From You, I Get the Story:
Amplifying the Voices of Students with Mental Health Issues on College Campuses

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Lindsay Metzker, MS.Ed completed this project as part of her fieldwork for completion of the Disability Studies Certificate (Graduate) program at Temple University (https://www.temple.edu/academics/degree-programs/disability-studies-certificate-graduate-ed-diss-grad). She is currently enrolled in the Ed.D. program in the College of Education and Human Development at Temple University.

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From you, I get opinions
From you, I get the story
– Pete Townshend et al

Prologue: Mental Health and Academia – What We are not Discussing

It was August 2005. I was sitting in new Teaching Assistant orientation at Syracuse University trying not to focus on how I had left three years earlier. I had entered the English PhD program on fellowship and moved home in disgrace on a forced medical leave after medication, therapy, and an inpatient hospital stay that left me deeply traumatized failed to control my mood disorder. And now I was back. I was stable on medication, and ready to begin again. But my hubris was gone. I spent the next three months desperately trying to regain my footing in academia and deal with classmates who just saw me as “that bipolar chick” and not much else. My intellect was still there, but school was not sustainable. I found an excuse to drop out and flee across the country before I could embarrass myself in the academic world again. I was crazy. I was a dropout. I was a failure. And I thought I was the only one whose academic aspirations had been derailed by a psychiatric disability.

Nearly twenty years later, I realized that I was far from the only person with a significant mental illness who had had their aspirations derailed not only by symptoms such as mania, psychosis, or clinical depression, but by the University system itself – professors that did not grasp that medication side effects did not mean that you were lazy, unprofessional, or unintelligent; administrators who were unwilling to show flexibility with appeals or incompletes and pushed withdrawals or expulsions over providing support while on campus; Student Disability offices that had the best intentions, but did not know how to think outside the box when it came to explaining and providing mental health related accommodations; and fellow students that understood mental health through the lens of stereotypes and stigmas rather than seeing a person with lived mental health experience as a fully faceted, yet neurodivergent individual.

Colleges and universities could have done far more to serve me and the countless others with similar experiences.

It starts with listening to US.

But are university administrators, faculty, and staff ready and willing to listen to a sizeable number of students who are far too often underestimated, undersupported, and pushed out rather than welcomed and empowered to succeed? And for students with lived mental health experience, what would we say to the University community in our own words, and on our own terms?

Gathering and Amplifying Student Voices

These questions provided the impetus for my final project for my graduate certificate in Disability Studies at Temple University. Working in conjunction with Dr. Mark Salzer and the Temple University Collaborative for Community Inclusion, we developed five prompts for students who had attended, or were attending college while dealing with serious mental health symptoms – specifically psychosis, mania, and clinical depression. These prompts were discussed with established scholars with lived mental health experience, and resulted in a five question, fully anonymous survey to collect the thoughts and experiences of individuals – what they and we think is important for colleges and universities around the world to hear. This is not research. It is advocacy for students who face mental health challenges on campus, and an attempt to amplify our voices to be better heard.
Procedures and a Note on Language

In terms of the project's parameters, we understood that neurodivergence as a whole is a very broad concept, and that there are many mental health issues that can challenge or limit a student's ability to successfully complete their degrees. We chose to focus less on formal diagnoses and more on some of the most impactful experiences that people can have that can derail college completion—psychosis, mania, and clinical depression. We chose not to include severe Obsessive-Compulsive symptoms, eating disorders, or anxiety disorders, including PTSD/CPTSD, explicitly in the survey, partly because we thought they may be somewhat more accepted and heard on college campuses. We do not mean to slight the experiences of people with these issues, but instead wanted to specifically draw attention to the voices of others who may be even more voiceless. Students did mention serious mental health symptoms as coexisting with some of these diagnoses, and one student did suggest including PTSD as a major mental health issue that students face if there are revisions to this project.

We chose to ask what people felt it was important to “understand” rather than “know” in the first set of questions because we felt the concept of understanding might better draw out the lived mental health experience and how it can impact one’s academic career and personal interactions with faculty, staff and peers. It is one thing to empirically know that managing a chronic condition presents challenges and can make college or work life more difficult. It is another to fully understand, from a first person, first voice perspective both how lived mental health experience makes college life and work more difficult to navigate. In having respondents explain what they wish faculty, staff, and peers understood about living with mental health issues, our hope is that university students and personnel can begin approaching these students and others like them differently, and not stigmatize, shun, or underestimate them.

Discussing Discrimination: Why?

In terms of question four, which asks whether students had encountered discrimination as a result of dealing with significant mental health issues, we understood responses would be mixed and that “Not Applicable” could be an answer. I did feel, however, if we did not start a conversation around unfair treatment because of mental health systems, or differences in how student crises were handled based on race, gender identity, or orientation, we would be remiss in not challenging differences in how students in crisis are treated due to factors beyond academic standing, behavior, or diagnosis. Just as the academy as a whole is facing a reckoning around whose voices get to be heard and whose experiences are magnified when we talk about the student experience, a critical disability studies approach to mental health and the student experience needs to acknowledge the various intersections that influence how a student in crisis or a student with lived mental health experience navigates their world, and what else may impact how they are treated by the University and by their peers.

In Conclusion: Students on their Own Terms, Telling Their Own Stories

Finally, we wanted to ensure the students could offer their own insights on how incoming undergraduate or graduate students with lived mental health experience might better navigate their academic programs and university infrastructure. So many students who have faced mental health crises in college or grad school feel isolated and totally alone, as I did back in 2005. If there is anything that this project has shown me, it is that an ambivalent at best, downright hostile at worst, response to a student dealing with significant mental health issues is far from uncommon. But this is
not about my own story; our goal was to keep the students’ voices centered and to share their thoughts and experiences with the greater academic community.

The student responses are provided below broken down by the prompts they were given. It is important to note that apart from edits for personally identifying information, college/university identifying information, and minor edits for grammar and syntax purposes, the students’ responses are their own and they speak directly to the challenges faced by students with lived mental health experience at colleges and universities all over the country.

In these voices you will read far too many, in my opinion, respondents who felt they were alone and unsupported. Their peers did not understand what they were going through. Professors saw them as lazy or unintelligent and unmotivated. Too many students were forced to leave campus and put college on hold – or told to forget about it entirely – because their college or university did not try to understand what they were going through or how these students could remain enrolled with the proper supports and accommodations in place. While other neurodivergent communities, such as the Autistic community, openly advocate to take control of their own stories and experiences, prejudice and discrimination around mental illness often prevent those with lived experience from speaking openly lest they lose careers, their education, their partners, or their social standing.

We hope this project furthers efforts to give a vastly underrepresented and undersupported student population the opportunity to regain control of their own narratives and experiences. We deeply hope that administrators, faculty, and staff who review and read these materials take heed to what these students have said about their time in higher education, and how it is time for the academy to do more and do better. What happened to me, and what happened to many of the fifty-eight people who completed the survey, did not have to happen. We can do better as a society and an academic community to change the conversation around mental health on college campuses. Universities can, and should, be an active part of demolishing stigmas and stereotypes and becoming a braver and more welcoming space for all students.
What should a counselor, advisor, other support staff and faculty understand about students who live with significant mental health issues such as mania, psychosis or major depression?

We're not "lazy."

I experienced my first manic episode at the beginning of my second year of a graduate degree. (The) Vice Dean of student affairs recognized that I was having a manic episode, a psychiatrist I saw diagnosed me in less than 5 minutes without explaining what bipolar was - I didn't know what it was at the time. Zero sensitivity.

My behavior will be inconsistent.

They should know that we're scared. Scared and lonely because we know we're different, we just don't understand why. Scared to admit something is wrong. No one wants to be part of a circus…That's how I felt anyway.

