

Report Acceptance Letter from Dean Mike Solomon

September 16, 2021

In June 2019, the Rackham Graduate School set up a task force on graduate student mental health. The charge of the task force was to identify major factors that influence graduate-student mental health, with a goal of identifying changes that Rackham, graduate programs, faculty mentors, and graduate students can make to better support graduate-student mental health. The task force was made up of faculty, staff, students, and mental health professionals.

In June 2020, the task force presented a report on its activities during the first year with a series of wide-ranging recommendations. I accepted these ten recommendations, and in my acceptance set out a path that would allow the graduate school to move forward with a coordinated series of initiatives. These would be sequenced in time to reflect the capacity of our organization and our community, as well as the need for some of the recommendations to build upon each other.

The task force continued its work in year two, which led to a report that we are now releasing as the follow up to the year one report. The report updates progress the task force has made on the recommendations of the year one report, and concludes with three additional recommendations.

As the task force was doing its work in the past year, there was also campus-wide work occurring to address resource needs to support the mental health and well-being of all students at the university, as performed by the Student Mental Health Innovative Approaches Review Committee. This committee released its report on August 30, 2021, and it is already clear that there are many synergies possible between the recommendations of that group and the work of the Rackham mental health task force. It is critically important that we maintain the connections between Rackham's work and the campus wide initiatives, which is also one of the new recommendations of Rackham's task force, because I think these connections will be instrumental to attend to the task force's year two recommendations.

On behalf of the Rackham community, I would like to thank all members of the task force for their continued work in the past year, and for the progress you made in the second and final year of the task force, especially given all the challenges of the last year. I look forward to continuing supporting graduate student mental health with the newly instituted Rackham Committee on Graduate Student Mental Health and Well-Being, which began its work on September 1. This is the realization of one of the recommendations of the year one report.

Among the first priorities of this new committee will be to work with Rackham to create a program of graduate student mental health and wellness advocates who will have knowledge and tools to assist programs and operate in a space that connects academic expertise to the work of mental health professionals. I appreciate the progress the mental health task force has made in developing such a program, and I look forward to the committee being able to pilot the advocate program in the year ahead.

I will also seek the input of the MHW committee in helping Rackham to analyze and review its policies and procedures from the perspective of the Okanagan Charter, which the University of Michigan officially adopted earlier this month. Accepting this important charter will have important implications also for the way in which we conceptualize graduate education at the University of Michigan, in which holistically supporting the mental health and wellbeing of students, staff, and faculty alike plays an important role.

I again thank the members of the Rackham Mental Health Task Force, and the application of their knowledge and expertise to this critical challenge for the Rackham Graduate School.

Mike Solomon
Dean, Rackham Graduate School

Update on the work of the Rackham Graduate School Task Force on Graduate Student Mental Health during AY 2020-2021

To: Associate Dean Arthur Verhoogt, Rackham Graduate School
July 2021

During the 2020-2021 academic year, the Rackham Graduate School Task Force on Graduate Student Mental Health has continued its work to identify systemic factors influencing graduate student mental health, and to identify and implement changes that can be made to better support graduate student mental health. We are glad that Dean Solomon [accepted](#) all of the recommendations in our [Year One Report](#), and are encouraged by the progress that has been made towards implementing those recommendations. This work was already urgently needed, and the pandemic has made it even more imperative. The pandemic has taxed

the mental health of students, faculty, and staff; has interfered with accessing mental health care; has caused significant stress, including due to a lack of access to research sites and/or increased care-giving responsibilities; and has disrupted connections—vital to a sense of belonging—to the university and graduate programs. Moreover, many students faced these challenges while also grieving the loss of loved ones. Therefore, we renew our call for a sustained commitment by Rackham to supporting graduate student mental health and well-being.

Here, we begin by reviewing the status of the year one recommendations, summarize our work during year two, and identify three additional recommendations.

