Greeting from Rhode Island!  Spring is here and we are awaiting the warmer days of summer. Many of us will soon be attending the graduation of the Class of 2009, then shifting gears to welcome the new Class of 2013 at orientation. For me, this time of year brings a bittersweet feeling. While we wish our seniors the very best, we long to take some well deserved time to recharge our batteries and as we ready ourselves for the new entering class. It’s always exciting to see the campus beautified for the graduation ceremony and the excitement of the students looking forward to the future.

The NECHA Board had a great chance to get together and discuss plans for 2009 at our winter board meeting on January 15 at Bentley University. It was exciting to welcome new Members-at-Large Peter Davis Smith, MD from Wesleyan College and Denise McGoldrick, MS, CHES from Amherst College for their first NEHCA board meeting. We are looking forward to a successful year ahead. A couple of goals for the upcoming year will be to 1) edit our investment policy to reflect our current and future plans based on sound advice from our consultants at Smith Barney and 2) review our by-laws and make some changes to keep them current and reflective of our Association’s structure.

With the continuing difficult economic times being experienced throughout the country, I was relieved to learn that because of the prudent financial decisions of previous NECHA board members our investments were minimally impacted. Our investments were successfully transferred to Smith Barney Citibank last quarter.

The 2009 Combined Annual Meeting’s Program Committee met in early March at Mount Holyoke College to review the responses to the Call-for-Proposals. With the Annual Meeting combined with New York State this year, the task is a bit larger as we seek to develop a program with almost 50 concurrent sessions. By now, I hope you are well aware of the date and location—October 28-30, 2009 at the Hilton Burlington along Burlington, Vermont’s beautiful Waterfront. The Committee had some very impressive proposals to review and great ideas for programming in the works. More to follow as the program develops so stay tuned!

NECHA has a new look on the Web, thanks to Julie Basol, NECHA’s Administrative Director and now web designer extraordinaire. We invite you to take a look at www.NECHAonline.org to see the new layout, especially note, the Awards tab. Each year, NECHA recognizes outstanding and talented college health professions. Please take a minute to review the awards and make your nomination of a deserving colleague.

I look forward to attending the Maine College Health Association (MCHA) meeting on May 1st at Bowdoin College in Brunswick, Maine and meeting some of our members from the far north. The program looks impressive.

As we wrap up another academic year, many of us will be gathering in San Francisco at the ACHA 2009 Annual Meeting May 26-30. This is a wonderful opportunity to celebrate our award winners and to catch up with friends across the country. If you’re planning to attend the meeting, I hope to see you at the NECHA affiliate meeting on Thursday, May 28th during lunch. It’s a great, informal way to connect with other NECHA members.

I wish you all a successful end to your spring semester and an enjoyable summer! If you have any questions, please feel free to contact me or any member of the Board. We are here to serve your needs and welcome your ideas and/or comments.

Ellen M. Reynolds, MS
NECHA President
New England College Health Association
Associate Director,
University of Rhode Island
Student Health Services
Ellen@URI.edu  401.874.5155
While spring is arriving slowly...as usual...here in the Northeast, it seems like many aspects of our world and our economy are very unusual, which makes for a lot more stress and distress in all of us. The recently published NCHA data (March/April 2009 Journal of ACHA) continues to show that STRESS is, and has consistently been, the major impediment to academic functioning in survey after survey. The neuroscientists have been telling us for some time that it is our stress response, mediated through the hypothalamic-pituitary-adrenal (HPA) axis, which is responsible for many synaptic and neuronal changes that account for many mental health disorders, many of which make their appearance in adolescence and early adult life.

While there are many interesting and important conversations to be had about whether or not stress, anxiety and depression are truly increasing in prevalence and severity or whether we as a culture are possibly not dealing as well with the stresses, anxieties and changes that contemporary life and development are bringing, there is no question that we are seeing more and more students coming to our Health & Counseling Centers for help in dealing with these stresses and the disorders that they generate. Perhaps it's time for all of us working in college health to shift our paradigms and begin thinking about how to work in a preventative and proactive model... to identify and to attend to the risk groups and early identifiable behaviors that herald the onset of diagnosable mental health conditions. That would not be providing mental health services as usual.

A landmark report has just come out from the Institute of Medicine (IOM), entitled “Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities.”

(http://books.nap.edu/openbook.php?record_id=12480&page5)

This report updates a 1994 IOM book and focuses on the new learning and scientific experience that has emerged since that time, including many important updates and recommendations based on developmental issues, new neuroscience information and new research from interventions in a variety of settings... along with recommendations about the implementation and dissemination of prevention and promotion practices.

