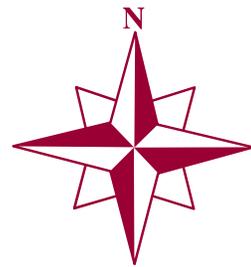




# E-News



[www.NECHAonline.org](http://www.NECHAonline.org)

Spring | Summer Issue 2010



Joleen Nevers, MAEd, CHES

Spring is finally here, summer is moments away, and for most of us, the semester is winding down. What a year! On most of our campuses we spent a good part of the year preparing and immunizing for H1N1. Many of us put out comprehensive prevention campaigns that included proper hand washing information, symptoms of the flu, tissues with hand sanitizers, and when to seek medical treatment. While we were busy with H1N1 and other student health issues, our government was working on health care reform. It has indeed been quite a year for us in health care!

Then there are the connections with individual students. Some of us make connections through the clinic by seeing a particular patient. Other staff members might greet or interact with a student by explaining insurance information or his/her medical records. And still other colleagues see students one-on-one, in group situations, or through educational opportunities. Each semester we have an opportunity to impact a student's life and sometimes, her/his decisions. Our contributions support our students' learning by providing excellent service for their health and wellbeing.

This is the time of year where I look forward to re-connecting with others and re-charging my batteries. What better place than at the American College Health Association's 2010 Annual Meeting? This year *We the People of College Health promoting the general welfare* of students will be held June 1-5 at the Philadelphia

Downtown Marriott. If you are attending the Meeting, please join us for NECHA's affiliate meeting on Thursday at noon. Please check your program guide for the location of the meeting. This year's program is packed with great presentations and the opening general keynote address from Heather Munro Prescott, PhD from Central Connecticut State University.

We are fortunate to have three people from NECHA being recognized at ACHA. The Affiliate New Professional Award recipient is Krista Berube, RN from Worcester Polytechnic Institute. Geraldine Taylor MS, APRN, BC from Bentley College is the E. Dean Lovett Award recipient and an ACHA Fellowship is awarded to P. Davis Smith, MD from Wesleyan University. Please join me in congratulating our award recipients!

If you are unable to attend the ACHA Annual Meeting, I hope you can join us for NECHA's Annual Meeting, October 27-29, in Providence, Rhode Island. Administrative Director Julie Basol and President-elect Dr. Margaret Higham have been diligently working with the Planning Committee to put together a great line up of topics and presentations for this year's meeting. Check out page 3 for the beginning of many updates throughout the coming weeks.

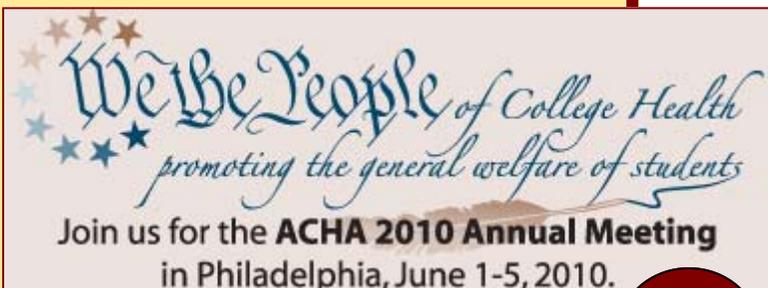
If you are looking to get involved in NECHA, ACHA or future planning committees, please do not hesitate to contact me.

Joleen M. Nevers, MAEd, CHES  
President, New England College Health Association  
Health Education Coordinator, University of Connecticut  
234 Glenbrook Road, UBox 2011  
Storrs, CT 06269-2011  
860-486-0772 [joleen.nevers@uconn.edu](mailto:joleen.nevers@uconn.edu)

## Connecticut Professor, Opening Keynoter at ACHA

A professor of history, Dr. Heather Munro Prescott has extensive knowledge of the history of medicine, adolescent medicine, childhood, and public health. She has published numerous articles and texts, including her book *Student Bodies: The Impact of Student Health on American Society and Medicine*. She has also conducted research and published on the topics of women's history and disability history.

In the keynote address *Student Bodies, Past and Present*, Dr. Prescott will explore how college health has evolved over time to address the needs of an increasingly diverse student population. She will recount how college and university health programs evolved in conjunction with shifting standards of medical care and public health practices in the United States and review the role of college health programs as public health agencies for campus communities. In addition, Dr. Prescott will describe contemporary public health challenges facing college campuses. Another aspect of the presentation will show how the history of college health is intertwined with the history of diversity in higher education. She will demonstrate that the growth of health services was one way in which colleges and universities made higher education accessible to women, racial minorities, veterans, and persons with disabilities.



More details on Pgs. 6, 7 & 9



The winds of change are upon us, as we're once again racing towards the 'routine' endings of our semesters and planning for our students' future care.

On the one hand, as is customary for this time of year, most of us are incredibly busy taking care of new students who are stressed and stretched at the ending of another challenging semester. At the same time, we are involved in our feverish attempts to wrap up each individual's ongoing therapy process, at whatever stage it might be, and make plans and recommendations for ongoing treatment needs after the close of the semester.

On the other hand, despite the frenetic pace of what's on our schedule each day, it also seems that we are in a bit of a lull, wondering and anticipating what might be happening in our economy, in our institutions, and in the future of health care. This juxtaposition feels like a very odd paradox.

My interpretation is that those of us working in college health/mental health are growing weary in the face of the stresses of the economic downturn and the resultant cuts and/or frozen budgets which don't really show any major signs of relief in the near future. This weariness leads us to feeling discouraged and unable to plan new programs and/or to work on staff development within our own institutions.

This makes me think of battle fatigue (PTSD), which is also what I'm hearing from many students as they talk about the uncertainties and frustrations about their futures.

