



Graduate Student Mental Health Survey

Responses to Open-ended Questions

Open-ended Question 1. **How could your advisor/supervisor/PI (or other mentors) be more supportive of your mental health and wellbeing?**

If we had more of a connection it would be easier to actually follow their advice and listen. These people are strangers to me.

Bring up resources when onboarding

My PI has been nothing but supportive of my mental health.

My PI has been supportive so far.

Sometimes it feels like they have high expectations and want us to keep working even if there is already a lot on our plates.

My advisor is already supportive, but the department as a whole isn't necessarily supportive. What my advisor could do is help me navigate around those who are not supportive of mental health in my department.

By understanding that mental health is a real concern. It can be very debilitating at times and it's not to be seen as an excuse to not work. Physically a person can be in a moment but if they're not there mentally what's the point. And we should not be looked at any different when we ask for a day to focus on mental health. Just because I am ok one day does not mean I will be ok another day. For example "but you were perfectly fine yesterday, I don't understand why you feel depressed today" I think PI's need to be more sympathetic if not empathetic to real life struggles and how they may affect the mental health of a person on an individual basis. Not everyone copes in the same manner and saying things like "get over it and do what you have to do" is easier said than done. Also that can be debilitating if one is being shamed for their mental health decline and end up bottling it in instead of processing it an talking about it. PI's need to understand that we need to maintain a work life balance if they want us to work more efficiently. They cannot expect us to work all day in lab and then come home and continue to work that's unhealthy.

as a master's student I don't really have a supervisor/advisor. I just take classes

She's been great, but often she herself seems overwhelmed and doesn't discuss how she copes which makes me more concerned about my mental health after graduate school.

Work one on one to create accommodations; signal clearly and in writing that struggles with mental health will not negatively affect their perceptions of me

By supporting my intellectual progress and writing as she does right now.

Regular, sincere, actual check-ins, communication, listening, respect. I have seen mentorship improvement plans come and go, and all require more work from students (e.g. documenting what they want, how they feel). I have never seen any plan that asks mentors to work on their mentorship skills, undergo training, increase their accountability, etc.

Ask how I am doing from time to time and create a safe environment to talk about stressors and feelings and feel like I am getting support and encouragement from them.

Note: Responses that did not provide comments (i.e., "N/A," "I'm not sure," unknown," etc.) were removed from the response lists for brevity. One response was censored due to strong language.

Being more understandable and aware of mental health issues when these disorders affect my productivity.

My PI has been very accommodating about life situations so far, and I feel that he would continue to be accommodating if I needed it for mental health reasons.

More communication outside of science.

Honestly my PI is very supportive

He's already great honestly, he's more helpful than CAPS ever will be it seems

They can be more mindful of the work load we each have.

This isn't specific to my mentors but more of a comment on the general culture of grad school: we need to unlearn the "hazing" mentality -- simply because PhD programs were previously hellish experiences that sucked the life out of students does not mean that ours needs to be as well. PhD programs can be rigorous entirely without overworking students and jeopardizing their wellness. This is inherently ableist and classist.

My lab is very focused on results, rather than the learning process. The constant pressure to generate data at any cost is very unhealthy. To me, it doesn't matter if your PI plays "supportive" and "understanding", if that is not reflected in the way that the lab is managed and that research is conducted. A change in lab culture would be vital in this case.

My current advisor and my former undergrad advisor have both been wonderful and very supportive of a healthy work-life balance. I previously had a negative experience with a professor I tried to work with at the start of graduate school here, and I was reeling from the negativity and passive-aggressiveness in her treatment of me, unfairly stating that I did not belong in grad school and bringing me down at every chance. I am grateful for the normal supportiveness of the rest of the department in getting myself back on track mentally, physically (feeling like I could take breaks to walk around a bit while I work and not being overwhelmed), and research-wise. As I said before, my current advisor and the advisor I had in undergrad here have both been wonderful, respectful, and beyond supportive.

Reducing my workload.

Check-ins related to mental health as opposed to just work

It's never been mentioned and I've been encouraged to think about how much time I can devote to my program and beyond, even at the cost of hobbies, children, etc.

just reply to my emails?

My mentor is extremely understanding and I am very lucky to work with him.

My supervisor is pretty lenient so I have no issues with him :)

By asking specific questions about how I'm feeling, in a one-on-one setting.

Mine are great about this.

My advisor is a severe perfectionist and caused my anxiety to spiral out of control. I would never ever admit that to them, nor ask for help with my personal life

It's not their concern. I see a therapist weekly and a psychiatrist quarterly.

Being more culturally aware and not viewing personal challenges as a deficit. Being flexible and not condescending

Better guidance of project and more realistic goals/expectations related to my project

I wish they would acknowledge our efforts and our progress in our graduate school journey. I don't want my advisor to keep breathing down my neck and make me feel guilty if I want to take a vacation once a year. I also want our advisors to respect all their graduate students and support us in our research.

Not that it's a current problem, but generally speaking, regularly ask how I'm doing AND not ignore them or shrug it off if I'm not doing well; if it seems like I'm burning out, I would hope my PI respects that and doesn't hesitate to give me a break.

I think that PI/advisor/supervisors are in a critical position where they can mentor students. Before beginning the meeting and talking about the agenda, an advisor/supervisor/PI can take a few minutes to talk about mental health and ask if the student is doing well in their personal life and their academic life. They have an important responsibility to make the students feel supportive and comfortable to talk about mental health problems.

By being more available in general. And having regular conversations. Most graduate advisors are very busy and often don't have the bandwidth to check on the other aspects of their students lives.

There is an implicit expectation on the part of graduate students to deal with the stress of graduate school. Therefore, admitting I have a problem is often perceived to be a sign of weakness or lack of ability. This creates a vicious cycle where you not only ignore mental health concerns but let them worsen to a point where in most cases reaches a point of no return. While I was trained academically as a scientist I was never trained to deal with the challenges of grad school. There needs to be open and honest discussions on this, frequently.

My PI is not the issue.

They could be more supportive if they inquired about my mental health in time when I feel I struggle with work assignments. I can feel I am able to deal with the stress, but it would be nice to know that my advisor is aware of the stress that students experience.

Talk about mental health and well being during lab meetings and during one on one meetings

Greater awareness of course load when pushing for performing experiments, scheduling meetings and making future plans

To not constantly having me under an intense pressure all the time with a huge workload

Talk about taking breaks

I think he has done an excellent job on helping and supporting me.

Help other faculty members understand how a person with disabilities and or mental health needs additional time and support. Also, sharing resources available.

I guess ask how am I doing?

1) By being less pressuring and more patient when the student is not very productive. 2) By ensuring continuous funding for the student throughout the duration of the program (and helping them find other sources of funding in the case they cannot provide financial support). 3) (This may sound obvious, but it isn't:) By not means threaten students that they will cut their funding if they are not more productive. 4) Allowing students to take some time off during the winter/summer breaks and visit their home countries (if applicable)

Acknowledge that lack of economic privilege inhibits success, and can exacerbate mental health issues. I would say that getting better funding for students would be helpful, but that's not something humanities advisors can always do.

