

Student Travel and Study Abroad: Mental Health Issues and Awareness

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The Value of Foreign Study and Travel

Foreign travel for students in the U.S. is becoming more widespread and complex, with many students traveling to non-traditional destinations. At the same time, many universities and colleges are investing in innovative study-abroad programs to maintain a competitive advantage. The duty of these scholastic institutions is to provide for the wellbeing, safety and security of students. This legal obligation is challenged by a growing problem: Students with a mental illness who travel outside the country often are in environments where their conditions may worsen, potentially creating substantial liabilities for the sponsoring institution.

Colleges and universities in the United States appreciate the value of study-abroad programs for students. According to the most recent statistics compiled by NAFSA: Association of International Educators, 325,339 college and university students studied abroad for credit during the 2015-2016 academic year, representing more than 1.6 percent of all U.S. students enrolled at institutions of higher education.¹ Globally, more than 4.1 million students live abroad for study, according to UNESCO.²

Students seek opportunities to live, work, and study with other students from different countries and cultures, either in recognition of the changing nature of the global workplace or simply in pursuit of a different kind of educational experience.

Student travel is becoming more adventurous, with students expanding their interest beyond traditional destinations in Europe to Latin America, Africa and the Asia-Pacific countries. In these countries, they are exposed to new and unfamiliar environments that may pose unique physical and mental health challenges.

Adapting to the unique circumstances and social pressures of a particular country – different laws, regulations,

language, diets, cultural norms, and expectations – may create stress and anxiety triggering behavioral health issues. For example, during protests and riots in Cairo, Egypt, a young graduate student was arrested for photographing a group of demonstrators in front of a local government building. Unbeknownst to the student, taking photographs of a military installation or government building is strictly prohibited. For students with mental health issues, a situation like this may exacerbate their mental health condition.

It is imperative that schools implement programs designed to assess student mental health and adequately prepare them to cope with stressful experiences abroad.

Mental Health Myths and Challenges

Numerous studies indicate that many college students are prone to anxiety, depression and other mental disorders. So pervasive is this situation that a 2017 report by The Chronicle of Higher Education identified “student mental health” as the top concern of 66 percent of student affairs administrators.³

According to data from the Center for Collegiate Mental Health at Penn State University, 26 percent of students out of 139 institutions who sought help said they had intentionally hurt themselves and 33.2 percent had considered suicide.⁴ And according to the 2016 UCLA Higher Education Research Institute survey of freshmen, nearly 12 percent say they are “frequently” depressed.⁵ The Center for Collegiate Mental Health indicates that 150,483 students at 139 participating educational institutions sought mental health counseling in 2016, up from 100,736 at the same number of schools the prior year.⁶ The study cited several disturbing trends:

- School counseling centers are evaluating an increasing number of students who represent “threat-to-self” risks.



- Such centers are providing 28 percent more “rapid-access” service hours per client, compared with scheduled student service appointments.
- Students’ self-reported distress levels for social anxiety, generalized anxiety, and depression have increased each year over the past six years.
- Nearly one-third (33.2 percent) of students seriously considered attempting suicide, and more than one-quarter (25.5 percent) of students purposely injured themselves without suicidal intent.
- Nearly one in ten (9.3 percent) of students made a suicide attempt.

Psychiatrists and psychologists have provided several reasons for the rise in student mental health crises, including the competitive nature of the educational environment, economic and family pressures, distance from family members and friends, the desire for perfection, existential confusion, increased use of alcohol and drugs, the dehumanizing effects of technology, and the social challenges that arise when meeting new people on and off campus, among other factors.⁷

College often is a time of social experimentation and self-discovery. Many students break free from the conforming pressures of high school to express authentic opinions and preferences. When traveling or studying abroad, their lifestyle choices may be rejected by cultures that find such personal characteristics and behaviors strange or distasteful, intensifying their feelings of stress and anxiety.

Environment and Mental Health

The research clearly demonstrates a rising tide in mental health issues for students. Such risks are likely to increase when studying abroad.

“A change in environment, particularly a region of the world with a culture that is remarkably different from the U.S., can trigger feelings of isolation, loneliness and depression, whether these issues have been previously treated or not,” said Prof. Robert L. Quigley, MD, D.Phil. “This is not to say that a student traveling to study for a year in London will be free from such concerns.” Quigley is Senior Vice President and Regional Medical Director, Americas Region, of International SOS, a global medical and travel security services firm.

