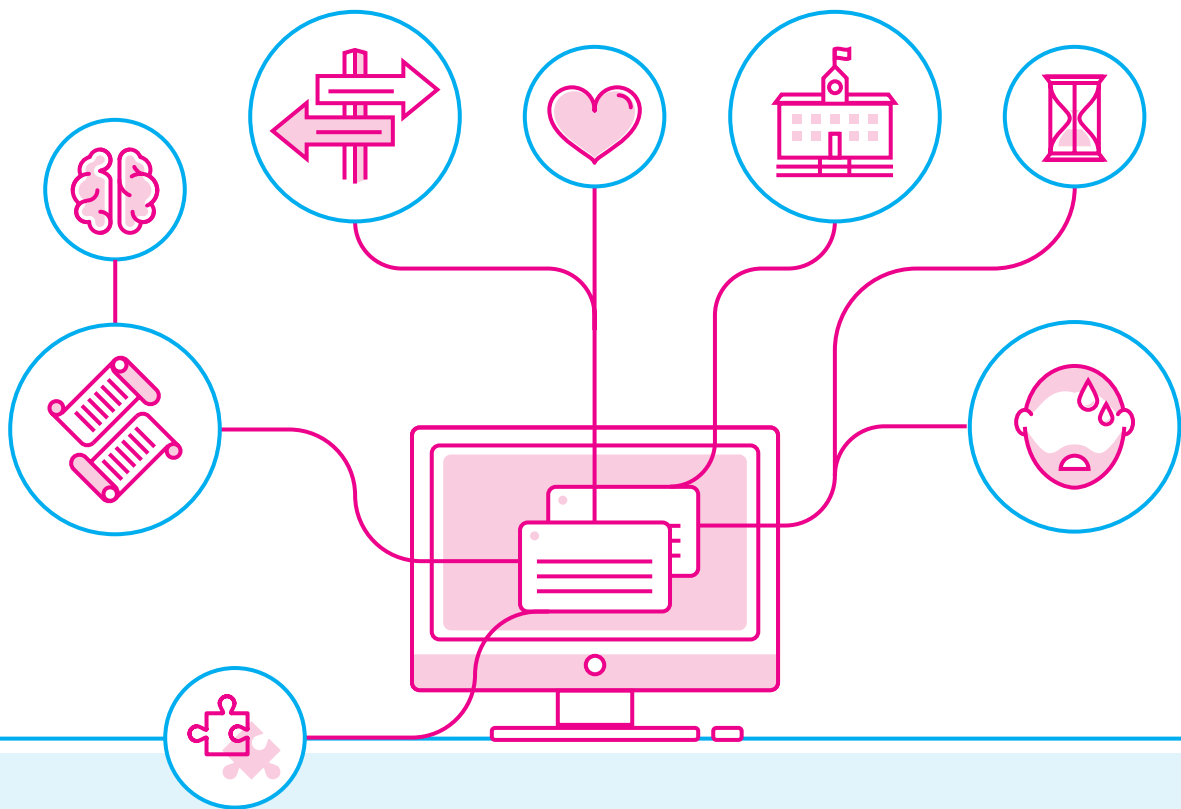


Not in the Syllabus

Findings from the Canadian Federation of Students–
Ontario’s survey on graduate student mental health.



350,000 undergraduate, graduate and college students united!

The Canadian Federation of Students-Ontario is the oldest and largest student organization in the province, representing over 350,000 college, undergraduate and graduate students from Thunder Bay to Windsor.

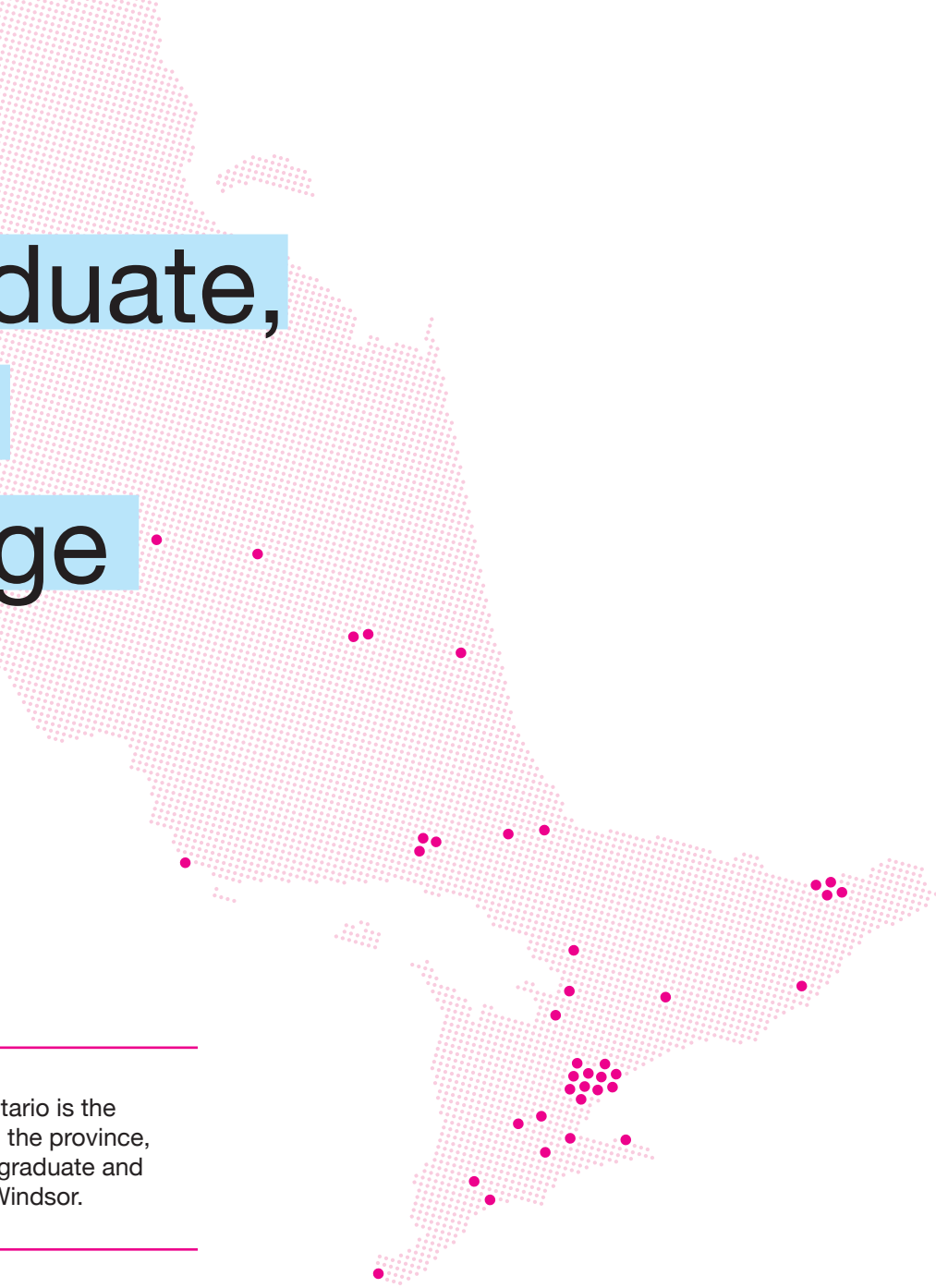
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cfsontario.ca

Ce document est disponible en français.



Contents

Executive Summary.....	1
Scope.....	2
Graduate Student Experiences	5
Verbal Abuse.....	6
Intimidation	6
Physical Assault.....	7
Unwanted Sexual Advances.....	8
Homophobia	8
Transphobia	9
Racism.....	9
Sexism	10
Ableism	10
Xenophobia.....	11
Pressure to Overwork	11
Behaviors Seeking to Undermine	12
Cyber Bullying.....	12
Summary of Stressors.....	14
Content Analysis	15
Major Findings.....	21
Initial Recommendations.....	22
Implementation Recommendations	23
Limitations	24
Conclusion	25



Figure 1.0:
 respondents as
 a percentage of
 the total graduate
 student population
 in 2014.

Executive Summary

The Ontario Graduate Caucus (OGC) of the Canadian Federation of Students–Ontario (CFS-O) alongside the Public Service Alliance of Canada (PSAC), the Ontario University Workers Coordinating Committee (OUWCC) of the Canadian Union of Public Employees (CUPE) and 13 graduate student unions engaged in a two-year research project to investigate and document the shared experiences of graduate students in Ontario universities. The OGC conducted an online survey asking graduate students to identify and describe incidents related to bullying, harassment and mental health issues that they have either personally experienced or witnessed while studying. 2,001 graduate students from across the province were asked about their experiences on their respective campuses and the resulting impacts on their mental health and well-being.

Bullying and harassment are serious behaviors that have negative impacts on graduate students' academic environment. Graduate students experience barriers to accessing services because of stigma and fear of personal reprisal in their employment and academic positions. In response to these realities, the Federation launched *Not in the Syllabus*, a graduate student mental health campaign aimed to address the effects of bullying and harassment as experienced by graduate students in Ontario post-secondary institutions.

