



DESTINATION REPORT

INDIA

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GENERAL OVERVIEW

After over a century under the rule of the British Empire, the Republic of India gained its independence in 1947, with the help of Mahatma Gandhi's nonviolence movement. India is the seventh-largest country in the world and the second most populous, with 29 states, seven Union Territories, and a National Capital Region. Telangana became the newest state in June 2014, with Hyderabad serving as the joint capital of Telangana and Andhra Pradesh for a period of 10 years. India is surrounded on three sides by the Arabian Sea, Bay of Bengal, and Indian Ocean. To the north, India borders Bangladesh, China, Nepal, and Pakistan. India and Pakistan have a long-standing territorial dispute over the Kashmir region.



India has considerable regional variations, ranging from desert in the east to hot humid plains on the western coast. The country has a tropical monsoon climate in the south, which gradually fades into a temperate climate in the north. Some mountains in northern India are permanently snow-capped. India experiences monsoons and heavy rains from the southwest between June and October. The months from December to February are generally cool and dry, and March through May are generally hot and dry. Monsoon rains generally hit the north about six weeks after they arrive in the southernmost parts of the country.

The vast majority of India's 1.25 billion people are Hindu, and it also has the third-largest Muslim population in the world. Hindi is the most widely spoken language and is understood by nearly 41 percent of the population. English is the language of national communication, politics, the military, and commerce. The country has sixteen official languages: English, Hindi, Bengali, Telugu, Marathi, Tamil, Urdu, Gujarati, Malayalam, Kannada, Oriya, Punjabi, Assamese, Kashmiri, Sindhi, and Sanskrit.

SECURITY ASSESSMENT

Security Risk Rating

Moderate

Security Risk Overview

The security environment in India is highly variable. The main risks involve opportunistic and petty crimes. Female travelers should be aware that sexual assault is a major concern in India, including in urban areas. There are a number of regions in India that are restricted for travelers due to an elevated risk of terrorism, low-level insurgencies, banditry, civil unrest, or ongoing international disputes. Travel to Jammu and Kashmir, with the exception of the cities of Jammu and Srinagar and the region of Ladakh, is considered risky due to an unstable security environment.

Infrastructure security is highly variable. Some corporate campuses, airports, and newer infrastructure can be well-engineered and well-protected. However, security declines precipitously on a number of urban roads, all rural roads, some transportation hubs, tourist sites, and poorer areas of the country.

Seismic activity is common in the northern areas of the country. Additionally, India is affected by the monsoon season between the months of June and September.

Terrorism

There is an elevated risk of terrorism in India. Multiple terrorist organizations operate in the country, including Lashkar-e-Taiba (LeT), Jaish-e-Mohammed (JeM), Harakat ul-Jihad-i-Islami (HuJI), and Indian Mujahideen (IM). Foreigners and Western establishments in India have been the targets of terrorist attacks in the past. Western diplomatic missions in India occasionally receive information regarding threats of possible terrorist attacks in the country. On 31 December 2016, the US, UK, and Israel all issued warnings of terror threats to areas frequented by foreigners. Areas in southwest India, resorts, beaches and festivals were listed among those areas where travellers should maintain a high level of vigilance. The US likewise issued a warning about the threat of terror attacks on 26 January due to India's Republic Day, as major holidays have been targeted by terrorists in the past.

LeT and JeM operate in Jammu and Kashmir. LeT, one of the largest and most active groups in South Asia, has links with al-Qaeda and the Taliban and aims to enforce Islamic rule over India. While its main area of operation is Jammu and Kashmir, the group has staged attacks in other areas in the past, including New Delhi, Mumbai, Bangalore, Varanasi, Hyderabad, Kolkata, and Gujarat. The most notable attack attributed to LeT was a series of coordinated shootings and bombings in November 2008 at multiple locations in Mumbai, which left 164 people (including 10 attackers) dead and 300 others injured. JeM has, for the most part, limited its operations within Jammu and Kashmir, with the exception of an attack on the Parliament House in New Delhi in December 2001, which was carried out in coordination with LeT.

HuJI is a Jihadi movement with links to al-Qaeda, the Taliban, and other Islamist groups operating in India, including LeT and JeM. The group aims to enforce Islamic rule by waging war on government forces. It also supports the secession of Jammu and Kashmir in India and its union with Pakistan. HuJI has operated in Jammu and Kashmir and is believed to have a strong presence in western Uttar Pradesh. It claimed responsibility for a bombing at the Delhi High Court in September 2011, which killed 17 people and injured 80 others.

IM is an India-based terrorist group with significant ties to Pakistan. The group's stated goal is to perpetrate terrorist attacks on non-Muslims and to establish an Islamic caliphate in South Asia. Its common methods include multiple coordinated bombings on economic and civilian targets in crowded areas to maximize casualties. IM has not claimed responsibility for any notable attacks since 2013.

Terror warnings and alleged threats occur frequently in India and it is difficult to determine the credibility of such alerts. Indian media outlets tend to be alarmist and often report rumors as fact, which further exacerbates the issue. India's security and intelligence infrastructure continue to remain deficient and resource-constrained in tackling terrorism. As a result, there remains a credible and persistent risk of attacks by militant separatist, Islamist extremist, and communal groups in India. While terror attacks are difficult to predict, further acts of terrorism are possible in major metropolitan areas, especially during high-profile events and during the holiday season between October and January. High-profile events include Republic Day (26 January), Independence Day (15 August), Eid (14 June), and Diwali (7 November). Although the primary target is often government interests and personnel, attacks may occur at restaurants, markets, hotels, religious sites, and public transportation infrastructure.