The report suggests and supports the idea that early recognition and intervention strategies can PREVENT the emergence of psychiatric disorders and their enormous costs, both personally and in terms of our public health. While this information is not totally new to many of us working in the mental health field, the report brings together much new scientific and research information that is very persuasive and might change the paradigms under which we have shaped our work.

We, in the college health position, are importantly and uniquely positioned to take in this new scientific awareness and begin to plan and implement new programs that emphasize education, awareness, outreach, prevention... and treatment... within the college environment and community. The earlier vision of a ‘Community Mental Health Model’, brought forth a half century ago, might have found a renewed and fertile ground within college communities.

One aspect of ACHA (and NECHA) that is particularly pertinent to this vision and is the reason why many of us have put our energies into this organization is that it is the only college health care organization that is truly multidisciplinary and, as such, is built on the kinds of teamwork and integration of services that these new insights and paradigms will require if they are to be implemented.

However, given that these are not ‘usual’ times and, given that all of us are having to work within serious budgetary limitations and restrictions, we must find a way to embrace this new learning and, despite the current economic hardships, we should begin to have these discussions and bring our creativity together in order to begin planning for new systems for identification, prevention, outreach education and treatments, which can ultimately have important impacts on each individual and on the community. If we do our work and planning now, we will be much further along when there might be some expansions of our budgets for program development and for staffing.

As our Program Planning Committee prepares for our upcoming NECHA Annual Meeting in the fall (this year combining with our NY-SCHA neighbors and meeting in Burlington, VT Oct 28 - 30), we are planning some presentations on these very issues. So mark your calendars and plan to bring your thoughts, ideas and creativity to the process. I’ll give you some more specifics in the fall newsletter.

Good luck in this busy time of finishing up the semester.

John

John Miner, MD | John.A.Miner@williams.edu
Co-Director,
Psychological Counseling Services
Williams College
NECHA Member-at-Large
ACHA Mental Health Section Chair

~ Rising Costs, Lower Profits, Economic Downturn... ~

...all words that have put a damper on everyday life. Following the lead of ACHA’s green movement, the NECHA News Spring/Summer issue will be ‘printed’ electronically. Catch it on line, along with back issues going way back, and save a tree along the way!

Be Earth-friendly, please do not print this newsletter unless there is truly a need... but read it and forward it on to other colleagues!
As Program Chair I am pleased to announce Dr. Gail Dines as the Keynote Speaker of the 2009 Combined Annual Meeting. Dr. Dines is Professor of Sociology and Chair of American Studies at Wheelock College in Boston, Massachusetts. A nationally known researcher, award-winning speaker and prolific writer, she is a long-time feminist activist and co-founder of the recently formed group, Stop Porn Culture. Co-editor of the best-selling textbook *Gender, Race and Class in Media*, she also co-authored *Pornography: The Production and Consumption of Inequality*. In addition, she has written numerous articles on pornography, media images of women, and representations of race in pop culture. She is a regular guest on national television and radio shows including CNN, MSNBC and National Public Radio.

In her keynote address, *Sexy or Sexist? Images of Women in Pop Culture*, Dines will explore the powerful messages that shape our sexuality. From Cosmopolitan to MTV, popular culture bombards us with sexualized images of idealized women and men each day. These pictures jump off the screen and into our culture, and are now so commonplace, that they seep into our gender identity, our body image and especially our intimate relationships. The result is not a more liberated, edgy sexuality, but a mass produced vision of sex that is profoundly sexist – a vision that limits our ability to create authentic, equal relationships that are free of violence and degradation. In this powerful multi-media presentation, Dr. Gail Dines uses examples from ads, magazines, television shows, and movies to explore how masculinity and femininity are shaped by a consumer-driven image-based culture.

We hope you will join us Wednesday, October 28th at gather for the 2009 Region V Combined Annual Meeting. Stay tuned as we announce our next featured presenter, concurrent session, and pre-meeting workshops in the coming weeks.

