ADDRESSING GRADUATE STUDENT MENTAL HEALTH

by

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Abstract

It is estimated that nearly twenty-five percent of graduate students experience symptoms of depression, anxiety, or seasonal affective disorder (Kernan, Bogart, & Wheat, 2011). Graduate students are defined as being unique, vulnerable, and at risk for experiencing a variety of challenges (Hyun, Quinn, Madon, & Lustig, 2006). Several of these challenges can result in high levels of stress (Oswalt & Riddock, 2007). Failing to cope with this stress can lead to increased stress levels, more severe mental health concerns or illness, and potentially dropping out (Hamaideh, 2011). Graduate students are not completing programs at the rate that they should, in fact attrition rates are estimated to be as high as fifty percent for some graduate programs (Kent, 2013). Understanding the effect mental health has on a student’s ability to persist through a graduate program is crucial to understanding the graduate student experience. It is suggested that higher education institutions begin to acknowledge the stress graduate students endure, the transitional struggles they encounter, and the barriers graduate students overcome to seek help. Based on the literature and personal experience, it is proposed that higher education institutions focus on preventative measures when combating the mental health challenges graduate students experience. This report provides a summary of the best strategies to consider when focusing on graduate student mental health. These strategies include the creation of an office devoted to providing graduate students with the support services they deserve.
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Introduction to Graduate Student Mental Health

Between 1999 and 2010, the number of master’s degrees conferred rose by fifty percent, while the number of doctoral degrees increased by thirty-four percent. In 2010, more than 850,000 graduate degrees were awarded. These numbers are projected to continue to rise (U.S. Department of Education, 2011) and are essential to keep in perspective when thinking about the future of higher education. As institutions continue to discover strategies to retain students, considering the graduate student population will be crucial to success. Golde (2005) found that forty percent of students who begin doctoral programs do not complete them. Another study found attrition rates of graduate students to be as high as fifty percent in some master’s degree programs (Kent, 2013). Higher education professionals will be forced to consider the dynamic and diverse characteristics of graduate students, as well as the students’ personal and academic struggles, when attempting to improve higher education institutions.

Before exploring graduate student mental health in detail, it is important to differentiate between the terminologies that will be used throughout this report. Mental health includes an individual’s emotional, psychological, and social well-being (U.S. Department of Health and Human Services, n.d). Mental health plays a fundamental role in a person’s quality of life and their ability to handle stress, relate to others, and make choices. Mental health problems or struggles can cause an individual to have difficulty accomplishing the previously mentioned tasks. There are many factors contributing to a person’s mental health including biological factors, life experiences, and family history (U.S. Department of Health and Human Services, n.d). A mental disorder can be characterized as a health condition that affects an individual’s mental health or ability to think, to behave, or manage his or her emotions (Barkin, n.d). Lastly, mental illness refers to all diagnosable mental disorders (Barkin, n.d). This report will begin by
identifying the prevalence of mental health issues and illness among the graduate student population.

One area within higher education that demands attention is graduate student mental health and its effect on the success of these students. Several studies have reported high levels of stress among graduate students (Hyun et al., 2006; Kernan et al., 2011; Lawson & Fuehrer, 2001). One study’s findings suggested over fifty percent of graduate students considered seeking care for emotional problems during their graduate school tenure (Hyun et al., 2006). Kernan and colleagues (2011) found that twenty-five percent of graduate students experienced symptoms of depression, anxiety, or seasonal affective disorder. Failing to seek services for these illnesses and allowing for the stress levels to increase can result in more severe mental health concerns (Hamaideh, 2011). By examining graduate student mental health, professionals in higher education will discover the implications of inaccurate assumptions, difficult transitions, and stigma related to mental health on the graduate student population. Many colleges and universities across the country recognize the importance of supporting this population through the implementation of preventative strategies, initiatives, and programs. It would be wise for other colleges and universities to emulate these efforts to improve the graduate student experience in higher education.

**Trends in Higher Education**

Researchers claim that the number of students experiencing mental health issues, and the severity of those concerns, has increased (Hunt & Eisenberg, 2010; S.A. Benton, Benton, Newton, Benton, & Robertson, 2004). It is still uncertain whether there are actually more students who are developing mental illnesses or if students now have the capabilities of attending college while battling mental illnesses. One study indicated that there is an increase in the
number of students who are taking medication or undergoing treatment for a mental disorder than in the past (S.A. Benton et al., 2004). Silverman (2008) suggested that there are several interconnected reasons for the increase of mental illnesses on college campuses. Among the reasons are improved treatment, destigmatization of mental health, adjustment or transitional stress from a more diverse student population, limited access to off-campus services due to increases in health care costs, and the increase in turmoil and uncertainty across the country and world. After reviewing these likely reasons for the recent trends in mental illnesses among college students, it is easy to understand why these concerns are coming to the forefront of higher education.

In 2011, ninety-seven percent of the 228 counseling center directors who participated in an annual survey by Gallagher (2011) indicated that an average of ten students were hospitalized at each school due to psychological reasons. That is nearly two thousand students total, and this only includes data from the counseling centers that participated. This number has tripled since data collected in 1994 (Gallagher, 2011). Regardless of the reasoning as to why there appears to be more concerns about the increase in mental health issues among students, higher education institutions need to acknowledge this fact and begin to make progress in addressing the epidemic. One of the first steps in doing so is understanding the graduate student population and its unique characteristics.

**Graduate Student Population**

There are few articles that differentiate between the undergraduate and graduate student population, and there are even fewer articles that solely focus on graduate students. The literature has primarily been focused on issues concerning retaining and supporting undergraduate students (Hyun et al., 2006). Understanding the graduate student population is the first step in identifying
ways to better support these students. Graduate students have been characterized as a unique, vulnerable population at risk for experiencing a variety of challenges (Hyun et al., 2006; Kernan et al., 2011). When designing tools to assist a specific population of students, it is essential to understand the needs and characteristics of the students. Providing assistance for graduate students specific to their needs can be difficult, because it is a very diverse population.

Recent trends have shown that current graduate students are more representative of non-traditional students (Offerman, 2011). The United States Department of Education (n.d.) describe a non-traditional student as being over the age of 24, engaged in family and/or work life, a part-time student, or being financially independent. Non-traditional students have very specific needs and often balance multiple commitments and obligations. This is an important component to consider when evaluating graduate student mental health. Gilardi and Guglielmetti (2011) found that non-traditional students are more likely to stay enrolled if they use learning support services, have higher levels of social integration, and consider their learning to be meaningful.

Understanding the needs of this population will be crucial to the success of those interested in supporting graduate students in higher education. It is also suggested that professionals investigate the similarities between undergraduate and graduate students when trying to identify the needs of the graduate student population.

One of the most reoccurring messages within the literature was the vast difference in the research involving undergraduate students versus graduate students. Graduate students comprise about fifteen percent of all students admitted into degree-granting institutions within the country (American College Health Association, 2009). Even though that is a significant percentage, the graduate student population has been overlooked in the literature. Although this is the case, researchers reveal that graduate students are in need of similar support strategies that are offered
to undergraduate students (Hyun et al., 2006; Myers et al., 2012; Wyatt & Oswalt, 2013). It is suggested that many graduate students are just as confused and anxious entering into a graduate program as they were when they began their undergraduate experience (as cited in Poock, 2004). As this report progresses, it will become more clear that graduate students would be more successful with additional attention and support. One of the primary reasons in which graduate students need this support is because of the unique challenges they face.