Border tension between India and Pakistan flared following a terrorist attack at an Indian army base in Uri, close to the Line of Control in Indian-administered Kashmir on 18 September 2016. In response, the Indian government conducted various military strikes against terrorist targets in the Pakistan-controlled territory of Kashmir. Indian ground troops crossed into the territory to destroy six to eight alleged terrorist targets. Connected to the increased tension, the Ministry of Home Affairs issued a one-month terror alert warning for the cities of Delhi, Mumbai, Chennai, and Bengaluru, and for the states of Rajasthan, Punjab, Jammu and Kashmir, Maharashtra, and Gujarat due to credible intelligence of potential terrorist attacks.

Civil Unrest

Demonstrations and general strikes (locally called *bandhs*) occur regularly and often cause disruptions to transportation and tourist-related service. Unrest is frequent in the lead up to elections. Demonstrations that escalate into violence are not uncommon. Most recently, at least 28 people were killed and 250 others injured in massive protests-with crowds of 200,000 people-in Punjab and Haryana on 25 August 2017.

Every year, several hundred thousand people attend religious ceremonies throughout the country. In the past, these ceremonies have occasionally resulted in deadly stampedes. Large crowds have the potential for violence, especially around election season or during Hindu celebrations. Violence against religious minorities, especially Muslims and Christians, is not uncommon. Some states have anti-conversion laws, and those caught proselytizing can be targeted by Hindu extremists.

In addition, India has suffered a number of attacks carried out by multiple insurgent and militant groups in the past. Areas at elevated risk of attacks include:

The "Red Corridor"

The Red Corridor refers to areas in about 13 states spanning from northeast to central and southern India, namely Andhra Pradesh, Bihar, Chhattisgarh, Jharkhand, Karnataka, Kerala, Madhya Pradesh, Maharashtra, Orissa, Tamil Nadu, Uttaranchal, Uttar Pradesh, and West Bengal. The Communist Party of India - Maoist (CPI - Maoist), also known as Naxalites, maintain a presence in these areas. The Maoists strongly oppose development projects, especially those related to

mining, and look to deter domestic and foreign investment in undeveloped areas of the eastern and central states. They typically attack state officials, security forces, and infrastructure (mainly rail and communication).

Northeast India

Several insurgent or militant groups operate in Northeast India, which consists of Assam, Meghalaya, Tripura, Arunachal Pradesh, Mizoram, Manipur, and Nagaland. Although these groups primarily target government forces and interests, attacks can be indiscriminate. An exception to this trend is the United Liberation Front of Asom (ULFA), a separatist group that seeks to establish a sovereign Assam, which has been known to conduct attacks that target both public places and government interests. Nevertheless, foreigners have not been targeted.

Communal violence is also common in Assam, Manipur, and Mizoram.

While the overall security situation in the northeastern region has improved in recent years, there remains an elevated risk of attacks, especially in the states of Manipur and Assam, including their respective state capitals, Imphal and Guwahati.

Jammu and Kashmir

A number of insurgent groups operate in Jammu and Kashmir. These include Hizb-ul-Mujahiddeen (HM), a major separatist group seeking to impose Islamic rule in the state. HM is believed to have a strong association with other militant and terrorist outfits based in Pakistan. It has a strong presence in the Kashmir Valley and in the districts of Doda, Rajouri, Poonch, and Udhampur.

Overall, the level of violence in Jammu and Kashmir has declined in recent years. However, there is still a threat of violence to travelers in Jammu and Kashmir. On 10 July 2017, at least 7 pilgrims were killed and 32 others injured in an unclaimed militant attack in Batengoo. The security environment remains unstable, with the exception of the cities of Jammu (winter capital), Srinagar (summer capital), and the region of Ladakh. Foreigners are rare in this region, and thus are especially visible and at risk of attack.

Personal Security

Most crimes that travelers face are petty in nature. India has seen an increase in opportunistic crimes, such as purse snatching and pickpocketing. Thieves have been known to cut purse straps, or slit the bottom of a purse, in order to rob individuals before they notice. Violent crime directed against foreigners, although uncommon, does occur.

Sexual harassment—which is not explicitly prohibited in Indian law—is common and law enforcement may be unwilling or unable to effectively investigate and prosecute this crime, which remains vastly underreported due to social stigmatization and reports of further abuse during the investigation process. Female travelers should be particularly careful while in India, as harassment and crimes against foreign women have been on the rise. Incidents of sexual assault in New Delhi have doubled over the past year and there has been an increase in all forms of sexual assault—including coordinated attacks by multiple assailants—throughout India. Cases of sexual assault have also been reported in Goa, Bangalore, and Rajasthan. Recent attacks on women have occurred on public buses, taxis, and on the street. Women should avoid traveling alone on public transportation and taxis, especially at night.

Discrimination and violence against lesbian, gay, bisexual, and transgender (LGBT) individuals is common. Moreover, the Supreme Court of India reinstated Section 377 of the Indian Penal Code in December 2013, making same-sex acts a criminal offense that carries a maximum sentence of life imprisonment. Despite the law, enforcement and prosecutions have been extremely rare.

There is an elevated risk of kidnapping in Bihar, Jharkand, Chhattisgarh, Jammu and Kashmir, West Bengal, and Orissa, where a number of active insurgencies are present.

