FORDHAM | Graduate School of Arts and Sciences

GSAS *wellness*

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Graduate Student Mental Health and Wellness Survey Report

Spring 2022

Executive Summary

In October of 2021 GSAS conducted a survey of the graduate student population. Surveys were sent to all GSAS students and 21% responded.

The survey indicates that 71% of GSAS students score as depressed, 38% score as suffering from generalized anxiety, and only 27% are satisfied with their life. We also collected data on the predictors of these factors.

Top Predictors of **Satisfaction with Life**	1. Career Prospects 2. Academic Preparation 3. Overall Health	4. Social Support 5. Financial Confidence
Top Predictors of **Generalized Anxiety**	1. Overall Health 2. Hours Slept 3. Workload	
Top Predictors of **Depression**	1. Overall Health 2. Career Prospects 3. Hours Slept	
Top Predictors of **Academic Success**	1. Advising Quality 2. Institutional Climate 3. Career Prospects	4. Living Conditions
Overall **Top Predictors**	1. Overall Health 2. Career Prospects 3. Hours Slept	

Below are select qualitative concerns, and the frequency with which certain concerns were cited.

Financial Difficulty	30%
Healthcare, Mental Healthcare, Benefits	22%
Workload	22%
Social Support and Isolation	14%
Hostile Institutional Climate	8%
Mentorship and Advising	8%
Institutional Support	8%
Disability	5%

"I am struggling in my department. I am currently being haressed [sic] by someone in my own lab and the workload this semester has been overwhelming."

"I have to say that Fordham faculty have been more than disappointing over the years as steward's [sic] of graduate students' health and well being."

"Our lives are terrible as a part of this program an no one seems to care. I have never felt more burnt out or downtrodden in my entire life."

"Almost every graduate student I know has money anxieties and anxieties about having adequate time to complete our degrees."

Introduction

In the fall semester of 2021, GSAS launched a survey of its graduate student population to study mental health and wellbeing among graduate students. Research from other universities suggest that there is a significant mental health crisis in graduate student education. It is an intrinsic good for Fordham to provide for the wellbeing of its students. As a Jesuit university, Fordham is committed to *cura personalis*, the care of the whole person. According to Fordham's mission statement[1]

> *A Fordham education at all levels is student-centered,*
> *and attentive to the development of the whole person.*

In addition to being intrinsically valuable, it is instrumentally valuable for universities to promote wellbeing among its students. Many graduate students perform duties for the university and successful graduate students and workers make for a more successful university. Well students are more productive students and better contributors to the university.[2] Better mental health among students also promotes student retention and graduation rates.[3]

The best baseline we have for graduate student mental health and wellbeing is a 2018 study by Evans, et al. of 234 universities. This study found that 41% of graduate students scored moderate to severe anxiety, compared to 6% of the general population, and 39% of graduate students scored as depressed, compared to 6% of the general population.[4] Similar results were found by more in-depth research conducted by the University of California system and by Harvard University during the period 2004-2018. The GSAS survey instrument was based as closely as possible on these prior surveys. We expected, and found, that rates would be higher than in previous studies, as one study found the COVID-19 pandemic was associated with a 27.6% increase in depression and a 25.6% increase in

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[1] See https://www.fordham.edu/info/20057/about/2997/mission_statement, accessed January 13, 2022.

[2] Gabriela A Nagy et al., "Burnout and mental health problems in biomedical doctoral students," CBE—Life Sciences Education 18, no. 2 (2019): ar27.

[3] Andrew L Turner and Thomas R Berry, "Counseling center contributions to student retention and graduation: A longitudinal assessment.," Journal of College Student Development, 2000.

[4] Evans, Teresa M., Lindsay Bira, Jazmin Beltran Gastelum, L. Todd Weiss, and Nathan L. Vanderford. "Evidence for a mental health crisis in graduate education." Nature biotechnology 36, no. 3 (2018): 282-284.

anxiety globally.[5] Given the already elevated rates of anxiety and depression among graduate students, we expected that the mental health crisis in graduate education would be exaggerated further by the pandemic.

Survey Instrument

In October 2021, personalized and anonymized survey links were emailed out to all GSAS students. Out of 915 students who received these links, 194 students responded, for a response rate of 21%. Students were given one month to complete the survey.

The study aimed to do two things. First, to establish the rates of depression, anxiety, and wellbeing among graduate students. It is hoped that this survey will be redeployed every two years to monitor the state of graduate student mental health and well-being longitudinally. Secondly, this study aimed to discover correlates of depression, anxiety, and wellbeing in an effort to better inform Fordham's activities. We used three validated instruments to measure the response variables of depression, anxiety, and wellbeing, and constructed indicators, based on previous surveys, of nine explanatory variables. The complete survey instrument is reproduced in the appendix.

To measure wellbeing, the survey included the SWLS instrument, which measures satisfaction with life, an approximation of wellbeing. SWLS consists of five statements regarding life satisfaction, which respondents mark their agreement with using a 7 point Likert scale. With 35 possible points, 20 is a neutral score and 26 or above qualifying as satisfied or extremely satisfied. To measure depression, the survey included the CES-D-R-10, a ten question self-reported measure of depression scored based on the frequency of various symptoms using a 0 to 3 scale. With 30 as the maximum, a score of 10 or higher qualifies as experiencing symptoms of depression. To measure anxiety, the survey included the GAD-7, a seven question measure of generalized anxiety disorder, scored based on the frequency of various symptoms using a 0 to 3 scale. With a maximum score of 21, 15 or above qualifies as severe generalized anxiety, 10 or above qualifies as moderate generalized anxiety, and 5 or above qualifies as mild

[5] Santomauro, Damian F., Ana M. Mantilla Herrera, Jamileh Shadid, Peng Zheng, Charlie Ashbaugh, David M. Pigott, Cristiana Abbafati et al. "Global prevalence and burden of depressive and anxiety disorders in 204 countries and territories in 2020 due to the COVID-19 pandemic." *The Lancet* 398, no. 10312 (2021): 1700-1712.

generalized anxiety. The CES-D-R-10 and SWLS were used in the 2014 University of California study, and the GAD-7 was used in the 2018 study by Evans, et al., and in the 2020 Harvard report of a decade of internal research. By using these instruments we may more directly compare the situation at Fordham to the situation at other universities.