I believe that university support staff should be considerate and empathetic towards those of us who live with mental illnesses in general. For example, asking the student if they are currently using the university resources available to improve their mental health and their academics would be beneficial to the success of the student. If the faculty are aware of a student who is facing a mental health crisis or any kind of mental illness, they should recommend for them to utilize the available university resources and grant them accommodations if needed. Faculty need to be aware of accommodations and follow through with them for students with disabilities, including those with mental illness. Universities need to have proper mental health resources and provide peer support spaces for those living with mental illnesses and disabilities. There are cases in which college students die by suicide on-campus and then the university fails to act upon their lack of commitment towards addressing the mental health needs of the students. For example, I read on an Instagram social media news account called (XXXXX), that a Black college student faced a mental health crisis at his dorm. Then, someone called the police on him, and then the student fell 10 floors down out of the dorm building window to his death. Yet, no one did anything to help the student. The police and the students did not know how to respond to this situation. Suicides on college campuses are increasing and it’s up to all of us to make sure suicides are prevented. Significant mental health issues need to be taken seriously without policing and should be responded to with empathy. All counselors and university staff should be properly trained in crisis prevention and intervention as they interact with students daily. It’s not easy for those with mental health issues, especially those with significant mental health issues to just go to class or to just keep up with the class workload while having symptoms. Mental illnesses don’t always just go away and it takes time to learn how to manage them.

When students struggle with mental health concerns its often not as simple as "just use your coping skills" or "you wouldn’t be so stressed if you did your homework." Mental illness takes up a lot of spoons! (Look up spoon theory if you don’t know it) It impacts every SINGLE facet of our lives. Sometimes we just CAN'T do the thing that seems logical to solve the problem. This is compounded even more if we struggle with a neurotype that is not neurotypical (such as ASD or ADHD), which can severely impact our executive functioning. Students need SUPPORT, not just meds/therapy.

That depression has many faces.

That sometimes it’s hard to reach out for help. That sometimes it's hard to get assignments done. There can be a lack of energy to live everyday life with school as an added thing.
we do not always have the energy to be present or mentally cannot be and it takes a toll with grades and deadlines.

Everything becomes extremely overwhelming and asking for help can feel like an impossible task.

That even when it seems like we’re not trying or go MIA that we’re still trying our hardest

The student is not lazy but will at times need extra support completing assignments. Open communication is a must. I am struggling and don't need school to be another issue

Kindness is always key. Sometimes skipping a lot of classes, failing or missing assignments, or missing appointments is not laziness or an unwillingness to improve/"get better". It is often a cry for help. Also, understanding how difficult it is to access quality therapy, and that therapy takes time to "work". Progress is not linear! Celebrate the small wins and do not let struggling students diminish their accomplishments, big and small.

I might have moments where I want to disappear or not interact or talk to people. Group projects are exhausting. Emails can be triggering especially criticism or telling me I must do a task I’ve been putting off due to depression.

We cannot always function in the same ways as everyone else. Much of our days are consumed by illness or trying to recover from the days we spent ill and that makes it almost impossible to keep up with schoolwork in the way everyone does. We also struggle greatly with reaching out for help and even when we do, we're often told there's nothing that can be done for us. Please check in and make sure we're okay and try to help us proactively, because many times we do not have the forethought to do so ourselves.

It can be difficult performing certain simple tasks like responding to emails timely or getting assignments in on time. For in person classes where lectures are not recorded, sometimes I need concepts repeated or reexplained because I either wasn’t able to attend because of my mental health or my mental health made it difficult to pay attention.

We have no control over it, and we are not using it as an excuse

Especially at the PhD level, we're expected to perform at an intense rate and quantity. Obviously, students rarely share depression, mania, psychosis, or anxiety with others, especially at such a competitive level. Faculty should understand that more than those who will come to you and tell you they're having some trouble and ask for more time for an assignment are actually suffering from these problems. Be flexible.

That sometimes it’s hard getting out of bed, or even showering, so celebrating little wins is encouraged.

We don't always realize we’re manic and tone moves different for us

That we are not always able to do things on time, or participate in activities

That we sometimes can’t control our symptoms even with therapy and medication.

The way I might physically present doesn't define my academic capacity.
It doesn't matter how hard we try; our best is sometimes next to nothing. When you have periods
where you haven't been able to shower in a week and haven't been able to get out of bed for days
sometimes knocking out two paragraphs out of a two-page essay is a huge achievement. It doesn't
matter that we've had weeks to do it, when you're trying to keep yourself sane on a daily basis it's
hard to focus on homework.

They should understand that it's not that person's fault that they have those issues. It's a chemical
imbalance. In time, the student will get better and be able to finish their degree if they work hard
enough. It just might not be on a specific timetable, and they need extra support and encouragement.
Professors and everyone else should be patient and show compassion for these individuals and
encourage them to seek the treatment/s of their choice. Excellent disability services at a college are a
must. For most, a combination of therapy and medication is required. Professors, instructors, helpers,
etc. should respect confidentiality. They should never disclose these issues to anyone else unless
they are permitted to do so by the student. I was in college, and I experienced a lot of discrimination. I
ended up graduating first in my class, but no one cared. Only one of my professors outside of my
major was willing to write me a recommendation letter and I know the head of my department told the
other instructors and students without my permission. I'm finishing my novel that's based on my
experiences. It's so sad that we have to speak up for ourselves because no one else will. My parents
are my advocates and I thank God for them every day.

I think it is important for staff to be open to learn and accommodate to a student's specific
circumstance. With that being said, it is difficult for staff to know or be prepared to deal with students
with disabilities that are not always within the norm. Being in higher education, professors and TAs
may only be familiar with accommodations that have to do with physical (non-psychiatric) or learning
disabilities. This may look like early arrival to class for students who use wheelchairs to get situated
before the rest of the class arrives or it can look like extra time on exams for students with ADHD or
dyslexia. However, most staff and professors are unequipped or uneducated on how to teach a
student with chronic psychiatric disabilities. It is easy to assume that a student is lazy when they may
be bed ridden from their chronic depression. It may be confusing for professors to see a student with
bipolar disorder spill out ideas and overly participate in class but the next week not see them at all.
Where is the time to address their concerns or even notice? As hidden as some disabilities can be,
psychiatric illnesses are just as physical as a student whose disability is fairly noticeable. It is
especially important for staff to take into consideration medication that comes into play with mania,
psychosis, and major depressive disorder. It is unlikely a professor would penalize a student with
Cancer for being behind on work because their chemotherapy is so exhausting, so why should those
on Lithium or Seroquel experience differently?

Most professors may not have education in education itself but are superior in their field. It is not up to
them to care for their students, but they should encourage them to reach out and discuss or explain
their circumstances so that it is easier for them to provide equal opportunity to education along with
their accommodations.

As someone who's been diagnosed with major depressive disorder, I would love for faculty to
understand that depression does not equal laziness. This disorder is not just staying in bed some
days and being unable to do work, it’s so much more. It’s the inability to get out of bed and care for
myself like showering, brushing teeth, cleaning room and eating. It’s the thoughts and self-gaslighting
that tear me down. It’s the internal struggle of not being able to think straight when I have too much
work to be doing for all my classes. It's important for all types of staff to understand this and keep an
open mind that everyone’s situation and disorder is experienced differently per person.
They should be understanding that while school is a student's main priority, things come up. Although many students want to learn, it can be exhausting and hard to learn and stay focused while there’s so much happening in your head at the same time.

For me at least, the successes and failures of school have a greater impact on our mental health than they think. Yes, we already have mental health issues, but school destabilizes us even more. The struggle is more than an educational struggle. It’s a life chapter of the mental battle vs what everyone else wants us to experience and know at school.

That an episode, whether depressive, manic, hypomanic, mixed, etc., is not just an excuse for an extension, and that being open about your condition takes an immense amount of courage that shouldn’t be frowned upon or discounted due to a "zero tolerance on late assignments" policy. That this is not a choice, it is not intentional, it is not conveniently timed to get out of an exam or term paper, and that a "you don't get extensions in the real world" mentality is bullshit. That if any student opens up about how challenging things are for them right now, you need to also consider how agonizing it was to take on the gigantic challenge of telling you that for fear of shame, embarrassment, or just looking someone in the eye or typing up an email.

Professors should understand that we are different than the regular class population and we need all the help we can get. The hollow satisfaction that you get from knowing you upheld your rules may cause someone to harm themselves or worse if their illness becomes too much to bear. I speak from experience.

They need to understand the disparity between POC and white students especially WOC.

We face a lot more stress and pressure than other students, and often need to be checked in with often to ensure that we’re on track. It’s also important to establish trust and compassion, and to be patient. And we’re not dangerous, and we shouldn’t be treated as such.

