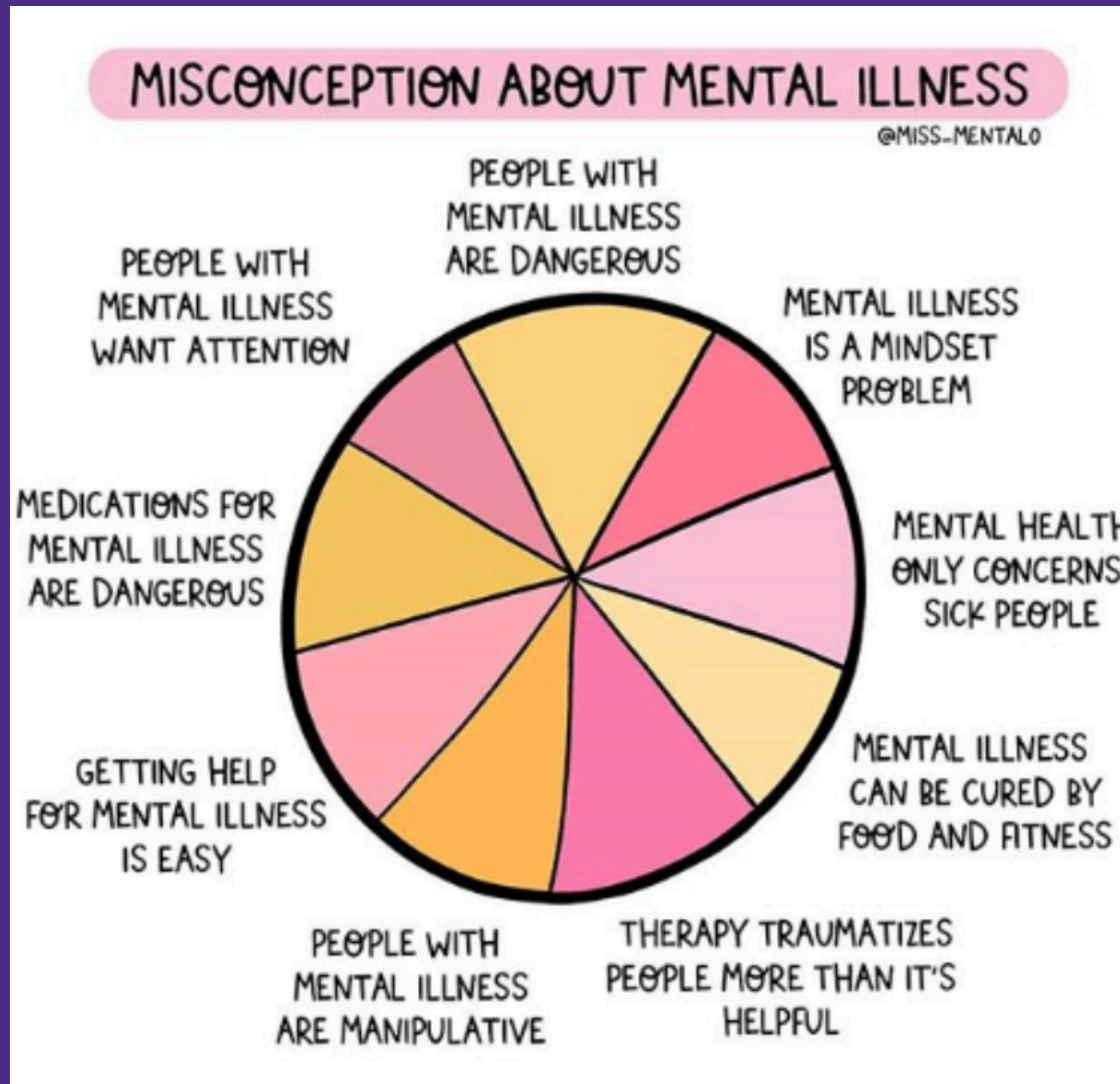
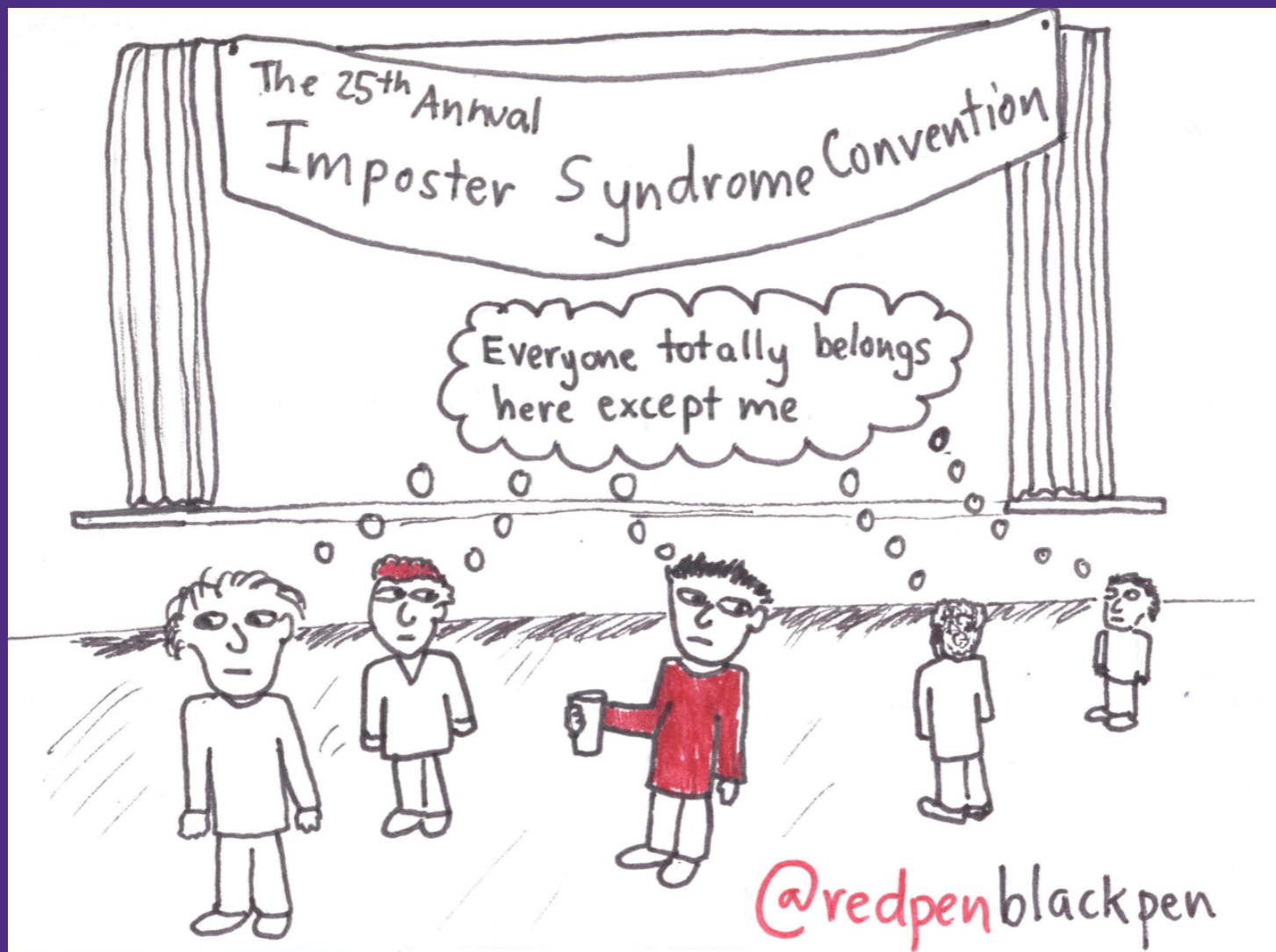