As mentioned previously, graduate students have been considered an at-risk population. Eisenburg, Downs, Golberstein, and Zivin (2009) share that many college students are at an age in which symptoms of mental disorders are most likely to begin. This reality is a concern that needs to be considered in efforts to acknowledge mental health issues on a college campus. This, along with other graduate student characteristics, may help explain why forty percent of students who begin a doctoral program do not complete it. For comparison, attrition rates for the undergraduate population typically fluctuate between ten and twenty percent (Golde, 2005). The research suggests that graduate students feel that there are inaccurate assumptions about their ability to handle various situations. One of these assumptions is that graduate students are not in need of support or additional services, because they have already “mastered” the tools to succeed through college (Tokuno, 2008). Weiss Roberts and colleagues (2001) suggested that graduate students clearly feel that there is an expectation that they should be able to handle difficulties with minimal support. For graduate students, these perceptions, and sometimes realities, can become barriers for help-seeking behaviors, and mental health issues can escalate. Although graduate students may have had more experience with handling or overcoming mental health struggles, they still may need support. A study by Wyatt and Oswalt (2013) revealed that nearly seventeen percent of both undergraduate and graduate students experience symptoms of
depression. Given this information, it is detrimental for higher education professionals to let inaccurate assumptions affect their ability to support the graduate student population. A time in which these inaccurate assumptions are most damaging can be during a graduate student’s transition.

**Graduate Student Transition**

Goodman, Schlossberg, and Anderson (2006) defined transition as an event that alters one’s roles, routines, relationships, and assumptions. Transitioning to graduate school involves an alteration of all of these components; it can be a challenging, but exciting time in a student’s life. Understanding the impact that the transition to graduate school can have on a graduate student is important to consider when identifying the next steps to make in improving the graduate student experience.

Several of the reasons a student decides to enroll in higher education as an undergraduate student may be similar to factors that contributed to the decision to enroll in a graduate program (Green, 2013). This reveals that perhaps graduate students will experience similar transitional issues as they did when they transitioned into their undergraduate careers. Tokuno (2008) discussed common challenges that students face within their first couple months of graduate school. These challenges appear to be similar to the ones that undergraduate students experience including the following: becoming acquainted with the campus and people, building relationships, finding an advisor, obtaining and maintaining finances, understanding the field, and becoming familiar with the language of the field (Tokuno, 2008). Graduate students, arguably more than undergraduate students, struggle to stay connected with friends and significant others who are not in the same location or in graduate school. This could be a contributing to factor to why meaningful and quality interactions are very important to graduate
students in transition, and in maintaining a positive mental health. Research has also revealed that finances and the quality of interactions are some of the main social challenges that graduate students encounter (Longfield, Romas, & Irwin, 2006). And when one considers all of the changing components of transition, it can be easily understood why graduate students are unable to manage time for social interactions. Simply being available and having enough time to engage in activities with others is difficult to balance (Longfield et al., 2006). Another aspect of a graduate student transition to consider is the feeling of self-worth.

The status changes that occur with this transition can also cause graduate students to under value their own self-worth, which certainly affects their mental health (Longfield et al., 2006). Several focus group participants in a study conducted by Longfield et al. (2006) shared that they felt their self-worth was compromised at times due to the obstacles guarding them from their goals. Many graduate students indicated that the simple status change increased their perception of their self-worth. The research shared in the above sections would also confirm that graduate students’ experiences change often. At one point, there are feelings of accomplishments, and there are feelings of frustration at the next instance. This cycle is also referred to as an elation and depression cycle (Longfield et al., 2006). Understanding the differences and similarities between the undergraduate and graduate student populations in regards to transition is important in evaluating graduate students’ ability to respond to transition, but also in providing support to them.

**Support in Transition**

Hall (1996) described the concept of “career resilience” and the ability to adapt to changing factors. Such resilience can be critical to an individual’s success as he or she moves through a transition. This notion is also related to research by Schlossberg’s (1981) research on
transition and the importance of an individual’s support system and his or her set of psychological resources and regard to coping with transition. In the book entitled, “Graduate Students in Transition,” advice from graduate students to individuals contemplating graduate school was provided. Some of the advice was to be academically prepared, to become familiar with resources, to confirm that the school and location is a good fit, to contact current students, to enroll at the right time, to be prepared financially, and to understand that personal time may be limited (Tokuno, 2008). This advice reiterates the importance of understanding one’s self and also being aware of the support and benefits the institution provides. Supporting graduate students during what can be a difficult transition is essential to an institution’s success.

There are a variety of ways in which higher education institutions can help to support graduate students during transition, and thus help to encourage a healthy mental state. In fact, Green (2013) shares that students’ academic and environmental factors directly influence psychological outcomes, and therefore psychosocial development. To enhance this psychosocial development, as well, as academic and social integration, institutions need to provide additional support for students (Green, 2013). This support can begin providing a welcoming environment for graduate students. The most welcoming environments will alleviate stress and anxiety, resulting in a smoother transition (Poock & Love, 2001). For the graduate students experiencing identity confusion, due to the multitude of changes, it is recommended that institutions prioritize providing role models for students. Tokuno (2008) also emphasizes that graduate students excel with opportunities to learn and grow, as do most students. The importance of social interaction and role model influence was featured in several articles. Lawson and Fuehrer (2001) shared that graduate students who had more interaction with faculty seemed to have a higher satisfaction with the graduate school experience. These researchers specifically studied the effect of faculty
members’ social support in helping with the transition of first-year graduate students. There are several student development theories that can be easily related to these forms of support and the psychological development of students including: Schlossberg’s transition theory (1981), Schlossberg’s mattering and marginality theory (1989), Sanford’s theory of challenge and support (1966), Erikson’s identity development theory (1959), Chickering and Reisser’s seven vectors (1993), and Holland’s person-environment theory (1997).

**Theoretical Implications**

Understanding theory and the process of implementing theory to practice can be a pivotal component of supporting students through transition. Schlossberg’s theory of transition describes three states of moving in, moving through, and throughout transition over the course of a student’s tenure at an institution (Schlossberg, 1981). The theory highlights the importance of each individual person and each transition experience; the outcome is highly determined upon these two factors. There are four different components that help professionals understand how a person may cope with transition: situation, self, support, and strategies. A student’s psychological resources certainly can affect an individual’s transition in positive and challenging ways (Evans, Forney, Guido, Patton, and Renn, 2010). And the way in which a student is supported or the strategies used to help a student cope will affect how a student responds to a transition, and potentially plays a role in the mental state of the student. This theory can help professionals become more familiar with some of the transitional issues a student may encounter. For graduate students, these issues are very much a reality, and the support and strategies are important for student affairs administrators to consider.

Schlossberg has also introduced the theory of marginality and mattering to the field of student development. Schlossberg (1989) explained that feelings of marginality often occur when
individuals transition into new, unfamiliar roles. Marginality, or not fitting in, can sometimes lead to negative feelings of self-worth, irritability, or mental illness (Schlossberg, 1989). To combat feelings of marginality, students need to feel as if they matter. This can be exhibited in several forms: attention, importance, ego-extension, dependence, and appreciation. Polson (2003) suggested that institutions implement graduate student recognition programs to help students feel mattered. This could also help students feel supported, which is directly related to a theory established by Sanford (1966).

As mentioned previously, social support is very important to the success of graduate students. With that said, graduate students desire the opportunity to learn, to grow, and to be challenged. Sanford (1966) developed a theory that discussed the importance of challenge and support in the development of adults. He indicated that in order for proper development to occur, readiness, support, and challenge need to be present (Sanford, 1966). Lawson and Fuehrer (2001) suggested that institutions worry less about decreasing the demands of the program, or in other words decreasing the difficulty or challenge, and instead focus on increasing support. This is directly linked to Sanford’s theory of challenge and support. Sanford (1966) stated that the amount of challenge a student can tolerate is a function of the amount of support available. If the challenge outweighs the support, this can lead to more stress and students dropping out of college. By incorporating some of the strategies mentioned above and the ones that are to be mentioned within this report, institutions could potentially increase student satisfaction, and retention. It is also advised that higher education professionals investigate the research conducted by Erikson (1959).

Many graduate students find themselves asking questions such as “Who am I?” or “What do I want to become?” These are typical questions asked by someone going through a
developmental change. Tokuno (2008) suggested that many graduate students find themselves encountering an “identity crisis,” a stage within Erikson’s (1959) stages of life span development. Erikson’s stages are determined by a psychological crisis or “turning point”. In order to handle these “turning points,” an individual must balance his or her internal self with the external environment. Coping with this challenge will allow individuals to properly handle developmental changes later in life (Erikson, 1959). Stage five of the theory discusses an individual’s desire to establish his or her values, beliefs, and goals (Erikson, 1959). For many graduate students, exploring these options may create psychological dissonance and difficulty in successfully progressing through a graduate program. Higher education professionals can play a significant role in ensuring positive identity development within graduate students by supporting them through this exploration process. Chickering and Reisser (1993) also shared important concepts to consider when evaluating the development of students.

