Below are candid responses from UCC Counselor, who work directly with Graduate Students, regarding opinions on graduate student mental health. This provides only a small window into the struggle’s students face while at the University of Utah. Reminder these suggestions are vague as they encompass the entirety of graduate students.

QUESTION ONE: WHAT DO YOU FEEL IS THE GREATEST THREAT TO GRADUATE STUDENTS MENTAL HEALTH AT THE UNIVERSITY OF UTAH?

- Feeling unable to commit the time and effort needed to perform at the level they feel they should or have internalized how their adviser expects them to.
- Departmental culture/climate that overworks graduate students without the consideration of their mental health needs or allowing grad students to take time for mental health/self-care.
- Not knowing about the services UCC offer and the stigma associated with mental health
- Time, stigma, lack of understanding/sensitivity/encouragement to attend to one's mental health
- Students often feel isolated in their struggles because mental health is not discussed openly in programs. I often hear students say that 'no one else is struggling' because they inevitably compare themselves to the most successful student in their cohort. This can increase shame, which pairs with isolation to create serious mental health issues, including suicidal thinking. This can be particularly dangerous for students on the margins (depending on the program, this could include women, non-binary folks, people of color, people with disabilities, religious minorities, and international students), who may experience a lack of acknowledgment of their particular circumstances, or actual discrimination and violence.
• Social isolation----this includes isolation from peers, lack of feedback and engagement with primary advisors, lack of oversight and tracking by programs with personal meetings for students who are not making progress, lack of active mentorship
• financial stress of graduate school due to low wages and lack of time to commit to full time employment, difficult/confictual relationship with faculty/PhD advisor, lack of support post-graduation
• The demand on their time and resources by their programs (lots of competition for grants, stress of qualifying exams, additional burden of being TAs and RAs on top of their regular work)
• Pressure of 'show no weakness' mentality and the competitiveness of STEM fields that promote a concealment of struggle and withhold peer and faculty support.

QUESTION TWO: IF YOU COULD GIVE DIRECT RECOMMENDATIONS TO DIRECTORS OF GRADUATE STUDIES, OF THE GRADUATE SCHOOL, ON HOW TO SUPPORT GRADUATE STUDENT MENTAL HEALTH, WHAT RECOMMENDATIONS WOULD YOU GIVE?

• Conversations with faculty advisers and professors about balancing holding high expectations for graduate students under their advisement/classes with the compassion for students' struggles. When I have served in faculty roles in academic depts, I've too often heard phrases like, 'students now have it so much easier than I did; they shouldn't complain.'

• Educate graduate students about what to do when their faculty advisor is clearly not fulfilling their obligations to the student. That is, educate students about specifically who they should go to, and when, and for what advisor behaviors, and in what manner, when their faculty advisor is incapacitated or not working in the best interest of the student. Students, even advanced graduate students, are quite powerless within the University system to effect change when there are departmental or systemic problems. They understandably fear retribution and jeopardizing their careers by potentially alienating someone who will be recommending them for jobs or post-docs. It's really an untenable position for these students.

• Additional therapist positions funded by the Graduate School to be housed in the University Counseling Center, with the consideration of making these 'embedded positions' (e.g., time split between the UCC and a specific academic college).

1) Develop a culture where mental health is talked about openly (mental health IS physical health, after all). Normalize the impacts that graduate school can have, and talk about signs that indicate a need to access the resources available. Encourage advisors to check in about mental health issues in their meetings with students. Encourage use of resources such as the
Mindfulness Center and support groups (always free and open to students, staff, and faculty).

2) Provide accurate information about our services. For example, the UCC does not have a wait-list, and students have the option of scheduling advanced intakes or same-day intakes. A majority of students who call for same-day intakes can get in within 2 days. We also provide free crisis services without an appointment. If you've encouraged a student to come to the UCC and they tell you they 'can't get in,' please note that they may have misunderstood our system of intakes. Encourage them to call again, or call us for a consultation.

3) Pay particular attention to students who may be marginalized: they may be struggling in silence out of fear of being judged more harshly than a student with privileged identities in the program.

- Be sure that all graduate student policies (i.e., 7-year rule and/or 8-year rule) are clearly stated in graduate student manuals and at program websites and that advisors (faculty and administrative advisors) are knowledgeable and helpful regarding stipends, scholarships, travel reimbursement, committee meeting requirements, visa requirements, and all the structural areas of the particular academic program. Assume that all students accepted into programs are capable of successful completion and demonstrate care and concern by trouble-shooting with students who are not making adequate progress; help generate alternatives/solutions in a supportive interpersonal environment.
- Increase salaries for GAs, increase post-graduation career support, provide conflict management/supervisory training for PhD advisors.
- Provide specific trainings to faculty in graduate departments about how to shift the culture of graduate school (particularly in STEM fields) so that students can be more academically effective, mentally healthy, and sustain the mental and emotional stamina to persist in academia (versus burnout).

**SUGGESTIONS FOR WAYS OF IMPROVING GRADUATE STUDENT KNOWLEDGE OF MENTAL HEALTH:**

- Remind students of University Counseling Centers role in advocating for students.
- It's important that [mental health] information is provided regularly, rather than just once. By consistently offering information, departments show ongoing support for student mental health, which de-stigmatizes mental health treatment and helps students feel safe to access resources.
- Introduce a “Flipped Classroom” approach to Mental Health Education.
  - One innovative approach to these brief presentations was created by Natascha Knowlton, an advisor for the Chemistry Department, who developed the idea of a 'flipped classroom'. This is how she describes it: 'this gives more time for different offices to engage with the students, rather than simply lecturing about their resources. The set up includes 1) having the students do a 'pre-meeting' assignment, where they explore websites and/or PowerPoint presentations about
the organizations who are presenting and answer various questions relating to them and then 2) participating during class time in various activities led by those same offices. The UCC went to this class and lead the students in a mindfulness meditation, which not only taught them a valuable skill for managing stress, but made good use of the time in an experiential activity that engaged students more. The presenters answered questions about UCC services which the students were already familiar with due to the pre-presentation activities.

- E-mails to grad students from the President's office
- UCC presentations in student clubs/organizations:
  - Note: If you have a club or organization in mind that would benefit from Mental Health education please email me at Shannon.wilkes@utah.edu
- Presentations to faculty about the ineffective and damaging nature of competitive, unsupportive program.
  - If interested contact the University Counseling Center Outreach Coordinator: Christina Kelly LeCluyse at CKLeCluyse@sa.utah.edu or Request a Presentation by Clicking HERE: https://counselingcenter.utah.edu/forms/request-presentation.php
- Blurbs and articles in department newsletters and social media pages