Joleen M. Nevers, MAEd
Joleen.Nevers@uconn.edu
University of Connecticut

**Gail Dines, PhD to Keynote Region V Meeting**

As Program Chair I am pleased to announce Dr. Gail Dines as the Keynote Speaker of the 2009 Combined Annual Meeting. Dr. Dines is Professor of Sociology and Chair of American Studies at Wheelock College in Boston, Massachusetts. A nationally known researcher, award-winning speaker and prolific writer, she is a long-time feminist activist and co-founder of the recently formed group, Stop Porn Culture. Co-editor of the best-selling textbook *Gender, Race and Class in Media*, she also co-authored *Pornography: The Production and Consumption of Inequality*. In addition, she has written numerous articles on pornography, media images of women, and representations of race in pop culture. She is a regular guest on national television and radio shows including CNN, MSNBC and National Public Radio.

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Joleen M. Nevers, MAEd
Joleen.Nevers@uconn.edu
University of Connecticut

**Call for Exhibits**

We cannot do this without you! Plan to join us in Along the Waterfront in Burlington for opportunity to reach out to an anticipated audience of 300 college health professionals. Contact Julie Basol or check out details at our Web site: [www.NECHAnline.org](http://www.NECHAnline.org).

**Got Funds?**

The phrase ‘use it or loose it’ comes to mind when we speak of tight budgets and financial restraints. If you have additional CE funds that need to be used up by 2009’s fiscal year end, take advantage of the Combined Meeting’s **SUPER-EARLY Early Registration**, in effect through July 31. For more information, contact Julie Basol: 802 425 3936.

**Get Reserved!**

The Combined Annual Meeting’s hotel name may have changed once again but the fabulous location has not. Overlooking Lake Champlain and the Adirondack Mountains, the Hilton Burlington Hotel has seen many upgrades from days of the Radisson and Wyndham. Make your reservations early ($159/night single/double occupancy) by calling 1-800-HILTONS.

**Going Forward ~**

Save the Date in 2010!

New England goes East - following the heals of the 2009 Combined Meeting on the West Coast of New England, the 2010 Annual Meeting where NECHA and NYSCHA each fly solo once again. NECHA is pleased to announce its 2010 Annual Meeting will be held at the historic Renaissance Hotel in Providence, Rhode Island October 27-29, 2010.
Residents of Norton and Wheaton College are safer than ever thanks to the Norton Citizen CPR Program. By providing basic CPR training to 350 Norton High School Students, 80 Wheaton College students and increasing the number of defibrillators, these communities have reduced the risk of heart attack death for their residents. As a result both the town and college have earned the rare Heart Safe Community designation from the Department of Public Health Office of Emergency Medical Services and the American Heart Association. Wheaton is one of only five Massachusetts colleges and universities with the Heart Safe designation and Norton joins 51 other southeastern municipalities so distinguished.

The official Health Safe Community designation ceremony was held at the Wheaton College Balfour-Hood Atrium on Tuesday, April 14. Norton High School students and the Wheaton Peer Health Advocates, who helped train them, joined Wheaton’s President Crutcher, Fire and Rescue Chief Gomes, Sturdy Memorial Hospital and Norton School Department officials to celebrate their success.

“Our students are proud to know they can protect their family and neighbors through CPR,” said Mike Vitelli, a Norton High School wellness teacher. “Norton is a safer place with more people ready to help save a life. I hope we can continue this important work.” The program needs $10,000 for CPR kits to train the last half of the Norton High students before they finish the school year. The ultimate goal is to train at least 2,000 Norton residents in CPR.

The new Heart Safe status has also sparked heart healthy programs at Wheaton College. “Preventing heart disease by helping promote good self-care is key,” says Craig Andrade, Dean of Health and Wellness at Wheaton. To improve campus health Wheaton will stop selling tobacco in the campus bookstore, has removed trans-fats from its dining halls, bolstered its exercise options and introduced new health education programs targeting concerns such as stress, alcohol, drugs, proper sleep and nutrition. “Norton and Wheaton College are truly earning this Heart Safe Community status,” Andrade said. “Our families, friends and neighbors are better for it.”

For more information contact:

Craig S. Andrade
Associate Dean, Health & Wellness
Wheaton College 774.265.0790
candrade@wheatonma.edu

Why does it seem that insurance plans do not factor college into a young person’s life?

One of my favorite things about college health is that we are a satellite with a distant and eccentric orbit through the medical universe. Wesleyan’s tuition fees include coverage of office visits at the university’s Davison Health Center. We do not bill insurance for clinician services and therefore, our providers are not registered with any insurance companies. For the most part, this protects us from the irksome failings of the medical insurance system. We sometimes, however, find ourselves frustratingly on the outside looking in.