What mental illness is not...



Mental health: Striking a balance in all aspects of your life – social, physical, spiritual, economic, mental.



You are likely the 'first responder':



Remember – you don't need to solve every problem....

Graduate students face mental wellness challenges

39%
OF GRADUATE
STUDENTS FELL INTO
MODERATE TO SEVERE
DEPRESSION



A 2018 study in *Nature Biotechnology* reports that 39 percent of participants, mostly doctoral candidates, had moderate to severe depression, as compared with the 20 percent of American adults who experience mental illness in any given year.

HALF
OF PH.D. STUDENTS
HAVE EXPERIENCED
PSYCHOLOGICAL
DISTRESS



The problem is not new. Studies in the *Journal of Nervous and Mental Disease* (2013) and the *Journal of College Student Development* (2006) reported that half of all Ph.D. students have experienced psychological distress and one-third are at risk of a common psychiatric disorder.

63%
OF GRADUATE
DEANS AGREED
STUDENTS
STRUGGLE MORE
THAN 5 YEARS AGO

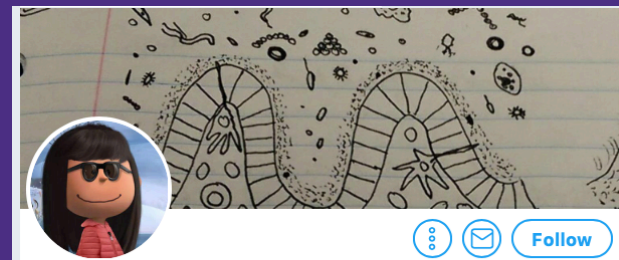
Graduate deans are mindful of the mental health challenges faced by master's and doctoral students, Okahana writes. In the 2018 CGS Pressing Issues Survey, 63 percent of these deans agreed or strongly agreed that current grad students struggle to maintain mental wellness more than grad students did five years ago.



Dr. Kat Milligan-Myhre (@Napaaqtuk)

3/24/19, 11:23 AM

For those of you who had/are now having a difficult time in grad school, what support was/is lacking?



Dr. Kat Milligan-Myhre
@Napaaqtuk

Inupiaq, scientist interested in host-microbe interactions, mom, runner, news junkie, not necessarily in that order. I speak for myself.



Dr. Kat Milligan-Myhre @Napaaqtuk · Mar 24
From another student:
-Support was passive, not active. Seemed to be assumed we'd seek out support from faculty, but faculty would very rarely offer.
-No structural support for dealing with emotionally abusive advisor or peers. 1/4

Dr. Kat Milligan-Myhre @Napaaqtuk · Mar 24
-Faculty made it clear it was up to grad student to change their situation (otherwise it was viewed as "whining").
-Faculty would typically support each other over grad student complaints of harassment or emotional abuse. 2/4

Dr. Kat Milligan-Myhre @Napaaqtuk · Mar 24
-No standardized means of assessing students during qualifying exams.
-No structural training for non-academic / non-R1 career paths.
-Explicitly expected to receive little to no external validation. 3/4

Dr. Kat Milligan-Myhre @Napaaqtuk · Mar 24
In addition, many of my friends experienced the same or worse and in addition:
-No structural support for being parents.
-Lack of cultural competency; labs were isolating or othering. 4/4

P. Arden Doerner Barbour @parden90 · Mar 24
Replying to @Napaaqtuk
I felt like I couldn't talk to my advisor about my struggle with feeling like I didn't belong in science

Shannon Romano, PhD @sromano23 · Mar 24
Replying to @Napaaqtuk
I felt well supported by my program/mentor. What caused me the most struggle was never feeling like I was allowed to celebrate my accomplishments or feel good about myself. That cycles you into poor mental health space - even though no one meant to do that to me.

Julie Blommaert @Julie_B92 · Mar 24
One of my colleagues and friends insists on celebrations at all times and I'm so thankful for her. I hope you can find someone like this and I hope you can be someone like this too!

