

Navigating Mental Health Issues Within The International Student Population

NAFSA: Association of International Educators
Region X Conference 2017
Monday, October 23rd
1:00 pm to 5:30 pm

Presenters



Patricia Burak

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Syracuse University



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Advisement & Diversity Initiatives
The Juilliard School

Agenda

- Welcome, Introductions, Agenda
- Video: “Logic: 1-800-273-8255” and Discussion
- Word Cloud
- Discuss role of International Program
- Insurance Discussion
- Video: “Nail In the Head”

Break: 15 Minutes

- Collaboration between International Programs & Counseling Centers
- Special Considerations: Students from East Asia
- Table Talks (Case Studies)
- Programmatic Ideas
- Resources/Closing

<https://www.youtube.com/watch?v=BLe1dddgZrg>

Suicide: “A permanent solution to a temporary problem”

Key facts

- Close to 800 000 people die due to suicide every year
- For every suicide there are many more people who attempt suicide every year. A prior suicide attempt is the single most important risk factor for suicide in the general population
- Suicide is the second leading cause of death among 15–29-year-olds
- 78% of global suicides occur in low- and middle-income countries
- Ingestion of pesticide, hanging and firearms are among the most common methods of suicide globally

Text the word CORYOWEN268 to 22333 to join the session

Or go to: PollEv.com/coryowen268

Words come to mind when you think about international students and health?

Start the presentation to activate live content

If you see this message in presentation mode, install the add-in or get help at PollEv.com/app

Mental Health & Insurance

Does your insurance plan cover mental health? If so, make sure you understand how it works, especially:

- Overall coverage
- Limitations (caps/maximum days)
- How is suicide and self inflicted injuries handled?
- Pre-existing conditions
- Provider availability

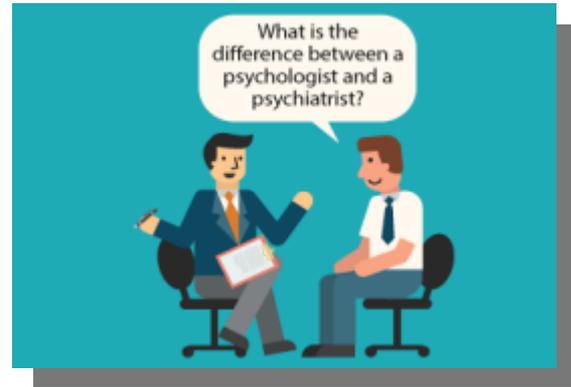


Depending on your campus, you will want to think about the coverage based on the counseling centers and costs to your students..

Seeking Treatment

Depending on your insurance, your students will be able to use the network to find providers nearby. Common options include:

- Counselors
- Psychologist*
- Psychiatrists*



Work to establish relationships with providers on and off campus, along with your carrier.

Help Students Understand...

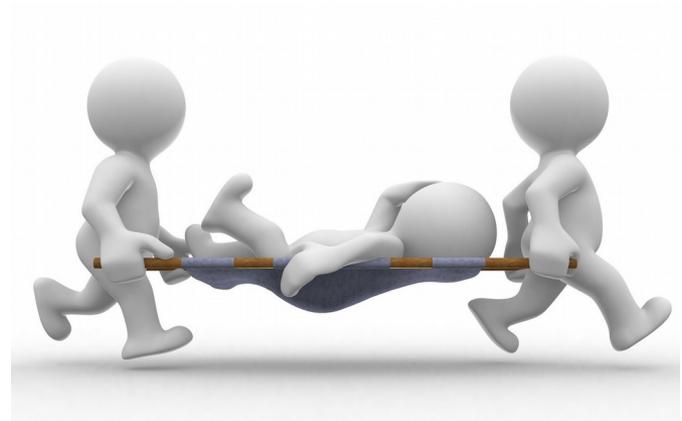
Understand how your insurance plan works, and create resources with your carrier to provide clarity to students. Important issues include:

- How does their insurance works?
- Where to seek treatment?
- What is the difference between providers?
- What's the mental health coverage
- How to file a claim and how is it paid?
- Stress confidentiality and HIPAA



Important Evacuation Benefits

- Emergency Reunion
- Emergency Medical Evacuation
 - Return home
 - Medical Escort
 - Airlift
- Repatriation of Remains
 - Religious traditions
 - Customs
 - Funeral homes & medical examiners



How do you respond to a student in pain?