Respondents outlined that for an experience to be considered bullying or harassment (e.g. gossip, racist remarks, behaviors seeking to undermine, etc.) it should have a severe impact, occur in person and the behaviors should be repeated. Allowing respondents to describe, define and justify their experiences of what bullying and harassment consist, demonstrates that experiences of bullying and harassment compounded with other stressors negatively impact the mental health of graduate students and increases the likelihood of low self-esteem, poor school performance, anxiety and depression.

The *Not in the Syllabus* study includes recommendations and an implementation plan in achieving the following goals to improve the mental health and well-being of graduate students on campus. Goals include but are not limited to:

- Enhancing support services available to graduate students;
- Reducing barriers and stigma behind mental health issues through generating discussion;
- Creating supportive and inclusive campuses through education on graduate specific issues;
- Ensuring mandatory equity and anti-oppression trainings and support surrounding positive student mental health.

The intent of this analysis is to be used by graduate students' unions to influence and inform the development of campus resources to confront bullying, harassment and mental health issues faced by graduate students. The report will outline the primary mental health survey results as they pertain to the OGC recommendations for graduate student mental health resources on campus. Here are some of the provincial survey results from the *Not in the Syllabus* study.

Scope

Student Demographics

The *Not In the Syllabus* survey was administered online through email and was conducted anonymously in order to provide an avenue for honest and unambiguous responses. The demographics gathered from this survey accompanied with the responses experienced by specific groups of students has allowed for the Federation to draw recommendations regarding increased graduate specific mental health services on campuses across Ontario.

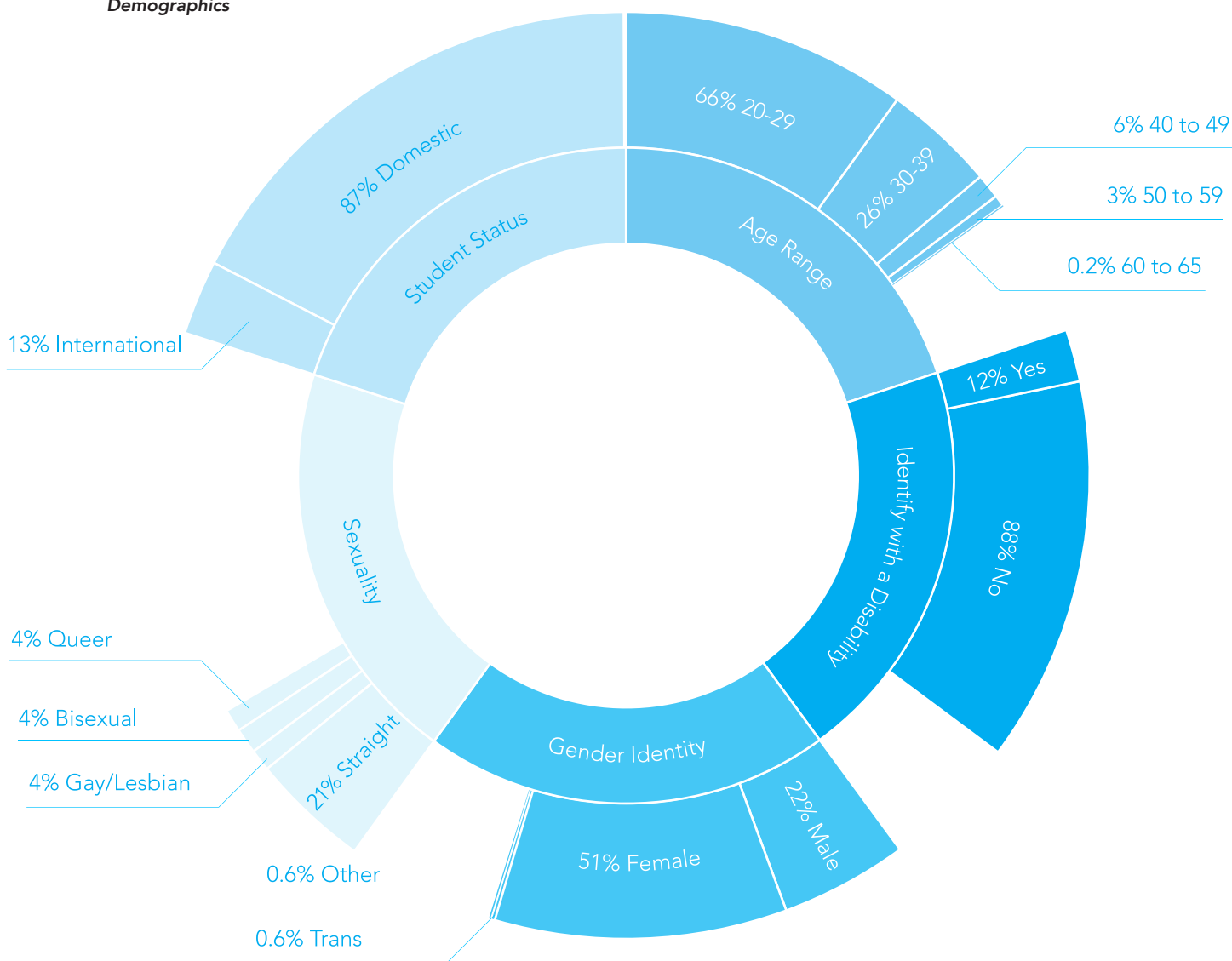
Graduate students were asked to share their identity regarding student status, sexuality, gender, ability, having children, age, ethnicity and religion. Self-identification received a variety of responses, and due to the diversity of answers, the following sections in this report will outline age, student status, year of study, sexuality, gender and identification of disability.

22 per cent of students were in a one-year master's program, 30 per cent were in a two-year master's program and 46 per cent were in their Ph.D. Of these students, 13 per cent identified as international students and 12 per cent identified as having a disability. 70 per cent of respondents fell between the ages of 20 to 39, six per cent ranged from 40 to 65 and 24 per cent chose not to identify.

Respondents were provided with a list of options for gender and sexuality identification. Each question was also open for self-identification. Though gender is often viewed as a binary, it is not always an accurate reflection of individual identity. Respondents were given the option to select multiple gender and sexuality descriptors. To quantify all responses Figure 1.1 represents the total percentage breakdown of respondent's demographics.

Figure 1.0 outlines respondents as a percentage of the total graduate student population in 2014. The sample size totaled 2,001 respondents from 20 institutions across Ontario. Study areas include Business, Education, Engineering, Environmental Studies, Health Sciences, Humanities, Law, Nursing, Science, Social Science and Social Work.

Figure 1.1: Survey Respondents Demographics



Contributing Factors

The graduate student environment is unique to any other campus group. Graduate students often interact with a variety of people, on and off campus, who all have a part in determining the success of their studies and the maintenance of their well-being. While the survey focused mainly on bullying and harassment, respondents were asked to identify other factors that affect their mental health. Figure 1.2 captures the percentage of students who outlined other associated factors that negatively affect mental health.



Time to completion anxiety



67% of respondents



Fear/anxiety of failing/appearing weak



63% of respondents



Paying tuition fees and other institutional costs



59% of respondents



Not feeling properly supported by their academic institution



51% of respondents



Anxiety of seeking and/or affording mental health support



31% of respondents



Family pressure to finish degree program



24% of respondents



Poor physical health



26% of respondents



Feelings of not knowing what they're doing academically



59% of respondents



Relationship strain/loss



40% of respondents

Figure 1.2: Other Factors that Negatively Affect Mental Health

Graduate Student Experiences

Graduate students in Ontario reported that they witnessed and/or experienced many stressors that have been damaging to their mental health from administrators, staff, faculty, instructors, students, colleagues, supervisors and even support service staff. The table below will outline the most prominent graduate student reports in witnessing and/or experiencing instances of bullying, harassment and discrimination. Each of the mentioned stressors will then be broken down to explore how they relate to a specific student demographic. Figure 1.3 summarizes the 13 stressors and students' experiences and the following page will outline gender identification and experiences with verbal abuse.