Dr. Kat Milligan-Myhre @Napaaqtuk · Mar 24
S7: My PhD advisor didn't...advise. He had tons of time to fuss over and second-guess the minutiae of experiments, but never returned comments on chapters/paper drafts. Committee told me it was "my responsibility" to get his feedback. He also yelled, a lot, over everything. 1/1

Dr. Kirby Farah @kirbyfarah · Mar 26
Replying to @Napaaqtuk
Encouragement to try and fail (and talk about it)! Rejection is such an important part of learning to be a good scholar. In grad school I was so afraid to fail I didn't always try. Grad programs should celebrate students' stumbles!

Karen James @kejames · Mar 25
Replying to @Napaaqtuk
The expectation of over-work (both cultural & specifically by my supervisor) was toxic for me as a grad student & exacerbated my imposter syndrome. (If I'm not good enough, it's probably my own fault for not working hard enough, etc.) 1/3

Karen James @kejames · Mar 25
I think it led to some lasting self-sabotage issues I have. My partner and I were both students in the same dept. & we still talk about the lasting effects of "grad school guilt" in our lives 15+ years later. 2/3

Karen James @kejames · Mar 25
My later experiences with sexual harassment, though perhaps more shocking to hear, were not nearly as damaging to me — both my life and career — as the lasting effects of that culture have been. 3/3

Victoria Coules @victoriacoules · Mar 25
I'm privileged to have two supervisors with demanding and exacting standards yet feel really supported (especially during recent recovery) but am aghast now I'm back in academia at what I'm picking up of harassment, misogyny, unrealistic expectations etc

“Crying doesn’t make me weak.”

“Your support is priceless!”

What do our mentees say?

“I don’t trust you anymore.”

“I avoid conflict at any cost”

“...that I just want to make them proud.”

“The expectation of overwork makes me feel guilty for taking time to sleep”

“I can’t give 200%”

“That I am grateful for how supportive and encouraging you are ”

“I slept under conference room tables because I felt too guilty going home”

“You are my idol in more ways than you know!”

“... I was functionally suicidal for almost a year - but very productive!”

“That she remembers that I am here to learn to be an independent thinker & researcher, rather than a vessel for executing his/her ideas.”

“I skip lunch all the time because I feel I’m not doing enough”

“Negative feedback may be easier to give but positive feedback will motivate me to work harder”

“...that it hurts to feel like you’re not being listened to. It would also be nice to be given feedback on things I do well, not just mistakes I make.”

Prevalence of Mental Illness

Mental illness means:

- 1 in 5 adults ages 18-25 has a diagnosable mental illness
- 18.1% of US adults live with anxiety disorders in a given year
- 6.9% of adults live with Major Depressive Disorder in a given year
- Nearly 60% of adults living with mental illness don't receive treatment
 - Access to care
 - Stigma

When surveying graduate students...

- Grad students are **6X** more likely to experience depression and anxiety compared to general population.
- Grad students who experience symptoms of depression & anxiety are far less likely to cite positive relationship with advisor/PI. (*Evidence for a Mental Health Crisis in Graduate Education, Nature Biotechnology (2018)*)
- Just under **50%** of surveyed PhD students met criteria for depression (*Berkeley Graduate Assembly, Graduate Student Happiness and Wellbeing Report (2014)*)
- More than **75%** of graduate students reported being overwhelmed.
- Over **50%** reported experiencing somewhere between “more than average” and “tremendous” stress. (*Comparing Mental Health Issues Among Graduate and Undergraduate Students, American Journal of Health Education (2013)*)

Burnout and Mental Health Problems in Biomedical Doctoral Students

CBE – Life Sciences Education (2019) 18ar27, 1-14

Gabriela A. Nagy,[†] Caitlin M. Fang,[†] Alexander J. Hish,[‡] Lisalynn Kelly,[†] Christopher V. Nicchitta,[§] Kafui Dzirasa,^{†||¶#} and M. Zachary Rosenthal^{†@*}

Evidence for a mental health crisis in graduate education

Nature Biotech (2018) 36(3) 282-284

Teresa M Evans¹, Lindsay Bira², Jazmin Beltran Gastelum³, L Todd Weiss⁴ & Nathan L Vanderford^{4,5}



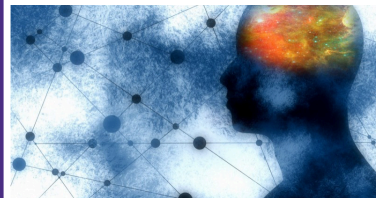
ISTOCK.COM/KAIPONG

Graduate students need more mental health support, study highlights

By Elisabeth Pain | Mar. 6, 2018, 5:55 PM

Science

A Very Mixed Record on Grad Student Mental Health



Inside Higher Education,
C Flaherty, (2018)

nature
International journal of science

Subscribe

EDITORIAL • 29 MARCH 2018

Time to talk about why so many postgrads have poor mental health

EDUCATION

Graduate School Can Have Terrible Effects on People's Mental Health

Ph.D. candidates suffer from anxiety, depression, and suicidal ideation at astonishingly high rates.