We periodically see students from the West coast who are on large insurance plans that have little market presence in the East. In such cases, medical tests may not be covered unless emergent. This means that the athlete who wrecks their knee is told they can’t get an MRI until they go home. Even more frustrating is when we cannot make a referral or be the ordering clinician for tests or lab work because we are “out of network”, even though the enrollee’s office visit is free to the insurance company and the ready access to our services limits morbidity and overall costs.

Another frustrating insurance issue is public assistance. An out of state student on Medicaid can obtain full access to services in their home state, but not in Connecticut. Here they are, at a top-notch college getting an outstanding education, which will likely result in an increase in socioeconomic status and decreased future need for public assistance. Why isn’t their Medicaid portable? Or is it?

As a resident, I could call the hospital’s social work office and they’d straighten all this stuff out. Now I don’t know who to call. I know we’re not alone in trying to navigate these issues, but don’t know if anyone has developed successful strategies. This seems like an arena in which an institution such as NECHA or ACHA is uniquely suited to lead meaningful change. If there are schools who have been successful in this arena, let’s develop a best practices model and circulate it to all. If you are frustrated like me, let’s put together a working group to address the issue. I believe this may be an arena ripe for legislative change.

I welcome your thoughts and input. I freely admit there is a great deal I don’t know. Perhaps this is a well-worn path and I’m just unaware of work that’s been done or resources that are readily available. I would appreciate being directed to these and would be happy to publicize them in a future issue of this newsletter. Thank you.

Davis Smith, MD
Medical Director
Wesleyan University
pdsmith@wesleyan.edu
I attended the SAR on March 27 & 28 offered by Psychological Centers, Inc. of University of Rhode Island’s Counseling Center. SAR stands for Sexual Attitude Reassessment and is a requirement of the American Association of Sexuality Educators, Counselors and Therapists (AASECT) certification process. An intensive two-day workshop, attendees had opportunity to explore one’s own attitudes, values and beliefs about sexual behavior in a safe, comfortable and nonjudgmental environment. The SAR uses emotionally evocative and sexually explicit films and presentations to explore personal attitudes and values.

Participants shared their feelings and reactions in supportive small group sessions. he SAR is designed to promote open, honest self-awareness for anyone who deals with sexuality issues in their work life. Topics explored included: body image; aging; disability; sexual orientation; masturbation; and language, myths and stereotypes. As a result of the SAR, a person will be more comfortable, confident, and competent when working with students or clients on issues of sexual behavior. Another result of the SAR is that people may find out what their limitations are; people may find out that certain topics or areas make them uncomfortable. To find this information out and use it as an area to improve upon is a great opportunity for individual growth.

AASECT is also offering a week-long Summer Institute designed to address core concepts in human sexuality. Utilizes interactive training methods consistent with adult learning theory, the Institute facilitates practical applications of the knowledge and skills obtained. The Institute will address each of the following content areas:

- Sexual and reproductive anatomy/physiology
- Socio-cultural issues & values
- Gender issues
- Sexual orientations
- Sexuality over the lifespan
- Family dynamics
- Interpersonal relationships & sexual functioning
- Sexual expression
- Medical & pharmacology issues
- STI’s, HIV, contraception, & fertility
- Sex & Power
- Illness & disability

For more information about upcoming SARs or the ASSECT Summer Institute, check out their Web page at: www.aasect.org

Joleen M. Nevers, MAEd
Joleen.Nevers@uconn.edu
University of Connecticut

Recognition

NOMINATE A COLLEAGUE FOR A 2009 NECHA AWARD

Do you know an outstanding colleague who has made exceptional contributions to their students, institution, and the field of college health?

If so, consider nominating him or her for the NECHA President’s or Louise Gazzara Awards!

Individuals may be nominated by any member or member institution of ACHA and/or NECHA.

Nomination forms available at: WWW.NECHAONLINE.ORG

Submit your nomination by letter or email by May 29, 2009 to:

Bryant Ford, PhD  Awards Chair
Dartmouth College Student Health Center
7 Rope Ferry Road #6143
Hanover, NH  03755
or to bryant.ford@dartmouth.edu

SEE PAST RECIPIENTS ON OUR WEB SITE TOO!