Stressors and Respondents' Experiences

Percentages of respondents who report witnessing and/or experiencing the following:

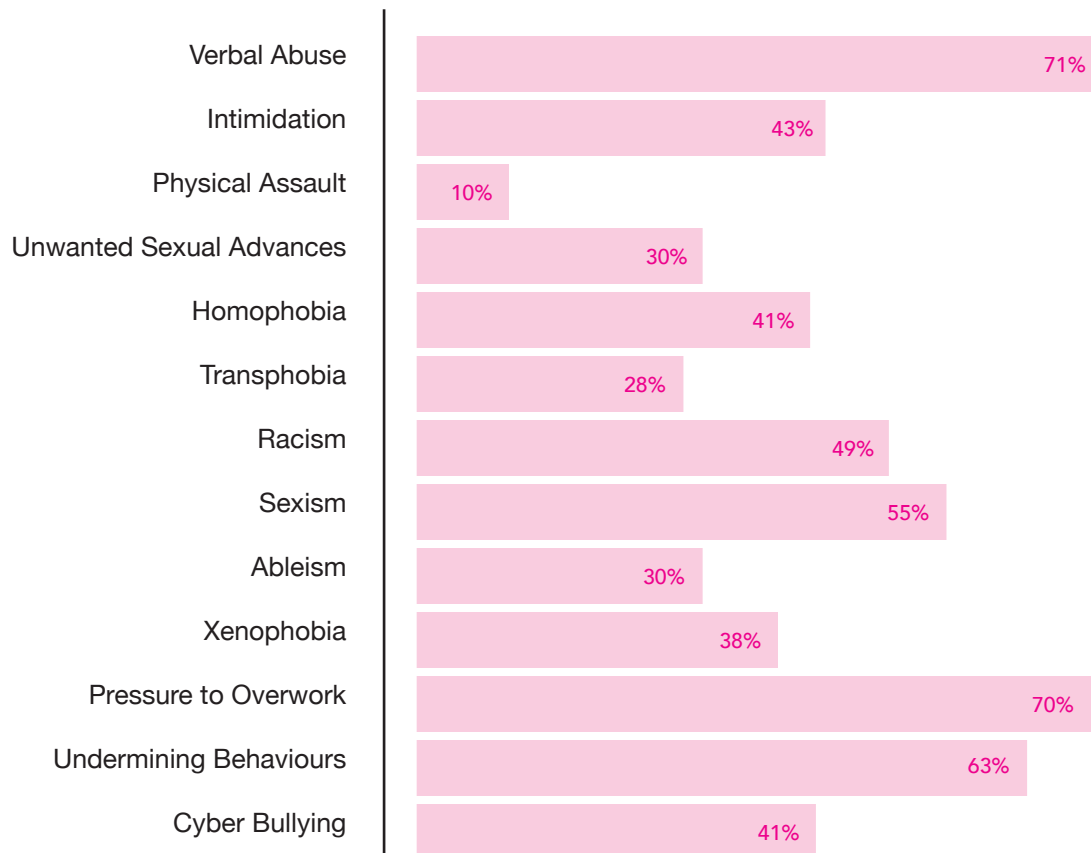
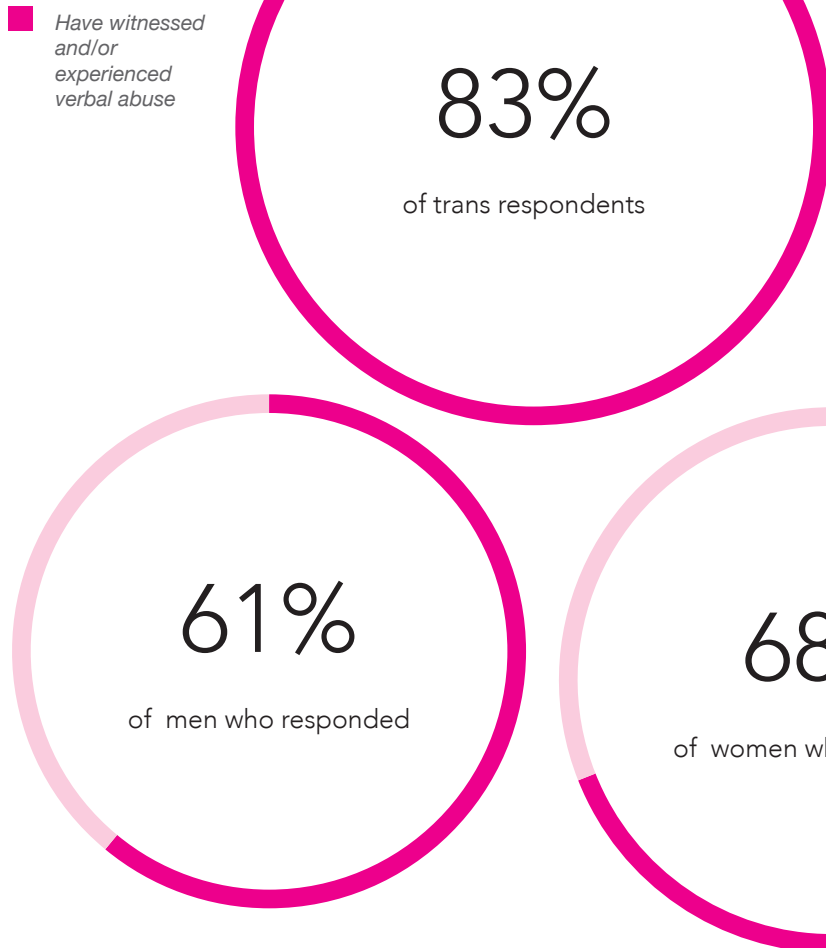


Figure 1.3: Stressors and Respondents' Experiences

Verbal Abuse

Figure 1.4: Gender and Verbal Abuse

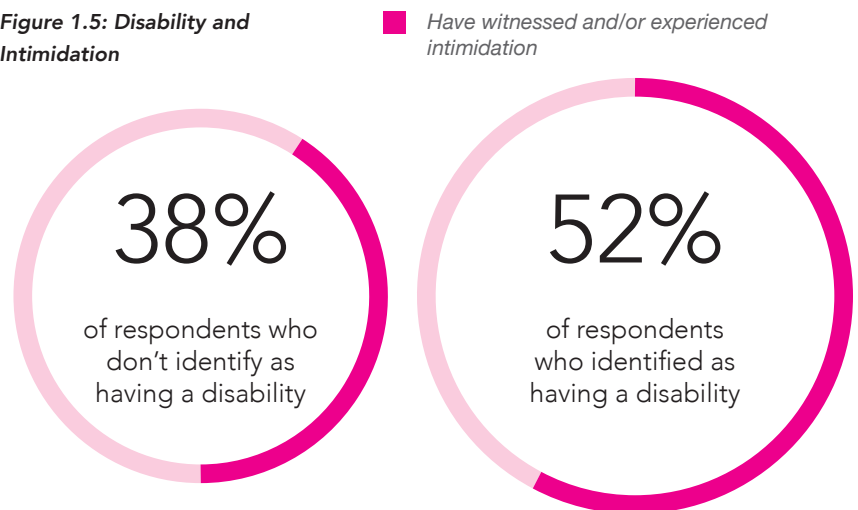


Verbal abuse is the most prominent form of bullying and harassment among graduate students surveyed. 71 per cent of respondents have witnessed and/or experienced verbal abuse whereas 29 per cent of respondents have not witnessed or experienced verbal abuse. Of these respondents trans students recorded the highest instances of experiencing verbal abuse. Figure 1.4 outlines gender identification and the occasions of experiencing and/or not witnessing verbal abuse on campus.

Intimidation

Intimidation includes physical, verbal or implied threats. 43 per cent of respondents have witnessed or experienced intimidation, whereas 57 per cent of respondents have not witnessed or experienced intimidation. The following figure outlines the total number of respondents and their experience with physical, verbal or implied threats. A majority of students who identified as having a disability experienced greater forms of intimidation than those who did not. Individuals with disabilities face considerable and longstanding discrimination and stigmatization, and in the case of graduate studies have also identified as experiencing increasingly high levels of intimidation compared to students who do not have disabilities.

Figure 1.5: Disability and Intimidation



Physical Assault

90 per cent of respondents have not witnessed or experienced physical assault, whereas 10 per cent of respondents have witnessed and/or experienced physical assault. Students who provided content-based responses on having experienced physical assault demonstrated common themes such as not reporting or talking about physical assault, not wanting anyone to know and not knowing if anyone would believe them. Figure 2.0 outlines the break down of physical assault as it relates to sexuality. Respondents who identified as gay, lesbian, bisexual and queer experienced greater instances of physical assault than those who identified as straight.