The Emotional Toll of Graduate School

Mental health disorders and depression are far more likely for grad students than they are for the average American

.....
By Prateek Puri on January 31, 2019



Scientific American



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Head quarters Higher education

The human cost of the pressures of postdoctoral research

WORKING LIFE

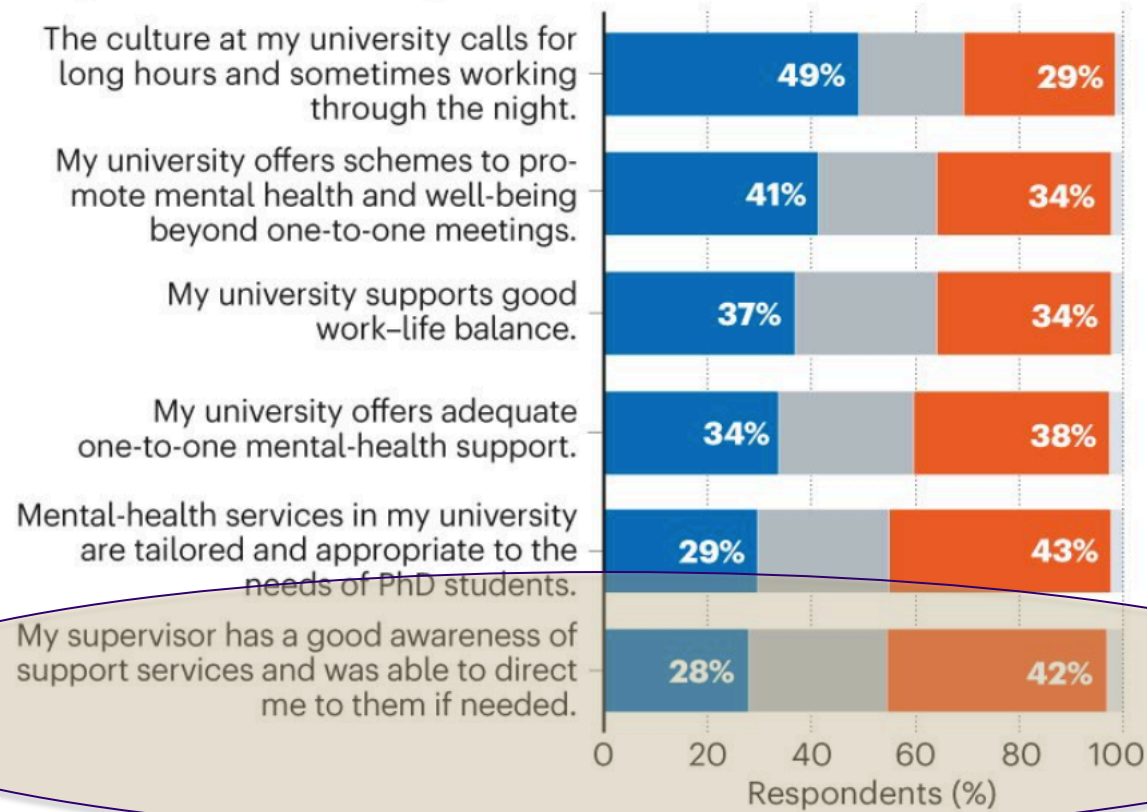
By Carrie Arnold

The stressed-out postdoc



Q: Do you agree or disagree with the following statements?

■ Agree ■ Neutral ■ Disagree ■ Did not answer



36%

of respondents have sought help for anxiety or depression caused by PhD studies. One-third of them sought help from places other than their institution, and 18% sought help at their institution but didn't feel supported.

©nature

Source: Nature PhD Survey 2019

<https://www.nature.com/articles/d41586-019-03459-7>

Graduate Student Stressors:

- Anxiety
- Depression
- Isolation
- Imposter Syndrome
- Sleep
- Financial
- Perfectionism
- Advisors
- Work/life balance
- Microaggressions
- Barriers/discrimination
- ???

promising professional rewards in return for sexual favors

threatening professional consequences unless sexual demands are met

UNWANTED SEXUAL ATTENTION

rape

sexual assault

unwanted groping or stroking

PUBLIC CONSCIOUSNESS

GENDER HARASSMENT

relentless pressure for sex

unwanted sexual discussions

nude images posted at work

relentless pressure for dates

sexually humiliating acts

offensive sexual teasing

sexual insults
e.g. "for a good time call...",
calling someone a whore

sexist insults
e.g. women don't belong in science

offensive remarks about bodies

obscene gestures

sabotage of women's equipment

vulgar name calling
e.g. "slut," "bitch," "c**t"

gender slurs
e.g. "pu**y"

insults to working mothers
e.g. "you can't do this job with small kids at home"

NASEM. 2018. *Sexual Harassment of Women: Climate, Culture, and Consequences in Academic Sciences, Engineering, and Medicine*

What do I do?



What do I do?

Husky Health & Well-Being



MEDICAL



SAFETY



GET INVOLVED



MENTAL HEALTH



RECREATION



RESOURCES

<https://wellbeing.uw.edu>

UNIVERSITY *of* WASHINGTON

What do I do?

Home	
Mental Health	+
Medical	+
Safety	+
Recreation	+
Resources	+
Prevention & Education	+
Get Involved	+
Campus Partners	+

<https://wellbeing.uw.edu>

**URGENT
HELP**

**INDIVIDUAL
COUNSELING**

**GROUP
COUNSELING**

MINDFULNESS

**PSYCHIATRIC
MEDICATION**

**OFF-
CAMPUS
RESOURCES**

LET'S TALK

**PET
THERAPY**

MENTAL ILLNESS

what NOT to say

"you look fine so what's wrong?" "There are people far worse off than you"

"Smile" "You don't need pills"

"You're just bored" "you're mad"

"Get a job" "You don't look ill"

"Stop feeling sorry for yourself"

"You have money, why are you depressed?"

"You have a loving family, so what's the problem?"

"you're just attention seeking"

 "GET a GRIP!"

"Stop being so lazy"

[Facebook.com/JoysMentalHealthMission](https://www.facebook.com/JoysMentalHealthMission)

What do I do?

