ASSESSING FOREIGN TRAVEL RISK PRESENTS A MOVING TARGET

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Executive Summary *The events of the past year have heightened the concerns when reviewing foreign travel risks. In this article we look at how COVID-19 has impacted mortality in the rapidly changing world. In today's world, review of foreign travel risk is a moving target that needs to be updated continually.*

It's been quite a year: an ongoing global pandemic, the largest war in Europe since World War II, economic uncertainty with inflation rates not seen in decades, unprecedented natural disasters, and the list goes on. Viewed from a global perspective, it seems almost no country was spared from the effects of significant new risks impacting entire populations. Meanwhile, of course, we all must contend with the current and looming impacts of climate change threatening the planet.

With so many shared challenges, one might assume that assessing the subsequent impacts on foreign travel risk would allow for a more universal approach – that certain mortality risk factors could be applied globally, at least to some degree. In reality, it doesn't take long to dispel this notion.

Consider climate change, for example, a challenge shared by all. In the American West, drought conditions and record heat in 2022 – attributed at least in part to global warming by most climate experts – led to widespread wildfires, disappearing water sources and energy shortfalls. In Pakistan, unusually severe monsoons combined with glacial melt due to rising temperatures resulted in massive flooding, which, as of this writing, has already killed more than 1,300 people. Meanwhile, in many areas around the globe, climate change has yet to have any documented impact on mortality rates. In fact, one could argue that warmer temperatures might make certain parts of the world more hospitable for human life – at least for now.

Another major factor to consider is the availability of reliable data from country to country. In some cases, a nation may simply lack the resources to acquire the necessary information. In other cases, cultural practices or social instability may make certain information simply impossible to collect. In still other instances, political or economic motivations may lead authorities to purposely report information incorrectly – just think about the differing number of casualties reported by both sides of the war in Ukraine.

The takeaway is clear: Foreign risk must be assessed on a country-by-country basis, or even by regions within a country, and done so with a critical and discerning eye on an ongoing and persistent basis. To see how this can play out, assessing the mortality impacts of COVID-19 offers an insightful example.

The COVID-19 Conundrum

Three years into the pandemic and COVID-19 mortality data on a global basis remains plagued by uncertainty. The World Health Organization (WHO), historically the most reliable source for such data, acknowledges that "reported death numbers underestimate the number of lives lost due to the pandemic." The WHO cites several reasons for this:

- Death counts miss those who died without testing.
- Countries must correctly define COVID as the cause of death.
- COVID-19 numbers fail to account for other deaths related to the pandemic due to overwhelmed health care systems or patients avoiding care.

To add further complexity, the WHO also concedes: "A few countries have experienced lower-than-expected total deaths during the pandemic due to

reduced contact and reduced mobility, which have led to reduced infectious disease-related mortality, as well as reduced transport- and injury-related fatalities. Reported COVID-19 death numbers do not account for this."[1]

While the availability of testing has improved significantly since the early months of the pandemic, it remains an issue in many countries. Even where sufficient testing and home test kits are readily available, inconsistent reporting remains a significant obstacle. For people with underlying medical conditions, for example, whether COVID-19 is reported as the cause of death or not can vary from one institution to another.

In developing countries, reporting cause of death at all can be a low priority as people struggle to address more immediate issues. The WHO notes that only 73 of 194 countries in the world provided full mortality reporting for 2020-2021, while 84 countries provided no data at all. Data availability is concentrated by region, with European countries well represented, the Americas providing data from 64% of countries, and other regions poorly represented. In Africa, for example, the WHO has data from only six of 47 countries.[1]

Some reporting challenges cannot be overcome, making explanations for lower COVID-19 death counts in certain countries impossible to confirm. For example, many have speculated that countries with a low median age were seeing fewer COVID-19 deaths because young people infected by the coronavirus are often asymptomatic. The median age in Africa is 19, and in Sierra Leone, for example, only 125 COVID deaths have been reported since the start of the pandemic. In India, however, the median age is only 28 and yet the COVID-19 fatality rates have been very high. What might explain the wide discrepancy? One contributing factor could be that, according to researchers, most people in Africa die in their homes and are never registered with civil authorities. A recent survey by the United Nations Economic Commissions for Africa showed that official registration systems captured only one in three deaths.[2]

Differences in policy must also be taken into account. Consider New Zealand, where some of the strictest lockdowns in the world during the height of the pandemic led to reduced all-cause mortality during lockdown periods.[3] However, reports identified surges in COVID-19 deaths in New Zealand now after the country lifted lockdown orders and opened its borders.[4] Something to ponder: Will a lack of general immunity developed via infection lead to higher COVID-19 mortality in New Zealand moving forward, compared to countries that have already experienced various COVID-19 waves?

At this point, comparing different countries' data on excess mortality from COVID-19 is like comparing apples to oranges. US underwriters should therefore take State Department COVID-19 travel warnings with a grain of salt. COVID-19 is everywhere; it's just not getting reported everywhere. With more than 3 years of data on COVID-19, we know a lot more about the disease itself than about the impact it has had on global mortality.

Conclusion

At RGA we regularly update our guidance on foreign travel risk because we realize it is a moving target, continually at risk itself of becoming out of date in a rapidly changing world. After a suspension of most global travel during the height of the pandemic, people are going abroad once again. To keep pace with the associated risks, insurers must remain vigilant and view every country as a world of its own.

Notes

1. www.who.int/publications/m/item/methods-for-estimating-the-excess-mortality-associatedwith-the-covid-19-pandemic.
2. www.nytimes.com/2022/03/23/health/covid-africa-deaths.html.
3. www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)32647-7/fulltext.
4. www.reuters.com/world/asia-pacific/new-covid-case-numbers-new-zealand-trending-lower-signs-wave-peaked-2022-08-04/.

About the Author

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