Health and Safety in Education Abroad
Effective Crisis Management

T IS A LAMENTABLE SIGN OF THE TIMES that crisis management has become such a boom industry, that a Google search on the term returns more than 12 million hits. Thankfully, adding “education abroad” or “higher education” reduces the number to a manageable several hundred thousand. There are, of course, those who argue that the term crisis management is meaningless—you can no more manage a crisis than you can lasso the wind! Indeed literature about crisis management in international education has collected a number of interesting terms and work-arounds, often using terms such as “response,” “crisis response,” “emergency response,” or “critical incident response.” In the wake of hurricanes Katrina and Rita, “emergency management” as a term and an operational approach has acquired a whole range of connotations ripe for a “Top 10 list” on the Late Show with David Letterman. But it’s not the terminology that counts in a crisis situation—what matters is how you manage it.

Crisis: An Emergency without a Plan

Typically a crisis is a set of external circumstances or events over which you have no control. What you do have control over and that which you must manage is the response to those circumstances or events. The key to a successful response to a crisis is a well-developed, coordinated, rehearsed, and flexible response plan. As the crisis team gathered on our campus a number of years ago in response to violent deaths of two students on campus, the then dean of students began the meeting with “turn to tab four.” There was a plan. Roles and responsibilities had been pre-assigned. Tasks had been laid out in advance. Now it was time to put the plan into action.

Operating as we do with a response plan, I prefer using the term emergency rather than crisis, if only because emergency connotes a lower state of emotion and anxiety than “crisis.” Moreover, our document is entitled: “emergency procedures,”

THE CRISIS TEST

Count yourself fortunate, if you haven’t had the experience, but then add a “yet” to each of these:

► The call that there has been a student suicide in a campus dorm.
► The call that there has been a coup in a country where a study abroad program is located.
► The call that two students have been killed in an automobile accident on their way to campus.
► The call that one of the faculty has collapsed while exercising and could not be revived.
► The call from Thailand that two students had survived the tsunami wave, but little is known about the rest of the group who are on break and traveling.
► The call from abroad that a student’s cancer, thought to have been in remission, has returned and the prognosis is not good.
► The call that one of the international students had a very public “meltdown” in class yesterday.
► The call that a small group of students at an overseas program held a drunken party in the hotel, causing the entire group to be evicted and putting the continuation of the program in jeopardy.
RESPONSIBLE EDUCATION ABROAD PROGRAMMING requires that advisers stay abreast of U.S. State Department travel advisories regarding the safety of potential destination countries and the advisability of U.S. citizens of going there. Two key reasons make this of paramount importance for international educators: (1) some places are dangerous and should be avoided and (2) some insurance carriers (both personal injury and institutional/personal liability) refuse to provide coverage to individual or institutions in countries under travel warning.

U.S. citizens, of course, are free to travel anywhere in the world whether or not their destination is under travel warning. Today although such countries as Kenya, the Philippines, Israel, and Colombia join Iraq, Afghanistan and more that 20 others on the travel warning list; they continue to receive U.S. business travelers, tourists and students. Multinational businesses continue to operate in many of those countries; U.S. citizens work, live and function normally there.

The existence of U.S. citizens living successful lives in countries under a travel warning, and of U.S. government offices (embassies, consulates, etc.) also functioning effectively there sometimes gives rise to challenging questions for international educators. Sometimes we are asked, “Why is the university unwilling to permit students to study in (or employees to travel to) Country X just because there’s a travel warning?” We are frequently reminded that with regard to Country X: there’s no war going on; the threat of terrorism against U.S. citizens appears to be no greater than in the United States; its own universities are open and functioning normally; friends have been there recently and returned safely. Critics are quick to let us know their opinion that travel warnings aren’t based on real facts, or that as “informed citizens of a free country” they and their students may do as they please.

It is our job to remember that none of these arguments changes anything. Institutional policies on international activity have to satisfy the needs of people to teach and to learn about the world by becoming involved in it. They must also respond to the responsibilities of risk managers and legal advisors to provide practical advice to those institutional leaders charged with taking final decisions. The people responsible for international programs must assure that their institutional policies are being followed.

During the past few years, some institutions have developed policies that, following the assurance of informed consent, place responsibility for the decision to travel, work or study in a country under travel warning in the hands of the traveler(s)—and, sometimes, their parents—not in the hands of the travelers’ home college or university. It will likely require an incident and resolution of legal cases resulting from it to test the efficacy of these signed waivers or petitions.

Meanwhile, if an institution’s policies preclude it from sponsoring programs or supporting travel in countries under travel warning, people who object should work to alter those policies rather than arguing with the professionals charged with enforcing them.

Useful U.S. Department of State Publications
Note: All of these documents are available online at http://travel.state.gov.

General Information
Country Background Notes information on every country in the world (these, plus information in the CIA Factbook, are among the essential documents for pre-program reading).
Tips for Traveling Abroad, a brochure that contains useful general information.
Consular Information Sheets are updated on a regular basis and contain a specific section on safety/security on each country.
Information Issued as Necessary
Public Announcements are issued when there is a specific threat in a country or world region that cannot be countered. These tend to deal with terrorist threats, domestic unrest, and major natural disasters.
Travel Warnings are recommendations from the State Department that U.S. citizens avoid traveling to a certain country.

Additional Resources
U.S. State Department Overseas Security Advisory Council (OSAC)
There is no fee for U.S. colleges and universities to join OSAC. Membership makes available advisory information and the services of OSAC’s professional security annalists who can respond to specific security-related questions. Other members are U.S.-based international and multinational businesses that share safety and security information among themselves and with the State Department about conditions throughout the world. Visit http://www.osac.state.gov for more information.

NAFSA has a number of resources on health, safety and security on its Web site. The online document “Institutional Policies with Regard to U.S. State Department Travel Warnings” addresses campuses’ approaches to study in Israel illustrates how difficult decision-making can be when countries under travel warning are involved (www.nafsa.org/warnings). Additional online documents on broader issues of health, safety, and security can be found at www.nafsa.org/HealthandSafety.

—DAVID C. LARSEN is director of Arcadia University’s Center for Education Abroad.
indicating that we have a course of action that we will follow in response to the events that are unfolding. Emergency response (or crisis management if you will) requires a solid plan that is practiced at regular intervals and is regularly revaluated and updated.

Some NAFSA publications such as Crisis Management in a Cross-Cultural Setting (2001) and “Maximizing Safety and Minimizing Risk,” chapter eight of NAFSA’s Guide to Education Abroad for Advisers and Administrators (2005) emphasize the necessity of planning in advance of any emergency. If you are campus-based, your institution no doubt already has an emergency response plan that can form the basis for the one you will develop for your area of international education, be it for an entire operation, or for one segment such as education abroad, international students and scholars, community-based activities, etc. Both publications have sample plans and there are several other examples on the Web. Here are some things to think about as you develop your emergency response plan.

1. Start by Restating the Guiding Principles of the Response

These are both the end results that you will aim at in your response as well as the overall operational principles that underlie the various components and actions of the plan. Corporations will often state that their goal is to safeguard stockholder interests as well as the image and financial health of the company. In higher education we tend to phrase things differently using terminology like:

➤ Concern for the health, safety and well-being of students and staff
➤ Limiting the institution’s legal liabilities
➤ Conforming to the standards of ethical practice for education abroad as described in the Code of Ethics of NAFSA: Association of International Educators.
➤ Deciding how and with whom to share information
➤ Indicating when and with whom the response will be coordinated, and so forth

2. Define What You Mean by “Emergency”

When we are talking with students (and parents) about health and safety issues during our study abroad orientations, we have a quiz on our definition of emergency (something “that poses a genuine and sometimes immediate risk to, or that have already disturbed, the health, safety, and well-being of participants”). The quiz: What is a lost passport? Not an emergency—an inconvenience. The same goes for a lost ticket or stolen wallet. A broken leg is an emergency. Include examples with your definition to guide your team as they work through the plan when responding to the report of an emergency.

Many response plans also include in their definitions a means of distinguishing between “real” and “perceived” emergencies. Arising out of a number of things, including the sensationalized reporting of an event abroad, the distortion of information provided by a participant in a telephone call or letter home, or simply out of the nervousness of a family member or student with little or no international experience, perceived emergencies will sometimes affect family members and others in the U.S. more strongly than will real emergencies, even though there is no real or credible threat to health or safety.

Responding to a perceived emergency often requires more staff time and equally as much patience and tact as responding to real emergencies. While the health and safety of a student or staff member may not be at stake here, the reputation of the office and the institution certainly could be. In these days of “helicopter parents” (they hover), we must take care to formulate a response that will assuage the anxiety and reassure, without inviting constant follow-up telephone calls to one’s office and then to the provost or even the college president. Even though the earthquake was several hundred miles from the program site, calling the program director before returning the call to the parents can do wonders to quiet their nervousness.

3. Determine How You Will Respond to an Emergency

Every emergency, both real and perceived, requires a response. In this section of your plan, you will outline and assign tasks. Some plans use a scenario approach, with detailed responses for events such as the death of a student or staff member, serious injury or illness, assault (sexual and/or physical), disappearance, civil unrest, natural disaster, strikes, etc. Others take a broader approach that can be adapted to any eventuality. All plans typically deal with the following questions:

➤ Who needs to be informed and when?
➤ Who has the ultimate authority to make decisions?
➤ Who will carry out which aspects of the response?
➤ What support services will be needed?
➤ At what point should the institution’s crisis team be convened and who makes that decision?

When it comes to delineating tasks, you may find it helpful to use checklists to guide the response. It is also a good practice to always have two people assigned to lead the response; one to work through the steps of the plan and the other to serve as a monitor, making sure that nothing is overlooked. In every emergency response, real or perceived, it is vitally important that every action is documented (what was done, by whom, and at what time). These contemporaneous notes will be needed when debriefing the
DEALING WITH THE MEDIA

DEALING WITH THE MEDIA will be part of the institutional emergency plan. Thus, whenever possible, leave talking to the media to your institution’s office of communication or public relations. But if you do find yourself facing the media, here are some helpful suggestions.