The nine explanatory variables we measured were health, living conditions, sleep, academic progress, academic engagement, financial confidence, career prospects, institutional climate, mentoring and advising, workload and social support. These variables were constructed based on previous studies at other universities. Health aggregates two questions regarding health quality and recent illness history. Living conditions aggregates two questions about satisfaction with living conditions. Sleep measures the number of hours students sleep on average. Academic progress aggregates three questions on degree progress and preparation and academic engagement aggregates four questions on engagement with academic work. Financial confidence aggregates three questions regarding financial confidence and security. Career prospects reports a single question regarding whether students are upbeat about career prospects. Institutional climate aggregates eight questions regarding belonging and the social climate in departments and at the university. Mentoring and advising aggregates six questions regarding the quality of mentoring, advising, and career development. Workload aggregates thirteen questions regarding workload and work-life balance. Social support uses the ISEL-12 instrument, which aggregates twelve questions regarding access to social support.

The survey also collected demographic information regarding race, gender, sexuality, degree type, disability status, and family situation. These questions were designed to help identify which students are experiencing the greatest needs, and which areas should be the focus of future GSAS mental health programming.

Results

As expected, the survey produced worrying results. 115 out of 162 respondents scored 10 or above on the CES-D-R-10, meaning that **approximately 71% of GSAS students qualify as depressed**. This rate is more than twice as high as the 35% rate of depressed students of UC

Berkeley, which used the same metric.[6] 60 out of 159 scored as suffering from moderate to severe generalized anxiety disorder, while another 48 out of 159 scored as suffering from mild generalized anxiety disorder, for rates of approximately 38% and 30%, respectively. Combined, **approximately 68% of students therefore scored as suffering from generalized anxiety of some form**. These rates are consistent with the 41% of graduate students who qualify under the same scale as found by Evans et al., though worse than rates at Harvard. **Only 27% of Fordham students scored as satisfied with their life or extremely satisfied**, while another 23% score as slightly satisfied, much lower than the 73% of UC students who scored as generally satisfied. Another worrying result found that ten students (11.9%) reported being the victim of a serious harassment or bias incident in the past 12 months by a faculty member, one student (~1%) reported being the victim of a serious incident of harassment or bias in the past 12 months by a member of the administration or staff, and two people (~2%) report being the victim of a serious incident of harassment or bias in the past 12 months by more than one of: faculty, administration or staff, or another student. Thus, **approximately 16% of students report being the victim of a serious bias incident by administration, faculty, or staff in the past 12 months.**

These bias incidents were uniformly distributed across ethnic, racial, and gender identity categories. However, female students, transgender students, and gender non-comforming students were disproportionately likely to be the victim of a bias incident.

75% of students reported seeking mental healthcare in the past year. However, students estimated that only 45% of the student body sought mental healthcare. Of those who sought help, 82% sough help off campus. One in five students expressed they did not know where to get help on campus. 37% of those who received help on campus were dissatisfied with the care they received, as opposed to 20% who received help off campus. The below chart lists the comparative frequency of depression, generalized anxiety, and life satisfaction among the various demographic groups we measured. Note that Ph.D. students face higher levels of depression and anxiety compared to Master's students, and that Ph.D. students who have advanced to candidacy have the most severe scores on all three indicators,

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[6] The Evans et al. and Harvard studies used the PHQ-9 instead of the CES-D-R-10, while the UC-wide survey used the CES-D-R-20. We chose the CES-D-R-10 as the UC Berkeley analysis was the most detailed of all previous studies of graduate student depression.

Demographic	Depression	Anxiety	Life Satisfaction
Base Rate	71%	38%	27%
Total Doctoral	**76%**	**45%**	27%
Candidacy	**85%**	**53%**	**18%**
Non-Candidacy	71%	**42%**	33%
Masters	65%	27%	40%
Male	70%	36%	33%
Female	69%	38%	32%
Other	**100%**	**57%**	29%
LGBT+	**84%**	**44%**	34%
Non-LGBT+	67%	37%	32%
White	71%	**41%**	31%
Black	66%	33%	33%
Asian	66%	25%	33%
Hispanic/Latino	**77%**	**39%**	39%
Other	70%	30%	40%
Disability	**85%**	**46%**	33%
No Disability	69%	35%	32%

with 85% scoring as depressed, 53% scoring as suffering from moderate to severe generalized anxiety, and only 18% scoring as satisfied with life. Students who were members of a gender and sexual minority likewise scored poorly on the depression and generalized anxiety indicators. In terms of sexual identity, 84% of LGBQ+ students scored as depressed, and 44% scored as suffering from generalized anxiety. In terms of gender identity, 100% of transgender, non-binary, and other gendered students scored as depressed, and 57% scored as suffering from generalized anxiety. These scores are more severe than the scores for Ph.D.students and LGBQ+ students; however, there were so few students in this category that this is not a statistically significant category. Nonetheless, thebase rate is indicative of a great need in this area. Surprisingly, there were no statistically significant correlations between racial or ethnic identity and depression, generalized anxiety, or satisfaction with life. There was a statistically significant correlation between students with a disability and depression and generalized anxiety, with 85% of students in this category scoring as depressed, and 46% of students in this category scoring as suffering from generalized anxiety.