A parallel paradoxical process has transpired around our nations' Health Care Reform process. In our last newsletter, I spoke about the diligent work done by our leaders within ACHA. These are the people, who worked to ensure that college student insurance coverage would remain relatively preserved, allowing us to continue our tradition of providing quality care within a community health model - utilizing health education, outreach, early identification and intervention strategies for identified students within a model of care that is quite different than our national, fee-for-service model. Many national leaders in health care reform have suggested that the college health system might serve as a useful model from which planners for a national model might learn.

After a lot of good and diligent work, the process stalled and we all waited, wondering if reform had stalled as well.

After the political rhetoric, wrangling and negotiations restored the likelihood of having some kind of reform. Many of us are now at a loss to know how to proceed and wonder what the real impact of the proposed reforms might actually mean.



Within some college health circles, a specific concern recently surfaced. That is - will the proposed national requirement for insurance for all college age students push administration into tapping insurance resources in order to decrease student services costs - a move that might push college health toward a fee-for-service model. I believe this would be a terrible mistake.

In anticipation of that potential dynamic and in order for us to continue to represent and advocate for the college community health model (within which we have been working), *we need to work with our administrators to demonstrate and expand the college community model of care and find ways to represent its superiority and effectiveness.* An essential piece of this advocacy will require that we all develop some meaningful institutional research, something that has usually been put on the back burners during the times of high clinical demands or budget cuts.

This institutional research must be targeted to clarify each community's specific demographics and problems. With this clarity, each college can begin to think creatively about reaching out and intervening with identified problems that exist within their community, which will gradually improve the health and hygiene of each community.



Despite the lull we're feeling, I think that now is the time for advocacy! I would strongly encourage all of you to develop/enhance your institution's capacity to do meaningful institutional research. Toward that end, you should advocate and/or create an appropriate work group, composed of administrators, health services staff, admissions personnel, alumni relations personnel, institutional research staff, students, etc. Ideally, your institution's work group will be in the best position to identify students or student behaviors /symptoms which appear to represent problematic situations or risk factors that herald a progression toward illnesses.

This information would then serve to inform and allow for the development of effective programs of education, outreach and prevention within each college. The work group should start with a small, but manageable number of identifiable problems or questions, which appear to be significant within each specific college environment.

This kind of institutional learning, along with the creation and implementation of effective preventions and interventions will eventually demonstrate its utility and effectiveness. It will reaffirm that college community health care can be a beacon for other communities and systems of care to follow.

This idea and many other stimulating opportunities to learn will be offered at one of the best buys for continuing education in college - **NECHA's 2010 Annual Meeting, October 27-29** in Providence, Rhode Island. Hope to see you there.

John Miner, MD  
Co-Director, Psychological Counseling Services  
Williams College  
Member at Large, NECHA  
[John.A.Minor@williams.edu](mailto:John.A.Minor@williams.edu)



Set your sights on Providence, Rhode Island for the  
New England College Health Association  
**2010 ANNUAL MEETING**  
THE **ART** OF COLLEGE HEALTH

*Countdown to Providence*

**Dr. Mary A. Carskadon  
to Keynote Annual Meeting**



Program Chair, Dr. Margaret Higham, along with the Planning Committee is very pleased to announce Dr. Mary Carskadon as the keynote presenter at this year's Annual Meeting. The Director of Chronobiology/Sleep Research at E.P. Bradley Hospital and Professor of Psychiatry and Human Behavior at Brown University's Warren Alpert Medical School, Carskadon will address the topic of sleep as a foundation for student academic success.

Many students don't regulate their sleep well and run into serious health consequences, including mood dysregulation, depression, increased risks of drug use, and exacerbation of underlying medical conditions. Sleep patterns are influenced by strong bioregulatory factors, as well as life-style choices. Collegians often sleep too little and too late. For susceptible students, poor sleep can lead to learning/performance difficulties, as well as problem health outcomes, especially depression. Knowledge of the bioregulatory processes can facilitate interventions to improve sleep.

Dr. Mary Carskadon received a B.A. in psychology from Gettysburg College and doctorate with distinction in neuro- and biobehavioral sciences from Stanford University. Her scientific activities include research examining associations of sleep regulatory mechanisms to sleep/wake patterns of children, adolescents, and young adults. Her findings have raised public health issues regarding consequences of insufficient sleep in adolescents and concerns about early school starting times. Her new research will examine genetic contributions to these processes and the association of chronic sleep restriction with development of depressed mood.

Carskadon has written over 150 scientific papers, is editor or co-editor of several books, and has been associate editor of several scientific journals. Her work has been acknowledged by a number of honors, including an honorary doctor of sciences degree from Gettysburg College, Lifetime Achievement Award of the National Sleep Foundation, the Outstanding Educator Award and the Distinguished Scientist Award of the Sleep Research Society. She is also an elected Fellow of the Association for Psychological Science and Fellow of the American Association for the Advancement of Science.



**GOT FUNDS?**  
Registration for

THE **ART** OF COLLEGE HEALTH

begins **Friday, May 14.**

Check the Web site at

[www.NECHAonline.org](http://www.NECHAonline.org)

Make your overnight hotel reservations by clicking on the link below. (\$169/night single/double occupancy)