Important dates & deadlines

- May 26-30: ACHA Annual Meeting
  San Francisco, California
- May 29: Deadline for nominating a colleague for a NECHA Award (see above)
- June 12: NECHA Board Meeting
  Amherst College
- July 15: Super-Early Bird Registration Deadline
  2009 Combined Annual Mtg. Registration
- August 1: NECHA News Fall Issue Deadline
- September 28: Deadline for reduced overnight room rate at Combined Annual Meeting hotel:
  Hilton Burlington ($159 +s/d) 1-800-HILTONS
- October 14: Early Bird Registration Deadline
  2009 Combined Annual Mtg. Registration
- October 28-30: Region V 2009 Combined Annual Meeting
GRANT
CALL FOR PROPOSALS

The NECHA Grant Committee is currently accepting grant proposals for the 2009-2010 academic year. This grant was created and designed to assist schools who seek to improve the quality and delivery of student health services as well as promote innovative health programming within New England's college health community. Grant projects are funded at levels up to $1000. The total number and size of awards will be based on merit, need, and the number of proposals received. Projects that involve student participation and a multi-disciplined/multi-departmental approach to shared concerns are especially encouraged.

The recipient of the 2008 NECHA grant was St. Joseph College, West Hartford, Connecticut

Proposals for 2008-2009 should include description of the program and goals, use of funds, and relevance to college health. For an application, log on to: www.NECHAonline.org

Deadline for proposals:
May 29, 2009

Bryant Ford, PhD Chair NECHA Grant Committee
Bryant.ford@dartmouth.edu

BACCHUS NETWORK
AREA 10 CONFERENCE 2009

The recent BACCHUS Network Area 10 Conference (February 28) was a great success. Hosted by Aliza Makuch, Coordinator of Wellness Promotion, the Conference was held on her campus at Eastern Connecticut State University (ECSU). Along with her peer educators, Peer Advocates for Safe Students (P.A.S.S.), Aliza welcomed 130 students and staff to ECSU’s new student union. Students and staff traveled from five states and represented over fifteen various peer education groups.

Attendees were engaged in various activities and programming throughout the day. The conference included 2 general session speakers and 20 break-out sessions. The keynoter was the University of Hartford’s Vice President for Student Affairs and Dean of Students, J. Lee Peters, EdD. His engaging presentation focused on leadership and its far reaching affects. The featured speaker was Drew Hunter, MPA, President and Chief Executive Officer of the BACCHUS Network. He also provided expertise in two break-out sessions made himself available to students to ask questions. The break-out session topics encompassed alcohol, drugs, spring break, sexual health, energy drinks, stress management, marketing strategies, social justice issues, sexual assault, overall wellness and two sessions specifically for advisors.

Throughout the day, raffles were offered to students that included water bottles, t-shirts, The Guide To Getting It On book and one lucky winner won a free registration to the BACCHUS Network National Conference this fall. The conference concluded with an Awards Ceremony. Congratulations to the following recipients!

- Outstanding Peer Educator: Renee Bilotti, Roger Williams University
- Outstanding Advisor: Joleen Nevers, University of Connecticut
- Outstanding Program (for one time event): "Fake ID" Giveaway, Sacred Heart University s.w.e.e.t.
- Outstanding Peer Education Group: Peer Health Educators University of Massachusetts Dartmouth
- Outstanding Alumnus: George Henry Aulson, IV University of Massachusetts Dartmouth Peer Health Educators

For learn more about the BACCHUS Network visit: www.bacchusnetwork.org

If you are interested in hosting a future conference please contact me or a member of the Area 10 Leadership Team. Find out more at: www.bacchusnetwork.org/area10.asp

Joleen M. Nevers, MAEd
University of Connecticut
Joleen.Nevers@uconn.edu

The Admin Files feature article is on currently on hiatus.
We invite you to submit an article for the fall issue of NECHA News!
Contact Julie Basol, Administrative Director today! 802.425.3936
Julie@NECHAonline.org
In a memo dated February 3, 2009, NCAA Associate Director of Educational Affairs, Mary Wilfert, detailed the stricter application of their Medical Exception policy for the use of banned stimulant medications. The new policy will go into effect August 2009. No change has been made to the list or definition of banned stimulant medication. The standard of documentation for medical exception has become significantly more stringent, however. A student athlete who tests positive from the effective date will need to comply with this stricter application, even if they received an exception for the use of stimulant medication prior to August 2009.

The stated goals of this policy change are twofold:

1) to ensure that “student-athletes are adequately monitored while using a stimulant medication that can negatively impact health and safety”
2) to ensure that “stimulants are not being used strictly for athletic performance enhancement.”

The NCAA acknowledges that, “some legitimate medications contain NCAA banned substances,” and that, “some student-athletes may need to use these medicines to support their academics and their general health.” The NCAA’s Medical Exceptions Procedure serves to “review and approve legitimate use of medications that contain NCAA banned substances.”