Banditry and lawlessness are problems in the rural northeast. Areas on the border with Pakistan can be extremely unstable in the event of an escalation of tensions or a violent attack from either side. Extremist groups are active in Bihar, Jharkland, Chhattisgarh, West Bengal and Orissa. Attacks in Gorkha Jana Mukti Morcha in Darjeeling and the hills of North Bengal have shutdown transportation networks, disrupted water and electricity supplies, closed private businesses, and curtailed government services.

There are a few active minefields in some of the border areas of Jammu and Kashmir. Due to a heavy military presence and an increased presence of landmines along the border with Pakistan, foreigners are generally advised not to travel within 10 kilometers (6.2 miles) of the border.

Access to the following areas is restricted: Arunachal Pradesh; Mizoram; Sikkim; Manipur; Nagaland; portions of Himachal Pradesh near the Chinese border; portions of Uttarakhand (Uttaranchal) near the Chinese border; portions of Rajasthan near the Pakistani border; portions of Jammu and Kashmir near the Line of Control with Pakistan and certain portions of Ladakh (excluding Leh); the Andaman and Nicobar Islands; the Union Territory of the Laccadives Islands (Lakshadweep); and, the Tibetan colony in Mundgod, Karnataka. A special permit is required to access any of these areas. Foreigners caught in these areas without an official permit can be imprisoned, fined, and deported.

Airline passenger manifests are not confidential in India. Therefore, visitors should be wary of anyone who greets them at the airport or offers extremely cheap transportation. In several cases, these "airport greeters" have taken foreigners to secluded locations before demanding money to bring them back to a major city. These demands are often backed up with an implicit threat of physical violence, and foreigners have been assaulted and injured for refusing to pay. Visitors should pre-arrange a method of identification for persons picking them up at airports, beyond a simple sign with the visitor's name.

Remain vigilant about possible drink and food spiking to avoid becoming a victim of assault, sexual assault, or robbery. Most reports of spiked or excessively strong drinks come from Goa.

Do not take photographs or use binoculars around government buildings, military installations, the police, security forces, or related infrastructure.

Prior permission may need to be obtained from Indian authorities before bringing certain equipment into India, such as satellite phones, listening or recording devices, or binoculars, as foreign travelers have been arrested for failing to do so.

When hiking, only trek on known routes, hire local guides, camp when it gets dark, and travel in large groups. Avoid hiking in parts of the Karkoram Mountains that are claimed by both India and Pakistan, including: Rimo Peak; Apsarasas I, II, and III; Tegam Kangri I, II, and III; Suingri Kangri; Ghiant I and II; Indira Col; and Sia Kangri. Both sides occasionally shell the other's positions in these mountains.

Areas of northern India are susceptible to seismic activity. Srinagar, Himachal Pradesh, Rishikesh and Dehra Dun, the northern parts of Punjab, northwest Gujarat, northern Bihar, and the entire northeast are areas with the highest possible risk of earthquake activity. Delhi, Jammu and Kashmir, Eastern Punjab, Haryana, Northern Uttar Pradesh, central Bihar, and the northern parts of West Bengal are at elevated risk.

Be careful about swimming off the coast of India, especially during the monsoon season. Every year, a number of people in Goa, Mumbai, Puri (Orissa), and other places are swept away in strong currents and drown. Trained lifeguards, rescue equipment, and posted warnings are rare. Additionally, monsoon rains often cause flooding and landslides that can disrupt road or rail travel for days.

Snake bites are particularly common during and immediately after the monsoon season, which generally takes place between June and September. In recent years India has suffered from an anti-snake venom (ASV) shortage and therefore travelers may be required to purchase their own ASV.

Law Enforcement

Police response times, integrity, training, and overall quality varies between different parts of the country. In general, police response times are relatively slow. Crime investigation is a very bureaucratic process which often fails to lead to successful results. Impunity and corruption are problems at all levels of the police forces. Officers, especially traffic police, may expect, request, or demand illegitimate payments for real or imaginary violations of local law or for providing routine services. While they usually target locals, individuals should exercise caution when dealing with these officials. There have been reports of police of sexually assaulting women who are in police custody as well as using torture as an interrogation technique.

Prison and detention center conditions in India are poor throughout the country. Overcrowding, poor sanitation, and a lack of healthcare are common concerns. Arbitrary arrests and detentions both occur in India. Lengthy pretrial detention periods, judicial corruption, and a serious backlog of court cases hinder the Indian justice system. Make every attempt to notify an embassy or consulate in the event of arrest, as authorities may fail to report arrests. Persons arrested in Jammu and Kashmir can be detained for up to two years without charge. Foreigners are rarely granted bail.

Transportation

Air: India is rated Category 1 by the International Aviation Safety Assessment Program (IASA). This means that the country's civil aviation authority has been assessed by IASA inspectors and is found to license and oversee air carriers in accordance with International Civil Aviation Organization (ICAO) aviation safety standards.

Several cities in India, particularly New Delhi, frequently experience heavy fog in the winter, which normally runs from November to February. Such weather conditions occasionally trigger poor visibility, and flight operations may be intermittently disrupted during the season.

Bus: In general, use of public transport in India is not recommended. Buses and trams tend to be extremely crowded and the vehicles themselves may be poorly maintained. Foreigners have reported pick-pocketing and bag-slashing on public buses and crowded methods of transport serve as a magnet for covert property crimes. Bus accidents occur frequently and bus drivers are known to drive recklessly. Women should avoid any travel on buses due to a rise in the number of sexual attacks that have occurred on buses throughout the country.

Strikes have the potential to significantly affect public transportation in the country's urban areas at short notice. Moreover, past terrorist attacks have targeted trains, subways, and their respective stations.

