

Distressed and Dehydrated: Stigmatization and International Student Mental Health

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Tags

Crisis-Management; Cross-Cultural Issues; International Student and Scholar Services; Management and Operations; Non-Formal Education; Partnerships; Primary and Secondary Education

Setting

At a large, private U.S. University, each department operates as its own unit. The Office of Summer Programs (OSP) has 40 full-time employees responsible for non-degree secondary education programming. Programming is offered in the U.S. and abroad.

Each summer, OSP hosts International Academy, a two-week non-degree/not-for-credit conference at the U.S. campus. Approximately 80 Temporary Program Staff are hired to support the Academy. Academically talented high school aged international student group organizations attend and live in campus residences. Group organizations sign up in the fall for the following summer. Each organization sends at least one chaperone from the home country selected by the facilitating group organization. Students attend the program once, but group organizations tend to return annually. The student breakdown is approximately 35% Latin American countries through one group organization, 35% from mainland China through multiple group organizations, and the remaining students vary greatly in diversity, representing all continents, except Antarctica. Students take a variety of half-day workshops and are exposed to a wide range of academic resources on campus as part of this unique growth opportunity to explore all that university campuses have to offer. A secondary outcome of the program is developing intercultural communication skills.

While some participating group organizations are high schools, others like ChinaCAMPER are for-profit organizations that do not have long lasting relationships with their students or chaperones.

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Case

Information presented in this case may be triggering for some readers. Content references self-harm.

Staff and students are provided with refillable water bottles for the duration of their stay on campus. At the nightly residence check-in meeting, Javier, a temporary Head Counselor, reminds his students and chaperones to drink extra water due to the hot weather. Xu, a student from China traveling with ChinaCAMPER, lost her water bottle two days ago, and has not requested a replacement.

The next morning Xu complains to the ChinaCAMPER chaperone that she has a headache and wants some medicine. The chaperone tells Xu to get some food in the dining hall first. After breakfast, but before class, Xu complains to Javier that she has a headache and her chaperone would not give her medicine. Javier provides Xu with headache medicine from the first aid kit. Javier does not complete an incident report which is required any time the first aid kit is accessed.

At dinner, Xu tells the chaperone that she still has a headache. The chaperone asks Javier if they can go to the nurse. Javier accompanies Xu and the chaperone to the camp nurse. The camp nurse determines that Xu has signs of severe dehydration. Xu admits in the conversation that she lost her water bottle and has not been drinking water for “a few days.” The camp nurse recommends Xu be taken to the on-campus hospital for intravenous rehydration. Hospital trips require a higher-level temporary staff member. Javier calls the program’s 24/7 emergency number and temporary Residential Director, Amelia, answers.

Javier summarizes the situation to Amelia. Amelia asks Javier to write an incident report and drives a vehicle to the Nurse station to pick up Xu and the chaperone for the trip to the hospital. While driving, Amelia asks the chaperone to notify Xu’s emergency contact, Xu’s mother, that they are going to the hospital.

When inserting the needle, the hospital nurse notices that there are signs of “recent” self-harm on Xu and expresses concern about these in combination with Xu’s dehydration. Xu’s medical form provided to OSP by Xu’s mother does not have any information about a history of mental illness and instead states that she is in “perfect” health in each category. Given this information, Amelia asks Xu’s chaperone to contact Xu’s mother about the signs of self-harm. The chaperone states that she will keep an eye on Xu and does not think that it is necessary to bother the parent again. Amelia insists. Over speakerphone in front of Amelia and Xu, the chaperone calls Xu’s mother, who does not address the self-harm directly, but does not seem surprised, she states, “Next week, Xu goes to a new boarding school in Switzerland. She is not your problem next week. She is your job this week. Go to the hospital again if she needs more water. Please don’t call me again unless it is a real emergency.”

Discussion Questions

As you consider this case, discuss:

- There are multiple communication breakdowns or problems in this case. Identify each and determine how you might limit them for the next summer’s International Academy.
- What are Amelia’s next steps? What should be done by OSP between now and the program end date?
- What are the challenges for short-term non-degree seeking program staff when mental health concerns are raised? By contacting Xu’s mother, have OSP’s and ChinaCAMPER’s ethical and professional responsibilities to Xu been met? Is there anything else that can be done for Xu longer term?

- What additional training or orientation sessions might be useful for visiting chaperones and temporary program staff?
- How might updates to the student health form better communicate the usage and importance of sensitive medical information to different cultural audiences? What do program managers expect from an emergency contact? How might the expectations of an emergency contact be better communicated?
- What feedback should be given to ChinaCAMPER's full-time staff representatives?