When a Reporter Calls

- Take control; don’t answer questions until you’re ready
- Note the reporter’s name, affiliation, and phone number
- Ask what the story is about
- Find out the reporter’s deadline
- Define the role you’ll play in the story
- Suggest other sources
- Set ground rules for the interview: subject area, time, place, duration
- Pick an interview site that is convenient and comfortable for you
- Call your university news service for assistance
- Regard the interview as an opportunity to tell your story or to make your points
- Remember your audience is the public, not the reporter
- Decide what you want the public to understand about the subject
- Pick one or two points you want to make
- Keep your language simple, as though you were explaining to a neighbor
- Avoid jargon
- Prepare relevant examples and analogies
- Make notes for easy reference
- Prepare a list of probable questions and short, concise answers
- Collect material that will help the reporter understand the story
- Rehearse with someone you trust
- If possible, tape the interview so you can catch your own errors before they’re part of the permanent print or broadcast record
- If a reporter asks you to comment off the record, decline. Assume everything you say in an interview will appear in the story
- Don’t wait for the reporter to ask the “right question.” Make your main point early and often
- Be concise; you will be less likely to be quoted out of context if you are clear and concise
- Make sure you understand each question
- If a question contains erroneous information, don’t let it slide. Correct it
- Don’t evade questions. If you don’t know the answer, say no
- Never lie
- Beware of hypothetical questions; don’t be pressured into speculating
- Don’t ask or expect to approve the story before it is printed or broadcast
- Review your tape; if you misspoke, call the reporter with corrections or clarifications
- Be available for follow up; encourage the reporter to call back with other questions or for clarifications
- Ask others what they thought of the story
- If the story has major errors, don’t let anger or embarrassment rule your response
- Call the reporter to correct errors in the story; uncorrected errors get repeated as fact in follow up stories
- If other reporters call you, use the new contact as an opportunity to correct any errors or misperceptions

Special Note: Public universities are accountable to the citizens of their state, who have a right to know how their tax dollars are spent. Most written communications within a university are in the public domain and must be shared with the public and news organizations, if requested. However, state and federal laws balance the public’s right to know and the student’s or employee’s right to privacy. Your university news service usually works closely with your university attorney to ensure that balance by handling all requests for information covered under the state data practices act and applicable federal laws.

— Mickey Slind is a consultant with the Anglo American Educational Services of London. “When a Reporter Calls” (1997) is reprinted with permission.
actions of the response and writing the final report. Moreover, they can prove to be invaluable in the event a lawsuit results from the emergency.

4. Coordinate Your Response

Once you have finished a draft of your plan, have it vetted by your institution’s crisis coordinator and ask that your plan be included in the institution’s master emergency plan. Moreover, if the international office is not represented on that team, ask for a seat and participate in all team meetings. It should not be a surprise that with the Internet, instant messaging, cell phones, and text messaging, campus emergencies are quickly reported to students and faculty overseas and vice versa. An emergency that affects one group directly will affect everyone indirectly so it requires a response. Natural disasters or sudden or violent death at home have a profound effect on study abroad students. Your plan should include a means to provide appropriate communication and, if necessary, support services for students and staff abroad.

If your institution sponsors education abroad programs, you should be sure that your resident directors or faculty leaders are familiar with the emergency plan and the role that they are expected to play. (Specific guidance and examples can be found in Crisis Management in a Cross-Cultural Setting, NAFSA’s Guide to Education Abroad for Advisers and Administrators and in The Guide to Successful Short-Term Programs Abroad) Identifying resources in advance and establishing avenues of communication are two essential elements of emergency plans for overseas programs.

5. Take Care of the People Working on the Plan

Responding to an emergency quickly depletes one’s reserves of physical, mental, and spiritual energy. Keep an eye on your team. Make sure that everyone eats and sleeps at regular intervals. If the response looks as though it will last for more than a few hours, create a duty roster and assign shifts. Send the second shift home to rest now, so they will be fresh when they come on duty. Don’t forget that these same dictums apply to you as the team leader (or to whoever that person is). Being the leader doesn’t make you immune from stress.

Depending on the nature of the emergency, you may find that you or members of your team need further support following the conclusion of the emergency. In addition to counseling and psychotherapy, Critical Incident Stress Management (CISM) is another technique to help teams of responders and those who have been touched by the events work through the aftermath of a particularly difficult emergency. (Further information can be found on the International Critical Incident Stress Foundation Web site: www.icisf.org/).

6. Debrief and Evaluate—Revise the Plan

When the plan has been carried out and the emergency response concluded, it is essential that those who participated in the response meet to debrief the event and their response. Using the contemporaneous notes, walk through the plan and your responses. What worked as anticipated? What didn’t? Why? What needs to be revised? Be sure to make the changes to the plan immediately. Don’t shelve them for six months to a year waiting for time to get to it. Change the plan and get the new changes circulated.

Finally, there remains the most important aspect of crisis management: it is essential that it should be first and last in everyone’s emergency plan.

7. Practice the New Plan

An emergency response plan does no one any good if those who are to use it have not practiced it and practiced it often with different leaders and monitors. The vagaries of crisis events do not allow us to choose who might be in the office when the call comes. Everyone needs to be able to find and work the plan. Because much of the work in our office is with education abroad, we build our practice exercises around actual events. That way there is plenty of real information available in the media, on the Web, and through other sources for our drills.

The best indicator of an institution or program that is prepared to respond to an emergency is one that has a well-thought out plan and that’s been well rehearsed by a well-trained response team. If you are among the prepared, if something unexpected happens, it doesn’t have to be a crisis, because you’ve got a plan.

JOSEPH L. BROCKINGTON (1951–2015) was associate provost for international programs at Kalamazoo College.
RESOURCES FOR CRISIS PLANNING IN EDUCATION ABROAD

Crisis Management for Education Abroad
EDITED BY PATRICIA C. MARTIN
Crisis Management for Education Abroad offers guidance on such topics as planning and promoting safe programs abroad, responding to crises, mitigating organizational liability, and insurance.

LANITRA M. BERGER
Exploring Education Abroad helps to answer many of the questions that racial and ethnic minority students might have about navigating the education abroad experience. This updated guide dispels common misperceptions and covers topics such as family support, financial aid, and cultural exceptions abroad.

Planning for Safe and Healthy Travels Abroad: A Good Practices Guide for Students
DAN HART
This multistep guide highlights health and safety issues that students must consider before, during, and after their education abroad experience. It includes recommendations and resources on issues such as immunizations, emergency protocols, and travel advisories.

Addressing Mental Health Issues Affecting Education Abroad Participants
EDITED BY BARBARA LINDEMAN
This thoroughly updated and revised publication provides the tools needed to identify and help education abroad participants with mental health challenges.

To order these publications, go to www.nafsa.org/shop or call toll free 1.866.538.1927.
No Go

Trip Cancellation and Interruption Insurance: Coverage You Need Now?

CANCELING A STUDY ABROAD PROGRAM, pre- or post-departure, is one of the most difficult administrative decisions an education abroad director can make. This is especially true if the cancellation is due to reasons of health or safety because such decisions are often subjective. For every person that will congratulate you for making a prudent choice, there will be an equal number criticizing you for being too cautious. Certainly, it helps to be prepared in advance for such circumstances by having clear cancellation, withdrawal, and refund policies as well as alternatives for the affected students. These could include, for example, a list of comparable program options, administrative support for a switch to on-campus classes/housing, or the arrangement of an independent study program equivalent to the students’ required credits. Such options are plentiful when the program’s start date is months or even weeks away, but they become more limited if the departure date is imminent or the program is already underway.

Midstream Cancellations

As we all know, canceling a program in the middle of a term or semester is rife with problems. Not only does the education abroad staff on campus and abroad have to deal with the logistics of finding the student safe passage home and managing the cancellation’s public relations impact, but the task of sorting out a student’s academic options can be overwhelming, particularly if the time period to add classes on the home campus has already elapsed.

The best-case scenario is that the host institution is able to offer students a way to complete the credits remotely. However, this may only work for certain types of courses. Suggesting that students duplicate the chemistry lab in their basement, even if supervised by Skype, is a different kind of disaster waiting to happen! Another possible option is if there is faculty with close ties to the program that may be willing to work with the student(s) to compete the course.
Travel Notice Definitions

The Center for Disease Control and Prevention (CDC) issues different types of notices for international travelers. As of May 20, 2004, these definitions have been refined to make the announcements more easily understood by travelers, health-care providers, and the general public. The definitions are laid out below. They describe both levels of risk for the traveler and recommended preventive measures to take at each level of risk.

<table>
<thead>
<tr>
<th>Type of Notice/Level of Concern</th>
<th>Scope*</th>
<th>Risk for Travelers†</th>
<th>Preventive Measures</th>
<th>Example of Notice</th>
<th>Example of Recommended Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the News</td>
<td>Reports of sporadic cases</td>
<td>No increased risk over baseline for travelers observing standard recommendations</td>
<td>Keeping travelers informed and reinforcing standard prevention recommendations</td>
<td>Report of cases of dengue in Mexico, 2001</td>
<td>Reinforced standard recommendations for protection against insect bites</td>
</tr>
<tr>
<td>Outbreak Notice</td>
<td>Outbreak in limited geographic area or setting</td>
<td>Increased but definable and limited to specific settings</td>
<td>Reminders about standard and enhanced recommendations for the region</td>
<td>Outbreak of yellow fever in a state in Brazil in 2003</td>
<td>Reinforced enhanced recommendations, such as vaccination</td>
</tr>
<tr>
<td>Travel Health Precaution</td>
<td>Outbreak of greater scope affecting a larger geographic area</td>
<td>Increased in some settings, along with risk for spread to other areas</td>
<td>Specific precautions to reduce risk during the stay, and what to do before and after travel‡</td>
<td>Outbreak of avian influenza among poultry and humans in several countries in Southeast Asia in early 2004</td>
<td>Recommended specific precautions including avoiding areas with live poultry, such as live animal markets and poultry farms; ensuring poultry and eggs are thoroughly cooked; monitoring health</td>
</tr>
<tr>
<td>Travel Health Warning</td>
<td>Evidence that outbreak is expanding outside the area or populations initially affected</td>
<td>Increased because of evidence of transmission outside defined settings and/or inadequate containment measures</td>
<td>In addition to the specific precautions cited above, postpone nonessential travel‡</td>
<td>SARS outbreak in Asia in 2003</td>
<td>Recommended travelers to postpone nonessential travel because of level of risk</td>
</tr>
</tbody>
</table>

* The term “scope” incorporates the size, magnitude, and rapidity of spread of an outbreak.
† The term “Risk for Travelers” is dependent on patterns of transmission, as well as severity of illness.
‡ Preventive measures other than the standard advice for the region may be recommended depending on the circumstances (e.g., travelers may be requested to monitor their health for a certain period after their return, or arriving passengers may be screened at ports of entry).