**ANNUAL MEETING  
SPEAKER PREVIEW**

- *Female Athlete Triad*  
Katherine Ackerman, MD  
Instructor of Medicine, former U.S. Olympian  
Harvard Medical School | Children's Hospital Boston
- *"Lesions for \$400" Intercollegiate Derm-Pardy*  
Lionel Bercovitch, MD  
Dermatologist  
Brown University
- *The Evidence-Based Evaluation and Management of Lower Extremity Injuries*  
David McBride, MD  
Director of Student Health Services,  
Assistant Professor Family Medicine  
Boston University
- *Clinical Sleep Problems in College Students*  
Richard Millman, MD  
Medical Director, Sleep Disorders Center  
of Lifespan Hospitals  
Rhode Island Hospital
- *Management of Students at Risk for Suicide in a University Population*  
Sherri Nelson, PhD  
Associate Director, Psychological Services  
Brown University
- *Racial Micro-aggression toward International Students: Understanding the intersection of race and the country of origin*  
Euna Oh, PhD  
Counseling Psychologist | Multicultural Specialist  
Tufts University
- *Evaluation of Hematuria and Proteinuria and Recognition of Associated Syndromes*  
Katherine Richman, MD  
Assistant Professor of Medicine  
University Medicine Foundation,  
Division of Hypertension and Kidney Disease
- *Key Issues in IBD, Celiac Sprue and IBS for the College Health Care Provider*  
Samir A Shah, MD, FACP  
Clinical Associate Professor of Medicine  
Warren Alpert School of Medicine,  
Brown University  
Chief of Gastroenterology  
Miriam Hospital Gastroenterology Associates
- *Providing Support to Students on the Autism Spectrum while at College*  
Ernst O. VanBergeijk, PhD, MSW  
Associate Dean and Executive Director  
New York Institute of Technology Vocational Independence Program

*and much, much more!*

## MEET THE BOARD

### JENNIFER HODSHON, MPH



**Jennifer Hodson, MPH**

*Editor's Note: Please join me as we welcome Jennifer Q. Hodshon to the NECHA Board of Director's Class of 2009. Jen, along with Sandra Hayes, was elected to Member-at-Large positions at last fall's Annual Meeting.*

Hi – I'm Jennifer (Jen) Hodshon, Manager of Operations and Administration for the Brown University Health Services in Providence, Rhode Island. I began my career at Brown in 1998 as the Health Services Office Manager and was promoted last year to my current position.

Way back when, I received my teaching degree from Salisbury University in Maryland and later earned my Master's in Public Health with a concentration in Management and Policy from the New York Medical College in Valhalla, New York.

My career in health administration began in 1989 at The Danbury Hospital in Connecticut as a supervisor for their hospital-based dental clinic. I worked at Danbury for almost 10 years before coming to Brown.

My home is now in Charlestown, Rhode Island where I reside with my husband and two kids (and dog, Callaway). I enjoy fitness, travel, beaching and hiking – and the challenge of fitting it all in!

I am thrilled to be serving as a member at large on the NECHA Board and on the 2010 Annual Meeting Planning Committee. Please join us in Providence where a whole bunch of us from Rhode Island will be standing by to welcome you!

*Editor's Note: Join Jen and her co-presenters for another lively round of Hot Topics: Administration at this fall's Annual Meeting!*

### 2010 GRANT & AWARDS COMMITTEES



#### GRANT COMMITTEE:

Ellen Reynolds, Chair; C.C. Curtis, 2009 NECHA Grant recipient; Sandra Hayes, and Denise McGoldrick.

#### AWARDS COMMITTEES:

*Louise Gazzara:* Ellen Reynolds, Chair; Davis Smith, and Catherine Kelleher, 2009 Recipient

*Presidents Award:* Ellen Reynolds, Chair; Jennifer Hodshon, and Charley Bradley, 2009 Recipient

## NECHA GRANT CALL FOR PROPOSALS

The NECHA Grant Committee is currently accepting grant proposals for the 2010-2011 academic year. This grant was created and designed to assist schools who seek to improve the quality and delivery of student health services as well as promote innovative health programming within New England's college health community. Grant projects are funded at levels up to **\$2500**. The total number and size of awards will be based on merit, need, and the number of proposals received. Projects that involve student participation and a multi-disciplined/multi-departmental approach to shared concerns are especially encouraged.

***Congratulations to Connecticut College, recipient of the 2009 NECHA Grant.***

Proposals for 2010-2011 should include description of the program and goals, use of funds, and relevance to college health. For an application, log on to:

[www.NECHAonline.org](http://www.NECHAonline.org)

Deadline for proposals:

**September 3, 2010**

*Ellen Reynolds, MS*

*Chair, NECHA Grant Committee*

[ellen@uri.edu](mailto:ellen@uri.edu)

## RECOGNITION

### NOMINATE A COLLEAGUE FOR A NECHA AWARD

Do you know an outstanding colleague who has made exceptional contributions to their students, institution, and the field of college health? If so, consider nominating him or her for the NECHA President's or Louise Gazzara Awards!

Individuals may be nominated by any member or member institution of ACHA and/or NECHA.

Nomination forms available at:  
[WWW.NECHAONLINE.ORG](http://WWW.NECHAONLINE.ORG)

Submit your nomination by letter or email by

**September 3, 2010** to:

Ellen Reynolds, MS Awards Chair

University of Rhode Island

6 Butterfield Road

Kingston, RI 02881

or to [Ellen@uri.edu](mailto:Ellen@uri.edu)

SEE PAST RECIPIENTS  
ON OUR WEB SITE TOO!

# CLINICAL CHECK UP

## H1N1, MORE LESSONS LEARNED

**P. Davis Smith, MD**  
Medical Director, Health Services  
Wesleyan University



Recently, our nursing staff decommissioned our “Influenza-Like Illness Waiting Room” and converted it back to the library/meeting room it had been before. I stopped them before they could take apart our “Influenza-Like Illness Exam Room”. I freely admit that my motivation is almost entirely superstition. The third wave of H1N1 hasn’t come yet and I’m in no hurry for it to do so.

