

## 2010 Professional Advising Leadership Fellow Report

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'Advising HIV Positive International Students'

### Introduction and Acknowledgements

The PAL Fellows program, begun in 2003, offers a valuable professional development opportunity to EducationUSA advisors through support for research into 'burning questions' that face advisors in the field. This support comes in many forms, not least of which is funding for travel to attend a training seminar in Washington, DC, and then to conduct field research in the United States. Prior to undertaking this travel, in 2009 and early 2010, the Self-Directed Orientation modules prepared us as PAL fellows for the successful completion of our respective research projects.

For this training and all the personal support through the various stages of the project, I thank Dorothy Mora of the ECA Bureau of the Department of State, Janine Farhat of the College Board, and independent training consultant Debbie Hefferon, and as well as my colleagues who formed the PAL Fellows class of 2010. I also thank the Public Affairs Section of the US Consulate, Cape Town, for allowing me to travel to undertake this research as part of my work.

I am indebted to many international student advisors and health directors at US universities for their time and insights, to Fanta Aw of American University who inspired me to take this task on and see it through, and to Robin Worth of Harvard who facilitated my meetings on several campuses and health services units in Boston, where I saw the impact of the HIV question come into focus.

### Rationale for the Research

HIV/AIDS has become part of life in the 21<sup>st</sup> Century. However, it is no longer the death sentence that it was in the 1980's as many people diagnosed with HIV are living longer, with a quality of life that would enable a career, through the provision of anti-retroviral medications. In high prevalence nations, such as South Africa where there is a 28% infection rate in 2010, it is likely that there will be, among those looking to study in the US, some that will face the challenges of HIV positive status as international students. Even before the announcement by the US Department of State in December 2009 that HIV was no longer a point of 'inadmissibility' in the visa process, there were students who made their way to the US and then either tested HIV positive or revealed to international student advisors that they were positive, and needed assistance in accessing medical and psychosocial support systems. Now that the ban on travel to the US by HIV positive persons is lifted, these students can (if they are willing and welcomed) seek advising from the outset on how to handle life as a student in the US. **The rationale behind this study was that no one, even those living with HIV, should be excluded from opportunities to study in the US if they are qualified candidates, and that EducationUSA advisors should be equipped to advise on matters that would be important for these applicants.**

### Research Objectives

This PAL project sought to document, to some degree, the challenges involved in US study for international students infected or affected with HIV/AIDS, and to provide guidelines for advisors to equip these students with information and resources prior

to their departure for US study. Specifically, the objective was to provide an overview of the prevalence of HIV/AIDS in nations that send students to the US at this time; to convey the facts with regard to the transfer of HIV/AIDS; to clarify the rights of HIV positive persons in terms of the visa process and US law; to alert advisors to challenges these students will face with regard to, eg, shared housing, access to medication and medical insurance, and access to psychosocial counselling to deal with issues of stigma around HIV; to catalogue pertinent services available on various US campuses; and to devise constructive advising materials for EducationUSA, especially in regions with a high HIV prevalence.

## **Program Description**

In addition to the initial meetings to refine study objectives at the pre-NAFSA meetings in May 2009, where my mentors Thais Pires and Margaret Anyigbo offered sound advice, the PAL fellows were given five self-directed orientation modules prior to our visit to the US in May 2010. My own research in this period included a **review of the literature** on HIV that was available in South Africa and on the internet, and a **research survey** of EducationUSA advisors as well as US-based international student advisors about their perceptions of the challenges HIV positive international students face and how well equipped they were to assist these students. The survey was circulated via the REAC listserv as well as the relevant NAFSA discussion forums. The response was limited, but the exercise yielded some valuable pointers for further research.

In mid-May 2010, the PAL fellows met together in Washington, DC, for a series of **leadership seminars** and training in various skills such as designing and conducting effective research interviews and creating podcast productions. The results of the Meyers-Briggs Type Indicator were woven into these exercises. We also received a **briefing from the ECA Bureau at the State Department on new EducationUSA initiatives** with the US university community and discussed, among other things, ethics in advising and the potential of social networking for advising activities.

After these group sessions, we were released for our **specific research programs**. Beginning with **phone call interviews** with the American College Health Association liaison on issues of sexual health and with the head of the Health Services unit at Franklin and Marshall in Virginia, I quickly realised that my topic was of great interest to the US university community in light of the January 2010 lift of the ban on travel to the US by HIV positive persons. The need for advising guidelines was confirmed in my **visits to universities** in Boston (Brandeis, Harvard, Boston University, Bunker Hill Community College, Tufts and MIT), in Washington, DC (American University, George Mason, Howard, Georgetown, and Montgomery College) and Philadelphia (University of Pennsylvania). Overall, from these fifteen research interviews, I gained a good sense of what information should be made available to our advisees about services for HIV positive international students, and also what factors should be kept in mind in advising these students.