My advisor is the paragon for support and advice. Without him, I might have quit. My GPD and chair seem to be playing the part of "concerned and supportive," but imo they really don't care. It's like they send a bunch of emails with resources but I can't help but remember that when I emailed my GPD my predicament, he never responded. I still can't get over that.

I feel the most anxiety leading up to a deadline. I'll work for 10 days straight with 40 hours sleep total, in a state of panic throughout, causing harm to me physically as well as mentally. Discourage that behavior. Give extensions for programs, especially since it has been so hard in Covid context. Professors need to adapt to student needs.

My educators are quite interested and concerned with my mental health. However, I am in a different program than the one I work for, and the one I work for does not believe in work/life balance for staff and regularly creates situations for me that require I do extra to pass classes; i.e., I have to work on the weekend, so I have to stay up all night writing.

They are great! I value their time and use it to advance my research, and turn to other resources at Rutgers for help if needed

Advisors in my department should be more organized and engaged with their mentees. Perhaps a guide of advisor responsibilities would help.

My advisor at GSE never made the effort to meet me neither replay to emails. Important would be periodic check-ins (they need them too), PSA of seminars and workshops available..

Faculty is NOT accommodating to ODS accommodation, and rather than circulate my ODS accommodation letter to appropriate faculty in my department, she encouraged me to disclose my mental health diagnoses since faculty "would be understanding." At the risk of being discriminated against, I declined to disclose information to my faculty, forgoing accommodations, and only shared with my adviser.

I have been in a program for years, so there is no need.

Make true adjustments to the program. There's a lot of lip-service, but no actual changes.

mental health days off, training for staff as a whole, incorporation of positive company culture with team building activities

Program expects student activities in areas that the program doesn't support. This creates stress from unrealistic expectations

Mentors are not in a position to do more than make referrals to services and my mentors are able to do that.

Understand as a part-time PhD student, it seems I am doing full-time research project loads

A more standard "professional" rather than "academic professional" approach to things like work/life boundaries and the idea of sick days.

Academic advisors (not just the student affairs people) could Reach out periodically (a personalized email once a term or year?) to check in on academic progress or how we are doing in general.

they don't care

By providing an alternative timeline. Supportive discussion abounds but the underlying message is that the work still needs to be completed, regardless. When we measure student achievement by output, and the pressure to produce doesn't change, there is no structural shift to accommodate mental health needs and invalidates the intentionality of support.

Recommend all students take advantage of CAPS regardless of whether they have mental health concerns or not, thereby normalizing it and making sure all students have a scaffolding in place should they have a crisis in the future

Adjust/reduce workload, flexible timelines

My advisor recently removed herself from my committee and cut off all contact because I had been struggling to get work done during the pandemic. She could have reached out when I disappeared for long stretches, or asked questions instead about what was going on.

Being more aware of circumstances in my personal life

Openly talk about mental health more

My advisor is supportive of me seeking help via therapy, counseling, etc. when it comes to my mental health. However, we rarely discuss mental health and how it impacts my progress on my work and thesis. Having an open dialogue about how my mental health struggles take a toll on my work and that it's okay to be delayed due to mental health issues would be greatly beneficial.

More vocally support/make space for time off, hobbies, etc. I think they might acknowledge these are important, but are typically more vocally focused on work/progress/achievement.

Encourage work-life balance rather than encouraging burn out and taking a day off. Don't ask you to work hours daily 'on vacation', don't give you a hard time if you ask for time off, even though you still work during your 'time off'.

It would be nice if there was mandatory training for PI's/advisors on mental health, including warning signs and appropriate responses to those warning signs.

I'm not sure, I'm not entirely sure my advisor should be intimately involved in my mental health and well-being.

Recommend Rutgers services that are available. But honestly, I would not have pursued them.

Feel pretty well-supported already, perhaps additional encouragement to seek counseling when necessary.

I don't know, I never talk to my advisor. Maybe reaching out every once in awhile to see how we're doing?

My PI is supportive. They are the only faculty member at Rutgers I disclosed to. However, their hands are tied as they cannot change department deadlines and adjusting the workload too much will only make it harder to find a job after grad school. The pressure to overwork oneself (in my case at least) comes not only from inside the program but from the obscene pressure across the field to overperform and overachieve.

By not normalizing it so much, I guess?

My advisor was aware of things. She understood when I fell behind and I definitely wouldn't have finished this year if it wasn't for her.

Honor the need for a mental health day

I do feel that my advisor is supportive by making space during check in meetings, but I do feel that it can be hard to open up in front of other peers and without a fully established relationship with my advisor yet, as I am a first year student and my advisor is a new faculty member.

There is nothing they can do because I do not want help from Rutgers or different treatment. It doesn't help me to have accommodations, it only makes me feel inadequate.

They don't even talk about it. Through the whole pandemic no one has even asked. My program is so lonely and uninterested in how we're doing as individuals.

Scheduled periodic well-being check ins once per semester and an open door policy as needed

Allow for late assignment submissions

I wish there was more positive feedback about my work and acknowledgement of other responsibilities outside my dissertation

I think they could take dedicated time to ask about my mental health and what I am experiencing.

They are fine with what they are doing but maybe more explicit check-ins would be nice.

She's perfect

There needs to be better training for PIs to deal with and care about their students, it should be a requirement

Since I am not on campus, this is not relevant to me.

Do periodic check ins, have class conversations, be knowledgeable about resources on and off Rutgers campuses

They could coordinate with other instructors regarding the load of coursework for a given semester. Instructors could also be more transparent about ways to establish a work-life balance.

Recognize how significantly my mental health impacts my ADHD and my work.

He's great. He doesn't know a ton of resources I don't think, but that's just a guess. He supports me in other ways.

Actively checking in about health and well-being and supporting the writing process of my dissertation more proactively.

Be more cognizant of the research load that is placed on students within any given timeline

My advisor has always been supportive and receptive. She listens and offers suggestions/solutions to problems.

My advisor happens to be wonderful, but others are not so lucky. Many students in my department have advisors who prioritize academic output over wellbeing and have no awareness of the many pressures (academic, financial, political, interpersonal, etc.) facing grad students today. It would help if there were better avenues for professors to hear about student experience through forums that don't jeopardize individual student standing--such as this survey...will the results be shared with graduate programs?

By deliberately encouraging students to take time off if needed, or regularly asking how their lives outside of the lab is going

Require one mental health day per month

I think making assignments based on MH would be helpful! We have to make time for schoolwork, so making the work be about our MH or self-care or what not would be a full proof way to bring attention to it

More guidance and reassurance

My advisor/supervisor was always very supportive during stressful situations. I have no recommendations.

I think that many advisors have a very unhealthy perspective on work-life balance, and they themselves are not necessarily models of good mental health. So I don't want them involved in my own process to take care of myself.

Bring up mental health and wellbeing support services more often; be more transparent about the experience of doing a PhD as usually having an impact on one's mental health; address cultural issues within the program's culture that exacerbate mental health issues/crises (like bullying)

My PI was the most supportive and understanding of all the people I had interactions with at Rutgers

All around. Conversations with other grad students show that faculty are completely clueless about the mental health of students. In fact, in both of my grad programs, actions of faculty after mental health has been brought up often exacerbate mental health problems.

