Going Global: Providing Quality Health Services to a “Global” University

Carlo Ciotoli, M.D., M.P.A.  
Medical Director

Zoe Ragouzeos, LCSW  
Director, Counseling and Wellness

NYUScottentHealthCenter
NEW YORK UNIVERSITY

• 48,000 students (50% undergrads)
• Student Health Center – 60,000 sq ft
• 200 FTEs (193 F/T)
• 15 Primary Care Providers (MDs, NPs, PAs)
• 6 Women’s Health Providers (MDs, NPs)
• 45 Counseling & Wellness Providers including Psychiatrists, Psychologists, Social Workers, Psychiatric NPs, Psych Fellows
• 12 Specialty Physicians

NYU Student Health Center
SERVICES AT NYU SHC

• Primary Care
• Women’s Health
• Counseling & Wellness
• Physical Therapy
• Radiology
• Retail Pharmacy
• Retail Optometry

• Allergy, Immunology
• Travel Medicine
• Dermatology
• Orthopedics
• Neurology
• Gastroenterology
• Sports Medicine
• Pulmonary
• Endocrinology
At the New York University Student Health Center, our mission is to enhance the health and well-being of the NYU Community by providing and promoting high-quality and accessible treatment, prevention and education in support of the University's goals and in response to the changing needs of the NYU community.
In 2007, NYU ranked #1 in sending students abroad according to the Institute of International Education.

NYU leads all universities in students studying abroad; over 40 percent of our undergraduates now study abroad (~4000 each year).
Scope of Global Program Sites

Study Abroad Sites

- Florence - 800
- London - 650
- Paris - 360
- Prague - 345
- Shanghai - 260
- Buenos Aires - 200
- Madrid - 180
- Berlin - 100
- Ghana - 90
- Tel Aviv - 80
FRESHMAN STUDENTS ABROAD

• FLORENCE

• LONDON

• PARIS

• ~300 per year – 50 Non-NYU

NYUStudentHealthCenter
Scope of Global Program

Semester long School Sponsored Programs

• TSOA:
  – Ireland
  – Cuba
  – South Africa

• Steinhardt
  – Mexico

• FAS
  – Egypt
Scope of Global Program Sites
Degree Granting Branch Campuses

- Abu Dhabi
- TSOA Singapore
Scope of Global Program
School Sponsored Trips

• 2-8 week short term school trips
  – CAS Scholars
  – Intersession (winter and summer)
  – Steinhardt Honors
Why is global health different?

Health Resources

• Philosophical approaches to healthcare
  – Mental health
  – Sexual health

• Access to clinicians

• Access to records

• Medications

• Mobile Students
Why is global health different?

Support Services and Staff

- Housing is different
- No public safety
- Full time staff are not health professionals
Why is global health different?

Cultural Issues

- Culture shock
- Isolation
- Change of routine
- Legality of alcohol use
- Laws regarding drug use
- All might result in the decompensation of certain vulnerable students
Why is global health different?

• Handling an emergency abroad is very complicated!
  – Hospitals/Health professionals have different perspectives
  – Quality of facilities vary
  – Some medications are not readily available
  – Medical transport takes time to arrange
Health and Mental Health Services Abroad

Health/mental health services on site a few times per week:

- Florence
- London
Health and Mental Health Services Abroad

Retained private clinics in the community:

• Prague
• Buenos Aires
• Shanghai
• Tel Aviv
• Madrid
• Berlin
Health and Mental Health Services Abroad

Full-time Staff

- Psychologist (Paris)
Health and Mental Health Services Abroad

Mix of private/public Hospital/on-site nurse

• Ghana
NEW YORK UNIVERSITY
Global Communication for Crisis Response

Public Safety

HEALTH ISSUE

Crisis Response Counselor (CRC)

Zoe Ragouzes, LCSW
Director
Wellness and Crisis Response

Wellness Exchange/ Student Health Center
Global Site
Global Program Office

NON-HEALTH ISSUE

Global Issue
Public Safety Issue

Public Safety Issue
Follow Public Safety Protocols

Global Issue
Global Site

School Trip Issue
Trip Leader

Initial Response Team
John Beckman
Steve D’Onofrio
Jules Martin
Cheryl Mills
Linda Mills

Senior Team

University Leadership Team

Functional Teams

Public Safety - Crime (muggings, trespassers), arrest, public uprising, natural disaster, terrorist attacks, tracking

Global Issue - Parents asking about student’s arrival to site, general whereabouts of student, contact information of student, where to send packages, wishing to get a message, parents routine questions regarding housing, safety, roommates, etc.

Effective May 15, 2008

May 6, 2008
Once students go abroad

- Local Emergency Contact Number
- Staff member liaison (wellness coordinator)
- Referrals are available
- All Emergency calls go to Public Safety
  - Emergencies can originate in the US
- Training for all trip leaders prior to departure
Insurance

- Mandated coverage?
- How does it overlap (or not) with coverage at home?
- Network
- Covered Services
- Minimize out-of-pocket expenses
Pre-departure:
For all new NYU students (WS and Global):

Mandatory Completion of

• Health History Form
• Immunization documents
• Alcohol and Other Drug Freshman Module
Why “screen” students?