Chickering and Reisser’s (1993) seven vectors can easily be related to the graduate student experience. Throughout graduate school, students are attempting to develop competency, to manage emotions, to build relationships, to establish an identity, and to live with purpose and integrity (Tokuno, 2008). Chickering and Reisser’s (1993) seven vectors serve as a resource to understand psychosocial development during college. Graduate students experiencing mental health symptoms certainly need to develop mechanisms to help them cope with their emotions while traveling through these vectors. And some graduate students might be experiencing these vectors at the same time. For example, a graduate student who is asking the “Who am I question?” while balancing the professional demands of an assistantship and exploring his or her values would be experiencing three of the seven vectors. To help students progress through these vectors, institutions could evaluate institutional size, prioritize student and faculty relationships,
explore curricula that acknowledge difference and that promote learning, and lastly, encourage the development of student communities and support groups (Chickering & Reisser, 1993). They should also encourage students to consider the fit between themselves and an institution.

Hyun and colleagues (2006) shared that Holland’s theory of careers (1997) can provide some insight into graduate student health and transition. The theory suggests that each individual choose environments that match his or her personality, and that environments reinforce and reward abilities and interests. People will succeed in environments that are congruent with personality types. Therefore, understanding the “fit” between institutions and students can significantly contribute to the mental health of students (Holland, 1997). As higher education institutions, this notion may not be the most accepted, because one of the goals of an institution is collect as much revenue as possible or in other words enroll as many students as possible. In reality, the best way to serve students is to encourage prospective students to explore the “fit” between themselves and the institution. If an institution cannot provide the support it needs for a student, perhaps that institution is not the best place for that individual. If the “fit” is not genuine, it can also lead to increases in dropout rates.

Graduate student transition can significantly impact the mental health and overall well-being of graduate students. It is a crucial component to the future success of graduate students. Understanding the graduate student transition experience and the theory behind the development that occurs during transition is essential to implementing the best support strategies for this population. Often this transition, in addition to the other roles and commitments of a graduate student, can lead to significant stress levels. Identifying the effect stress has on graduate students is also an important concept to understand when examining graduate student mental health.
Graduate Student Stress

Graduate students often experience high levels of stress due to the varying roles and responsibilities they acquire while in a graduate program (Hyun et al., 2006; Kernan et al., 2010; Lawson & Fuehrer, 2001). In a study conducted by Hyun and colleagues (2006) half of the graduate student participants indicated having an emotional or stress-related problem over the prior year. And, over half of the students indicated that they knew a colleague who had experienced an emotional or stress-related problem over the previous year. Moreover, nearly forty percent of students reported feeling exhausted “frequently” or “all the time.” Wyatt and Oswalt (2013) found that graduate students experience more tremendous and consistent stress, while undergraduate students report experiencing a single traumatic situation. Higher education professionals need to understand the reality of stress in a graduate student’s life, and should be able to help graduate students learn how to properly balance the stress with support before the stress escalates into a more severe mental illness. In order to do so, one must understand the contributors to stress and the effect stress has on students. It is recommended that student affairs professionals begin to consider preventative strategies in order to decrease graduate students’ stress levels.

Contributors to Stress

In a study conducted by Lawson and Fuehrer (2001), twenty graduate students were interviewed during their second semester of graduate school. Students were asked open ended questions related to stress, and their answers often included a diverse array of stressors. Many of the challenges that graduate students face can result in high levels of stress. This stress can stem from obstacles regarding academics, finances, assistantships, work overload, balancing multiple roles, career planning, being in a relationship, and family issues (Hyun et al., 2006; Mazzola,
Jackson, Shockley, & Spector, 2011; Oswalt & Riddock, 2007). As one can see, several of these stressors involve individuals other than the student. Graduate students often have additional responsibilities and people in their lives that affect their decision making and ability to successfully complete a graduate program. Hamaideh (2011) suggested even more sources of stress for graduate students including being away from home, transitioning into a new stage of life, experiencing pressure from peers, living with expectations, being frustrated with achievement levels, and having difficulty coping with a new social environment. Understanding the effect that all of these stressors can have on an individual’s mental state is crucial in accurately understanding the graduate student experience.

**Effects of Stress**

Some amount of stress can actually be helpful for students. Dahlin, Joneborg, and Runeson (2005) explained that it is prolonged stress that can be harmful to students’ academics and their general health. Students with very high levels of stress can often become depressed, have mental distress, and may experience burnout. Everyone has experienced stress before, whether through personal struggles, professional encounters, or academic experiences. Understanding the effects of extreme stress is important for higher education professionals, because such extreme stress can also affect attrition rates.

Golde (2005) suggested that stressors such as being academically underprepared, being mismatched with an advisor, or feeling isolated are primary reasons why doctoral students drop out of graduate school. Other researchers also found similar results with their research, especially if students’ mental health concerns escalated into mental illness or more severe symptoms (Hyun et al., 2006). If stress is not addressed or students are not comfortable with coping or handling stress, their health may be jeopardized. According to Hamaideh (2011) high levels of stress can
motivate and accelerate substance abuse, smoking, and other negative health habits. Ultimately, if students encounter obstacles and are unable to handle the stress that accompanies it, they may begin to evaluate and reassess their decision to pursue graduate education (Golde, 2005). Through this assessment, students may realize their satisfaction with a program or an institution. Lawson and Fuehrer (2001) found that graduate students in their study were satisfied with graduate school even while experiencing high levels of stress. The key, however, was that they also had high levels of support. Again, some stress can be beneficial in graduate school, as long as ample support is used as a buffer.

**Models and Theoretical Implications**

Taking time to understand models and theories that can help in the creation and implementation of preventative strategies should be a priority among higher education professionals. As previously stated, researchers suggest that stress can be a beneficial motivator for graduate students (Lawson & Fuehrer, 2001). Utilizing strategies that acknowledge the support needed during and after stress occurs is important. Understanding the importance of being proactive in teaching strategies to help students appropriately respond and cope with stress can be even more beneficial. The Transactional Model of Stress (Lazarus & Folkman, 1984), as well as a few other theories, may be helpful in the development of these resources.

The Transactional Model of Stress brings understanding to the process of an individual encountering a stressor (Lazarus & Folkman, 1984). First, an individual will encounter a potentially stressful situation. Upon evaluation of this incident, an individual will decide whether the situation is stressful or not. After making this decision, a person examines his or her coping resources and options. Lastly, an individual reacts to the stressor using adaptive coping strategies with the goal of obtaining balance (Lazarus & Folkman, 1984). Adaptive coping strategies will
be discussed in more detail in the conclusion of this report. One finding worth sharing is that the students who have a positive perception of him or herself are more likely to have adaptive coping strategies and an internal locus of control. In one study, these students believed that they experienced fewer stressors or were able to handle more of the stressors (Hamaideh, 2011).

Professionals need to understand that a person has the ability and makes a conscious decision of how to react to a stressor. If a student is experiencing additional mental health problems, this ability may be hindered. Regardless, acknowledging the power and ability within each person can be a crucial step in coping with stress. Hyun and fellow researchers (2006) suggested that students should pay attention to the “fit” between themselves and the institution in which they are interested, because this could certainly affect the amount of stress that she or he experiences or his or her ability to handle the stress. Identifying this “fit” can be directly related to Holland’s theory of careers.

Like previously stated, acknowledging the stress graduate students face is crucial in improving the graduate student experience, especially because of the stress escalates it can lead to heightened stress levels or mental illness. These theories help to provide a framework for understanding how to better support graduate students. There are also several graduate students struggling with mental illness in addition to these high levels of stress, and this combination can create for a very difficult graduate school experience. Identifying the effect mental illness has on graduate students is an important factor in learning how to enhance the graduate student experience.