My advisor is supportive but it is not her individual job to support my mental health and wellbeing. This needs to be something that the entire Rutgers community takes responsibility for. There must be structural support for students, not just individual support.

It's not their job and I don't want it to be their job. Of them, all I need is flexibility with deadlines and belief in my work, both of which they demonstrate.

posting/providing events/resources to students and/or employees

Ask about my mental health regularly and offer support as needed.

Talk about mental health more and acknowledge and begin to change the toxic work cultural in graduate programs.

My PI is sufficiently supportive of good work life balance necessary for mental health.

I think my advisor does a great job by being friendly and setting reasonable expectations. My department sends out notices about CAPS and the like, so I don't feel like I'm missing anything.

Greater awareness of the hardship that current graduate students face - approaching a terrible job market, feeling unprepared for career options outside academia, feeling overwhelmed with work and productivity expectations, etc.

No way really, they are very supportive and inquire about my mental health every time we meet.

I wish that we would get mental health breaks. Clean breaks. I feel pressured at the same high octane level that my mentors and professors seem to operate at. They also seem exhausted, but no one is taking breaks.

I don't feel like anyone talks about what resources are available to graduate students.

I had a former adviser talk publicly about my health without my consent. I have left that adviser but they still work here.

Less pressure to be perfect, tone down the criticism, check in more

She's been patient and supportive throughout

By not actively telling me that I am just being lazy.

Speaking with internship supervisor about the difference between intern and a staff member

Have clear work/life boundaries (e.g. don't have work calls after 11 pm).

The only extra step I could see my PI taking is asking outright how my mental health is, but I could easily see that coming off as invasive.

Having different expectations given the extenuating circumstances.

More one on one discussion on this topic

maybe just asking how I'm doing

They are already supportive of my mental health and wellbeing

Understand that I have a life outside of my graduate studies and approve of a healthy work-life balance that works for me

Open-ended Question 2. What would you like to see from your GSA Mental Health Committee?

promoted awareness

not sure - workshops with PIs to help them be more sensitive

never heard of it, so maybe some increased visibility!

more outreach to off campus students

more events, increase availability of attaining counseling due to the large number of people seeking help with professionals constantly having appointments booked

a report out on surveys like this to faculty!!

a little more activism as far as academic ableism would be awesome. But that's a high goal. I can tell that the creator of this survey isn't actually too aware of a lot of issues.

Would love to see more awareness type events. We are all in the same boat perhaps, but we just don't know that.

Work management, support groups catered to part time grad students who have a lot of outside school responsibilities

Who are they?

To advocate for more resources and availabilities for graduate community mental health resources and help.

They actually take your feeling seriously. I specifically wanted a psychiatrist but I wasn't "bad" enough to get one. Ever heard of high functioning anxiety CAPS??

The mental health "support" system for grad students needs to be completely overhauled. Yes, everyone knows that CAPS exists, and everyone is referred there, but they are completely inadequate for the mental health concerns of grad students. There should be a separate system of qualified counsellors and psychiatrists working specifically with grad students, and connecting them with the resources they need. The current system is designed for undergrads and is PERHAPS better than nothing at all, but I have heard countless tales from friends about horrible and even negligent "care" they received, often making things worse. I had bad experiences myself, and am so grateful I have a wonderful therapist in New York, otherwise I don't know where I would be right now. The GSA Mental Health Committee should advocate for a new, separate structure, and for the resources for every single grad student to see a qualified counsellor if they desire. Yes, the culture of academia is also a huge problem, and that should be addressed, but a series of workshops or trainings would be such a superficial band aid approach. What people really need is access to good therapy, as well as the right medications, if appropriate.

The events of last summer (Beirut) and last spring (massacres in the region south of Lebanon) took a toll on my mental health because of the sheer horror of the situations, but I didn't feel like I could discuss them with many people at Rutgers without feeling worried or judged. My advisor, research group, and friends in graduate school here were very supportive when I was stressed about everything, but it seemed like the Middle Eastern community in the Rutgers graduate program was all but forgotten in support emails sent out to the community. Many of us have family overseas and are just as affected by racism as some other groups, and everyone here should feel respected and safe.

Stress coping strategies for in-the-moment issues

Something other than a spammed email and a flier on a bulletin board in the basement of the GSE.

Sending results of this survey to departments so they can implement more programs. It would be nice if programs were held accountable

Rutgers needs more therapists.

Note: Responses that did not provide comments (i.e., "N/A," "I'm not sure," unknown," etc.) were removed from the response lists for brevity. One response was censored due to strong language.

Resources for easy to obtain, one-on-one counseling at Rutgers or with someone affiliated with Rutgers who I know would be covered by my insurance.

Relay the information from this survey to those in positions of powers who can address issues related to mental health

Push for more grad student resources from CAPS etc. that are more distinct from undergraduate resources

Push for broader structural changes in addition to promoting ways to cope with stresses of graduate programs.

Providing references for mental health services/professionals who accept Rutgers insurance that are not affiliated with Rutgers would be helpful. I do not want to use Rutgers' services and potentially run into (or worse, have as a therapist) students/faculty I know. Even with the best intentions, I believe too many faculty members knowing that I am struggling with my mental health will change their perceptions of me and ultimately manifest in worse letters of recommendation or less willingness on their part to help me succeed at earning grants/awards/interviews. The stigmatization of mental health is too omnipresent for it to have no effect on people's perceptions/actions.

Practical guidance on pursuing help both in and outside of Rutgers - aka more than simply linking to CAPS and advertising wellness seminars. As someone who takes medication to maintain my mental health, I have not found much support via Rutgers. Advocacy concerning topics like health insurance coverage would be very useful as well.

Potentially resources for identifying whether therapy is covered by health insurances associated with Rutgers.

Organize more workshops to copy imposter syndrome, anxiety and depression.

Open drop-by hours type of thing - similar to CAPS but smaller

Offering open spaces to talk about our issues together and try to direct some of these concerns toward finding institutional solutions. Mental health issues have some reasons, they are just psychological. We need a better environment to feel supported by Rutgers with financial and social resources.

Not sure. I think Rutgers is doing a good job advertising mental health programs for students.

Not sure I can imagine anything the GSA can do to help

More workshops that target anxiety and depression and how one could manage them. Strategies to mitigate perfectionism and being so hard on ourselves. Also, activities with other graduate students and faculty to try and address these topics.

More telehealth services for therapy, use of video messaging like duo or text messaging for when you want to talk but can't get the words out

More room to discuss difficulties of writing dissertation as a group therapy.

More programming on coping skills and open discussions about setting boundaries, taking time off, and developing a workload. Process groups for stressful events, such as the Derek Chauvin trial.

More outreach! I know we got emails about the app, but it would be cool to see free trainings maybe or even little check in videos or something would be neat

More outreach to faculty so that faculty can encourage good mental health practices for their students/postdocs

More outreach especially to first year students. I think more intimate ways of connecting would help motivate and inspire people to take part in GSA and other communities on campus.

More one on one outreach efforts

More initiatives for seeking help if needed

More focus on finding for people who can support you in the program

More explicit support for doctoral students who feel isolated within their programs or departments (the outcasts/pariahs).