It is hard to concentrate during class. Students are still engaging and struggling really hard on trying to be perfect. It is much harder for an unhealthy student to complete the same amount of works a healthy student do. It is not their excuse to be lazy. It is not their faults. They can't live a normal happy life like other people can.

Staff need to be more understanding and educate themselves about the severity of mental health issues.

It’s really exhausting, and our brains are very different from the typical student. We’re not bad students, just handicapped (imagine a person with a broken arm playing basketball). We’re trying our best! So please be patient!

That we know what we need better than anyone else does. That we are doing the best we can.

There needs to be academic accommodations procedure for bona-fide condition as this can interfere with education.

we do not always have the energy to be present or mentally cannot be and it takes a toll with grades and deadlines

We are constantly living an uphill battle, sometimes succeeding academically when the energy hits us and other times falling short of our own expectations. Forgive us for taking mental health days, for
I think they should be aware of the stigma with mental health. I wish they can understand how lonely it feels to sometimes to know anyone who is struggling with the same thing.

Every single day is difficult and no one at (X University) really cares to accommodate us. Honesty in my experiences (X University) makes mental health worse. Every day I think about the students who have committed suicide on campus and how (X University) acts like they have nothing to do with it.

It bothers me that (campus counseling center) is so poorly set up and (Y University) acts like it is a well-functioning and helpful resource for students. The only way to get immediate help at (campus counseling center) is to go to the front desk, tell them you want to commit suicide and that you have a plan. Otherwise, students having a mental health crisis are left to wait usually weeks to see a therapist. There is also a good chance the therapist may not even be able to help them. In my first (campus counseling center) appointment my therapist said to me word for word "I don't know how you expect me to help you." after I was open and honest with all the problems I had been facing. I waited weeks for that appointment and went weeks without any additional help afterwards despite how badly it was needed because (campus counseling center) made it clear they could not help me. They "didn't know how I could even expect them to." Not like they're a counseling center or anything like that.

I returned to (campus counseling center) for help a few semesters later because help was desperately needed and got better service than before, but it still wasn't great. Some of the therapeutic advice I was given was to "listen to music" and "drop out of school because it is not worth the toll it takes on my mental health." Neither of these were helpful to me. I won't ever forget the email I got from (campus counseling center) filled with "tips to improve mental health" with things listed such as "watch a YouTube video." and "pay your rent."

My (Z University) courses were often designed poorly without the interest of the student in mind which made me receive poor grades and feel miserable on campus and every resource I turned to failed me. I feel like the school has trapped me in a cycle of failure and misery I should have just left earlier. I feel like I'm being scammed.

I wish teachers would be more understanding with students when it seems they're falling behind in class. No one likes failing or wants to come to college and fail on purpose. Failing students usually have something else going on making life difficult and I wish the people at (B University) understood that. People have lives outside of what they do at (B University) that should be respected, not treated as secondary to homework, good grades or mental health.

Sometimes I wish I could tell them how hard I work to work through feelings of pain and unworthiness. That my work suffers because of my mental health and not because I'm not trying hard enough/not interested.

They should understand that it's a real and valid struggle, that can have physical detriments as well. It should also be noted that even with treatment they'll never be 100% cured, so there will be setbacks and other issues.

It is extremely difficult to focus in class a lot of days but I'm doing my best. Sometimes I'll miss class because I can't get out of bed. I try as hard as I can, but I want to sleep forever.
Please do not treat me like I am crazy. Obvious thing to say, of course, but I notice every change in tone and behavior, specially from employers in student jobs.

I won't say that all professors or academic advisors do this since a few have gone as far as to get personally involved to ensure I am safe. However, there are others whose judgement I feel burning through my skull when it's been a month and I still cannot turn-in the work. I have an accommodation for a reason. It feels as though they take it personally when I do not perform as well as my classmates.

That even if they might not be performing to the highest standard, or whatever standard others think they should be performing at, they likely still care. Mental health issues that invade your life are hard to tackle, and often just getting up for the day, showering, basic self-care is difficult. Professionals and other advisors should also try to be as open minded as possible, even if they have their own biases about mental health. Don't share those biases and understand that if a student comes to them honestly about a mental health concern, they should be understanding and work with the student for accommodations. Shame is not the answer.

We are not "being lazy!" We are pushing as hard as we can though what feels like mud, while blind. We are working our asses off to do the bare minimum, if we can.

Many people only receive an initial diagnosis of a significant mental health issue in early adulthood, so these are students who aren't necessarily able to put a name to their issue let alone begin to identify how to handle it. Instead, staff reduce all students to the lowest common denominator instead of considering the risk of more serious issues. I finally got up the courage to go to my college's counseling services, and my symptoms were dismissed as me not responding well to a bad breakup because I didn't have any previous diagnoses. Had the counselor listened and taken a more probing history, perhaps I could have been referred out and treated earlier for what turned out to be a severe depressive episode. Instead, I wound up failing all my classes and taking a dean's vacation because I was suicidal and self-harming. I often wonder if I could have avoided three months in and out of an inpatient psychiatric facility, and all of the academic and resultant financial issues, if I would have been diagnosed with bipolar disorder and anxiety disorder and treated earlier.

Sometimes how difficult it can be to even complete little tasks. Getting out of bed should be considered a significant step.

Our symptoms are uncontrollable and our need for extra support is not cheating.

you need to be patient with them. every day is a constant struggle with themselves.

They should understand that not everyone will know why they feel what they do or even what they feel. There are a lot of triggers for people that associate with their mental health disorders. Not everyone knows what they need from others so it's best to kind of ask smaller questions working towards figuring out what they need instead of just simply asking what they need over again if they don't know.

Even on good days every day is a struggle. Sometimes it's hard enough to even think about getting out of bed let alone get to class and complete work on time.

I don't know, they don't listen anyway.
Please be patient with us, but also treat us as equals. We are not children, nor are we any less intelligent than you are. Respect goes both ways.

everyone's experience is unique
What should other students understand about students with significant mental health issues?

We're not "lazy"

Students should know more about mental illness generally. My fellow students did not seem to know much about mental illness and nothing at all about mania. While my mania was untreated, I was aggressive, irritable, and had erratic behavior - my fellow classmates thought I was a "bitch", would gossip about me, and avoid me.

Be kind and patient

People need to understand that compassion and patience goes a long way. Give us time to sift through the damage and find the right cocktail to treat us. Sometimes we need weeks, months to figure out the right treatment.

Students should be more understanding and empathetic towards other students who are facing mental health struggles. It's great for students to say, “Get help”, but after saying this statement there is almost never a follow-up with them on how therapy is going or how the treatment is going. Once a student finds out that someone else has a mental illness, then usually these students avoid them. The same narrative surrounding mental illness persists with referring the student to a mental health resource and oftentimes ending the friendship or relationship there. There is a lack of peer support spaces for students with mental illnesses that aren’t facilitated by a medical professional, which is concerning as more youth and college students are facing mental health crises. In addition, some should be aware that it can take up to one month for an appointment with a therapist on-campus to be scheduled. Therefore, it depends on both the individual and the individual’s support system, including other students to make sure that crises are prevented. Students need to stop calling the police on other students if someone is having a mental health crisis. They need to be more aware of the signs of distress and learn how to properly respond to these situations, instead of policing them. Calling the police on mental health crises only makes the situation worse as police too probably aren’t trained to handle mental health crises and might take the student to a mental hospital. If a student gets admitted into a mental health hospital, then they are at risk of graduating on-time and are at risk of being kicked out of the university. The grassroots organization called Project LETS has many resources about the horrible incarceration and ableism that goes against the advancement of the disabled, mentally ill, chronically ill community. We need more students to speak upon their experiences with mental illness to further support other peers. The whole “Get Help” approach is good, but not the best way to help those struggling.

Sometimes students don't understand the struggles their peers are going through and that's OKAY. You don't have to understand what someone else is going through to be kind, supportive, and non-judgmental! Offering to support someone in whatever way would be best for them can make a world of difference. Maybe you could pick up a meal for someone who struggles with transitions or sit in the same room with someone with ADHD to remind them to stay on track. Little things can make a huge difference.

Do not compare struggles.