A handful of companies offer different types of plans that you can customize. For example, a group “trip cancellation” plan covers program cancellations when stated events occur prior to departure.

A group “trip interruption” plan covers program cancellations that occur when the program is already underway.

How It Works

A handful of companies offer different types of plans that you can customize to a certain extent. For example, a group “trip cancellation” plan covers program cancellations when stated events occur prior to departure. A group “trip interruption” plan covers program cancellations that occur when the program is already underway. Common covered events include terrorist incidents occurring in your program location within a certain number of days prior to departure; the cessation of commercial air traffic to your destination (for a period of time near your scheduled arrival); a natural disaster that renders your destination accommodations or other regular facilities unusable; and the issuance of a new U.S. Department of State (U.S. DOS) Travel Warning.

Bear in mind that Travel Warnings are the highest level of government alert regarding international travel. They note long-term, systemic, and dangerous conditions tied to political, social, economic, or environmental conditions, and where the government’s ability to assist travelers may be severely limited due to internal or external travel restrictions. Although the U.S. DOS issues other types of travel bulletins such as Messages for U.S. Citizens, Emergency Messages for U.S. Citizens, and Travel Alerts, trip cancellation or interruption policies do not generally covers these classifications.

Less common events that can be covered include acts of civil unrest within a certain radius of the program’s destination city or the issuance of a Centers for Disease Control and Prevention (CDC) Travel Health Warning. Coverage is not likely available when the CDC issues other types of health travel notices, such as In The News, Outbreak Notice, and Travel Health Precaution.

Furthermore, the growing presence of education abroad programs operating in countries with existing Travel Warnings (typically under some type of review and approval process) has caused some carriers to develop unique types of coverage. For example, it is possible to obtain a rider to cover pre- and post-departure cancellations of programs already approved to operate in a country with a Travel Warning but where a change of condition has caused the institution to consider the location...
too risky. However, the rider can be very specific, requiring that the triggered event or circumstances have occurred within a certain radius of the destination city and with confirmation from the carrier’s security information assistance service that travel is no longer advisable.

Some carriers may bundle both the “trip cancellation” and “trip interruption” types of coverage together, but it may be worth covering them separately, perhaps even for different amounts if you have a lot of control over the costs of the programs that could be cancelled. For example, if you operate primarily faculty-led programs, you will likely be required to refund the tuition before the program starts (the same as if a class on campus that did not reach its target enrollment were cancelled). If you cancel early enough, you may not have even billed the students for the tuition yet, so why buy insurance to cover it? Perhaps in such cases you only want to insure airfare, activity/excursion fees, or housing costs—expenditures that you are unlikely to recoup even if you cancelled several weeks prior to departure.

Other types of cancellation coverage can apply to the individual traveler. Sometimes a significant life event—such as the death of a parent or a serious personal illness—forces a student to withdraw from a program at the last minute, risking loss of any prepaid tuition and fees (especially if to a third party). Individual cancellation policies are often designed to cover a wide variety of personal circumstances that may occur prior to departure or while the program is underway.

Also, keep in mind that a policy can be purchased by the institution on behalf of all enrolled participants, or offered directly to the individual traveler. In the latter case, the carrier will likely charge a one-time fee for customizing a portal that can be linked to your institution’s website.

One University’s Journey

Mark Hayes, associate director, American University (AU) Abroad in Washington, D.C., has been negotiating cancellation coverage for his institution since early 2012. Hayes stated that while the timing of evacuations from Egypt and Japan in 2011 minimized students’ financial losses, the experience caused AU to think about other scenarios where the potential for significant loss would be much higher. “Being that we are a private institution, we recognized that just the loss of tuition alone could be substantial for students,” he said. “We were particularly worried about students on financial aid, because depending on the timing of the cancellation they would be expected to return [the money].” This concern relates to a fairly standard institutional practice associated with the distribution of federal funds for academic programs or experiences that are subsequently cancelled.

Hayes also offered tips for getting started. “First,” he said, “Work with your risk manager.” He continued by explaining that while a study abroad staff member is likely the expert on enrollment data, cancellation history, and programmatic risk tolerance, a risk manager can direct the negotiation process, and in the final stages, review potential contracts to make sure they meet all institutional requirements.

Initially, while preparing all the data requested by potential carriers to be able to receive an accurate quote, AU sought out the broadest coverage possible. But in order to keep premiums as low as possible, they began to settle on a plan covering only post-departure cancellations. The proposed policy also includes a coinsurance feature of 50 percent so that coverage “caps out” at half of a semester’s tuition. AU requested this feature because the institution concluded that its main risk was in the first two-thirds of a trip; the closer a cancellation occurs to the program’s end date the less coverage they would need.

“It has been a long, drawn out process,” Hayes admitted. Given this type of coverage is new to the field, Hayes had to spend a lot of time educating the carrier about their program operations and, in particular, that these types of cancellations are relatively rare given AU’s tolerance for risk. He also stated that they had to read each new quote very carefully, because the documents were not very thoroughly edited when the terms, particularly exclusions, were changed. “So,” he added, “It’s critical to conduct a detailed policy review of each new version.”

At press, American University is still negotiating with the carrier, but the institution is hoping to settle on a policy that provides the desired coverage at a cost between $100.00 and $130.00 per student, per semester. Given potential losses for mid-semester cancellations could be in the tens of thousand dollars, Hayes felt all parties could reach an acceptable position.

Show Me the Money

With regard to claims payments, some policies pay claims directly to the student while others pay claims to the institution. In some cases, policies can be tailored to have claims proceeds directed to the institution for distribution to the student. The benefit of this is that students receiving federal aid who will be expected to return the money will have funds in their student accounts more quickly than if they had to wait to receive a check from the carrier.

The Fine Print

While some institutions offer tuition insurance to their students, it is unlikely to cover tuition paid to third parties, such as providers or host institutions. Before signing a cancellation coverage contract, have your risk manager review other possible competing coverage. Make sure that the limitations of such policies are noted in your coverage description.
Also, be clear in your understanding of when a benefit is conferred. Know whether or not the cancellation benefit has to be approved by the carrier or if it is automatic when the covered events occur (such as the issuance of a U.S. Department of State Travel Warning) and the institution itself chooses to cancel.

The Right Tool?

Despite the economic downturn of the last few years, the field of education abroad continues to grow and professionalize. Each academic year seems to start with announcements of new program types and locations. Increasingly, a greater number of programs now take place in developing countries where the risks of terrorism and civic unrest appear to be higher. At the same time, tuition and other costs related to education abroad continue to rise. As a result, education abroad offices have become increasingly complex work environments, requiring additional attention on the implicit financial risks. Program cancellation coverage may be the right tool for your institution to manage this risk and help your institution achieve its education abroad goals.

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Checklist for Best Practice in Seeking Cancellation Coverage

- Experienced broker consultant
- Collaboration with risk management
- Program data
  ✓ Countries of operation
  ✓ Programs in countries with Travel Warnings (if applicable)
  ✓ Number and type of programs (faculty-led, direct-enroll, provider, etc.)
  ✓ Number and type of programs by length (short-term summer, winter or spring break, semester, academic year)
  ✓ Enrollment by length, type, and location
- History of program cancellations
- Average tuition per program (by length, type, or location)
- Average fees per program (by length, type, or location)
- Acceptable premium price range
- Preferred coverage
  ✓ Trip interruption
  ✓ Trip cancellation
  ✓ Individual interruption or cancellation
  ✓ Claims payment to institution or individual
- Preferred billing cycle
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EDUCATION ABROAD

By Janet Hulstrand
What Students Need to Know

Among many of the responsibilities of education abroad advisers today is advising students about sexual health in the context of studying abroad.

As institutions go about improving the health and safety aspects of their education abroad programs and activities, addressing how to educate students about sexual health issues and prepare them to keep themselves safe while studying abroad is a matter of increasing concern.

“Sexual health abroad” encompasses a broad range of topics, from the availability of condoms and birth control pills in other parts of the world to behavioral practices, that can help students minimize their risk of becoming victims of sexual harassment or assault.

Talking “the Talk”

What students need to know about sexual health while studying abroad is in many ways the same as what they need to know at home but studying abroad often introduces complicating factors that students may not be sufficiently aware of. “One of the most important things students don’t know is that there are places in the world where there is a higher rate of sexually transmitted diseases, including HIV, hepatitis, things like that. If they don’t know this, and don’t protect themselves against it, they may be at a higher risk for contracting those diseases,” says Julie Anne Friend, associate director for international safety and security at Northwestern University.

While many educators may feel that discussing sexual health issues with students is a delicate matter, according to Stephen Ferst, director of the Kean University Center for International Studies, “The topic isn’t as delicate as one might think. Millennial students are quite open and frank when talking about sex and sexuality, and many of them have been through on-campus training for safe sex, recognizing abusive relationships, and avoiding sexual violence.”
In fact, their casual attitude about sexual matters may be one of the challenges educators face as they try to build proper awareness in students who are preparing to study abroad.