**Mental Illness and Graduate Students**

Indeed, graduate students are a vulnerable, at-risk population due to their age, the number of commitments and roles they balance, and the rigor and expectations of graduate programs. All
of these characteristics, among others, can lead to significant stress levels. If students are unable to cope or to handle the stress associated with graduate education, the stress can escalate into mental health struggles. There are also several graduate students that experience mental illness, or at least symptoms of mental health disorders. Several researchers share that stress and symptoms of depression and anxiety specifically are common occurrences among the graduate student population (Hyun et al., 2006; Kernan, et al., 2010; Schulte, Mongrain, & Flora, 2008; Wyatt & Oswalt, 2013). It would be advantageous for student affairs professionals to pay attention to the prevalence of mental health concerns among graduate students. In addition to understanding the extent to which this is a problem, it is also important to consider the contributors to mental health concerns, as well as the effects of mental illness on the graduate student population.

**Prevalence**

There are some discrepancies in the literature about the percentage of graduate students who experience mental illness. This is an area of the research that could certainly be expanded. Another improvement that could be made among the literature is to differentiate between mental health disorders and symptoms of mental health disorders. With that said, there is literature addressing the prevalence of mental health concerns among graduate students, and it is worth the attention of higher education professionals.

According to studies by Eisenburg, Golberstein, and Gollust (2007) and Wyatt and Oswalt (2013), thirteen percent of graduate students are affected by depression or anxiety. One study revealed that over forty percent of the respondents indicated that they had mental or emotional difficulties within the previous month (Eisenburg et al., 2007). This resembles results of a study conducted by Weiss Roberts and fellow researchers (2001) in which twenty-six
percent of the graduate students indicated stress concerns, twenty-one percent mentioned struggles with anxiety, and eighteen percent reported symptoms of depression. It is estimated that nearly thirty percent of graduate students utilize some form of mental health services in graduate school (Hyun et al., 2006). This number is astounding, but it is reassuring to know that services are offered and utilized. In addition to research on the graduate student population as a whole, there is also literature regarding specific graduate student populations, specifically medical students.

It is estimated that as many as seventy-two percent of medical students suffer from abuse by their superiors, which could be a partial explanation as to why many medical students experience depressive and anxiety symptoms, as well as substance abuse (as cited in Weiss Roberts et al., 2001). Medical students often have increased pressure and expectations from instructors and field supervisors. This can cause heightened levels of stress, which can lead to severe mental health concerns. Weiss Roberts and colleagues (2001) suggested that as many as one quarter of medical students in the United States experience symptoms of mental illness. Although this report does not specifically highlight the experiences of medical students, this population is one that deserves more support and attention. Regardless of the field, there are significant consequences to these mental health concerns and illnesses. In order to address the problem, one must understand what is contributing to the problem.

**Contributors to Mental Illness**

An obvious contributor to some of these mental health symptoms and illnesses that graduate students endure is stress. And sometimes this stress can result in students having lower self-esteem and confidence (Longfield et al., 2006). Low self-esteem and confidence can contribute to increases in mental health concerns among students. Other research indicates that
financial hardship can be directly related to the onset of depression. Over twenty percent of students who participated in a study by Andrews and Wilding (2004) reported experiencing a major financial crisis and/or have gone without food or travel due to their financial situation. This is an extremely important piece of knowledge when considering the mental health of graduate students. The non-traditional graduate student population is an especially important population to consider, because they may also be balancing family commitments and providing for dependents. Alexander (2005) found that the primary producers of anxiety for graduate students are academic demands, balancing work and school, and balancing finances. As one can see, there are similarities among some of the stressors that contribute the most to the onset of anxiety or increase in symptoms of mental health disorders. It is also important to understand that there is not a known cause to the onset of an actual mental health disorder, but that certain experiences can cause a student to begin feeling symptoms again or cause the mental health disorder to become more of a concern and obstacle for a student. The effects of mental health disorders and symptoms of disorders have had a significant impact on college campuses. Unfortunately, many institutions have failed to recognize this direct impact.

**Effects of Mental Illness**

In an article published in *The Chronicle of Higher Education* in 2008, there was mention of fourteen campus shootings that occurred over the previous twenty years. Of the fourteen cases, eight involved a current or former graduate student or non-traditional undergraduate student (Fox, 2008). In 1991, a doctoral candidate went on a shooting rampage at the University of Iowa shortly after receiving news that he had not been chosen as a recipient for an academic award. It was not too long ago when a former Northern Illinois University graduate student murdered five students and injured twenty-one people before committing suicide (Fox, 2008).
And lastly in 2012, James Holmes, a graduate student at the University of Colorado, took fire at a movie theater in Aurora, Colorado. Holmes was in the process of voluntarily withdrawing from the neurosciences graduate program (University of Colorado, 2012). It has been reported that several of the individuals involved in such campus shootings were suffering from various mental disorders (Fox, 2008).

One of the most tragic realities of higher education today is the prevalence of suicide among college students. Silverman (2008) shared recent trends in suicidal behavior. Between 1990 and 2003, suicidal ideation, plans of suicide, and suicidal attempts all increased. Suicide is the second leading cause of death among college students. In fact, more teenagers and young adults die from suicide than from all other medical illnesses combined. Silverman (2008) estimated that 1,350 students die by suicide each year. In other words, three students a day take their own lives in the United States. Graduate students account for thirty-two percent of campus suicides (Silverman, Meyer, Sloane, Raffel, & Pratt, 1997). That is a significant percentage for a population that has not seemed to receive enough attention. It is estimated that of the students who commit suicide, only twenty percent had been seen by a counseling professional (Silverman, 2008). These statistics reiterate the fact that students are not comfortable seeking help; a problem that needs to be addressed. Only fourteen percent of students reported receiving suicide prevention information from their college (Silverman, 2008). When thinking about the various beliefs related to suicide, it is understandable to believe that some people are more comfortable and willing to address this epidemic than others. Regardless of people’s opinions regarding suicide, there is an undeniable fact that students are killing themselves and with the support and courage of higher education professionals, lives might be saved.
Think about a student experiencing suicidal ideation, depression, anxiety, or just high levels of stress. Now, think about this student also attending school full-time, being a parent, and working twenty hours a week as a teaching assistant. There is no denying that this student’s academics will be jeopardized at the expense of the other factors affecting his or her academic performance. In fact, additional effects of mental illness do include increased dropout rates (Hyun et al., 2006; Kessler et al., 1995). Understanding the importance of holistic wellness and the effect that mental health issues have on all areas of a student’s life and development is essential to supporting the graduate student population.

**Holistic Wellness**

Mental health can be affected by several internal and external factors in an individual’s life. Research has indicated that institutions that adhere to a holistic wellness model see more positive psychological well-being among their students (Hermon & Hazler, 1999). Like previously stated, graduate students balance several roles and commitments, and many of these are interconnected. Some areas of graduate students’ lives receive more attention than others. All of these areas of a graduate student’s life contribute to his or her overall feeling of self-worth (Longfield et al., 2006). There are certain areas of a student’s life that do not receive as much attention as they should to ensure the most positive outcome. Many students indicate that they have limited time for socializing and physical activity (Longfield et al., 2006). Green (2013) touched on the focus of this section, which is the connection between academic and environmental factors and psychological outcomes. There is a direct link between these variables with psychosocial development. Mental health has continuously played a role in students’ academic performance. Understanding the prevalence of this issue and what to do to help relieve the effects is an important consideration for higher education professionals.
Academic Performance and Mental Health

Research has shown that poor health, specifically mental health, can affect a student’s academic performance (Andrews & Wilding, 2004; Ruthig, Marrone, Hladkyj, and Robinson-Epp, 2011). Although it is unclear if students who struggle with mental health drop out of college due to difficulties related to academics, there is a link between those who have mental disorders and student attrition. Kessler, Foster, Saunders, and Stang (1995) found that individuals with psychiatric disorders account for nearly five percent of college drop outs. If mental health problems go untreated, there is even more risk of a graduate student dropping out, in fact this is a significant contributor to graduate student attrition (Hyun et al., 2006).