Figure 1.6: Sexuality and Physical Assault

■ Have witnessed and/or experienced physical assault

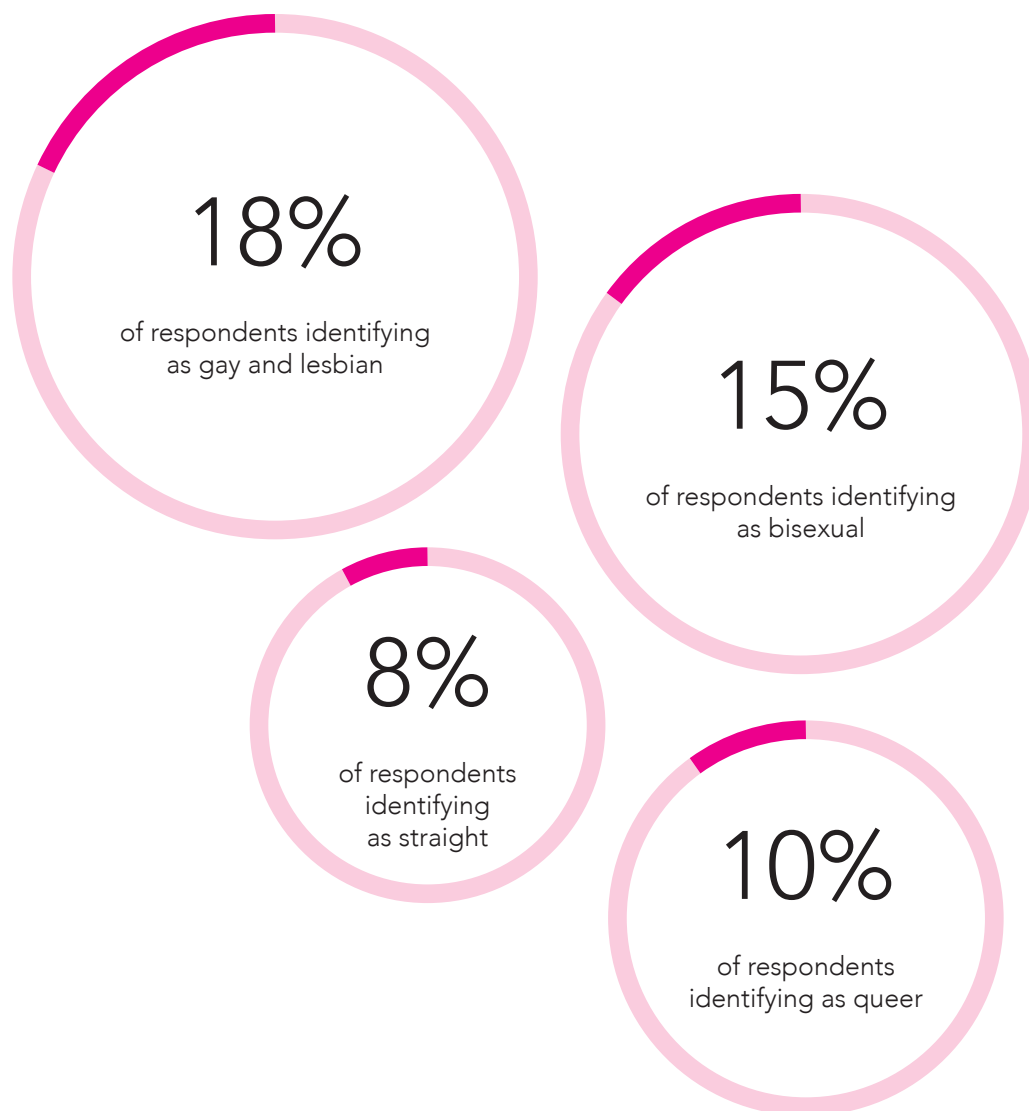
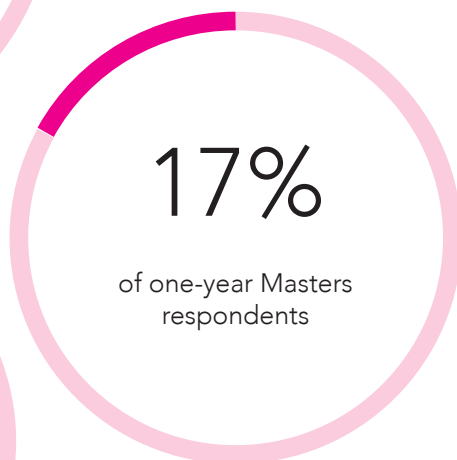
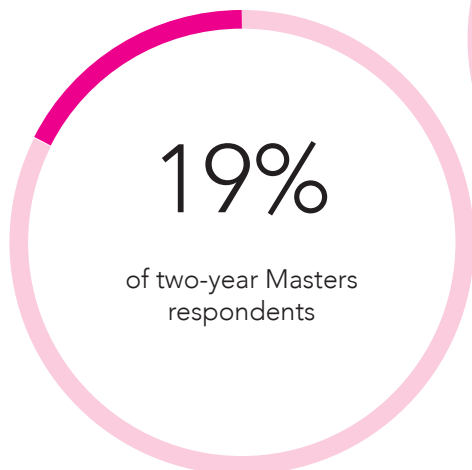
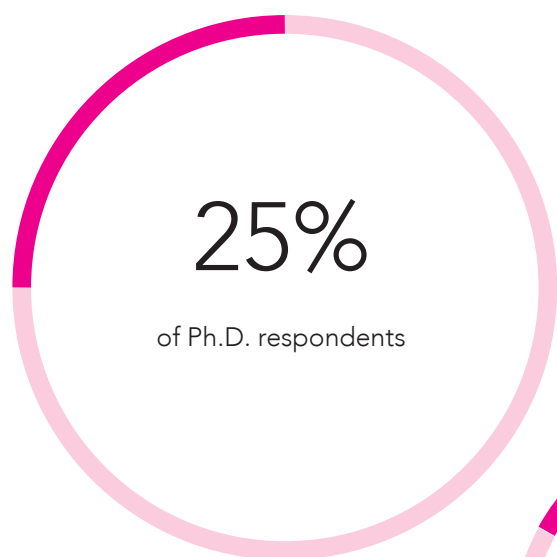


Figure 1.7: Unwanted Sexual Advances and Program Level

■ Have witnessed and/or experienced unwanted sexual advances



Unwanted Sexual Advances

Unwanted sexual advances were defined as but not limited to groping, touching and leering. Rational as to why many participants were reluctant to report experiences of sexual advances included fear of reprisal, no formal reporting mechanisms and not knowing how to prove situations of unwanted sexual advances. 30 per cent of respondents have witnessed, or experienced unwanted sexual advances and 70 per cent have not witnessed or experienced unwanted sexual advances. The following figure breaks down unwanted sexual advances reported by graduate students at various levels of graduate studies.

Homophobia

Gay, lesbian, bisexual and queer individuals are often met with discrimination and misconceptions based on negative stereotypes that are used to justify instance of hate and harassment. 41 per cent of students have witnessed and/or experienced homophobic language, jokes or insults. 59 per cent of students reported having not witnessed or experienced homophobic language, jokes or insults. Of these respondents the following graph breaks down experiences of homophobia encountered by straight, gay, lesbian, bisexual and queer students.

Figure 1.8: Sexuality and Homophobia

■ Have witnessed and/or experienced homophobia

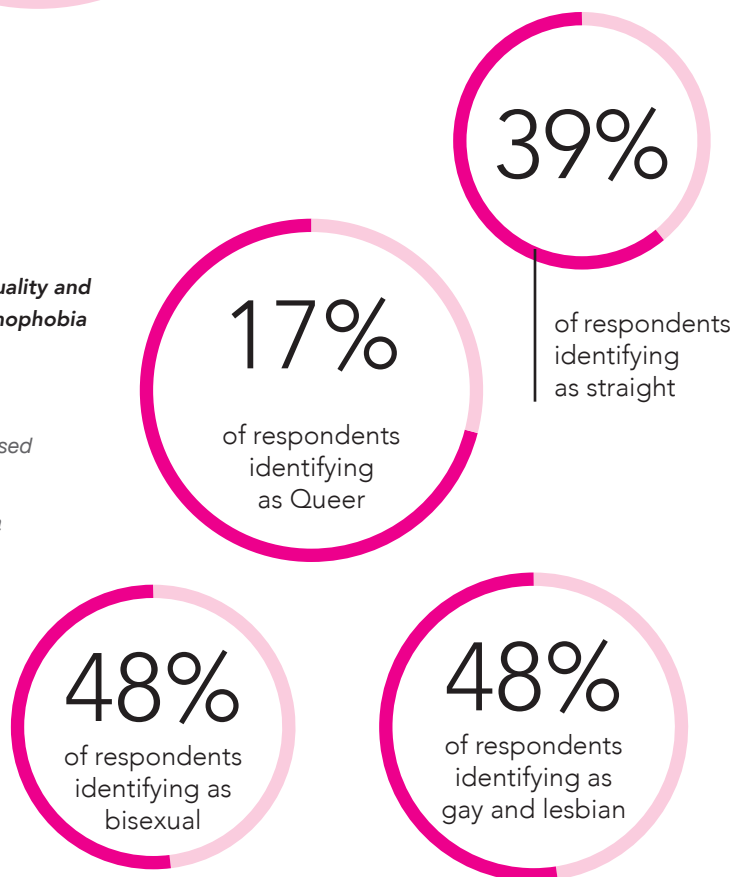
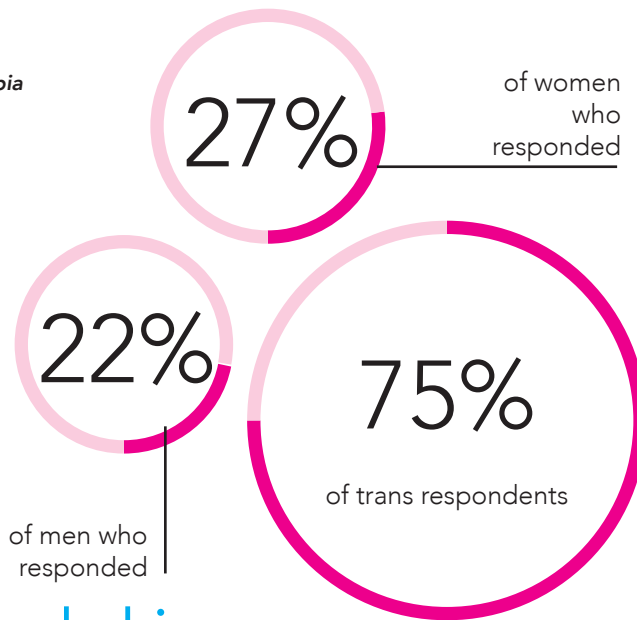