“Many students assume that they already know everything they need to know about sex,” says Nancy Ericksen, assistant director for study abroad at Trinity University. “But because many of them have never traveled abroad before, or have never traveled abroad on their own, they may be completely unaware of the kinds of issues that may arise in being sexually active in another country. The culture of dating, local attitudes about gender identity, roles and stereotypes—the possibilities for cultural misunderstanding on all levels—makes sexual health abroad a complex topic with no standard answers.” She adds, “Students who are sexually active in the U.S. are likely to be sexually active abroad. In fact, students going abroad sometimes have the ‘What happens in Vegas stays in Vegas’ mentality.”

“Many students don’t really think about sex and sexuality in the months leading up to their departure,” says Paige Weting, who as assistant director of the Office of Overseas Study at Indiana University in 2002 was involved in conducting a study of student dating and sexual behavior while abroad. “However, they need to prepare in advance for the possibility of sexual activity. Asking how to say ‘condoms’ in a foreign language isn’t typically the first impression students want to give to their resident director or host family.”

Students who were not sexually active at home may become sexually active while studying abroad as well. Weting was surprised at the number of students in the study who reported losing their virginity abroad: “I was also alarmed by the open-response comments that students made about risk taking and sex—experimenting with different partners, mixing alcohol and sex, and putting themselves in potentially dangerous situations, such as going to a house with someone they didn’t know.”

According to Ferst, “It’s important to note that the risks are not necessarily greater abroad. What changes is that students are less adept at reading cultural cues, and often engage in activities that place them at a higher risk for something to not go as planned.” He adds, “There is a general lack of attention paid to these matters among students. Much of this can be attributed to their attitudes of invincibility, and their lack of acknowledgement that some behaviors are risky.” He also points out that “although most programming is aimed at women, men can be victims as well. It is important to recognize the ability of anyone to be a perpetrator or a victim. These types of crimes also do not necessarily only involve locals: it could be participants in the same program. And everyone has a role in prevention.”

Collaborating With Student Services, Health Services, and Other Campus Resources

“We try to remember that student services and health services have tons of experience in this area and have developed programs and resources for all students on campus—most of which are applicable abroad also,” Ericksen says.

Friend agrees: “It’s important to work with the folks on your campus who deals with these issues on a daily basis,” she says. “We work very closely with those individuals to prepare content, to provide students with the information they need, and to train the study abroad staff. Then it’s our job as education abroad professionals to educate our sexual health educators on where we are sending students, and what types of program experiences they might have.”

Northwestern University has its alcohol awareness and sexual health educators help with education abroad website materials and they are included in risk management training for faculty and staff who will be leading education abroad programs. “I think the important thing is not to be pretend to be an expert in something you’re not, especially when there are people on your campus who can do it better than you can,” Friend advises.

At Northwestern there are two full-time staff dedicated to sexual health education and support for victims of sexual violence. Education abroad offices on smaller campuses may need to reach out to community resources to find partners who can help provide the information and expertise needed to properly inform students. “I think it’s important for faculty and staff preparing students for study abroad to know what their comfort level is,” says Eva Ball, coordinator of sexual violence response services and advocacy at Northwestern. “If you’re not comfortable talking about sex, you need to know that about yourself and maybe get someone in the room who is, who can talk to your students about these matters.”
When the Worst Happens

Certainly one of every education abroad leader’s worst nightmares would be having one of their students become the victim of sexual assault; one of their most important responsibilities is to have thought through what they would do if this happened.

“I think we want to tell all students that if something like this happens to them, they should report it to somebody they trust,” says Friend. “That could be a variety of different people, depending on the program, the program structure, and the relationships they’ve built around their study abroad experience. So maybe they e-mail their adviser here on campus; maybe they call their institution’s emergency line; or maybe it’s a resident director or faculty member onsite. I think the important thing for the institution that’s sponsoring the program is that all of these people know what to do next. Our job is not to train leaders to be rape counselors, but how to manage the instant disclosure, and then to turn to the experts on campus for guidance on next steps.” She adds that in such a situation, “In my experience going through OSAC is the most effective way to engage with a U.S. embassy or consulate, to get advice about what the student’s options are, whether or not it would be worthwhile for him or her to report to the local authorities. We want to encourage reporting, because we want communities to recognize these crimes; but we understand that there are some locales where that would not be a positive experience for the student.”

Educating Ourselves to Educate Students

“One of the biggest pitfalls that well-meaning people can make when dealing with a survivor of sexual assault is to somehow communicate to the survivor that what happened is their fault,” says Ball. “This can be obvious, or it could be more insidious: for example, in the orientation just covering all the things you can do to keep yourself safe, but never talking about how rape is never the victim’s fault: that you always deserve support, you always deserve to be respected no matter where you are in the world.”

OSAC: An Invaluable Resource for Responding to Overseas Emergencies:

OSAC is a federal advisory committee responsible for promoting security cooperation between private sector interests worldwide and the U.S. State Department. Membership is free. Visit www.osac.gov/pages/AboutUs.aspx

As in any other endeavor, developing a high-quality sexual health awareness program takes time and requires constant—retooling to keep the information up-to-date and appropriate to changing circumstances. Keeping an eye on evolving best practices, participating in webinars and workshops sponsored by NAFSA and other organizations, and consulting with colleagues are all ways to ensure that students are receiving the best information available.

“We always tell students, ‘Don’t be out late, don’t walk alone, be careful who you make friends with, don’t accept a drink from a stranger: then if they do any of these things and they end up being assaulted, that contributes to their feeling like it’s their fault,” Friend says. “The question is, how do we promote best practices for students to safeguard their health and safety that are realistic; that are meaningful; and that don’t end up making them feel guilty if they end up becoming the victim of a crime?”

JANET HULSTRAND is a writer, editor, and teacher of literature and writing based in Silver Spring, Maryland. She has created and taught study abroad courses in Paris, Florence, Honolulu, and Havana, as well as faculty and staff development workshops for education abroad programs for Queens College, CUNY. Her most recent International Educator article was “Curriculum Integration: It’s a Marathon, Not a Sprint” in the September/October 2012 issue.
WHEN A Student Dies Abroad
Preparing for the Ultimate Tragedy

BY JULIE ANNE FRIEND
If you are faced with responding to a student death abroad, it will likely be the most emotionally challenging moment of your career as an education abroad professional. Needless to say, it is not a time for improvisation or “winging it.”

The trauma of the experience will test the skills of even the most seasoned professional. To be prepared to respond appropriately, it’s important to have written, well-rehearsed emergency response procedures as well as a checklist to guide your actions. This article is designed to help you develop such a plan and prepare you to respond to an event you hopefully will never encounter.

**General International Emergency Preparedness**

The death of a student abroad requires a unified, consistent response from every member of the institution. Although the education abroad office may take the lead role in responding to the crisis, it cannot and should not act alone. Other key units, including the offices of the president/provost, student affairs, student health services/counseling center, media relations, and the campus police should work together with education abroad to provide a coordinated response. If your institution doesn’t already have a detailed, written plan for responding to a student death abroad, you need to develop one. Such a plan can be part of an overall emergency response plan for international incidents involving students, faculty, or staff. The good news is that you don’t have to start from scratch. Most universities already have...
Prior to sending students abroad, establish protocols for responding to a student death on campus, and these can be adapted to reflect the overseas context. To reduce miscommunication and error, it is critical that the plan identifies the roles and responsibilities of the various individuals involved in responding to the crisis.

The International Crisis Management Team
Another important preparatory step is the identification of a dedicated, trained first responder and the establishment of an international crisis management team (ICMT). The international first responder is generally an education abroad or risk management staff member who is tasked with after-hours responsibilities. The ICMT is a small group of five to six individuals (with identified back-ups) who are trained to communicate or meet at a moment’s notice and who lead the response to a critical incident abroad, such as a student death. It’s important to keep the group small for ease of meeting, communication, and action, but identify and consult with additional relevant units or individuals as required.

Communications Plan
A good emergency plan also includes a good communication plan. Relevant organizational stakeholders need to be identified in advance to ensure timely reporting. Some of these stakeholders will likely be members of your international crisis management team; others may not play a direct role in the crisis response, but they will all need to be quickly informed of the event (preferably before the media) and the institution’s ongoing response. Remember, too, that even though your emergency plan may only need updating every few years, your communications plan will likely need a quarterly or biannual review due to staff turnover.

Adequate Insurance
Prior to the crisis verify that all your international travelers are covered by a comprehensive international insurance plan that includes emergency travel assistance services such as repatriation of mortal remains. Comprehensive repatriation services include collection of the remains and preparation for transport, either by cremation or embalming; communication with funeral homes; transport of the remains to the airport abroad; transoceanic transport; and finally, all customs and death certificate paperwork required by the governments involved. A limited life insurance benefit of $10,000 or more, payable to the deceased’s survivors, is also a common feature of international insurance plans and can help pay for miscellaneous costs incurred by the family.

Access to Funds
Every education abroad office should have an emergency fund that covers contingencies for emergency travel. (In some cases the emergency travel assistance provider can advance such funds.) If a student dies while on a direct enrollment or provider program, it’s likely that necessary on-site support services exist or can be arranged quickly by local staff. However, if the student dies on a faculty-led program, you may need to send a staff member to assist
in the pastoral care of the remaining students and the return of the deceased student’s possessions.

Some parents also may wish to travel to the program location where their son or daughter died. Many insurance plans cover the cost of only one traveler, so your organization or institution should be prepared to cover the cost for an additional spouse, companion, or family member (as well as their accommodations). How these funds can be accessed or authorized, particularly on short notice and perhaps over a weekend, should also be part of the plan. Parents should be met by local staff at the airport and be taken to the student’s residence or location of death as soon as possible. Be sure to have counseling or student affairs staff present. Attention to every detail is critical during this very emotional time for the parents and survivors.

Funds should also be available to send at least one administrator and a few students to the deceased’s funeral as well as cover the costs of a campus-based memorial service. If possible, consider offering to cover the cost of the parents’ travel to campus for the service, and for lodging and meals while there, whether or not they would be able to pay for it themselves. Gestures like this can go a long way toward maintaining goodwill between the institution and the surviving family members.

Death Notification

There are generally three groups that require separate types of death notification: families, faculty or staff, and students (abroad and on the home campus). Care must be taken in how each group is notified of a student’s death overseas.

