

Supplementary Materials: HIV, Other Blood-Borne Viruses and Sexually Transmitted Infections amongst Expatriates and Travellers to Low- and Middle-Income Countries: A Systematic Review

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Table S1. Data Extraction Summary.

Author/Purpose	Origin/Destination of Travel	Study Details	Sample/Response	Reported Outcomes
Alcedo et al. (2014) [1] To analyse factors associated with risky sexual behaviour among travellers	Origin: North America, Europe Destination: Varied across North America, Africa, Latin America and/or the Caribbean, Europe, Asia, Oceania	Design/Method: Cross-sectional; online questionnaire. Participants/Recruitment: Males and female; aged 18–35 years; recruited via Couchsurfing website.	Sample: <i>n</i> = 468 Response rate: 78%	<ul style="list-style-type: none"> Sex during last travel Characteristics of sexual behavior Condom use
Angelin et al. (2014) [2] To determine relevance of and adherence to health advice given to travellers to lower levels of travel-related illness	Origin: Sweden Destination: Varied across Asia, Africa, South America	Design/Method: Prospective, cross-sectional; pre- and post-travel questionnaire. Participants/Recruitment: Male and female; 18 years or older; Swedish speaking travelers attending a travel clinic.	Sample: <i>n</i> = 1277 (pre) <i>n</i> = 1059 (post) Response rate: 83%	<ul style="list-style-type: none"> Perceptions of health advice Compliance with health advice Travel-related illness Risk behaviors while overseas
Ansart et al. (2009) [3] To identify and evaluate STIs diagnosed among travellers consulting the health unit after returning from the tropics	Origin: France Destination: Varied across America, Caribbean, Asia, Africa, Oceania	Design/Method: Cross-sectional; prospective; analysis of patient data. Participants/Recruitment: Male and female; 18–49 years; returning travelers attending a travel clinic with signs of STIs.	Sample: <i>n</i> = 49 Response rate: 83%	<ul style="list-style-type: none"> Signs indicative of STIs HIV status Sexual behavior Condom use
Bauer (2007) [4] To explore tourists' and locals' knowledge, attitudes, and reasoning for engaging in casual sexual relationships	Origin: Varied across U.S., UK, Germany, Netherlands, Australia Destination: Peru	Design/Method: Qualitative; in-depth, unstructured interviews; informal conversations; participant and non-participant observation. Participants/Recruitment: Male and female; 19 years and older; locals linked to tourism or travelers for tourism, language courses or volunteer work recruited via convenience and snowball sampling.	Sample: <i>n</i> = 23 Response rate: Not Recorded	<ul style="list-style-type: none"> Relationship type Sexual behavior Condom use Safe sex knowledge/education
Bhatta et al. (2009) [5] To identify common health problems encountered by VSO volunteers during placement and after returning home	Origin: UK Destination: Varied across North Africa, sub-Saharan Africa, Asia, Oceania, South America	Design/Method: Cross-sectional; self-complete post travel questionnaire. Participants/Recruitment: Male and female; all ages; returned voluntary service overseas workers sent questionnaire and information pack on resettlement; completed anonymously, returned by mail.	Sample: <i>n</i> = 219 Response rate: 36%	<ul style="list-style-type: none"> Demographics Pre-existing health conditions Illness suffered while on placement Illness upon return from volunteering