Analysis

Each of our three explanatory variables and nine response variables were scored, and all but hours slept were standardized. We then performed several robust regressions. We regressed two models each for satisfaction with life, depression, and anxiety, as well as two models for academic success. We constructed the academic success variable by aggregating the academic engagement and academic preparation indicators. In total, we thus ran eight regressions, based on one restricted and one unrestricted model each of the four response variables. The unrestricted models simply regressed all explanatory variables, while the restricted models reproduced the models given by previous studies.

Below is a cross-correlation table of all variables we measured, with the exception of academic success, which is disaggregated here as Engagement and Preparation.

Table 1: Cross-correlation table

Variables	Anxiety	Satisfaction	Depression	Engagement	Preparation	Support	Career	Living	Advising	Climate	Health	Finances	Workload	Sleep
Anxiety	1.000													
Satisfaction	-0.557	1.000												
Depression	0.768	-0.612	1.000											
Engagement	-0.170	0.216	-0.213	1.000										
Preparation	-0.515	0.630	-0.528	0.299	1.000									
Support	-0.188	0.349	-0.274	-0.008	0.253	1.000								
Career	-0.399	0.576	-0.482	0.243	0.491	0.222	1.000							
Living	-0.249	0.399	-0.337	0.120	0.388	0.358	0.307	1.000						
Advising	-0.447	0.456	-0.375	0.299	0.650	0.163	0.402	0.221	1.000					
Climate	-0.408	0.494	-0.441	0.250	0.627	0.270	0.432	0.186	0.573	1.000				
Health	-0.452	0.467	-0.490	0.148	0.474	0.182	0.317	0.282	0.397	0.505	1.000			
Finances	-0.414	0.505	-0.393	0.083	0.504	0.133	0.446	0.330	0.340	0.356	0.270	1.000		
Workload	-0.480	0.506	-0.467	0.043	0.613	0.250	0.361	0.306	0.356	0.447	0.423	0.501	1.000	
Sleep	-0.380	0.233	-0.320	0.044	0.352	0.003	0.089	0.137	0.263	0.251	0.257	0.198	0.323	1.000

As one can see, there is a great deal of correlation between anxiety, depression, and life satisfaction and the various indicators we measured. The directionality of the correlations are also what we expect. Better quality advising, preparation, finances, health, etc, are correlated with less anxiety and depression, and more life satisfaction.

As stated, to test whether these correlations are statistically significant, we ran both unrestricted and restricted regressions. The results of these regressions are given on the next page. Every indicator except academic engagement tested as statistically significant in at least one regression for at least the 10% level. Some indicators tested as statistically significant on multiple regressions and at multiple significance levels. For the depression and life satisfaction regressions, the University of California found statistical significance for all variables in the restricted models. We were unable to reproduce these results, though this may have more to do with our small sample size and multicollinearity among our explanatory

variables. The restricted models tested for academic success and anxiety were based on our best guess based on the Harvard data and UC data, but we have no access to their analyses so we are less confident in these models. Each variable except Sleep (which measures average hours slept each night) is standardized and therefore in standard deviation units.

As we can see, with the exception of our model of anxiety, which neglected to include hours slept, and possibly academic success, which did not include satisfaction with living conditions, our empirical specifications captured every individually statistically significant explanatory variable. Nevertheless, the fuller models are more likely to be unbiased. It is likely that with more data many of the variables that were found to be statisticallysignificant in other studies would also appear as statistically significant in our sample. A combination of multicollinearity and small sample size is likely obscuring our results.

Table 2: Regression table

	(1) Depression	(2) Depression	(3) Anxiety	(4) Anxiety	(5) Satisfaction	(6) Satisfaction	(7) Success	(8) Success
Workload	-0.0970 (-1.17)		-0.158 (-1.44)	-0.195$^+$ (-1.81)	0.0982 (0.91)		0.148 (0.92)	0.174 (1.16)
Finance	-0.0884 (-1.04)	-0.103 (-1.28)	-0.120 (-1.24)	-0.127 (-1.31)	0.102 (1.19)	0.133$^+$ (1.74)	0.00225 (0.02)	0.0169 (0.14)
Health	-0.302*** (-3.61)	-0.296*** (-3.82)	-0.197* (-2.33)	-0.214* (-2.53)	0.167* (2.32)	0.184** (2.70)	0.00877 (0.06)	0.0180 (0.14)
Climate	-0.0797 (-0.89)		0.0456 (0.39)	0.0425 (0.35)	0.0213 (0.21)	0.0323 (0.32)	0.375* (2.20)	0.339* (2.04)
Advising	0.0532 (0.54)		-0.139 (-1.20)	-0.174 (-1.55)	-0.00500 (-0.05)	-0.00914 (-0.10)	0.547*** (4.17)	0.561*** (4.61)
Living	-0.0652 (-0.81)	-0.0309 (-0.40)	0.0361 (0.48)		0.0485 (0.67)	0.0524 (0.73)	0.188$^+$ (1.76)	
Career	-0.178$^+$ (-1.98)	-0.192* (-2.15)	-0.125 (-1.31)	-0.0891 (-0.98)	0.260** (2.73)	0.255** (2.65)	0.265* (2.03)	0.286* (2.30)
Support	-0.0388 (-0.51)	-0.109 (-1.46)	-0.0259 (-0.34)	-0.00803 (-0.11)	0.171* (2.06)	0.176* (2.16)	-0.145 (-1.24)	
Preparation	-0.0605 (-0.50)	-0.0552 (-0.56)	-0.0392 (-0.27)	-0.0593 (-0.39)	0.199 (1.60)	0.238* (2.15)		
Engagement	-0.0838 (-1.09)	-0.0975 (-1.45)	-0.0414 (-0.49)	-0.0255 (-0.30)	0.0504 (0.71)	0.0368 (0.54)		
Sleep		-0.157* (-2.42)		-0.155* (-2.04)		0.00190 (0.03)		0.0354 (0.31)
_cons	0.0153 (0.23)	1.015* (2.38)	0.994$^+$ (1.98)	0.0111 (0.15)	-0.0518 (-0.13)	-0.0403 (-0.66)	-0.166 (-0.22)	0.0710 (0.69)
R^2	0.427	0.436	0.388	0.369	0.545	0.542	0.470	0.456
N	131	132	130	131	130	131	130	134