➤ **Support one another**

- 75% of students report turning to a friend/peer first for support

➤ **Address stigma within department**

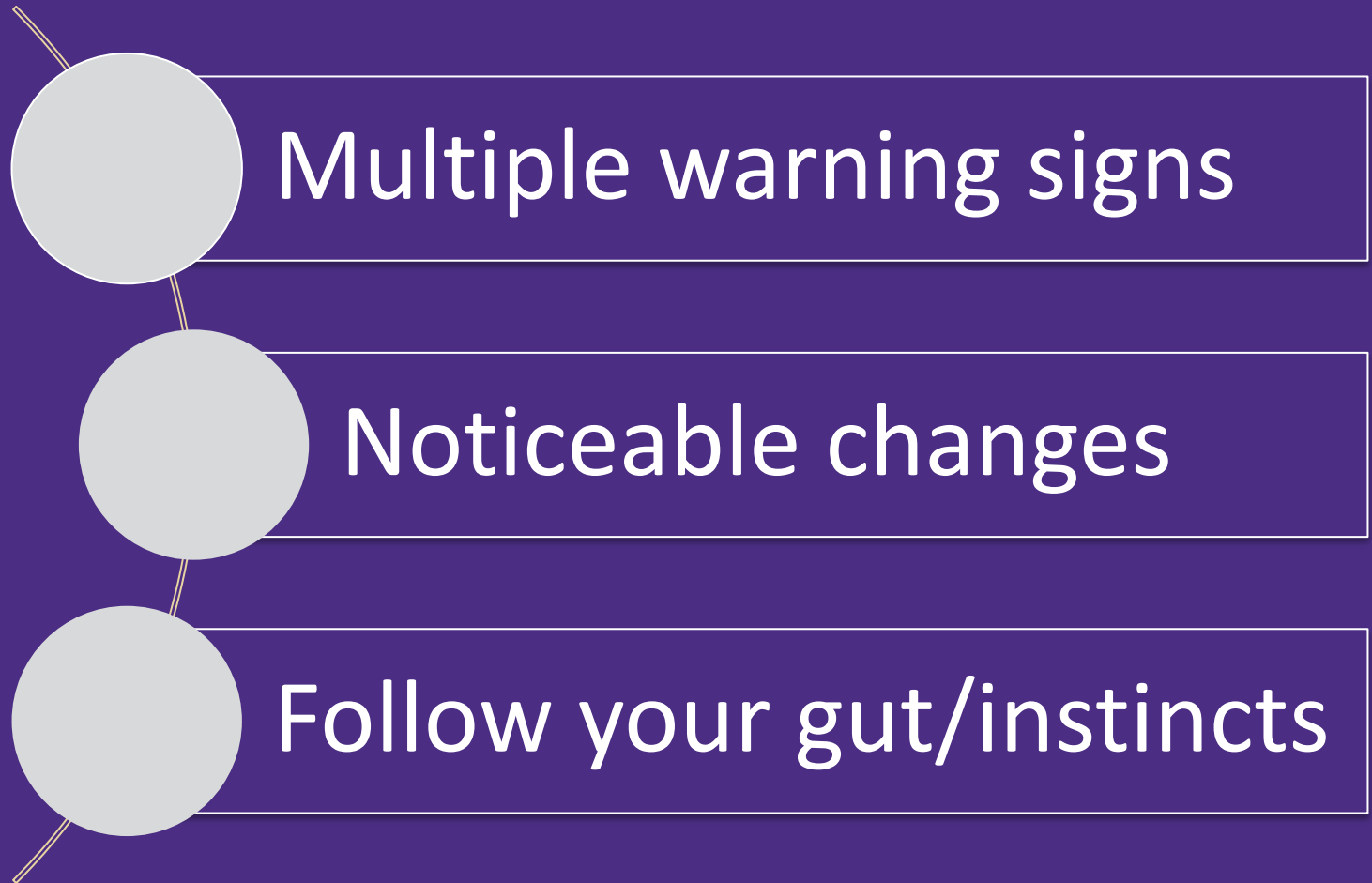
- Normalize help-seeking behavior
- Discuss common mental health concerns, bring up topics related to mental health

➤ **Learn interpersonal effectiveness strategies to work with advisors**

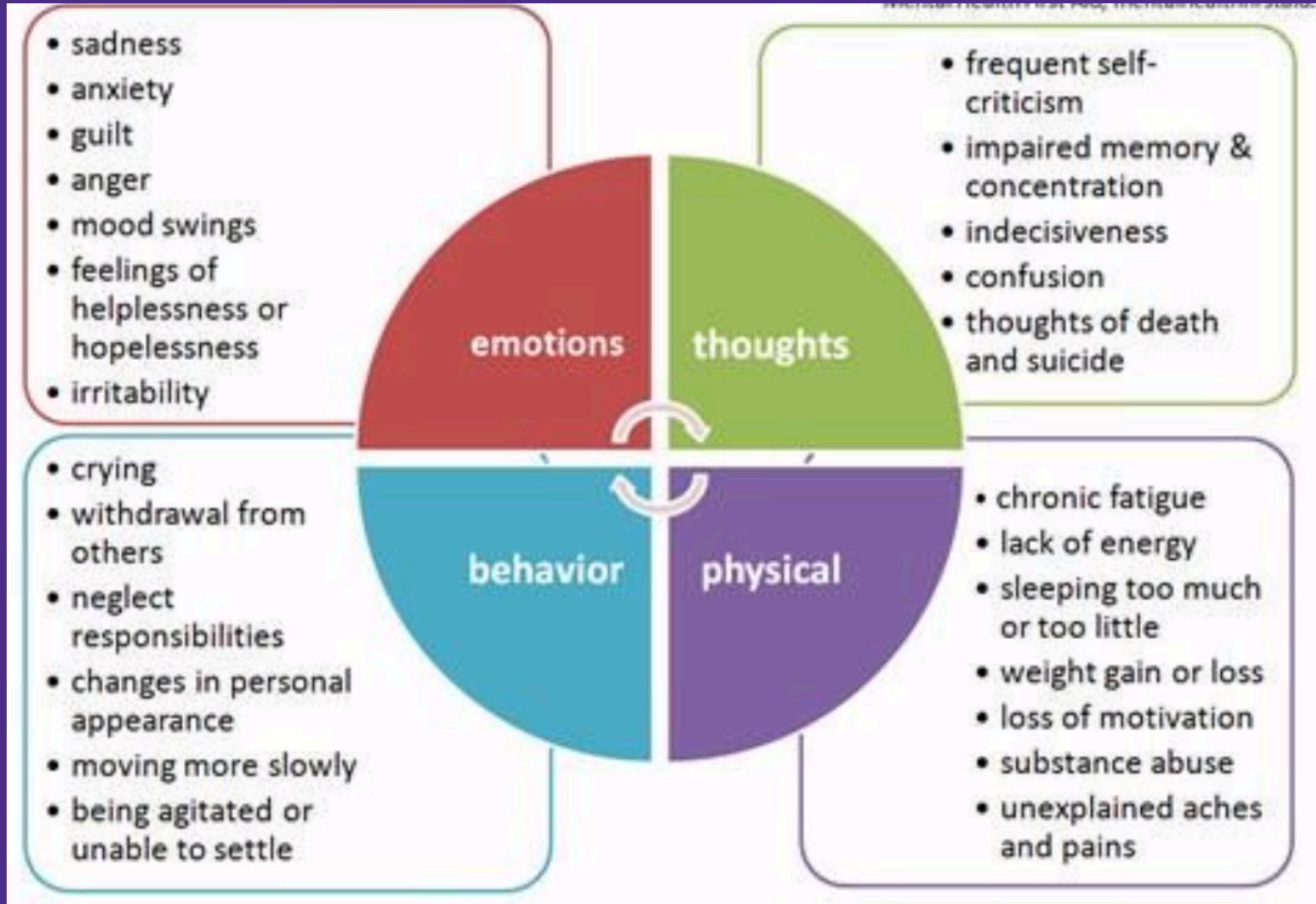
➤ **Take care of yourselves & encourage others to do the same**