The most common causes of a student death abroad are traffic accidents and drowning. Regardless of the cause, it’s important to involve the U.S. embassy as soon as possible so they can assist in parental notifications. In addition, your international emergency assistance provider should be involved in every step of the response, from notification to repatriation of the student’s remains. Ideally, your crisis management team can delegate communication assignments internally and make notifications simultaneously.

Diplomatic protocol requires that when a foreigner dies abroad, a representative of the relevant embassy notify the next-of-kin. U.S. consulate staff is specifically trained to deliver such news. Providing a thoughtful, compassionate death notification is everyone’s first priority. A common parental response to such shocking news is denial, so consular staff will require all the evidence used to confirm the identity of the deceased and be prepared to disclose all information available about the cause of death. Assuming that your international insurance plan covers repatriation, be sure consular staff is aware of this so that the family does not think they need to raise funds to bring the body home. Explain to the consular officer that you (or an associate) will be following up with the family soon to express the institution’s condolences and explain the support services you will provide.

Unfortunately, diplomatic protocol is not always followed by local law enforcement overseas. Instead, local police, upon finding information on the body that leads them to ascertain the identity of the deceased’s parents, may notify them directly. This approach can unfortunately lead to serious miscommunication if the informing officer does not speak English well, or does not have enough information
about what the deceased was doing at the time of death. It is especially confusing to the family if the student is studying in one country but dies in another (and didn’t inform the parents about the extracurricular travel). Other times, local police contact law enforcement in the student’s home jurisdiction, and the hometown police inform the family or campus police if institutional ties are evident. This underscores the importance of communicating with campus police as soon as possible after a student death.

In some cases, the institution’s first responder may be the one to share the news with the family that their son or daughter has died abroad. This may occur when the family is contacted by law enforcement (local or overseas) and then calls the institution before consulate officers can follow up. Therefore, it’s important for the ICMT and others on campus to receive training by law enforcement and counseling staff on how to talk to the family in such cases before the need arises.

In the most unfortunate circumstances, parents may learn of the student’s death via traditional or social media. This is a horrific way for a family to receive word of such a tragedy, so if faculty or staff are present at the time of the incident, all efforts must be made by them to ask witnesses to refrain from posting information on social media sites or talking to the press until the victim’s family can be notified. Such acts are not about shielding an institution from publicity or liability, but about allowing for the most compassionate form of notification. Be prepared to accept, however, that despite your best efforts, it’s impossible to control the media. The ultimate goal is to balance the pressures to provide information and limit rumor and gossip, while showing deference and respect to the student’s friends and family.

Pastoral Care to Students, Families, and the Campus Community

Family

Nothing can compare to the shock that comes when a parent learns that their son or daughter has died tragically.

Workshops for Education Abroad Professionals

NAFSA’s Core Education Program (CEP) Workshops introduce best practices and in-depth explorations of job-specific skills. The complete list of CEP Workshops can be found at www.nafsa.org/workshops. Two new workshops for 2017 include:

Student Health and Safety Abroad

This half-day workshop covers the necessary protective and preventative measures that institutions can take to prepare for, and respond to, situations in which students’ health and safety are at stake while abroad.

Risk Assessment and Crisis Management in Education Abroad Programming

Education abroad staff need to be equipped to manage a range of crises that may occur. In this half-day workshop, explore ways to assess risk, reduce risk potential, and respond to crises more effectively.
abroad. The shock and trauma can last weeks, months, or even years. It’s important that the family know that you are there to provide any support or information they require. Their only responsibility—indeed, sometimes the only thing they can do—is to grieve. They should not have to worry about the cost or return of remains, the return of the student’s personal possessions, or support for their lost student’s friends abroad and on campus.

Upon first contact with the family, express sincere condolences on behalf of yourself, your office, and the institution. Do not dismiss the emotional intensity of the moment, and allow yourself to grieve, even cry, with the family. Once the initial shock has subsided, explain to the family that you are there to provide all the support they require. Give the parents your cell phone number and invite them to call you at any time they have a question—day or night, and on weekends. Tell them that you will need to work with them on the repatriation of the student’s remains and that a few important decisions will need to be made in the next few days, but not right away. Be sure to inquire, however, about any important religious customs that they wish to be honored with regard to the remains. Also, ask them to decide whether they should work with you on these decisions or if they would like to appoint a single family member, such as an aunt, uncle, or sibling to work with you. Finally, depending on whether or not there were witnesses to the death, the family may be quickly confronted by media representatives. Again, suggest that the family identify someone who can speak to the press, even if only to say “no comment.”

If there were no witnesses, a timeline for notification to the campus community and, most importantly, the students on-site as well as the deceased’s friends, needs to be set. While the first reaction of parents may be to forbid any disclosure, they will usually come around once they understand that their son’s or daughter’s friends are going to want to know what happened, and that the institution is also obligated to provide support to students, faculty, and staff affected by the tragedy.

After a day or two, the family will need to decide whether or not they want the remains embalmed or cremated. They
will also need to identify a local funeral home in their town to receive the student’s remains. Remind the family that your insurance provider will work with funeral homes in both countries as well as relevant authorities and airlines to make sure all the paperwork is in place for the transport of remains. Sometimes it can take several weeks to bring the deceased home. Since families will always want their student returned as quickly as possible, it’s important to establish the expectation in advance that the process can take a long time. If there is any question as to the cause of death, the ensuing investigation will only add additional time to the preparation of the body for transport home. Be prepared to encounter justifiable impatience on the part of the family.

Students

Expect that a wide variety of students touched by the tragedy will require information and be in need of support services. Every effort must be made to identify and communicate with peer groups before a general institution announcement is issued. There is nothing more heartbreak- ing than for a student to learn of a friend’s death through a university-wide announcement, no matter how carefully crafted. For example, if the deceased student was a member of student government, the Greek system, an athletic team, or a special academic program, try to meet with the student group and its advisers before the campus-wide announcement is made.

IMMEDIATE RESPONSE AFTER AN INCIDENT

- Collect all relevant details pertaining to the death(s).
  - Name, title, and phone number of the caller as well as their relationship to the program
  - Name(s) and citizenship of the deceased as well as: time, location, and manner of death, whether or not an autopsy is required.

- Name of the program title or sponsor (host institution, U.S. institution, or third-party provider) and location.
  - Names, titles, and contact information for others involved in the response (consular officers, local authorities, home/host institution staff or faculty, etc.)
  - Whether or not the following have been notified already: a parent/guardian; local embassy or consulate; international medical assistance provider; other individuals or entities.
  - Names of any witnesses or ill/injured victims

- Whether other program participants are at risk. If yes, work quickly to provide a timely warning to affected students. This is often best done by text message, social media, and e-mail. Consult with campus police/security for assistance.

- If family contact has not yet been made, coordinate notification with local consular staff. (OSAC* members can call the (571) 345-2000 or after hours at (212) 309-5056).

- Once consular staff has made the notification, determine who will follow-up with the family on behalf of the institution.
  - Express condolences, personal and institutional
  - Explain your pastoral care and advocacy role
  - Inform that repatriation services and costs will be covered

* OSAC is a division of the Bureau of Diplomatic Security in the U.S. Department of State. Its mission is to provide security and risk information to U.S. businesses, institutions of higher education, faith-based organizations, and nongovernmental organizations abroad. These services are free. For more information, go to http://www.osac.gov.
Aside from obvious peer groups, also inquire with the student’s adviser, family members, or other mentors to identify other organizations in which the student may have been active. Work with representatives of such groups on more specific, personal notifications, which could occur in-person or by e-mail, and see that they happen before any general institutional notification is issued.

Peers of the deceased abroad require notification in the most thoughtful and compassionate manner. Ideally, on-site notification should be made in person by calling an emergency meeting to inform students of the death of a peer/classmate. Be as forthcoming as possible about what is known, or not known, about the cause of death. Students will need to know if they are in danger or at risk. Explain when and how the parents were notified and what the institution is doing to support them.

- Begin discussions of the need and timeline for notification to peers and the campus community
- Inquire whether or not family wants contact information released in the notifications (for students and others to express condolences)
- Ask if they would like to appoint a family member to work with you
- Inform them of the need to discuss details of repatriation in a few days
- Inquire about any religious customs they would like to honor with regard to the remains

- While family contact is being made, notify by phone (do not e-mail) the following members of your international crisis management team and propose the earliest possible meeting date and time:
  - Provost or associate provost
  - Director of study abroad
  - Dean of students
  - Chief general counsel
  - Director of risk management
  - Media/university relations
  - University police/security

- If the student is a guest student on your program, but is a full-time student at another institution, work with the deceased student’s home campus education abroad director, adviser, or other appropriate individual to make notification to his or her counterpart.

- Inform education abroad office staff members.
- Inform the chairman of the deceased student’s major department and/or academic adviser.

- Discuss timeline with the media/university relations office regarding:
  - institution-wide notification e-mail
  - relevant web posting
  - who addresses media inquiries

- Follow up with family members to inquire:
  - If they want the remains embalmed or cremated
  - The name of a funeral home to collect the student’s remains
  - Whether or not they want their contact information released (so members of the university community can express condolences)

- Compose an e-mail to your international emergencies campus unit stakeholders informing them of the incident and response.

- Arrange notification meetings or direct appropriate individuals to compose e-mails to the deceased student’s peer group:
  - bystanders/witnesses/co-victims
  - other students onsite
  - students in the city/region/country (on other programs)
  - academic peers, such as the honors program
  - social/organizational peers, such as fraternities or sororities
  - participation in student government, athletics, or registered student organizations
  - all students on the home campus (plus faculty and staff)
IN THE DAYS FOLLOWING THE INCIDENT

- Check daily with your insurance assistance provider on the status of the return of the deceased student’s remains.
- Send flowers, cards, or engage in other appropriate displays of sympathy.
- Make plans to attend the deceased student’s funeral.
- Identify a faculty member to collect the deceased student’s academic work for the family.
- Contribute to planning/execution of a memorial service.
- Maintain communications with affected students/faculty/staff abroad.
- For faculty or staff that were abroad during the incident, provide information about employee support services/benefits.
- Discourage promises of named scholarships, but make plans to investigate the possibilities with development officers at a later time.
- Contact the registrar to see if the deceased student qualifies for a posthumous degree.
- Ensure the deceased student is removed from university records so the family does not receive bills or enrollment notification (such as from the registrar, student accounts, technology support, etc.)
- Regularly update website, if necessary.
- Make any changes to program status in the database and/or post an incident summary in the individual deceased student’s record in the database.
- Ensure all the deceased student’s possessions are packed up and returned from abroad.
- Maintain contact with the family as appropriate.
- Take time for self-care.

