A few weeks ago, I was sharing a bit about myself in the Schapiro Hall lounge with a few members of the Latinx community. We gathered with the intention of destigmatizing mental health conversations and also to promote the Columbia Student Well-Being Survey. Each student who spoke shed light on a different angle of the mental health problem at Columbia. Some students struggled to tell their parents about their history of depression, not wanting to disappoint them. Others had gone from rock bottom to straight A’s with the help of Counseling and Psychological Services, only to feel a deep sense of guilt that their loved ones back home did not have the same access to treatment. The conversation helped me realize that mental health issues at Columbia stem from a variety of different factors, and are not always just about stress.

From student council election campaigns urging the expansion of CPS, to the University’s collaboration with the JED Foundation to work against suicide, to a recent town hall—it seems that everyone is interested in improving the overall mental health of students at Columbia. We as a community have decided that this is something that matters and demands urgent attention. However, our campus conversations often gesture toward the mental health problem in vague ways or treat it as one big monolith, when in reality these issues come in all shapes and sizes.
Just as an example, a recent Spectator article detailed the platforms of Engineering Student Council candidates Jordynn Lurie, SEAS '20, and Benjamin Greenfield, SEAS '20. They discussed mental health on campus and each made proposals as to how to improve it; Lurie suggested the implementation of sleep pods in Butler and Greenfield emphasizing access to healthier dining options. Both these policy ideas are great and could possibly move us in the right direction. I don’t doubt that for a second. But what is missing from platforms like these and many others are actual facts and figures about the lived mental health experiences of Columbia students. Such lack of information does not stem from laziness or inauthentic motives on behalf of the candidates, but simply because it’s not there to begin with.

Throughout their campaign to demand 24/7 healthcare at Columbia, No Red Tape has been able to cite a variety of statistics from the SHIFT (Sexual Health Initiative to Foster Transformation) survey to bolster their policy proposal. The statistics they cite are specific to Columbia and reveal what the actual lived experience of students is—28 percent of students will be sexually assaulted before they graduate.

What’s missing from our mental health discourse are data and statistics which would help paint a more complete picture of the problem. We cannot forget to look at mental health through the lenses of gender, socioeconomic class, race, sexual assault, and most importantly—being a Columbia student. What are the kinds of mental health issues that students struggle with? How many students deal with these issues? What existing resources have helped people best in the past? All this is information that we could benefit from having in our conversations on mental health.

Our campus activism and advocacy would benefit, in short, from more precise and recent student data. The Office of University Life has collaborated with the World Health Organization (WHO) to fill this gap in data through The Columbia Student Well-Being Survey. When I took the survey, I was glad to see that it honed in on many of the lenses I’ve already mentioned: race, gender, sexual assault, etc. Retaining student anonymity, WHO reaches out to a limited number of people to offer a free and optional online therapy program. Because some students have expressed the concern of anonymity in regards to these emails, I’d like to clarify that they are sent out by a third-party company that detaches survey responses from your UNI. Though no survey is perfect, this initiative is a step in the right direction and can be improved with each iteration.

The Columbia Student Well-Being Survey responses will serve as a tool for progress when it comes to mental health. It’s up to students to use this tool how they think best—whether it be in meetings with student council and administrators, occupying a building to demand policy change, or even in conversations between friends about mental health. In essence, key decision-makers on campus working to improve mental health would benefit from having information on all the different dimensions of the problem. The survey data would strengthen and inform our policy changes.

The author is a Columbia College junior studying sociology with hopes of one day using the law to advance issues of justice and equality. He is also one of thousands of Columbia students who has taken the Columbia Student Well-Being Survey. See what he and other Student Well-Being Survey Ambassadors have to say on Facebook and Instagram.