

The Commonwealth Fund
Commission on Women's Health
630 West 168th Street, Room 2-463
New York, NY 10032

**Notes on
College Health Service Directors Meeting**

The Commonwealth Fund Commission on Women's Health convened a meeting of the college health service directors of selected women's and former women's colleges and Columbia University at Barnard College on February 28, 1994. The meeting was convened to help the Commission and the Commonwealth Fund determine what might usefully be done to address the health needs and issues of young women, promote their awareness of the health problems of adult women, and foster informed use of health care services and the practice of healthy behaviors. A list of participating college health service directors and guests is attached.

Julie Sochalski, Director of the Doctoral Program, School of Nursing, Columbia University, and Linda Juszczak, Doctoral student, presented data from the Commonwealth Fund Women's Health Survey on women age 18 - 24 years. A written summary of the presentation is appended to these notes.

Participants had been asked in advance to complete a questionnaire about urgent physical and mental health issues of college age women. The results were shared in a written summary which is appended to these notes. Additional copies are available from the Commission office.

While the population of young women in the Survey cannot be directly equated with a population of college women, the Survey did surface many of the same concerns identified by the Health Service directors. These concerns include communication problems with providers, eating/nutrition/weight issues, problems of self-esteem and depression, risky behaviors, and

problems with violence and abuse. Unless dealt with, these problems could lead to less than optimal healthy lifestyles in the future and cause these women serious health problems.

The discussion by design was wide ranging and informal.

Several of the participants reported on some recent trends which were causing them concern including:

- dramatic increases in STDs
- increased pregnancies and more students keeping their babies
- increased onset of mental illness
- increased number of entering students who have been hospitalized for mental illness
- increase in abnormal paps
- large proportion of illness that is stress related
- increased smoking
- large numbers of eating disorders
- particular stresses of non-majority students.

Participants discussed some programs they have underway to deal with these problems on a population as well as an individual basis. Among the programs described were courses in women's health for academic credit; a meditation based stress reduction program, surveys of students, and peer education groups working with a variety of styles and formats covering topics such as sexuality, first pelvic exams, contraceptive choices, HIV, assault, rape, eating disorders and general healthy behaviors.

Several major themes emerged from the day's discussion.

- Give women's health issues an academic home by creatively integrating women's health into the academic curriculum. It was thought that making the Health Service part of the academic enterprise and developing an academic course in women's health will increase student recognition and respect for women's health issues. These issues

may then be seen as more central to women's lives than if they are pursued solely in the context of "physical education" or "health education."

- Mount a social marketing campaign promoting healthy behaviors and images of healthy women of many descriptions. Use technology and media that is used by young adults, for example, E-mail and computer information systems. Do some market research using focus groups to determine what effective communication strategies might be. Concentrate on positive messages. Look at the young women who appear to cope well with stress, self esteem and other health issues and what factors and skills contribute to their success. Extend the marketing campaign to younger teenagers to promote healthy behaviors, self esteem and reduce levels of violence and victimization.

- Promote an awareness at the highest level of leadership of the college, among faculty and senior administrators, of the health problems experienced by their students. Encourage the philosophy that the mission of a college includes not only caring for students when they are ill, but also teaching the skills of healthy living. Help colleges take responsibility for planting the seeds of healthy lifestyles for a future impact on these women and their children.

- Understand that there is particular stress for students who come from backgrounds different than the majority of students: minority students, students who come from different socio-economic backgrounds and students who are the first in their families to attend college. Define and study the impact of sources of these factors on stress levels and mental and physical health. Help health care providers improve their competency in understanding cultural diversity and possible links to ill health. Understand that the concept of wellness is perceived differentially across groups. Do not forget that non-dominant groups may behave and perceive and value in ways other than the dominant group.

- Smoking is an important issue that must be addressed; particularly considering its interrelationship with weight concerns, stress and depression. Despite extensive public education efforts many young women do not know the facts about smoking. Get the facts out about smoking and help young women act on that knowledge.

- Evaluate programs that are currently in place to see how effective they are. Determine if the high utilization patterns and educational emphasis of college health services are important for success. Evaluate how health issues intersect and influence each other, such as the relationship of self esteem, smoking and eating disorders. Explore how to replicate successful strategies and programs to other locations.

- Evaluate national health care reform as it affects college students and 18-24 year old women in general. Advocate for their need for access. Be mindful of the non-traditional roles of women as single parents and the influence of violence and economic levels on health behaviors. Provide help for young women making health insurance and health care choices as they leave college.

- Participate in the training of health providers by being a learning site for medical/nursing schools. This relationship can also increase the number of researchers in the college health service environment.

- Develop a common data base for this group of colleges with baseline information on nutrition, attitudes, behavior, mental and physical health gathered at entry, exit interviews with graduates, and follow up with alumni. The creation of an ongoing data base of students and alumni by all schools would provide a larger base for evaluation of a variety of techniques and topics. It was noted that several schools have medical records dating back many years that have not been organized, tabulated or evaluated.

Enclosures: Participants List
 Commonwealth Fund Women's Health Survey (18-24 years old) Summary
 Questionnaire Responses Summary