Connecticut’s State Epidemiologist recently forwarded an excellent, brief article from *Nature*

(Butler, D, “Portrait of a year-old pandemic: ‘Swine flu’ isn’t over yet, but it already holds lessons for the future” Published online 21 April 2010, *Nature* 464, 1112-1113; available online at:

<http://www.nature.com/news/2010/100421/full/4641112a.html>

I believe it is worthwhile to highlight a few findings in the article as well as to share some thoughts engendered by my reading of it. The 2009 influenza pandemic was not as devastating as we feared it might be and was certainly less so than the 1918 pandemic. The author of the *Nature* article, Declan Butler, quotes Marc Lipsitch, an epidemiologist at the Harvard School of Public Health: “Most people were less likely to get infected than in previous pandemics, less likely to get sick if they did, and less likely to die if they got sick.” Butler adds that, “with the pandemic still playing out, it may be years before we get a reliable estimate of how many deaths it has caused.” Nevertheless, there is evidence, that the first waves may have been more severe than generally realized.

Cécile Viboud and colleagues of the US National Institutes of Health (NIH) published research last month in the journal *PLoS Currents: Influenza* examining the impact of the pandemic thus far. This paper makes a conservative estimate of 7500-12,000 US deaths from H1N1, less than half the number usually caused by seasonal flu. However, H1N1 preferentially struck younger age groups than seasonal flu, with peak incidence in the 10-19 year-old age group. Viboud et al calculate that the years of life lost were three to four times higher than a virulent H3N2 season - putting this on the same order as the 1968 flu pandemic. (NB: comments posted to the online version of the article address a concern that deaths in children were preferentially among those with underlying medical illness and whose predicted life span may be less than normal. This issue is expected to be addressed in the peer review process prior to final publication.)

One of the most interesting aspects of the most recent influenza season was the way in which H1N1 appears to have outcompeted seasonal flu strains. This fact helps account for the lower than usual number of influenza-related deaths this past winter. Older people, usually the ones most vulnerable to morbidity and mortality from influenza, seem to have been able to mount a stronger, more protective antibody response. This has been attributed to previous exposure to strains with similarities to the new virus. Exactly how flu strains compete is a subject I have yet to see addressed, but the lack of other strains of flu circulating this winter was a great boon for those of us reeling from an October wave of H1N1.

As to the question of whether or not we can expect more waves of infection, the answer is, probably.

Butler quotes flu expert Lone Simonsen as saying:

“We are in a pandemic period of 2-5 years and must continue to keep our guard up.” It appears that we can expect H1N1 to be the dominant seasonal flu strain for the foreseeable future. Writes Butler: “With winter approaching in the Southern Hemisphere, the question of whether a new pandemic wave will hit countries there will soon be answered.”

Butler reviews several lessons learned from the 2009 pandemic. A recurring theme is that the demands of being on the front lines of clinical response impaired the ability of many to make timely contributions to research, assessment and planning. I suspect that many of us experienced this tension during recent outbreaks. Looking forward, I think it is imperative that our planning address finite provider time and energy resources. Particularly problematic for me was balancing the radically increased call volume.

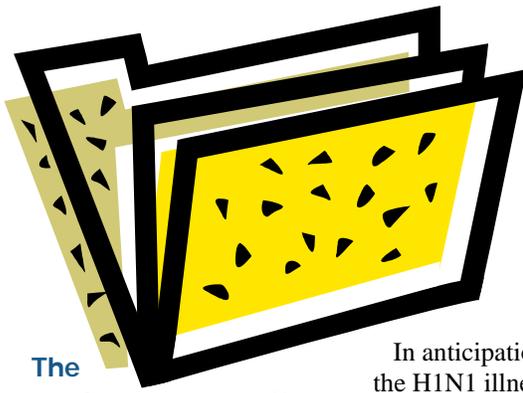
At the peak of the outbreak I was taking calls about every two hours through the night. Our call schedule works out so that I am sometimes on call five nights in a row. Sleep deprivation made managing daytime obligations that much more difficult; I was near my breaking point when the pressure finally let up.

Butler’s article prompts me to suggest several other ideas going forward. In particu-

lar, I’d like to point out what an outstanding opportunity this is for research. Insofar as the population most impacted by the pandemic matches with our populations, we were uniquely situated to experience and study H1N1 on many levels. I am hopeful that the college health community will generate significant literature on the topic. One area that would be particularly interesting to investigate is the question of whether or not campuses which had outbreaks in Spring 2009 had significantly different disease patterns in Fall 2009 from those that did not. I also think that there is a valuable opportunity to study the response of our student populations to the self-isolation recommendations we promulgated. My impression is that, especially as we got later in the outbreak, the attention to isolation was sub-optimal. Understanding how students process and respond to isolation messages could yield information that would be invaluable in the setting of a more virulent outbreak.

In summary, now that we’ve recovered from H1N1 exhaustion I hope that we won’t miss the opportunity to profit by the experience. I see fascinating opportunities for research and to leverage our position in the eye of the storm to contribute to the literature. It is also an ideal time to apply our recent experience to the planning process. Many campuses have already had “lessons learned” sessions to review the response to H1N1 and performance of existing plans. This process should be ongoing as new information becomes available. Finally, we must not let up the intensity of our campaigns for vaccination against H1N1 as well as spin-off vaccine campaigns, e.g. Pneumovax for asthmatics. If H1N1 is to be the dominant flu type for the next few years, let’s capitalize on the knowledge and get our students and staffs protected.

...the demands of being on the front lines of clinical response impaired the ability of many to make timely contributions to research, assessment and planning.



## The ADMIN FILES

In anticipation of the arrival of the H1N1 illness, a multi-disciplinary committee was organized at Brown University

Health Services (BUHS) in the spring 2009. The group was made up of staff in departments across campus that would be involved in providing services to ill students. It included representation from Health Services, Psychological Services, Athletics, Dining Services, Residential Life, the Vice President of Campus Life, the Medical School, and Environmental Health and Safety as well as a Dean from the College and one from the Office of Student Life. There was a second University-level committee that met regularly to discuss policy response and communication. Health Services was also a part of this working group. On May 19, last year, Brown University saw its first positive case of H1N1 among students.