Dean Hoski, Assistant Vice President, Scholastic, Accident & Health, Chubb

North America, advised scholastic institutions need to focus on preparing students for what to expect in a foreign environment. “It’s important to encourage students to keep in touch with the school regarding what’s going on in the new environment,” Hoski said. “You want them to feel comfortable in reaching out when something happens to know how to react to the situation. ...Students need real-time access to information to help them better understand how to adapt to their current environment.”

Legal and Financial Implications for Universities and Colleges

Colleges and universities have a Duty of Care obligation to assume obligation for protecting students from foreseeable health and security risks when studying or traveling abroad on school-sponsored or school-contracted programs. Unfortunately, many schools are unprepared to address mental health issues that may affect a student’s educational experience.

“Many educational institutions are not equipped or even aware of how to provide mental health services to their students traveling abroad,” Quigley said. “At the same time, the response to the needs of a distressed student may be complicated by language barriers and cultural differences.”

A travel assistance provider with a strong global network and well-qualified experts proficient in multiple languages and diverse cultures can assist this response. Equally important is the need to provide a comprehensive insurance program that covers the unique risks of travel outside of an individual’s home country.

Privacy laws limit a school’s ability to identify students with mental illnesses and, consequently, a school is unlikely to know whether any of its students suffer from anxiety or depression or a genetic predisposition to a serious mental illness, such as bipolar disorder and schizophrenia. Notwithstanding this

challenge, a school still has a duty to reasonably anticipate and provide the necessary care for these students.

“Unless a student offers to disclose a mental health issue, universities are at a loss to know this is the case,” said Quigley. “Further, many students with such conditions are reticent to share such personal information and may be fearful of being stigmatized.”

A Complex Challenge

Nevertheless, the alarming statistics on the increase in the number of students utilizing school mental health services clearly indicates a growing behavioral health issue crisis. Scholastic institutions are stuck between a rock and a hard place – aware of the problem yet hamstrung to do much about it.

Local standards in the host country pose another dilemma. If a student runs out of a prescribed medication, the particular drug may not be available in the host country or may require a local provider to prescribe. In some cases, the student may choose to discontinue use of a medication which may trigger a mental health crisis or lead to other negative consequences. Many times, local standards of medical care differ dramatically from the western standards of care prevailing in the U.S. Adequate care may simply not be available in the host country.

To offset student health risks while abroad and the related legal and financial exposures of the scholastic institution, many schools purchase emergency travel/accident & health insurance. “Many domestic health insurance policies do not address the risks associated with foreign travel, resulting in coverage gaps,” said Hoski.

For example, some policies may exclude or significantly limit coverage for mental illness. Prescription drug, family reunion,

medical evacuation, and repatriation benefits are critical coverage items. “Assistance programs should, at a minimum, include medical referral, telemedicine and medical monitoring services and the ability to arrange emergency transports and to make other emergency travel arrangements,” Hoski added. “Optimally, these services should also include pre-trip assessments, travel education programs and access to consultative and on-the-ground security services.”

The need for immediate consultation services is illustrated by the study abroad experience of a student in Japan. Fearful the medication he was taking for a depressive disorder would run out before the end of his trip, the student cut his doses in half. Unfamiliar with local medical protocols, he found it difficult to find help and began experiencing suicidal ideation and exhibiting violent behavior.

“Most colleges/universities are not equipped or even aware of how to provide behavioral health services ‘off campus’ in another country,” the *Journal of Global Mobility* stated, adding that study abroad team leaders typically are untrained and un-rehearsed to intervene when a crisis rears.⁸

Case Studies Underline What Can Happen

Coping with a student who has a mental health episode while away on a school-sponsored study/travel excursion is complicated, as these two examples underscore. Each story provided by specialized insurance brokers and is drawn from actual claims experience.

“One of our larger university clients sponsored a tour of the Caribbean Islands with some faculty members and about 25 students in 2016, with the ship stopping off at different islands,” said Dean Sandonato, account executive at

Arthur J. Gallagher & Co. “A student experiencing mental distress jumped off the ship into the ocean.”