All student-athletes are required to report to the training staff the use of any banned medication as soon as they join a team or when treatment commences. The student will need to obtain from their provider documentation which meets NCAA standards. This documentation will be on file with the college and needs to be kept up to date, for example, in the case of a dosage change. Some key components of the documentation include the following:

- Date of clinical evaluation
- Summary of comprehensive clinical evaluation (referencing DSM-IV criteria)
- ADHD Rating Scale(s) (e.g., Connors, ASRS, CAARS) scores and report summary
- Blood pressure and pulse readings and comments
- Note that alternative non-banned medications have been considered, and comments
- Diagnosis
- Medication(s) and dosage

Some students may not have an adequate documentary record. In such cases the student-athlete will need to have a formal evaluation for ADHD so as to generate compliant documentation.

If a student-athlete is tested and tests positive for a banned stimulant, they may apply for a medical exception. The use of the prescribed stimulant medication does not need to be reported at the time of NCAA drug testing. Documentation should be submitted to the NCAA by the institution in the event a student-athlete tests positive for the banned stimulant.

**PERSPECTIVE:** This new policy has several challenging elements in that it appears to require a great deal more work for the training staff. It also challenges athletic departments to maintain sensitive medical information. The requirement for formal ADHD evaluation may place a significant burden on students with fewer financial means as these evaluations can cost many hundreds of dollars.

I recommend that each college’s medical service, psychological service, and training staff partner to overcome these challenges. Many students already have sufficient documentation on file for purposes of receiving academic accommodations or to meet the medical service or psychological service’s requirements to be prescribers of these medications. Remaining is the subset of students who take ADHD medication prescribed by an off-campus clinician without the knowledge of either branch of health services. In these cases, I believe that the burden of responsibility to obtain sufficient documentation lies with the student-athlete.

I would recommend that the psychological service and/or medical service participate in evaluation of the documentation for compliance with NCAA requirements and that such documentation be kept on file in health services rather than in the training room. The issue of cost of formal evaluation is perhaps the thorniest of all of these. It is a topic beyond the scope of this discussion, but worthy of a full treatment in the future.


For the memo and other resources referenced in this article see: [http://www.ncaa.org/wps/ncaa?ContentID=481](http://www.ncaa.org/wps/ncaa?ContentID=481)

Davis Smith, MD
pdsmith@wesleyan.edu
The ACHA Board of Directors and the National Office were pleased to hear and report that despite these difficult economic times there is continual progress being made on various initiative and the goals outlined in ACHA’s Strategic Plan. The following highlights are summarized under the ACHA goals with which they are aligned:

**Goal I**
- Supporting and promoting systems and programs that produce optimum health outcomes

In September ACHA facilitated the meeting of a mental health consortium: the Higher Education Mental Health Alliance comprised of 9 organizations. The mission is to provide leadership through a partnership of organizations to advance college mental health. In addition to ACHA, participating organizations included American College Counseling Association, American College Personnel Association, American Psychiatric Association, American Psychiatric Nurses Association, American Psychological Association, Association for University and College Counseling Center Directors, Jed Foundation, and the National Association of Student Personnel Administrators.

**Goal II**
- Serving as the primary source of information, education, and consultation on critical issues affecting the health of college students and campus communities

- Plans for the Annual Meeting in San Francisco are being finalized with over 130 exciting sessions being offered from Tues, May 26th – Sat, May 30th. The Keynote Address will be: “What’s Race/Ethnicity Got To Do With It The Essential Roe that College Health Can Play” delivered by UCSF’s Claire Brindis, DrPH.
- Opportunities for advertisement are still available
- Effective with the planned 2010 Annual meeting in Philadelphia, the Board clarified the National policy regarding CME credit qualification as it relates to commercial presenters. When CME credits are being applied to a program, a commercial entity is prohibited from making the presentation for that program. Otherwise ACHA’s CME accreditation is jeopardized. Unsolicited offers from commercial entities to present must be declined.
- An issue raised during the meeting is the vacancy of the Advocacy Coalition Chair. Given the importance of this area and the need for both vigilance and active engagement, members willing to serve in this role are encouraged to step forward!

**Goal III**
- Serving as a leading source of evidence-based knowledge about the field of college health

- After completion of the second pilot in July, 2008, nearly 3,500 students have been surveyed from 6 schools that have participated in the newly minted ACHA Patient Satisfaction Assessment Service. More participants are expected for the Spring and aggregated results will be presented at the Annual Meeting.
- Over 100 schools are expected to conduct the ACHA-NCHA, Spring 2009 survey. Most are transitioning to a web-based survey instrument.

