Attachment to ASSU Priorities for 2019-2020 University Budget - Selected Quotes

- “OAE has been very accommodating for me personally. I need simple academic accommodations (extensions on assignments, absence excuses) and fairly simple housing accommodations (there are some dorms I can't live in and some that I can)... However, as a TA, OAE has not been the most helpful when working with some of my students with disabilities that are more complex to accommodate. I wish that OAE had reached out to me or the class professor about what to do if a student has more complex needs to accommodate so that those needs can be met, whether it's through OAE, through the teaching staff, or through some other resource. I think that OAE should be providing disability-related resources and training to RA's/TA's so that they can make their classes/dorms more inclusive and accommodate their students as best they can.”

- “Professors and TAs have no training [on disability accommodations] and it is very uncomfortable. Sometimes they disclose my disability to others without my permission, or ask questions that I would prefer not to answer. TAs and professors should have to take training to administer accommodations.”

- [cw: suicide]
  “CAPS is an embarrassment to this university. I personally know three close friends who attempted suicide in the completely unreasonable month-long waiting period between when you request an appointment and when there will be one available. If you have any interest in addressing mental health problems at Stanford, the solution seems really absurdly simple to me: hire more people at CAPS, and change the function of it from a temporary service to an actual full-time counseling service.”

- “In many cases the pressure from research, studies, and advisers breaks down students who then go to CAPS where the staff tries to help them in becoming functional individuals again. That’s the irony: Stanford needs CAPS in order to remain as an elite research university.”

- “I wish there was a required program for faculty to go through about how to deal with students with mental health issues, which are (apparently) abundant among the graduate student community. Specifically, they should receive training about what they can do to ensure the mental health of their students and understand how their actions can lead to mental health problems for their students. In my particular case, a substantial portion of my mental health challenges stem from the way I have been treated, even abused, by my PhD faculty. As a consequence of the way I have been treated by them, I have had to pay thousands of dollars in out-of-pocket medical expenses, while they have been granted tenure. I know many other graduate students who are / have been in a similar situation. It's just not right.”

- “I get most of my mental health care from my WISE group, which is a highly important resource to me and many women on campus... Group therapy is a really good way to make people feel less isolated in their issues and at the same time foster a more caring and empathetic environment.”

- “It would be nice to have workshops for faculty on topics such as how to communicate with, encourage and support their students, especially involving mental health issues.”

- “Advisors have zero training and understanding for mental health pressures... There is an enormous amount of pressure to perform with little guidance.”

- “My research advisor excludes me from all lab activities, and has created an incredibly racist and unwelcoming environment for me. I do not feel comfortable speaking to the University about this problem, as she is a tenured professor with enormous power in my field. It makes my life miserable every day. She refuses to read my dissertation, waiting for my funding to expire.”

- “An advisor actively promoted an extremely damaging and unhealthy work/life balance, treated people unequally, and was an entirely ineffective--even harmful--mentor. I have since switched to a research advisor who is much better.”