BREAK

The Role of International Student and Scholar Support Programs

- Academic Notifications
- Health Center Notifications
- Residence Hall Notifications

**Consent of the student is required*



HIPAA Release

HTH Worldwide

HIPAA Privacy Authorization Form
Authorization for Use of Disclosure of Protected Health Information
(Required by the Health Insurance Portability and Accountability Act, 45 C.F.R. Parts 160 and 164)

I, **Patient's name**, authorize **Name of Facility/Physician** to use and disclose the protected health information described below to HTH Worldwide and/or its representatives including **Name of University if applicable**. This authorization for release of information covers the period of healthcare from: **3 Month** time span.

I authorize the release of my complete health record (including records relating to mental health care, communicable diseases, HIV or AIDS, and treatment of alcohol or drug abuse). This medical information may be used by the organization I authorize to receive this information for medical treatment or consultation, billing or claims payment, or other purposes as I may direct.

This authorization shall be in force and effect until **Date from Above**, at which time this authorization expires. I understand that I have the right to revoke this authorization, in writing, at any time. I understand that a revocation is not effective to the extent that any person or entity has already acted in reliance on my authorization or if my authorization was obtained as a condition of obtaining insurance coverage and the insurer has a legal right to contest a claim.

I understand that my treatment, payment, enrollment, or eligibility for benefits will not be conditional on whether I sign this authorization. I understand that information used or disclosed pursuant to this authorization may be disclosed by the recipient and may no longer be protected by federal or state law.

Signature of patient or personal representative:

.....

Patient's Name

Date: _____

Role of the ISSS Advisor

- Join the Crisis Management Team (or have protocols to be informed of international students of concern)
- Provide cross-cultural training to faculty, staff (including counseling), and student staff (i.e. RAs)
- Understand the student health insurance plan--especially the repatriation and evacuation policy
- Create partnerships across campus and determine roles (i.e. crisis communication team)
- Make sure you understand FERPA!
- If the international student or scholar is on a J, don't forget about additional reporting requirements
- Have a plan for reaching out to the community and who will handle which communications
- Do you need to involve the Consulate?
- Create bonds with outside groups (i.e. funeral directors, religious leaders, etc.)

FERPA Release

Syracuse University

Permission to Release Education Record Information as Required by the Family Educational Rights and Privacy Act (FERPA)

I, _____, give permission for Syracuse University (David B. Falk College of Sport and Human Dynamics) to release academic and graduate assistantship performance evaluation information to Patricia A. Burak.

Purpose for release: Review of dismissal from Doctoral Program.

Information to be released: Grades, faculty evaluations, Oral exam evaluations.

Signed: _____ Date: _____

Responding to a Death

- Copies of the student's or scholar's records from the institution's information systems (contact info, immigration information, advising notes, class schedule, emergency contact information)
- Contact highest level of campus administration appropriate to handle communication with family, embassy, university relations, and media. If necessary, find a translator to assist with communication to the student's/scholar's family/next of kin.
- Do not speak to media unless given permission by administration/public affairs. Public affairs is typically the spokesperson for the institution.
- Do not provide information about the student's or scholar's status unless it is to pertinent departments who are assisting with the handling of the death. Disclosing information to friends or classmates without consent is a violation of FERPA.

Responding to a Death (Cont.)

- If death occurred on campus, consult your institution's legal counsel regarding any possible liability concerns.
- Immediately contact your institution's counseling center. Students/friends experiencing trauma, grief, or loss may need to seek counseling. If you feel a student is in crisis and needs to see a counselor ASAP, ask if there is a crisis counselor available.
- Refer employees who are in distress to the Employee Assistance Program. Institutional Human Resources Web Pages will have information available. If applicable, contact the student or scholar's faith community to arrange a service.

Responding to a Death (Cont.)