They are not alone and it’s extremely important to reach out for help

check on others
That we don’t need to be treated differently and others need to understand that what not seem like a big deal to them can be nearly impossible for us.

That it’s a real issue and you can’t self-diagnose or claim you understand because you take the lowest dose of Prozac. It’s not cool to be depressed or have anxiety to have a “manic episode” it’s a real life major health issue.

I am not a threat or scary because I struggle with mental health.

We do not want to be treated differently, and we are all just trying our best. Sometimes best is different for everyone, and sometimes trying our best is us functioning at 100%, while others day our best is 80%, or 60%, etc. Please reach out and encourage study groups, etc. but do not take a rejection from us as rude or a personal attack.

I’m wanting to talk but it feels impossible to do sometimes.

We’re not skating through or getting away with doing less because we are given permissions for certain things. We are given those permissions because of how difficult those things are for us. It would be great if other students could be more understanding and compassionate towards the capacities and situations of others with mental health issues.

Belittling or downplaying mental illness (liberal and overuse of the “feeling depressed”, for example) makes it harder to ask for help, and personally has made me put off asking for help because it made me feel like I wasn’t going through anything significant.

Not everybody is the same

Please stop stigmatizing it. I feel it gets worse as you move up the academic ladder. Peers think you’re weak, soft, dramatic etc. if you express having neurodivergence, even if they themselves will admit their own problems to their closest friend.

It can be hard to maintain, especially during stressful times. So, compassion as well as encouragement towards peers is super important. Even if they don’t want to talk about it, supporting friends and noticing when they’re not okay can be life changing.

We’re not doing it for attention

That we are not crazy

That we are trying our best to live and thrive.

Don't put value on grades and things that separate us or rank us. Keep things light, find commonality, make me and others feel welcome

I just want to do well in class, I may be getting group work done in the last minute but it will get done. I'm not trying to hold anyone behind, it's just so hard to keep up.

I would try to find a concise clear way to say this in a way that students that aren't studying psych would understand. It’s a chemical imbalance, it's not a choice. I did not choose to Bipolar and live with Asperger’s and other issues. My mind works differently than yours. Everyone deserves to get an education if they have the money and determination to do it. Please don't make fun of me or treat me like I'm less than human because it hurts me. I'm sensitive to what people say and I'm doing the best I
can. If you're worried about your safety, you have a right to report me but I'm more of a danger to myself than others.

Other students may become confused or fearful of the behavior that their peers with mental health issues display. It is important for others to consider their position and express concerns to university resources if they feel that someone is in danger or in need of medical attention regardless of if it is an emergency. Those with significant mental health issues are not crazy but, in fact, have neurochemical/electrical imbalances that disturb the brain and body's ability to function in a healthy manner. Their illnesses may often appear to be a disease of thought yet is a completely somatic experience.

I believe it's important for other students to keep and open and understanding mind. Some healthy students that do not have these extreme struggles will not understand from personal experience. So, I think it's important to educate people on these diseases and not look at someone having a manic episode and labeling them as crazy. They're ill and they need help.

That other students are never ever alone and more people than you think are under similar stress due to mental illness.

We aren't faking for attention or trying to do less work than others. We need the modifications to preform when we struggle to.

That, if you are a decent human being, compassion is significantly appreciated whether it is acknowledged or not - and that honest observations about someone you care about can be helpful if someone is undiagnosed.

Empathy (not judgement) is appreciated. Don't say stupid and inconsiderate/ belittling things as well like "don't be so sad/ just be happy", "why are you so negative?" or "I heard you were feeling a little sad" to someone with severe depression.

Racial and gender disparity

Other students can be a huge stressor, and with mental health issues we often feel alienated, and are afraid to disclose our struggles, even though we may need support. But at the end of the day, we just want a community and someone to understand.

Students with mental health issues are being isolated and withdrawing from communications and activities. It is not their real personalities. They can talk very negatively but this is not because they are mean.

Mental health issues are normal and people need to be more supportive to those who face mental health issues.

Psychological health issues are like physical ones. Be considerate of a mentally struggling person as you would be of a physically struggling person.

I have good days and bad days. I have episodes. It's even more exhausting for me than it is for you. So please be considerate and patient. Also, you will likely never know the full extent of my struggle, so please don't belittle what I do tell you. If you have questions about how to handle me or what's going on, just ask. That's ok and very appreciated!
That we aren't dangerous or scary or abusive, that we aren't "doing this for attention," that we are worthy of friendship and love and we in fact need it to thrive.

Cognitive learning is affected by cognitive disabilities.

check on others

Just as you suffer when someone hurts you, whether it be physically, mentally, or verbally, that cuts us deeper. We know that we're different, that we're built differently than the rest. We are not delicate, but we are empathetic and feel so much more than others. Reach out when you can and do not be afraid of having the tough conversations. Merely bringing it up could be uncomfortable for both parties, and yet the fact that someone addresses the elephant in the room can be a monumental step towards growth.

If you think we are strange, then feel free to estrange us. Inauthenticity does not breed growth.

Other students should understand that people with mental health issues will feel, think, behave, and react differently than someone who doesn’t have the issue. I wish they could understand the importance of being supportive and what is the mental health issue.

People should just be nice. A lot of people have been, not all. My whole generation seems plagued by generalized anxiety. I don't know if people have always been like this but are just more open about it these days or if its because our world is getting more and more stressful. Or maybe I just have very anxious friends...

It can be difficult to be as involved with the cohort as much as everyone else.

That no, we don't want attention and no, it's not fun or quirky.

My social anxiety makes it difficult for me to have extended conversations. I don't dislike you; I dislike myself.

My colleagues and other students, in my experience, are far more likely to understand and treat me the same than professors and other professional staff. I don't know why. They just don't feel awkward around me after I mention I hallucinate or am having a manic episode. Some have even helped me and judgementlessly reassured me that there is no one behind me and that there is no one following me.

Social skills might not be the best, and again, if it seems like they're slacking there might be more going on. Living with significant mental health issues means that sometimes you're at the mercy of your brain, even when it's inconvenient or difficult. No one can predict an episode, even those who have lived for years with a significant mental illness. Understanding, and clear expectations while also being a safe place to be honest are important.

It takes so much mental energy (which we don't have right now) to answer texts, to meet for coffee, to make a study date. Don't take it personal, even if you don't know s/he is going through something. After I got sick, when I was being "blown off," I just assumed they were going through something - 98% of the time I was right.

We're just trying to figure everything out, too, with the added fun of (in my case) trying to fight our own brains while doing it. I made some poor choices, and I feel awful about any harm I inflicted on other
students while spiraling out of control. And I still am stigmatized for that by some. I wish they could understand that it wasn't intentional, and I wasn't treated like I have the permanent label "crazy."

Everyone copes in their own way.

We're not getting 'handouts' and we don't have it 'easy' by having extra time. Without these supports it is impossible to complete our assignments. Don't ostracize your classmates because you're jealous.

don't take anything personally... like if someone doesn't want to hang out because they just don't have the energy.

All mental health disorders affect everyone differently, even if two people are diagnosed with the same. Other students should not assume that just because one person has a symptom doesn’t mean the person with the same disorder would have that symptom.

canceling plans or not making plans often doesn't mean I don't like a person. social situations can be difficult to navigate

They suck and we don't like them. We don't perform them for attention. We are generally deeply embarrassed and ashamed.

Understand that it's not personal. We aren't doing this because we have a vendetta against you. Sometimes we just need a day off.

it's not an excuse
What advice would you give to an incoming student with a significant mental health issue about being successful in college?

work with people to identify your tools as compensating devices and identify your people who "get" you and can even remind you who you are -- people who are kind. Give yourself the supports you need to navigate the ups and downs.

As emotional distress is common in college such as depression and anxiety, I would encourage them to learn more about mental illness, expect that it might happen to them and learn coping strategies to manage emotional distress should they experience, be able to identify when you need help and get it and accept it - there's no shame to experiencing emotional distress. I emphasize the importance of good mental health to academic success.

You are probably being too hard on yourself. Be gentle and have compassion towards yourself

Take it slow, baby steps. Lighten the class load. Keep a schedule!!! Procrastinating and cramming the night before are HUGE stressors.