Figure 1.9: Gender and Transphobia

■ Have witnessed and/or experienced transphobia

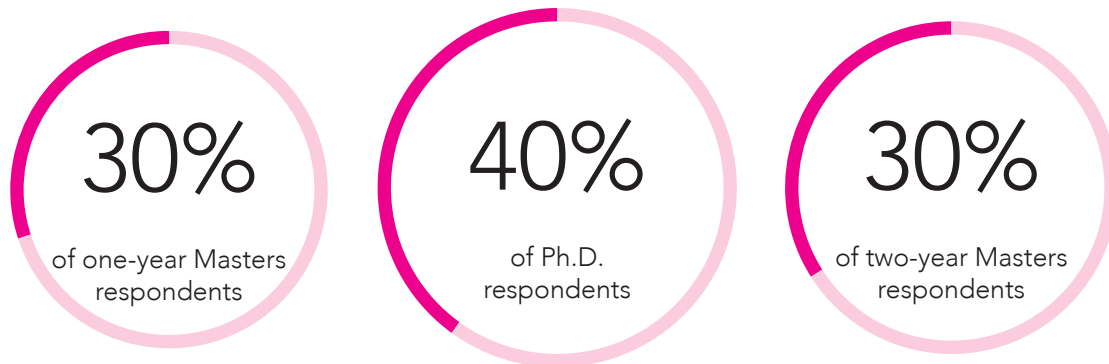


Transphobia

Transphobia was characterized as a range of negative attitudes and feelings towards trans or gender non-conforming individuals. 28 per cent of respondents have witnessed or experienced transphobia, and 72 per cent of respondents have not witnessed or experienced transphobia. Lack of data collection, safe spaces for reporting and visibility/general knowledge on trans issues along with prejudice and discrimination explains why respondents who identify as men and women have lower reporting rates of witnessing and/or experiencing transphobia. This may also explain the low number of trans identified respondents. Students who identified as trans faced the highest reported instance of witnessing and/or experiencing transphobia at 75 per cent.

Figure 2.0: Program level and racism

■ Have witnessed and/or experienced racism



Racism

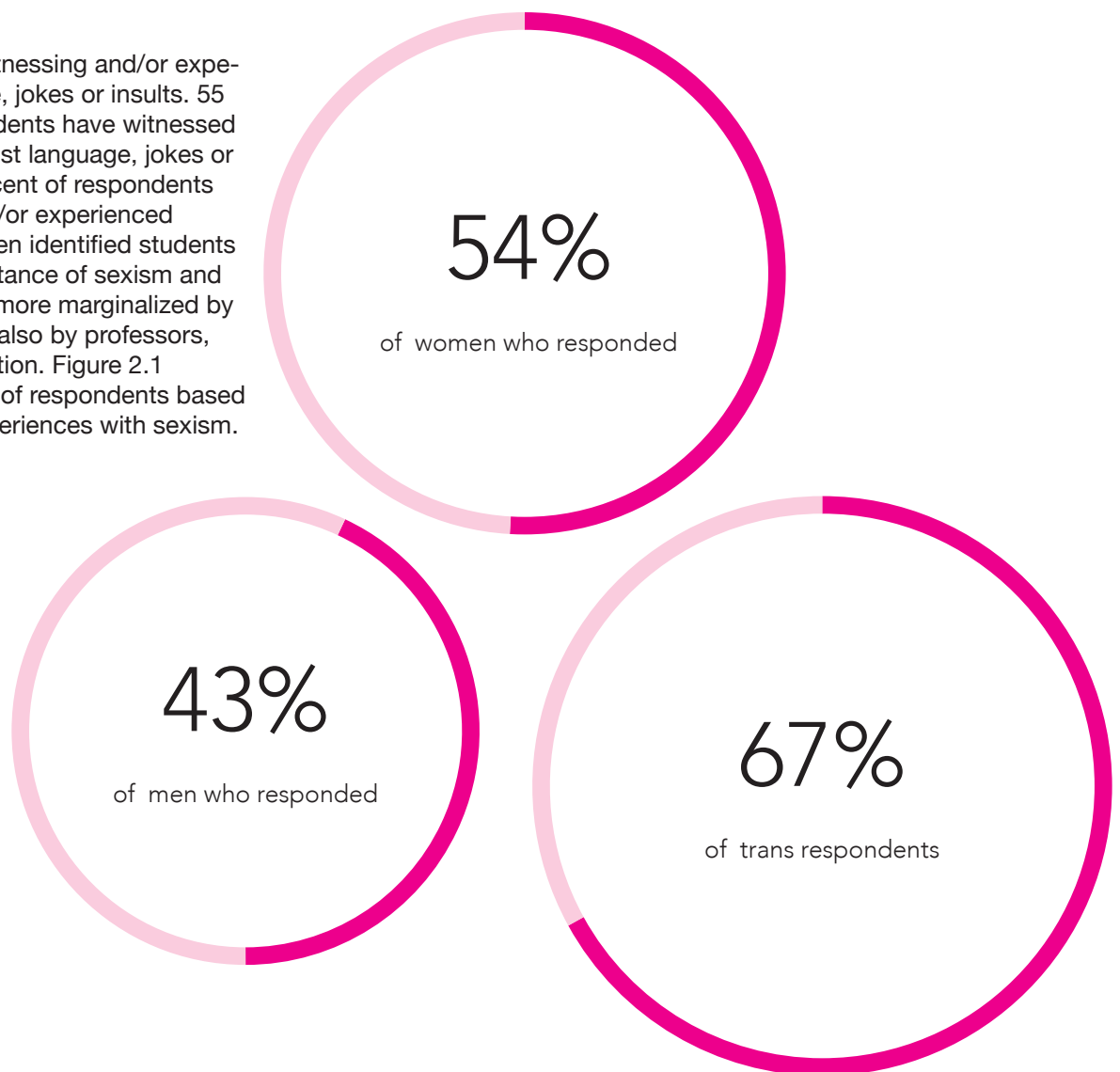
With many campuses not providing race-based data, many experiences of racism often go unnoticed and unreported. Though many institutions outline their commitments to diversity, inclusion and equity; without the collection of race-based data and experiences of racism on campuses, institutions fall short in their ability to support students and commit to true equity, diversity and inclusion. 49 per cent of respondents have witnessed and/or experienced racist language, jokes or insults whereas 51 per cent of respondents have not witnessed and/or experienced racism. The above graph outlines experiences of racism by students at different program levels.

Sexism

Sexism is defined as witnessing and/or experiencing sexist language, jokes or insults. 55 per cent of total respondents have witnessed and/or experienced sexist language, jokes or insults whereas 45 per cent of respondents have not witnessed and/or experienced sexism. Trans and women identified students reported the highest instance of sexism and because they are often more marginalized by not only their peers but also by professors, mentors and administration. Figure 2.1 outlines the percentage of respondents based on gender and their experiences with sexism.

Figure 2.1: Gender and Sexism

■ Have witnessed and/or experienced sexism

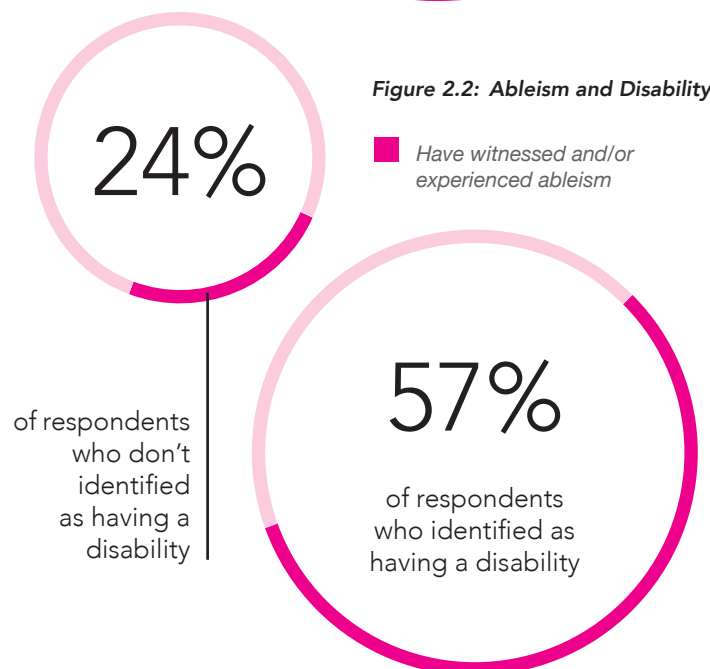


Ableism

Ableism was described as prejudice against people with disabilities. 30 per cent of respondents have witnessed and/or experienced ableist language, jokes or insults. 70 per cent of respondents have not witnessed or experienced ableist language, jokes or insults. Regardless of gender or sexual identification a majority of respondents reported not experiencing or witnessing others experience ableism. Students who identified as having a disability experienced the most incidents of ableism. Figure 2.2 breaks down disability identification and experiences of ableism.