Status of Year One Recommendations:

1. Creation of a standing committee focused on graduate student mental health and wellness, similar to Rackham’s Faculty Committee on Mentoring (MORE)
 - a. Accomplished; the new committee, to be known as the Mental Health and Well-Being (MHW) Committee, will convene in September 2021.
2. Amending Rackham Program Review to include questions about the mental health and wellness climate within graduate programs, and to make mental health and wellness climate the focus of the Program Review cycle beginning in 2024
 - a. In progress, led by Rackham
3. Creation of staff positions at Rackham that would allow for centralization of efforts to better support graduate student mental health and well-being
 - a. In progress, led by Rackham
4. Creation of a resource map that helps connect graduate students, faculty, and staff with the many resources available at Michigan
 - a. Two existing resources help fill this need:
 - i. [U-M Mental Health Resources](#), assembled and maintained by Task Force member Henry Cowles;
 - ii. [H.E.A.L.](#), assembled and maintained by J.C. Garcia.
 - b. Once the staff position is created and filled, that person can help identify whether existing resource maps are sufficient or if additional ones should be developed.
5. Creation of a Graduate Student Mental Health and Wellness Advocate Program; these advocates would be existing members of departments (students, faculty, and/or staff) who would receive training, support, and resources that would help them connect graduate students and mentors with existing campus resources and as they enact changes within graduate programs
 - a. In progress, led by the Task Force and, moving forward, MHW Committee
6. Development of programs focused on preventing and addressing toxic cultures, drawing on existing resources that help people deal with corrosive connections
 - a. In progress, led by the Task Force and, moving forward, MHW Committee
7. Use of an integrative approach to increasing access to long-term care, via

a combination of increasing the number of CAPS embedded counselors, increased access to wellness professionals, other professional supports, and peer mentoring, and increased access to tele-therapy

- a. The pandemic has made tele-therapy vastly more available than it was when the task force began our work. Our hope is that this increased access will be sustained. We encourage Rackham to continue to work with the University's Student Mental Health Innovative Approaches Review Committee to increase access to long term mental health care.
8. Increasing awareness of existing resources for individual graduate students, and development of additional skill-building programs for individual graduate students; while we emphasize that changes at the Rackham- and graduate-program levels are essential, there is also a need for resources that individual graduate students can use to attend to their mental health and well-being
 - a. The Task Force has identified some existing resources for individual graduate students, and is working to develop additional resources. This will be an important focus of the new MHW Committee. Something that would be valuable would be a centralized calendar that collates events on campus that relate to graduate student mental health and well-being (similar to the way the BioSciences Initiative has a [weekly calendar update](#) summarizing events on campus that relate to the biosciences).
9. Strongly encouraging graduate programs to require mentoring plans for all graduate students that are updated at least annually, and development of resources that can be used at existing mentoring workshops that focus on the intersection of mentoring and mental health
 - a. Set as a normative expectation by Rackham during the 2020-2021 academic year
10. Changes to leave policies, including the creation of a shorter term (four to six week) leave option
 - a. Discussions ongoing, including work to identify national and institutional regulations that would impact shorter term leaves.

Brief Summary of the Task Force's Year Two Work:

During year two, the Task Force on Graduate Student Mental Health focused on four main areas:

- **Supporting graduate students during stressful times:** The task force developed a [resource](#) during summer 2020 that provided an overview of major stressors as well as principles and approaches that graduate programs and mentors can use to support graduate students. The resource was shared with graduate programs, mentors, and others who worked with graduate students during summer 2020.
- **Creation of a Mental Health and Well-Being (MHW) Committee** (Recommendation #1 from the year one report): We developed the charge for this committee and identified members who can serve on the committee. Terms will begin September 1, 2021. We have also established an additional

advisory group, to draw in more perspectives and take advantage of the wealth of expertise on campus. We are very encouraged by the number of members of the campus community who are enthusiastic about serving on the new committee and advisory group.

- **Development of a Mental Health and Well-Being (MHW) Advocate Program** (Recommendation #5 from the year one report, and substantial overlap with Recommendations #3, 7, and 8): This was a major focus of our work in the past year, and included planning an overall structure for the program, which we have presented to Dean Solomon. We have also worked to identify and develop a suite of options from which departments who engage with the Advocate Program can choose. Ideas we are currently developing include:
 - resources to support compassionate conversations between graduate students and their mentors, especially about difficult topics;
 - a structure for helping programs review policies and procedures to identify changes that would better support student mental health;
 - helping departments identify major stress points and develop supports for students navigating those (this work will consider the [experiences of students with disability accommodations](#)); and
 - programs and efforts to support self-care and well-being by department members, largely drawing on existing resources such as [consultations in support of student well-being](#).
- These options will be aimed at graduate students, mentors, graduate coordinators, and others who work closely with graduate students. Several of these options in development overlap with recommendations from the new Council of Graduate Schools/JED Foundation report on [Supporting Graduate Student Mental Health and Well-Being](#). We anticipate that developing the MHW Advocate Program will be a major focus of work of the MHW Committee in fall 2021 and hope to launch the program in winter 2022.
- **Policing:** A new area that emerged as a major focus in year two was the intersection of graduate student mental health and policing. Our focus on this was influenced by the events of summer 2020 and the GEO work action in fall 2020. Because it was a major focus and was not covered in the year one report, we discuss this topic more fully below.