More bubbles for discussions about mental health, especially support groups, instead of workshops

More awareness to culturally relevant concerns with students of different identities and social class statuses

More attention for graduate students who are also working full-time outside of studies.

More advocacy for student mental health resources

More activities like the meditation session on 5/20, provide more resources for students to better identify mental health crises.

Like I said, I wish some programs were at more flexible times for those who work in lab during the day. I also wished I could have gotten a counselor for weekly meetings directly through CAPS but they had to refer me out.

Larger membership

Keep it up!

I've heard of other students not getting what they need as far as follow up and services access

I'm not sure what exact form but something that addresses other disabilities and not just depression and anxiety. Things like ADHD impact graduate students and contribute to their mental health and success but are not discussed or are downplayed as being "less serious."

I'd like to see adequate effort. Seminars and programs are fine and good, but they do not address the root cause of many mental health problems here at Rutgers

In-person events now that Rutgers is opening up again and workshops/speakers about coping strategies. Talking about mental health is important... but having seminars about things beyond us venting would be beneficial. Yoga is ok.. but what about grounding techniques? Using our senses? How essential oils can help calm us? What scents are soothing? Stuff like this... otherwise most of us will cope with harmful substances like smoking, drinking, etc.....

Improve CAPS. My interactions with the CAPS psychiatric resources was actually more destructive to my mental health. I only improved when I used my insurance benefits to find providers outside of Rutgers. I was misdiagnosed with several conditions by a CAPS doctor and medicated unsuccessfully for 3 years. In that time, I almost quit my program many times and I attribute that to poor mental health counseling. After getting a correct diagnosis I have been medicated successfully, and been enormously successful in my PhD. No thanks at all to the 2 clinicians I saw at CAPS., and if anything, in spite of their diagnoses. I was also bullied by the main clinician I interacted with. I was told I had bipolar disorder, anxiety disorder, and depression during my first appointment. In reality, I have ADHD and a learning disability. Nothing else. My #1 feedback is more regular trainings and certifications for clinicians. It's okay to make mistakes some times, but my experience was an example of rushing to conclusions, making decisions when I should have been referred for more through tests than a checklist of symptoms, thus doing far more harm than any good.

Important would be periodic check-ins (they need them too), PSA of seminars and workshops available. Have planned de-stress, mental health break - weekends. At high school we call them homework free weekend..

Ideas for cheaper counseling. I am afraid to go to a therapist regularly because of cost.

I'd like to see a policy that academic departments in graduate schools respect ODS accommodations relate to mental health, encourage a true work/life balance, and maintain confidentiality of student issues.

I would like to see list of support opportunities within and outside of Rutgers

I would like to see classes for advisor/supervisor/PI and students where the expectations for both are discussed. I am not sure what level of awareness advisors have on mental health resources for students.

I would like events tailored to the stresses of grad school, such as how to deal with conflict (like with a PI), stress reduction, work/life balance, etc.

I wish you could make online appointments with CAPs instead of calling

I wish I knew there were services. I think I received an email here and there but as an online student, I had no idea I could access services. I've actually been really wanting to go to therapy but I didn't know we offered one-on-one services.

I think we should include an educational program for faculty/PI's to attend and become aware of mental health disparities and learn to navigate them on a case by case basis and just be more understanding towards students that do struggle with mental health on a day to day. Basically bring more mental health awareness overall.

I think caps isn't really that good so either an alt to that or improvement

I haven't heard about the GSA Mental Health Committee

I have avoided CAPS, despite the fact it is convenient, because it doesn't have the best reputation (this may be an unfair assessment because it is not my own assessment) and because I have had poor experiences with on-campus mental health services it's other institutions. I would like to see a focus on improving CAPS and making it the best it can be including adequate allocation of resources and quality staff

I guess I didn't really know there was a mental health committee. Maybe training for people in bureaucratic positions (especially older white men and some older women)

I find it hard to feel partaking in Rutgers-sponsored counseling or mental health programs will be worth by time because as a student/full-time employee, lack of time is my largest stressor. More testimonials from students who benefited from specific programs may help me feel that it won't cause me more stress to attend.

I don't know. I feel like my mental health issues extend beyond what any non-professional can address. Maybe guided meditations or something.

I don't have any specific needs.

I didn't know they existed. Maybe a presence at the child GSA meetings

I didn't know there was a GSA Mental Health Committee or what its purpose is.

I did a trauma group once and I thought it would be with graduate students, there wasn't any really.

Hold CAPS accountable for bad psychiatric services by providing a way for students to safely and anonymously voice the distress they experienced due to bad healthcare from CAPS. I know multiple students who have had distressing experiences or experiences that are a waste of time. Inform students of how to get care separate of CAPS.

Hire more therapists, make the process of getting in for an appointment less time consuming, repetitive and frustrating

Having a group discussion with faculty about appropriate work expectations and increase accountability by providing routine management training. Having a discussion with Rutgers HR about setting up a system for to show hours graduate students work compared to accrued/used vacation time. Providing a numerical value of earned time off, that faculty need to respect.

Free therapy

Events related to de-stressing

Especially once we're back in person, I'd like a meditation class or a mindfulness class

Enrollment in the GSAPP PsyD program often precludes students from being treated at CAPS, due to our involvement as clinicians there and our relationships with CAPS staff. This is a problem, and more a more stable referral pipeline needs to be put in place to ensure that students are able to receive in-network care. It's absurd that clinical psychologists in training have access-to-care problems.

Don't just email us. I get 1000s of emails, it is so utterly impersonal. We need to see you physically, like offer workshops in each department. When an actual person shows up, it helps to break the ice. When in crisis, it is often difficult to seek help but easier if someone comes to you in the first place

Create awareness amongst students that stress is not a normal part of graduate school but we all face it in our own ways and teach us ways to identify mental health issues and seek help.

Counseling or groups specific to graduate programs

CAPS was not available for us remotely and that made me very upset (I checked twice). I have heard that it's not great anyways -- need more solutions... :(

Better more effective counseling services that are more appropriate for graduate students, separate to those available to undergrads.

Awareness for the faculty and departments so that they understand people who have anxiety better

An assessment of department faculty. How and to what ends they exploit, treat, respect, interact with graduate students. Academic hazing, failure to treat one another as human beings, penchants for exploitation and condescension, etc. are rampant in graduate school. I feel there must be a culture shift, and that starts with the faculty that stay put, as graduate students leave. Providing resources is helpful, but I would want to see faculty change and accountability.

All the health support is individualized. As if it is up only to the students seek for health and get better by themselves. This is important, but it does very little if the academic environment does not change. I would like to see more discussions questioning the responsibility of academic institutions and how they can improve the work environment and well being of students.

Advocating for faculty to become more aware of how their behaviors as mentors can impact graduate student mental health. Faculty need to be more aware of how to promote health work habits amongst graduate students and should encourage students to take time for their mental health to avoid burnout, depression, etc.

Advocate to change the circumstances at the university which contribute to students' mental health problems. I think a survey that tries to get at the root of the cause of these problems will be far more valuable than finding out simply if people know there are mental health services available on campus.

Advocacy for more funding for mental health resources from the university!

Advocacy and a more visible work with grad students

Activities and resources available online

Action items delivered to faculty about how they can support grad students.