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Boggild et al. (2014) [6] To identify the spectrum of illnesses experienced by Canadians travelling abroad	Origin: Canada Destination: Varied across India, Mexico, Cuba, Dominican Republic, Costa Rica, U.S., Ghana, Thailand, Peru, China	Design/Method: Analysis of retrospective surveillance data of ill returned travelers from GeoSentinel database. Participants/Recruitment: Male and female; all ages; returned travelers with probable/confirmed diagnoses, diagnosed at Canadian GeoSentinel clinics.	Sample: $n = 4365$ $n = 3943$ ill returned travelers Response rate: Not Applicable	<ul style="list-style-type: none"> • Demographics • Destinations of travel • Travel purpose • STI diagnosis • Pre-travel health advice
Brown et al. (2012) [7] Brown et al. (2014) [8] To explore risk perspectives and experiences of Australian men who acquired HIV while travelling overseas	Origin: Australia Destination: Varied across Asia, Africa, North America	Design/Method: Grounded Theory; semi structured interviews; symbolic interaction as theoretical perspective and analytical framework. Participants/Recruitment: Males; 20 years and older; travelers who believed they had acquired HIV overseas between the years 2000–2009; recruited via through services accessed by people living with HIV, particularly AIDS Councils and hospitals. Majority of interviews face-to-face, but also online and telephone.	Sample: $n = 14$ Response rate: Not Recorded	<ul style="list-style-type: none"> • Destination, reason for travel • Meaning ascribed to home and destination • Knowledge of HIV • Reported mode of HIV transmission • Participant experience overseas-knowledge/attitudes/values
Cabada et al. (2002) [9] To identify sexual behaviour and risk factors of travellers from the US and Europe to Peru	Origin: U.S., England, France Destination: Peru	Design/Method: Cross-sectional; self-complete questionnaire. Recruitment: Male and female travelers aged 15–51 years; departing from Peru on flights to the U.S. or Europe; convenience sampling in international departures lounge at airport.	Sample: $n = 442$ Response rate: 87%	<ul style="list-style-type: none"> • Sexual behavior • Sexual expectations while travelling • Condom use • Sex partners while travelling
Cabada et al. (2003) [10] To identify sexual behaviour and risk factors for STIs among travellers and locals interacting with travellers in Peru	Origin: U.S., England, France Destination: Peru	Design/Method: Cross-sectional; self-complete questionnaire. Participants/Recruitment: Male and female; 15–50 years; travellers; convenience sampling at airport and main bus stations prior to departure.	Sample: $n = 2540$ Response rate: 79.2%	<ul style="list-style-type: none"> • Demographics • Sexual behavior • Condom use • Pre-travel health advice
Collins et al. (2009) [11] To explore lived experiences of transnational mobility for gay-identified expatriates who reside in Manila	Origin: Varied across U.S., Great Britain, Germany, Scotland, Ireland, Sweden Destination: Philippines	Design/Method: Ethnography; in-depth, informal field interviews. Participants/Recruitment: male; gay; 29–70 years; expatriates; recruited at gay bars in Malate.	Sample: $n = 8$ Response rate: Not Recorded	<ul style="list-style-type: none"> • Experiences of gender, sexuality, nationality, race and mobility
Combs and Giele (2009) [12] To analyse heterosexually acquired HIV cases observed among non-Aboriginal WA residents	Origin: Australia Destination: Varied across Europe, Southeast Asia, sub-Saharan Africa	Design/Method: Descriptive, retrospective, cross sectional; analysis of Department of Health data of those newly diagnosed from 2002–2006. Participants/Recruitment: Male and female; all ages; non-Aboriginal residents who had lived or intended to live in Western Australia.	Sample: $n = 258$ Response rate: Not Applicable	<ul style="list-style-type: none"> • Demographics • Country of origin • Reported place of HIV acquisition • HIV exposure categories

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<p>Crougns et al. (2008) [13] To determine degree to which Dutch travellers receiving travel clinic pre-travel advice have protected or unprotected sexual contact with new partners and factors influencing this behaviour</p>	<p>Origin: Netherlands and Belgium Destination: Varied across sub-Saharan Africa, Asia, Turkey, South America, Central America, North Africa</p>	<p>Design/Method: Cross-sectional; self-complete questionnaire. Participants/Recruitment: Male and female; 18–50 years; travelers; Dutch speaking; questionnaire sent to travelers within 6 weeks of visiting a pre-travel clinic, followed by reminder.</p>	<p>Sample: <i>n</i> = 1907 Response rate: 55%</p>	<ul style="list-style-type: none"> • Demographics • Sexual behavior of travelers • Condom use
<p>Dahlgren et al. (2009) [14] To assess self-reported health risk and risk-taking behaviours of humanitarian expatriates</p>	<p>Origin: Primarily Europe, America Destination: Primarily Africa, Asia</p>	<p>Design/Method: Cross-sectional; self-administered questionnaire. Participants/Recruitment: Male and female; all ages; humanitarian aid workers who had been on an ICRC mission for at least 1 month; contacted and asked to complete a questionnaire.</p>	<p>Sample: <i>n</i> = 1190 Response rate: 95.2%</p>	<ul style="list-style-type: none"> • Demographics • Health status • Health related problems of workers • Risk-taking behaviors
<p>Fenton et al. (2001) [15] To determine extent to which black African communities residing in London visit countries of birth, and the associated factors of acquiring new sexual partners while overseas</p>	<p>Origin: UK Destination: Democratic Republic of Congo, Kenya, Uganda, Zambia, Zimbabwe</p>	<p>Design/Method: Cross-sectional self-complete questionnaire. Participants/Recruitment: Male and females; all ages; from Sub-Saharan Africa residing in London; recruited at social and commercial venues, such as churches, universities, embassies, and bars in London using ethnically matched interviewers.</p>	<p>Sample: <i>n</i> = 756 Response rate: 75.6%</p>	<ul style="list-style-type: none"> • Demographics • Condom use • previous diagnosis with ST • Number of sex partners • HIV testing • Perceived peer group norms
<p>Hamer et al. (2008) [16] To evaluate use of pre-travel medical services, current knowledge, and behaviour among expatriate corporate workers stationed in Ghana</p>	<p>Origin: North America, UK, Europe, other high income countries Destination: Western Ghana</p>	<p>Design/Method: Cross-sectional self-complete questionnaire. Participants/Recruitment: Male and female; 21 years or older; corporate expatriate employees; field medical officer distributed questionnaire to all relevant expatriate employees.</p>	<p>Sample: <i>n</i> = 42 Response rate: 70%</p>	<ul style="list-style-type: none"> • Demographics • Pre-travel medical services • Knowledge, behavior regarding a range of diseases and infections, alcohol use, high-risk sexual activity
<p>Kaehler et al. (2013) [17] To determine sexual behaviour and attitudes among foreign backpackers in Thailand</p>	<p>Origin: Europe, North America, Australia Destination: Thailand</p>	<p>Design/Method: Cross-sectional self-complete questionnaire. Participants/Recruitment: Male and female; 18 years and older; English-speaking backpackers without a spouse; using convenience sampling, participants approached in backpacker center in Bangkok.</p>	<p>Sample: <i>n</i> = 415 Response rate: Not Recorded</p>	<ul style="list-style-type: none"> • Demographics • Pre-travel preparations • Sexual risk behaviors • Condom use • Selection of sex partners

