

CHAPTER 7

HEALTH AND SAFETY

Anyone planning a long stay in another country is naturally concerned about health and safety. Will I get sick or hurt? Will I be robbed? This chapter discusses health and safety for Chinese students in the United States under these headings:

- 7.1 Personal Safety
 - 7.2 Safeguarding Your Property
 - 7.3 U.S. Health-Care System
 - 7.4 Physical Health
 - 7.5 Mental Health
 - 7.6 Health and Accident Insurance
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7.1 Personal Safety

American movies, TV programs, and news reports may convey the impression that serious crime is widespread in the United States. In fact, while some areas of some major cities are generally considered “dangerous,” most parts of the country are not.

Your International Student Office’s *orientation program* (see Sec. 1.12.5) will let you know about personal-safety concerns in your particular location. Here are some guidelines to follow no matter where you are:

- Keep your doors locked even when you are at home.
- If someone knocks at your door or rings your doorbell, do not open the door until you know who is there.
- Leave both an inside and an outside light on if you will be away from your room or apartment after dark.
- Be cautious if you choose (as many pedestrians do) to disregard traffic signals while walking on and around your campus.
- Avoid areas known to be “unsafe.” This may include certain neighborhoods, areas lacking good lighting at night, and the vicinity of bars, particularly at closing hour.
- If you must walk at night, walk with someone else, rather than alone. Avoid dark areas.
- Carry a whistle you can use to attract attention in case of problems.
- Know how you will react in case of trouble. For one thing, know the telephone number for reporting emergencies: 911 for off-campus, and your campus police number. Campus police often have special training for responding to students.

7.2 Safeguarding Your Property

On some campuses theft of “personal property” is a significant problem. Popular targets for thieves include bicycles, laptop computers, portable CD and tape players, books, and leather jackets. Do not tempt thieves or make it easy for them to take advantage of you. Follow these guidelines for protecting your property:

- Lock the doors to rooms, apartments, and cars.
- If you have particularly valuable articles (such as jewelry and documents), rent a safety-deposit box at a bank and keep them there.
- When you are in a library, bookstore, or other public place, do not leave your possessions unattended. In particular, do not leave a backpack lying about.
- If you have a bicycle, buy a strong lock and use it.
- Do not display large amounts of cash. Be cautious about withdrawing cash from an ATM after dark.
- If you take a vacation, make arrangements for a trusted person to check your room or apartment every day. Have the postal service hold your mail if someone cannot collect it for you. Stop the delivery of any newspapers that may be coming to your door. If appropriate on your campus, let your campus police know that you will be gone.
- Do not give personal identifying numbers such as a social security, bank account, or credit-card number to anyone you do not know and trust.
- Buy *renter’s insurance* (see Sec. 1.8.4).

7.3 U.S. Health-Care System

Chinese students who visit American doctors find that the doctors do not examine their tongues (unless the student has complained specifically about a problem with the tongue). Nor do American doctors check for a variety of pulses. Western doctors’ medical beliefs are quite different from those underlying traditional Chinese medicine. So what Western doctors do with their patients is not the same as what traditional Chinese doctors do with theirs.

Another difference Chinese students encounter in the United States is in the “health-care delivery system,” that is, the means by which patients gain access to medical services.

If you are interested in learning more about Western medicine as compared with Chinese medicine, you could read Chapter 2 of *Between Heaven and Earth*, a book designed to teach Westerners about Chinese medicine. Complete publication information about the book is in the References under the name of Beinfield

Aspects of the United States health-care delivery system with which Chinese students will want to be familiar include these:

7.3.1 High Costs and Sometimes High Quality

7.3.2 Flux and Controversy

7.3.3 Types of Providers Available to Students

- 7.3.4 What Happens When You See a Doctor
- 7.3.5 What Happens When You See a Dentist

7.3.1 High Costs and Sometimes High Quality

Health care in the United States is based on the idea that people's lives should generally be prolonged as long as possible, however ill or injured they may be. In line with this goal, there is major investment in research, medications, technology, and training for specialists.