- If the student is residential, consult with the residence hall for debriefing for students following the death. Again, counselors from the counseling center should be present. Coordinate with university housing to arrange to have the individual's personal property packed. The room may be sealed by the coroner, and this may have to wait until the room is "unsealed."
- Determine if any university constituency (e.g., friends, coworkers, roommates) is interested in hosting a memorial for the student or scholar. If so, consult with the family about the memorial service, keeping in mind the cultural differences regarding death, memorializing, and grieving.
- If appropriate, discuss more formal announcements (e.g. newspaper article) with university relations and or public affairs.

Responding to a Death (Cont.)

- Offer condolences in a culturally appropriate manner.
- If applicable, contact your institution's sponsoring health insurance company regarding repatriation procedures.
- If applicable, forward family request(s) for posthumous degree conferment for students to the appropriate college/school/department. The college/school/department will determine whether or not to initiate a formal request to the office of the registrar.
- SEVIS—update SEVIS if necessary.

Mental health concern vs. “Typical” young adult difficulties with cultural aspects thrown into the mix?

- Noticing difficulties
- Acknowledging and asking
- Being patient and being willing to listen
- Paying attention to non-verbal clues
- Somatic vs. psychological focus
- Academic, medical, or/and psychological interventions
- Seeking consultation

When To Refer

- Build a baseline
- Notice the changes
- Things to watch for:
 - Deterioration in Personal Hygiene or Dress
 - Dramatic Weight Loss or Gain
 - Noticeable Changes in Mood
 - Excessive Absences
 - Academic Problems
 - Social Isolation and Unusual Behaviors
 - Drug and Alcohol Abuse
 - Threat of Harm to Themselves or Others

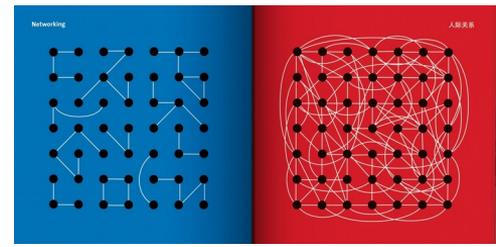
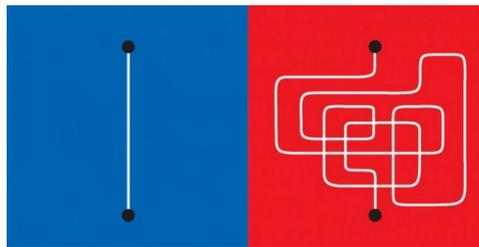
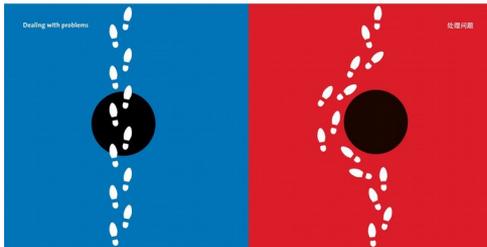
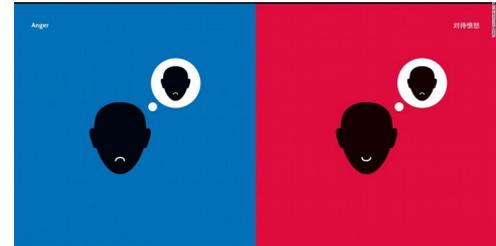
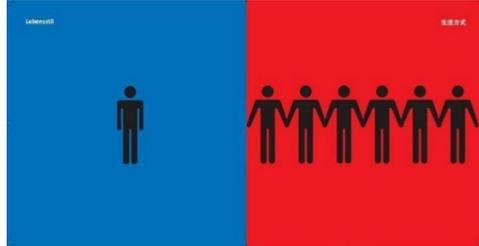
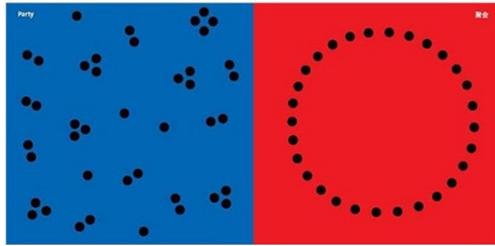
Counseling Center- “Should’s”

- The college curriculum for psychologists & social workers should incorporate specific global differences in mental health perspective/diagnosis/treatment.
- College Counseling Centers - Utilize assessment instruments such as the Cultural Formulation Interview (CFI) within the intake process. Include specific questions within the Intake paperwork to alert counselor to differing cultural views.