I would suggest connecting with the on-campus mental health resources and the Student Disability resource center immediately so that they can get school accommodations quickly at the beginning of the semester. Also, just knowing information about these resources would help to make appointments. I would say that disclosing your mental illness to a professor is optional and totally up to them. Accommodations letters to professors would be approved and sent to them, but they usually don't specifically state the diagnosis of the student. If they really are struggling with their mental health and in their academics, then I would suggest contacting the professor and let them know about this so that they could give an extension for assignments. Seeking out disability or mental illness-related clubs on-campus would be great too.

Use all the accommodations they offer you. Meet the campus counselors in the FIRST WEEK and make sure you have access to your meds. If there is a class available that focuses on success skills, TAKE IT even if it seems like a waste of time. Make sure you are sleeping and taking your meds, even if it feels like you must give that up for academics. You'll do better when you are stable. Asking for an extension is not the end of the world. The worst they can say is no. Your mental and physical health comes before your grades, always, no matter what.

If you need to take time away; please take time for yourself.

Please reach out to (campus disability office). I spent many years thinking I could do things on my own and that I really didn't need help. Having support through (the campus disability office) played a major role in me continuing my education

i have no idea i could use the advice

There are lots of resources that can help and focus on one thing at a time.

Form a sturdy schedule and try your best to stick to it.

Talk to professors as much as is needed. They should listen to you

It's okay to not be perfect. And that comparison is the thief of joy. Stop comparing yourself to other students, whether it is about academics, internships, or jobs (especially if you are in the business
Remind yourself of your achievements and remember that your self-worth is not dependent on your outward successes.

Don't be afraid to get accommodations or to be open with your professors sometimes they can be understanding.

The best advice I can give is to try as hard as possible to understand yourself and try to recognize what are things that might trigger episodes of unwellness in order to work around those things or maybe know when a period of unwellness may come. Communicate as much as possible with professors or with anyone that you have as an aid both ahead of time and when going through it. College while being mentally ill is hard but not impossible.

Make use of your resources. Make plans for how to deal with bad days (I literally have an index card with what to do if I’m struggling which includes who to reach out to and how, and other self soothe based suggestions; I plan to add directions for myself for how to reach out to professors and ask for support from them, like extensions). Acknowledge that bad days will come but use times where you feel okay to make an “escape plan” from the bad days. Being prepared for them has helped me a lot. ALSO: my most useful tip for getting assignments in on time (as opposed to relying on tons of extensions and falling behind) is to make a “fake due date” for each assignment that’s 1-3 days before the real due date and aim to get it done then instead, so if I hit a hard time while working on it I have a safety net. The safety net allows “more time” to get it done as well as time to communicate with professors (especially if they take more than a day to respond).

Find a good support system between friends and professors

Don't participate in the stigmatization. Know what resources there are and always declare your needs. You have a right to a quality education, even if that means some adjustments to a syllabus for your learning needs.

Go to a therapist as much as possible, especially when it's free. Even if you don't need it. It's important to keep on top of your mental health so it doesn't consume you.

Surround yourself with people who understand

Never be afraid to ask for help/accommodations

Talk to your teachers, (campus disability office), and exhaust all types of resources that can help you succeed (taking an incomplete, a gap year, student center, etc.).

Find a regular therapist to get you through college. Therapy is an investment in yourself and your well-being. The hardest part about college is not the schoolwork. The hardest thing about college is yourself allowing you to succeed, fail, and explore. There is so many new experiences that come with college and a therapist can help you understand those experiences in the context of our illness.

Utilize (campus disability services), set constant reminders on your phone, make sure you sleep EVEN if it means your project won't be completely perfect, and always ask for help when you need it.

I would encourage them to seek the treatment of their choice: therapy, medication, hospitalization. Reach out to the supportive people in your life or call the national hotline for suicide prevention because they have so many resources. There are lots of nonprofits for different mental health issues that's their job to help people like us! DBSA has helped me a lot and so has the Autism Society of America. Never be afraid to ask for help. All those things are scary, but I've been living with all of this
for more than 20 years now and I have to say that the treatment is most important. It saved my life. I have had several hospitalizations, and some were not good but when you first start exhibiting symptoms you need to get help and support. I wish I could be there to guide you but since I can't, I will say a prayer for you to find your own way and come back and finish college. College was a tough road for me, but I did finish and I'm writing a novel about it.

I would advise students to reach out to their professors/advisors and explain their situation even if they have accommodations. If one does not have accommodations in place, please get them. It does not matter if you have anxiety or depression, you are deserving of the same education your peers without disabilities receive. The university is legally responsible to provide accommodations for those with disabilities when reported. For those who suffer from symptoms/illnesses such as mania, psychosis, chronic depression, and so on, it may feel embarrassing or something that should be hidden, however, you should applaud yourself for making it this far and remind yourself that you are deserving of a successful, happy, and healthy life.

Advice I would give to an incoming student with a significant mental health issue would be to contact the disability resource center as soon as possible. I waited until my junior of undergraduate which was way too late, and I ended up withdrawing from my first junior year semester because my mental health was deteriorating each semester I tried to chug along. That they can be successful and to utilize the accommodations that are there for them. Speak to your professors, even if you don't feel comfortable telling them what your disability is. They should respect your accommodations with no questions asked. That is for you to decide if you want to share or not. Take care of yourself each day in college because things can build up fast and it's easy to get overwhelmed. It's learning your body and mind and preparing for the storm and letting your professors know when you can complete their work if not on their due date.

It's okay to ask for help, longer deadlines, advice, etc. The worst thing that a teacher or someone in college could say to you needing something is “no”. And if that's the case and you need it, advocate for yourself!

Find someone who you can trust and talk to your teachers about possible modifications that will help you do your best.

Don't be afraid to take your time if you need to, ask for an extension, drop a class, take a medical leave if you need to. Also, you'll meet a wide variety of people here and you'd be surprised how many won't hold your health against you.

If you figure out how to cope with school in complete isolation with no friends and no support system, please let me know. I have not figured it out yet.

You're worthy of everything good in the world even during the bad moments. And being strong all the time doesn’t always work the way you want it.

Schedule meetings with an academic advisor as early as possible, preferably as soon as you know what school you're going to. Also make sure you know what accommodations you're able to get.

Talk to the disability office. Just push yourself. Give yourself a five minute goal for assignment and classes. Don't do anything else but spend all time on studying to catch up. I know it is overwhelming but try to be patient on every step.
Mental health issues are completely normal, so many students in college and the world struggle with mental health issues in their daily lives, but they don't let that stop them from achieving their goals. People with mental health issues persevere in life regardless of their obstacles. Don't let something you cannot control take over your life because you have complete control in being successful.

Find what works for you and do that. Surround yourself with healthy, beneficial people. Pay no attention and steer clear of unhelpful, damaging types. Remember you are responsible for your actions and words, but not for someone else's actions or words. At the end of the day, just do your best! That's all anyone can do. You are important and worth it!

Do not push yourself harder than feels psychologically safe. Under any circumstances

Get a couple opinions first, make sure you have the right diagnosis and treatment plan (I was misdiagnosed and treated for bipolar disorder, when just months ago I learned I had a completely different condition), then with a verified condition and plan in place, request academic accommodations to build in flexibility in their education while they recover.

I have no idea. I could use the advice

Embrace whatever trials you face. Give change a chance. Open yourself to new possibilities, even if it involves switching majors. This is your time, so spend it in a way that brings you happiness. Not just those you love or those that satisfy personal expectations. On the other hand, take note when something is off - if you feel more eccentric than usual, taking more substantial risks, missing classes or dealing with personal hygiene. Do as much as you can without straining. And most of all, set a routine. If you have a set of designated activities to do every day, it keeps you from losing yourself in your mind. It keeps you productive, keeps you from wallowing. You are not alone.

To not let the mental health issue define you and it's important to find support like in counseling and to use resources at school

Don't go to (F University).

Besides that, in all honesty prioritize health above all else. A professor giving you some attitude because you didn't do well or missed a class or did anything to prioritize yourself over their course is temporary. Also, it makes them a jerk and a jerk's opinion is meaningless. You have nothing if you do not have your health. Accept everything you can and do whatever it takes to keep it together. If that means low marks, then so be it. Better a low but passing grade or even a failure than a good grade and feeling joyless about it and having a mental breakdown.