**Goal IV**
- Serving as the principal advocate for national public policy affecting the health of college students and campus communities

- From Sept 2007- Sept 08 individual, institutional, and sustaining memberships increased. As of Dec, 2008, over 3,000 individuals hold membership and almost 1,000 institutions have joined.
- As campaigns across the country experience a challenging financial climate the National Office has also sought a responsible path to sustain its fiscal health. Corporate grants and federal grants are not available to ACHA this year. In part as a counterpoint to this reality, ACHA is scrutinizing requirements and reducing expenses in many budget areas for the year.

**Goal V**
- Developing and maximizing the use of human, financial, and technological resources to ensure and sustain growth

- Psychiatric Nurses Association, American Psychological Association, Association for University and College Counseling Center Directors, Jed Foundation, and the National Association of Student Personnel Administrators.
- As campuses across the country experience a challenging financial climate the National Office has also sought a responsible path to sustain its fiscal health. Corporate grants and federal grants are not available to ACHA this year. In part as a counterpoint to this reality, ACHA is scrutinizing requirements and reducing expenses in many budget areas for the year.

ACHA is exploring ways to increase its visibility and market more of the resources that are proprietary and helpful to the membership as well as the field of college health.
SECTION LEADERSHIP

The American College Health Association has nine sections, which reflect the professional diversity of its individual members. The sections play a pivotal role in the program planning of ACHA's Annual Meeting, held each spring. The Chair-elect, Secretary, and Annual Meeting Program Planner-elect of each section are elected to represent the individual members participating in the sections.

We are pleased to have representation from New England developing this year’s ACHA programming:

ADVANCED PRACTICE CLINICIANS
Art Klossner, PA-C, MS, MBA
Chair
Suffolk University
aklossne@suffolk.edu
Tobie Caron, PA-C
Annual Meeting Program Planner
Suffolk University
tcaron@suffolk.edu

MENTAL HEALTH
John A. Miner, MD
Chair
Williams College
john.a.miner@williams.edu

PHARMACY
Deborah Hubbell, RPh
Annual Meeting Program Planner-elect
University of Connecticut
deborah.hubbell@uconn.edu

NEW ENGLAND INVolVEMENT ON THE NATIONAL SCENE
12 Region V Members Take On Leadership Roles in ACHA

Thanks to the 2009 Program Planning Committee for their leadership role in developing this fall’s Combined Annual Meeting. Stay tuned for an update on their progress!

Program Chair: Joleen Nevers, MAEd
Administration: Ellen Reynolds, MS
Health Education:
Liz Drexler-Hines, MPH, CHES
Kaitlin DeLucia, MA
Laini Sporbert, MEd
Karen Jacobus, MEd
K. Grace-Bishop, MHSA, CHES
Beth Grampetro, MPH, CHES

Clinical: Constance Hiller, MD
Katharine Bryda, MS, RCN
Davis Smith, MD
Peter Nobes, PA
Tina McCarty, RN, BSN
Connie Hiller, MD

Mental Health:
John Miner, MD
Bryant Ford, PhD
Steve Smith, CSW-R, ACSW, CASAC
Todd Weinman, PsyD

CONTINUING EDUCATION SUBCOMMITTEES
NURSING EDUCATION
Kathy MacLachlan, MS, APRN-BC
Chair
Syracuse University Health Services
kmmclac@syr.edu
New York State College Health Association Region V

APPROVER UNIT
Sharon Yardley, Director
Section Chair
Babson College
syardley@babson.edu
New England College Health Association Region V

MENTAL HEALTH
John A. Miner, MD
Chair
Williams College
john.a.miner@williams.edu

NURSING
Charlene “Charley” Bradley, RN-BC, BPS
Annual Meeting Program Planner-elect
Dartmouth College
charley.bradley@dartmouth.edu

PHARMACY
Deborah Hubbell, RPh
Annual Meeting Program Planner-elect
University of Connecticut
deborah.hubbell@uconn.edu

BOARD OF DIRECTORS

President (2008-2009)
Chad Henderson, MBA, FACHA
Dr. Pauline B. Wood Health Service
University of Rhode Island
chad@uri.edu

Region V (2008-2010)
Vanessa Britto, MD, MSc
Director, Health Service
Wellesley College
vbritto@wellesley.edu
(Dr. Britto is also on the Ethnic Diversity Coalition Committee)