Counseling Center- “Should’s”

- Provide on-going workshops/training for college counseling center therapists specific to the population of international students on their campus.
- Develop a campus International Behavior Intervention Team composed of counselors and staff from the International Program to discuss difficult cases involving emotional distress and treatment.
- Orientation for international students could include discussion on “emotion regulation”, including a discussion on “relationship differences” between cultures. “Emotional experience tends to be aligned with the culturally valued ways of relating” (J.D. Leersnder, M. Boiger, & B. Mesquita, *Frontiers in Psychology*, 2013)

Special Considerations: Students from East Asia



TO STAY OR NOT TO STAY

- Name: Harold Zhou
- Hometown: Beijing, China
- Date of Birth: 3/2/1998
- Major: Bachelors of Music- Piano
- Year: 1st year
- Disability Registration: Not yet registered
- Languages: Mandarin (fluent), English (minimal conversation)
- Room: 2001E (Double)
- Roommate: David Smith (BFA-Dance 2020, White, from Wichita, KS)
- Family: Only child of two prominent musicians from Korea

October 12

- A professor notices that Harold, a 1st year Chinese student, seems to be lacking friends and has a hard time communicating in English. The teacher feels that the student's awkwardness may be contributing to social adjustment as even the Chinese students generally do not talk to him. Teacher reaches out to the Assistant Dean of International Advisement to ask for advice.

October 14

- Assistant Dean meets with Harold to discuss cultural adjustment and academics. She recommends that he consider counseling and explains that it is confidential. He does not seem interested. They chat about the difficulties of making friends but he says that he has plenty of friends. Harold indicates that he doesn't talk to his roommate. The Assistant Dean notes that Harold seems to not pick up on social cues, and has difficulty communicating. She explains academic resources, including tutoring, but he brushes off the recommendations.

November 31

- Director of Residence Life is informed by the managers in dining services that Harold has run out of meal points for the semester since he has been buying too much food for himself and others. The Director meets with Harold to discuss the issues. Harold indicates that he has been buying food for other people because he wants them to be his friend. The Director notices the awkward nature of Harold's communication and interaction and contacts Director of Disability Services to see if Harold is registered with her office. The Director of Disability Services indicates that Harold is not, but has received concerns from Harold's teachers about his behavior and that he is being regarded as being on the spectrum.

December 14

- Director of Residence Life is notified at 2:40am by student staff that Harold has come back to the residence hall intoxicated. The Director evaluates Harold and determines while he does not need to be transported to the hospital that evening. Later that week, the Director holds a conduct hearing with Harold to discuss the issue. Harold discloses that he drinks on a regular basis and probably has 4 or 5 drinks a day. The Director finds Harold responsible for policy violation, places him on disciplinary warning, reminds Harold of the policy, and refers Harold to counseling out of concern for his drinking.

January 8

- Harold stops by the office to talk about his first sexual experience with another man. He is very excited and goes into a lot of details. He shares with one that he took a picture of his partner while he was sleeping, and that his partner is still unaware that he has taken pictures. The Assistant Dean explains the implications of taking pictures of his partner without his knowledge. The partner was very unhappy about the pictures and Harold explained that the pictures were deleted. The Assistant Dean discusses Title IX with Harold and the partner (separately).

- MENTAL HEALTH CLINICIAN'S POINT OF VIEW:
- INTERNATIONAL PROGRAM REPRESENTATIVE'S POINT OF VIEW:
- STUDENT'S POINT OF VIEW:
- PARENT POINT OF VIEW:
- INSURANCE/LEGAL POINT OF VIEW:
- UNIVERSITY ADMINISTRATOR'S POINT OF VIEW:

How do we reconcile the various lens that each person brings to the table, especially when a student's life is at stake as well as other student's involved in supporting a suicidal student?

FROM A COUNSELOR'S POINT OF VIEW

- Name: Jieming Lu
- Hometown: Beijing, China
- Date of Birth: 4/15/1993
- Major: Information Studies
- Year: 2nd year Graduate Student
- Languages: Mandarin (fluent), English (minimal conversation)
- Family: Only child. Father is a trainer for CEO's in China and mother works at a university as a teacher. Reports he is "close to them".