t statistics in parentheses

$^+$ $p < 0.10$, * $p < 0.05$, ** $p < .01$, *** $p < .001$

In our analysis, the top correlates of depression by effect size are **overall health**, **career prospects**, and **hours slept**. The top correlates of anxiety are **overall health**, **hours slept**, and **workload**. The top correlates of satisfaction with life, our proxy for well-being, are **career prospects**, **academic preparation**, **overall health**, **social support**, and **financial confidence**. The top correlates of academic success are **advising quality**, **institutional climate**, **career prospects**, and **living conditions**. **Overall health**, **career prospects**, and **hours slept** are the most highly correlated with well-being and success across all regressions.

Inferring causation is difficult, as poor overall health and poor sleep hygiene may be effects of mental health issues rather than causes. Nonetheless, these two indicators are significantly correlated with poor mental health and Fordham should take steps to care for these. Career prospects and satisfaction with workload, the two other variables most correlated with depression and anxiety, are less likely to be directly affected by poor mental health, though they may be indirectly affected. It is notable that overall health and hours slept are less correlated with satisfaction with life and with academic success. To promote well-being and success, these other factors may be significant levers. Career prospects appears to be a great source of concern across most factors and unlike health and sleep is less likely to be directly affected by poor mental health. Rather it is more likely that concern or uncertainty over career prospects directly affects student mental health and wellbeing. Academic preparation, advising quality, institutional climate, and financial confidence also standout as factors worthy of attention given that they all relate to facets of the graduate experience for which Fordham is directly responsible. These factors are not as highly correlated with anxiety and depression, but are significant to success and wellbeing. Better providing for these factors could significantly improve success and wellbeing among graduate students.

To account for the apparent multicollinearity among explanatory variables, we ran joint significance tests on the variables in our models that did not test as statistically significant at the .1 significance level. For depression, satisfaction with life, and academic success, if we run a restricted regression by dropping all non-statistically signficant variables and compute an f-score from this, we find that the dropped variables are

not jointly statistically significant. Thus, we have insufficient data to confirm the findings from the UC system for these variables. For anxiety, we tested against an unrestricted model that includes all the variables in our model, plus sleep. Against this model we tested a restricted model dropping workload, financial confidence, institutional climate, advising, career prospects, social support, academic preparation, and academic engagement. We found that these variables are jointly statistically significant at the .05 level. If we run a restricted model but without dropping workload, since we have some evidence that it is statistically significant, then we find that the remaining variables are jointly statistically significant at the .1 level. This indicates that all or most of these variables are statistically significant for our model of anxiety.

Qualitative Evidence

In addition to collecting statistical data, we had several open response questions. One such question gave students an opportunity to share whatever they wish or anything that the survey brought to mind.

In response to this, students expressed a variety of concerns. A number of students asked for higher pay and a lighter workload. Some students mentioned instances of harassment or bias in their department. A number of students expressed that the mental healthcare and healthcare provided by the University is inadequate and requested better benefits. A number of students identified issues with department specific policies, which have been passed on to departments. A number of students expressed concerns over isolation or the lack of integration of graduate students into the life of the university.

Of the 37 comments, 11 mention financial concerns or difficulties, more than any other concern. While financial concern was less statistically significantly correlated with depression and academic success it was significantly correlated with life satisfaction at the 10% level, and was jointly statistically significant, though not individually statistically significant for anxiety. Given the frequency with which it is raised as a concern by students, our survey may have undermeasured this concern. Increasing student financial aid may have a significant impact on mental health and wellbeing, either directly or indirectly. Increased financial resources may make it possible for students to directly meet their own physical and mental health needs. Everyone's needs are likely slightly different and every person is more acquainted with their needs than what we can learn through surveys. Giving individuals more financial resources may be a cost-effective way of ensuring that people can directly pursue their

own wellbeing and academic success.

Eight students referenced better health insurance, mental and physical healthcare, or better benefits. As the second most referenced concern, this amplifies the financial concerns raised. No student referenced poor sleep or poor physical health in their comments, despite these factors being significantly correlated with poor mental health. It is possible that provision of better physical and mental health insurance would improve both overall health and mental health. Eight students also identified an unmanageable workload as an area of concern. These responses reinforce our statistical evidence regarding workload. Five students referenced lack of social support or isolation as a concern. Three referenced a hostile institutional climate, and three referenced advising or mentorship as an area of concern. Three students referenced other areas of institutional support, such as provision of offices or department requirements as an area of concern. Two students referenced frustrations regarding support for disabled students.

Overall, the qualitative evidence, though limited, enhances and supports our statistical picture. Many of the comments express genuine anguish or report mental health difficulties. Fordham should take these concerns seriously and develop a plan to address them.

Conclusion

Our results confirm that there is a crisis in graduate student mental health and suggest that conditions at Fordham post-pandemic are worse than pre-pandemic conditions at other universities. This crisis is most acute for Ph.D. students, especially candidates, LGBTQ+ students, and students with a disability.

