

Instead of chicken soup, check out Student Health

By Jennifer Williamson
Staff Writer

Unavoidable. This one-word description of Student Health Service depicts a campus service most students use before leaving UNC.

Because so many students receive medical care from Student Health, unavoidable is to the only adjective used in describing it. Some feel Student Health provides adequate care, while others avoid the facility whenever possible.

Brent Morris, a recent graduate, said Student Health could help incoming freshmen deal with the rigors of college. "I know a lot of people who took advantage of the services," he said.

Morris said he relied on the Student Health staff once when he was kicked in the head during a soccer game.

Bill Worth, a junior psychology major, said the staff was friendly and competent. "They were interested in what I had to say," he said.

But some students say they would not use Student Health Service for bigger or more private problems.

"For something more personal, I don't know if I would go to Student Health," said Tiffany Fuller, a senior from Yanceyville.

Other students questioned the service's merits.

Shea Tisdale, a senior political science major, said, "I just always feel they don't care."

Tisdale said he went to Student Health many times and always was forced to wait. "I quit going out of dissatisfaction," he said.

Judith Cowan, director of Student

Health Service, said students were given many opportunities to express their opinions about the service.

A widespread student satisfaction survey about Student Health is given to all students who have used the facility, she said. The survey offers open-ended questions for patients to give their comments.

A Student Health Service advisory board investigates any student or parent complaint by reviewing each case brought to the board, she said.

"This is an opportunity to see if you can do things better," Cowan said.

Most patients complain about parking, she said.

Cowan described four main services Student Health has to offer.

■ Clinical medicine includes a staff of nine physicians, two nurse practitioners and one physician assistant. The clinical program handles most health care needs such as the common cold, the flu or other minor illnesses. There are three separate clinics within Student Health.

Referrals from any of the clinical physicians can be made to specialty care units such as Dermatology and Ear, Nose and Throat. There is an additional fee for these units.

To become familiar with the clinical medicine service, students should call and make an appointment, Cowan said. They will then be given a clinic and an individual doctor.

If a student dislikes his physician, he can be reassigned, Cowan said. "We make it easy to change providers (doctors)," she said.

New students should notify student health of ongoing health problems, even

if the student may not be ill, Cowan said.

■ The sports medicine program is operated by the same people who provide care for UNC athletic teams. The athletic department provides financial support for this program, Cowan said.

■ The psychological services provide help for students with personal problems related to stress, relationships, depression or loneliness.

Cowan said psychological services records were kept separate from students' regular medical records. Records can only be released to another therapist only after the student has signed a release, she said. "Parents could call, and we still wouldn't release the records," she said.

■ Gynecology is the fourth service offered by Student Health. Appointments may be made for routine care, morning-after pills and contraception. Student health also cares for victims of rape.

Cowan said Student Health was supported by student dollars. "We don't get any state funding, by law," she said.

Because alcohol is such a pervasive problem, Student Health also provides services for students with drinking problems. "Alcohol really is our biggest problem," Cowan said.

When students come in with alcohol-related problems, they are evaluated and treated, she said. Professionals talk to them about substance abuse and their family backgrounds to determine whether there are any signs of abuse.

Cowan said student health would not notify parents or the police if a student is found to have a drinking problem. "It's our business to take care of the



Chris Bock, a registered nurse at SHS, wraps UNC student Alexandra Randall's injured ankle

DH/Erin Randall

medical problem," she said.

Another issue faced by UNC students is AIDS testing. Student Health Service provides AIDS testing for stu-

dents but does report the name of the patient to the state if the results are positive.

Cowan said Student Health should

be a place where students feel free to ask questions. "We are a medical unit, but a medical unit in a special setting," she said.

UNC community works to help victims of dating violence

By Dale Castle
Staff Writer

Recent increases in the number of reports of dating violence on campus have prompted a committee studying the issue to consider implementing additional educational programs.

Members of the Orange-Durham Coalition for Battered Women hope that the Interpersonal Dating Violence Project will improve students' awareness of sexual assault and other type of acquaintance violence.

The project will provide educational opportunities for students and local residents. "One in five college dating relationships is a violent relationship," said Kit Gruelle, director of the coalition.

According to Sabrina Garcia, a crisis worker at the Chapel Hill Police department, there were 446 cases of sexual assault in Chapel Hill in 1991 involving 630 people. "When you get into the eye of the storm, it's very complex," Garcia said.

Kathleen Benzaquin, co-chairwoman of the coalition's rape awareness committee and assistant dean of the General College, said that students should need to understand that domestic violence was not limited to dating or to romantic relationships. The rape awareness committee, formed in 1986, has a response team with a contact in every relevant school and department on campus.

"(Domestic violence) can be between male and female, friends, people in in-

imate relationships, male on male, female on female," she said. "We see it all."

Gruelle said that although the sponsors of the project would work to educate students about roommate violence, violence between friends and violence among family members, the main focus still would be dating violence.

Project members plan to approach the UNC School of Journalism and Mass Communication in the fall about surveying students to determine what types of violence are present on campus, said Elaine Barney, vice chairwoman of the board for the Coalition for Battered Women. Barney is a clinical social worker at Student Health Service.

Although the coalition has seen many

reports of dating violence, members say it is important to consider the individual needs of each case, Barney said. "Any incident is serious enough," she said.

Gruelle, a former chairwoman of the Interpersonal Dating Violence project, said it would be more appropriate for a student or faculty member to head the project. Students can be more creative in developing timely, efficient programs, she said.

"(Domestic violence) is the number one cause of injury to women in this country, and yet, it's sort of the big secret that nobody talks about," Gruelle said.

Gruelle said the cycle of violence includes three phases:

■ The first phase begins as tension

builds. Often the man will slam the door or throw objects at the woman.

■ The second phase includes actual violence, ranging from throwing the woman against a wall to stabbing her, Gruelle said.

■ The so-called "honeymoon phase" makes it difficult for the woman to decide what to do because the man typically returns to treating her nicely, bringing her flowers and taking her on dates, Gruelle said.

"What separates this kind of violence from other kinds of violence is that these two people started out saying, 'I love you,' to each other," Gruelle said.

Because many children are spanked by their parents, batterers often justify

their actions by saying they were punishing their wives or girlfriends. "Nine times out of 10, the man will come up with some way to blame the woman for his violence," Gruelle said.

The woman ends up believing the man and blaming herself for his violence, Gruelle said.

Gruelle said victims should not just assume their batterers are violent because of substance-abuse problems such as alcoholism.

"If that's the case, then every man who ever got drunk would beat up his girlfriend," she said.

The goal of the Interpersonal Dating Violence Project is to teach people to think about the issue of domestic violence differently, Gruelle said.

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