Meeting the expense of health care is *each individual's responsibility*, not the government's responsibility. Many people buy *health insurance* (see Sec. 7.6) they can share the costs of their medical care with other insurance consumers. Thus, the cost of medical care includes not just the cost of medical care itself, but of the very large health-insurance industry.

One result of these and other factors is that *medical costs in the U.S. are extremely high*. For instance, antibiotics for one sickness might cost over \$100. Delivering a baby can easily cost \$6,000. Indeed, students from China and most other countries, where the government pays or subsidizes medical costs, often have difficulty comprehending how high the costs can be.

Medical Costs Not a Joke

"I know for sure that medical care could be notoriously expensive," said one Chinese graduate student. "That is why it is widely known that Chinese students should take care of their health, particularly dental care. We even joke that the better way to pay medical bill is to fly back to China, and get your bad teeth pulled instead of going to see dentist here."

Another result is that the *quality of medical care is very high*, at least for those who can afford the cost. People from all over the world travel to the United States for treatment of unusual or serious medical problems.

7.3.2 Flux and Controversy

For many complex reasons, the U.S. health-care delivery system is in a state of change, and many aspects of it are subject to controversy. Understanding all the issues requires special expertise. From the point of view of a person who uses or might use health services, such as students from China, the important point is this: *Wise consumers learn about the health-care services available in their communities. They remain generally informed about the "health-care debate" and take steps to assure that any care they get is appropriate and costs no more than necessary.*

Following this guideline is not easy. It requires paying attention to media information about health care, and asking many questions about one's own health situation.

7.3.3. Types of Providers Available to Students

Most campuses have a “*student health center*” where one or more doctors or nurses provide initial care to ill or injured students (but, usually, not their dependents). Students needing more intensive or specialized treatment are referred elsewhere. Generally you should *start at the student health center if you are sick or hurt*. The cost will be lower (there may be no cost at all) and you can get answers to some of your questions.

Beyond whatever student health center the campus provides, students need to find out what medical care personnel and facilities are available in their communities. Information about health care is normally provided in orientation programs for new foreign students. Also, student health centers themselves will be aware of the local options. The remainder of this section explains what some of those options might be.

Most physicians have a “*private practice*,” an office where they see patients. Most doctors are affiliated with a hospital or a “health management organization.” You can make an appointment to see a specific doctor, whether the doctor is a “generalist” or a “specialist” in some field such as endocrinology or gynecology. Usually, seeing a private doctor is a more expensive way to get medical care.

Groups of doctors may form a *clinic* for certain categories of patients (such as children) or maladies (such as orthopedic problems). Clinic costs are likely to be similar to those of a private doctor.

Groups of doctors and other health-care providers may be affiliated with a *health management organization* (or *HMO*) whose purpose is to provide health care and also to contain prices. Some health-insurance providers require policy holders to be affiliated with an HMO, which will provide what is known as “managed care.” Under managed care, patients choose a “primary care physician” who supervises their medical treatments. The primary care physician may perform the diagnosis and treatment, or may refer the patient to a specialist.

Hospital emergency rooms are intended for *actual emergencies*, that is, life-threatening or other situations requiring immediate attention. Emergency-room care is *very expensive* and should not be used for routine medical problems.

Hospitals are intended for people needing more complex and/or time-consuming treatment, such as serious surgeries. The cost of hospital care can easily reach the thousands of dollars *per day*.

In the United States, such procedures as acupuncture, acupressure, and herbal treatments come under the label of “*alternative medicine*.” American doctors have traditionally held a negative view of alternative treatments, considering them “unscientific” and ineffective. In recent years, though, such treatments have gained respect within some traditional medical circles and have become more widely available. Alternative treatments are nearly

always less expensive than those provided by medical doctors. Some alternative treatments, but not all, may be covered by health-insurance policies.

Many people, certainly including foreign students, attempt *self-care* when they are ill. Chinese students may use remedies brought or sent from home; or rely on other Chinese who are trained in traditional medicine. Many people go to the World Wide Web for information about their malady and its treatment. See Sec. 7.4.2 for some relevant URLs.