Students at Fordham are struggling. We recommend that Fordham University devotes more resources to caring for graduate students. A number of identified factors can be directly addressed through provision of more resources, such as financial confidence, living conditions, and access to physical and mental healthcare. Increasing pay and expanding access to healthcare and mental healthcare whether through the university, through improved insurance, or through purchasing an app would likely help students a great deal.

Another set of identified factors deal with issues related to the policies and climate of Fordham University. Concerns including harassment, advising, institutional climate, and workload all represent a need for greater internal support and reform. Faculty should be engaged on this

subject and informed of the extent of the crisis, such that the quality of the institutional climate and advising can be improved and so that bias incidents can be eliminated. Finally, there is a category of concerns that are not directly within Fordham's control. Most significant in this category is career prospects, but social support and isolation may also fall here. Overall health and sleep may also be in this category, though these factors may be affected by other factors such as workload or access to health resources. This category of factors may not be directly within Fordham's control, but greater resource allocation to these areas may help students manage these factors.

We recommend that Fordham takes steps to address these three categories. Where more material resources are needed, they should be afforded, whether that is through increased financial aid, or increased access to healthcare and mental health services. One student suggest purchasing a subscription to a counseling app that offers free 24/7 mental healthcare to students. Fordham could fund extra counselors at the counseling center devoted solely to graduate student wellness. Where policy or institutional culture is an issue, Fordham should take steps to change these issues. Departments could operate their own climate committees with a mandate for attending to the mental healthcare of students. Departments could engage in their own monitoring of issues of climate and advising in their own departments. One innovative proposal is a program whereby instead of professors cancelling class sessions when they are away, those class sessions could be replaced with a tutorial run by a mental health expert. Departments should also take steps to reduce graduate student workload. 38% of students reported working more than 40 hours per week on Fordham work, with some students reporting as many as 80 hours a week on Fordham work. Greater financial aid may also help with workload, as 34% of students reported an off campus job, which further increases student workload. Where support is needed, such as in finding safe living conditions, or in reducing career anxiety, that support should be provided. Departments could identify the most common non-academic jobs for their graduates and offer more training and preparation for non-academic jobs. Where support resources are already available, they should be publicized more. Finally, a committee to oversee progress on these issues made up of a representative from CPS, GSAS, the graduate student body, and the faculty could be formed to carry this work forward.

Appendix:

GSAS Mental Health and Wellness Survey Instrument

Start of Block: Introduction

Q1.1 This survey on mental health and well-being is an initiative of GSAS Wellness, a program run by Fordham's Graduate School of Arts and Sciences.

This survey will include questions on the academic, professional, social, and physical as well as the psychological and emotional aspects of your experience as a GSAS student.

We hope that this research and your feedback will help us to better understand and serve the GSAS student body.

Thank you for your time and participation!

Q1.2 The survey is completely voluntary and should take about 15 to 20 minutes to complete. All responses will be anonymous. We will not ask for information that could be used to identify you individually. We will only ever provide a summary report of the results of this survey and individual responses will never be reported. No individual will be identifiable from these results.

Though some questions are of a sensitive nature, please answer them as honestly as you can and to the best of your ability. If you have questions about the survey at any time, please contact gsaswellness@fordham.edu. If you would like to schedule an appointment with Counseling and Psychological Services please call 718-817-3725 for Rose Hill or 212-636-6225 for Lincoln Center. To speak with a crisis counselor, text HELLO to 741-741.

Please click the button below to continue. If you are interrupted while taking the survey, you may return and finish it any time by clicking the link sent to you in your email.

End of Block: Introduction

Start of Block: Satisfaction with Life

Q2.1 Indicate your agreement or disagreement with each item by selecting the appropriate response. Please be open and honest in your responding.

	Strongly disagree (1)	Disagree (2)	Somewhat disagree (3)	Neither agree nor disagree (4)	Somewhat agree (5)	Agree (6)	Strongly agree (7)
In most ways my life is close to my ideal. (1)	○	○	○	○	○	○	○
The conditions of my life are excellent. (2)	○	○	○	○	○	○	○
I am satisfied with life. (3)	○	○	○	○	○	○	○
So far I have gotten the important things I want in life. (4)	○	○	○	○	○	○	○
If I could live my life over, I would change almost nothing. (5)	○	○	○	○	○	○	○

End of Block: Satisfaction with Life

Start of Block: Depression (CES-D-R 10)

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Q3.1 Below is a list of some of the ways you may have felt or behaved. Please indicate how often you have felt this way during the past week by checking the appropriate box for each question.

	Rarely or none of the time (1)	Some or a little of the time (2)	Occasionally or a moderate amount of the time (3)	All of the time (4)
I was bothered by things that don't usually bother me. (1)	○	○	○	○
I had trouble keeping my mind on what I was doing. (2)	○	○	○	○
I felt depressed. (3)	○	○	○	○
I felt that everything I did was an effort. (4)	○	○	○	○
I felt hopeful about the future. (5)	○	○	○	○
I felt fearful. (6)	○	○	○	○
My sleep was restless. (7)	○	○	○	○
I was happy. (8)	○	○	○	○
I felt lonely. (9)	○	○	○	○
I could not "get going". (10)	○	○	○	○

End of Block: Depression (CES-D-R 10)

Start of Block: Generalized Anxiety (GAD 7)

Q4.1 Over the past two weeks how often have you been bothered by the following problems?

	Not at all (1)	Several days (2)	Over half the days (3)	Nearly every day (4)
Feeling nervous, anxious, or on edge. (1)	○	○	○	○
Not being able to stop or control worrying. (2)	○	○	○	○
Worrying too much about different things. (3)	○	○	○	○
Trouble relaxing. (4)	○	○	○	○
Being so restless that it's hard to sit still. (5)	○	○	○	○
Becoming easily annoyed or irritable. (6)	○	○	○	○
Feeling afraid as if something awful might happen. (7)	○	○	○	○

Display This Question:

If Over the past two weeks how often have you been bothered by the following problems? = Nearly every day

Or Over the past two weeks how often have you been bothered by the following problems? = Over half the days

Or Over the past two weeks how often have you been bothered by the following problems? = Several days

Q4.2 Your responses indicate that you have experienced one or more of the above for several days or more over the past week. How difficult has this made it for you to do your work, take care of things at home, or get along with other people?