Comprehensive list of Rutgers resources for mental health and transparency of resources

Open-ended Question 3. What do you want Rutgers University to know about mental health as a graduate student?

Starting during the pandemic prevented at least some graduate students from making friends. Online classes are isolating. Clubs on campus are not accepting of grad students outside of GSA.

Reduce your prices and be willing to work with students. Rutgers pretends that slapping a band aid in the form of these mental health seminars absolves them of the fact that they caused the significant drop in mental health for students to begin with

Graduate students need to be encouraged (required) to take breaks from their research or studies.

Graduate students face different but significant struggles compared to undergraduates.

Providing sessions while intended to help can also be a big ask for graduate students who are already overwhelmed and stressed. In addition, my mental health is affected by the pandemic, the departmental politics, and the university's response. While I am technically better than before, that doesn't mean I don't face mental health concerns.

I believe that graduate students should not have to suffer through the grueling academic rituals and life circumstances just because the older generations had to endure them. This builds toxicity and if those in higher positions are not reaching out to ease the struggles they had to face as grad students and even junior faculty that is exactly what is wrong with academia. That alone contributes a great deal to the stability of student mental health which has for a long time until recently been overlooked. A work life balance is a must to maintain our mental health.

that I'm hella depressed right now. also it took several weeks just to get a CAPS intake appointment

Without having anything but anecdotal knowledge of this, I think two main stressors and triggers for students are lack of time and lack of clarity (on assignments, steps to completion, etc.) and can contribute to the feeling of being overwhelmed or an imposter. Sometimes I think that more focus from departments on the student experience would do more help that various hour+ long seminars or workshops that tell us that we how to control the symptom, when often we have no control over the causes of mental stressors.

Inadequate monetary support is a heavy contributor to not feeling secure enough to take your mental health in hand, because seeking help and disclosure can damage access to funding.

Caps is a limited resource, they need more experts with cultural competency for international students. Hiring counselors from other countries might be somewhat a solution.

I've literally had one of my closest friends commit suicide after we along with other graduate students organized with the hopes of changing departmental climate and culture on account of its toxic and hostile environment. The response graduate students received from the department in the wake of his death was a case in point: more hostility. I continue to be surprised by the lack of support and exploitation I encounter even since my friend's death. I struggle to write, to graduate, because I feel so burdened, unsupported, demoralized, afraid of closing this chapter. I am so tired of being vulnerability and having my vulnerability being weaponized against me. What are we producing knowledge for? For whom? To what ends?

That work-life balance seminars don't seem so useful for dealing with deep and serious mental health issues. It would be better if university facilitated students' access to individual and ongoing therapy sessions with good professionals.

It's incredibly hard to have great mental health when there's a pandemic going on that half of the country seems to be ignoring and our entire planet is hurtling towards the point of no return re: climate change, so even on my best days, things are still pretty bleak. We're all just trying to stay afloat and we're all really, really tired.

Personally, it's difficult to discern whether my worsened mental health state is due to graduate school or the COVID19 pandemic. Truthfully, prior to the pandemic, I had not had any mental health issues. Nowadays, my anxiety has been more frequent.

Getting [redacted] pay for 0 free time sucks especially in a high-cost area. [redacted] I am killing myself for your [redacted] donors you are the state university of NJ and I can't get a good apt because your throwing money into football and snoop dog [redacted]

we are literally being obliterated. pay us more.

Stop sending grad students to CAPS if you're just going to turn them away for being TAs. I went to CAPS absolutely falling apart and got turned away and told to look to the community, and the person who was supposed to follow up with me took months to do so. CAPS does not help grad students. Set up a new office for them so you can actually give them the help they deserve.

As I understand, Rutgers tries to offer tools to assist with student coping. But if the academic environment is worsening students' health, then just coping is not enough because it doesn't make the root of the problem disappear. The academic culture must change.

Everyone matters - and we should all feel safe, respected, and valued.

Not individually no. I'd prefer an acknowledgement of the pressures on graduate students, more funding, more flexibility, and better policies for leniency during mental health events.

We have different concerns than undergraduates

Taking away coverage of better help through insurance during the pandemic had the most adverse effect on me. I was very disappointed in this decision.

I tried CAPS and the counselor just didn't show up after the first session. There was no one to tell about it or to meet with anyone else. I feel in the GSE, any talk of mental health is lip service. We are told we can't work jobs and do the program, can't have caregiver responsibilities and do the program, and that we are not making adequate progress if we don't give all of our time to studies and service and publications and networking, while they don't help with financial issues, don't offer support on doing any of those things.

I have had mental health problems for a long time and I have been receiving help for them for a long time. I feel like I am in a strong place to handle stress, but it feels like as graduate students our lives are just expected to be stressful and miserable. The common thought seems to be that panic and anxiety are unavoidable and a part of the graduate student experience. I know that PIs give their students massive workloads and brush it off as "that's normal for grad school." Stress is a normal feeling. Devastating panic should not be normalized for graduate students.

It brings out your absolute worst tendencies as a human being. You will be challenged to a point that no anxiety can stay hidden.

I think there may be some stigma still but it's getting better. It's hard to say because of the pandemic and because I'm new still.

There needs to be more to support parents. I started my PhD with a one year old. Then had another. Nobody cared or gave me extra time, which could have made all the difference in my struggle

It can fluctuate.

Practice what is preached. There is so much "Awareness" but not enough implementation in practice.

I want RU to support all the graduate students and realize that mental health problems is a real issue. I wish we could reach out to our supervisors without feeling guilty and without their judgement. Lastly, as a graduate student who has tried CAPS before, I don't think CAPS personnel are equipped to handle graduate students concerns. Rutgers need to hire better therapists for their students.

It needs to made clearer that counseling/therapy from Rutgers is not available to students who do not live in New Jersey. I went through an emotionally difficult intake process before being told that they would be unable to see me, leaving me feeling more disheartened than before contacting CAPS.

Most of us look okay on the outside but we're not doing well on the inside. There's a lot to juggle, and we make a lot of sacrifices to cater to the unhealthy (perhaps even toxic) standards of academia and research in the U.S. We're researching in and out, feel guilty whenever we're not, spending less time with family and friends, foregoing breaks, and accepting a meager salary. It is by luck, not entirely by choice, that we have a good and caring PI. It takes a lot of strength to put up with the rollercoaster that is a Ph.D. program because nothing about it, including funding, experiments going well, and mental health, is stable. Please realize that just because this is the "norm" doesn't mean it's acceptable.

Being a graduate student is hard as it is. If family responsibilities are tagged on, along with financial stress, it can be incredibly hard to do well in graduate school. I would like advisors and professors to be more sympathetic to the diverse problems students go through.

It's not just Rutgers, it's academia only general. The publish or perish culture is very toxic in nature and not necessarily fruitful. It also discourages a lot of bright and talented students from wanting to pursue a life in academia.

That they should pay us more. Grad students are the ones doing the work for grants. NJ is very expensive. They give us too much where we can't get state assistance, but too little where we can't live comfortably.