Car: India has one of the highest rates of motor vehicle accident deaths in the world. Roads are often poorly maintained and extremely congested in some areas of the country and local driving practices are generally poor. Vehicles travel on the left side of the road. Larger vehicles have the de

facto right of way on Indian roads. Be prepared to encounter overloaded trucks, motorcycles, animals and carts. Drivers who hit pedestrians or cows may be attacked by passers-by. Seek out the nearest police station if it is unsafe to remain at the scene of an accident.

Foreigners may only drive with a valid Indian license, or an International Driver's license. Travelers can obtain a temporary Indian license if they present a valid national license to traffic police.

Taxi: Use metered taxis or hotel vehicles whenever possible. Agree on a fare with the driver before riding in a non-metered taxi. Do not take taxis alone after dark, and do not allow cab drivers to pick up additional passengers. Only use properly marked taxis, and book through a hotel if possible. Do not get into a taxi if there is an unknown passenger already in the vehicle. If unhappy with the direction in which the taxi is traveling, speak calmly yet firmly to the driver in conjunction with the hand gesture to stop in case there is a language barrier. If there is no positive response from the driver, exit the vehicle at the first opportunity.

Train: Train networks in India are extensive and rail is a relatively inexpensive way to travel across the country. However, due to poor maintenance of tracks and rolling stock, overcrowding, unmanned crossings, and terrorism, India has one of the worst railway accident records in the world.

There are high levels of pickpocketing and theft on these trains. Passport theft is especially common on overnight trains. Do not accept food or drinks from strangers, as reports of foreigners being drugged and subsequently robbed while traveling by rail are common.

Water: There are ferries that travel down India's rivers as well as take travelers to islands located throughout the Indian Ocean. Tour operators may have poor safety standards in India's resort towns, particularly for adventure sports like diving and yachting. They may not observe recommended maintenance standards and safety precautions and may not provide sufficient life jackets or other safety equipment.

Scams, Fraud, Corruption, and Extortion

Pickpockets sometimes distract travelers by dropping money or spilling things on foreigners' clothes in order to surreptitiously rob them. Some scammers ask foreigners to help them transport gems or gold, or to deliver legally purchased goods abroad. Not only is such transportation illegal, but scammers often substitute worthless 'valuables' and request the foreigner leave a deposit for the privilege of transporting them.

Property scams are not uncommon in India, even though many start out as legitimate partnerships. These partnerships involve foreigners agreeing to invest in a project with an Indian investor, only to have the Indian investor make a claim on the entire property or offer to buy out the foreign partner for a sum far less than the foreigner's initial investment. Avoid investing in partnerships with Indian property unless counsel with detailed knowledge of the Indian legal system can be obtained. There have been allegations of similar manipulation of business agreements from persons using Indian surrogacy services. Even with expert knowledge, allegations of bribery in the Indian judiciary are commonplace, and Indian courts have a backlog of over thirty million cases. In some cases family members of visitors to India are contacted in their country of residence, and asked to wire money to a relative who is penniless or imprisoned. Those contacted tend to be older. Relatives should not wire money upon receiving such a request without independently confirming any pecuniary or judicial problems with their home country's embassy to India.

Common scams against foreigners, regardless of destination, include dating and marriage scams, false employment opportunities, and virtual kidnapping for ransom. Do not give out personal

information at all costs, especially bank or credit card numbers.

Corruption of government employees is widespread in India and it has been reported that these officials may expect, request, or demand illegitimate payments from foreigners for real or imaginary violations of local law or for providing routine services. Exercise caution when dealing with these officials.

Security Advice

Be prepared. Make an effort to understand your destination environment before you travel: identify the possible threats and prevailing situation, understand your own vulnerabilities, and take action to mitigate the risks.

Maintain a low profile and good situational awareness. Ensure you travel with reliable communications equipment, test your mobile (cellular) telephone upon arrival at your destination, and keep it fully charged. Make note of emergency telephone numbers, including the police, fire department, ambulance, and embassy or consulate.

Avoid all protests and demonstrations to minimize the risk of exposure to incidental violence. Travelers should walk away or wait inside a shop or restaurant if it is not possible to leave the area. Plan alternate routes to circumvent potential protest locations. Seek the assistance of a local host, or travel with a local driver, where possible.

To minimize the risk of becoming a victim of petty theft, travelers should maintain caution and exercise situational awareness at all times. Avoid overt displays of wealth. If confronted by a criminal, do nothing to antagonize the situation. Carry a "dummy" wallet if possible, and carry a passport photocopy at all times.

Carry handbags on the opposite side from passing traffic to reduce the risk of thieves on motorcycles trying to snatch them.

Avoid walking unless you are confident of the security situation. Do not walk by yourself at night in secluded or troublesome areas of the city. Do not take shortcuts away from main roads, which tend to be busy and provide a safer environment.

National holidays and public festivals tend to attract large crowds in some countries. Such public gatherings, despite a typically enhanced security presence, create a potential venue for disorder or violence. In addition, large crowds may well impede local transportation systems.

Do not buy counterfeit or any goods in violation of copyright laws. Doing so may be a violation of local laws and can carry hefty fines or even prison time.

Reduce risk of injury from car crashes by always wearing a seatbelt. Some countries have heavy fines for not wearing a seatbelt. Avoid drinking and driving. Be sure to travel with all appropriate documentation, including passport and visa photocopies. Individuals who intend on driving should be in possession of their International Driving Permit (IDP), vehicle registration, and proof of insurance at all times.