January 30, 2012: (20 Minute Contact- No prior Counseling Center contact)

- Referred to Counseling Center from the ISSS Office
- Reason for referral: “feeling socially isolated in the US and missing his homeland of China”; “difficulty acculturating & not being able to discern when Americans want to develop a friendship or remain acquaintances”; “being able to trust Americans”; “persistent feeling of having disappointed his academic advisor due to receiving a B+ in her class”; developing a sense of meaninglessness in regard to his academic work” and “ongoing medical concerns”.

Therapist assessment:

- Past transient suicidal ideation but denied having a plan or intent to act on his thoughts. Stated suicide is “cowardly and stupid”.
- No evidence of thought disorder/hallucinations/mania
- No self-harming behaviors or substance use
- Difficulty sleeping, loss of appetite
- Mood is assessed as “depressed” with “congruent affect”
- Medical condition: reported that as a child diagnosed with a tumor in his finger which was treated but has started to “swell and become painful”. Desired to return to China to have it treated
- Wants to return to China, therapist agreed to support a Medical Leave of Absence (MLOA) and advised JL of the process.

Discussion: Given the information... what are your thoughts regarding the student?

February 1, 2012: Jieming walked into the Counseling Center for 2nd crisis appointment and asked to see the same therapist he saw on January 30. Therapist contacted Student Assistance & Slutzger Center after obtaining ROI- Discussion determined that student decided to take a reduced course load & stay in the USA. No further appointments or follow-up by CC.

December 3, 2015: (Therapist 2)-Walk-in crisis appointment:

- Reason: “I think I am depressed again”. “Happened 3 years ago”. “Ended up taking a MLOA, went back to China to regain myself & came back last year”. Having trouble “focusing and feeling more and more pressure and stress”. “I don’t know how to deal with it”. “I have not attended classes this week and have missed a total of 2-3 weeks of classes”.
- Therapist assessment: “depressed, no current suicidal ideation, plan or intent”. Scheduled for a return walk-in the next day as no intake slots available & winter break approaching

December 4, 2015: (Therapist 3) -Walk-in crisis appointment:

- Reason: Same as above
- Therapist assessment: Same as above. Therapist determined that JL was staying in the USA for winter break & scheduled an intake for 1/22/16 & completed a referral for a medication evaluation & a walk-in crisis appointment follow-up for 12/11/17

December 17, 2015: (Therapist 3) - Walk-in follow-up appointment:

- JL advised same therapist as above that he had a medical consult and was started on Prozac on 12/8. Therapist notes improved mood and encourages JL to follow through with intake on 1/22/16.

Discussion: What are your thoughts now????

January 22, 2016: (Therapist 4) - Full Intake session

- Prescribed Prozac 20 mg for depression
- Self-reports: “Fear of acceptance” in US culture; “fear of the future”; feels “abandoned”; “terrific panic and tenseness around others and fear that people don’t like him”. “I think I am gay and I am currently living in a Christian household”; “above average student and likes writing code”; does not feel that “Chinese students are honest”. States that American students have “taught him to be honest” however he likes the “humbleness of the Chinese”. “shy around other”, “don’t enjoy being around people”, “concerned that others don’t like me”, “i feel uncomfortable around people I don’t know”, “unable to concentrate” and “it’s hard to stay motivated for classes”.
- CCAPS score: Depression=73, Gen. Anxiety=54, Social Anxiety=99, Academic Distress=77, Eating concerns=39, Hostility=19, Alcohol use=46, overall distress=71. Audit score=1
- Reports lack of friends in primary school and not liked by his teachers. Knew he was gay at age 14 but could not tell anyone in China as this would embarrass his family. Unable to relate to his peers & preferred talking to older adults.
- First time Release of Information is requested/signed for the Slutzger International Student Center. since 2012.

Therapist recommendations:

- LGBTQ Resource Center - Student refused- Does not feel it represents him
- Graduate Group Therapy - To help with social skills and understanding of others- Student agreed
- Individual therapy - To help work through sexual identity- However, CC rules, if student in group, one of the group therapists will follow (Therapist 5 & Therapist 6, group facilitators)

Discussion: Therapist’s recommendations & finale outcome. What are your thoughts now? Would you do anything different?

