

# Wellness Plan for Off-Campus Study

This is your plan. You are encouraged to develop it to anticipate, reflect on, and prepare for your medical and mental health needs while studying off-campus. Please keep a copy of this wellness plan in an accessible place (e.g., email or a cloud account like Google Drive or Dropbox, in addition to having a paper copy with you). We also encourage you to leave a copy with family/loved ones. If you feel comfortable doing so, consider sharing this form with program faculty and staff if you think it would help them support you while studying off-campus. If you do share this information with them, they will keep it strictly confidential. Otherwise, this form can be kept exclusively for your own use and planning.

Name	e								
Date									
Prog	ram & Te	erm A	broad/ <i>F</i>	Away					
My h	ealth/me	ental l	nealth c	onditio	n(s):				
lf y	ou receiv	e acc	ommoda	ations th	rough tl	n <b>Request</b> he Disability Services office on your campus, have you completed your uest Form? (This may prove helpful in completing your Wellness Plan.)			
Yes		No		N/A					
2. Early warning signs What are the first signs or "red flags" that I notice, that indicate that the symptoms of my health/mental health condition are starting to come back, or are becoming more problematic?									
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Are there any signs that the program faculty/staff should be alert for?	
What kind of support would you like from the program leader(s)?	
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#### 3. Support Resources

I will use these support resources for my health and/or mental health while studying abroad. We encourage you to start by talking with your study abroad/away advisor, who can help you contact the appropriate support staff/faculty/ program directors/resources at home and off-campus. Please fill in the contact information for any support people you could contact

Who/What	Name	Phone/ WhatsApp	Email
Physician(s)			
Therapist (if accessible by email, phone, WhatsApp)			
Sponsor if in recovery			
Family member(s)			
Close friend			
US Based Health Insurance	Policy/group #:		
Telephone Counseling	Augsburg's Center for Wellness & Counseling contracts with an after-hours phone counseling service. This service is for Augsburg students only.  Telus Health	+1-612-330-1707, Option 1  Call or Live chat from the Telus app	n/a
Augsburg College 24/7 International Health and Travel Insurance	EIIA/Healix Insurance Policy Number: LTG273330	For Emergency Assistance call: Toll-free in the US and Canada: (+1) 833 209 7075 Collect outside of the US: (+1) 312 638 6995	EIIA@healix.com  https://www.eiia.org/internatio nal-travel/
Augsburg CGEE 24/7 Emergency line	Staffed by Augsburg CGEE in Minneapolis	+1 612-817-2830	
Study Abroad/Away Advisor			



Online counseling is available for all students on Augsburg CGEE programs. See: <u>Telus Health</u>. This is not only for use in an emergency, or once you are abroad. You can take advantage of the services if you have any issues prior to departure, set up ongoing sessions if you think you will need the services of a therapist while you are abroad, and at any time you just need to talk to someone before, during or after the semester. In fact, we are told that pre-departure counseling is one of the most common points of contact.

We highly recommend that you download the Telus Health Student Support app on your phone, become familiar with the services and delivery options, and create an account. This last step is vital to easy access in the future.

- App Store for iOS devices
- Google Play for Android

## What is Student Support?

### 24/7 real time support

Our student support service is available night and day via phone and live chat.

### Confidentiality

Your privacy is protected, Student Support is confidential within the limits of the law.

### **Experienced professionals**

Professionally trained counselors with experience dealing with the challenges faced by students.

#### No extra cost

Instant access at no additional charge for students enrolled in schools that have signed up for Student Support.





4. Coping Plan What can I do to cope if symptoms of my health or mental health condition are showing up? Please list coping activities or supports that have helped you in the past and that will be available to you in your host country. See Center for Wellness & Counseling "Anxiety Support" and "Depression Support" resources (Blue Buttons on <a href="https://www.augsburg.edu/cwc">www.augsburg.edu/cwc</a> )							
5. Plan for preventive, daily stress management practices Please identify practices that help you to stay healthy.							



#### 6. Medications

If on prescription medication(s) for health/mental health concern, please be aware of the following:

- your medication may go by a different name in the host country;
- some medications are illegal to import into certain countries;
- when bringing a medication in your luggage, it is best to bring it in the original prescription bottle;
- contact EIIA for information on medications in your host country (see contact information on page 2)

Please complete the following for each medication you may be taking while in your host country:

MEDICATION #1										
Name in U.S.			Name in host country							
Is medication legal in host country?					Yes		No			
Dosage	Drug classification schedule									
Side effects	Side effects I may experience:									
Plan to ensure I'll have access to this medication during study abroad (for example, "have full supply with for duration of trip"; "bring copy of prescription").										
MEDICATIO	ON #2									
Name in U.S	<b>5.</b>		Name in host country							
Is medicatio	n legal i	n host country?			Yes		No			
Dosage			Drug classification schedule							
Side effects I may experience:										
Plan to ensure I'll have access to this medication during study abroad (for example, "have full supply with for duration of trip"; "bring copy of prescription").										



MEDICATION #3											
Name in U.S. Name in host country											
Is medication legal in host country?						No					
Dosage	osage Drug classification schedule										
Side effects	l may experience:										
Plan to ensure I'll have access to this medication during study abroad (for example, "have full supply with for duration of trip"; "bring copy of prescription").											
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if you nave	any additional prescriptions, please note in	n the "Additional Not	es box be	iow.							
Additiona	notes										