Travelers are subject to the laws of India, even if they are not a citizen of India. Travelers can also be prosecuted for violating their home country's laws while in a foreign country. Travelers should be aware of the laws and customs of the country they are traveling to in order to avoid prosecution.

HEALTH ASSESSMENT

Health Risk Rating

High

Travel Health Advice

Routine vaccines for preventable diseases, such as measles/mumps/rubella (MMR) vaccine, diphtheria/pertussis/tetanus (DPT) vaccine, chickenpox (or varicella), poliovirus vaccine, etc. are recommended for all travelers.

Prevent against insect bites and insect-borne diseases, such as tick-borne encephalitis or malaria, by using insect repellent and wearing long pants, long sleeve shirts, boots, and hats if possible.

Prevent against foodborne illnesses by avoiding undercooked food and unpasteurized dairy products and washing hands, especially before eating.

Immunizations - Required for Entry

| Immunization | Notes |
|---------------------|---|
| Yellow Fever | Travelers one year of age and older who have passed through an area with a risk of yellow fever transmission must be vaccinated against yellow fever. The yellow fever vaccine should be administered at least ten days before travel. While a booster shot is no longer recommended every 10 years, some countries do not allow certificates of vaccination older than 10 years. |

Immunizations - General

The following immunizations are recommended for travel to all destinations.

| Immunization | Recommendations |
|--------------------------------|--|
| Routine | Routine vaccines for preventable diseases, such as measles/mumps/rubella (MMR) vaccine, diphtheria/pertussis/tetanus (DPT) vaccine, chickenpox (or varicella), poliovirus vaccine, etc. are recommended for all travelers. |
| Hepatitis B Virus (HBV) | Hepatitis B Virus is spread through contact with blood, sexual relations, and contact with contaminated needles. There are several pre-exposure vaccination options available: PEDIARIX (pediatric formulation containing DTaP, HepA/B, and polio vaccines), TWINRIX (three dose HepA/HepB combination series), ENGERIX-B, and RECOMBIVAX HB. The full course of three injections is recommended prior to travel. |
| Influenza (flu) | Influenza is spread between humans through sneezing, coughing, and can be spread by touching objects contaminated with the virus. There are two types of pre-exposure vaccinations available: Trivalent Inactivated Influenza Vaccine (TIV), and Live Intranasal Influenza Vaccine (LAIV). TIV is injected into the upper arm or thigh, and LAIV is administered as a nasal spray. Common TIV vaccines include Afluria, Agriflu, FluLaval, Fluarix, Fluvirin, and Fluzone. Common LAIV vaccines include FluMist. |

Vaccine Preventable Diseases Specific to India

The following are vaccine preventable diseases that are prevalent in India or South Asia.

| Immunization | Recommendations |
|--------------------------------|---|
| Hepatitis A Virus (HAV) | Hepatitis A Virus is found in areas with poor sanitation and poor food and water safety, and can be spread through sexual relations, blood transfusions, and needles. Several pre-exposure vaccination options are available: PEDIARIX (pediatric formulation containing DTaP, HepB, and polio vaccines), HAVRIX, VAQTA, TWINRIX (three dose HepA/HepB combination series), AVAXIM, and EPAXAL. The first injection should be administered before departure and a booster after six months. |
| Rabies | Rabies is spread through the bite or scratch of an infected animal. Vaccination against rabies does not make a person immune to rabies. Those who have been potentially exposed should still seek treatment. Left untreated, rabies can be fatal. A three-dose pre-exposure rabies vaccine is recommended for long-term travelers and those who would be in direct contact with animals. The first dose of the vaccine should be administered at least 21 days before travel. |
| Typhoid Fever | Travelers staying with friends or relatives, or visiting smaller cities, villages, or rural areas have the highest risk of contracting typhoid fever in India. Typhoid fever is spread through the ingestion of contaminated food or water. Individuals traveling to areas where typhoid fever is common should undergo vaccination at least one week before travel. Booster shots are necessary, as the vaccination loses effectiveness over the course of several years. Two forms of the vaccine are available: an inactivated shot, and a live weakened oral vaccine. Resistance to first-line antibiotics has been found in India. |

Health Risks in India

| Health Risks | Details | Recommendations |
|---|---|--|
| Altitude Sickness | Symptoms include fatigue, rapid pulse, dizziness, headache, and nausea. Altitude sickness can be life-threatening. | To avoid altitude sickness it is recommendable to ascend slowly and stay hydrated. Acetazolamide can help reduce symptoms: 125mg, twice a day for three days, beginning on the first day of ascent, or 12 hours prior to beginning ascent. |
| Chikungunya | Chikungunya is endemic to India and is spread during the rainy season through the bite of an infected mosquito. Not all infected persons may exhibit symptoms, but persons may experience sudden joint pain and fever, as well as headache, rash, and vomiting. Cases have been reported in several locations across the country. | There is no vaccine to prevent against chikungunya, but taking proper precautions against mosquito and insect bites, such as applying insect repellent and using mosquito nets, may help prevent against transmission. |
| Crimean-Congo Hemorrhagic Fever (CCHF) | Crimean Congo Hemorrhagic Fever is spread through tick bites, and the contact with infected animal tissue. Infected patients may present fever, sore muscles, dizziness, neck pain and stiffness, backache, headache, sore eyes and photophobia, mood swings, and aggression. After two to four days, symptoms can include a swollen liver, tachycardia, enlarged lymph nodes, and rashes. CCHF can be fatal. Cases were reported in Gujarat in 2013. | There is no effective vaccine against CCHF. To avoid bites, apply a repellent containing DEET to skin and clothing when outdoors, particularly in rural areas. If sleeping outdoors, use a bed net treated with permethrin. Visitors working with livestock or other animals in endemic areas should wear gloves or other barriers to keep their skin from coming into contact with infected animals, as they often serve as hosts for ticks. Seek medical advice immediately if experiencing fever, headache, chills, muscle aches, vomiting, red rash, or bleeding from the roof of mouth. Ribavirin has shown some benefits when used to treat CCHF. Patients infected with CCHF require intensive monitoring, and controlled volume and blood replacement. |