- Abandon the martyr competition
- Set a tone of self-care and mindful work ethic
- Address impostor syndrome and perfectionism

When to intervene?



Symptoms of Depression



What do I do?

HEALTH & WELLNESS
(in Elm Hall)

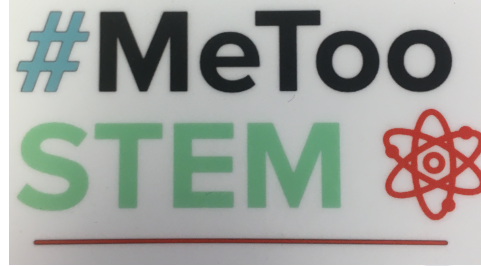


HALL HEALTH
(in Hall Health Center)

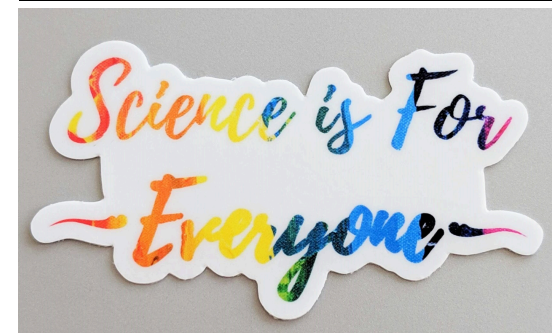


COUNSELING CENTER

(in Schmitz Hall)



**↑ KNOW
SCIENCE.
↓ NO
STIGMA.**



IT'S EVERY HUSKY'S RESPONSIBILITY TO HELP KEEP OUR UNIVERSITY SAFE!

When in doubt ... contact SafeCampus
206-685-SAFE (24/7 helpline)

Suggestions for mentors:

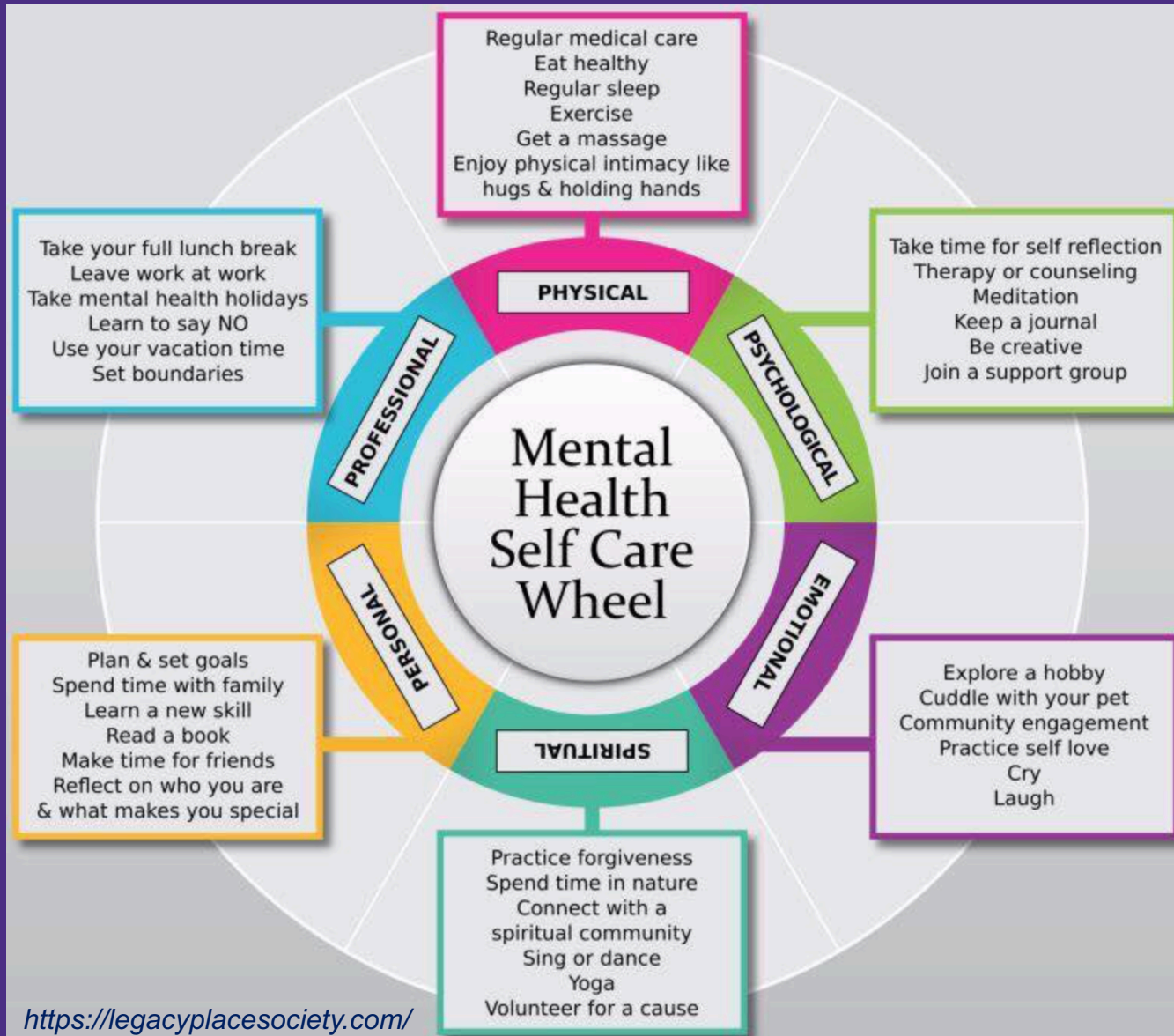
- > Know your campus resources: for students, postdocs, faculty
- > Discuss expectations and check-in with mentees
- > Be observant to changes in schedule, communication, work, outside activities
- > Establish healthy boundaries
- > Help end the stigma!