○ Not difficult at all (1)

○ Somewhat difficult (2)

○ Very difficult (3)

○ Extremely difficult (4)

End of Block: Generalized Anxiety (GAD 7)

Start of Block: Satisfying Basic Needs

Q5.1 Below are statements with which you may agree or disagree. Indicate your agreement or disagreement with each item by selecting the appropriate response.

	Strongly disagree (1)	Disagree (2)	Somewhat disagree (3)	Neither agree nor disagree (4)	Somewhat agree (5)	Agree (6)	Strongly agree (7)
Where I live, I feel safe. (1)	○	○	○	○	○	○	○
Where I live, I'm satisfied with my living conditions. (2)	○	○	○	○	○	○	○
My housing situation has weighed on me lately. (3)	○	○	○	○	○	○	○
On campus, I feel safe. (5)	○	○	○	○	○	○	○
Over the past two weeks, I've been able to get enough sleep at night to feel fully alert and well rested during the day. (6)	○	○	○	○	○	○	○
I'm confident about my financial situation. (7)	○	○	○	○	○	○	○

I can get by financially without having to cut back on too many of the things that are important to me. (8)	○	○	○	○	○	○	○
I've been concerned about money lately. (9)	○	○	○	○	○	○	○

JS ✳

Q5.2 About how many hours of sleep were you able to get each night over the past two weeks, on average?

_____

Q5.3 Over the past two weeks, would you say that you've gone to bed and woken up at consistent times every day, or that it has varied?

○ Consistent times (1)

○ It has varied a little (2)

○ It has varied some (3)

○ It has varied a lot (4)

Q5.4 How has your overall health been this term?

○ Very Poor (1)

○ Poor (2)

○ Fair (3)

○ Good (4)

○ Very Good (5)

Q5.5 Have you been sick or ill this term?

○ Yes (1)

○ No (2)

End of Block: Satisfying Basic Needs

Start of Block: Succeeding Academically

Q6.1 Below are statements about your academic experience with which you may agree or disagree. Indicate your agreement or disagreement with each item by selecting the appropriate response.

	Strongly disagree (1)	Disagree (2)	Somewhat disagree (3)	Neither agree nor disagree (4)	Somewhat agree (5)	Agree (6)	Strongly agree (7)
I'm on track to complete my degree program on time. (1)	○	○	○	○	○	○	○
I'm well prepared for the work required to complete my program. (2)	○	○	○	○	○	○	○
I'm upbeat about my post-graduation career prospects. (3)	○	○	○	○	○	○	○
I'm not very engaged by my day-to-day work (4)	○	○	○	○	○	○	○
I have the space and the resources I need in the university to succeed academically (5)	○	○	○	○	○	○	○
My academic work is meaningful and inspires me. (6)	○	○	○	○	○	○	○
My academic work stretches and challenges me intellectually. (7)	○	○	○	○	○	○	○

I feel well-prepared by the training I've received in my program. (8)	○	○	○	○	○	○	○
This term, my academic work involves a high degree of collaboration. (9)	○	○	○	○	○	○	○

End of Block: Succeeding Academically

Start of Block: Mentoring and Advising

Q7.1 Below are statements about career resources, mentoring, and advising with which you may agree or disagree. An academic advisor is someone who formally provides direction or guidance on your academic work, while a mentor is someone who either formally or informally offers support and

guidance. Indicate your agreement or disagreement with each item by selecting the appropriate response.

	Strongly disagree (1)	Disagree (2)	Somewhat disagree (3)	Neither agree nor disagree (4)	Somewhat agree (5)	Agree (6)	Strongly agree (7)
I'm satisfied with the advising I receive in my program. (1)	○	○	○	○	○	○	○
I'm satisfied with the mentoring I receive in my program. (2)	○	○	○	○	○	○	○
I'm satisfied with the career support I receive in my program. (3)	○	○	○	○	○	○	○
I'm satisfied with the opportunities my department has offered for fostering mentoring relationships. (4)	○	○	○	○	○	○	○
I'm satisfied with the opportunities my department has offered for career development. (5)	○	○	○	○	○	○	○
I'm satisfied with the opportunities GSAS has offered for career development. (6)	○	○	○	○	○	○	○

Q7.2 Do you have an academic advisor, or a relationship with someone in your department that you would consider a mentoring relationship?

◯ Yes (1)

◯ No (2)

Q7.3 My advisor or mentor…

	Strongly disagree (1)	Disagree (2)	Somewhat disagree (3)	Neither agree nor disagree (4)	Somewhat agree (5)	Agree (6)	Strongly agree (7)
doesn't really advocate for me. (1)	○	○	○	○	○	○	○
allows me to set my own priorities. (2)	○	○	○	○	○	○	○
is responsive to my messages and requests. (3)	○	○	○	○	○	○	○
provides advice and resources in support of my goals and ambitions. (4)	○	○	○	○	○	○	○
seems genuinely interested in my personal well-being. (5)	○	○	○	○	○	○	○
seems genuinely interested in my financial well-being. (6)	○	○	○	○	○	○	○
is actively involved in my academic training. (7)	○	○	○	○	○	○	○
conveys a sense of respect for me as an individual. (8)	○	○	○	○	○	○	○

is an asset to my career and professional development. (9)	○	○	○	○	○	○	○
impedes my career development. (10)	○	○	○	○	○	○	○
shares information about career opportunities within academia. (11)	○	○	○	○	○	○	○
shares information about career opportunities outside academia. (12)	○	○	○	○	○	○	○

Q7.4 Thinking back to last term, how often did you and your advisor or mentor devote time specifically to discussing your academic or professional situation (For example, your academic or professional goals, your classes, exams, degree progress or career)?

