



# On Campus **AND** On Course

GOING TO COLLEGE  
WITH DIABETES IS  
A BIG TRANSITION.  
HERE'S HOW TO  
MAKE IT WORK

By Samantha Stainburn



# Michael Levy sampled

all that college life has to offer in his first year at Virginia Tech. In addition to taking six courses a semester, the engineering major and music minor marched on the VT drum line, rushed a fraternity, and took a ski trip with friends in the winter.

Levy, now 19 and a rising sophomore, was diagnosed with type 1 diabetes in sixth grade. He says he's always strived to fit diabetes into his life rather than fit his life around diabetes. Still, he admits, the transition to college was a bigger adjustment than he expected. "It's a lot more work," he says. "The toughest change is not being on a rigorous schedule that you follow every day. If I want to, I can stay up until 4 o'clock in the morning playing video games." Since his daily routine is unpredictable—it could end in a late-night study session or a party any night of the week—Levy has become more vigilant about keeping his blood glucose in a healthy range throughout the day. "I check about four or five times a day and correct often," he says. And he never leaves his dorm without a bag that contains his test kit, three juices, and an insulin pen. "Even if I go to a party, I have that bag with me," he says. "People joke with me about it, but I say, 'It's my man purse.' Just having it gives me that sense of security that if something does go wrong, I'm ready to handle it."

Figuring out how to survive and thrive at college is a big job for any student who's living away from

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**— LORI LAFFEL, MD**

home for the first time, but it's particularly complicated for those with diabetes. Not only do they have to learn how to use the coin-operated washing machine and get along with eccentric roommates, but they also have to calculate carbs in cafeteria specials they've never seen before (what's in Tofu Surprise, anyway?), monitor how walking across campus for different classes affects their blood glucose levels (it may mean lowering insulin doses, for

one thing), and remember to refill prescriptions and make doctor's appointments.

"Having diabetes is almost like adding another course to your schedule," says Lori Laffel, MD, chief of the Pediatric, Adolescent, and Young Adult Section at Joslin Diabetes Center in Boston. "It takes extra time. But giving your diabetes the attention it needs will help make everything else go well."

Many students worry that leaving the safety net of family behind when they go to college means they'll need to manage their diabetes alone when they're on campus. That's not necessary—or even recommended, says Laffel, a member of the American Diabetes Association's board of directors and chair of its Youth Strategies Committee. "You have to find another set of safety nets," she says. "Diabetes is managed better when you have support."

Matthew Nelson, 21, a 2009 graduate of St. Olaf College in Northfield, Minn., who majored in economics and management studies and played varsity football, says his friends and his athletic trainer helped smooth his path at school. "I'm not the most disciplined of diabetics," he admits. "My friends were always getting on my tail for not testing before meals. They didn't have a problem with me giving myself shots around them." His trainer, meanwhile, helped him figure out how to control his fluctuating blood glucose during college games, which are longer and more intense than high school games.

Let your roommate, your resident assistant, and at least a few close friends know you have diabetes and explain how they can help if you're confused, out of it, or showing other signs of hypoglycemia. Roommates or other friends should be taught how to administer glucagon in case of an emergency. "If you talk to your friends ahead of time, you won't feel so self-conscious," says Margaret Vimmerstedt, MD, who coordinates diabetes care for the campus health services at the University of North Carolina–Chapel Hill.

On-campus health services can be a valuable source of support, even for the many students who choose to continue working with their endocrinologist from home, scheduling appointments during

## COLLEGE AND DIABETES: Be Your Own Best Advocate

### You have rights...

**... in admissions.** Colleges are prohibited from inquiring about disabilities when they make admissions decisions. The PSAT, ACT, SAT, and AP no longer flag score reports of students who use modifications when taking the tests. Your high school should not disclose your diabetes to colleges without your consent. Unless you choose to include information about your diabetes on your application—say, as part of your admissions essay—your diabetes should play no part in the admissions decision. (For more information about standardized testing and diabetes, go to [forecast.diabetes.org/magazine/features/tools-you-can-use](http://forecast.diabetes.org/magazine/features/tools-you-can-use).)

**... at college.** Two federal laws protect you against discrimination: Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act. These laws apply to nearly all public and private colleges, including most religious schools, and also require colleges to provide reasonable modifications to students with disabilities, including diabetes. However, legal requirements are different in college than in high school. For example, your college may permit you to reschedule an exam if your blood glucose levels are out of target range, but may not be obligated to train staff in diabetes care. Other modifications you might ask for include being allowed to check your blood glucose in lecture halls, having breaks between separate sections of long exams to check glucose, and being excused for diabetes-related absences. Many colleges require that you provide a recent letter from your doctor to justify requests for modifications.