• Health and safety resources abroad are not the same as in Washington Square

• We cannot take care of students in the same way as we do here

• Culture shock/Isolation/Change of routine/legality of alcohol use/laws regarding drug use all might result in the decompensation of certain vulnerable students

• Handling an emergency abroad is very complicated!

• ALL “DENIALS” ARE SITE AND TIME SPECIFIC
Global Student Screening Process

Global Program Office

Counseling and Wellness

Counselor

NO CONCERNS
Inform Director of Counseling and Wellness
Request referrals

CONCERNS
Team Leader

Director of Counseling and Wellness:
Decide if travel is inadvisable

Executive Director, Student Health Center:
Letter, call parents, meet with student

Global issues denial

Executive Director, Student Health Center recommends revoking admission

Appeal: Provost's Office
Who classifies as high risk?

- In the past academic year to the date of the screening, students who have exhibited the following symptoms or behavior:
  - Suicidal ideation with plan/intent
  - Suicide attempt
  - Chronic suicidal ideation
  - Moderate/severe self injurious behaviors
  - Homicidal ideation
  - Reckless, self destructive behaviors
  - Psychotic symptoms
  - Inability to care for self
  - Moderate/severe eating disorder with sporadic or resistance to treatment
  - Moderate/severe AOD abuse with sporadic or resistance to treatment
  - Multiple episodes of distress resulting in multiple contacts with CRC or Wellness Exchange hotline
  - Unaddressed or concerning medical issues
Transparency of Process:

1. Global Admissions website
2. SHC clinical intake form
3. University Medical Leave Policy (one successful semester in NY)
4. Judicial/Community Standards (probation here means probation abroad)
Clinician’s role

• Ask patients early about their plans for next semester. They may not disclose that they intend to study abroad. Ask periodically throughout sessions in case they change their minds.
• If asked to assess, provide a professional recommendation. Seek consultation, if necessary.
• If you have concerns, have a frank conversation with your student about them.
• If we ask you to assess someone you only saw a few times, or even once, it is because you have more of a relationship with that student than anyone else at SHC, even if you don’t know them very well.
In assessments, clinicians should say/ask:

• “I’ve been informed by Global that you plan to study abroad next semester, and I wanted to discuss this plan with you”
• Is traveling next semester right for you?
• Do you feel well enough to enjoy the experience? Could your travel be more fulfilling at another time?
• Do you know that you could be on your own more abroad? How will you handle that?
• Have you thought about how you would handle a crisis abroad?
• Have you put a plan in place for support while away?
• How well do you know what resources are available where you are going?
• How well do you know about the culture of the city to which you want to travel?
Commons Health Issues

• Diet
• Sexual health
• Drug use and misuse
• Weather related issues
Communicable Disease
Mumps in London

- Vaccination rates lower in much of rest of world
- Local Public Health Infrastructure
- Access to vaccine
- Variability of Residence Halls
- Communication
Communicable Disease
Importance of Vaccination Status

WHO says measles making 'rapid comeback'
By FRANK JORDANS (AP) – May 2010

GENEVA: Measles is making a rapid comeback in African, Asian and even some European countries despite being easily avoided through vaccination, the World Health Organizations said Friday as countries pledged to sharply cut infections and deaths worldwide by 2015.

"Being one of the most contagious diseases, measles is making a rapid comeback," said Dr. Peter Strebel, who leads WHO's work on measles.

……the number of cases has surged over the past year, with large outbreaks reported in 30 African countries — from Mauritania to Zambia and Angola to Ethiopia — and Indonesia, Thailand, Vietnam and Bulgaria.

Even Britain experienced a worsening measles outbreak.

The disease's resurgence in Britain follows a sharp drop in immunization rates in the late 1990s sparked by the publication of a flawed paper linking autism to the combined measles, mumps and rubella vaccine.
Malaria

Ghana

Importance of education and prevention

NYU Student Health Center
Physical Safety

• Traffic and vehicular accidents
• Sidewalks, traffic lights, street crossings
• Emergency Response Services
Health Promotion

• Ability to do uniform programming (orientations)

• Cultural differences

• Resources
  – Access to safe sex supplies
Never mind the Ivy League. Sexton, president of New York University, is set to open a new campus in Abu Dhabi, expand aggressively at home, and turn his school into a global franchise. Next stop: China
Abu Dhabi
Unique Challenges - Health

- Four year degree granting school with onsite health and mental health resources
- Cultural issues
- Variability of health resources/available network of providers
- Health related visa requirements
Abu Dhabi
Unique Challenges – Mental Health

- Legal issues
- Psychotropic Medications
- Stigma
QUESTIONS?