In addition to the above, members of the task force met with members of the MORE Committee to discuss the development of resources that can be used at existing mentoring workshops. While the initial discussions during year one indicated that the development of a short handout might be useful, conversations over the past year suggested that it would be more useful for task force members and MORE to collaborate on a review of existing MORE materials; the goal of this would be to make material related to mental health and mentoring relationships more explicit. It would also be beneficial for members of MORE and the MHW Committee to continue to consider the [experiences of students with disability accommodations](#) as they review existing materials.

Three Major Themes from Year Two

Three topics were consistent themes throughout the year: the influence of policing on graduate student mental health, the importance of also attending to and supporting faculty and staff mental health, and the tension between providing resources for individual students while also recognizing the importance and urgency of systemic changes. Because these were dominant themes, we want to highlight them in this report, addressing each of them in more detail below. We then move on to make a specific recommendation regarding each of these areas, which we intend as additions to the 10 recommendations in the Year One Task Force Report.

I. Policing and graduate student mental health

The societal reckoning with systemic racism and police violence in summer 2020 and fall 2021 prompted the task force to realize that we had missed a major factor influencing graduate student mental health in our year one report. Policing is a public health issue, and the harmful effects of policing are felt disproportionately by individuals from racial and ethnic minority groups, LGBTQ+ individuals, immigrants, and people with mental health disorders (Fleming et al. 2021 *Health Education & Behavior*). Moreover, the mental health of members of communities that are disproportionately impacted by police violence is harmed as a result of that violence (Bor et al. 2018 *The Lancet*). Thus, our goals of better supporting graduate student mental health, and of reducing observed inequities in mental health of students from marginalized groups, requires a focus on policing on campus.

To that end, task force member Sara Abelson led the development of a survey, with input from Task Force members, Advancing Public Safety Task Force members, and faculty, staff, and students across campus. The survey was implemented as part of the Healthy Minds Study and distributed to students with support from Provost Collins and VP for Student Affairs Harmon. Task force members also reached out to DPSS and AAPD to gather information and develop a better understanding of current practices and interactions, with a focus on the intersection between policing and graduate student mental health.

This work is still ongoing, but a few major results are already clear. First, policing significantly shapes student experiences and mental health, and students from different backgrounds are differentially impacted by policing on campus. Second, there are major gaps in understanding how policing and mental health intersect for graduate students at Michigan. This includes a need for information related to the quantity, quality, and characteristics of police and student interactions around mental health issues, including when students are in crisis. Third, there is very strong student support for changes to campus policing, including policies regarding when students experience mental health crises. At Michigan, as at many institutions (Margolis & Shtull 2012 *J. College Student Psychotherapy*), campus police are often first responders when a student experiences a mental health crisis

on campus which may impact students' desire to call for help and their experience of the interaction during crisis.

Our work in the past year has revealed a major need for additional work in this area. The presence of police on campus impacts student mental health, with disparate impacts on different groups of students. Moreover, when students are in acute need of mental health support, having police involved in the response, while intended to be supportive, can be traumatic. The University of Michigan has a tremendous opportunity to not only improve the mental health of graduate students on our campus, but also to be innovative and forward-thinking leaders as the nation grapples with these issues. We anticipate that this will be a major focus of work by the Mental Health and Well-being Committee in the 2021-2022 academic year.