### You have responsibilities...

**... to take the initiative.** In high school, your parents probably worked with your school to develop and implement a written school diabetes care plan (often called a 504 plan). It is now your responsibility to let your college know what you need. Make an appointment with the school's office of disability services. Even if you do not need any modifications right away, putting your college on notice about your diabetes is critical in case any problems do arise. You may also need to work with other administration personnel along the way: a professor or academic dean for testing modifications; an athletic director for physical education or athletic issues; and a coordinator of student employment if you need accommodations in your work-study job.

**... to fight for your rights.** If you are denied the modifications you need, or otherwise discriminated against, you may decide to file a complaint. If your college receives federal funding (and almost all do), it must implement an antidiscrimination grievance policy. Sometimes the policy may be run through the office of disability services, while at other times it will be integrated into a college-wide process. You can also file a complaint with the Department of Education's Office for Civil Rights or file a lawsuit directly in federal court.

*By Crystal Jackson, American Diabetes Association associate director of Legal Advocacy, and Katharine Gordon, ADA Novo Nordisk Legal Advocacy fellow*

If you are experiencing discrimination at college, call 1-800-DIABETES (1-800-342-2383) for information and the opportunity to speak with a legal advocate.

**ADDITIONAL RESOURCES ARE AVAILABLE AT:**  
[diabetes.org/safeatschool](http://diabetes.org/safeatschool)

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# "STUDENTS WHO HAVE EMBRACED THEIR DIABETES BEFORE COLLEGE TEND TO HAVE A SMOOTHER TRANSITION."



school breaks. Some college health services have certified diabetes educators and diabetes support groups. Campus clinics can refer you to local physicians who can treat you in conjunction with your regular doc, which may be necessary if home is 3,000 miles away. Also, campus health services usually can help students with flus and other minor illnesses that circulate quickly through dorms.

Work with your college office of disability services to minimize the distractions of diabetes and make it easier to focus on academics. These offices can help you with tasks like getting permission to take breaks during exams to check your blood glucose and drink juice; securing a spot in a section of a course that doesn't meet during lunchtime; and getting housing that's close to the cafeteria ("Be Your Own Best Advocate," page 43).

Some may consider it a rite of passage, but the college party scene doesn't mix well with diabetes. "You can't safely ignore giving insulin and checking your blood sugars, so things that impair you are going to make it hard to take care of yourself," says Vimmerstedt. That includes recreational drugs and alcohol. Remember that alcohol can lower your blood glucose and cause hypoglycemia, especially after you've gone to sleep. In addition, students who have overindulged may think that they're vomiting from drinking, when in fact it can be a sign of the dangerous condition diabetic ketoacidosis (DKA).

If you decide to drink anyway, always eat to prevent your blood glucose from dropping, and don't drink to excess. "Make sure at least one person you're with [who isn't drinking] knows you have diabetes and how you might act if your blood sugar drops," says Mary Jean Michels, RN, CDE, a certified diabetes educator at the University of Oregon Student Health Center. "Sometimes the symptoms of low blood sugar are similar to what you might find in someone who's had too much to drink."

Sound like a buzz kill? The restrictions and nagging details that come with managing diabetes at college can be overwhelming. But that's no reason to slack off. "It's not easy to deal with this 24-7," says Michels, whose three adult children went to college

with type 1 diabetes. "Students cannot ignore their diabetes without having some issues, whether it's high blood sugars all the time or having lows."

If you find yourself feeling gloomy, "try to stay focused on the reasons you came to school and what you really want," says Vimmerstedt. "Hopefully, it's things like being healthy and having friends. Work with your professors to get the most out of your courses." Don't hesitate to visit a counselor at the student mental health center if you're feeling depressed or highly stressed.

Many students find their success at school has a lot to do with what happens prior to being on campus. "Students who have embraced their diabetes before college tend to have a smoother transition," Michels notes. That was certainly Robin Stephenson's experience attending UNC-Chapel Hill earlier this decade. "I had a hard time at first because I wanted to put diabetes on the back burner and not think about it," says Stephenson, 27. "I was so resentful I had it." More than once, she found herself making panicky runs to grocery stores in the middle of the night for sugary foods after running out of glucose tablets. Finally, she started keeping track of her supplies in a day planner. "It gets easier, like any habit," she says. "And the more you do it, the less it annoys you." At first reluctant to tell new friends she had diabetes, she felt better once she started opening up to people. "Everyone was willing to help out," she recalls. "If you have low blood sugar and nobody knows what's going on, you draw more attention to yourself than if you've told people."

Now a graduate student at UNC planning on becoming a nurse and a diabetes educator, Stephenson says that learning how to manage her diabetes at college set her up for a healthier life. "I learned what stress and walking did to my blood sugar, how to feed myself, and how to approach people about my illness," she says. "Those are things I had to do. It took me a while, but I got them right." ▲

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