Figure 2.2: Ableism and Disability

■ Have witnessed and/or experienced ableism



Xenophobia

Xenophobia was defined as hostility or unreasonable dislike or fear of people from other countries. Though reports of experiencing xenophobia on campus is less than 40 per cent, it is important to realize that many students who are visible minorities and/or international students are not living in a post-racial society where they do not experience discrimination and prejudice. 38 per cent of total respondents have witnessed and/or experienced xenophobic language, jokes or insults, whereas, 62 per cent of respondents have not. Figure 2.3 breaks down students by program level and their experiences with xenophobia.

Figure 2.3: Program Level and Xenophobia

■ Have witnessed and/or experienced xenophobia

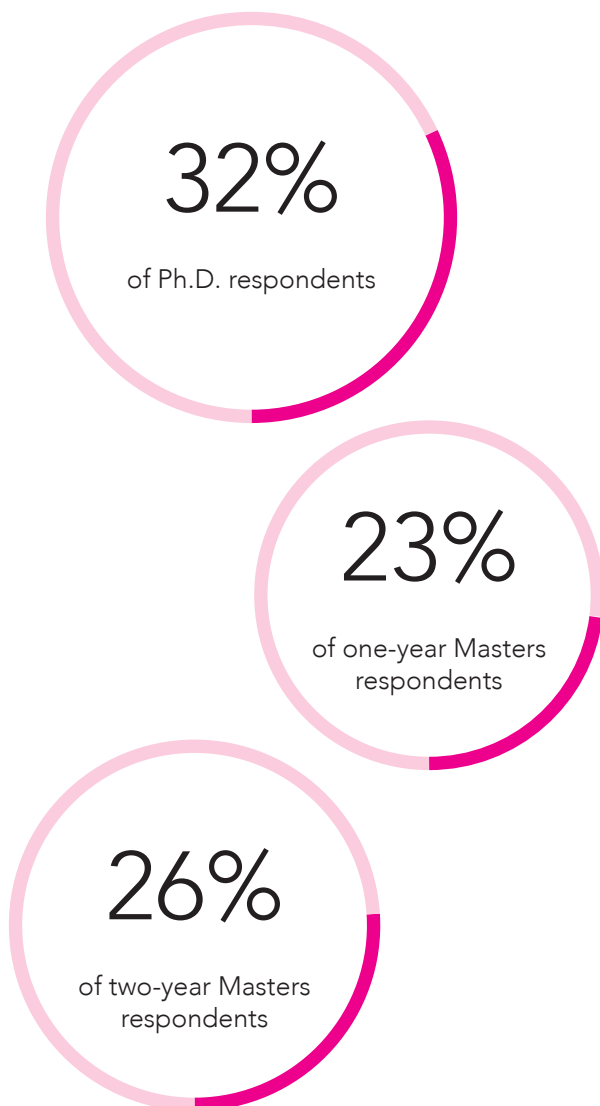
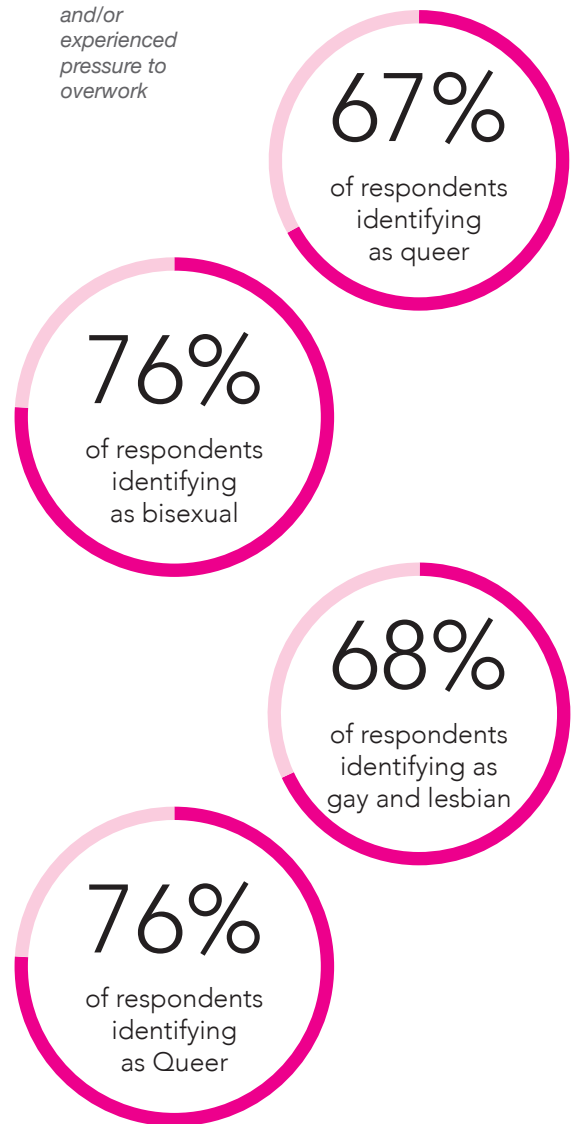


Figure 2.4: Sexuality and Pressure to Overwork

■ Have witnessed and/or experienced pressure to overwork



Pressure to Overwork

Pressure to overwork was defined as pressure to work late on weekends; do the work of others; do work unrelated to your degree/own academic work; do unsafe work and/or manage an unrealistic workload. 70 per cent of respondents have witnessed and/or experienced pressure to overwork whereas 30 per cent of respondents have not witnessed or experienced this pressure. Similar to other findings it is observed that students who identify from marginalized groups such as bisexual, queer, lesbian and gay experience higher instances of oppressions such as pressure to overwork. Figure 2.4 outlines sexuality and the percentage of respondents who experience pressure to overwork.

Behaviors Seeking to Undermine

Behaviors seeking to undermine include sabotaging, ignoring, professional or personal exclusion, isolation, or spreading rumors or gossip. 63 per cent of respondents have witnessed and/or experienced these behaviors while 37 per cent of respondents have not witnessed or experienced the outlined behaviors. Queer students reported the highest level of experiencing these behaviors at 78 per cent followed by students who identified as having a disability (Figure 2.5).

Figure 2.5: Disability and Behaviours Seeking to Undermine

■ Have witnessed and/or experienced behaviours seeking to undermine



Cyber Bullying

Cyber bullying is defined as bullying that takes place online through tools such as social media, text, chat or websites. 41 per cent of respondents have witnessed or experienced cyber bullying via text, email or posted on social networking sites. 59 per cent of respondents have not witnessed or experienced cyber bullying. Figure 3.0 outlines experiences of cyber bullying faced by students based on sexuality.

Figure 2.6: Sexuality and Cyber Bullying

■ Have witnessed and/or experienced cyber bullying

Closing Remarks and Notes

The previous sections summarized 13 stressors faced by graduate students. The data presented is a summary of the primary results of the larger set of data, which information can be provided for upon request. Figures can be divided and filtered based on gender, sexuality, disability, student status, parental identification and age. Graphs used in the graduate student experience section that summarized the 13 mentioned stressors were chosen based on the response levels by graduate students or the relevance to the questions (e.g. disability identification and experiences with ableism). Religion and ethnicity were not used due to the sheer diversity of responses. This will be further outlined in the limitations section of the report.

Summary of Stressors

Graduate students fill varying roles on campus as students, teachers, researchers and mentors. The experiences outlined in this research report can pose a severe impact on the mental health and well-being of students who are confronted by the 13 mentioned stressors. The following four sections summarize experiences based on gender, sexuality, student status and disability.

Gender

Women and trans respondents reported higher instances of witnessing and experiencing these stressors associated with bullying, harassment and discrimination than men.

Sexuality

A majority of respondent identified as straight but individuals who identified as gay/lesbian, Queer and bisexual reported the most instances of experiencing or witnessing the 13 mentioned stressors. Queer respondents reported the highest instances of witnessing and experiencing all stressors.