What we can ALL do (a partial list):

- Be more open about how common it is that people struggle with poor mental health
- Normalize and destigmatize seeking mental health care
- **Talk about failures, big and small**
- Communicate clearly and constructively
- Support students/postdocs as they consider different career paths
- Make it clear to students that someone cares about their success
- **Reach out to people who you think might be struggling**
- Get trained in mental health first aid
- **Create peer support networks**
- **Address sexual and gender-based harassment**
- Promote wellness (e.g., sleep, exercise, sense of purpose, community,)
- Support having interests outside of academia

For more info, Barreira et al., working paper; Duffy et al., The Conversation

Encourage Self Care:



More info (and hopefully guidance/resources):

Supporting the Whole Student: Mental Health, Substance Abuse, and Well-Being in Higher Education

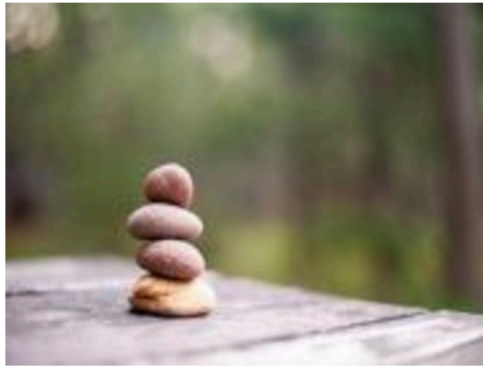
Presented by the National
Academies of Science,
Engineering & Medicine's
Board of Higher Education
Workforce [NASEM BHEW]



<https://www8.nationalacademies.org/pa/projectview.aspx?key=51350>

UNIVERSITY of WASHINGTON

More info (and hopefully guidance/resources):



New Initiative to Support Graduate Student Mental Health and Wellness

AUGUST 20, 2019

[PDF - PRESS RELEASE](#)

[PDF - ADVISORY COMMITTEE \(UPDATED\)](#)

EMBARGOED UNTIL:

Tuesday, August 20, 2019 10:00am EDT

CGS Contact: Katherine Hazelrigg – (202) 461-3888 / khazelrigg@cgs.nche.edu

JED Contact: Meg Woodworth – (212) 303-2306 / JEDmedia@yr.com

<https://cgsnet.org/new-initiative-support-graduate-student-mental-health-and-wellness>

More info (and hopefully guidance/resources):



UNIVERSITY *of* WASHINGTON

THE EXECUTIVE OFFICE

Student Mental Health Task Force: Creating a Holistic, Integrated Service

Charge:

This task force will delineate the components, desired outcomes, and timeline for the creation of a unified student mental-health service on campus, formed by combining the current UW Counseling Center and the Mental Health Clinic at Hall Health Center.

Scope:

The task force will consider the following parameters for the combined service:

1. Collocated and accessible physical space on campus
2. Equitable student access
3. Reporting line
4. Organizational structure and service lines
5. Funding: short-term (bridging) and long term (sustainable).
6. Electronic health records system
7. Diversification of services and service delivery
8. Advisory connection with students
9. Collaborative relationships among UW campus health/wellbeing partners during implementation
10. Developing metrics providing clarity on impact and success

Thank you!