Among the students who indicated struggling with depression, anxiety, and/or seasonal affective disorder, over forty percent of them reported that this mental health illness negatively impacted their academic performance. Of the seventy-five percent whom reported feeling stressed over the previous year, over a quarter of these students indicated a negative correlation with learning (Kernan et al., 2011). The results of this study reflected those of previous graduate student studies, with regard to the link between mental health issues and learning (Hyun et al., 2006; Schulte et al., 2008; Wyatt & Oswalt, 2013). For graduate students, the effect mental health has on academic performance and progress can be especially detrimental to the completion of graduation requirements outside of the classroom, such as submitting a report, portfolio, or thesis. Graduate students indicated that mental health issues disrupt progress on a thesis, dissertation, and research writing. They also express that these struggles interrupt practicum work expectations (Wyatt & Oswalt, 2013). The completion or progress in these areas can also affect a student’s self-esteem and/or perception of self-worth. If a graduate student has a positive sense of self-worth, he or she is more likely to succeed academically (Crocker,
Sommers, & Luhtanen, 2002). Depression and its effect on graduate student academic performance is a topic that has been specifically researched.

Depression has surfaced in research regarding graduate student mental health consistently. Andrews and Wilding (2004) shared that depression significantly affects exam performance. In fact, students who are diagnosed with depression or anxiety have lower scores on exams compared to those that are not clinically depressed or anxious (Wyatt & Oswalt, 2013). Higher levels of distress are also related to increased test anxiety, lower academic self-efficacy, less effective time management, and limited use of study resources (Wyatt & Oswalt, 2013). The research also revealed that co-occurring depression and anxiety have a positive correlation with lower grade point average (Eisenberg, Golberstein, & Hunt, 2009).

There are also more severe psychological issues with which graduate students are struggling. In 2011, counseling center directors across the country reported that nearly thirty-seven percent of their clients were struggling with more severe psychological problems. Of that thirty-seven percent, six percent had such severe mental health impairments that they ended up withdrawing from the university or college (Gallagher, 2011). All of this research reiterates the importance of understanding the correlation between mental illness and academic performance.

There is a clear link between mental health and graduate student academic performance. There is also research to support the importance of holistic wellness with regard to persisting through graduate school. Many areas of a graduate student’s life are jeopardized due to the intense demands of graduate programs. This can be very problematic, especially when mental health issues surface and become interconnected with other expectations and responsibilities. Student affairs professionals should focus on strategies that support holistic wellness and value the links between the various roles and aspects of a student’s life. Unfortunately, even with
increased strategies, a strong barrier will remain—stigma of mental health. In order to create more inclusive and safe college environments, higher education professionals and students need to work to de-stigmatize mental health.

**Mental Health Stigma**

Public stigma can be defined as negative stereotypes or assumptions that are held by society or a large community (Corrigan, 2004). This stigma is a help-seeking barrier for individuals struggling with mental health issues. An example of the effect stigma has on society is the fear that surfaces when interacting with a person who has a mental health disorder. There is a stereotype that individuals who struggle with a mental illness are dangerous. This unfortunate bias is reiterated by American culture and media, which results in a damaging stigma. This stigma can cause people to feel as if they are inadequate if they struggle with mental health issues. It also leads to members of this society being less willing to seek help for such disorders. If individuals do not seek help, perhaps because of the stigma, illnesses can become severe and potentially cause an individual to react in an inappropriate manner. If society was more encouraging and supportive of individuals with mental health issues, perhaps there would be fewer unfortunate instances that result in violence or self-harm. Several researchers have examined the effect of stigma on help-seeking behaviors, and there is no doubt that this is an area of improvement for higher education.

Eisenburg and colleagues (2009) studied the effects of public and personal stigma among college students. One of the most interesting findings was that it was extremely common for students to report experiencing high levels of perceived public stigma and low levels of personal stigma. However, nearly no one reported the opposite of experiencing high levels of personal stigma with low levels of public stigma. If students did have high levels of personal stigma,
which was also associated with perceived high levels of public stigma, they were less likely to demonstrate help-seeking behaviors. These results indicate that societal influence is more important than what an individual believes about mental health and seeking help. This dissonance is a tragic realization for higher education professionals, because it reflects the dire need to change college campus culture regarding mental health. This can be an overwhelming and daunting task, but well worth the students who will succeed and persist because of it.

According to a study by Hyun and fellow researchers (2006) only half of students consider seeking help for mental health concerns. There are several health concerns, many of which are related to mental health, that are stigmatized and therefore create barriers in seeking help and communicating with professionals (Weiss Roberts et al., 2001). One of the most interesting and powerful findings in the research is that medical graduate students, and it could be argued all graduate students, would feel that their academic status would be jeopardized if they shared the health struggles they experience. This specifically would be a challenge if it was related to substance abuse or other mental health illnesses, such as depression or anxiety (Weiss Roberts et al., 2001). Stigma affects individuals’ perceptions of what an individual with a mental health illness experiences. Individuals who develop and struggle with mental health should not automatically be considered inept, dangerous, or incompetent. Placing this stigma and shame on those with mental illness will only continue to negatively affect society.

Another focus within the research is the differing ways that stigma affects men versus women. In addition to researching mental health concerns in general, institutions need to begin to investigate the links between male identity development and help-seeking for mental health issues. Some professionals would argue that stigma affects men more than women (Eisenburg et al., 2009; Mojtabai, 2007). Interestingly, women may be twenty percent more likely to utilize
mental health services than men (Hyun et al., 2006). There are several reasons as to why this may be occurring on college campuses. It is possible that the stigma affects men more, because society does not encourage the emotional development of men. There is a bias towards the male gender that affects their ability to show emotion, cope with emotion, and share their emotions. These are obvious obstacles to seeking help for mental health concerns. Another reason could be that resources are aimed and marketed towards women. More than eighty percent of female participants in a recent study indicated they were aware of counseling services, but only sixty-seven percent of men were aware of the same services (Hyun et al., 2006). Perhaps these resources are not shared with the male population as openly, or the male population is uncomfortable with becoming familiar with these resources because of the stigma associated with mental health. One suggestion for combating this problem is to empower male role models on campus to reach out to the male population and to shatter the stereotype that men are not supposed to have emotions or to seek help. Another option would be to implement a support group for men that could include the involvement of prominent professionals across campus; this could be especially helpful for male graduate students. Graduate students may relate more with professionals than undergraduate students because of the stage of life they are in, as well as the roles in which they are balancing.

Researchers provide a few suggestions for destigmatizing mental health. Students need to be aware of the fact that ninety percent of students report that they would not think less of somebody for seeking mental health treatment (Eisenburg et al., 2009). Students still and will continue to care more about the perception of their peers than what they think themselves. This is a struggle and barrier for higher education professionals in many regards. In order to destigmatize mental health, students need to be involved with the process. Active Minds, a
nationally recognized non-profit organization, is devoted to establishing college chapters to begin the conversation about mental health issues. This organization uses the student voice to raise awareness. Another suggestion from Eisenburg and colleagues (2009) is to utilize internet-based programs to reach students, to provide support, and to educate the campus community about mental health. This can be helpful for graduate students who have a very busy schedule. Identifying the best ways to connect with students is essential in destigmatizing mental health.

Although it can be argued that mental health stigma has decreased within society and among college campuses, there is no denying that it continues to affect both undergraduate and graduate students. Stigma has an effect on students’ help-seeking behaviors and results in students failing to utilize mental health resources. Unfortunately, men are affected by stigma more than women, but both populations are negatively affected. To help in relieving the issue, it is important to use the student voice to create a culture that is supportive of those struggling with mental health issues or illness and do so in a way that is engaging and interesting to the student population. In all, decreasing the stigma associated with mental health could result in more students receiving the help they need, and therefore fewer mental health crises on college campuses. Another way to combat this stigma is to have a better understanding of graduate student needs.