○ 0 times (1)

○ 1 time (2)

○ 2 times (3)

○ 3-4 times (4)

○ 5-6 times (5)

○ More than 6 times (6)

Q7.5 When I graduate, I plan to seek employment...

○ Inside academia (1)

○ Outside academia (2)

○ Both (3)

End of Block: Mentoring and Advising

Start of Block: Workload and Work-Life Balance

Q8.1 Below are statements about your work-life balance with which you may agree or disagree. Indicate your agreement or disagreement with each item by selecting the appropriate response.

	Strongly disagree (1)	Disagree (2)	Somewhat disagree (3)	Neither agree nor disagree (4)	Somewhat agree (5)	Agree (6)	Strongly agree (7)
I am satisfied with my work-life balance. (1)	○	○	○	○	○	○	○
I feel that my workload is manageable. (2)	○	○	○	○	○	○	○
My work interferes with my sleep schedule. (3)	○	○	○	○	○	○	○
I find it easy to complete my work. (4)	○	○	○	○	○	○	○
I am not required to do tasks that are too challenging for me. (5)	○	○	○	○	○	○	○
I feel like there is a clear distinction between my graduate work and my life. (6)	○	○	○	○	○	○	○
My work does not compete with other obligations. (7)	○	○	○	○	○	○	○
I feel anxious about the work I have to do. (8)	○	○	○	○	○	○	○
Procrastination is not a problem for me. (9)	○	○	○	○	○	○	○

I find it easy to keep a regular work schedule. (10)	○	○	○	○	○	○	○
I find my work draining. (11)	○	○	○	○	○	○	○
I can avoid working on evenings and weekends if I want to. (12)	○	○	○	○	○	○	○
Fordham should take steps to reduce the graduate workload. (13)	○	○	○	○	○	○	○

Q8.2 I usually do my Fordham work...

○ On campus (1)

○ Off campus (2)

Q8.3 Do you have an off-campus job?

○ Yes (1)

○ No (2)

JS ✳

Q8.4 On average, how many hours a week do you spend on Fordham work?

_____

End of Block: Workload and Work-Life Balance

Start of Block: Climate and Belonging

Q9.1 Below are statements about the climate of the graduate school with which you may agree or disagree. Indicate your agreement or disagreement with each item by selecting the appropriate response.

	Strongly disagree (1)	Disagree (2)	Somewhat disagree (3)	Neither agree nor disagree (4)	Somewhat agree (5)	Agree (6)	Strongly agree (7)
In my graduate program, I feel valued and included by my peers. (1)	○	○	○	○	○	○	○
In my graduate program, I feel valued and included by the faculty. (2)	○	○	○	○	○	○	○
In my graduate program, I feel valued and included by the administration and staff. (3)	○	○	○	○	○	○	○
My graduate program keeps hassles and administrative paperwork to a minimum, freeing me to focus on my academic work. (4)	○	○	○	○	○	○	○
There is a strong sense of community in my graduate program. (5)	○	○	○	○	○	○	○

There is a strong sense of community among graduate students in the university. (6)	○	○	○	○	○	○	○
My graduate program is hostile toward students and the concerns they raise. (7)	○	○	○	○	○	○	○
The university is hostile toward students and the concerns they raise. (8)	○	○	○	○	○	○	○

Q9.2 Over the past twelve months, have you been on the receiving end of a significant instance of bias, discrimination or harassment by someone in your graduate program?

○ Yes, by another student (1)

○ Yes, by a faculty member (2)

○ Yes, by a member of the administration or staff (3)

○ Yes, by more than one of these (4)

○ No (5)

○ Unsure (6)

End of Block: Climate and Belonging

Start of Block: Well-Being Maintenance

Q10.1 I know where to get help on campus...

	Strongly disagree (1)	Disagree (2)	Somewhat disagree (3)	Neither agree nor disagree (4)	Somewhat agree (5)	Agree (6)	Strongly agree (7)
if I have a health or medical need. (1)	◯	◯	◯	◯	◯	◯	◯
if I have a counseling, psychological or other mental health need. (2)	◯	◯	◯	◯	◯	◯	◯

Q10.2 Have you received mental health care, such as seeing a counselor or psychiatrist, over the past twelve months?

◯ Yes, through the University. (1)

◯ Yes, from a non-University provider. (2)

◯ No (3)

Q10.3 How satisfied are you with the care you received?

○ Very Dissatisfied (1)

○ Dissatisfied (2)

○ Slightly Dissatisfied (3)

○ Neither Satisfied nor Dissatisfied (4)

○ Slightly Satisfied (5)

○ Satisfied (6)

○ Very Satisfied (7)

JS ✳

Q10.4 What percentage of graduate students do you think have received mental health care, such as seeing a counselor or psychiatrist, over the past twelve months?

_____

Q10.5 Is there anything, large or small, that the university could do to make it easier for you to access health or mental health care? If so, explain briefly.