Following the recommendations of the Rhode Island Department of Health (RIDOH), BUHS instructed students who met the criteria for Influenza-like Illness (ILI) to remain in their rooms for the duration of their illness (i.e., to “self-isolate”). The following services/supplies were provided to those students to ensure their comfort and safety during isolation:

- ✦ Food delivery
- ✦ Refrigerator/microwave delivery
- ✦ Flu kits (disposable thermometers, mask, hand sanitizer, H1N1 FAQ sheet, tissue, BUHS contact numbers)
- ✦ A 24-48 hour follow up phone call from BUHS Medical staff
- ✦ Verification of illness for academic leniency

During the summer, residents at Brown University consist predominantly of high school students in pre-college programs – which posed its own set of challenges. The summer gave us critical

# BROWN UNIVERSITY'S RESPONSE TO H1N1

experience in handling H1N1 cases, however it became evident that we would need to develop a more sophisticated mechanism of reporting and managing ILI before the return of a full student body in the fall.

To streamline the reporting process, in September 2009, Brown launched “FluWeb.” FluWeb is a Web-hosted system developed to allow our students to report their ILI, and to facilitate coordination of administrative follow-up and service provision. Very importantly, it also distributes the labor required for follow-up. The system allows students to report anytime, day or night. Students log in and provide basic information (name, phone number, etc.). When a student clicks the *submit* button, FluWeb generates an automatic email to a small group of staff indicating a new report of illness. Staff then log into the administrative section of the Web site, call the student to check in and assess needs. When the staff member clicks their *submit* button, the system generates automatic emails to any staff who need to take action for that student (e.g. food/appliance delivery, phone call by medical provider, phone call by a Dean, etc). This mechanism has allowed the work load to be distributed among a number of personnel, reduced overload, increased efficiency, and reduced error.

The “FluWeb” has received positive feedback from students, staff, and parents alike. We are currently in discussion about additional uses for this electronic tool in our institution.

Additionally, in conjunction with the RIDOH, Brown began vaccinating students on December 1, 2009. In order to manage up to 300 appointments a day, Brown implemented a self appointment scheduling system through “Online Student Health”, a module of our electronic medical records, negating the need for additional staffing. Patients were also sent an email reminding them of their appointment.

By the end of January, BUHS vaccinated over 2500 students.

*Jennifer Q. Hodshon, MPH*  
Brown University Health Services  
Manager, Operations and Administration

## Update on Advanced Practice Clinician Section of the American College Health Association



*Geraldine Taylor, MS, APRN Bentley University*

As Chair-Elect of the Advanced Practice Clinicians Section of ACHA, I would like to extend a warm welcome to all members of our section. If you have not yet registered for the ACHA Annual Meeting in Philadelphia, details can be found at:

<http://www.acha.org/AnnualMeeting10/registration.html>

There will be many wonderful sessions for everyone including sessions on evidence based strategies, norovirus, dermatology, female athletic triad, TB, travel health and many, many more great topical areas!!

The Advanced Practice Clinicians Business meeting will be held **Wednesday, June 2, Noon-1:15pm** (location tba).

This is a great chance to network and learn about new issues and ideas for APCs!

The Advanced Practice Clinicians Social will be held on **Wednesday, June 2, 5:30-7:00pm** (location tba).

Come and meet your colleagues!

# Health Promotion Notion

## Health Educators Expand their Roles through Intergroup Dialogue Initiative

Denise McGoldrick, MS, CHES  
Director, Health Education Amherst College  
[dmcgoldrick@amherst.edu](mailto:dmcgoldrick@amherst.edu)

So what's "Intergroup Dialogue"? And what does it have to do with our roles in health promotion? Intergroup dialogues are face-to-face facilitated meetings of people on campus from different social identity groups such as race, gender and religion. They are designed to offer an open and inclusive space where participants can foster a deeper understanding of diversity and social justice issues through participation in experiential activities and individual and small group reflections. The Five Colleges in western Massachusetts are beginning their second year of this process. It begins with a 3-day summer intensive to train 60 staff and faculty to facilitate 2 hour sessions during a Day of Dialogue held simultaneously on all five campuses in the fall.

One participant, Gretchen Krull from Amherst College described the experience as exciting with people from the five campuses all engaged and doing this together. Gretchen stated the training brought out misconceptions we might hold about others based on such aspects as gender and that informs how they might interact with you. It made her more aware of how being female might cause men to perceive what she says differently. After open discussion you realize that there are a lot more commonalities.

**Amherst,  
Hampshire, Mount Holyoke,  
and Smith Colleges, and  
UMass Amherst**

Dialogue deepened her understanding of her own attitudes and behaviors as well as others. When asked how this initiative has aided her work in Health Education, Gretchen said she is more conscious about devising programs that consider social identity, by asking the question "Is this materials accessible regardless of race, class, and gender, sexual orientation, religion?"

Another participant, Karen Jacobus facilitated a gender dialogue on the Mount Holyoke campus. She describes the experience as a way to expand her facilitation skills into new topic areas, ones she hasn't worked with before. Karen states "this gave me an opportunity to work across departments and with people I don't usually work with such as Facilities and faculty members. I think it's important to give people a space to have these conversations and am grateful to the colleges for initiating this".

From Smith College, Emily Nagoski facilitated a session on race for the Day of Dialogue. Emily usually tries to think about diversity when program planning, but since this training, has kept diversity in the forefront of her planning. Emily states, "It's been nice to get to know people not in my division, and many of these relationships have lasted all year." As Health Educators continue to look for ways to align our goals and objectives with those that meet the institutional mission statement, a greater involvement with issues of diversity helps to accomplish this important strategy.