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CYBERBULLYING

- Name: Susie Kim
 - Hometown: Incheon, South Korea
 - Date of Birth: 5/1/1998
 - Major: Bachelors of Music- Piano
 - Year: 2nd year
 - Disability Registration: Not yet registered
 - Languages: Korean (fluent), English (minimal conversation)
 - Room: Off-campus
 - Family: Only child of two prominent musicians, both teaching at the school
- Name: Eun Jin Lee
 - Hometown: Seoul, South Korea
 - Date of Birth: 2/15/1998
 - Major: Bachelors of Music- Piano
 - Year: 2nd year
 - Disability Registration: Not yet registered
 - Languages: Korean (fluent), English (minimal conversation)
 - Room: 1901E (Double)
 - Family: Only child of a businessman and stay at home mom

January 4, 2016

- Assistant Dean of International Advisement is called into a meeting with the Dean of Student Affairs, Human Resources, and Provost. It is revealed that a J-1 professor has fled the US after allegation of sexual misconduct with a student. His J-2 spouse is also working at the school on her EAD card and his J-2 child (Susie) is a student. After much discussion, the spouse and child decide to go home to Korea (child takes a leave of absence). A

September 10, 2017

- Susie comes back to campus from her leave of absence and she meets with the Assistant Dean. They discuss the option of Counseling but she says she's fine and is excited to be back.

October 2, 2017

- Assistant Dean hears rumours that Eun Jin is struggling in classes, distant, and doesn't seem to have a lot of friends suddenly. They meet to talk and the Assistant Dean learns that this is the student who had the interactions with the faculty member the previous year and had reported it to the school. She is being cyber bullied through Kakao and Snapchat from Susie (the daughter). She claims that Susie has turned the entire Korean student population against her. They discuss counseling and she agrees to meet with one of the Korean counselors.

October 3, 2017

- Assistant Dean works with Student Affairs who opens a conduct case and meets with Susie--Assistant Dean recuses herself from the case. Through the investigation, witnesses deny that Susie has been cyberbullying Eun Jin. Eun Jin provides screenshots of discussions in Kakao which then need to be translated. The investigation finds Susie responsible for bullying.

October 5, 2017

- Assistant Dean meets with Susie to talk about the cyberbullying incident and the incident with her father. They discuss the importance of saving face in Korean culture and eventually agrees to meet with a Korean counselor to discuss her frustrations and anger.

October 10, 2017

- Eun Jin meets with Assistant Dean to explain that while the bullying has stopped, she just doesn't have any friends and is thinking about transferring to another school.

October 11, 2017

- Assistant Dean meets with Scholastic Standing Committee to discuss Eun Jin's exploration of transferring. Also meets with the Assessment and Care Team (ACT) to discuss the isolation felt by Eun Jin.

October 12, 2017

- Eun Jin decides to stay in the end since she will likely meet these students at summer festivals and auditions for the rest of her life and has decided to try to make headway here.

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SUICIDE CASE STUDY

- Aneja Sharma is a 25 year old, female, international student from India who is working on her Masters in Civil Engineering.
- She currently lives off-campus with six female students. The 6 females have been providing emotional support for Aneja for the last 4 months and feel emotionally exhausted.
- Aneja was referred to the Counseling Center for a Mandated Assessment due to an incident on the night of 2/10/17 in which she reportedly drank bleach and rubbing alcohol as well as cut her wrists.
- This incident resulted in a psychiatric evaluation and hospitalization at Upstate Medical Center from 2/10-2/17/17.
- Upon discharge, she was diagnosed with Borderline Personality Disorder and prescribed Ondansetron 4 mg, Pindolol 5 mg and Sertraline 50 mg.

SUICIDE CASE STUDY (CONT.)

- She was also scheduled for follow-up with a hospital psychiatrist who intends to refer Aneja to a High Risk Management Program which is an out-patient program so that she can continue to go to school.
- Therapist assessment after discharge indicates a high level of suicide risk and recommends in-patient treatment.
- Mother, who is a reported professional within the India education system, arrives and does not agree with recommendations.