You are so beyond worthy.

Honestly, I could use some myself.

Try to get (campus disability office) to help with deadlines. Most professors won't care if you have mental illness so the only way to receive assistance is by legally obligating them to give it to you.

- Go to (campus disability office)
- Voice your thoughts with your professors
- Remember that they also have a boss who can advocate for you
- Try to get as involved on campus as you can so that you can find your people who will understand you or might even struggle with the same thing.
- Don't try to hide it. It is never going away. It sucks, but you'll have to live with it.
- As for the (campus counseling center) people... I really hope you find someone that you feel comfortable with. They may be certified mental health professionals, but that doesn't mean that they know everything, are professional, or know how to accommodate for your particular needs. The people I have right now have gotten me through so much and I am very thankful that I found them, but the first time I went in, after I talked about obvious psychotic symptoms, the person squinted at me and responded with, "have you ever tried yoga before?" Yoga? For hallucinations? Squinting? Please. It made me feel very uncomfortable and ashamed somehow and discouraged me from looking for help from them for another six months.

Some would say set up with disability services immediately, which is fair. I think the first piece of advice I'd give is find a team that works for you. I'd be nowhere without my psychiatrist and therapist and having people who keep me stable and therapy once or twice a week to work through my issues has helped schoolwork seem less overwhelming and less of a burden to my mental health. But also, disability services can really help, and at least at (M University), it is a safe place to go.

Tell everyone - profs, students, etc. that you are a survivor. Much of the time, they are also hiding and trying their best. Telling your story - as detailed or quietly as you choose - gives them strength. Being able to help you is a gift to them. In the middle of episodes, I am DYING to help other people, I just don't always know who they are.

Find mental health care outside of the school if you can. Build a robust support network of people you can trust who will help you if you need it, who will be honest with you if you need help and won't acknowledge it and will keep your situation confidential. It's not easy. You may think a significant other is trustworthy, but they may not be able to handle providing that level of support (especially when you're both young). Your family may support you, but can you calmly discuss passive suicidal ideation or hallucinations without them freaking out? Choose carefully.

Stay away from drugs and excessively drinking it will make your mental health issues worse.

I make lists, but that's not applicable to everyone. Don't ascribe your self-worth to your grades but remember that a 50% on a late assignment is better than a 0 when you don't turn it in at all.

Don't overload yourself with the max courses

Go to the disabilities service as soon as they can so they can get the proper accommodations for classes and other needs. It provides a safe space and a place that will help you best.

Look for a good therapist nearby before you come. (Campus counseling center) only has so many resources and none of them include long term care for mental health support.

Not sure. Try to do things on your own terms, I suppose. And don't believe the PR that it's a welcoming place for students like you/me, because it's not, and it's not going to be any time soon, and in my humble opinion and experience it's best to face and accept this reality. For example, faculty will talk a good game about mental health acceptance, but very very few are out about their own struggles, and this is by design

REGISTER FOR (disability services)!! They're here to help and it will make your education so, SO much easier. Also, take a semester off if you need it. You will feel so much better, and yes you may be "behind" your peers, but it's not a race.
ask for help
If you experienced discrimination due to onset of mania, psychosis, or major depression on campus, how did you respond to it and what advice would you give to other students?

I responded like "crash and burn" felt like I came off the tracks and that I'd never be able to get back on. Advice to others -- it's a detour and you're tapping the breaks. It is possible to persevere with tools and people oh and kindness to yourself.

I absolutely did experience discrimination. I was deeply hurt, I isolated, I spent less time at school as little as possible, I missed classes and participated in zero activities, I avoided contact with other students as much as possible. The best advice I could give to students is that if you receive a credible diagnosis that you have a mental illness accept it, don't deny it as I did and accept treatment and don't refuse it as I did.

Na

I was a student years ago, I hid it. Once I got home, everything fell apart.

I didn't experience discrimination due to my mental illness, but rather received the "get help" statements from my peers and fellow students. I have been asked by university staff, like my Resident Advisor (RA), my academic advisor, and my Disability Specialist about if I have used the on-campus mental health resources which was great. I don't have mania, psychosis, or major depression, but I have experienced anxiety, depression, and trauma on-campus.

I experienced a LOT of discrimination and poor treatment due to my mental health in college. I responded in several ways, one of which being to educate large student organizations on campus about mental health. I would advise students experiencing discrimination to REPORT IT even if you feel like it is minor. It's not. Discrimination builds, and you need to nip it in the bud. If nothing is done, keep going higher until the issues are resolved.

N/A

N/A

i tend to stay in my room and just wait for it to pass but i also have no friends so I would encourage them to try and go out

I have not

Not necessarily discrimination but some people would just stop talking to me after opening up about my issues I'm not sure the two are related but they seem to be.

If your teacher is being unreasonable, establish a legal agreement through (campus disability services). You can also go above their head if needed

I do not think I have experienced discrimination at (N University) for my major depression, but there is definitely a lack of resources and a lack of responding to stigma around mental health, which is important for everyone, whether they have significant mental health struggles or are facing less severe mental health struggles. My advice would be to always seek help, no matter what bad reviews you see for (campus counseling center), or if you think that going to (campus disability center) for extra support makes you "less than" other students. I struggled a lot until my advisor told me to seek out (campus disability center) support and the process for getting support like extra time on tests, etc. took only a few days. It was right before finals, my anxiety was causing my grades to drop all
semester, and (campus disability center) truly helped me, but I did not know of that support being available for students with mental illness until my symptoms were very severe. So please do your research and know there are opportunities for help on campus.

I spoke with the (campus disability center) and I was able to get accommodations

I've had people act like I was lazy or stupid because I was going through a mental health crisis and physically could not get up to do anything. I have bpd and there have been times where I've gone through psychosis and had people talk about me and I didn't know how to explain what happened after the fact, so I just didn't. People mostly judge because they don't understand why you're behaving that way. You don't have to explain to anyone what happened/ is happening, especially if you're not particularly close to them. However, if you do want them to understand you can explain in vague terms or be specific it's up to you, but you don't owe anyone an explanation.

I do not believe I have faced discrimination based on my mental illness

My roommate freshmen year bullied me for my mental illness. I did my best to ignore her and find new people

Honestly, I've only been open about my panic attacks and anxiety with others who I've known long enough to know they can keep a secret, or with those who've shared these problems with me, and I've reciprocated. I do somewhat fear the appearance of weakness, or "lack of seriousness as an academic"- look that I've heard some in my program express about others' anxiety/depression. I would recommend two contradictory ideas: be guarded about who you share your personal information with so as not to be harmed further by anxiety/depression induced by others' discrimination but be present and open. If there's a comfortable opportunity to share that you've faced the same problem as another, that really helps people not feel alone or feel weak.

I used to have anxiety attacks during class, and it can be really embarrassing as well as cause problems with peers. On the days I'd be super depressed, the response of my peers would cause me to feel even worse. Generally, I would hide myself isolate. Sometimes I would do excessive drinking, which would make the peers see me differently and cause me to spiral with anxiety and depression.

I responded poorly (I dropped out for a semester)

I didn't respond

I haven't experienced discrimination.

I had a very small group of incredible friends in college that helped me through college. Find the people that love you and help you love yourself. You should surround yourself with people that make you feel strong, confident and capable.

I haven't experienced it, but the now deceased Dr. (G) once saw I was having a panic attack during an exam and politely took me outside the room, told me to go home and rest, and to retake my final once I was calm and able. His compassionate approach was exactly how students in these positions should be approached. We can't help having a breakdown sometime, we certainly shouldn't be penalized for it.

Well, for me, I had to seek other sources of support (my parents, Voc Rehab, professors outside of my major, friends, and family). I didn't have a lot of friends, so it was mainly my parents and voc rehab that helped me realize that I was really a smart girl who had issues. I thought I was flunking out
but my mom got the call that I was going to be valedictorian. It was the happiest day of my life. But I still had discrimination after that, I took my meds, controlled the psychosis, and did my therapy but it didn't matter because they had seen me at my worst. Don't be ashamed to ask for help. Find someone you can trust who can help you.