## ACHA AFFILIATE NEW PROFESSIONAL AWARD, NEW ENGLAND

Krista Berube, RN  
Worcester Polytechnic  
Institute

Krista Berube will be recognized at ACHA's upcoming Annual Meeting as New England's New Professional award winner. Krista began work at her campus student health services in July 2008 and immediately became an asset to staff and students alike. In addition to her duties as part of the Campus Safety and Sexual Assault Education Teams, Krista is a sexual assault nurse examiner, to which her compassionate nature makes her ideally suited. One of her many accomplishments over the past year include organizing large-scale H1N1 clinics in a way that daily clinical services were preserved.



Krista also serves as her campus Eco-Rep; in this capacity she works with staff and students to increase environmental awareness, encourage behavior changes, and promote campus greening efforts and sustainability events and activities. Her colleagues are impressed with Krista's ability to devote so much of herself to her work at the health center while setting a good example for her students with her active and healthy lifestyle.

For more information on past winners and how to nominate someone for next year, visit:

*For more information on past winners and how to nominate someone for next year, visit:*

<http://www.nechaonline.org/awards.php>

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# THE WANT ADS

## Director of Health Education, Wesleyan University

Reporting to the Director of Health Services, the Health Education Director is responsible for coordinating a comprehensive health promotion program, primarily targeting college students. The Director works closely with the Health Services staff, Office of Behavioral Health and other relevant departments, students, faculty/staff and appropriate community agencies to sponsor and facilitate a variety of health and wellness programming initiatives. 10 month, 37.5 hours/week during the academic year. Responsibilities include:

**Educational Programming:** Proactively design and implement evidence-based health-promoting educational outreach programs and services that educate and empower students to make healthy lifestyle choices. Address health issues most relevant to a college population, including but not limited to alcohol and other drugs, sexual violence, sexual health, eating disorders, nutrition, stress management, etc. Maintain departmental website and library of health resources and educational materials.

**Peer Education:** Recruit, train and supervise Peer Health Advocate peer education group who provide peer-led prevention programming for other students. Facilitate student organization-initiated programming on health and wellness issues.

**Committee Leadership:** Chair campus-wide Alcohol and other Drug Committee. Oversee Biennial Review process and implementation of strategic plan for alcohol and other drug prevention efforts utilizing evidence-based environmental management practices. Build partnerships with relevant stakeholders in an effort to create campus-wide change.

**Training:** Coordinate Sexual Assault Response Team (SART) training efforts for faculty, staff and students. Provide, plan and present training on health/wellness issues to various student leaders and groups, including peer education groups. Coordinate health/wellness training programs for faculty and staff groups, as needed.

**Student Contact:** Serve as a resource on issues related to health and wellness, and make referrals to campus and/or local support services. Develop and provide individual and group-based educational interventions in collaboration with campus judicial officers. Develop contacts with student leaders and encourage student participation in the planning and implementation of health/wellness programming. Advise health/wellness-related student groups and organizations.

**Assessment & Evaluation:** Coordinate assessment, needs analysis, and evaluation processes of health/wellness programs and services. Actively seek opportunities to interact with students in order to be aware of current student issues and concerns. Research and benchmarking as necessary.

**Administrative:** Oversee departmental budget and expenditures. Serve as a resource person for the University community and represent the University on relevant community-based consortia. Assist with development of student services initiatives. Hire, train and supervise work study students. Perform other duties as assigned.

**Minimum Qualifications:** Master's degree in Health Education/Promotion, Public Health, Student Development, or other related field. Three to five years progressively more responsible work experience in a college/university environment. Familiarity with alcohol and other drug prevention initiatives, sexual assault/violence prevention efforts, and other health and wellness issues relevant to a college population. Knowledge of current evidence-based health promotion practices and theories. Ability to work effectively with a diverse student body, including an understanding of health/wellness issues of diverse populations. Excellent communication and interpersonal skills.

**Preferred Qualifications:** Experience working in a small, private, liberal arts institution. CHES certification preferred.

To apply for this position please go to <https://careers.wesleyan.edu/applicants/jsp/shared/frameset/Frameset.jsp?time=1271943307898>

## EASTERN CONNECTICUT STATE UNIVERSITY Registered Nurse | Assistant Director, SHS

🔗 10-month appointment 🔗

**Qualifications:** Bachelor's degree in Nursing; current state of CT RN license; 3-5 years experience as a secondary school nurse or as a nurse in a primary care setting; experience in a university/college health setting a plus. The successful candidate will be part of the clinical team at SHS, but also have the ability to work independently in assessing common illnesses and determining a general plan of care for the student. In addition, he or she should be able to relate well to young adults; offer a sensitive, non-judgmental attitude and the necessary guidance toward health promotion and health education.

**Position Description:** As the RN member of the Student Health Service, the successful applicant will see students presenting with common acute health problems and triage accordingly; assist the physician with procedures and patient visits; maintain health records; provide health education/information to the campus community; serve as health liaison for the University to students, parents, outside medical groups and private practitioners; assist with day to day management of the Health Service; attend workshops and meetings as a representative of the office, and implement office policies.

**Location:** Eastern is Connecticut's liberal arts university, with a student population of about 5000, more than half of whom are residential. Willimantic is a small city of about 15-20,000 in beautiful northeastern Connecticut, only 30 minutes from Hartford, 90 minutes from Boston, and about two hours from NYC.

Send your resume or CV along with 3 letters of recommendation to:

*Karen Mason, CSU*

*Administrative Assistant to the Vice President*

*Division of Student Affairs, Eastern Connecticut State University  
83 Windham Street, Willimantic, CT 06226*

## Mid-Level Provider: Physician Assistant/Nurse Practitioner Colby College Student Health Center, FT, Academic Year

Colby College seeks to hire a mid-level provider to work in the Student Health Center. To work closely and in collaboration with the Medical Director, the PA/FNP will diagnose and treat student illnesses/injuries and assure continuity of care between the student, Health Center, Athletic Trainers, and other community agencies and resources. Responsibilities will include care of infirmary observation patients, outpatient appointment visits, coverage of athletic events, performing minor procedures, providing in office coverage as well as "on-call" coverage. Candidates must be comfortable with all aspects of student health care. Must also have an interest and/or experience in providing care to student athletes.

