

Health Resources & Recommendations for Graduate Students

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We often take our health for granted, and if you are very lucky, you will never need to think twice about your ability to move through life without physical pain. Unfortunately, it is somewhat likely that during your graduate school years you will have to deal with a medical concern, even a seemingly small one, at least once. Regardless of the severity, **dealing with an emerging, pre-existing, and/or chronic health condition can be stressful and trigger a series of questions** about where to get help and how this might affect your role as a graduate student. We hope that this document will help answer at least some of those questions.

This document will point you to resources for getting access to medical care, covering healthcare costs, and obtaining accommodations for your various duties as a graduate student. Throughout, we have added **recommendations for navigating these various resources** and related conversations with advisors and instructors.

Please note that this document was written to the best of our knowledge and based on our personal experiences with various medical ailments during our graduate school years. We acknowledge that everyone's experience is different and that there may be other relevant health resources not currently covered here. **We welcome your feedback and suggestions for improvement!** You can reach Cony at cvidal@g.harvard.edu and Olivia at ofitzpatrick@g.harvard.edu.

Although this document was written specifically for graduate students in the Harvard Psychology Department, much of the information here might apply to Harvard students in many other departments. **Feel free to share this document with others that might find it helpful**, although we cannot guarantee that everything outlined in this document will be applicable to students outside our department.

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A Note on Mental and Emotional Health

Health can be defined in many ways and can capture numerous different experiences. In this document, we're focusing specifically on the health that we often think of as *physical health*, and you will find a compilation of *mental health* resources elsewhere¹, such as in the [PsychSpace website](#), which was developed by various members of the Harvard Psychology department.

That being said, we'd like to share a quick note on the relationship between these two health domains. Indeed, health concerns can take a *huge* physical *and* emotional toll and can generate many challenging feelings, including helplessness, despair, and inadequacy. Although these feelings are completely understandable and very common, you should know that **there are many things you can do to make the experience a little more manageable.**

First, it is important to note that we exist in an environment that directly impacts our well-being. Academia and our broader society tend to reward and define human value according to a narrow definition of productivity. This belief system can be at odds with well-being and is inherently ableist, as it assumes that productivity should look the same for everyone (e.g., see

¹ We think that the separation between "physical health" and mental or "emotional health" is rather arbitrary, but we make this distinction here given that in our present health systems the services we can access for these domains of wellness are different.

Lund, 2021; Brinkman et al., in press; Andrews & Lund, 2015).² This reality can be harmful to all of us and may be especially so for students who experience health concerns that are not conducive to pursuing unrealistic definitions of productivity.

For some students who have chronic illnesses, **pushing oneself to exhaustion can have life-threatening consequences, as compounded and ongoing stress can exacerbate existing symptoms.** For other students, the external pressures that encourage us to approach grad school as a sprint, rather than a marathon, can lead to long-term adverse health outcomes, such as chronic pain from spending hours and hours at one's desk.

While we work on changing this environment, one step toward feeling less hopeless as you deal with your health concerns is to **identify factors that are within your control.** For example, **students often feel like they “don’t have time” to pursue supports that maintain well-being,** such as scheduling appointments with health professionals, prioritizing sleep, adhering to treatment plans (e.g., physical therapy exercises), taking breaks from screens, and stretching. This can feel especially true during periods of high stress. **Although these activities do take time in the short-term, they can actually increase productivity in the long-term,** as health maintenance practices can prevent undesired personal and professional outcomes, such as burnout, acute medical crises, distractibility, and interpersonal conflict. We all have periods of time in our lives that require us to put the pedal on the metal... but we can't do that, or even normally go through our personal and professional journeys, if we don't have any gas in our car.

You might consider preventative and self-guided approaches to support emotional well-being. For example, members of our department compiled several resources for managing stress and enhancing self-care on a website called [PsychSpace](#). You can also try **online emotional wellness tools** (such as [Smiling Mind](#) and [Real](#)), and science-backed exercises (such as [Therapy Notebooks](#)). We also encourage seeking support from **trusted peers** (including the authors of this document, if you feel comfortable!), as you might be surprised just how common these experiences truly are.

These resources can be very helpful, but they should not be considered replacements for professional help. If you are in need of professional emotional support, please contact the [Harvard Counseling and Mental Health Services](#) (CAMHS, which offers some therapy sessions free of charge) or check out mental health providers on [Psychology Today](#), through the [THRIVE database](#), or the [InnoPsych Database](#) (specifically providers of color). who accept our [student health insurance](#). If you or someone else you know is experiencing an emergency, please seek immediate support through the nearest emergency room or the national call-line (988).