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| Dengue fever | Dengue fever is spread through the bite of an infected <i>aedes</i> mosquito. Symptoms include headache, sudden-onset fever, rash, and joint pain. Cases of dengue fever have been found countrywide, including in urban areas such as New Delhi. Risk of transmission is year-round in the southern region and is elevated between April and November for the northern region. | There is no vaccine to protect against dengue. Prevent against bites by using insect repellent (with 30-50% DEET, or 7-15% Picaridin) and wearing long pants, long sleeve shirts, boots, and hats if possible. Stay indoors in areas with screens and air conditioning, if possible. The risk of being bitten by a mosquito is highest in the early morning, several hours after daybreak, and in the late afternoons before sunset. The <i>aedes</i> mosquito, which carries dengue fever, typically lives indoors in dark, cool places like closets, under beds, bathrooms, and behind curtains, as well as around standing water. |
| Filariasis (Lymphatic) | Filariasis is spread through the bite of an infected mosquito or blackfly. Lymphatic filariasis is present in India; it occupies the lymphatic system, causing a thickening of the skin known as elephantiasis. | There is no vaccine to prevent against lymphatic filariasis. Prevent against bites by using insect repellent (with 30-50% DEET, or 7-15% Picaridin) and wearing long pants, long sleeve shirts, boots, and hats if possible. Stay indoors in areas with screens and air conditioning, if possible. The risk of being bitten by a mosquito is highest in hours between dusk and dawn. Most treatments against filariasis, while successful in killing microfilariae, are partially effective to ineffective in killing adult worms. |
| Hepatitis C Virus (HCV) | Hepatitis C Virus is spread through IV drug use, contaminated needles for tattoos and body piercings, or unsafe medical procedures such as unscreened blood transfusions. Hepatitis C can also be transferred sexually. Transmission is common in Punjab. | There is no vaccine to prevent against Hepatitis C. Travelers are advised to avoid IV drug use and sexual contact with high-risk individuals. Avoid receiving blood transfusions and other procedures that may bring one in contact with contaminated needles, such as tattoos and piercings. |
| Hepatitis E Virus (HEV) | Hepatitis E Virus is typically contracted through exposure to raw or uncooked shellfish, or unclean drinking water. The disease is highly endemic to India. | There is no vaccine to prevent against Hepatitis E. Hepatitis E can be avoided through overall care in sanitation, particularly of drinking water. |
| Hypothermia | Symptoms of moderate hypothermia include shivering, a loss of muscle coordination, confusion, paleness, and blue extremities. | To prevent hypothermia, carry warm, waterproof garments to layer on in the case that there is a change in the weather; seek shelter and share body warmth; and drink warm liquids. |

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| <p>Japanese Encephalitis Virus (JEV)</p> | <p>Japanese encephalitis is spread through the bite of an infected mosquito, but cannot be spread between humans. The states of Andhra Pradesh, Assam, Bihar, Goa, Haryana, Karnataka, Kerala, Tamil Nadu, Uttar Pradesh, and West Bengal have the highest rates of JEV infection in India. Most human cases occur between May and October in northern India, but infections can occur year-round in southern India. According to the CDC, vaccination against JEV is only recommended to travelers who plan to spend more than a month in endemic areas during the JEV transmission seasons.</p> | <p>Vaccination is available but ineffective and costly. The JEV vaccine is not 100 percent effective and should not be a replacement for precautions against mosquito bites.</p> |
| <p>Leishmaniasis (Visceral)</p> | <p>Visceral Leishmaniasis is endemic in India. It is a parasitic disease spread through the bites of infected sand flies. It can also be transmitted congenitally, or through blood transfusions or used needles. It is most common in rural areas. VL can take weeks or months to present themselves, but can include fever, weight loss, hepatosplenomegaly, and pancytopenia. VL can be fatal if left untreated.</p> | <p>There is no vaccine to protect against Visceral Leishmaniasis. Travelers in rural areas can reduce the risk of VL by avoiding outdoor activities from dusk to dawn, when sand flies are active; wear protective clothing and put insect repellent on any exposed skin, and sleep in air-conditioned well-screened areas. Sand flies can pass through most screens, including bed nets. For mesh to be effective against sand flies it must have at least eighteen holes per linear inch.</p> |
| <p>Malaria</p> | <p>Malaria is spread through the bite of an infected mosquito. All parts of India with an elevation of less than 2,000 meters (6,560 feet) India have an elevated risk of malarial infection. Only areas higher than 2,000 meters (6,560 feet) in Himachal Pradesh, Jammu and Kashmir, and Sikkim have no malaria risk. Strains of malaria found in India are resistant to chloroquine.</p> | <p>There is no vaccine to prevent against malaria, but taking a prescription anti-malarial drug and taking proper precautions against mosquito bites may help prevent against transmission. Malaria prophylaxis is recommended if traveling to endemic areas outside major cities. Chloroquine is not an effective antimalarial in South Asia, and should not be taken as a preventative measure.</p> |