_____

_____

_____

_____

_____

Q10.6 About how many days in the past week did you…

	0 Days (1)	1 Day (2)	2 Days (3)	3 Days (4)	4 Days (5)	5 Days (6)	6 Days (7)	7 Days (8)
exercise for more than 20 minutes? (1)	○	○	○	○	○	○	○	○
hang out with friends or participate in a social group or activity? (2)	○	○	○	○	○	○	○	○
work on a hobby, skill or talent for personal enrichment? (3)	○	○	○	○	○	○	○	○
volunteer with a charity or spend time helping others? (4)	○	○	○	○	○	○	○	○
eat plenty of fresh fruits and vegetables? (5)	○	○	○	○	○	○	○	○
engage in a religious or spiritual practice? (6)	○	○	○	○	○	○	○	○
skip one or more meals? (7)	○	○	○	○	○	○	○	○
drink alcohol? (8)	○	○	○	○	○	○	○	○
use tobacco? (9)	○	○	○	○	○	○	○	○

Q10.7 What are some of the things you do on a regular basis to maintain your well-being? Is there anything you'd particularly recommend to other graduate students? A brief answer is fine.

_____

_____

_____

_____

_____

Q11.1 Below are a list of statements each of which may or may not be true about you. For each statement, select "definitely true" if you are sure it is true about you and "probably true" if you think it is

true but are not absolutely certain. Similarly, you should circle "definitely false" if you are sure the statement is false and "probably false" if you think it is false but are not absolutely certain.

	Definitely false (1)	Probably false (2)	Probably true (3)	Definitely true (4)
If I wanted to go on a trip for a day (for example, to the country or mountains), I would have a hard time finding someone to go with me. (1)	○	○	○	○
I feel that there is no one I can share my most private worries and fears with. (2)	○	○	○	○
If I were sick, I could easily find someone to help me with my daily chores. (3)	○	○	○	○
There is someone I can turn to for advice about handling problems with my family. (4)	○	○	○	○
If I decide one afternoon that I would like to go to a movie that evening, I could easily find someone to go with me. (5)	○	○	○	○
When I need suggestions on how to deal with a personal problem, I know someone I can turn to. (6)	○	○	○	○
I don't often get invited to do things with others. (7)	○	○	○	○

If I had to go out of town for a few weeks, it would be difficult to find someone who would look after my house or apartment (the plants, pets, garden, etc.). (8)

    ○   ○   ○   ○

If I wanted to have lunch with someone, I could easily find someone to join me. (9)

    ○   ○   ○   ○

If I was stranded 10 miles from home, there is someone I could call who could come and get me. (10)

    ○   ○   ○   ○

If a family crisis arose, it would be difficult to find someone who could give me good advice about how to handle it. (11)

    ○   ○   ○   ○

If I needed some help in moving to a new house or apartment, I would have a hard time finding someone to help me. (12)

    ○   ○   ○   ○

End of Block: Social Support (ISEL-12)

Start of Block: Demographic and Open Response Questions

Q12.1 Below are some demographic questions. Responses to these questions will not be used to identify you in any way, but only to help inform GSAS as we hope to better serve the graduate student body.

Q12.2 What is your race/ethnicity? (Check all that apply)

○ African American, Black (1)

○ Asian (2)

○ Hispanic, Latino (3)

○ Native American, Alaskan Native (4)

○ Pacific Islander (5)

○ White (6)

○ Other (7)

Q12.3 How do you describe your gender identity?

○ Female (1)

○ Male (2)

○ Trans female/Trans woman (3)

○ Trans male/ Trans man (4)

○ Genderqueer/Gender non-conforming (5)

○ Different identity (Please specify) (6) _____

Q12.4 How do you describe your sexual identity?

○ Heterosexual or straight (1)

○ Gay or lesbian (2)

○ Bisexual (3)

○ Not listed above (Please specify) (4) ....

Q12.5 If you identify as LGBT+, do you feel comfortable being identified as such, or "out" in your graduate program?

○ Yes (1)

○ No (2)

○ Not applicable (3)

Q12.6 Are you married or in a domestic partnership?

○ Yes (1)

○ No (2)

Q12.7 Are you a parent?

○ Yes (1)

○ No (2)

Q12.8 Are you a caregiver?

○ Yes (1)

○ No (2)

Q12.9 I'm able to balance my work and family commitments.

○ Strongly Disagree (1)

○ Disagree (2)

○ Slightly Disagree (3)

○ Neither Agree nor Disagree (4)

○ Slightly Agree (5)

○ Agreee (6)

○ Strongly Agree (7)

Q12.10 My family feels supported in this community.

○ Strongly Disagree (1)

○ Disagree (2)

○ Slightly Disagree (3)

○ Neither Agree nor Disagree (4)

○ Slightly Agree (5)

○ Agreee (6)

○ Strongly Agree (7)

Q12.11 What is your ultimate degree objective in your current program?

○ Doctoral Degree (1)

○ Master's Degree (2)

Display This Question:

If What is your ultimate degree objective in your current program? = Doctoral Degree

Q12.12 Have you advanced to candidacy?

○ Yes (1)

○ No (2)

Display This Question:

If What is your ultimate degree objective in your current program? = Doctoral Degree

Q12.13 I'm confident I'll have adequate funds to complete my dissertation research

○ Strongly Disagree (1)

○ Disagree (2)

○ Slightly Disagree (3)

○ Neither Agree nor Disagree (4)

○ Slightly Agree (5)

○ Agree (6)

○ Strongly Agree (7)

Q12.14 Do you have a disability?

○ Yes (1)

○ No (2)

Q12.15 We'd like to hear from you. If any thoughts or feelings occurred to you while taking this survey that you'd like to share, please take a moment now to do so. We also encourage you to note specific ideas you may have for improving graduate student well-being. Write as much or as little as you'd like.

_____

_____

_____

_____

_____

Q12.16 If you have any feedback or suggestions regarding the survey itself, please let us know here. The feedback you provide will be used to improve future versions of the survey.

_____

_____

_____

_____

_____

End of Block: Demographic and Open Response Questions

Start of Block: Final Question

Q13.1 Are you ready to complete the survey?

If yes, then click next. If no, click back.

End of Block: Final Question