Qualifications include:

- Graduate from an accredited Physician Assistant program. Licensed as a PA/NP in the state of Maine.
- Three years experience as a Physician Assistant/NP, preferably in Family, Emergency, Adolescent or Pediatric Medicine
- Ability to work collaboratively with nurses, physicians and Health Center support staff
- Ability to communicate with students and parents in a clear, concise and compassionate manner

Colby College is an AAAHC accredited student health service that provides comprehensive care to the students of Colby College.

Interested candidates please send 1 copy of a letter of application, 1 copy of a resume with names and phone numbers of 3 references to:

Search Committee/Physician Assistant  
Human Resources  
Colby College  
5500 Mayflower Hill  
Waterville, ME 04901-8855

## WANT ADS , continued

### Systems Administrator for Medical Technologies Operating Systems Programmer/Analyst 2 or 3 (UCP 7 or UCP 9) Student Affairs Information Technology

The Department of Student Affairs Information Technology at the University of Connecticut is seeking a full-time Systems Administrator for Medical Technologies to provide technical expertise to the operation of the University's Student Health Services' medical technology systems and subsystems. This is an outstanding opportunity to enhance technology services in a progressive and dynamic technology environment.

Minimum qualifications include a Bachelor's degree in a computer-related field (five years of appropriate technical experience will substitute for the Bachelor's degree), at least two years of technical experience which demonstrates a good working knowledge and understanding of enterprise-wide hardware and software (this experience is in addition to the five years of appropriate technical experience which may substitute for a degree); good interpersonal skills including the ability to work collaboratively in a team-oriented, fast-paced information technology environment; and the willingness and ability to work a flexible schedule as required such as evenings and occasional weekends.

Preferred qualifications include a Bachelor's degree in computer science or other area of study requiring advanced problem-solving skills; experience working with medical systems such as PyraMed, Clinlab, xPACS, or QS/1; experience with HIPAA compliance; experience with desktop computer virtualization and/or terminal services; and experience with Windows, Linux, and/or Oracle configuration and management.

A complete job description can be found at <http://www.dsa.uconn.edu>.

Position level and starting salary is commensurate with qualifications and experience. A comprehensive benefits package is included.

Applicants should submit a complete application (cover letter, resume, and contact information for three professional references) in PDF or Word format by May 3, 2010 to [StudentaffairsIT@uconn.edu](mailto:StudentaffairsIT@uconn.edu) mentioning Search #2010028 in the subject. Printed copies may be mailed to: Virginia Eaton, University of Connecticut, Department of Student Affairs Information Technology, 2011 Hillside Road, Unit 1228, Storrs, CT 06269-1228. The anticipated start date is June, 2010. (Search #2010028)

*In keeping with our commitment to build a culturally diverse community, the University of Connecticut invites applications from women, people with disabilities, and members of minority groups.*

### ACHA Association Liaisons Selected

The ACHA Executive Committee, on behalf of the Board of Directors, selected **Chad Henderson, MBA, FACHA, University of Rhode Island**, as the new Primary Association Liaison to the Joint Commission Ambulatory Care PTAC for a two year term (January 1, 2010 – December 31, 2011).

The Executive Committee, on behalf of the Board of Directors, selected **W. Mark Peluso, MD, Middlebury College**, as the new Association Liaison to the Female Athlete Triad Coalition for a three year term (February 2010-February 2013).

ACHA thanks all members who expressed interest and submitted requested information in consideration for these positions. We encourage all to maintain affiliation and interest and reapply upon the next announcement for these or other liaison positions. We also encourage you to continue being involved in ACHA in other ways through your section or regional affiliate activities or by joining one of our many coalitions, committees, or task forces.

Please visit:

[http://www.acha.org/About\\_ACHA/Liaisons.cfm](http://www.acha.org/About_ACHA/Liaisons.cfm)

for more information about ACHA's partnerships with other national health and higher education organizations.

## BACCHUS NETWORK AREA 10 CONFERENCE 2010

Joleen M. Nevers, MAEd, CHES

President, New England College Health Association  
Health Education Coordinator, University of Connecticut

The recent 2010 BACCHUS Network Area 10 Conference at Boston's Suffolk University was a great success. Hosted by Liz Drexler-Hines, Assistant Director of Health and Wellness Services, and her peer educators (SUPERS\*), they welcomed 170 students and staff from five states, representing over 19 different peer education groups.

Students were engaged in various activities and programming throughout the day. The conference included a keynote speaker and 20 break-out sessions. The keynoter, Laura DeVeau, Director of Residence Life at Mount Ida College (Newton, Mass.) utilized her skills as a former comedian and current experiences within Student Affairs to engage the audience in a presentation that focused on leadership and its far reaching affects. Break-out session topics encompassed alcohol, drugs, spring break, sexual health, stress management, World AIDS week, skin cancer prevention, social justice issues, sexual assault and overall wellness.

In addition to the break-out sessions for the students, we offered an in depth session for the advisors. Samuel Lurie, Director of Transgender Training and Advocacy, provided a training called: *Own the Room: A Model for Teaching Presentation Skills and Concepts to Peer Educators to Boost Effectiveness and Retention*. The break-out sessions and the advisor training were all positively received by the participants.