7.3.4 What Happens When You See a Doctor

When you go to see a doctor, expect to be asked for information about your health insurance. (Most insurers give their clients a card with the necessary information.) Then, if you have not already done so, you will be asked to fill out a health-history form. You may need to ask about the meaning of some terms on the form.

Then you will go to a small room, usually called an “examination room.” (If you want to, you can have a friend with you.) Sometimes a nurse will talk with you first and collect some basic information. The nurse may measure your temperature and blood pressure, and/or do other preliminaries intended to save the doctor’s time.

When the doctor comes into the examining room, she or he will ask you for details about your symptoms--what they feel like, whether they are more noticeable under some circumstances than others, how long you have had them, and so on. (If you are a female and the doctor is male, a female nurse will be in the room too.) The doctor expects you to

The Doctor May Use Vocabulary You Do Not Know

Doctors naturally use terms that refer to different organs, body parts and illnesses. Some doctors are more patient than others with clients who do not understand the words they use. Said one Chinese graduate student, “I have visited the health service center on campus once after I accidentally fell off [a] bicycle. The doctor did not seem to be very friendly. He asked me whether I had [a] shot for tetanus before. The word ‘tetanus’ did not make sense to me. He was very impatient when I looked up the word in my English dictionary, and told the nurse to give me the shot, and left.”

discuss your symptoms objectively, even though you may be feeling uncomfortable or afraid. The doctor may ask you what treatments you have already tried. Fully answer the doctor’s questions. Traditional Chinese herbs and other treatments can interact with western medicines, so the doctor needs know about other treatments you are using.

The doctor then examines the parts of your body related to your “complaint”—your throat, ears, knee, or whatever.

In the U.S. health-care system, patients are encouraged to take responsibility for themselves by asking the doctors (or other care-givers) questions about their condition

and its treatment. Patients are expected to ask about the costs of recommended treatment, and may be asked to participate in making decisions about treatment and medications.

The doctor may conclude by arranging more tests to help determine the nature of your problem. Or the doctor may give you a “prescription” on the basis of which you can buy the specified medication from a pharmacist. Doctors will usually prescribe minimal dosages of a medication, so your body will not build resistance to stronger drugs. They will prescribe higher dosages later if that seems necessary.

Taking an English dictionary with you when you see a doctor or dentist is a good idea. You might also want to take a Chinese friend who speaks English well. Americans might find it unusual for you to want a friend with you when you are seeing a doctor, because Americans consider seeing a doctor to be a private matter. But if you explain that your friend is there to help you understand what the doctor (and nurse) say, there should be no problem.

7.3.5 What Happens When You See a Dentist

Access to dental care is much less complicated than access to medical care.

Many people select a dentist based on the recommendation of a friend or acquaintance. Alternatives: Look under “dentists” in the yellow pages of your local telephone directory or consult the web site of the American Dental Association at www.ada.org/ada/resources/societies/searchorg.asp for a link to the URL of the local or state dental society with members in your area. (If you are attending a university with a dental school, you may be able to get dental-clinic treatment at a cost lower than what you would pay a private dentist.)

When you go to a dentist’s office or to a dental clinic, you will first be asked for information about any dental insurance you might have. (Health insurance policies generally cover dental care only when made necessary by an accident.) You will be asked to complete a form giving information about your health and dental history.

Your teeth may be x-rayed. Usually a dental hygienist (roughly, an assistant who performs some basic procedures in a dentist’s office or a dental clinic) will take the x-rays and then may do a preliminary examination of your teeth. If you are having your teeth cleaned, the hygienist will do that.

Then the dentist will come to the dental chair where you are reclining to check on the work of the hygienist and perform any more advanced services that are required.

While they are working on you, hygienists and dentists will normally wear rubber gloves, glasses over their eyes, and masks over their noses and mouths in order to minimize the possibility of transmitting disease-carrying organisms. Dentists will inject Novocain or some other pain-killing substance before starting procedures they expect to be painful.