I took steps to eliminate almost all opportunities for discrimination to occur. I had accommodations put in place for my own personal diagnoses of ADHD and Bipolar Disorder. I had first started seeing a psychiatrist my freshman year of college to address years of depression treated by my primary care provider and to discuss concerns around my poor testing abilities regardless of my ability to perform perfectly in any other academic circumstances. My concerns were heard through that year as my doctor and I felt that I had not had proper treatment in previous years. As soon as I started proper treatment, my life transformed into a place I never thought I'd be. I was frustrated with how easy it would have been for me, prior to college, if I was provided with equal opportunity to education if only someone had listened. So, I took every step to make sure that did not happen ever again. My goal is to go to medical school and become a physician, so I was not going to let anything get in my way, even if it was my own brain.

I worked with the (campus disability center) to receive accommodations for my disabilities and reached out to my professors to explain my situation. At the time, I was working on different medications that would work for my body. This can be exhausting and bring on new symptoms or side effects that made it difficult to always make school a priority. Evidently, one of the medications caused me to experience excessive sleepiness and caused me to sleep through my alarms quite often and miss class. My professor knew that and when I spoke to her at the end of the semester, she bumped my grade from a 92 to a 93 so that I would have the 4.0 I had worked so hard for. I no longer take that medication, but my professor was understanding as I made her aware before the course had even started.

If I did not have those accommodations and discussions, my academic outcomes would have looked much different. I advise all students who experience significant mental health illnesses to advocate for themselves and their needs. It is always worth it to stick up for and treat yourself with dignity and respect.

I have not experienced discrimination due to my disability thankfully. All of my professors have been extremely kind and accommodating which has helped me relax more and not feel guilty for using the accommodations I need.

N/A

N/A

I don't believe that I was discriminated against by my peers.

Get control of any frustration or anger you may feel before speaking with whomever you feel did you wrong. Be respectful but firm.

N/A

To let yourself be angry, and if you have to, leave the situation. You do not deserve to be treated as less than human.

Report it to school. Don't let such discrimination interrupt your studying.
There isn’t much you can do when someone or a group of someones decide to label you as crazy (or any other of label) and avoid you like the plague. First, they are making a judgement based on their limited knowledge. I.E., they don’t know you nor what you deal with on a regular basis, nor do they understand what you have been through and what you’re doing. Secondly, people who decide to judge you harshly for something that isn’t actually your fault aren’t beneficial and tend to be on the toxic side. Don’t hang around them, they will only drag you down. Third, there are friends and a life to be made outside of school. Additionally, one person or group’s opinion is not the 100% consensus. To the best of your ability, don’t focus on one false, inaccurate opinion.

Specifically, in my own experience, I decided to evaluate my actions and get opinions from those I trusted on whether there was any validity to the insult. I reminded myself the people were making blind judgements and decided, through evaluating their own behavior, that the best thing was to stay away from them and search from actual friends elsewhere.

I left college for a very long time. I lost many friends after my first psychiatric hospitalization. I had to have a lawyer represent me when my college was trying to dismiss me due to a psychiatric breakdown (incl. psychosis) in violation of the ADA. I still am not sure if I can re-enroll because my college does not give me the option of part-time enrollment. My advice to other students would be seek good legal representation if you are experiencing discrimination and don't try to engage the administration without support.

Unsure.

i tend to stay in my room and just wait for it to pass but i also have no friends so i would encourage them to try and go out

My roommates freshman year started cutting me out of social activities, going out with everyone on our floor without inviting me due to the end of a manic episode. They pushed me emotionally, messing with my personal boundaries, and it was not ok. I ended up choosing to live on my own so I could have a sanctuary or a quiet space. That way I could come home and recharge after socializing.

My advice: if something or someone discriminates against you, find another path. The ones who understand tend to be the ones who stay. However, some of the possibly unhealthy relationships could stem from the strongest of bonds. Cutting ties - no matter how painful - can be the best option for yourself and for them. Let someone know how you feel after an incident, talk to professionals, and be true to yourself and your personal morals.

I have had discrimination against my disorder because I was diagnosed with borderline personality disorder. I have been called a lot of names for it and had psychiatrists look at me like they were scared. I tried to educate myself on it and help others understand what it is, and I don’t let their fear being me down. I tell myself that I have to accept that not everyone will understand and to try to surround myself with ppl who understand or support me.

I am a biology major and I've had plenty of fellow STEM students look down on me for the poor grades I get due to my mental health. I don't get as high grades and I don't plan to go premed or get a doctorate and I don't go at their pace, but I do all the same courses, all the same difficult work and pass all the same. I think some pretentious students see that as a threat to their superiority complex.

I didn't. Out of fear of not being taken seriously.

N/A
I had a professor continuously call on me in class because he thought repetitively making me anxious would cure my anxiety. I had a panic attack and sobbed in class. It was humiliating.

not discrimination, but as I mentioned before, weird looks and odd behavior from professors. Not every story is a success story. I want to excel in academics and graduate with a magical 3.8 - 3.9 GPA, but the truth is, I won't be able to raise my current 3.2 that much. Takes a while to build up the confidence and receiving this type of response can feel discouraging.

I am an online student, so I've never been on campus, but I have faced (to some degree) some bias when working with a random group for a project. Flexibility with scheduling meetings is pretty crucial for mental health, especially if you're experiencing an episode. I've had group members who aren't willing to change dates and have been passive aggressive when I suggest we do so. Perhaps I should have been honest, but random group work isn't the best place to be honest at times, and I found it difficult to bring up the fact that I was mentally not feeling well and needed more time to meet (even a few hours or a day). Reasonable accommodations can be difficult for others, especially if they perceive needing extra time as slacking on work or inconsiderate.

No, my university and advisor were VERY supportive. It's one of the luckiest things/ blessings of my life. I couldn't have finished without their extreme support.

Yes, and I don't have any advice. It sucks, it was a contributing factor to some episodes of suicidality, and all I can say is I guess I survived despite it all.

I haven't really faced any discrimination due to mental health issues.

I didn't experience it here, but at my previous university, I was told by a professor that major depression was not an excuse and refused to provide resources to me. Please reach out to (campus disability center). That's beyond not okay and they can help.

I don't think I've ever experienced that, at least not on campus

When I experienced discrimination of my mental health disorder, it made me feel bad about myself even more. However, I try to explain to people to the best of my abilities for the reasons why I do or don't do anything. Sitting on my phone in bed or sleeping all day for 3 or 4 days should not be automatically judged that that person is lazy. It's okay to ask questions.

N/A

N/A

I left my PhD program. My advice: If it's bad enough, consider leaving, especially if it's grad school. There are some battles that are not yours to fight. You may be healthier if you leave. It could take a generation or more for things to get better, and there's no a priori reason (to borrow some grad school language) you should be a casualty in the meantime.

I don't believe I've experienced anything as of current, however I only recently registered with (campus disability center) in consideration with my time at school. Many professors have been very accommodating with my mental illness.

I kept screaming till someone decided to help me
Is there anything else you would like to share or anything else you would like us to know about this topic?

Some graduate programs are so isolating -- I think schools could do a better job to help identify peer supports that are informal. Opportunities to get to know each other. Networking opportunities. Also, we need to see faculty with disabilities to know it's possible to be successful in academia.

We need more mental health education in school, we especially need professors to be more active in mental health issue identification and referral to services. Often the first sign a student is struggling is missed classes and falling grades and professors are in the best position to identify this. Students need to learn how to help other students in emotional distress, how to have those tough conversations. Better mental health education for everyone would go a long way to helping many students. I'm happy to share more, help you spread the word on this important issue is you would like. I like Mark Salzer very much. note, I was diagnosed with bipolar in 2000, but based on my discussions with students and those familiar with college not too much has changed since my early experiences.

I wish I had been properly diagnosed earlier than I was. It would have saved me so much pain. Bipolar is real.

