CHRONIC ILLNESS

The College Experience for Students with Chronic Illness: Implications for Academic Advising

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ABOUT THE AUTHORS

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WHAT IS A CHRONIC ILLNESS?

- As defined by the CDC: an illness that lasts longer and requires care of more than 12 months

- Examples:
  - Cancer
  - Eating Disorders
  - Diabetes
  - Lupus
  - Asthma
  - Mental Illness
  - Crohn’s Disease
  - Obesity
NEW VS OLD DEFINITIONS OF CHRONIC ILLNESS

Traditional definition

chronic lyme disease, Crohn's disease, sickle cell anemia, and diabetes

Modern definition

Amputation, Depression, Bi-polar disease, ADHD, Obesity
SILENCE IS OFTEN A COPING MECHANISM
THE VIEWPOINT MUST BE HOLISTIC SELF MANAGEMENT/PERSONAL EXPERIENCE. FAMILY INVOLVMENT CLINICAL EXPERTISE AND SYMPTOMS WORK/SCHOOL SUPPORT COMMUNITY AWARENESS/ACTION POLICY
VARIATION IN NETWORKS
IE 16-47 WAS THE RANGE

NOTE: FEMALES SHOW LESS VARIABILITY

SHOWS IMPORTANCE OF NETWORKS ON CAMPUS
IMPLICATIONS OF RESEARCH

The number of students with chronic illness is increasing.

Also, the classification, diagnoses, treatment of chronic illness is changing.
CONSEQUENCES OF CHRONIC ILLNESS

- Male vs. Female
- Social Development and Dependence on Family
  Dependence vs. Enabling
- Delay in Developmental Transitions:
  Adolescence to Adulthood
  (just an FYI: the typical transition markers are marriage and financial independence)
Males may be at higher risk than females for problems with adjusting to college. This is evident as well in students with chronic illness.

Note: Mentioned by researchers and noticed by advisors
CHRONIC ILLNESS IS A PART OF DIVERSITY

“As the student population continues to diversify, every campus finds itself with more people that the original system was not designed to accommodate”

EMERGING ADULTHOOD

New period of lifespan development
Ages ~18-29

Only become evident in the past few decades, specific to US

Initial step of full fledged, modern “independence”
   Defined by financial responsibility, marriage, children

“Feeling in between”

Similar responses from starkly different social backgrounds and economic prospects

Coined by Dr. Jeffry Arnett
CONTRIBUTORS TO “EMERGING” ADULTHOOD

Larger percentage of young people attending college extends transition from adolescence to adulthood in a large demographic.

Before passage of initial GI bill, 1944, few high school grads went to college, usually males. Now a majority of young people attend some form of post-high school education.

Women make up a majority of college grads. Accompanied by changes in marriage age/rates.

- 50 years ago: Men age 22 and women age 20
- Today: Men over 28 and women over 24

*Higher rates of students with Chronic illness attending college*
OFFSETTING OF ADULTHOOD

Evidence of “Emergence of Adulthood” exists and contributing factors can be measured

Students with a Chronic illness have another compounding factor to the “Emergence” period

In a holistic sense, the cumulative effect is not additive, but rather exponential

- Family dependence
- Additional monetary stress/worry
- Greater time commitments due to clinical and follow up appts
HOW CAN ADVISORS HELP

Courtesy and foresight is key!!!
Disclosure is not mandatory, but the more information the better
Know UNM support systems
CLASSROOM AWARENESS

Knowledge of the illness is key, given disclosure

Ex. Classroom accessibility
ASK INNOVATIVE QUESTIONS

Is there anything OUTSIDE of school that will make attending class difficult? - Cam

How is your family?

Are there financial strains

They will disclose if they want to
UNM’S CURRENT RESOURCES

If a student discloses, then refer to ARC

Amanda Butrum and the support team

DOS –Lisa Lindquist
Faculty facilitation

*No current support groups on campus
Propose that we add a QUICK slide to our NSO presentation that mentions ARC for Chronic Illnesses and Accommodation Services!!!
OTHER CONTRIBUTORS

Marisa Tapia (Cam’s amazing student)
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