Most dentists seek to provide “painless dentistry,” doing as much as possible to prevent or limit discomfort.

Dentists expect their patients to give complete, objective reports concerning their dental problems and to ask any questions they might have about their condition or its treatment.

7.4 Physical Health

This brief discussion of the complex topic of physical health comes under three headings:

7.4.1 Guidelines for Maintaining Health

7.4.2 Seeking Information about Particular Health Problems

7.4.3 Special Health Concerns of Women

7.4.1 Guidelines for Maintaining Health

College and university students who take care of themselves may rarely or never become ill. In the American conception, maintaining one’s health entails these elements:

- Eating a balanced diet
- Getting enough rest
- Exercising regularly
- Not smoking or using drugs
- Following safe-sex practices

Following all these guidelines can be a challenge for students, who can easily become so engrossed with their studies that they fail to attend to their health. Taking care of your health as a student requires planning and discipline.

Many people in the United States seek information about their health problems before they go to a doctor. Sec. 7.4.2 gives the URLs of some popular health-related sites.

In recent years Americans have been paying increased attention to the *special health concerns of women*. Female students from China might benefit from that fact. Sec. 7.4.3 concerns this topic.

7.4.2 Seeking Information about Particular Health Problems

Several well known medical organizations have World Wide Web sites with extensive information about various medical conditions, as well as guidelines for maintaining health. Among them:

- American College Health Association, www.acha.org/index.cfm. Click on “Information & Resources”
- Mayo Clinic, www.mayoclinic.com
- webMD Corporation, www.webmd.com
- U.S. National Library of Medicine and the National Institutes of Health, www.medlineplus.gov

- U.S. Department of Health & Human Services, www.healthfinder.gov

In addition, many college and university student-health centers have links to health information of particular interest to college and university students. Among them:

- Michigan State University, www.olin.msu.edu/factsheet-websitelist.php
- University of Florida, www.health.ufl.edu/shcc/shcc-cas.htm#FactLinks
- University of Colorado at Boulder, www.colorado.edu/healthcenter/

7.4.2 Special Health Concerns of Women

Many campuses and communities have doctors, clinics, or information centers focused on the special health concerns of women. These include birth control and family planning (which are still considered more female than male responsibilities), sexual health, and maternity care. Your International Student Office will have information on such local sources.

In addition, many World Wide Web sites devoted to health topics have information about women's concerns. Some sites that focus on sex and sexuality:

- Williams College, <http://wso.williams.edu/orgs/peerh//sex>
- Sexual Health infoCenter, www.sexhealth.org

One question female students from China and elsewhere may face is whether to have a baby while in the United States. In part this is an issue of life situation and career development, that is, a matter of one's age, educational situation, and career objectives.

In part it is also a matter of putting oneself in the hands of a medical system whose assumptions and procedures seem foreign and whose costs are high. Some Chinese women do have babies while studying in the United States. Others choose to return to China to give birth.

7.5 Mental Health

Being a student in a foreign country is stressful, and more so if that country's language is different from one's own. Studying at the graduate level in the United States is particularly stressful, because the system puts so much pressure on students to perform well and independently.

Typical challenges for college and university students in the United States, both foreign and domestic, include homesickness, "time management," and "stress management." Most schools have some form of "counseling service" to help students with these and with the more difficult mental-health issues that some students face.

You can look on our school's web site to learn what counseling services it offers. The web has other counseling-related sources for students. For example, the University of Chicago Student Counseling and Resource Service has a "virtual pamphlet collection" at <http://uhs.bsd.uchicago.edu/vpc/>. It addresses many mental-health topics and has links to

many other helpful sites. The University of Iowa's Counseling Service offers a list of "self-help resources" at www.uiowa.edu/~ucs/pcswebsites.html.

Some Chinese students have mental-health problems. Generally their ideas about the causes of and best responses to such problems are different from the Americans' ideas. Chinese students are generally reluctant to ask counselors, psychologists, or psychiatrists for help. They often keep their problems to themselves and seem to believe that working harder and being more determined will allow them to overcome any emotional or psychological difficulties.