**Needs of Graduate Students**

This report has provided readers with relevant concerns among the graduate student population, specifically ones relating to mental health issues. Graduate students have and will continue to embark on a difficult, but exciting journey in the hopes of obtaining a master’s or doctoral degree. Before reaching that destination, many graduate students strive to balance many roles and responsibilities. Higher education professionals need to understand the needs of this
population and provide support in a way that emulates that of undergraduate students. Several professionals have researched the needs of graduate students in hopes of improving the graduate student experience.

Graduate students are eager to learn, grow, and develop as professionals. One study revealed that graduate students desire a strong community of learners and crave critical dialogue (Conrad, Duren, and Haworth, 1998). A community of learners is described as an environment in which peers and faculty are “co-learners” working and learning together. These two elements allow for a more comprehensive and enriching learning experience. Conrad et al. (1998) found that these students valued their experience and relationships more. Providing this structure and environment for graduate students could help with the overall health and well-being of students. It could provide students with the support from peers and faculty that they feel they need in order to be successful.

Rimmer, Lammert, and McClain (1982) administered a questionnaire asking master’s students to identify their needs at their perspective institutions. The results revealed master’s students’ greatest perceived needs, as the following: departmental workshops on planning and professional development, a central location for information regarding events or socials, departmental orientation programs, and a master’s student newsletter. All of these items are consistent with the message that graduate students seek to be informed and involved in similar ways as their undergraduate peers. Establishing and integrating oneself into the campus culture can be a challenge for graduate students. By utilizing some of these resources, graduate students may feel more connected to campus.

Another identified need of graduate students is for faculty and staff to understand their demands. While in the classroom or at work, students may appear to be successfully
maneuvering through graduate school. It can be very beneficial for graduate program faculty and staff to be aware of the challenges this student population may face. Understanding important questions to ask and what to look for, especially in regards to graduate student mental health, can be very impactful. It is suggested that professionals provide similar support to graduate students, as undergraduate students, as they may experience similar mental health struggles and transitional struggles (Wyatt & Oswalt, 2013).

In a study conducted by Oswalt and Riddock (2007) graduate students reported coping strategies used to handle stress. Among these strategies were “vegging out,” using alcohol or smoking cigarettes, taking prescription medication, and participating in yoga. Many of these behaviors are not the most effective or healthy methods of coping, and the graduate students in this study agreed that learning more about healthy coping strategies would be helpful.

One of the primary findings one will discover when researching graduate student attrition is the importance of a graduate student’s advisor, especially for those graduate students pursuing a degree with a dissertation requirement. Researchers (as cited in Boyle & Boice, 1998) explained that students who do not finish their dissertation often have poor working relationships with their advisors or committee. This is one of the two primary reasons for terminating graduate education; the other is for financial reasons. Graduate students have a desire and need to feel connected and supported by their advisors. This relationship can be the key to a graduate student’s success, and therefore, should be prioritized more. This can become problematic if faculty and staff’s responsibility and workload continue to increase. Unfortunately, this could result in less time being devoted to working with graduate students and building strong relationships with these students.
These are only a few of the many needs of graduate students. Several have been discussed throughout this report. Although it is important to understand what graduate students desire in order to be successful, the most important aspect is identifying how these needs will be fulfilled. Based on the literature reviewed above, strategies and recommendations will be provided with the hope that graduate students will be more supported in years to come.

**Implications and Recommendations**

This report clearly depicts some of the experiences that graduate students are facing today. Unfortunately, many of these experiences are causing graduate students more stress than perhaps they need. This could be for several reasons. A few that have been addressed are graduate students’ inability to cope with stress, and higher education institutions’ lack of graduate student support services. It can be argued that if both of these factors were improved, graduate student mental health would also improve.

**Preventative Measures**

One of the first suggestions is to focus on preventative measures and enhancing graduate students’ coping strategies. Promoting strategies that emulate positive psychology is a step in achieving this goal. By incorporating aspects of positive psychology into the solution, students may experience emotional wellness, vitality, and meaningfulness (Chickering, Dalton, & Stamm, 2005). This could ultimately lead to improvements in graduate student self-care, another priority if the graduate student experience is going to be enhanced. Throughout this report, inferences have been made to the importance of an advisor and faculty relationship, as well as to the crucial role played by peer relationships. These mentoring relationships will be discussed, as they are a fundamental aspect of the graduate student experience. Another important factor in understanding graduate mental health is becoming familiar with the institutional and department
culture and environment. It is important to assess whether the environment is welcoming and supportive, and not just challenging, in order to assist the graduate student population. All of these efforts have the potential to create a new and improved graduate student experience.

In order for colleges and universities to support graduate students, professionals need to begin being proactive instead of reactive. The same could be said for graduate students. Graduate students need to make improvements in the way they prepare for graduate school. One way to start being proactive is to identify the strategies that are effective in helping graduate students. Poock (2004) suggested creating evaluations for current practices and making decisions based on those and testimonies. Institutions need to consider the new needs of nontraditional students, and to offer both institution and department resources for graduate students. Kernan et al. (2011) also prioritized proactive strategies, especially when involving graduate student health concerns. By being proactive and evaluating current trends and strategies, institutions should be able to improve in the following four areas: institutional environment, relationship building, positive psychology practices, and promoting graduate student self-care.

**Institutional Climate**

One of the first influences on students is the campus climate, which is why creating an ideal environment for students should be an institutional priority. Longfield and colleagues (2006) suggested that creating a comfortable and stable environment for graduate students could decrease the effects of the elation and depression cycle. Higher education professionals should be as genuine and consistent in the way they treat a graduate student before she or he arrives to campus as they do a graduate student that is graduating from a program. This consistency, as stated above, could be very beneficial for a graduate student.
Poock and Love (2001) indicated that a welcoming environment can alleviate stress and anxiety, therefore allowing for a smoother transition for graduate students. This welcoming environment should be reflected within individual departments as well. The academic and social environment of a department or institution can have a significant impact on the graduate student experience. The results of a study by Hyun et al. (2006) emphasized the value of social support and the relationship a graduate student has with his or her advisor, and how that influences the department culture and environment. Graduate students are known to be more disconnected from campus compared to other student populations. This can obviously negatively affect their mental health and stress levels (Wyatt & Oswalt, 2013). Understanding why graduate students feel disconnected from the campus is an essential piece when hoping to improve the graduate student experience. Pondering the effects of a welcoming environment on the feeling of disconnectedness would be a suggestion for future research in this area. One piece, touched upon earlier, that could potentially positively affect the perception of the institutional or departmental environment is a graduate student's ability to build relationships with his or her advisor, faculty, or peers.

**Relationship Building**

After synthesizing the existing research, Boyle and Boice (1998) suggested strategies to help increase graduate student success. The strategies mentioned were to provide opportunities in which students can develop a sense of collegiality, experience mentoring, and are given structure related to their goals, assignments, and feedback. From this research, various transition courses were created to enhance enrollment, to build community, to increase communication, and to help graduate students gain socialization into the field (Tokuno, 2008). Several of these strategies hint at the importance of building relationships while in graduate school; whether these
relationships are with advisors, faculty, staff, or peers, they are crucial to a graduate student’s health and success.

Advisors play a fundamental role in a graduate student’s experience. Hyun et al. (2006) suggested that graduate students’ relationships with academic advisors can be a significant source of support and stress. Advisors need to understand how to balance challenge with support in order for graduate students to develop and grow most successfully. Researchers have found that if this balance is achieved, the relationship between a graduate student and advisor can contribute positively to a graduate student’s mental health. The University of Michigan created a handbook for faculty and graduate student advisors entitled *How to Mentor Graduate Students: A Guide for Faculty at a Diverse University*. The information for this handbook was retrieved from graduate student testimonies (Polson, 2003). And in a time when the graduate student population continues to become more diverse and nontraditional, advisors will need to reconsider their past efforts in mentoring graduate students.