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Recommended Websites Regarding Suicide

www.suicidology.org : American Association of Suicidology

www.sprc.org: Suicide Prevention Resource Center

www.nimh.nih.gov: National Institute of Mental Health

www.jedfoundation.org: Jed Foundation

Collaborating with Mental Health Professionals

- Know the director and counseling staff; do joint meetings at least once a year
- Know how intake is done at the Counseling Center
- Know how intake is done off campus
 - CPEP (clinical psychiatric evaluation program)
- Walk students to the Counseling Center when the need is apparent
- Read published material about counseling and international students
- Have the phone numbers, especially the crisis 24/7 phone number, on speed dial

Resources

- Brownson, C., Drum, D. J., Becker, M. A., Saathoff, A., & Hentschel, E. (2016). Distress and suicidality in higher education: Implications for population oriented prevention paradigms. Journal of College Student Psychotherapy, 30 (2), 98-113.
- Drum, D. J., Brownson, C., Denmark, A. B., & Smith, S. E. (2009). New data on the nature of suicidal crises in college students: shifting the paradigm. Professional Psychology, Research and Practice, 40(3), 213-222.
- Silverman, M. N., Meyer, P. M., Sloane, F., Raffel, M. & Pratt, D. M. (1997). The Big Ten Student Suicide Study: A 10-year study of suicides on Midwestern university campuses. Suicide and Life Threatening Behaviors, 27, 285-303.

Collaborating with Others

- Crisis Management Team
- Residence Life
- Student Affairs
- Academic Affairs
- Title IX
- Greek Life
- Health Services
- Disability Support Services
- Multicultural/Diversity Office/LGBTQIA+ Office

Programming Ideas

- Buddy/Peer mentor programs
- Workshops (e.g., “Decoding U.S. Culture”, “Lost in Translation”, “Culture Shock”)
- “Let’s Talk” Drop-in Hours
- University 101-type courses
- Social organizations/student clubs
- Summer/Holiday programs
- Friendship family programs
- Discussion/Support Groups



Event Examples

FOUNDATIONS

Coping with Post-Election Stress while at Home



Facilitated by:
Chino Okonkwo, LCSW

Tuesday, December 20
Student Multipurpose Room (105)
6:30 - 7:30 pm

Pizza will be provided!

This program is a Diversity and Civic Engagement program or a Health and Wellness program

Juilliard

xxxxxx

STRESS RELIEF COLORING

De-stress with some relaxing coloring and snacks!

Tuesday, October 3rd
6-7pm in the Morse Student Lounge

This event is taking place in recognition of National Mental Illness Awareness Week (October 1st-7th)

Juilliard
diversity
advocates

#DearNextPresident



Join the video series/hashtag campaign & have your voice heard.

Create a message for the next POTUS & let him/her know your pressing concerns & issues

Wednesday,
Oct. 28th 1-2 pm
Morse Student Lounge

Juilliard
diversity
advocates

Juilliard
Office of International Advancement

FOUNDATIONS

IN DIFFERENT ALCOHOL CULTURES



MONDAY OCTOBER 17TH
12.15-1.15 PM, SMR

These programs are Diversity & Civic Engagement Foundation Programs

Juilliard



RESOURCES & HOTLINES

Pre-departure, Orientation, Online, Case Studies

LOGIC

VERIFIED



Resources

NAFSA Resources

Health and Wellness for International Students

Best Practices in Addressing Mental Health Issues
Affecting Education Abroad Participants

www.nafsa.org/Find_Resources/

Crisis Management in a Cross Cultural Setting:

ISSS

http://www.nafsa.org/wcm/Cust/Custom_Cart/Product_Detail.aspx?prodid=450

MGH Center for Cross Cultural
Student Emotional Wellness

massgeneral.org/psychiatry/services/ccsew_home.aspx

Mental Health Awareness Video



www.internationalstudentinsurance.com/explained/mental-health-video.php

Services & Hotlines

Services

- Crisis Text Line
<http://www.crisistextline.org/>
Text 741-741

Hotlines

- National Suicide Prevention
1-800-273-TALK
www.suicidepreventionlifeline.org
- The National Domestic Violence Hotline
1-800-799-SAFE
<http://www.thehotline.org/>
- It Gets Better Project (LGBTQ)
1-866-4-U-TREVOR
www.itgetsbetter.org/pages/get-help



Thank You!!!