Also explain how students can access grief counseling or other support services. If possible, bring trained therapists to the meeting.

Caring for Self and the Community

Remember that faculty and administrators who may have been particularly close to the student will experience grief as well. Some may surface right away and ask to be involved in the response. A good role for a prominent faculty or staff member is to collect all of the student’s academic work for presentation to the family. Others may be tasked to work with religious life and Student Affairs to plan a memorial service. Even little things like preserving the students email may be extremely important to the family.

If the student died on a faculty-led program, the faculty leader likely played a significant role in the response. He or she may have even witness the death if it was accidental or spend significant amounts of time with the student during the hospitalization prior to death. As a result, the faculty leader may experienced significant trauma and require information about various support services specifically geared towards employees.

Responding to the needs of the family, students, and the community can take several weeks. It is likely the first responder will work every day for at least a month or more to ensure the family receives optimal service and that no step or detail is neglected. Working at such a high level of emotional intensity for weeks on end can take its toll on even the most experienced education abroad professional. Self-care is critical to maintaining a healthy mind and body, so don’t be afraid to ask colleagues for help as well.

Follow-up Care

As the initial shock of the student’s death subsides, other administrative tasks must be kept in mind to ensure there is appropriate follow-up and closure.

Be wary of well-meaning faculty or staff who want to establish a scholarship in the name of the student. It takes significant funds to endow a scholarship, and unless there is a clearly identified donor, no one should make promises the institution cannot keep. Don’t reject the idea—just put it on hold until it can be discussed in a less emotionally charged time. There are parents still waiting for institutions to create scholarships in the name of their students decades after their students’ death.
Also, resist making any promises to the family about awarding their son or daughter a posthumous degree. Each institution has specific requirements for such a degree and it is up to the registrar to determine eligibility. Quietly ask him or her to check, but don’t mention it to the family unless you are sure it will be granted.

Finally, make sure that the student is removed from all campus records so that the family no longer receives mail, especially tuition or other bills, enrollment notifications, alumni event invitations, or education abroad reunion invitations. This type of clerical oversight can quickly undo all of the goodwill you and others have expended trying to care for the family in the days following the tragedy.

A Compassionate Approach

Sadly and surprisingly, several existing education abroad emergency plans advise institutions to distance themselves from the parents or family members of a student who has died on their watch. They advise that parent communications be delegated to media relations personnel or campus attorneys. Such an approach is outdated and dispassionate, to say the least. Instead, every effort should be made to engage with and reach out to the family as often as they desire. This is not a time to be concerned about blame or potential lawsuits. It’s a time to show compassion and grief, and to take advantage of the expertise and resources on your campus to serve the family and the wider campus community.

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When an earthquake and tsunami battered Japan in March 2011, the impact was widespread: Trains stopped running, airports were closed, a nuclear power plant was damaged, people were separated from families, and the U.S. State Department urged U.S. citizens not to travel to the island nation in the wake of the disaster.

As a result, every university in the world with students attending study-abroad programs in Japan had to decide—often within a matter of hours and with very little reliable intelligence—whether to let their students remain in country, or to bring them home and suspend the programs for the academic year.

Such are the times when a university benefits from having detailed, well-planned guidelines about the health and safety of students going abroad—guidelines that ideally go beyond minimum standards suggested by education associations, are tailored to a school’s study-abroad programs, and—perhaps most importantly—leave room to respond to the unexpected.

“The most important thing in managing any health and safety crisis is communication—hands down,” said Susan Popko, associate provost for international programs at Santa Clara University. “You can come up with every possible scenario you can think of, but there will always be something you didn’t consider. What you really need is for the communication infrastructure at your university to turn on a dime, so you can reach the people you need.”

A Tailored Approach
Those, like Popko, who create or oversee health and safety programs for students abroad must consider many factors:
The size of the school, the size and number of abroad programs, the profile of the country in which an abroad program is located, the available staff to create and manage the program, whether to use outside consultants, the university’s tolerance for risk, and the expense of creating an education abroad program.

Risk tolerance is probably the place to start when conceptualizing an education abroad program, said Popko. That may mean consulting with the deans at each school that has abroad programs, with legal counsel, with the campus safety office, and with the university’s president, among others.

“Institutions need to understand their own tolerance for risk, which will help them determine what their standards should be,” Popko said. “For example, are you going to be a university that has no exceptions for allowing students in countries that have U.S. State Department travel warnings, or will you allow exceptions? And if
you do allow exceptions, then under what circumstances?”

William P. Hoye, executive vice president and COO for the Institute for International Education of Students (IES Abroad), won an insurance-company-funded grant to develop risk-assessment guidelines for international study programs. The resulting guidelines—the IES Abroad Map for Student Health, Safety & Crisis Management—can be helpful for universities when creating their own guidelines for safety and health in study abroad.

**Existing Resources**

Because most schools already have crisis management plans and committees, it makes sense to rely on these resources, Hoye said. Often, abroad administrators will bring ad-hoc members to such panels to focus on international activities. “You don’t have to start from zero and create a new team solely committed to things international,” he said.

Even when there are on-campus resources that abroad officials can turn to, there can sometimes be inconsistency, said Julie Anne Friend, director of the Office of Global Safety and Security at Northwestern University.

“Even within one unit, the Latin American coordinator might have good resources in place, but that might not be known to the person running the UK-Ireland programs, or even to the [safety] director who has on-call duties that weekend,” she said.

When Popko first arrived at the relatively small Santa Clara University four years ago, she created a crisis abroad task force, as well as a committee to approve all international travel programs. Those who sit on both panels have become adept at assessing health and safety considerations before students and faculty ever leave the country.

“They can look at proposals and evaluate whether the program coordinator has figured out how, for instance, they’re going to take a bus from the airport to a certain location without taking roads that aren’t recommended,” Popko said.

Many experienced education abroad professionals rely on two main sources when addressing health and safety for an abroad program. One is a U.S. State Department website that has country-specific information for travelers—from road safety to terrorist threats. The other is a Centers for Disease Control and Prevention (CDC) website that provides country-specific health information, such as required immunizations and disease outbreaks. Together, these two websites “really cover everything one would need to know,” Popko said.

After that, she said, program leaders look at their itinerary and, step by step, ask themselves what health and safety issues they need to consider. The expertise of those on the panel can be invaluable to a program leader who may not know all the issues to contemplate.

For instance, Santa Clara University has a longstanding abroad program in El Salvador, but transporting students to the program’s many destinations can be unsafe on roads where crime and gang activity are rampant.

“In some places you should have a private vehicle, but in some places you absolutely should not have a private driver,” Popko said. “We expect the leader to deal with these kinds of questions early.”

**Communication Is Key**

Also important, Popko said, is to have a robust communications system, particularly in the event of an emergency. That communications network should include the abroad director in the country, the students and their parents or emergency contacts, the campus safety office, a risk manager, the school’s legal counsel, the dean of the school associated with the program, and the university president. Those traveling abroad should also have contact and mapping information for area hospitals or after-hours clinics, local law enforcement and fire officials, U.S. embassies, insurance carriers, and key staff at the university campus back home.

“In the event of an emergency, who’s your first responder who gets the emergency call?” Popko asks. “Who’s the second responder? You need to have close partnerships with providers. You need to know all the players and have relationships with them.”

Bill Frederick, founder of Lodestone Safety International and former director of safety at The School for Field Studies, has discovered that safety programs need to address what he calls the “relatively mundane” things that happen on abroad programs, and that many people don’t consider ahead of time.

“It’s not Ebola outbreaks and terror, but car accidents and crime,” he said. An institution, he said, needs to consider “what could happen while students are out drinking too much on a Saturday night, and about diseases in some parts of the world.”

For instance, if a student is sexually assaulted while abroad, a university must consider who will first assist the victim emotionally.

“If you have never done any work with sexual assault victims, that’s not something that’s intuitive,” he said. “Some schools have very clear protocols: This is who you need to call, this is what you..."
need to talk about, here’s a list of local resources in the country, here’s who you must call at the university.

Enlisting Modern Technology
Modern technology has made it much easier for universities to prepare for, and respond to, health and safety incidents.

For instance, nearly 20 years ago, the leaders of a study abroad program in India hired a bus driver to take University of Pittsburgh students to the Taj Mahal after their flight was cancelled. The bus, traveling at night on a dangerous rode, crashed—leading to seven deaths and the recognition that universities needed more thoroughly researched travel plans for students.

Had the same students found their flight cancelled today, experts say, a program leader would ideally turn to the Internet and research the safety of local roads, the advisability of driving at night in India, and the reputations of local bus companies.

Some abroad programs have full-time staffers or contractors monitoring political uprisings, disease outbreaks, and other developments in countries where students are studying.

“Because we can know a lot more today, we should know a lot more,” Frederick said. “Woe to the program that is unaware of political violence in a country, and a parent finds out about it before the program administrators do. Programs are expected to have tremendous information acquisition resources.”

Accommodating Pre-existing Conditions
Increasingly, more students with pre-existing health conditions—asthma, for instance, or diabetes—are signing up for abroad programs, because modern medicine has made it possible for them to be far from home and their physicians. That means a university health plan must provide for coordination between school officials and a student’s physician.

“The hardest part is getting students to disclose conditions and work with us in a timely manner prior to departure—making sure they have enough medication or know where they can get treatment,” Friend said. “They’re young and forgetful. [In the late summer], if a student comes to us at the last minute trying to get health resources for Italy or France, it can be difficult because so much of Italy and France is on vacation.”