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| Plague | The plague is typically spread through the bite of infected rodent fleas. It is sometimes spread through the inhalation of infected animal secretions, or by handling infected animal tissue. Areas with risk include Himachal Pradesh, northern Uttar Pradesh, northwestern Tamil Nadu, Surat in Gujarat, and Beed District in Maharashtra. | There is no vaccine to prevent against the plague. Measures should be taken to prevent against contact with rodents and other potentially infected animals. Those who may have had contact with an infected person, rodent, or other animal should receive antibiotic prophylactic treatment. Infected persons need immediate treatment due to the high risk of death. |
| Schistosomiasis | Schistosomiasis is spread via larvae that swim in fresh water, and through sexual contact with infected individuals. Symptoms include a rash, weakness, fever, bloody urine and diarrhea. Infected individuals may not exhibit symptoms for four to six weeks after contracting schistosomiasis. Risk is present around Gimvi in Ratnagiri district of Maharashtra, and in the hills along the Konkan coast south of Mumbai. | There is no vaccine to prevent against schistosomiasis. Do not swim in bodies of freshwater. Schistosomiasis cannot be contracted in chlorinated swimming pools or in bodies of salt water. The use of insect repellent may be effective, but is unreliable. Travelers who come in contact with bodies of fresh water should clean their skin with rubbing alcohol and a clean, dry towel. |
| Scrub typhus | Scrub typhus is spread by mites found in dense areas of scrub vegetation. Rash, enlarged lymph nodes, an enlarged spleen, fever, headache, and gastrointestinal illness are common signs of scrub typhus, with the most common defining sign being a piece of dead, black skin at the site of mite bite. Risk of transmission exists in India. | There is no vaccine to prevent against scrub typhus. Without treatment, scrub typhus is usually fatal. With the use of antibiotics, usually doxycycline, mortality is dramatically reduced. |
| Tuberculosis (TB) | Tuberculosis is spread through contact with the respiratory secretions of an infected person. India has the highest tuberculosis infection rate in the world, and the highest number of multi-drug resistant tuberculosis cases of any country. Vaccination is available but only recommended for health care workers and those with prolonged exposure to infected populations. | The Bacillus Calmette-Guérin (BCG) vaccine has historically been used at birth in most developing countries to prevent against TB. Results in adults have varied with effectiveness of between 0 and 80 percent. The BCG vaccine is also reported to interfere with TB testing in some cases. Individuals who anticipate prolonged exposure to TB areas should undergo the tuberculin skin test (TST) or interferon- γ release assay (IGRA) both before leaving the United States and eight to ten weeks after returning from travel. |

Food and Water Safety

There are few potable local water sources in India and many restaurants have poor or non-existent sanitation standards. Insurgent activity in Gorkha Jana Mukti Morcha in Darjeeling and the hills of North Bengal can disrupt local water sources and shipments of bottled water. All water should be bottled or otherwise purified, and ice cubes should be avoided. When traveling outside of major cities make sure to have adequate water supplies before setting out, as bottled or purified water can be scarce.

Avoid consuming unpasteurized dairy products and thoroughly cook all meats and vegetables prior to consumption. All fruits and vegetables should be washed with potable water and peeled. Avoid eating food purchased from street vendors. Do not drink unlicensed or locally made liquor anywhere in India.

There have also been reports of large-scale food poisoning at public religious festivals. Be careful about food consumed during religious festivals and observances, especially when consuming dairy products or products that have not been properly refrigerated.

Medical Facilities and Services

Medical care in India is highly variable. Top hospitals in urban areas may be of high quality, but medical facilities in rural areas may be limited, of poor quality, or non-existent. Emergency medical services are substandard. Medical tourism is rapidly growing in India, but advertising from medical tourism firms can be misleading. Medical facilities in India are not subject to rigorous oversight or regulation. Hospitals usually require advance payment or will establish the patient's ability to pay before providing treatment. While payment practices vary, credit cards may not be accepted at some facilities.

DESTINATION DETAILS

Time Zones

From 1 January to 31 December, India Standard Time (IST): GMT +05:30 Hours
India does not observe Daylight Savings Time.

Currency

Indian Rupee (INR)

Credit Cards

Large hotels, shops, restaurants, and other service providers in major cities accept international credit cards such as Visa, MasterCard, Diners Club, and American Express. Smaller establishments rarely accept credit cards, and acceptance rates decline dramatically outside of urban areas. Travelers should always notify their bank of their travel plans to avoid having their account frozen.

ATMs

ATMs are located throughout major cities and towns and are open 24-hours a day. ATMs commonly accept Maestro, Plus, MasterCard, Visa, and Cirrus. Citibank, HDFC, ICICI, UTI, HSBC, and Punjab National Bank, and the State Bank of India most commonly accept foreign cards. Most ATMs will not allow withdrawals of more than INR 10,000 (approximately USD 200) at a time. Some ATMs will take back the money if it is not removed within 30 seconds. Travelers should check with their bank before their trip about any fees that might be charged with ATM use.

Banking Hours

From Monday to Friday 10:30-15:30 and Saturday 10:30-13:00.
Hours may vary with bank and location.