Experience shows, though, that most people need help to overcome serious mental-health problems. American college and university officials encourage Chinese and all other students to visit the counseling service if they find themselves persistently depressed, unhappy in their relationships, unable to eat or sleep properly, subject to sudden changes in mood or outbursts of anger, or in other ways not able to function constructively in normal daily life.

7.6 Health and Accident Insurance

To avoid having to pay high medical bills that result from illness or injury (the bill for a few days of hospital care can be in the thousands of dollars), it is *necessary to buy health insurance*. Insurance protects against the need to meet an entire medical expense oneself. Insurance spreads the cost of medical treatment among a group of people, not all of whom have problems that result in medical bills.

Federal regulations *require* students in J-1 status and their J-2 dependents to have health insurance that meets specified standards. If you receive a Form DS-2019 to obtain a J-1 visa, you should also receive information about the insurance requirement.

In addition, *some colleges and universities require their F-1 students and in some cases their F-2 dependents to have health insurance*. Your school will send you information about any health-insurance requirements.

The topic of health insurance is very complex. Even so, wise students make an effort to understand it. This chapter discusses health insurance under these headings:

- 7.6.1 What Insurance Does and Does Not Cover
- 7.6.2 Selecting an Insurance Policy
- 7.6.3 Costs
- 7.6.4 Common Misconceptions about Insurance
- 7.6.5 Insurance Terminology

7.6.1 What Health Insurance Does and Does Not Cover

In general, health insurance covers the higher costs that result from accidents and serious illness, with associated hospitalization, medical tests, and the services of doctors and

nurses. *Health and accident insurance does not cover all medical expenses.* The coverage provided by various health insurance policies varies. For example, a policy may or may not cover birth control and maternity care. Routine dental care is not covered, only dental care made necessary by accidents. Literature accompanying each policy describes what it covers and what it “excludes.” Of course, policies with more comprehensive coverage cost more.

7.6.2 Selecting a Health-Insurance Policy

In some cases, your school will require or offer a particular health-insurance policy to its international students. If your school does that, you will receive information about the policy.

In other cases the school offers no policy, and you are left to select your own. Even if it does not require a specific policy, your school may have guidelines you will be required to follow in selecting a policy. Information about many policies is available at www.student-resources.net.

Selecting a health insurance policy requires difficult decisions. What you really need to know in order to make the best decision is what is going to happen to your health in the future. And there is no way to know that. So, you need to select a policy that balances cost (you want to pay the smallest possible amount, but lower cost means less coverage) and extent of coverage.

Less expensive policies cover fewer conditions and situations. That is, they have fewer “benefits” and more limitations and exclusions. More expensive policies give you better protection. Here are some common-sense guidelines. To understand them, you may want to refer to Sec. 7.6.5, about health insurance terminology.

- Be sure the policy has *minimum coverage* of \$50,000.
- Look for a policy with *reasonable limitations*, that is, a policy that provides enough coverage for the likely basic costs of any condition.
- Make sure the policy does not exclude *pre-existing conditions*, or at least does not have a waiting period longer than 12 months before pre-existing conditions are covered.
- The policy should be *renewable*.

Your International Student Office (see Sec. 1.12.1) will probably provide more extensive guidelines on selecting a health-insurance policy.

Finally: *If friends or relatives come to the United States to visit you, make sure they have health insurance for the period of their visit.* Ask your International Student Office for information.

7.6.3 Costs

Again, better coverage costs more money. You need to compare policies to decide what combination of costs and benefits best suits your situation.

Remember that *group plans always cost less than individual plans*. If you can buy insurance protection as a member of a group (such as the group of students at your school, or the group of students in your field of study) you will pay much less for your coverage than you will if you buy a policy as an individual.