I met with campus health professionals, deans in charge of student life, international admissions officers, international student advisors, and administrators dealing with health insurance issues for international students. Sometimes these were one-on-one meetings, and sometimes I would be ushered into a board room where five or six people were gathered around a table. In addition, I met with the former legal counsel to the Secretary of Health and Human Services, and spoke over the phone with a legal consultant for the US Department of Education. These interviews arose after I realised the importance of communicating US laws relating to the protection of personal privacy in the US.

Always I had to first describe my project, and in that context, EducationUSA, and then try to ask as many of my questions as possible. This is where the elevator speech developed during our training week came in handy! Where possible, I had forwarded a synopsis of my project and my research questions ahead of time, but often there were several at the table who knew only that I had come from Cape Town and wanted to talk about HIV positive students.

While in the US, I also purchased (with PAL funding) additional books that have assisted in the development of the guidelines for EducationUSA. These were *AIDS in the Twenty-First Century: Disease and Globalization* by T. Barnett and A. Whiteside; *Viruses, Plagues and History* by M. Oldstone; and *The Children of Africa Confront AIDS* edited by A Singhal and W S Howard.

### **Program Outcomes for EducationUSA Advising**

Currently, there are three modes for getting the results of this research out to the EducationUSA advising community:

- A **set of guidelines** for advising HIV positive international students, designed specifically for EducationUSA advisors both at initial stages and at the Pre-Departure stage, will be distributed via the EducationUSA website advisor's page before the end of the year.
- I plan to present my findings on advising HIV positive students within the **session on Advising and Disabilities at the Africa Regional Conference** in October 2010.
- The material will be submitted in **article** form to the *Connections* EducationUSA newsletter for publication, as well.

These materials, while focused on HIV, will discuss some issues that I did not anticipate in my earlier set of objectives. These include US privacy laws that pertain to educational and health records, the need for tools to deal with the stigma associated with both HIV and mental health issues, the new health care legislation and possible implications for international students, and how to access local programs for the provision of ARV's and other medications.

While the focus of these guidelines and presentations will be advising for international students with HIV, I believe they may also reveal the need for the EducationUSA advising community to be more aware of the possible health challenges of international students and the implications of these on their decision to apply to study in the US in the first place.

My research into the prevalence of HIV around the globe, and likely patterns of increasing incidence in places like China and India, also underline the need for these guidelines beyond the African continent.

Furthermore, while many advisors will assume they need not know how to advise HIV positive students, due to the reported low prevalence rates in their countries, I hope to sensitise the advising community more broadly about the need for advising on health care in general, as:

- HIV is a **chronic disease** (as is diabetes or haemophilia)
- HIV is a **stigmatised condition** (as is depression and other mental health disorders)

There are no doubt students with chronic or stigmatised health issues visiting to our advising centers. Do we know what health insurance is likely to cover in terms of care and medication for these needs? Do we factor access to health care into our advising on selecting appropriate institutions (would such students be better off in urban areas, where specialists and public transport are available, or in small towns with caring health practitioners but little chance at remaining private about the condition in question)?

Ultimately, I hope to equip advisors to answer this question: **How can students who are qualified in every other way for study in the US, but are living with HIV in their home country, prepare to navigate the challenge of accessing suitable and affordable health care in the US?**

### **Recommendations for Future Research**

How can international student advisors be better prepared to assist students with HIV? This was the recurring question from those I interviewed in the US. There was more than one indication that my visit had catalysed a discussion about being prepared for more students with HIV arriving on campuses, in view of the lifted ban.

I would suggest that following this study, there be a **collaborative effort with US-based international student advisors to devise suitable guidelines for equipping International Student Services** to make available information on health care options for addressing difficult to discuss health issues such as HIV, but also mental health disorders, chronic diseases such as diabetes and haemophilia, digestive disorders, and other problems that are difficult to discuss due to stigma or cultural taboos.

Issues around **US privacy laws and the mental health question** came up repeatedly, I would note, in view of the tragedy at Virginia Tech in 2007 where an international student suffering from a mental health disorder killed 32 people and then himself. A panel set up to investigate found that there were gaps in mental health care on the campus, as well as misunderstandings about privacy laws.

### **Closing thoughts for future PAL Fellows**

While every PAL project will be different, and thus the preparation will vary, there is no substitute for time spent in the early phase of the research in order to design a project with clear objectives and deliverables. At the same time, the US research phase requires a great deal of resourceful thinking and perseverance, as well as flexibility when things don't go quite as planned. I can recommend this professional development opportunity to anyone with energy to carry it through, and thank those who have gone before on this path.

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