CONTINUING EDUCATION SUBCOMMITTEES
NURSING EDUCATION
Kathy MacLachlan, MS, APRN-BC
Chair
Syracuse University Health Services
kmmclac@syr.edu
New York State College Health Association Region V

APPROVER UNIT
Sharon Yardley, Director
Section Chair
Babson College
syardley@babson.edu
New England College Health Association Region V

MENTAL HEALTH
John A. Miner, MD
Chair
Williams College
john.a.miner@williams.edu

NURSING EDUCATION
Charlene “Charley” Bradley, RN-BC, BPS
Annual Meeting Program Planner-elect
Dartmouth College
charley.bradley@dartmouth.edu

PHARMACY
Deborah Hubbell, RPh
Annual Meeting Program Planner-elect
University of Connecticut
deborah.hubbell@uconn.edu

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Vanessa Britto, MD, MSc
Director, Health Service
Wellesley College
vbritto@wellesley.edu
(Dr. Britto is also on the Ethnic Diversity Coalition Committee)
### NECHA News

is published 3x/yr with its Fall, Winter, and Spring/Summer issues. Contributions of college health interest are welcomed!

For details, contact [Julie@NECHAonline.org](mailto:Julie@NECHAonline.org).

Fall issue deadline: August 1

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**Vermont Roundtable 2009 Gathering**

**Tuesday, May 26  11:00am-2:00pm**

Castleton State College

Come together to explore: Current trends in physical and mental health, challenges we are facing; limited budgets, staffing issues, insurance issues, off-campus referrals, alcohol and other drug evaluations, the increasing demand, success within our departments, educational programs, preventative health and counseling workshops, health forms, immunization requirements, electronic medical records and much, much more.

We hope you will be able to join us! If unable to attend, feel free to send someone else from your department. Lunch included.

For more info, call Kate at 802-468-1346.

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**ACHA REGION V REPRESENTATIVE (08-10)**

Vanessa Britto, MD, MSc  
Director, Health Services  
Wellesley College  
781 283-2810  
vbritto@wellesley.edu

**MEMBERS-AT-LARGE**

- Margaret Higham, MD **  
  Medical Director  
  Tufts University  
  617 627-5883  
  Margaret.Higham@tufts.edu

- Mary Masson, APRN-C **  
  Nurse Practitioner  
  Saint Michael’s College  
  802 654-2234  
  mmasson@smcvt.edu

- Denise McGoldrick, MS, CHES *  
  Director, Health Education  
  Amherst College  
  413 542-2760  
  dmcgoldrick@amherst.edu

- John Miner, MD *  
  Co-Director, Psychological Counseling Services  
  Williams College  
  413 597-2353  
  John.A.Miner@williams.edu

- Peter Davis Smith, MD *  
  Medical Director, Health Services  
  Wesleyan University  
  860 685-2470  
  pdsmith@wesleyan.edu

**REGION V REPRESENTATIVE on ACHA NOMINATING COMMITTEE (08-10)**

Kathy MacLachlan, MS, ANP  
Syracuse University Health Center  
315 443-9017  
kmclachlan@syr.edu

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**ADMINISTRATIVE DIRECTOR**

Julie Basol  
JNB Marketing, LLC  
741 Hand Road  No. Ferrisburgh, VT 05473  
Ph: 802 425-3936  |  Fax: 802 425-5507  
[Julie@NECHAonline.org](mailto:Julie@NECHAonline.org)

* year one of a 2-yr term

** year two of a 2-yr term

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2008-09 NECHA Board of Directors

**PRESIDENT** Ellen M. Reynolds, MS  
Associate Director, Health Services  
University of Rhode Island  
401 874-5155  
ellen@uri.edu

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Coordinator, Health Education  
University of Connecticut  
860 486-0772  
joleen.nevers@uconn.edu

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Staff Psychologist  
Dartmouth College  
603 646-9442  
bryant.ford@dartmouth.edu

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Director, Health Services  
Rhode Island College  
401 456-8055  
wachtel@ric.edu

**SECRETARY** Geraldine S. Taylor, MS, APRN  
Assistant Dean for Health & Prevention  
Director, Student Health Services  
Bentley University  
781 891-2222  
gtaylor@bentley.edu

**REGION V REPRESENTATIVE to ACHA NOMINATING COMMITTEE (08-10)**

Kathy MacLachlan, MS, ANP  
Syracuse University Health Center  
315 443-9017  
kmclachlan@syr.edu

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**Growth is the only evidence of life.**