International Students

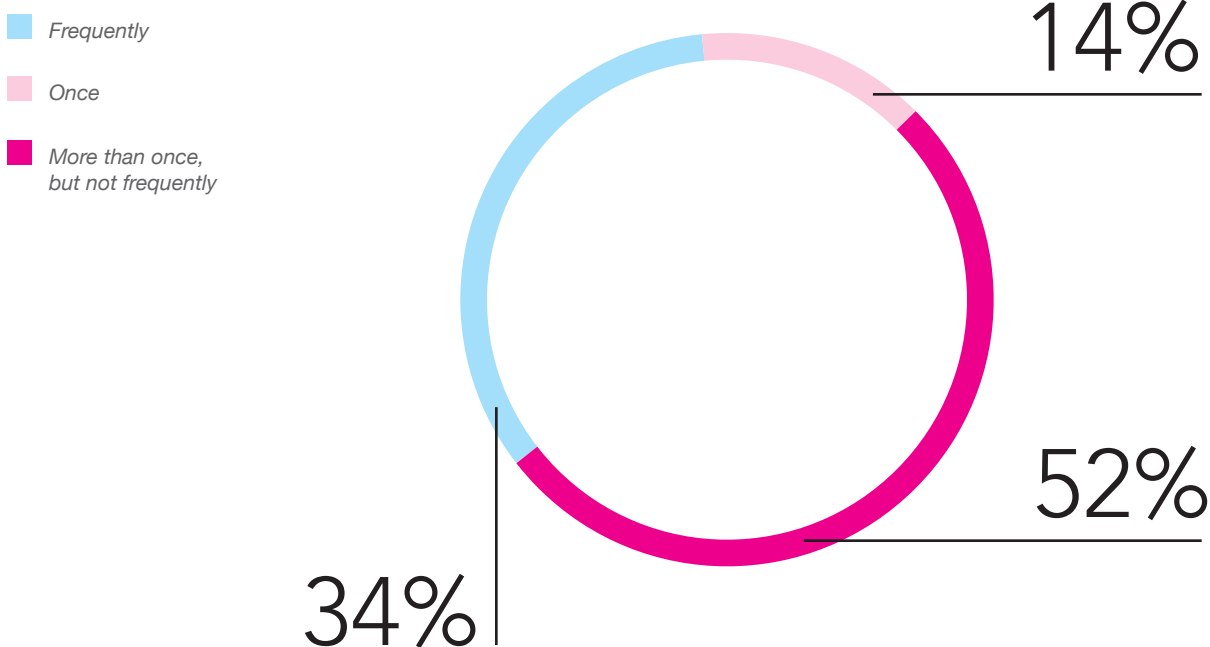
International students reported that pressure to overwork (43% of students), behaviors seeking to undermine (39% of students) and verbal abuse (43% of students) are the most prominent stressors experienced and witnessed.

Disability

Those who identified as having a disability experienced greater instances of bullying, harassment and discrimination than those who do not identify as having a disability.

The frequency of events (Figure 2.7) also plays a significant role in influencing the mental health and well-being of graduate students. The more frequently events occur, the higher the risk of mental health problems, such as low self-esteem, poor school performance, depression and anxiety.

Figure 2.7: Frequency of Experienced Behaviours



Content Analysis

There is no firm explanation as to the specific roots of mental health issues caused on campus. Explanations pulled from our content analysis demonstrate that students carry far heavier debt loads, are facing unprecedented competition for jobs, have greater academic pressures and far fewer educational resources. Out of the 2,001 students surveyed, 923 provided personal stories of their graduate student experiences. Of these experiences, we were able to draw 14 overarching impacts that affected students' lives following their experiences of bullying and harassment. The following quotes were pulled to elaborate on each of the topics described.

The following views and opinions expressed are personal quotes by respondents, and may be troubling to read. The identities of all respondents are confidential, and any identifying information (e.g. university, department and names) have been removed and recorded. Those who wish to skip this section may turn to page 21 of the report to read the major findings.

Ability to do work affected, changes in behaviour

- // I cry a lot, and I was hospitalized due to a health issue caused by mental pressure. [...] I keep silent because I know I cannot do anything.
- // My experience with the academic administrator happened multiple times, and I have actively avoided going to them for advice. It made me feel like they were happy to have a trans person in their department, and not happy to acknowledge that that person might have different accommodation needs.
- // I feel uncomfortable going on campus. I dropped a course we had in common. I don't feel safe.

Statements of devaluation of self

- // These incidences seriously undermined my self-confidence and self-esteem. I am still dealing with the repercussions of that experience although I no longer have any contact with the professor. I suffer from incredible anxiety and self-doubt as a result of this experience even a year after leaving that lab. I am also aware that other students from that lab report very similar issues.
- // It gave me panic attacks. I considered dropping out of my program because I began to believe these comments and started to wonder if I belonged in the program or was 'smart enough' to continue.
- // I felt like I had no value. I thought I was stupid and could not understand anything. I was yelled at in public, intimidated by money. I had incredibly horrible feelings and was becoming depressed. I was crying all the time even in public.
- // As a person with disabilities, I felt invalidated, invisible and silenced by this professor's comments. I also felt like my competence was questioned, like I was being told I was a sham. My self-confidence decreased, in turn, sapping my energy for my research.

Feeling numb, stunned or traumatized

- // I feel traumatized. I had to engage in crisis counseling, I could not eat or sleep, I was not able to do my academic work and was put on anxiety medication.
- // I was traumatized and went in to counseling.
- // I was stunned, and shivering with fear. My supervisor is there to support me, but suddenly gets angry.

Feeling exhausted, tired, drained, demotivated

- // While the events, themselves, were minor, the combination and duration of these stressors were a significant source of anxiety, frustration and exhaustion.
- // It made me feel awful. It's just another micro aggression. There are so many that you have to understand; it builds up.
- // It was difficult, but I knew that I wanted to be here doing what I am doing so I stuck it out. But it had a huge impact on my confidence, and it has taken a while to get back into my work whole-heartedly. Burnt-out is probably the best description.
- // I experienced sleepless nights, unsafe driving to exams/classes, irritability, moodiness and exhaustion. This extreme stress can also cause anxiety and lead to a decreased immune function. This can affect work, home and performance in classes.

Depressed or sad

- // I feel depressed and fearful, that I will not get a job if I brought issues forward.
- // Belittled, stupid and incapable. Eventually led to a bout of serious depression.
- // I felt incompetent and depressed. I have difficulties getting myself up and out of bed to attend work on a regular basis.
- // I felt stressed, anxious, and depressed. I worked three jobs to be able to pay for my education. I felt particularly bad for my classmates that were parents.

Anger, frustration, upset, or resentment

- // I was going under a nervous crisis, at night I was not able to sleep thinking about what had happened the day before, and what would possibly happen the future. I felt a overall diminishing of my health status, due to the excessive level of stress and the lack of support, since nobody believed me.
- // I was in denial for a long time. I thought everything was my fault. I thought if I worked harder, everything would be better. Unfortunately, it wasn't possible to work harder than I already was. I felt sad, angry, hopeless and alone.
- // Increasingly, it is making me angrier. I am a parent of undergraduate students, and I am just tired that society doesn't seem to have progressed much in the last 30 years.
- // For a long time, this made me feel worthless. Now I just feel angry and disappointed, and I wonder what the hell I'm paying tuition for.

Statements of depression or sadness

- // I wondered for a long time if I should drop out of my program because I felt like my supervisor didn't want me there.
- // It made me quit the program. It ruined my confidence, and I am still emotionally struggling with dealing with even constructive criticism from the faculty. While I understand the importance of the feedback and appreciate it, it makes me stressed and anxious.
- // It made me feel angry, depressed and anxious. Racism and sexism clearly result in mental depression.
- // It feels like there is no end to feeling stressed unless you leave academia. If you take any time off, people glare at you as if you are not working hard enough.
- // These incidents made me feel very stressed, causing anxiety attacks and that I did not have any professional or social support willing to come to my aid.

Statements of isolation

- // It is a small department, and there is no opportunity to talk to anyone about this person.
- // Any hierarchy makes people feel poorly about their position. The department only intensifies the separation without trying to create unity.
- // I felt uncomfortable, and not welcomed. I felt undermined as a minority and as a female student.

Injury to dignity

- // I was seeking support from my friends and fellow students for a personal situation, to have a fellow student use that information to start rumors made me feel isolated and very vulnerable.
- // I felt embarrassed and defeated. If I was so stupid, why am I here? I nearly quit the program and fell into a depression. When I emailed my supervisor about this, they said I misheard them. What they meant was that my work was so bad, and some people do have writing disabilities, so, therefore, I may have one, which is the same thing they said before. They felt they were not wrong, and this occurred multiple times until I approached another professor for advice and switched supervisors.
- // It made me feel very angry, and I felt it undermined my credibility in front of my colleagues. Because this happened regularly, I noticed my fellow students didn't trust my knowledge or opinion as a result.
- // I felt insulted, belittled, harassed and humiliated. In particular, because when I went to complain, no one took my complaints seriously.

Feeling powerless or hopeless

- // I felt publicly humiliated. Hopeless. Like I didn't have what it takes to finish this program or to work in a university. I felt like there is something wrong with me. My supervisors did nothing about the harassing email.
- // I felt isolated and demoralized because I didn't know if other students [...] also felt like it was inappropriate. I was also scared to say anything to the professor [...] because I didn't know how they would react. I cringed every time the professor said the n-word. [...]. The professor had no idea that their actions were offensive and even thought that it was subversive that they spoke the word out loud repeatedly, apparently to show the power of words.
- // I felt uncomfortable and like my rights are not protected. I felt like I was not in a position to complain.
- // I felt absolutely worthless! My self-esteem has taken rock bottom. It feels very alienating. For a long time, I just hated myself for being where I am from and how I look. You see, the mind tends to turn upon itself when it realizes or, at least, perceives it is unable to do anything about the situation. It turns onto itself and sees itself as the problem. So that's how I felt. Wished I were someone else.
- // I felt excluded and marginalized. I lost confidence and hope. Life turned out to be meaningless. I knew there is no hope for me to alter the situation unless I left the department or university.
- // I went into a depression. After three years, I finally realized I had to switch supervisors, or my mental health would suffer even more. The depression was starting to affect my thinking ability and judgment.