More advocacy for enforced time off for grad students. We technically get holidays that no one takes because there is an unspoken "understanding" that science is more important than anything and if a grad student chooses to spend time with family/friends or take a personal day off ON A HOLIDAY, then they are weak and not dedicated enough. I've tried to attend mental health and wellness events that I've gotten emails for, and they're all during time when I need to be in lab and it's incredibly frowned upon to leave lab work to do anything else, let alone a mental health event.

Earning a doctorate degree has been my dream for almost two decades of my life and after spending 5 years in my program, I almost gave up and quit. This is not normal and it shouldn't be.

It's debilitating and isolating to go through it alone.

Graduate students can find themselves feeling very vulnerable quite quickly and social support is very important.

All faculty and staff mentoring graduate students should be made aware of the impact of mental health and should be given tools to adequately address these.

Often times courses fail to provide more benefit in terms of learning than harm to mental health due to time commitments and stress. Reducing requirements of individual courses will not necessarily reduce learning but provide better opportunity for being available to learn and perform research.

We are all overworked, under intense pressure, overwhelmed with enormous amount of stress and not a lot of people talk about it as when it is mentioned people usually agree and say the same thing but neither party actively does anything about as it is expected of us to go through this and deal with it.

The culture of all work and no time off runs deep.

That it is happening (now more than ever with a pandemic) and that doesn't mean we do not want to continue with our studies. We only need support.

I am trying my best to remain healthy, but I need access to activities that help me refocus the attention and continue developing a growth mindset.

Be empathetic to students, faculty and staff.

I strongly believe that Professors who are allowed to advise students (especially in the PhD program) should be somehow evaluated for their behavior towards their students as well as with regards to their own mental health and their capability to mentor/advise/direct and RESPECT students.

Honestly? I think Rutgers already knows. The university uses grad students to teach but does not provide sufficient resources to live on in many cases; in my department, for example, we don't get health insurance included, and we don't get tuition remission. And there is no guarantee of employment from semester to semester. Under those circumstances—a thorough lack of any type of security—I do not

know how anyone can thrive. So: yes, my graduate studies have been very debilitating to my mental health. Note: the pandemic has of course made everything worse.

It's not one size fits all

I think many new issues will arise from grad students struggling to find a home/work/life balance while working from home. Family members may or may not be supportive, there are too many distractions, etc. Staff and faculty are in different places in life than most graduate students. It's important to remember that. Mental health can be greatly affected by how we interact and communicate with others.

It's tough. Everyone is going through different individual circumstances. Time is highly constrained. I have benefitted most from one-on-one CAPS mentoring. I think the one-on-one is the best thing for me. Stigma must go. I have suffered depression for a long time but never feel able to tell my department or school.

Recognize that international students have acute need for active support and intervention especially at the beginning of their graduate studies. Often, the support programs organized for international students, are events that require considerable time. For a 1st year PhD student, who is dealing with an immense workload + getting used to the American academic environment, going out on a trip each weekend is hardly ideal and simply contributes to more stress. What would be most useful if the department that we are associated with, recognizes the immense challenges that international students specifically face and intervene in constructive ways. Just creating a safe space to talk about these issues, without being judged for being home-sick and lonely, would be so helpful. Imposter syndrome is almost a given for most grad students, particularly acute for international students who are getting newly attuned to new ways of reading and learning. Rather than judge their performance on the same scale as American students, Profs need to intervene and be cognizant of different abilities, and listening to different ideas, rather than looking for a standard scale of performance. There needs to be a strong sensitization of Profs and PIs and mentors. Day trips and fun meets hardly scratch the surface at addressing acute mental distress. They are a distraction, they do not address the problem.

How difficult it is to juggle grad school, a full time job, social and personal life, home sickness and loneliness as examples.

Free therapy would be helpful to online students

Most resources in place at Rutgers are for undergraduates. When a friend of mine was being stalked by another student in the program who was himself dealing with mental health crisis, no intervention was made on his behalf. Title IX accommodations have not been clear enough for my academic department to take action to protect her from him. She now deals with PTSD and panic attacks and he has not been required to take counseling services. Her own services became unavailable to her during the lockdown, which was very hard for her. I became her primary source of emotional support during this time, which meant that failure to intervene from the University became my (another grad student)'s problem, in addition to managing my own pre-existing mental health conditions. I do not go to CAPS programs on campus because I do not wish to be seen by my students or colleagues.

People with OCD will overcommit; sometimes it's not about the amount of program opportunities, but offering just a few effective ones. There's just too much to stay on top of.

I think you already know how hard it is!

Check in with students regularly

Myself and most of my classmates have full time jobs, families/children, health issues, etc. on top of grad school & fieldwork. And this is during a pandemic. The stress with school alone can be difficult, but it is off the charts when other things come into play. I wish there was a more flexible program that takes into account the need of full time employees who want to seek their degree. I am graduating after this semester and if someone asked me whether they should do the program or not I would most likely say no due to the stress.

Mental health is impacted greatly by the type of environment and demands which are put upon us. Simply sending someone to therapy is not going to get at the root of the issue that causes people to need therapeutic services in the first place. The university suffers from a number of issues which makes students' lives harder than it already is. They don't adequately fund administrative support services, so that students must waste a bunch of time fighting to ensure their basic paperwork is in order. The empty gestures of naming places after prominent African Americans when racism persists everywhere. Epistemic violence which doesn't acknowledge the worth and contributions of thinkers outside of the academic environment. The programs that seem to value numbers and outputs over a competitive, quality education. The pursuit of a bigger sports program and the money wasted when there are much higher priorities. I believe students' mental health would greatly improve if the institution itself behaved as if it valued and cared for everyone in every aspect of how it functions rather than just feeding people into therapy or activities.

As someone with SAD, this is real and not spoken about enough. We need visibility on psych conditions/resources from corresponding offices like CAPS, ODS, Diversity/Inclusion initiatives, etc. Assess faculty and staff on their knowledge and competency in resources too for supporting students. And empower students by providing knowledge: I was desperate for help when my social anxiety became severe that I did not know how to navigate different providers and what they could and could not offer me.

Most graduate students I know have experienced issues with mental health. Some such as myself have chronic issues, often with varying levels of disability as a result. There needs to be distinct support for both of these types of issues - they cannot be treated the same.

I have heard from undergraduate students I have mentored and taught in the past that the CAPS one-on-one sessions are not good. That is, the counselor used a survey or checklist tool to record the students' needs, but was cold and not empathetic after that. I have never considered using CAPS for this reason. If CAPS counselors (who I imagine are themselves grad students, though I might be wrong about this) are not able to express empathy, I would never avail myself of this service.

Graduate school is always difficult and requires a certain disconnect between the expectations (production, achievement) and our own needs. The use of yoga, therapists, etc. cannot address the root of the issue, that the pressure is ever present and the messaging is clear, produce or fail. Any efforts to address this need be transparent and subvert the dominant academic structure to be successful.

it's bad

We don't need another webinar on mental health... we need workloads adjusted and reduced. simple.

There's a lot of confusion about mental health resources, including what is available through our health insurance. A seminar about using those benefits could be useful.