Fortunately, the student survived without life-threatening physical injuries. “He was brought back onto the ship and stabilized, but many of these commercial cruise ships have a policy that once someone willingly jumps off the ship they must be detained on land, out of concern they will jump off again and create liability for the ship owner and passengers,” said Sandonato. “The closest land in sight to detain the student was Cuba. The ship docked there to drop the student off and he was transferred to a local hospital for physical and mental health treatment.”

The situation deteriorated further from there. Medical authorities in Cuba required the student to be treated on the island for a mental health condition for a period of nearly two weeks. The medical facility did not accept U.S. dollars to pay the medical bills, requiring the travel assistance provider to provide a guarantee of payment.

Fortunately, the school’s travel health insurance policy provided full coverage for the student’s pre-existing conditions and mental health disorders. “This meant that both the medical bills incurred in Cuba and the cost of the medical repatriation to the U.S. were covered in their entirety,” said Sandonato. “The insurance also picked up the expense of flying the student’s parents to Cuba to be with their child and to accompany him home for continued follow-up care.”

Total costs incurred as a result of the claim exceeded \$50,000. Said Sandonato, “What started off as a spring break cruise turned into a catastrophic event for the scholastic institution, resulting in a significant high-dollar claim on their policy.”

Kerry King, worldwide partner at Mercer Health & Benefits, provided the example of a student with a mental health condition on a study abroad program in China. “The student stopped taking his medications and became disruptive and suicidal,” said King. “The study abroad team leader and local staff isolated the student and watched him closely to make sure he wouldn’t hurt himself. But he became even more disruptive.”

The team leader, believing she had no other reasonable alternatives, contacted the local authorities in China for medical assistance. “This was a risk because there is always the possibility in a foreign country that a student experiencing a mental crisis could be taken to a mental institution,” said King. “In this case, he was brought to a hospital for an assessment and held there for several days to determine if he could be flown home. Finally, the decision was reached that he could be released and sent back to the U.S.”

After boarding the plane that would take him back home, the student’s behavior was extremely erratic. The crew felt he was too dangerous for the aircraft to depart and he was escorted off the plane and taken to a mental health facility. “His parents were unable to fly to China to assist the situation, which was being handled entirely by the study abroad staff,” said King. “They were trained to oversee the students’ travel and study, but they had no training in medical care. Fortunately, the third attempt to fly the student home was successful.”

Key Considerations and Solutions

Schools that fail to fully appreciate these complex risks are often unprepared to take appropriate actions when a student mental health crisis emerges. According to a study sponsored by the University Risk Management & Insurance Association, educational institutions have “extremely poor” responses to duty



of care, especially as it relates to mental health issues. Scholastic institutions and their decision makers (human resources, travel, operations, university presidents) are ranked worst among all industries and sectors in all aspects of duty of care management, including lower risk perceptions, awareness of duty of care, and ratings on all duty of care practices.⁹

To manage the mental health risks of students traveling and studying abroad, many colleges and universities need to consider retaining the expert services of specialized insurance companies and medical and travel security assistance providers. These firms often partner together to assist schools to better identify and understand student behavioral health issues, prepare for potential emergency situations in different geographic regions of the world, and develop policies and procedures to respond to these incidents. “The overarching objectives are to improve student health outcomes and ensure compliance with duty of care standards,” said Hoski..

More colleges and universities need to consider the value of engaging such provider organizations. “Smaller colleges with a study abroad program sending a handful of students to a foreign location for a week or two may feel they don’t need a robust travel assistance plan,”

said Sandonato. “They downplay the need, thinking the exposure is small. They’re wrong. We’ve seen instances where the crisis receives significant media attention, resulting in litigation and a public relations crisis for the school that can affect its enrollment.”

The providers can reduce the likelihood of such devastating outcomes occurring and supporting all students, faculty, families, and impacted individuals in crisis is powerful and a holistic way to address duty of care. “There is a synergy that both providers bring to the subject,” said Quigley. “A sort of triangle is created between the school, the insurer and the medical and travel security assistance company, ensuring a comprehensive approach to the mental health risks of students studying and traveling abroad.”