Feelings of compromised safety (e.g. emotional, physical and job/ academic security, etc.)

- // I felt trapped because they were involved in every aspect of my school environment. [...]. I know other people are having the same problem so I am considering going to talk to someone but I would rather it not become a bigger issue in my life than it needs to be so that I can focus.
- // It makes working in this department feel more precarious. Everything is fine as long as I'm healthy. If anything did go wrong (if a parent, child, partner, or if I got sick), I would be very hesitant to disclose that to the department or ask for any additional support. There has been at least one case each year with someone feeling targeted for this kind of disclosure.
- // I felt intimidated and bullied. I was scared about my reputation among other professors and colleagues. I felt ashamed. I felt my academic future was compromised.
- // It frightened me that someone would take the time to engage in such passive aggressive behavior for no reason. I became concerned that it would escalate.
- // I felt like crap, and afraid that they would mess up my future career with an unfair blemish on my record.

Feeling overwhelmed (e.g. questioning their sanity, being unstable, etc.)

- // In all of these incidences I felt overwhelmed and angry, and at times even hurt at the nature of some of the comments made.
- // It makes me feel overwhelmed. As a woman, I feel like I already have a lot of barriers to overcome in trying to become a professor. I don't want to be perceived as someone who is difficult to work with.
- // It just always feels like I'm not doing enough work. There is pressure to publish, while at the same time, the atmosphere in the department (both staff and students) is that we'll never get jobs. Sometimes I just work from home to get out of that toxic space.
- // I co-taught the class with a white male instructor. He and I made the exam questions together, and we didn't get many complaints from the students. Now teaching the same course alone, I get all sorts of complaints from the students [...]. Why? I think it has to do with my ethnic background and the fact that I speak English with an Asian accent.

Cause themselves harm or consider causing themselves harm

- // I thought about suicide. It was unbearable being treated like that and not being able to protect myself.
- // It made me suicidal, and I had to seek professional counsel to help me deal with the depression and sense of isolation.
- // I felt awful. I tried to get help and support and let people know what was happening, but no one stopped what was going on. I became suicidal. I owe the support and understanding to my parents and the fact that I was able to move away [...] to complete my degree, my life.
- // There was a range of complicating issues, but during my masters, I was very suicidal and at the end of the year ended up seeking adult mental health services.

Statements of overwork

- // It made me feel overwhelmed and anxious that I wouldn't be able to finish all my assignments and projects on time. It also stressed me out quite a bit because I knew I couldn't neglect my research assistantship because my funding depends on that.
- // I felt very helpless and felt as though myself and others are being taken advantage. Graduate students are expected just to take this type of treatment.
- // It made me feel like it was unfair and put in a position where I could not say no.
- // It puts me in a terrible position whereby I have to balance my academic integrity with my personal sanity, and also time spent with my family. Students deserve to have quality feedback and substantial attention from their instructor. We deserve to be paid to do that work. I don't like being EXPECTED to do this work, but not paid to do it.

Content Analysis Remarks

Before describing their experiences, graduate students were not provided with a formal definition of bullying and harassment. This allowed students to interpret and justify their experiences. Students had a general acknowledgment that bullying and harassment included behaviors that had a significant impact, were directed at an individual, and must be repeated and not a single instance. Many students deemed non-constructive criticism, the pressure to overwork, and gossip, not as forms of bullying or harassment. Students recognized the aforementioned instances as having a negative impact on mental health and well-being over time, but did not see them as bullying or harassment because of self-blame, guilt associated with thoughts of failing to meet expectations, and justifications that these individual experiences were the norm for all graduate students.

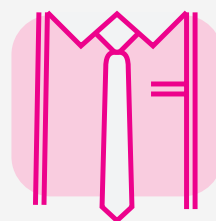
Students often individualized the blame of their experiences or criticized the institution. The effects on student mental health furthered feelings of powerlessness and isolation while affecting student behaviors and their environments. Witnesses to these events often reported feeling uncomfortable and guilty, and recognized they could have done something but chose not to.

Major Findings

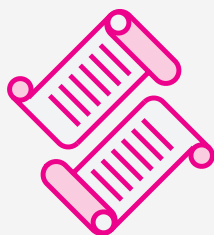
Graduate students acknowledged that there is reluctance to access mental health resources for fear of personal, funding and career reprisals. Students face a unique challenge accessing campus support services because they often do not want their supervisors, administrators or mentors to know that they are struggling and have sought help. Graduate students are also wary of running into their undergraduate students and mentees when they do ask for help from service providers, because, often times, graduate students can only access the same service providers as undergraduate students. Based on the content analysis the four largest issues facing graduate students are:



Fear of reprisal



Reporting to academic and administrative professionals who are a part of the problem



Unable to commit the time or effort to navigate the formal complaints process



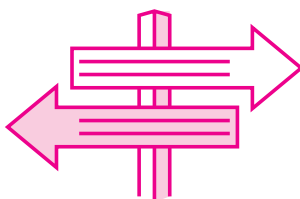
Not knowing who to turn to.

Initial Recommendations



Flexible counseling hours

Graduate students are often on campus evenings and weekends, while also taking classes, facilitating labs and teaching during regular business hours. Evening and weekend counseling hours is necessary to accommodate graduate students' schedules.



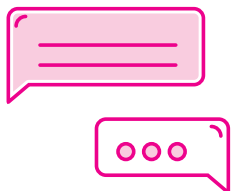
Promoting e-health technology

A 24-hour mobile or chat line would allow students to have easy access to mental health professionals. Although this cannot directly replace traditional counseling, it is a useful first point of contact that would provide students with alternate methods of seeking assistance.



Promote awareness of graduate counseling services and implement a campus-wide mental health initiative

Increasing knowledge helps reduce stigma and creates room for conversation. It also helps to expose the roots of the problem and the impact, and thus creates prevention and management of the issue. Raising awareness helps encourage members' commitment to promote student mental health at the campus level.



Physically separate space from undergraduate counseling and administrative offices

Separate times alone are not sufficient. Choosing an appropriate location is important for maintaining student confidentiality so that graduate students are not in the same place as the students they may teach or facilitate labs for.



Comprehensive training of graduate specific issues on campus

Specific training and orientation at the workplace on graduate specific issues and roles cannot be overlooked. Staff and graduate students should be included in the development of training programs. Trainings should include professional development, wherever possible, and provide mandatory equity, anti-oppression and anti-stigma training to all workers and students.

Implementation of Recommendations

It is recognized that universities are at different stages of implementing mental health strategies on campus. It is necessary to ensure that graduate students needs are not disregarded and are included within university policies and strategies. When setting up a campus wide mental health strategy institutions should ensure the implementation plan achieves the following:

1. Embed graduate student mental health plan into the vision, strategic goals, programs and initiatives of the institution.
2. Ensure comprehensive support while taking into account cultural, gender, sexual, racial and disability sensitivities.
 - This can include and is not limited to risk assessments, equity and anti-oppression trainings.
3. Ensure universities are working from common goals, principles and values.
4. Establish a mechanism for overseeing considerations and the implementation of recommendations.
 - Document all activity and prepare an annual progress report.
 - This step is necessary as the province and universities currently lack comprehensive measurement tools and common indicators to collect information in a consistent manner.
 - Have a regular revision of these efforts and include graduate students in this revision process.

Limitations

Though the Federation is not surprised by the results presented in this research report, some constraints and considerations need to be addressed. Due to the sheer diversity of responses there is no way to amalgamate data from ethnic and religious identification. This limited us in presenting quantitative information, which confirms that ethnicity and religion play a role in instances of bullying and harassment. Additionally, the amount of data and information to summarize is extensive. The *Not In the Syllabus* report is only reflective of Ontario-wide graduate student experiences and not university specific incidents. Furthermore, there is an apparent lack of cohesion with respect to mental health services geared towards graduate students and mental health data collection on campus. The lack of comprehensive measurement tools and common indicators to make use of the information collected is an issue all institutions face, and what the Federation aim to address. With all the data available and summarized it is now time to create attainable goals with measurable outcomes.

Conclusion

As the Federation continues to analyze the survey data, graduate students must continue to engage in developing recommendations for university administrators. The institutional structure and organization of graduate studies reproduce and emphasize their values and norms on graduate students within these schools.

The problem lies in the emphasis on academic excellence over student development and well-being. The structure of graduate programs and its "norms" and policies in place affect student mental health. Current practices are reinforcing ideals and beliefs (e.g. grading, references, extensive workloads, and rewards/discipline).

We must continue to review and assess the impacts of bullying, harassment, discrimination and graduate program norms on student mental health and the message it sends about graduate student culture.



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