

Mental health has long been a challenge for grad students. COVID-19 has made it harder

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When Lauren Langbein became a doctoral student in cell biology at Thomas Jefferson University in Philadelphia in 2014, she was used to being a stellar student—she had always excelled in classrooms and labs.



But by the end of 2016, her research project was falling apart, and Langbein, a native of Monmouth County, N.J., and a perfectionist, began comparing her failures with her peers' successes. She struggled to sleep. Lost weight. Experienced near-constant anxiety, which soon became full-blown panic attacks.

"The pressure started adding up and my mental health snowballed," said Langbein, 28. "Before this, I took a mental health day here and there but didn't really get time off. I didn't want to disclose the issues I was dealing with because I didn't want people to think I didn't have drive."

Soon after, she began seeing a therapist, who diagnosed her with obsessive-compulsive personality disorder (OCPD) and panic disorder. She also began writing about her experience as someone who struggles with mental health in a blog she named Anxious in Academia.

"I wanted to talk about the fact that this is really hard," Langbein said.

"Academia itself is not conducive to mental health. Let's not pretend it's easy."

Although COVID-19 has caused mental health to deteriorate across all age groups in the United States, young people have felt the symptoms most keenly. Graduate students, who already experience rates of anxiety and depression six times greater than the general population, are coping with a shrinking job market and huge changes to their workplaces as a result of the pandemic, leading some to call for a systemic change in how mental health is addressed in academia.

Even before the pandemic began, there was mounting evidence that mental health among graduate students was a problem, due to how hard it can be to maintain a <u>work-life balance</u>, "imposter" syndrome, harassment, and discrimination. The University of Pennsylvania has seen 14 <u>student</u> suicides over the last six years—five of them have been



graduate students.

Last November, *Nature* surveyed more than 6,300 early-career researchers from around the world and found that 36% of participants had sought help for anxiety or depression caused by their Ph.D. studies. In 2018, a Harvard University study found that one in 10 doctoral students in economics programs thought about suicide over a two-week period. A Duke University study, also published in 2018, reported that half of biomedical doctoral students met the threshold for at least one clinical diagnosis of a mental health condition in the last year, but less than half of those students sought out professional help.

Eliminating the stigma surrounding mental health issues in academia was one of the reasons why Susanna Harris created Ph.D. Balance, an online space where graduate students can share candidly about their struggles. Harris struggled with depression and anxiety while she was a doctoral student in microbiology at the University of North Carolina at Chapel Hill, and knew how isolating the experience could be.

"There's a big difference between the amount of community we're given, compared to undergrads," said Harris, who graduated in May.
"Undergrads go through really intense periods of stress, but graduate students have that feeling all year round. And there's survivor bias from the people managing us—this idea of 'I did it, so you can do it.' If we step back from that, it's no surprise that people are falling apart."

Graduate students of color are at particular risk, said Tania Czarnecki, the executive director of counseling at Drexel University's Office of Counseling and Health Services. While they can be most affected by issues like "imposter" syndrome, where students fear they'll be outed as frauds, they are the least likely to ask for help.

"Grad students are pulled in a lot of different directions," Czarnecki



said. "Sometimes other things going on in their lives are not taken into consideration, so they just have to perform at a really high level. When we think about our grad students of color, sometimes they feel responsible to represent a collective group and do even more, in the midst of feeling loneliness or isolation from not seeing other students or faculty that look like them."

Czarnecki said that after the counseling center transitioned to telehealth services in March, there's been a more concerted effort to make sure graduate students know what resources are available.

"I'm wondering if this opens up a whole new range of possibilities," she said. "Before, it was a challenge for many of them to make the time to go to the counseling center amidst having to be in lab or class."

When Karuna Meda lost her mother to cancer during her fourth year in a doctoral program in neuroscience at the University of California-San Francisco, she began blogging about her grief and depression. After she became more open about her own struggles, she said, other students began confiding in her.

"It exposed me to how rampant poor mental health is in grad school," said Meda, now a science writer at Jefferson. "Everyone was having a hard time, but we used euphemisms like 'third-year slump' or 'I'm feeling unmotivated.' There wasn't a lot of honesty or openness. People were really afraid to say they were depressed."

Meda, who finished her Ph.D. in 2017, said that many graduate schools had a culture that "struggling is a rite of passage." But that's changing, she said, thanks to grassroots movements taking place on Twitter and Instagram.

"I've talked to an adviser at Jefferson whose approach was so different



from what I had seen when I was in grad school," Meda said. "For example, he said he tries not to jump straight to results when approaching his students and trainees—instead he asks about how they're doing."

Finding an empathetic principal investigator (PI) was a priority when Hannah Loo, a 25-year-old Penn doctoral student studying neuroscience, applied to programs. She raised the issue of mental health at every interview she went to. After Loo arrived at Penn in fall 2019, she also began seeing a psychiatrist.

"I heard so much about how grad school makes you sad and depressed and breaks your spirit," said Loo, who has obsessive-compulsive disorder (OCD). "I was aware that my family history and experience made it more likely for me to experience these issues, and I wanted to give myself the best chance at success by going somewhere where I could feel supported."

Harris, the recent Chapel Hill Ph.D., pointed out that most professors mentoring graduate students have not been trained to be managers. If professors don't establish a work environment where students feel comfortable speaking up about mental health concerns, it can become toxic, she said.

"Professors will say, 'I don't know what to do when my student is struggling,'" said Harris, who works in science communications. "We should be teaching professors how to have these conversations so they know what to do in those situations."

Brandon Orzolek, a 23-year-old doctoral student in organic chemistry at Penn, agreed, saying that many students feel as if they can't be open with their advisers about their struggles. Orzolek, who just began his second year, said that although many faculty members say they care about



mental health issues, acting upon what graduate students share about their struggles is what ultimately helps them feel supported.

"A lot of younger PIs are more understanding about mental health and work-life balance," said Orzolek, who has struggled with depression and anxiety since high school. "That gives me a lot of hope for what the future will look like for grad students. Academia changes at a snail's pace, but the momentum is in the right direction."

Loo said that even though universities are beginning to take the mental health of graduate students more seriously by starting conversations about it, more must be done.

"I would love to see more questions being raised about how we can change the current structure, how we can make people less sad on the whole instead of shipping them off to therapy," Loo said. "For all the workshops we get, knowing that other people experience these (mental health issues) doesn't make it go away for me."

Meda, who lost a friend who worked in her lab to suicide right before she graduated from UCSF, said that because more students are speaking up about their experiences, institutions can no longer ignore the issue.

"My institution didn't necessarily follow up in the best way," Meda said. "But now so many students are talking openly and pushing back on stereotypes that have been perpetuated in academia for so long. There are always people struggling in the same way, and I hope they continue to start the conversation at whatever institution they're at."

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