I read a post on LinkedIn from a mental health organization that stated that ER visits for mental health crises of the youth increased by 30% this year since 2019. This goes to show that we rely too much on hospitals to take care of these situations, rather than having the knowledge and resources to properly respond to students. There remains a lack of mental health organizations and mental health peer support spaces that center youth voices. This needs to change as more youth are horribly dying by suicide and schools don’t do anything about it. We need more counselors on college campuses and more crisis prevention/intervention training required for all university staff. Peer support spaces that center on the lived experience of students would be helpful in providing a support system for those who have mental illnesses but feel like they can’t tell anyone else about it. We must end the policing of those with mental illness. There needs to be a policy in place in all universities that follow-up with students in the case of hospitalization for a mental illness to make sure they are doing okay health-wise and academically. We should not keep relying on the police and hospitals for mental health crises as they further harm BIPOC communities. Policing leads to incarceration. Mental hospitals lead to incarceration. This is not okay.

Campuses need to have access to more than a couple basic therapists. College campuses are breeding grounds for substance use disorders. Have a SUD clinician on board. Have sober events and psychoeducational events. Host events dedicated to students learning and practicing coping skills. Post crisis line phone numbers EVERYWHERE on campus. Your students are struggling whether you know it or not. Having a good rapport with local mental health agencies and hosting mental health awareness events helps a lot too.

Everyone with mental health issues has very different strengths and weakness that others should be mindful of.

No

Just some demographic information if it would help with the study: I struggle with major depressive disorder and was diagnosed at 15. I have struggled with severe anxiety since I was little (panic attacks, etc.). I am a female finance major.
We need more mental health days and access to material online such as PowerPoints

The help that is available to mentally ill students at the moment is not enough. As someone who went through multiple mental health episodes every single semester of college, I constantly had to rely on myself to get back up. I went through multiple episodes of psychosis, suicidal thoughts, and depression with absolutely no help other than (campus disability center) accommodations, which only help before the fact. Please do more to help students after we've gone through it. For example, if a student has missed assignments due to their mental health issues, they should not be penalized if they didn't ask for an extension beforehand. Mental health issues cannot usually be anticipated and having a crushing workload waiting for you only makes it worse.

I really encourage people struggling with mental illness to “study up” on their symptoms and the challenges their illness(es) bring them, and really zero in on how specifically this impacts their schoolwork. From there you can problem solve and make coping plans. For me, I found jumping into a full college workload all at once was REALLY overwhelming for me. So, I started as continuing studies/non-matriculating with one class, then two, then three, and then transferred in to be matriculating so I could take a full course load. This was/is going to be over about a 1.5-2-year period to get to the full course load. Of course, there’s a tiny bit of stigma about this non-traditional path, but it’s worth it for my mental health. Adding one class at a time helped me learn how to manage each new challenge and master coping with them. I plan to do the same with other college stuff. Once I master a full course load, I plan to add an internship or work study job. THERE IS A WAY TO GET THROUGH. You might just need to be a little creative (while also being a little upset and accepting that things aren’t super easily accessible as is, but not much we can do about it right now).

Life’s hard

Academia is a pretty toxic place. There are plenty of self-important bullshitters who express many signs of anxiety/depression but are also some of the most virulent anti-mental-health individuals. I find that faculty, perhaps through their many experiences with undergrads, are relatively considerate, while in the competitive environment of the PhD program, peers can be harsh. I used to feel that if I took anxiety medication, I was a "medicated" person, with all the poor stigma attached. Now I take an appropriate dosage and the panic attacks haven't come back, I'm less snappy towards people, and the pounding anxiety of having to complete a task isn't as terrible. Medication can work for some people, and it’s a completely acceptable route to take, as can whatever other self-care is necessary for each individual. Know thyself because we all deserve a quality life.

I’m thankful for the therapists I found at (G University) in undergrad, and I still see one today that I saw at (G University). Without them, I wouldn’t have come has far as I have.

Not all disabilities are visible. Not everyone is disabled the same.

N/A.

I think that there is a very real financial stress that I experienced as a person with major depression. The time I dedicated to therapy took away from my free time or time that I could dedicate to work. Also, the copays that I paid through college took away from my monthly food budget, so it was an additional sacrifice on top of the incredible challenge it was to just make it through.

I can't think of anything right now. I have big dreams because I'm well educated, and I haven't worked for a very long time. Wish I could reach out to college students and encourage them in some way. I
I know this is supposed to be anonymous, but I really want to share that fact with you in case it can help someone.

Nope, best of luck on your Doctorate and thank you for your advocacy and research!

This is a wonderful survey and I hope it can help others in need and help others without these disabilities to understand us on a deeper level. Thank you future doctor Lindsay Metzker. :)

Thank you for doing this.

None that I can think of.

Please educate yourselves about the racial and gender disparities

Each person’s abilities, reactions, struggles, and victories are all different. I think that's a big factor.

Thank you for doing this

No.

N/A

I wish people understood better borderline personality disorders and eating disorders.

I wish (X University) would actually do something about the rape problem on campus. People talk about mental health and diversity which are both incredibly important topics that need to be addressed but I feel like I seldom hear about how bad it is. I learned with much difficulty and pain firsthand how horrible the rape problem is on campus. (X University) advertises resources meant to help victims but none of them work. I again learned this the hard way. (X University) protects rapists and in turn their own reputation and spits in the faces of victims when no one is looking.

This issue is closely tied to mental health. I know my experiences with this have taken a huge toll on my mental health. (Z University’s) lack of a response has made things much more difficult for me.

I've essentially had the most miserable time possible at (D University) and I didn't even need to go out of my way to do it. I cannot wait to leave. I take this survey in hopes someone else will realize the evils of this institution and maybe something can be done but I'm not sure why. I think the whole place is beyond reformation or salvation.

Like I said, I think about the students who never got to go home every single day.

This is an admirable survey. I often think about leaving because of the difficulty of my program. My diagnosis has been extremely triggered through the stress of grad school and I greatly wish the workload could slow down to my pace despite the impossibility. There is a lack of decompression and I often sacrifice my safety to be here. Ultimately, I want a better future that is not defined by my manic depression, ptsd and ocd. So, I stay, I suffer a lot, I do my best to move through it.

I know professors and staff have a lot of pressure on them. A LOT of pressure on them. However, students like me would highly benefit from them having an understanding of what psychotic disorders truly are like, not just what they've seen in dehumanizing horror and suspense movies. I almost cried when I told a professor that the reason I was performing so poorly was because I had early signs of schizophrenia and they looked at me and said, "I don't think you have schizophrenia".
Like, buddy.

There are two sides to every spectrum. Not because you've only met the manic me who is desperately in need for social interaction instead of social withdrawal does it mean that my diagnosis affects me any less. Please let them know that there is more to psychotic disorders than panic attacks, mental hospitals, and people in straitjackets screaming "I'm not crazy" over and over again.

Good luck on your doctorate! I finished my PhD two years ago with 2+ medical leaves for episodes of major depression. Thank you for letting me help a little bit.

I appreciate the aims of the investigator, but I can't help but be cynical from my own experience. Anxiety, depression, self-harm, and suicidality are treated like dirty little secrets at colleges and universities, especially at "elite" schools like mine. If schools treat, shall we say, more "common" issues like moderate anxiety and depression shamefully, it's practically impossible to have any confidence that they would handle students with more severe/chronic/significant mental health issues competently. Schools are happy to splash images of students using accessibility aids and such when talking about students with physical disabilities succeeding (of course, actual commitment to those students is probably questionable as well), but there's no equivalent consideration made for students with less obvious challenges. There's a constant battle against the perception that you're lazy or stupid and don't belong if you're having a hard time- because it's all in your head. I hope you're work helps to start changing things.

(Campus disability services) should make a list of accommodations available because it is difficult to know what will help, and it can be overwhelming to worry that you're asking for too much.

No

It really feels awful when campuses solicit engagement from students with mental illness on committees to "reform" psych services on campuses and then drive us away when we don't perform professionalism correctly according to whatever ever changing standards, they find convenient at the moment. It would be better if they didn't pretend to care about our input in the first place (especially because we generally serve on such committees for free and they are paid staff). If you don't want our input, don't ask, and don't pretend.

Also: You should include conditions like PTSD in your definition above for this survey. I have PTSD as well as major depression - both psych conditions which are disabling in different ways. But I only had PTSD for some of my university experience (my PhD program - I hadn't acquired it yet as of my MA or BA programs).

Be honest with your professors, they are not your enemy. If they give you grief, don’t hesitate to report them.