GRADUATE STUDENT MENTAL HEALTH



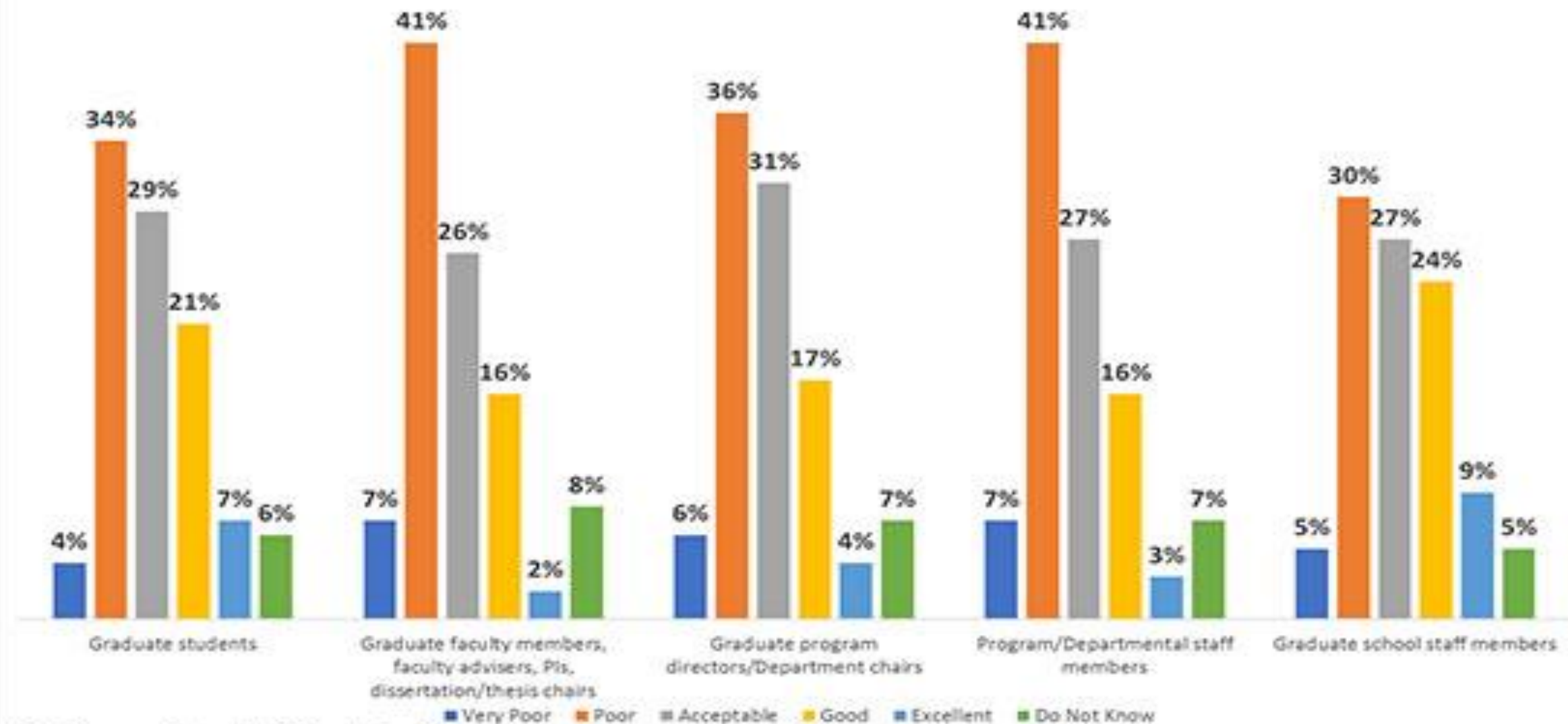
COUNCIL OF GRADUATE SCHOOL'S 2018 CGS PRESSING ISSUES SURVEY

- Graduate deans from US and Canadian CGS member institutions were asked:
 - 1) How prevalent are mental health disorders among graduate students?;
 - 2) Who is best positioned to recognize when a graduate student needs to be referred for mental health support services?
- 42% responded to this survey (N = 204)

FINDINGS FROM CGS REPORT

- Asked how well their institutions inform and train various campus stakeholders to recognize symptoms of mental health challenges in graduate students and in turn refer those students to appropriate support services, many graduate deans expressed concern that their institutions weren't doing enough.
- Results suggest that more than four out of ten graduate deans think that more can be done to inform and train graduate faculty members, faculty advisers, PIs, and dissertation/thesis chairs, as well as graduate program directors/department chairs and graduate students themselves.

Figure 1. How well your institution informs and trains campus stakeholders about promoting positive mental health among graduate students.



Data Source: Council of Graduate Schools, Pressing Issues Survey, 2018

MORE CGS SURVEY FINDINGS

- Only 21% of deans reported that their institutions do an excellent or good job of informing and training graduate faculty members. About one out of ten respondents (11%) reported that they do not know if graduate students are informed or trained about symptoms of mental health issues.
- Graduate deans reported that graduate faculty members, PIs, faculty advisors and dissertation/thesis chairs, as having the highest ranking of poor or very poor (48%) with regards to informing and training about mental health concerns/issues. Also, deans ranked this group as the one they did not know more than any other group (8%)

STRESSORS

- Stress is a reality in our lives and is an ever-present reality for students who face competing priorities and demands on their time from their advisor/mentor, instructors and courses, their jobs, their families, their partners, their peers and more.
- Imposter syndrome, fear of failure; cultural dissonance because curriculum and faculty do not reflect their lived experiences are of
- Resources are improving on campus but more needs to be done.

MENTORSHIP—LANDSCAPE REVEALED

- Mentoring is a major determinant in the likelihood of graduate trainee/mentee success (Brunsma et al., 2017) yet it is often the most disappointing aspect of their experience.
- URM doctoral candidates in STEM fields are more likely to feel isolated from other students and worried about their mental or physical health than their peers (Stowell et al., 2015)

SOME ADDITIONAL RESOURCES

- Woolston, C. (Aug. 30, 2019)., “A Better Future for Graduate Student Mental Health.” *Nature*
- Inside Higher Ed. (October 29, 2019) “Mental Health Challenges Require Urgent Response”
- Nature. (Nov. 14, 2019). “A cry for help”

DYAD DISCUSSION

- 1) What considerations surface for you in this scenario?**
- 2) What is one course of action you would take?**

SMALL GROUP DISCUSSION

- **How might you respond to the differences in the scenario?**

Many faculty do not believe psychosocial functions are part of their mentorship role (Laursen et al., 2010) and many adopt a colorblind ideology in general (Prunuske et al., 2014).

- **As a staff or faculty member, how might you help shift away from these findings?**

FEEDBACK REQUEST

- <http://bit.ly/HAsurvey129>