Major Holidays

Services and transportation may be affected on/around the following holidays:

| Date | Holiday |
|------------------|--|
| 26 January 2018 | Republic Day |
| 13 February 2018 | Maha Shivaratri Day (in honor of Lord Shiva) |
| 2 March 2018 | Holi |
| 25 March 2018 | Rama Navami |
| 30 March 2018 | Good Friday |
| 30 April 2018 | Buddha Purnima (Buddha's Birthday) |
| 15 June 2018 | Idu'l Fitr |
| 15 August 2018 | Independence Day |
| 26 August 2018 | Raksha Bandhan |

| | |
|---------------------|---|
| 02 October 2018 | Mahatma Gandhi's Birthday |
| 7 November 2018 | Diwali (Festival of Lights) |
| 20-21 November 2018 | Milad un Nabi (Birth of the Prophet Muhammad) |
| 25 December 2018 | Christmas Day |

NOTE: Only Republic Day, Independence Day, and Mahatma Gandhi's birthday are national holidays. All other holidays are observed regionally. Government offices will generally be closed on all listed holidays.

NOTE: There are no national elections scheduled to take place in 2018. Elections are scheduled to be held for eight state legislative assembly elections in Meghalaya, Tripura, Nagaland, Karnataka, Mizoram, Chhattisgarh, Madhya Pradesh, and Rajasthan.

Voltage Information

230V, 50Hz - Plug type C, D, M

International Airports

| Airport Name | Airport Code | Airport Location |
|--|--------------|--------------------|
| Sardar Vallbhbhai Patel International Airport | AMD | Ahmedabad |
| Sri Guru Ram Das Jee International Airport | ATQ | Amritsar |
| Kempegowda International Airport | BLR | Bangalore |
| Bagdogra Airport | IXB | Bagdogra/ Siliguri |
| Biju Patnaik International Airport | BBI | Bhubaneswar |
| Chennai International Airport | MAA | Chennai |
| Coimbatore International Airport | CJB | Coimbatore |
| Indira Gandhi International Airport | DEL | Delhi |
| Gaya Airport | GAY | Gaya |
| Lokpriya Gopinath Bordoloi International Airport | GAU | Guwahati |
| Dabolim Airport (Goa International Airport) | GOI | Goa |
| Rajiv Gandhi International Airport | HYD | Hyderabad |
| Imphal International Airport | IMF | Imphal |
| Jaipur International Airport | JAI | Jaipur |
| Cochin International Airport | COK | Kochi |
| Netaji Subhas Chandra Bose International Airport | CCU | Kolkata |
| Calicut International Airport | CCJ | Kozhikode |
| Chaudhary Charan Singh International Airport | LKO | Lucknow |
| Mangalore Airport | IXE | Mangalore |
| Chhatrapati Shivaji International Airport | BOM | Mumbai |
| Dr. Babasaheb Ambedkar International Airport | NAG | Nagpur |
| Pune Airport | PNQ | Pune |
| Tiruchirappalli International Airport | TRZ | Tiruchirappalli |
| Trivandrum International Airport | TRV | Thiruvananthapuram |
| Lal Bahadur Shastri International Airport | VNS | Varanasi |
| Visakhapatnam Airport | VTZ | Visakhapatnam |

ENTRY & EXIT REQUIREMENTS

The following information is for citizens of the United States. If you are a citizen of a country other than the United States, contact an embassy or consulate for up-to-date requirements. For additional questions regarding entry/exit requirements, contact Global Rescue at (+1) (617) 459-4200.

A valid passport and visa are required for entry. Visas are not available upon arrival, and therefore must be obtained from an Indian embassy prior to travel. Tourist visas are valid for six months. Travelers seeking to enter India solely for tourist purposes, and who plan to stay no longer than 30 days, may apply for an electronic travel authorization at least four days prior to their arrival in lieu of applying for a tourist visa at an Indian embassy or consulate. The Indian government has relaxed the rule of no re-entry on the same visa for two months after departing India; this rule only applies to nationals of Afghanistan, China, Iran, Pakistan, Iraq, Sudan, and Bangladesh.

IMPORT RESTRICTIONS

The following items are permitted: 200 cigarettes OR 50 cigars OR 250 grams of other tobacco products, two liters of wine OR other alcohols, 59 milliliters of perfume, 250 milliliters of toiletries, AND one laptop.

The following restrictions apply: Firearms, ammunition, satellite phones, plants, plant products, AND live animals require an import permit. Pets require proof of inoculation AND a valid certificate of health. Currency over USD 10,000 must be declared.

The following items are prohibited: Illegal drugs, knives, explosives, other deadly weapons, birds/bird products, pork products, plants, radio transmitters, culturally important artifacts, valuable antiques, counterfeit money OR goods, pornography, AND Indian currency (INR).

EXPORT RESTRICTIONS

The following restrictions apply: Export of firearms, ammunition, pets OR other live animals, plants OR plant products requires permits.

The following items are prohibited: Illegal drugs, knives OR other deadly weapons, birds/bird products, pork products, plants, radio transmitters, culturally important artifacts, valuable antiques, counterfeit money OR goods, pornography, Indian currency (INR), ivory, musk, animal skin, AND species of wildlife.

IMPORTANT NUMBERS

| | |
|---------------------------|-----|
| Intl. Country Code | +91 |
| Fire | 101 |
| Police | 100 |
| Ambulance | 102 |

Contact Information for Select Embassies

US Embassy in New Delhi

Shantipath, Chanakyapuri
New Delhi, 110021
Telephone: (+91) 11-2419-8000

UK High Commission in New Delhi

Shantipath, Chanakyapuri
New Delhi, 110021
Telephone: (+91) 11-2419-2100

Australian High Commission in New Delhi

1/50 G, Shantipath, Chanakyapuri
New Delhi, 110021
Telephone: (+91) 11-4139-9900

For other embassies, contact Global Rescue at (+1) (617) 459-4200.