King agreed. “The organizations can help identify students most at risk of a mental health crisis, by getting their parents more involved in the planning process,” she said. “For example, the parents can be asked to contact the primary care provider to tell the physician the student is going abroad and may need access to medications that may not be available in the country. By doing this, the school respects the student’s privacy and helps the college adhere to its `duty of care’ obligations.”

Conclusion

The increase in the number of college students traveling or studying abroad via school-sponsored programs is a positive development, expanding the students' global perspective to better understand the culture and socioeconomic conditions that exist outside the United States. However the newness of the environment for students can create stress and anxieties and for those with an underlying mental health condition, the excursion can result in the need for immediate medical treatment. Colleges and universities have a duty of care to protect their students' health and security both on and off campus in school-sponsored activities. To address this obligation and enhance student health outcomes, scholastic institutions should consider the value provided by specialized insurance companies and travel assistance providers that have engaged in a strategic partnership to provide expert services.

Addressing Duty of Care for Student Mental Health Crises

Chubb and International SOS formed a preferred partner relationship to provide their respective services to assist colleges and universities in managing the complex risks inherent in student study abroad programs, including mental health issues. Schools retaining these services can expect the following:

- Establishment of Duty of Care policies and procedures as they relate to study abroad programs.
- Preparation for travel services, including information regarding the cultural norms in the host country, embassy and consular referrals, travel advisories, and what to expect insofar as medical services for mental health issues.
- Incident response plans and procedures, including language translation services, a crisis hotline and a security assistance center to secure immediate medical assistance. The support services extends to all impacted people, not only the students.
- In-the-moment emotional support seamlessly integrated with medical and security assistance that includes 24/7 access to mental health professionals, over the phone, or face-to-face, to help students and families dealing with a challenging situation.
- Coordinated emergency medical services on a 24/7 basis, including emergency referrals to mental health facilities and physicians, medical treatment expense insurance, emergency medical payments, medical evacuation or repatriation, dispatch of medical specialists, and emergency travel by a family member to the host country, among other services.

- A variety of needed insurance coverages, including accident & health, general liability to protect against the possibility of a lawsuit, and travel medical and medical evacuation insurance.
- Case management services – a single point of contact for the continuous medical tracking and monitoring of a student experiencing a mental health issue, from the moment the crisis occurs through the return of the student to his or her primary care providers. It also includes assessment by a counselor to identify the appropriate mental health professional that is the best fit to work with the profile and the language need of the student.
- Emotional and mental support is a must have and not a nice to have.

Footnotes

1. NAFSA: Trends in US Study Abroad, September 2017
2. UNESCO Facts and Figures: Mobility in Higher Education, October 2017
3. Chronicle for Higher Education, "The Student-Centered University," April 2017.
4. sites.psu.edu/ccmh/files/2017/01/2016-Annual-Report-FINAL_2016_01_09-1gc2hj6.pdf
5. www.nbcnews.com/feature/college-game-plan/mental-health-problems-rising-among-college-students-n777286
6. Center for Collegiate Mental Health
7. Psychology Today, What is Causing the College Student Mental Health Crisis, Gregg Henriques, Ph.D., February 2014
8. Journal of Global Mobility, "Behavioral health morbidity for those studying or working internationally," Vol. 3, Issue 4, April 2015
9. URMIA National Office, July 2015. "Scholastic sector's Duty of Care: Managing the pursuit of education while abroad."

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About International SOS

International SOS (internationalsos.com) is the world's leading medical and travel security risk services company. We care for clients across the globe, from more than 1,000 locations in 90 countries. Our expertise is unique; more than 11,000 employees are led by 1,400 doctors and 200 security specialists. Teams work night and day to protect our members. We pioneer

a range of preventative programs strengthened by our in-country expertise. We deliver unrivalled emergency assistance during critical illness, accident or civil unrest. We are passionate about helping clients put Duty of Care into practice. With us, multinational corporate client, governments and NGOs can mitigate risk for their people working remotely or overseas.

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Chubb is the world's largest publicly traded property and casualty insurance group. With operations in 54 countries, Chubb provides commercial and personal property and casualty insurance, personal accident and supplemental health insurance, reinsurance and life insurance to a diverse group of clients. Chubb Limited, the parent company of Chubb, is listed on the New York Stock Exchange (NYSE: CB) and is a component of the S&P 500 index.

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