A huge part of my anxiety is related to financial issues and the fact that our wages are much lower given the living expenses in NJ in comparison with other public universities (in other states).

that due to the nature of mental health services on campus. Doctoral students who provide services at the GSAPP clinic are unable to receive services themselves at those clinics

be considerate/accommodating of student progress given the pandemic

Almost every graduate student I've talked to at Rutgers has negatively impacted their mental health. The academic culture can be toxic, and the negative aspects of academia are personified at Rutgers. While it is normal and to be expected for graduate school to be a hard process that challenges students, I've seen numerous students leave my program largely due to the toll the school and department has taken on their mental health. Rutgers advocates for research and paper publication above all else in my experience. Mentoring and teaching are not prioritized. This creates an environment where students are not prepared to successfully complete their work and fosters negative relationships between advisors and students. Everything from the infrastructure (e.g., building conditions), administrative complications (e.g., payroll and tax info and health insurance), etc. add to a sense of frustration and lack of support students feel.

Note: Responses that did not provide comments (i.e., "N/A," "I'm not sure," unknown," etc.) were removed from the response lists for brevity. One response was censored due to strong language.

That we need time to be people outside of our work.

I had a friend who was on the front lines in Afghanistan who later got his Masters at Rutgers- he said being in the army was easier than struggling with mental health in graduate school.

Graduate school is not easy- it would be nice if it was structured in a way where it was still academically challenging and at the same time wasn't so taxing on mental health. I guess having programs like CAPS is a start, but ideally programs like these wouldn't be as needed if the system worked more for the students than against them.

I prefer to seek mental health support outside of the Rutgers system.

This is not the 1950's or even 1970's. Mental health is more prevalent, more serious, and has far more environmental triggers than in years past. This is not a "pick yourself up" or "the strong will survive" moment. Good scholars are leaving and some horrible scholars have grit but lack of imagination and care.

Financial and social support from the university help mitigate mental health concerns.

We are all overwhelmed.

Mental health is sometimes tied to biological specificities, such as hormonal changes. That is my case. Before my cycle starts, I am in a very rough shape mentally. I was able to get support a few years ago through a Women's wellness center, and I think something similar should be available. It might relieve some of the load that CAPS can't handle.

Things are rough all over. I know I have no right to complain.

Being a graduate student is not a fun time, it's super stressful, and we work a lot. It can get super overwhelming and we need way more understanding from the university for time off.

I have personally had a hard time connecting with other students in my cohort. While everyone is genuine, supportive, and kind, I feel that differences in generation and experience is apparent and this has somehow gotten in the way of my ability to connect with others-which of course has only been exacerbated by the pandemic. It can be tough to emotionally feel that you're incapable of socializing with others based on perceived differences of engagement, passion, and interests within the program.

I would have liked some type of information sheet of places outside of Rutgers for help. I don't want to go to CAPS because I had an awful undergrad experience with them (which was addressed and resolved by CAPS but still). Additionally, I want to be a psychologist one day and maybe continue through Rutgers. I don't want my peers or potential professors from the admissions committee have any idea. It's private, unrelated to school (only worsened by stress) but I've always been able to work through it. I think the overemphasis of needing services through Rutgers itself is not always helpful. It's nice that it exists but I definitely do not prefer it. Mental health is too personal to mix with area of my professional development. I've always gone somewhere else even despite the cost. Also, I'd never use CAPS again considering my experience.

That there's a general lack of care when it comes to mental health. That, for me, I have little confidence that Rutgers provides adequate resources.

There should be dedicated mental health professionals able to provide care to students while they are enrolled. Temporary care is not enough.

working students have different needs than non-working

The lack of funding definitely adds to mental health strain

Graduate students often have horrible mental health, yet they often feel disconnected or under supported by Rutgers since Rutgers mostly focuses on their undergraduates.

Fitness Centers are a good way to help with mental health

The future job market is hands-down my highest source of stress.

I've never sought services from Rutgers, but I've heard from a lot of people that CAPS merely says their problems are too great and not in the capacity of the counselors and should seek outside help. Rutgers (and all universities) should not merely give students (grad and undergrad) the basic mental health resources and think that's sufficient. As a community and individual instructors must reflect on what they are doing that directly helps or hinders students' mental health.

My mental health was severely affected by the toxic academic culture that is very common in graduate school. There needs to be better ways to hold supervisors accountable for toxic environments. Graduate students are supposed to be the future of so many different careers and it's sad and unfortunate that so many of us are experiencing such horrible working conditions

Hard to say. I've lived in a pandemic for 1.5 years, while writing a dissertation without open libraries, taught a course for the first time, online, TAed, and nursed a 16-year-old cat that died. Life is just hard sometimes.

It is necessary to address and more proactive measures need to take place, more awareness of resources

Making resources available to Graduate Students isn't always done enough.

We're poor and stressed and the expectations for completion timelines are unrealistic.

It is good that CAPS exist but whenever I used their services, I felt that my problems were not heard, I rather received academic advising more. CAPS need to diversify its counselors for migrant, Black and Brown populations at Rutgers as well. May be specific counselors for international students and students of color.

Paying graduate students a better stipend would help alleviate some of the anxiety experienced by grad students

I am sure Rutgers University already knows this but being a graduate student with a full time job and other responsibilities can at times be overwhelming and anxiety provoking.

CAPS is completely inadequate--I went once at the beginning of my time here and was told that because my needs were individual counseling there was nothing they could do to help me. Rutgers needs to fund mental health on campus so CAPS has the resources to provide counseling to students who need it. Also, programs and individual students need to have adequate funding--mental health is holistic and pressure to fulfill time to degree requirements along with poverty wages from the university greatly contributes to existing mental health problems and creates new ones among graduate students. If Rutgers wants to advocate for the mental health of its graduate students, we need more than seminars about self care and managing stress--we need meaningful change at the university level to give students the economic and academic security they need to focus on their mental health.

There's a big disconnect between grad students and school supports, even more so in all online programs etc.

An acquaintance died a few months ago. I cried more for him than when my little cousin died. I looked to see if there was any way to call some of the help Rutgers has offered. I do not recall why, perhaps it was because of the time of day that I was hurting, but I did not see any applicable support available.

The bureaucracy of this institution does not facilitate learning. There is added stress because of equipment failures making it impossible to schedule experiments. There is no protection for TAs and lack of job stability makes everything worse.

Most professors understand this, but the work life balance of most graduate students is very unbalanced. Most of us work, while going to school and juggling other responsibilities. My professors have done a great job of being understanding and flexible so long as you're honest about your situation, and all professors should be this way. I also want to say how badly not having a graduation hurt my mental health. My GPA that was way above my expectations was the main thing helping my mental health right now, and I was so excited to graduate with my peers, but the graduation video was absolutely horrible

and so many of us did not feel recognized. My program's graduation was nice, but the overall commencement was horrible - especially considering the school will be hosting football soon, which is arguably less important than academics. It made us students feel unimportant, disrespected and discouraged after a year that it was so hard to even graduate from. So many of us are depressed, feeling imposter syndrome and never feeling good enough - the school's priorities didn't help.

