

APPENDIX A: FACULTY RECOMMENDATIONS ON WORKING WITH STUDENTS WHO ARE EXPERIENCING MENTAL HEALTH ISSUES

1. "Listen, be kind, advise them to go to counselling, say that getting treated is no more shameful than wearing glasses, listen some more"
2. "Be empathetic, patient, and understanding - and refer them to mental health professionals."
3. "Engage with the student. Show empathy. Relate own experiences."
4. "Try not to equate a difficulty getting things done with laziness."
5. "Be supportive but also encourage the student to access the resources available on campus, including trained mental health professionals."
6. "Direct them to school mental health services, many have no idea it exists, or would not consider this an option for cultural reasons etc. Telling them this is completely normal and a widely used resource has been helpful in the past in my experience. Students have taken it up and have found it helpful."
7. "Be patient with them, give them time to sort out issues, and help give them a long run perspective on things so that they're not so worried about short term achievements / immediate research progress"
8. "Listen carefully, be supportive, and remember that with appropriate support the student's mental health issue does not need to be a barrier to success in PhD and beyond."
9. "The key in all cases is followup...absolutely essential. Do not wait. A same-day follow up call shows that you care. There is a real risk that without that the student will continue a downhill spiral and do nothing, until it gets much worse."
10. "Address it right away, don't wait for it to become extreme. Don't try to talk to the student as a therapist, but do (strongly) encourage him/her to go to therapy ---

most likely the campus offers some decent free service. Tell them that it is absolutely normal, that even successful and bright people go through dark times.”

11. “Become familiar with resources available on campus for support and direct students to those resources.”
12. “Try to open lines of communication so that the student can talk with you without feeling that this will impact their academic standing or progress; urge the student to reach out to mental health professionals; try to help the student find a support network, whether making contact with family, talking with friends, or contacting a religious leader; reassure the student by explaining that many students face -- and overcome -- mental health issues”
13. “I think it’s difficult from a faculty perspective to see the difference between lack of progress because of (a) lack of effort and (b) a mental health issue that prevents focus/etc. I think discussion and training on this distinction is crucial.”
14. “I don’t have great advice, but I think this is a seriously under appreciated problem. All departments should have clear procedures for what professors should do if they think a student could use help in this domain (which I believe many do), so that students can get help without being stigmatized”