The conference concluded with an awards ceremony where the following colleagues were recognized:

- **Outstanding Peer Educator:** Hannah Freedman, Roger Williams
- **Outstanding Advisor:** Beth-Anne Vieira, UMass Dartmouth
- **Outstanding Program:** Art4AIDS, The UCONN Sexperts, University of Connecticut
- **Outstanding Peer Education Group:** DAPAs, Harvard University
- **Outstanding Alumnus:** Stephanie Moran, Central Connecticut State University
- **This year's recipient of a complimentary registration to General Assembly 2010:** Michael Goodwin, Southern Vermont College

### Spring Conference Scholarship Winners:

- Amy Cavanaugh, Bridgewater State College
- Marissa Massa, Western New England College
- Lisa Currie former Director of Health Education at Wesleyan University and our Area 10 Consultant for over five years took a position at Northwestern University in her home state of Illinois.
- Ryan Travia from Harvard University stepped up to this challenge and is the new Area Consultant for Area 10.
- Liz Drexler-Hines, from Suffolk University and the recent host of our Spring 2010 Conference, was recently officially appointed as the State Coordinator for Massachusetts.

For more information about the BACCHUS Network visit:

[www.bacchusnetwork.org](http://www.bacchusnetwork.org)

If anyone in New England has interest in hosting a future conference please contact a member of the Area 10 Leadership Team. To do so please find our contact information at:

[www.bacchusnetwork.org/area10.asp](http://www.bacchusnetwork.org/area10.asp)

\* Suffolk University Peer-Health Education Resource

# 2009-10 NECHA Board of Directors

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Coordinator, Health Education  
University of Connecticut  
860 486-0772 [joleen.nevers@uconn.edu](mailto:joleen.nevers@uconn.edu)

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Tufts University  
617 627-5883 [Margaret.Higham@tufts.edu](mailto:Margaret.Higham@tufts.edu)

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781 891-2222 [gtaylor@bentley.edu](mailto:gtaylor@bentley.edu)

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Kathy MacLachlan, MS, ANP  
Syracuse University Health Center  
315 443-9017 [kmmaclac@syr.edu](mailto:kmmaclac@syr.edu)

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Vanessa Britto, MD, MSc  
Director, Health Services  
Wellesley College  
781 283-2810 [vbritto@wellesley.edu](mailto:vbritto@wellesley.edu)

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Director, Health Education  
Bowdoin College  
207 725-3000 [shayes@bowdoin.edu](mailto:shayes@bowdoin.edu)

Jennifer Hodshon, MPH \*  
Manager, Operations and Administration  
Brown University  
401 863-7880 [jennifer\\_hodshon@brown.edu](mailto:jennifer_hodshon@brown.edu)

Denise McGoldrick, MS, CHES \*\*  
Director, Health Education  
Amherst College  
413 542-2760 [dmcgoldrick@amherst.edu](mailto:dmcgoldrick@amherst.edu)

John Miner, MD \*\*  
Co-Director, Psychological Counseling Services  
Williams College  
413 597-2353 [John.A.Minor@williams.edu](mailto:John.A.Minor@williams.edu)

Peter Davis Smith, MD \*\*  
Medical Director, Health Services  
Wesleyan University  
860 685-2470 [pdsmith@wesleyan.edu](mailto:pdsmith@wesleyan.edu)

## ADMINISTRATIVE DIRECTOR | NEWSLETTER EDITOR

Julie Nelson Basol  
JNB Marketing, LLC  
741 Hand Road  
No. Ferrisburgh, VT 05473  
Ph: 802 425-3936 Fax: 802 425-5507 [Julie@NECHAonline.org](mailto:Julie@NECHAonline.org)



Board Members L to R: Smith, McGoldrick, Reynolds, Taylor, Hayes, Higham, Wachtel, Hodshon, Nevers. Not pictured, John Miner

## ACHA NEWS IN REVIEW

*Vanessa Britto, MD, MSc ACHA - Region V Representative*

The American College Health Association is putting final touches on what is sure to be a memorable annual meeting, *We the People of College Health*, scheduled for June 1 – 5, 2010 in historic Philadelphia. The meeting's planning committee has worked tirelessly to assemble an exciting program. The membership is responding enthusiastically based upon the brisk response seen since the opening of the registration period. Preregistration extends to May 13 but ACHA encourages all who plan to attend not to wait!

On March 23, 2010, the Patient Protection and Affordable Care Act, as part of the Obama Administration and Congress' health care reform agenda, was signed into law by President Barack Obama. Throughout the period of contentious debate that shaped the many components of the Act, ACHA stayed well informed and continues to communicate to appropriate lawmakers the concerns and opinions that are in the best interests of college students across the country.

ACHA has been keenly interested in "protecting the ability of college health insurance plans to continue to benefit from the 'group price' rating that has been essential to maintaining affordability of many of our college health insurance plans". An additional example of one of the provisions within the bill that will likely have an important impact on health insurance coverage of

college students (beginning as soon as September 2010) is the extension of parental health insurance coverage to dependents until their 26<sup>th</sup> birthday. Further, the Act that will have an explicit impact on health insurers, requiring the full disclosure of administrative overhead and executive expenditures. In early April 2010, New York Attorney General Andrew Cuomo, forwarded a letter to over 300 colleges and universities advising them to "review their policies related to student health insurance coverage and to modify them, if warranted, to ensure that they sponsor fair plans". Click on the following link to review Attorney General Cuomo's letter:

<http://www.nystudenthealth.com/pdfs/Letter%20to%20Schools%2004-06-10.pdf>

In other news, ACHA has linked professional arms with MTV, the Kaiser Family Foundation, Planned Parenthood, and others in support of the popular project "It's Your Sex Life", a public information campaign on HIV/AIDS, STI awareness, and other sexual health issues. ACHA has begun to promote the "GYT: Get Yourself Tested/ Get Yourself Talking" component of this high energy project. ACHA is encouraging the membership to visit the GYT Web site, download the GYT Toolkit and get college health services actively involved. Visit the Web site for more information:

[www.gytinow.org](http://www.gytinow.org)