I do not know a single one of my peers who does not struggle with sometimes severe mental health concerns. None of them has found relief in either talking to their advisor (who usually gives them the impression, however implicitly, that maybe they just can't cut it in academia) or in seeking help at CAPS. The people who choose to do a PhD are a self-selected group already prone to anxiety and depression, and we all know that the culture of academia only makes things worse. Yes, I think we need to continue to destigmatize mental health concerns, and yes we need to reframe grad "school" as work, and to support better personal-professional boundaries and work-life balance. But, most importantly, grad students need access to good counsellors. As intellectuals, most of us will not be assisted by just anyone sitting in a chair who will listen to us. We need therapists with adequate credentials who can address the complexities of our situations. It also feels incredibly condescending to have someone come and give a workshop about breathing or mindfulness. This is not news to us, and does not make up for the lack of proper care. CAPS is obviously overburdened because they try to turn people away. (They told me that, since I am a TA, I would probably be uncomfortable if I saw a student of mine in the waiting room, and then sent me a list of therapists in the area that was basically the same as one I had found on my own. I was told so many times that there are many good therapists in the area, but I haven't found anyone who could really meet me on my level, and I ended up going back to someone I had seen in NYC, even though I have to pay out of pocket and it causes significant cash-flow problems for me.) This is a HUGE problem that causes so much suffering, as well as contributing to the high attrition rate in PhD programs, and causing people to spend years more than they otherwise might have in the program.

It takes MONTHS to get anyone at GSAPP to call you back to make an appointment with a counselor, and then even after they do an initial intake, it takes months until they assign you a therapist. My favorite therapist I ever had (and I've had a few!) was through GSAPP, because she was also a doctoral student so she really understood my struggle and I had to explain very little about my experience to her. This is truly the IDEAL scenario for grad students, but the fact is that it takes FOREVER to get GSAPP to call you back, set up your appointments, etc. And then, of course once the therapists get a new placement/internship outside of the clinic, you're put back into the queue again waiting for a new counselor (and they never come through). It's been two years since I heard from GSAPP but as far as I know I am still in their queue waiting for a therapist to take me as a client. Luckily I found therapy elsewhere, but I had to start from 0 because my new therapist had no experience whatsoever with doctoral students/academia.

The 70-80% statistic for graduate students with mental health difficulties is very very true and I know of lots of students who did not go to CAPS for help because of their reputation for not being good or effective. I have seen 2 therapists and 2 psychiatrists at CAPS. The therapists were absolutely not equipped to handle my situation and refused to recommend outside help when I requested it if them. The first psychiatrist I went to at CAPS was dismissive, did not take my physical side effects to medication seriously, and just kept increasing and changing my medication. The second psychiatrist did try to alleviate my side effects by putting me on multiple medications having contrasting side effects hoping that they would cancel out. They don't. I understand that the priority at CAPS is to get students through school, but honestly, they aren't helping at all, and very often, make graduate school much more difficult to manage.

It would be amazing if Rutgers would look beyond the medical model of disability (which is basically ODS services) and take into account the social model of disability (in which the idea is that a disorder is caused or at least exacerbated by the person's interaction with the world around them). More students than you know all through the cracks because ODS concentrates on a certain set of disabilities, but also mostly on undergrads (exams, etc.). We need a way for ODS to be able to address other disabilities. A recent survey by ODS asked about sending letters for accommodations to professors. The thing with

ODS is that you must list what accommodations you get, e.g. more time on exams. A great place to start is for ODS to willingly acknowledge a disability and provide a letter for accommodations with the understanding that in some cases (psychiatric disabilities, etc.), accommodations may need to be discussed as the need arises. This friction between the medical model and social model is causing a lot of grief.

I am a full-time employee and a single mom who is also in a doctoral program during a viral pandemic. Mental health resources at this point are not workshops and seminars. We need financial aid, more flexibility with requirements and other supports like this. I have done over a year of doctoral work from my house without access to quiet spaces, library resources, etc. For the expectations to be the same is unfair and truly impossible. This is what impacts mental health. There needs to be an acknowledgement and discussion of how these unique circumstances can be met.

Understanding those that work full time, have family, kids, and are doing all they can to still make it.

I was unable to get weekly therapy at CAPS. That should be remedied. Now I got an out of network therapist who is great but who is only 60% covered by insurance.

Not everyone is going through mental health crisis. Sometimes having spaces within class to be able to discuss this would be helpful. Some professors are also going through the same thing so including a mental health week within coursework would make everyone more at ease. As well, not having useless materials/assignments during a time of crisis would be beneficial to all in the classroom.

Older students have special issues with depression and anxiety that do not affect younger students.

There are systemic problems in graduate school culture where faculty subtly promote the notion that academic/career success should come before physical/mental health and personal happiness/wellbeing. In essence, graduate programs encourage students to define their lives and themselves by their work, failure/problems in which indicating failure in life and self.

That it's an issue and people will perform "well" until they have had enough and suddenly you will not have a graduate student anymore.

Every graduate student I know is feeling stressed and overwhelmed. More readily available funding (e.g., GA/TA lines) for those of us seeking to stay for a sixth year given the pandemic would greatly reduce the anxiety of many students. Many of us are overwhelmed and have a hard time balancing all of our responsibilities and realistically don't feel we have time to work, relax, and care for our mental and physical health as well as we should.

The semester needs to allow for more holidays and reading time before finals and final essay submissions. The amount of stress at the end of the semester is completely insane and does not seem productive to anyone's cause

Graduate students have additional concerns that aren't often faced by undergraduates, including family and work responsibilities. Those of us who work full time while also taking classes are sometimes forgotten. And NOBODY seems to recognize/acknowledge the needs of older, nontraditional-aged students.

That CAPS is awful. My psychiatrist was judgmental, claimed to not know, therefore was dismissive, of the side effects I was reading from the prescription print out I got from the pharmacy. Workshops rely on students giving each other advice when I expected to instead learn from a trained expert, so I left with unresolved questions that the flyer claimed to enlighten. My panic attacks increased as I met with CAPS. When I left, my current doctor said I am not the first student reporting a bad experience with CAPS. Other students I have met also describe very negative experiences with CAPS. They need to be held accountable by allowing a safe portal to report issues.

CAPS resources are wildly inaccessible. The process of getting in to see someone is exhausting. Its mostly treated as a joke among graduate students in my department. We all use therapists outside CAPS and Rutgers because the services are so difficult to get in we prefer to do it ourselves and pay the copay

Graduate student mental health is no joke! It's my biggest obstacle to success, and I this is the case for many students. PhD programs can be very isolating

Sometimes I feel the department forgets that we are human, being or told we are strong makes us feel that there is no respite, IW students have difficulty ensuring boundaries with field bc there is no break.

With the addition of covid and learning online, I'd say anxiety and depression are worse than normal.

Work life balance is highly important especially in our 20s-30s

There are a lot of group counseling options available through CAPS but I would like to see more of a push for individualized counseling. Looking through mental health options available through CAPS I see mostly either group sessions (which would not be my first choice as an entrance into mental health services) or crisis prevention (which does not apply to me and I feel like I am taking resources away from those in crisis situations if I use them)

Being a graduate student is generally challenging, but I think Rutgers tries to offer appropriate services.

This should be part of the orientation

I feel there are sufficient resources for me to maintain my mental health.

It's not fair that every graduate student I've spoken to has seen a decline in their mental health since beginning graduate school. We are not work animals and need leisure time, and someone needs to make the faculty members understand and accept that.