a tourist visa, you are subject to fines and removal by the Zambian Department of Immigration.

## Visa Extension

Typically, an immigration officer will admit a U.S. citizen for the exact number of days requested, up to a maximum of thirty days. If you do not have definite departure plans, you may want to request admission for thirty days on arrival in the country. If you wish to stay longer than your initial period of entry, you may visit an immigration office in any of the 73 districts to obtain an extension. There is no charge for this service. Avoid using “consultants” who request a fee for what is an otherwise free service. Foreigners are allowed no more than two thirty-day extensions (for a total time of 90 days). If you wish to stay in Zambia for more than three months, you must apply for a National Registration Card (NRC); this blue-colored card for non-Zambians is the equivalent of the standard green-colored NRC carried by Zambian citizens and costs approximately \$10.

## Packing

Mix-ups with luggage happen frequently when traveling to Zambia, and it is not uncommon for your checked suitcase to arrive a day or two after you do. In the event that this happens, be prepared by packing essential items (medications, toiletries, a change of clothes, etc.) in your carry-on bag. A comprehensive packing list for international travel can be found at:

<http://www.tripresource.com/travel-packing-list.htm>

## Passport

Zambian Immigration officials insist that visitors carry the original or a certified copy of their passport and immigration permit at all times. Certified copies must be obtained from the immigration office that issued the permit. If your passport is lost or stolen while you are in Zambia, visit the Zambian Department of Immigration office to apply for a replacement entry permit before attempting to depart the country; there is no charge for this permit.

## **Insurance**

Generally, travel-related insurance coverage on international travel is similar to that described for domestic travel. However, special circumstances such as an extended stay could change the scope of coverage. It is recommended that travelers consult the Office of Risk and Insurance Management to discuss special circumstances and verify insurance coverage prior to international travel. Some countries may be excluded from coverage, so please check with the Office of Risk and Insurance Management (<https://www4.vanderbilt.edu/riskmanagement/travel-policy.php>) to see if a country is included on the travel warning list on the U.S. Department of State's website. If you will be traveling overseas, please contact Melissa Ahler ([melissa.ahler@vanderbilt.edu](mailto:melissa.ahler@vanderbilt.edu)) or Wanda Rogers ([wanda.f.rogers@vanderbilt.edu](mailto:wanda.f.rogers@vanderbilt.edu)) for travel cards and other information regarding Travel Assistance.

Vanderbilt has contracted with International SOS to provide travel assistance and evacuation services for all students, faculty, and staff members traveling internationally on Vanderbilt-related business. All Vanderbilt faculty and staff traveling on behalf of Vanderbilt University should register their travel with International SOS here: <http://www.vanderbilt.edu/vio/>.

## **Registration with Vanderbilt**

To safeguard the well-being of our students, safety protocols have been developed for all students going abroad on VU-sponsored activities. The purpose is to make sure that we have a central repository of all VU students abroad at any one time as well as to make sure that these students (and when applicable, faculty directors) are properly briefed, insured, and otherwise prepared for travel abroad.

All students participating in Vanderbilt sponsored activities abroad are required to register their travel. "Students" includes all undergraduates, graduate, and professional students; "Activities" includes academic programs (group or individual), service projects, internships, athletic competitions, and club activities. To register, visit the Travel Registration webpage on the Global Education Office website at <https://webapp.mis.vanderbilt.edu/studioabroad>.



Zambian flag

## Vaccinations

**Yellow Fever:** Recently, the World Health Organization (WHO) upgraded Zambia on the map of yellow fever from "no risk" to "low risk." The low risk areas are primarily along the border with the Democratic Republic of the Congo (DRC). To date, there have been no reported cases of yellow fever in Zambia and the WHO does not recommend yellow fever vaccination for Zambia.

Furthermore, the Zambian government only requires proof of yellow-fever vaccination if entering from a country where it is endemic, although in one instance, in an apparent scam, U.S. citizen travelers were requested to pay for a vaccination at the border even though they had not been traveling in an endemic zone. However, the South African government may require passengers transiting South Africa on their way to and from Zambia to show proof of having received yellow fever vaccination at least 14 days prior to their arrival in South Africa; those without proof may be turned around at the South African port of entry.

### Other vaccines:

Vaccination or Disease	Recommendations or Requirements for Vaccine-Preventable Diseases
<b>Routine</b>	Recommended if you are not up-to-date with routine shots, such as measles/mumps/rubella (MMR) vaccine, diphtheria/pertussis/tetanus (DPT) vaccine, poliovirus vaccine, etc.
<b>Hepatitis A or immune globulin (IG)</b>	Recommended for all unvaccinated people traveling to or working in countries with an intermediate or high level of hepatitis A virus infection where exposure might occur through food or water. Cases of travel-related hepatitis A can also occur in travelers to developing countries with "standard" tourist itineraries, accommodations, and food consumption behaviors.
<b>Hepatitis B</b>	Recommended for all unvaccinated persons traveling to or working in countries with intermediate to high levels of endemic HBV transmission, especially those who might be exposed to blood or body fluids, have sexual contact with the local population, or be exposed through medical treatment (e.g., for an accident).
<b>Typhoid</b>	Recommended for all unvaccinated people traveling to or working in Central Africa, especially if staying with friends or relatives or visiting smaller cities, villages, or rural areas where exposure might occur through food or water.
<b>Polio</b>	Recommended for adult travelers who have received a primary series with either inactivated poliovirus vaccine (IPV) or oral polio vaccine (OPV). They should receive another dose of IPV before departure. For adults, available data do not indicate the need for more than a single lifetime booster dose with IPV.
<b>Rabies</b>	Recommended for travelers spending a lot of time outdoors, especially in rural areas, involved in activities such as bicycling, camping, or hiking. Also recommended for travelers with significant occupational risks (such as veterinarians), for long-term travelers and expatriates living in areas with a significant risk of exposure, and for travelers involved in any activities that might bring them into direct contact with bats, carnivores, and other mammals. Children are considered at higher risk because they tend to play with animals, may receive more severe bites, or may not report bites.