School officials must also decide if it’s advantageous to provide health and other insurance abroad, rather than to require the student to find it elsewhere.

Running periodic safety tests, or drills, is critical to the success to having policies in place for the health and safety of students abroad.

School officials must also decide if it’s advantageous to provide health and other insurance abroad, rather than to require the student to find it elsewhere, said Stacey Bolton Tsantir, director of health and safety at the Danish Institute for Study Abroad (DIS) and former director of international health, safety, and compliance at the University of Minnesota.

“There are many programs that go beyond health and travel accident [insurance] to also include security and natural disaster coverage,” Tsantir said. “The University of Minnesota, for example, has utilized their security and natural disaster insurance to evacuate students [after] earthquakes, floods, and political uprisings.”

Stress Testing
Running periodic safety tests, or drills, is critical to the success to having policies in place for the health and safety of students abroad, Hoye said.

“You might say something to the team like, “There’s been a terrorist bombing on a French subway. It’s Saturday night. Your students are probably out on the town or traveling for the weekend. You need to locate them and account for their safety. What steps should you take? In what order?”

Last year, Frederick conducted a drill for a major college that operates abroad programs in Paris, Rome, Barcelona, and other capital cities.

“We put together a host of scenarios…. health scenarios, safety, security,” he said. “Because these cities have great medical care, the staff doesn’t need intense medical training. They need to know what medical facility they can get to, and what university physician is on call to give them advice if they need it.”

Legal Counsel and Liability
Consulting with the school’s legal counsel is paramount, said Hoye, former counsel to the University of Notre Dame. Health and safety programs for abroad students “not only enhance the safety of students, they reduce the institution’s potential liability,” he said.

“If there is an injury and a resulting lawsuit, [a robust] plan gives you an opportunity to point out all the proactive things that you did and to show you exercised reasonable care to protect that
student, which is the standard a judge or jury would use to assess your conduct."

Frederick acknowledged that university officials sometimes worry that if they require staff to adhere to heightened standards for health and safety, they’ll be held to a higher standard if sued.

“That doesn’t really happen as long as you have compliance,” he said. “I tell clients, ‘Don’t come up with a policy that all your people can’t comply with. Because if you don’t follow your own procedures, it’s a slam dunk [for the plaintiff] when you go to court.’”

**Limited Resources**
One of the most challenging aspects of tailoring a health and safety plan for abroad programs, experts said, can be financing the task.

“Institutions face a lot of priorities, and they all require expense and tough decisions have to be made,” Friend said. “Sometimes, providing resources for international health and safety is very important, but [the school] can’t figure out how to fund it.”

Perhaps the most expensive aspect, she said, is hiring someone who makes health and safety abroad their full-time responsibility.

Frederick said his company typically charges about $5,000, depending on the size of a school, to consult on a health and safety program.

“We look at all their manuals, participant agreements, insurance, how they screen their students, their communication protocols, their medical strategy, their rules and policies, and their staffing,” he said. “Then we interview a cross-section of the trip leaders and administrators and come up with recommendations.”

Hoye said there are steps schools can take that “aren’t wildly expensive and can be done in-house.”

“We have an after-hours drill for our primary crisis management team and backup team to see how long it takes us to reach all the members of our [study abroad program staff]. We log the time it takes to reach everyone. You can do these drills yourself and it’s not rocket science.”

Such plans can be augmented by affordable—and sometimes free—services, Hoye said, that monitor country-specific alerts ‘round the clock—whether that’s weather alerts, terrorism advisories, disease outbreaks, or the like.

“While we’re sleeping here in the U.S., we have people in New Zealand and Europe monitoring these alerts,” he said. “If something serious is happening, they’ll wake up the crisis management team so the university can decide the appropriate response.”
HEALTH

BY JULIE ANNE FRIEND
Improvements in the diagnosis and treatment of physical and mental conditions allow today’s students with pre-existing health conditions, learning disabilities, and mobility challenges to enter college with every expectation to succeed. With planning and targeted support, these students can thrive on campus and abroad, but successful outcomes will depend on early disclosure and planning for health care needs. Most institutions have processes that allow a study abroad participant to disclose a health history for review or commentary. This article provides tips on improving predeparture health disclosures; it is not intended to cover travel vaccines or prophylactic medicines.

Legal Standard
The Americans with Disabilities Act (ADA) of 1990 prohibits discrimination against those with a wide variety of chronic health conditions and disabilities (both visible and invisible). Education abroad professionals continue to ask if the law prohibits denying a student access to an education abroad experience based on a health condition or disability. Consistent guidance from the U.S. Department of Education Office for Civil Rights on this matter is scarce, and there are even fewer lawsuits to instruct us. However, most institutions strive to comply with the spirit of the law when responding to student requests for reasonable accommodations abroad, which is enhanced when partnering with a high-quality health insurance and assistance provider abroad and support networks like Mobility International USA.
Foster a Culture of Support

Encouraging students to share applicable health histories with relevant parties on campus requires an “it takes a village” approach. Decades of working with college students inform us that commands and dictates rarely yield the desired result. Harsh language may lead students to conclude that any information deemed “negative” could be used to deny them access to the experience. Instead, softer, caring, and explanatory language may produce better results. In fact, when students (and their parents) understand that the intent of such requests is to develop strategies and identify resources that will help them be successful abroad, they are more likely to share information.

Second, anyone who might be in conversation with a student contemplating an education abroad experience, including academic advisers and campus health care providers, should be trained to respond supportively when a health condition is voluntarily disclosed or discussed. These individuals should know the basics of your institution’s international medical insurance plan and the degree to which predeparture planning is included, such as the identification of practitioners abroad to provide ongoing care, including weekly counseling. Nonmedical staff should know the limits of their expertise, no matter how familiar they may be with the destination or the experience, and not provide medical advice. Instead, they should be equipped to direct students to your campus’s applicable medical resources, in print, online, or in-person.

Third, health care professionals agree that a student with a chronic health condition or disability and her provider are in the best position to decide whether or not she is ready to study abroad. Having a variety of education abroad program opportunities can improve access for students with particular needs.

The Ideal Approach Involves Medical Professionals

While some students proactively seek information on the availability of medical resources abroad related to their pre-existing conditions prior to application, most students who have learned to routinely manage their health conditions fail to consider that changes in air quality, elevation, diet, or climate as well as stress factors related to culture and language can exacerbate symptoms or bring on new ones. Incorporating some type of health “form” in the predeparture preparatory process serves as a reminder to these students that disclosing relevant health conditions can aid in the management of overseas care, but be sure to include health care professionals in the document’s development to ensure the language is consistent with how your organization approaches health and wellness.

Organizations fortunate enough to have a health service with sufficient capacity to review such information (or who have a contractual relationship with licensed medical professionals to do the same) are in an ideal position to provide the best support to student travelers, so long as those charged with reviewing student medical histories are informed of the resources and challenges posed by diverse destinations and experiences. However, this process must also incorporate engagement with other individuals on campus critical to care management, such as counseling center therapists or counselors, education abroad advisers, student affairs staff, disability services staff, and international health and safety specialists as well as your international medical assistance provider.

To prevent allegations of discrimination, many organizations request health data postacceptance, but when application deadlines get extended, this reduces the time available for optimal planning. However, online applications can be constructed so that students can provide the information all at once, but only authorized medical staff can view health-related data. Of course, this requires careful collaborations with information technology professionals in your organization. Be mindful that data security requirements for the management of online health information or records may be higher than for other types of organizational records.

Unburden the Health Care System

If your institution doesn’t have medical professionals who can review health disclosures, and you want to avoid education abroad staff from practicing medicine without a license, don’t require all students to seek medical clearance or obtain a physical prior to their overseas experience (assuming it is one that entails no special health risks). The vast majority of college students are healthy, so requiring all students to seek clearance for an education abroad experience, particularly for short-term programs in low health-risk locations with easy access to high-quality medical care, burdens the health care system. It is costly, and particularly taxing on students who have not needed to see a physician for years. Furthermore, most doctors, even those in campus-based clinics, are unwilling to complete health assessment forms if the
### Develop a Process to Trigger Follow-Up Based on Voluntary Disclosure

#### PART 1

**Self-Assessment Checklist Questions**

<table>
<thead>
<tr>
<th></th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Do you have any disabilities for which you will need accommodations abroad? If yes, are you registered with your institution’s office that supports students with disabilities? If no, register today.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>2</td>
<td>Do you have any serious food, drug, animal, insect, or other allergies? If yes, are your symptoms life-threatening?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>3</td>
<td>Are you on a medically restricted diet?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>4</td>
<td>Do you plan to take prescription medications while abroad?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
| 5 | Have you been treated in the last five years, or are you currently being treated for any of the following conditions?  
   - General: Alcohol/Substance abuse, Eating Disorder, Immunodeficiency, Severe Migraine, Seizure Disorder  
   - Respiratory: Asthma, Tuberculosis  
   - Gastrointestinal: Crohn’s Disease, Ulcerative Colitis  
   - Infectious Diseases: HIV/AIDS, Hepatitis  
   - Endocrine: Diabetes  
   - Mental health: Anxiety Disorder, Bipolar Disorder, Depression, Obsessive Compulsive Disorder | Yes | No |

#### PART 2

**Action Steps Based on Answers to Part One**

- Please select the statements that apply to you:

  - I have answered no to questions #1–5 in Part One, and believe that no additional action on my part is necessary to safeguard my health abroad.
  
  - I answered yes to one or more of questions #1–4 in Part One and will discuss my health care needs with one or more of the following: a representative from my home institution’s unit coordinating my program, a representative from my home institution’s disability services office, a representative from the program provider or host institution, a health care professional, parents, or other family members well in advance of my departure date.

  - I answered yes to question #5 in Part One and understand that I must:
    a) Submit Part Three to the applicable unit coordinating my program after having it completed by the physician providing care for my indicated condition or by another physician qualified to advise on my care.
    b) Sign a release form with my healthcare provider if I would like my provider to share relevant information with the appropriate unit coordinating my program.