There are several ways in which faculty members influence the graduate student experience. Faculty members have the responsibility to effectively communicate with students. Communication between faculty and students is pivotal to the success of graduate students in a program (Hamaideh, 2011). Providing structure throughout a program can also be beneficial for graduate students. Lack of structure can sometimes lead to graduate student stress and dissatisfaction. Researchers Boyle and Boice (1998) specifically suggested incorporating short-term goals, structured assignments, and timely feedback into the curriculum and class structure. Graduate students have also indicated that faculty support is especially appreciated in the form of advice for how to navigate the graduate student experience. For graduate students teaching for the first time, which can cause high levels of stress, it is recommended that faculty provide
guidance and assistance through that transition (Lawson & Fuehrer, 2001). Researchers suggest that faculty and advisors host “happy hours,” a more casual setting than the typical “office hours,” to help in achieving the above suggestions. This could also help graduate students interact with faculty and advisors with whom they may not be necessarily assigned.

Social integration with peers is also important to graduate student mental health. Social support plays a vital role in a student’s ability to cope with stressors and other mental health struggles. In fact, Lawson and Fuehrer (2001) shared research that indicates increased social support is related to an increased level of satisfaction with the graduate school experience. Peer support can be a very influential factor in graduate student success. Mattanah and colleagues (2010) revealed through their study that peer-led social support groups helped first-year students to develop meaningful connections with a small group of peers, which helped during the transition to college. Although, these groups were designed for undergraduate students, it has been discussed and determined that graduate students often undergo similar experiences as their undergraduate peers (Green, 2013; Rosenblatt & Christensen, 1993). The group intervention ultimately reduced feelings of loneliness and caused students to feel more socially connected. It can be argued that these same effects could occur in a social support group of graduate students, in which new graduate students would be paired with older graduate student peer facilitators. A similar program exists at the University of Maryland, with the exception that this program is linked to their College Student Development graduate program’s orientation. A unique component is a buddy system in which a current student is assigned a “buddy” with a prospective student. This can be a great way to create an initial social connection and have an avenue of support for a first year graduate student (Taub & Komives, 1998).
By enhancing graduate students’ relationships with their advisors, faculty, and peers, institutions may see an increase in graduate student satisfaction and health. Implementing programs and efforts that help to accomplish the goal of increasing the quality of these relationships should be at the forefront of graduate program departments and institutions as a whole. The support that would be gained from these relationships would certainly help to alleviate mental health concerns among graduate students. Several researchers shared that adequate and appropriate socialization will improve self-worth, decrease stigma, create a more successful transition, and decrease stress (Eisenburg et al., 2009; Longfield et al., 2006; Myers et al., 2012; Tokuno, 2008).

**Positive Psychology**

Positive psychology is defined as the study of optimal human functioning. The goals of positive psychology are to discover and to encourage the factors of life that allow individuals to thrive. The focus of positive psychology is on sources of psychological health, as opposed to disease and disorder (Sheldon, Frederickson, Rathunde, Csikszentmihalyi, & Haidt, 2000). The hope is that individuals can proactively build up the qualities that help them be successful and to cope with stress, instead of learning to survive only after stress or mental health struggles surface.

Researchers have studied the effect positive psychology has on the growth and development of students. Chickering and colleagues (2005) attested to the importance of fostering meaning and purpose within the college experience. By abiding by positive psychology strategies and efforts, students can experience emotional wellness, vitality, and meaningfulness. Additional research revealed that optimism and other positive emotions promote positive self-perceptions, awareness of personal limitations, and acceptance of personal responsibility for
altering controllable situations (Scheier, Weintraub, & Carver, 1986). This research provides evidence that happiness can positively contribute to the development and growth of students. Ways in which students can utilize these tactics and improve their health and well-being include committing acts of kindness and gratitude, creating goals related to personal health, participating in service opportunities, and promoting and engaging in social connections (Mather, 2010). Mather (2010) also provided perspective into how student affairs professionals can incorporate components of positive psychology into practice. By nurturing positive emotions and focusing on possibilities instead of problems, students can feel empowered to focus on their strengths rather than their weaknesses. One strategy that was influenced by the advances in positive psychology is known as mindfulness.

Mindfulness can be described as engaging in behaviors aimed at increasing present-moment awareness, acceptance, and engagement. It is a self-care practice that has been shown to reduce emotional distress and promote positive well-being (as cited in Myers et al., 2012). A specific program that has been developed to help teach mindfulness is called Mindfulness Based Stress Reduction (MBSR). The program has been used with counseling psychology students and appears to be effective in reducing stress, negative affect, anxiety, and rumination (Shapiro, Brown, & Biegel, 2007). This approach can lead to increases in positive affect and self-compassion. For graduate students, these results could be crucial to a student’s ability to persist through difficult moments during the graduate school experience. Overall, the participants in one study experienced improvements in their mental health (Shapiro et al., 2007). It is proposed that higher education institutions investigate the effects mindfulness has on students, and consider the benefits it could provide a campus.
The research clearly indicates several benefits of role modeling and encouraging the foundations of positive psychology. If an individual can alter his or her mindset to focus on the positive emotions and ability to combat stress and challenge, graduate students could potentially be able to better cope with mental health struggles while enduring the challenges associated with graduate school. It is strongly encouraged that higher education institutions examine the benefits of incorporating strategies and programs that reflect the foundations of positive psychology, such as mindfulness sessions, into their curricula or departments on campus. One aspect of positive psychology that deserves additional attention is the importance of self-care.

**Self-Care**

Practicing self-care should begin at an early age, and if it does, it can potentially help individuals feel more prepared to cope with stress and anxiety. Myers and fellow researchers (2012) discussed the implications of self-care practice on a graduate student’s health and experience. Partaking in and prioritizing sleep, exercise, social support, emotional regulation strategies, and mindfulness practice can help alleviate some of the mental health concerns with which graduate students are struggling. Paying attention to the value of holistic wellness is very important for the graduate student population, because all of the areas of a student’s life are interconnected (Myers, Sweeney, & Witmer, 2000). If a student is struggling in one aspect of his or her life, there is a strong likelihood that it will affect other aspects as well.

In order to help increase graduate students’ self-care practices, it is advised that interventions that incorporate time and stress management be emphasized (Hamaideh, 2011; Wyatt & Oswalt, 2013). Having these capabilities will ultimately allow for students to prioritize their own health and care. By promoting a healthy lifestyle to all students, and integrating these strategies into academic and the institutional goals, institutions can effectively address pertinent
mental health concerns (Wyatt & Oswalt, 2013). Hamaideh (2011) suggested that university administrators focus on workshops that address the common stressors experienced by graduate students. The promotion of self-care practices can be implemented as a preventative model, with the hopes of preparing graduate students for their future careers (Myers et al., 2012). Arizona State University has implemented a program called POWER, which stands for professional opportunities for wellness education and revitalization. This program includes peer mentoring opportunities, workshops, and social activities that promote self-care behaviors. This program can be used as a foundation to create training programs at institutions across the country (Dittmann, 2005). These programs and strategies can be especially helpful when graduate students are transitioning.

Understanding the importance of self-care especially during times of transition is crucial. This is the point at which self-care is going to be most in jeopardy. Forney and Davis (2002) shared information about transition sessions that help graduate students increase communication skills, empathy building, improving coping strategies, instill a sense of collegiality, and improve self-reflection. These sessions can be preventative measures for graduate students at risk of experiencing high stress and perhaps symptoms of mental health illness. Some graduate students seem to be lacking the fundamental skills and abilities to handle stress, potential that they have but are not using. Implementing programs such as this can be fundamental to the efforts in decreasing graduate student mental health problems. Western Illinois University and University of California-Irvine both have implemented programs that reflect some of the above suggestions.