For more health-related information, visit the CDC's Health Information for Travelers to Zambia page: <http://wwwnc.cdc.gov/travel/destinations/zambia.htm>.

## **Malaria**

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The 2006 national malaria survey indicated there is very little malaria in Lusaka. The risk for malaria in Lusaka is generally low in the places where you will be living and working, though there are seasonal variations. Whether or not to initiate malaria prophylaxis is a personal choice. Many long-term expatriates do not take prophylaxis, although there are risks. CIDRZ does recommend prophylaxis if traveling outside Lusaka (e.g. to game parks). Most formulations are available over-the-counter in Lusaka pharmacies. For those who wish to start, there are basically three choices: Malarone is the best tolerated of the three, but is taken daily and is very expensive. Mefloquine (Larium) requires once a week dosing, but can be associated with sleeping difficulties and nightmares. Doxycycline is the cheapest, but requires daily dosing and can be associated with photosensitivity and esophagitis. If you choose to start, make sure that you begin your prophylaxis in the recommended amount of time before coming to Zambia. Mefloquine and doxycycline are easy to get and inexpensive in country, so you do not have to worry about bringing a large supply. Malaria can be prevented by wearing long sleeves, using insect repellent, and sleeping under a bed net.

## **Airport Taxes**

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All U.S. citizens, except resident diplomats, must pay an airport departure tax which is collected in U.S. dollars. For international flights, this tax is included in the cost of the ticket; the passenger will receive a “no-fee” receipt reflecting this payment. For domestic flights, the passenger pays prior to entering the departure hall.

In January 2011, the National Airports Corporation initiated an additional security charge that must be paid by all departing passengers at the airport, prior to departure. The charge is \$3 per domestic flight within Zambia and \$5 per international flight. Zambian Kwacha and U.S. Dollars are accepted as payment.

## **Don't Bring Benadryl!!!**

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Certain over-the-counter medications such as the anti-histamine Benadryl may not be brought in to the country without permission. The Zambian Drug Enforcement Commission (DEC) has detained a number of U.S. citizens for possession of anti-histamines and over-the-counter medications that contained small quantities of **diphenhydramine**, an active ingredient that is on Zambia's list of controlled substances. **Although unaware of these restrictions, U.S. citizens have been charged with drug-trafficking offenses, had their passports confiscated, and have been jailed.** While government officials have told the Embassy that carrying such over-the-counter medications with a doctor's prescription is permitted, U.S. citizens visiting Zambia should consider leaving such medications behind. When traveling with prescription medications, U.S. citizens should likewise carry a doctor's prescription and ensure that the medication is in its original bottle. A complete list of controlled substances banned in Zambia is available via the U.S. Embassy website at the page 'Living in Zambia.' U.S. citizens carrying any of these banned drugs for medical purposes should contact the Government of Zambia's Pharmaceutical Authority to request advance permission to bring the drugs into the country; you can email the Director General at [pharmacy@pra.gov.zm](mailto:pharmacy@pra.gov.zm). Any U.S. citizen stopped by the DEC for possession of over-the-counter medications should contact the Embassy as soon as possible. Additional information about controlled substances may be found at the Zambian Drug Enforcement Commission website.

# Your Stay in Zambia

## Accommodation

Based on availability, new arrivals are allowed to live for up to four weeks at the CIDRZ Guest House located in Long Acres. This guesthouse is maintained by CIDRZ for new arrivals and short-term consultants only. A discounted rate (roughly \$400 per month) is provided to new trainees over this period. After that, trainees have rented apartments ranging between \$800 – \$1,500 per month in the past; most opt to share housing with roommates to reduce the per person costs.

Many short-term visitors from Vanderbilt have stayed at the Protea Lusaka Hotel (<http://www.proteahotels.com/protea-hotel-lusaka.html>). Adjacent to the Arcades Shopping Center (which includes a grocery store, movie theater, and pharmacy) and a 10-minute taxi ride from UNZA, this hotel has a restaurant, wireless Internet, and send-out laundry service.

## Transportation

Taxis and minibuses are the main modes of transportation, and both are widely available. Taxis are easily accessible to take you to and from the airport. Most taxis are not metered, and it is important to negotiate a price with the driver before leaving for your destination. Use caution when riding minibuses, as the drivers can be unsafe and the vehicles are often very crowded.

## Communication

Pre-paid phone credit and SIM cards can be purchased from four major phone companies (Airtel, MTN, ZamTel, Vodafone), and calling in country and to the U.S. is relatively cheap (international rates are comparable to making calls on Skype or Google phone).

## Electricity

Zambian electricity operates at **220-240 Volts**, whereas most American devices use **120 Volts**. You will need to get a travel adapter (also known as a step-down transformer) that converts your electronic devices to the 240 Volt system, otherwise your gadgets might be ruined. In addition to an adapter, you will also need an outlet converter that will allow your American plugs to fit into Zambian plugs. *Adapters and converters accomplish separate things*, although sometimes you can find devices that do both (like [this](#)).

Most outlets use this type of plug:      You may find these types, although they are less common:



## **Money**

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You can withdraw cash (kwacha) at Barclays and Standard Chartered banks located in major Zambian cities.

Bureau de Changes to exchange dollars for kwacha are available in the airport, Lusaka town, and other major cities.

Tips are only given in restaurants, and 10% is standard.

Do not buy counterfeit, pirated or bootleg goods, even if they are widely available. Doing so breaks local law, and it is illegal to bring counterfeit items back to the United States.