II. Faculty and staff mental health

Faculty mental health and graduate student mental health intersect in a variety of ways. First, faculty who take care of their own mental health are more likely to be able to support graduate students, promoting a supportive environment and giving faculty the tools to have conversations about mental health and well-being. Second, [a recent survey](#) found that 21 percent of faculty agreed or strongly agreed with the statement, “supporting students in mental and emotional distress has taken a toll on my own mental and emotional health.” Notably, there is significant variation by gender in terms of who does this support: 85 percent of female faculty and 84 percent of transgender, non-binary, genderqueer, or gender non-conforming faculty reporting having conversations with students about mental health and wellness in the past 12 months, vs. 71 percent of male faculty. Thus, disparities in terms of who does the work of supporting graduate students can contribute to inequities in faculty mental health.

A repeated theme of our conversations over the past year was that faculty have a crucial role to play in supporting graduate student mental health and well-being. While there has been less of a focus on staff mental health, especially as it relates to graduate student mental health, we suspect that the same dynamic is at play. Thus, attending to student mental health will also require attending to faculty and staff mental health. Such efforts are especially important and timely given the expected [impacts](#) of the pandemic on long-term mental health. Two possible ways in which Rackham can better support faculty and staff mental health are: 1) to identify opportunities to reduce demands on faculty and staff time (e.g., by considering whether there are ways to reduce the number of letters of recommendation required as part of applications—for example, a simple yes/no check box asking if a faculty member supports a student receiving travel funding, rather than a letter of recommendation); and 2) looking for opportunities to partner with existing efforts at Michigan, especially [MHealthy](#), [FASCCO](#), and the Student Mental Health Innovative Approaches Review Committee.

III. Resources for individuals and institutional change

It is imperative that there be changes within graduate programs, Rackham, and the university as a whole, in order to create an environment where graduate students can flourish (Newton et al. 2016 *Global Health Promotion*). At the same time, graduate students will benefit from more resources for individuals (e.g., resources supporting self-care, access to high quality mental health care via on campus counselors and through outside professionals covered by GradCare). The Task Force wishes to strongly emphasize that resources for individual students are a supplement to institutional changes, not a replacement. We urge Rackham and the Mental Health and Well-being Committee to continue to focus on changes at the department, Rackham, and university levels, while also ensuring that individual graduate students have access to resources and supports as they navigate graduate school.

Additions to Year One Recommendations

Based on our work over the past year, we wish to add three formal recommendations to the ten that we made in our year one report. Those recommendations are to:

11. Conduct a thorough evaluation of intersections between policing on campus and graduate student mental health, including:
 - a. a review of the situations in which police might be involved in responding to a graduate student in distress on campus or in a “wellness check,” as well as the development of alternatives that do not involve police officers;
 - b. a thorough analysis of the results of the survey distributed in winter 2021 regarding policing and mental health;
 - c. a review of the policies at Rackham regarding when security personnel are used, who provides those services, and how it is arranged.
12. Consider the impact of Rackham policies and procedures on faculty and staff workload and opportunities for partnering with existing efforts, including:
 - a. identifying opportunities to streamline existing procedures (e.g., making approvals occur via Google forms rather than signed hard copies; allowing faculty to simply indicate “yes/no” for things like travel funding, rather than requiring a letter of recommendation);
 - b. identifying opportunities for partnering with [MHealthy](#), [FASCCO](#), [The Work-Life Resource Center](#), and other university initiatives that promote faculty and staff well-being, which in turn helps support student mental health and well-being.
13. Ensuring strong links between the MHW Committee and higher level committees at the university, especially the Student Mental Health Innovative Approaches Review Committee, to continue to work on implementing programs that benefit individual students and on changing institutional structures to better support student mental health and well-being.

Conclusion

Well-being and academic performance are interdependent and dynamic. Moreover, supporting graduate student mental health and well-being is strongly aligned with Rackham’s mission “to advance excellence in graduate education, to cultivate a vibrant and diverse student community, and to impact the public good through the scholarship and discoveries of its students and degree recipients.” Fully achieving this mission will require work that acknowledges and reduces existing inequities that impact the mental health of students, especially those from marginalized groups.

Beyond promoting academic and professional success, supporting graduate student mental health and well-being is the right thing to do. Thus, we reiterate our call to Rackham Graduate School and individual graduate programs to expand from the current focus on graduate student persistence and graduation to a more holistic wellness approach. We must emphasize that attaining a graduate degree should not come at the expense of health and well-being, and must prioritize graduate student mental health and well-being as integral to academic and professional success.

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