7.6.4 Common Misconceptions about Health Insurance

Students and scholars from other countries often have difficulty understanding how the health insurance system works. (Many Americans have the same difficulty, at least in part because the health insurance business has a language of its own. Much of the written information from insurers is difficult for the average person to understand. Sec. 7.6.5 gives the basic terminology.) Here are some *misconceptions* people from other countries often have about health insurance in the United States:

- *If I have health insurance, all my medical expenses will be covered.* They will not. See Sec. 7.6.1, “What Health Insurance Does and Does Not Cover.”
- *Any visit to the hospital emergency room will be paid for if I have health insurance.* An emergency-room visit is covered only in case of a genuine emergency, as defined by the insurance company. Usually, this means a life-threatening or very painful accident or illness. Even if insurance covers an emergency room visit, the patient has to pay the *deductible* (see the definition in Sec. 7.6.5).
- *The insurance company's job is to help me meet my medical expenses.* Yes and no. The insurance company's job is to fulfill the terms of its contract with you. But insurance is a business. Insurance companies operate in order to make a profit (by investing the money people pay for insurance). Insurance companies can be better or worse, and insurance policies can be better or worse, but in no case are insurance companies operated like charities. Doctors and hospitals consider it *your* responsibility to pay your bills, not the insurance company's.
- *If I look carefully, I can find a reasonably priced, very comprehensive health insurance policy.* No. The more comprehensive the coverage, the higher the cost.
- *If I don't have to buy insurance for my family here in the United States, it is because young children and pregnant women can see doctors for free.* No. There is no provision for free health care for students' dependents.

7.6.5 Health Insurance Terminology

Understanding written information or discussions about health insurance requires understanding certain terms. Most of these definitions of common insurance terms come from a publication called “To Your Health,” from NAFSA: Association of International Educators:

Claim: A written request by the insured individual for payment by the insurance company for a cost covered under the insurance policy.

Co-payment: The portion of a covered expense, after the deductible is paid, which must be paid by the insured individual. The co-payment is usually expressed as a percentage. For example, if the insurance company pays 80 percent of covered charges, the co-payment is 20 percent.

Cost Containment: Actions or practices designed to minimize costs incurred by both the insured individual and the insurance company. Cost containment helps to maintain reasonable insurance premiums.

Covered Expense: Any expense for which complete or partial payment is provided under the insurance policy.

Deductible: The initial portion of a covered expense which must be paid by the insured person before the insurance policy pays its part of the expense.

Exclusion: Any condition or expense for which, under the terms of the insurance policy, no coverage is provided and no payment will be made.

Fee for Service: Medical care which is provided in exchange for a fee that is paid to the provider at the time the service is rendered.

Insurance Policy: A written contract defining the insurance plan, its coverage, exclusions, eligibility requirements, and all benefits and conditions that apply to individuals insured under the plan.

Insurance Premium: The amount of money required for coverage under a specific insurance policy for a given period of time. Depending on the policy agreement, the premium may be paid monthly, quarterly, semi-annually, or annually.

Lapse in Coverage: After an initial insured period, the period of time during which an individual is uninsured, usually because of failure to pay the premium.

Pre-existing Condition: A condition that existed prior to the commencement of coverage under a given insurance policy. Depending on the policy, a pre-existing condition may be defined as (a) a condition which had its origins prior to the commencement of coverage; (b) a condition which exhibited symptoms prior to the commencement of coverage; (c) a condition for which treatment was sought prior to the commencement of coverage; (d) a condition which was diagnosed prior to the commencement of coverage; or (e) a condition for which treatment was received prior to the commencement of coverage.

Precertification: The requirement, in many policies, that the costs of surgery will not be covered unless the insurance company has approved the surgery *in advance*.

Preferred Provider: A physician or other health-care provider “preferred” by a health-insurance carrier, based on an agreement between the two parties that the provider’s charges for specific services will be at a level acceptable to the insurance carrier. Holders of the carrier’s policy are expected to seek care from the preferred provider, who may refer the patient elsewhere for specialized care.

Preventive Care: Measures taken in advance of symptoms to prevent illness and/or injury.

Renewal: Paying a premium for an additional period of time (after the initial insurance period has expired) in order to continue coverage.