

Targeting a High-risk Population in a Ukrainian University Town

BY KATHRYN UTAN

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Left—Routine screening for diseases is an important part of the primary care services offered at the Student Clinic and is in keeping with a Ukrainian law that mandates all university students undergo a complete physical examination each year. Right—Located on the campus of the Kharkiv Aerospace University, the Student Clinic provides a wide variety of clinical and diagnostic services, as well as emergent care and patient education programs targeted to meet the needs of the student population.

With more than 80,000 students attending the 22 institutions of higher learning situated in its environs, Kharkiv—a city of 1.7 million located in eastern Ukraine—has long addressed the health needs of its young, transient population through a network of small clinics. Located on some campuses, these clinics provide routine primary care services and are supervised by the Kharkiv Oblast Student Polyclinic, which itself offers both in-patient and out-patient services, has the capacity to treat 3,500 patients daily, and generally focuses on secondary and tertiary treatment.

Although it may seem counterintuitive because the teenage years and early 20s are generally viewed as a period characterized by good health, the years spent in high school and at university are often

where many habits detrimental to the future health of an individual become firmly ingrained. Research shows that nearly one million people between the ages of 10 and 19 die each year, mainly due to accidents, suicide, violence, illness, and other preventable or treatable causes and more and more studies indicate that most premature deaths among adults—up to 70 percent, according to WHO estimates—can be traced back to behaviors initiated before the age of 20.

At university, the relative freedom of living away from home and family for the first time; being thrown into a close, communal environment with contemporaries who hail from a myriad of backgrounds; and the need to excel at new subjects while making decisions that have enormous lifelong impact combine to create an atmosphere rife with stress and

the potential to fall into a lifestyle whose negative effects can last for decades or even a lifetime.

Bringing a broad range of clinical services within easy reach of the students who need them the most, and arming these students with the knowledge to maintain a lifetime of physical and mental well-being is one of the goals of the Kharkiv/La Crosse partnership. Establishing a community-based Primary Care Center within the framework of Kharkiv's student health system is the principal strategy partners are using to attain it.

Soon after the partners signed their memorandum of understanding in 1999, they set about conducting a needs assessment of students seeking treatment at the Polyclinic, operating under the assumption that this segment came to the hospital either because no clinic

existed at their individual universities, or because the services they required were not available at the campus clinics. Using a questionnaire loosely based on the US Centers for Disease Control and Prevention's Health Risk Appraisal and Youth Risk Behavior Survey, and adapted to local conditions, the partners queried 1,000 students over the course of a 10-day period in February 2000. This initial assessment allowed partners to accurately gauge not only the health status of the target population, but to learn what services would best fit the needs of the young adults.

Based on the survey results, partners determined that—for a number of reasons—the Kharkiv Aerospace University would be the best location to establish the new Primary Care Center. “The Aerospace University is nearly 10 kilometers from the Polyclinic and, given the poor financial standing of most of the 6,500 students in attendance, as well as the time and money it takes to travel between the two places, a new campus-based clinic would make healthcare much more accessible to students,” explains Dr. Alla A. Vasylyeva, head of the Internal Diseases Department at the Student Polyclinic. “A second important thing the survey revealed was that, by and large, the overall health of students at this particular university is worse than the health of students at other schools in the region,” she notes, citing elevated rates of gastrointestinal disorders and cardiovascular problems as two examples. And, third, there was active support from both the university's administration and the students themselves.

In addition to highlighting the most appropriate location for the new Center, the survey also revealed that patient education would need to play a key role in the partners' efforts. There are no mandatory health courses for universi-



Photo: Elena Voskresenskaya

Nurse educator Anna Lobunets illustrates the dangerous effects of smoking during a health promotion and disease prevention class. Educating patients is an integral part of the services offered at the Student Clinic where—in addition to smoking cessation—topics include STI prevention, substance abuse, family planning, proper nutrition, and dealing with stress.

ty students in Ukraine and, overall, patient education is a very weak link in the nation's healthcare system. Because the profession of health educator does not exist, the task falls to physicians, who receive no special training in teaching methods and are already overburdened with high patient loads.¹

An Effective Combination: Patient Education and Primary Care staffed by three general practitioners, a dentist, four nurses—one of whom is a patient education specialist—a midwife, a feldsher/laboratory technician, a receptionist, and a clinic administrator, the Center offers students at the Aerospace University an extensive range of clinical services. “We provide both primary and urgent diagnostics and treatment; dental care; standard eye exams; preventive care, including vaccinations and annual physicals; simple lab services such as blood and urine testing; psychological counseling; and gynecological examinations and treatment,” Vasylyeva details. Pointing out that the Center has received more than 31,000 patient visits since opening its doors January 22, 2001, she says that the staff sees an average of 2,500 students each month—nearly half of whom come in for preventive care.