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Author/Purpose	Origin/Destination of Travel	Study Details	Sample/Response	Reported Outcomes
<p>Manieri et al. (2013) [18] To investigate sexual risk-behaviour of Swedish men who have sex with sex workers in Thailand</p>	<p>Origin: Sweden Destination: Thailand</p>	<p>Design/Method: Cross-sectional self-administered questionnaire. Participants/Recruitment: Male; all ages; Swedish citizens; recruited by male interviewers in the streets or inside bars and restaurants of the red-light districts of Pattaya and Bangkok.</p>	<p>Sample: <i>n</i> = 158 Response rate: 65%</p>	<ul style="list-style-type: none"> • Demographics • Experience with sex workers • Intention to use Thai sex workers • Condom use and perceived risk
<p>Matteelli et al. (2013) [19] To describe the range of diseases and factors associated with acquisition of travel-related STIs via the GeoSentinel database</p>	<p>Origin: Varied Destination: Varied across Asia, Africa, America, America, Caribbean, Europe, Middle East, Oceania</p>	<p>Design/Method: Observational, cross-sectional; using standardized questionnaire to analyze diagnosed cases from GeoSentinel database. Participants/Recruitment: Male and female; 13–90 years; crossed international borders within 10 years; confirmed/probable diagnoses</p>	<p>Sample: <i>n</i> = 112,180 Response rate: Not Applicable</p>	<ul style="list-style-type: none"> • Demographics • Travel history and reason for travel • Pre-travel consultation • STI diagnoses
<p>Mercer et al. (2007) [20] To determine the proportion of British residents who reported new sexual partners overseas in the past 5 years and the associated demographic, behavioural and attitudinal outcomes</p>	<p>Origin: UK Destination: Varied across Europe, UK, Oceania, America, Caribbean, Asia, Middle-East, sub-Saharan Africa</p>	<p>Design/Method: Stratified national survey using multistage probability cluster design; face-to-face interviews using computer-assisted personal interviewing in respondents’ homes, followed by computer-assisted self-interview. Participants/Recruitment: Male and female; 16–44 years; travelers; British residents. A sample of addresses selected. For every selected household, one resident randomly selected to participate. Ethnic boost sample obtained with stratified postcode sampling.</p>	<p>Sample: <i>n</i> = 11,161 Response rate: main survey = 65.4%; ethnic boost sample = 63%</p>	<ul style="list-style-type: none"> • Socio-demographics • Health status, general risk factors • Attitudes and knowledge of HIV • Sexual attraction and experience • Overseas travel • Number of sex partners overseas • Overseas sex partner demographics
<p>Rice et al. (2012) [21] To determine the characteristics of travellers born in the UK who acquire HIV infection overseas</p>	<p>Origin: UK Destination: Spain, Nigeria, South Africa, Zimbabwe, USA, Jamaica, Thailand, other</p>	<p>Design/Method: Retrospective descriptive analysis; using case reports and follow-up data from national HIV database. Participants/Recruitment: Male and female; 15 years and older; diagnosed with HIV infection in the UK; likely acquired HIV overseas.</p>	<p>Sample: <i>n</i> = 15,997 Response rate: Not Applicable</p>	<ul style="list-style-type: none"> • Demographics • Reported route of HIV transmission and country of infection
<p>Streeton and Zwar (2006) [22] To determine risk for hepatitis B exposure while travelling overseas for Australian travellers</p>	<p>Origin: Australia Destination: Varied across Africa, Asia, Middle East, South and Central America, Europe, Oceania</p>	<p>Design/Method: Cross-sectional telephone survey. Participants/Recruitment: Male and female; 18 years and older; had travelled overseas in the past two years, either for pleasure or business; recruited randomly via telephone calls to potential participants from each Australian mainland capital city using screening questions.</p>	<p>Sample: <i>n</i> = 503 Response rate: 74%</p>	<ul style="list-style-type: none"> • Demographics • Travel history • Pre-travel health advice • Uptake, adherence to pre-travel immunization • Risks exposed to while travelling • Perceptions, knowledge of hepatitis B