Western Illinois University offers students in their student affairs graduate program the opportunity to participate in a transition course. The course curriculum includes topics such as transitioning, theories, goal-setting, group dynamics, and reflection. There is also an opportunity
to discuss any concerns that group members have as they navigate the transition process. Some of the learning outcomes of the course include improving coping strategies, communication, understanding, and empathy (Forney & Davis, 2002). University of California-Irvine (UCI) has a program entitled Graduate First Year Initiative (GFYI), which is designed to support the academic and co-curricular experiences of first-year graduate students at UCI. Specifics of the program include assistance in finding on-campus housing, orientation to campus, workshops on various topics, a mentoring program, and specialized programs for target populations, such as international students, graduate students with partners, and students with families (Tokuno, 2008). These programs should be duplicated and implemented at other institutions. It is recommended that if higher education institutions do design such programs or workshops that they should think critically about providing a variety of topics. The graduate student population is very diverse and they have a lot of differing needs. Making these programs optional, but highly encouraged, and personalized will be very important (Poock, 2004).

**Graduate Student Support Services**

As a graduate student who encountered a variety of challenges with the graduate student transition, including mental health struggles, it is a passion and priority of mine to raise awareness and to hopefully encourage higher education professionals to make a change. Graduate students are vital to the success of higher education institutions. They are in need of support, guidance, and service. The perspective from which this report was created is from that of a student affairs graduate student. When considering other areas of academia, it is probable that mental health concerns in such fields are even more intense and real. Higher education administrators are concerned about retention and funding, yet it appears that retaining a vital population may not be a focus. The next suggestion to be presented combines several areas of
research with personal experience, and it involves creating an office devoted to graduate student support.

The inference made from personal experience and hearing the perspectives of other graduate students at a variety of institutions is that many graduate students are not prepared for what the graduate school experience holds. There is nobody to blame for this, but there are improvements that need to be made. This section will include suggestions of how an office devoted to graduate student support services can help enhance the graduate student experience and potentially improve the mental health of graduate students. The first recommendation is relevant to students for the timeframe shortly after they decided to enroll in a program through graduation.

Before graduate students even arrive on campus, it is suggested that there is outreach from the institution, similar to the way undergraduate students are supported before even stepping foot on a college campus. This could be accomplished in a variety of ways. One idea includes having a graduate student retreat, in which graduate students can choose to come to campus early and cover some of the topics that were discussed in the above sections. Some of the most prevalent subjects to discuss before graduate students arrive to campus include: what to expect with transition, resources for graduate students, graduate student events, reflection, goal-setting, and coping strategies. Because there are logistics with this strategy that may be difficult to coordinate, for example graduate students travel from around the world to attend graduate school, this retreat may not be feasible. Providing the option to listen to these sessions online before arriving to campus is one solution. Another recommendation to help support graduate students before they arrive to campus involves coordinating a mentorship program. Several researchers have promoted this concept and revealed the health benefits of graduate students
having a support system at the institution (Boyle & Boice, 1998; Lawson & Fuehrer, 2001; Taub & Komives, 1998; Tokuno, 2008). Graduate students would be contacted by a member of the graduate student support services staff to enroll in a mentorship program. Kansas State University provides a mentorship program to first-year undergraduate students, called Guide to Personal Success (GPS). The program matches Kansas State faculty, staff, graduate students, and alumni volunteers with first-year undergraduate students. The mentors serve as a resource to help the student transition and gain professional advice and guidance (Guide to Personal Success, 2013). A mentoring program for first-year graduate students could resemble one such as GPS.

When graduate students arrive to campus, a quality orientation program needs to be provided to help with transition. The research emphasized the importance and opportunity orientation programs have in supporting graduate students (Boyle & Boice, 1998; Forney & Davis, 2002; Poock, 2004; Rimmer et al., 1982; Taub & Komives, 1998; Tokuno, 2008). In fact, Boyle and Boice (1998) focused on institutions that model the best practices for enculturating graduate students, and every institution referenced had a structured orientation. Several topics that were covered in the potential retreat could also be referenced at an orientation. It is highly desirable to have both an overall graduate student orientation as well as individual departmental orientations. In order for these to be well attended, it is crucial that they are accommodating and inclusive to graduate student needs. They also need to be advertised well and through several avenues, such as phone calls, physical mail, and e-mail correspondence. Poock (2004) suggested a variety of subjects to include in an orientation such as involving and inviting families, discussing finances, sharing resources and services, and being open about some of the transitional difficulties graduate students may face. It is essential to address the fact that each student will have a different experience, but normalizing the fact that several graduate students
may encounter difficulties, even mental health obstacles, can be very important in encouraging help-seeking behaviors.

There are several suggestions for best supporting graduate students while they are in the graduate program. It would be advised that at least one mental health counselor be employed by the counseling center or graduate student support services to specifically work with graduate students. It is such a unique population that it would be most beneficial to have a specialized health coordinator, as suggested by Soet and Sevig (2006). Another suggestion would include a graduate student support group that would begin at the start of each semester to hopefully aid in alleviating transitional struggles or to empower the development of essential life skills. Sadly, several college campus crises have involved graduate students. In a time when resources and funding are decreasing, it can be difficult to provide more programs. However, investing in this service would be a proactive approach that could result in saved lives and fewer crises. While in the program, graduate students could expect to receive updates about events and opportunities coordinated by the graduate student support services staff or partnering professionals. This office would coordinate closely with graduate program department heads, a graduate student council if it exists, and various graduate student organizations.

The graduate student support services office would collaborate with graduate student advisors. Helping to prepare and educate advisors is a logistical component of graduate student success that is often overlooked. Advisors should be skilled in addressing graduate student needs and understanding how to balance challenge with support in order to keep the best interest of the student in mind. Faculty and staff are often the primary people with whom a graduate student is in contact. Because of this, they need to understand how to communicate with graduate students and to be vulnerable and open to discussing the full graduate student experience. At the very
least, faculty and staff need to be knowledgeable enough about campus and community services to refer a student. This may not be a strength of all faculty and staff nor may it be their interest, but regardless, it is a skill that should be developed when working with the graduate student population. Among all eighteen to twenty-four year olds who commit suicide, one in five occurs on the same day as an acute life crisis, and one in four occurs within two weeks of a crisis. This means that nearly half of suicides occur on the same day or within two weeks of a life crisis (Silverman, 2008). This number speaks volumes to the importance of being observant and willing to reach out to students; it could make a significant difference in someone’s life.

As graduate students reach graduation, it is important to acknowledge the accomplishments that were made. Involving the support networks of graduate students in these celebrations should also be a consideration. The graduate student support services office would also help graduate students navigate the next transition whether that is for more formal education or a professional career. Providing direction and support should happen throughout the entirety of a graduate student’s experience.

The final responsibility of the graduate student support services office would be to assess the graduate student experience at the higher education institution. The faculty, staff, and administrators of a university should understand the needs of their graduate student population. There should also be an understanding of the perception of mental health on any given college campus. The results of this research should provoke the institution to consider changes that will help improve the graduate student experience. It is essential that upper level administrators know the reality of mental health issues on the campuses for which they make executive decisions. Several institutions have already developed graduate student services, and those institutions should be applauded. It is with high hopes that other institutions begin to recognize the need for
such an office and program. If these support services are implemented, institutions may see an increase in graduate student satisfaction, health, and retention.

**Conclusion**

This report has provided readers with a realistic view into the graduate student experience, specifically as it relates to graduate student mental health. There are professionals and institutions across the country that are doing all that they can to support this diverse and vulnerable student population. Hyun et al. (2006) suggested that institutions prioritize examining mental health issues on campus, but also share strategies that are effective with other institutions. Researchers advise that mental health resources be safeguarded for students, especially in a time when funding and resources are limited. With all that said, there are clearly improvements that can continue to be made. Graduate students need to spend time building the life skills that are going to allow them to cope with stress and other mental health issues. Higher education institutions need to provide more quality support services for graduate students. And as a society, the stigma associated with mental health and the decrease in mental health insurance coverage needs to be minimized. It is likely that the combination of these strategies will result in increases in graduate student health and satisfaction.

Tokuno (2008) recommended steps for institutions to take based on a generous amount of research he conducted. Among these steps are gaining the support of key players, researching the needs of each institution’s students, communicating often and effectively, and creating a sense of community of each campus. Achieving these goals is a collaborative effort. Providing adequate support and services for the graduate student population is a cause that is well worth the reward: healthy, satisfied, retained students.
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