With such a large number of stu-

dents seeking information about wellness issues, health promotion and disease prevention programs play an integral role in the services offered at the Center. In fact, several of the patient education and outreach programs were implemented before the facility actually opened, according to Natalia Alekseeva, a physical therapist who teaches many of the facility's healthy lifestyles classes.

“Mandatory seminars for first-year students started in September 2000—four months before the Center officially opened,” Alekseeva explains, noting that these seminars explore topics ranging from STI prevention and substance abuse to smoking cessation and proper nutrition. “During the 2000-2001 school year, more than 100 classes covering some 22 topics were held, and the total number of students who attended was 1,152.”

In addition to the mandatory health education classes, clinicians from the Center along with specialists from the Polyclinic conduct individual sessions, small-group discussions, and lectures on a broad spectrum of other subjects, including HIV/AIDS, stress management, and the importance of conducting monthly breast self-examinations. Educational pamphlets and brochures are readily available to the campus commu-

nity as well, and students are periodically surveyed to ensure that their health education needs are being met. “One of the most important things we discovered by conducting these follow-up surveys is that the format of most of the initial health education sessions was not conducive to active participation or learning,” Alekseeva notes, citing participant complaints such as too many students in the large lectures, discomfort with the thought of discussing sensitive issues in front of many people, and the dry, uninteresting delivery style of most lecturers.

Behavioral Health Emerges as a Special Concern

Additional surveys conducted both at the outset of the partnership and then periodically throughout the development stages of the Center indicate that behavioral health problems pose a significant threat to most students—particularly in their first two years of study. In fact, more than 40 percent of those questioned expressed feelings of depression and/or stress, and nearly a third admitted to trying illicit drugs at some time during their teenage years.² These results affirm the important roles counseling, psychological services, and substance abuse education play in programs targeting young adults. While topics such as alcohol and drug abuse, depression, and interpersonal relationships are included in the health education curriculum designed for first-year students, there are also smaller-format options for counseling available, according to Dr. Pyotr Samkevich, a psychologist who practices at both the Polyclinic and Center.

“More than 85 percent of students surveyed consider our counseling services very useful—not just the programs focusing on substance abuse, but those dealing with smoking cessation, repro-

ductive health, and psychological concerns, as well,” Samkevich explains. So useful, in fact, that partners decided to increase the behavioral health services available on-campus by opening a Counseling Center staffed with a psychiatrist, two psychotherapists, and two other experts—one specializing in sexual dysfunction, the other in problems related to substance abuse. The Counseling Center began seeing students February 6, 2002 and, by the end of the month, had already received more than 730 patient visits.

Accessible, Targeted Services Get High Marks

Because the students who patronize the Center are a high-risk population of young adults who come from a wide range of backgrounds, the task of providing useful and appropriate services is an ongoing challenge for the staff. To be effective, the programs require frequent evaluation and revamping, according to Alekseeva. Patient surveys show that, as far as the students are concerned, the staff is meeting this challenge.

“Two of the most frequently-cited reasons students prefer coming to the Center, rather than the Polyclinic, are its location and the wide scope of services offered,” Vasylyeva relates, explaining that clinical care and lab services also receive high praise.

According to 19-year-old Elena Haba, the patient education programs are particularly useful. “I’ve attended a series of lectures provided through the Center and I think they touch on many of the major health concerns of students here, including smoking, alcohol use, and stress.” Noting that the Center’s proximity makes it much easier for her to seek treatment, she maintains that she received comprehensive, high-quality care when she visited complaining of flu-like symptoms.

“The staff was attentive and caring, and I found it very easy to talk with them.”

For Alexander Scherbakov, 18, who has visited the Center more than 10 times since it opened, it is the staff themselves, who impress him the most. “I was very surprised by the attitude of the clinicians and the treatment they provided. They were very kind and careful, and they really took the time to answer my questions openly and with respect. It felt as if they were part of my family. It is wonderful that I don’t have to waste time and money on transportation to get proper healthcare. I’d even like to see the services offered at the Center expanded—especially in the area of men’s health. After all, if healthcare is more accessible, people become much healthier.”

Agreeing that it is much more convenient to go to the on-campus Student Center rather than the Polyclinic, 18-year-old Alexander Morozov, says he was left with a favorable impression following his visits. “The Center is clean, with good, modern equipment and I was very satisfied with the treatment and recommendations provided by the staff.” Lauding the patient education sessions, he continues, “In my opinion, the rate of disease depends on the level of awareness about preventive measures. That’s why the classes are so important. It’s also important to note that the doctors and nurses provide detailed answers to questions, which is smart because when students have accurate information, they are better able to avoid illness.” ■

Resources

1. E. Voskresenskaya, “Assessing Health Risk Behaviors Among the Students of Kharkiv, Ukraine: Implications for Planning a Health Education Program,” (Master’s thesis submitted to the Department of International Health, Rollins School of Public Health, Emory University, Atlanta, Georgia), May 2000.
2. Ibid.