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Author/Purpose	Origin/Destination of Travel	Study Details	Sample/Response	Reported Outcomes
<p>Whelan et al. (2013) [23] To determine the casual sexual relationships and condom use consistency among Dutch, long-term travellers to (sub) tropical regions</p>	<p>Origin: Primarily the Netherlands Destination: sub-Saharan Africa, Central America, Caribbean, South America, Asia</p>	<p>Design/Method: Cross-sectional pre- and post-travel survey, pre- and post-travel blood sampling. Participants/Recruitment: Male and female; 18 years and older; immunocompetent; travelers to (sub) tropical regions for at least 3–12 months; recruited via Public Health Service travel clinic.</p>	<p>Sample: <i>n</i> = 552 Response rate: Not Recorded</p>	<ul style="list-style-type: none"> • Demographics • Travel duration, destination, purpose • Number, type, sex, ethnicity of sex partners • Condom use • HIV status
<p>Yokota (2006) [24] To explore reasons heterosexual male Japanese tourists engage in commercial sex in Thailand, and how motivations differ to those of Caucasian male tourists</p>	<p>Origin: Japan Destination: Thailand</p>	<p>Design/Method: Qualitative semi-structured, in-depth interviews. Participants/Recruitment: Male; 19–36 years; heterosexual; tourists; had sex with Thai sex worker(s) and who were travelling without partners; purposive sampling used to recruit participants in guesthouse lobbies.</p>	<p>Sample: <i>n</i> = 34 Response rate: 88%</p>	<ul style="list-style-type: none"> • Demographics • Sex with and history of commercial sex with Thai sex workers • Condom use with Thai sex workers • Reasons to buy sex from Thai sex workers
<p>Zuckerman and Steffen (2000) [25] To determine risks of hepatitis B infection among European travellers compared with immunisation status in other risk groups</p>	<p>Origin: Austria, Belgium, France, Germany, Italy, Netherlands, Sweden, Switzerland, UK Destination: Varied-Primarily Africa, Asia, Central or South America</p>	<p>Design/Method: Cross sectional survey using telephone interviews with mostly closed questions (translated for all participants). Participants/Recruitment: Male and female; 18 years and older; travelers; randomly sampled from telephone directories, using quotas.</p>	<p>Sample: <i>n</i> = 9008 Response rate: Not Recorded</p>	<ul style="list-style-type: none"> • Demographics • Travel destination (by endemicity) • Risk behaviors • Hepatitis vaccination status • Knowledge
<p>Zuckerman and Hoet (2008) [26] To determine European travellers' risk for exposure and immunisation status of hepatitis B while travelling</p>	<p>Origin: Belgium, Italy, Finland, Germany, Netherlands, Spain, Sweden, UK Destination: Varied across Africa, Asia, South America, Eastern Europe</p>	<p>Design/Method: Cross-sectional two-stage survey: (1) telephone Omnibus survey and (2) online survey. Participants/Recruitment: Male and female; 18 years and older; travelers; to hepatitis B endemic countries; Omnibus survey participants chosen through random digit dialing used as quotas for participation in the online survey; Online survey participants recruited through online panel.</p>	<p>Sample: <i>n</i> = 5948 (Omnibus survey) <i>n</i> = 4151 travelers (online survey) Response rate: Not Recorded</p>	<ul style="list-style-type: none"> • Demographics • Travel frequency, purpose, destination • Self-reported hepatitis B immunization status before travel • Risk exposure to hepatitis B • Pre-travel health advice

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