---

Student has not been a regular patient. Instead, consider developing a three-step process to trigger follow-up based on voluntary disclosures. For example, Part One is a self-assessment “quiz” (see above) that helps the student determine whether or not any action should be taken to plan for medical needs abroad.

Part Two (see above) classifies students further: those needing minimal actions and those needing medical advice. Students with routine medical conditions require some planning, but not medical “clearance.” They should be able to decide with whom that planning should occur.
PART THREE: HEALTH ASSESSMENT FORM

Healthcare Provider Evaluation

(only required for students who answered “yes” to question #5 on self-assessment checklist: part one.)

All students who answered yes to question #5 on the Self-Assessment Checklist: Part One must meet with a healthcare provider and submit this completed and signed form at least 6 weeks prior to departure. The student should bring Part One and the appropriate pages from the CDC Travelers’ Health website (see below) to their doctor’s appointment.

STUDENT NAME and E-MAIL ADDRESS: ______________________________________________________________

PROGRAM/EXPERIENCE: ______________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

To the healthcare provider: Thank you for taking the time to meet with this student and complete this form. The student has been treated for one or more of the conditions or events listed in the Self-Assessment Checklist Part One, Number 5, over the past five years. Living and studying in an unfamiliar environment can trigger physical and emotional stress and exacerbate current health issues. Familiar or reliable healthcare or medications might not be readily available to the student in his/her host country.

You are asked to:

- Review any relevant information provided on the CDC Travelers’ Health website for all countries on the student’s itinerary. (See http://wwwnc.cdc.gov/travel/destinations/list.htm).
- Discuss the student’s medical situation with him/her in light of how it may affect the student’s international experience.
- Ask the student about their destination and the demands of the specific program/experience as well as other countries they might visit that could pose health challenges.
- Advise the student regarding how potentially dramatic changes in climate, diet, living arrangements, social life, and study demands may affect him/her abroad.
- Discuss possible accommodations the student should make or discuss with staff administering or overseeing their overseas program/experience.

To be completed by healthcare provider:

I have met with the student to discuss his/her medical condition as it relates to his/her intended international experience.

I have encouraged the student to discuss his/her medical condition with one or more of the following: a representative from unit coordinating his/her program, a representative the disability services office, a health care professional, a representative from the program provider or host institution, parents, or other family members well in advance of the program’s departure date.

NAME OF MEDICAL PROFESSIONAL: ___________________________ TITLE: ___________________________

CITY/STATE: __________________________________________________

SIGNATURE: ___________________________ DATE: ___________________________
Part Three (see left) is reserved for students with chronic conditions that have occurred in the last five years, or for which they are currently under treatment. In this case, students should be expected to see their treating practitioner, who would verify that the necessary components of a medical management plan were discussed. Part Three is not meant to denote medical “clearance” or serve as a health record noting the condition. It should instead trigger a follow-up communication with the student regarding medical management planning, such as referral to your medical assistance provider.

Medical Emergencies
An antiquated argument for the collection of complete health histories (that are retained by accompanying faculty or staff) is so that the information can be provided to emergency room staff in the event of a medical crisis abroad. However, this means that nonmedical professionals have access to private health information, not all of which may be relevant to travel. In truth, the likelihood that the accompanying employee would be in the presence of the student at the time of an emergency, and would have this information on hand, is remote. In most cases, a student in medical distress is conscious and would be able to disclose her health history in the first minutes following an incident. Any traveler with a life-threatening condition, medication allergy, or who is on a medication that would cause complications when rendering emergency care while unconscious should wear a medical identification tag.

Prepare for the Unexpected (or Undisclosed)
It’s important to realize that no process or approach will elicit disclosures of health conditions from all our students. There will always be students who honestly forget or deliberately withhold information. As a result, as best as we can, we must be prepared to respond to an emergency health care need resulting from an undisclosed (and in some cases unknown) pre-existing condition in the same way that we are charged to support a student who discloses such conditions in advance.

Conclusion
Encouraging students to share information to promote health care management abroad requires a thoughtful, organizationwide approach that reflects your access to medical resources, whether directly or indirectly. It should include widespread training of employees who may be in receipt of health information from a student, so they can respond in an informed and compassionate manner. Over time, as your cohort of satisfied, successful students return from abroad, the number of (and the comfort level with) such disclosures will increase.

Focus on Chronic Conditions Under Current or Recent Treatment
Campus health professionals agree that suggesting students disclose a complete medical history is unnecessary. Surgery for tonsillitis at age 10 or repairs to a torn ACL at age 14 are generally irrelevant for the purposes of study abroad. Encouraging the disclosure of chronic medical conditions currently in treatment or those having occurred within the last five years is more pertinent. Examples include, but are not limited to: anxiety, asthma, attention deficit disorder, concussion, Crohn’s disease, depression, diabetes, eating disorders, HIV, irritable bowel syndrome, and physical disabilities or limitations.

Allergies to food, insects, or animals are important only if exposure could be life-threatening or if the student would need assistance seeking treatment. There is widespread agreement that it is generally not necessary to know about routine conditions such as mild-to-moderate allergies to dust or pollen (especially if controlled by over-the-counter medications), or birth control.

Acknowledgments
Special thanks to Bill Powell, area executive vice president, Gallagher Higher Education Practice, Arthur J. Gallagher Risk Management Services, Inc., Chicago, Illinois, who contributed to this article.
Questions for Responding to Emergencies

Universal concerns assess the following
► What is the current physical and psychological condition of affected participant(s)?
► Is the lead on-site staff member now in close contact with all affected participants?
► What is the proximity of the event(s) to all program participants?
► What is the imminent risk to participant(s) if they remain where they are?
► Are all program participants, whether directly involved or not, aware of the emergency? How are they responding to the emergency?
► Are adequate food, water, and medical attention available?
► Is adequate and secure housing available? How long will this housing be available? What other appropriate housing options are available as a backup, if needed?
► What information should be given to students about steps to take in the event that the situation worsens?
► Should students be evacuated?

If a participant(s) has fallen seriously ill or been seriously injured
► Is the insurance provider involved/aware?
► What medical treatment has the student received?
► Does the attending physician speak English?
► What is the diagnosis? The prescribed treatment? The prognosis?
► Are other participants at risk from this illness?
► Is airlift a desirable and viable action?
► Does the Response Team need to be convened?
► Have the student’s parents been contacted?

If a participant is suffering from consequences related to mental illness
► Is the insurance provider involved/aware?
► What medical treatment has the student received?
► Is counseling available?
► If the individual chooses to return home, is it safe for them to go alone?
► Does the Response Team need to be convened?
► Have the student’s parents been contacted?

If a participant has been assaulted or raped
► What are the details of the incident?
► What has the on-site response been?
► Where has the participant been taken?
► If a rape or sexual assault, is counseling available?
► Counseling in English?
► What is the medical diagnosis? The prescribed treatment? The prognosis?
► Is the participant interested in returning to the United States?
► Does the Response Team need to be convened?
► Have the student’s parents been contacted?

If a participant is missing
► When was the student last seen?
► Does anyone have any idea where they might have gone?
► If the student had left and was expected to return at a specific time, when was the date and time of the expected return?
► Did the participant tell anyone of plans to be absent?
► Are search and rescue operations available on site? Are these reliable? Have they already been initiated? Should they be initiated?
► If other students are enlisted to form search parties, have they been adequately briefed on what to do if they find the missing participant and on the various scenarios they may encounter?
If assistance through the health insurance or travel assistance provider needed?
Does the Response Team need to be convened?
Have the student’s parents been contacted?
If you have determined that the student is truly likely to be missing, proceed with the following questions:
Has a report been filed with the local police?
What is the case number?
What other locally and culturally appropriate steps are necessary?
Has the embassy been contacted?

If a student has been arrested
Have the local police been notified?
Has the U.S. embassy been notified?
Have plans been made to repatriate the body?
What coordination is needed to take care of collecting personal belongings, closing a bank account, liaising with the student’s host family, etc.?
What counseling support is available for other program students?
Does the Response Team need to be convened?
Have the student’s parents been contacted?

If a participant is suffering from consequences related to mental illness
Has he or she been detained?
Has the U.S. embassy been notified? What has their response been? What is their advice?
What agency made the arrest and filed the charges?
What are the names, addresses, and phone numbers of arresting authorities?
What is the case number?
What rights have been granted?
Is he/she entitled to place a phone call?
Has a local attorney been contacted?

If a student has been taken hostage
Has the U.S. embassy been notified?
What is the embassy’s advice?
Have the kidnappers made contact?
Is negotiation support available on site?
Who is the contact person at the embassy, and at the U.S. Department of State in Washington, D.C.?
What are their titles and contact numbers?
Does the Response Team need to be convened?
Have the student’s parents been contacted?

If the emergency is political in nature (e.g., terrorist acts), or if a natural or a man-made disaster has occurred
Does the Response Team need to be convened?
Have the students’ parents been contacted?
Has the U.S. embassy advised participants to take appropriate action?
Have all participants been made aware of these precautions, and in writing?
Are all participants following these precautions? Have local authorities imposed a curfew?
Has travel in or out of the country been restricted in any way?
Is the group in danger?
Should regular classes and other program activities be suspended?
Who or what is the target of any unrest?
Has any particular group or organization been threatened?
What kind of military or other security or public safety personnel are present? Are they unusually visible? How are they behaving with respect to the civilian population?
Is airlift a desirable and viable action?
NAFSA STRATEGIC RETREAT
for Education Abroad Leaders

IMPACTS OF EDUCATION ABROAD PROGRAMS ON HOST COMMUNITIES

How do education abroad programs affect their host communities? In education abroad, the focus is largely on how our programs impact our students. As a result, we might not fully consider or only make assumptions about the long term or recurring presences of our students on host communities.

With the steady growth in study abroad participation, proliferation of short-terms programs, and promotional non-traditional destinations, serious potential exists for unintended economic, social, and cultural consequences on the partners and communities who accommodate our programs.

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