² Lund, E. M. (2021). Addressing the Leaking Pipeline: Supporting Disabled Graduate Student Teachers in Psychology. *Teaching of Psychology*. <https://doi.org/10.1177/00986283211036420>. Brinkman, A., Rea-Sandin, G., Lund, E., Fitzpatrick, O.M., Gusman, M., Gibson, D., Boness, C., & Scholars for Elevating Equity and Diversity (in press). Shifting the discourse on disability: Moving to an inclusive, intersectionality focus. *American Journal of Orthopsychiatry*. Andrews, E. E., & Lund, E. M. (2015). Disability in psychology training: Where are we? *Training and Education in Professional Psychology*, 9(3), 210–216. <https://doi.org/10.1037/tep0000085>

Getting Medical Support

Below we discuss accessing medical care through the [Harvard University Health Services](#) (HUHS) as well as at other hospitals (as needed for specialty care, etc.). In general:

Whenever in doubt about health symptoms, seek professional care! You shouldn't be in pain everyday, and you shouldn't wait until things are severe before seeking care. If something doesn't feel right, go to the doctor! It's their job to help you.

HUHS will be your first point of action for most health-related concerns. They are located in the Smith Campus Center in Harvard Square (75 Mt. Auburn Street, Cambridge, MA). Most services at HUHS are offered at no cost to Harvard students. You can use the [HUHS Patient Portal](#) (requires login with HarvardKey) to communicate with your providers after an appointment and review information that is available in your medical record. While you can review and cancel your upcoming appointments through the Patient Portal, you cannot *make* an appointment online; instead, you must call HUHS at **617-495-5711**.

Luckily for us, the greater Boston area is home to some of the best medical services in the world, and if your condition requires specialty care, you can access world-class medical experts at HUHS and beyond, sometimes at no cost and otherwise for a small copay.

NOTE: We will discuss financials in more detail, including health insurance coverage and other sources of reimbursements, in the next section, under "Getting Financial Support" (p.6).

Emergency Care and Urgent Care at HUHS

If you are experiencing a life-threatening emergency, your first resort should be 911. If you are experiencing **pain or discomfort that requires prompt attention but is not life-threatening**, you can book an [Urgent Care](#) visit at HUHS. Urgent Care covers any urgent health problem, either physical or emotional, and is offered at no cost for Harvard students.

Note that **Urgent Care does not take walk-ins** and requires that you book an appointment beforehand, by calling (617) 495-5711. Urgent Care hours are 8AM to 6PM, Monday through Sunday. If you need care outside these hours, or if they do not have available slots that day and your condition seems severe enough to require prompt attention, HUHS will recommend you go to an emergency room at a nearby hospital (e.g., Mount Auburn Hospital).

But don't worry about knowing exactly where to go yourself; they are the experts and will give you a recommendation. So to summarize:

- For a life-threatening health-related emergency, call 911
- For urgent health problems, both physical and emotional, that require prompt attention but are not life-threatening emergencies, call HUHS Urgent Care (617-495-5711) and follow their recommendations for what to do next (this might include waiting and

monitoring the symptoms before taking any further action, booking an appointment with them at HUHS, going to the emergency room at a nearby hospital, etc.)

Your Primary Care Provider at HUHS

You may be experiencing symptoms that might not necessarily require urgent care, but that are persistent or recurring enough to deserve medical attention. For these situations, it can be helpful to **start off by scheduling a visit with your primary care provider (PCP)**. Harvard assigns a PCP at HUHS to all students, and the visits are free. You will need to call HUHS to schedule an appointment. Sometimes your PCP might have a long wait time, and if you would rather not wait that long, you will probably be offered to see someone else on their medical team, such as a nurse practitioner.

It can often feel like busy PCPs have less than two minutes to spare when they meet with you - don't let this discourage you from asking all of your questions and explaining all of your concerns. The world tells a lot of us that we aren't "allowed" to voice our perspectives, concerns, and needs, so it totally makes sense if you would like [some tools](#) for how to advocate for yourself when meeting with your PCP.

Sometimes, it can be helpful to prepare a list of questions beforehand and take notes during the appointment. You can also ask them to print out an after-visit summary, their recommendations, etc. If you don't understand something, it is your right to ask your PCP to clarify! You deserve to have all of your questions sufficiently addressed.

If your medical concern is not resolved within the timeframe you and your PCP discussed, reach back out to them! **You can always schedule a follow-up appointment(s), as needed.** It is their job to help you. Ongoing medical concerns can feel disheartening, especially when it seems like you've tried absolutely everything in the book. We've been there! In those moments, it is important to keep exploring your options, including talking with your PCP again.

And if you don't vibe with your assigned PCP, fear not! [According to HUHS](#), you can change your assigned PCP at any time. You deserve to have a PCP who supports you and gives you reasons to trust them.

A quick note on preventive care and sustainable health and wellness

Although this document focuses on resources and recommendations for once you have started developing health-related concerns, we should not neglect preventive care and general healthy habits! You don't have to wait until you are in pain to see the doctor or to take sustainable care of your health. For example, you can get an **annual physical exam and routine blood panels for free at HUHS**—make use of it! You can schedule a physical exam by calling HUHS at 617-495-5711. Additionally, we included **general wellness and health resources** toward the bottom of this document (p. 14), most of which are free or offered at low cost for Harvard students. This includes group exercise, yoga, and meditation classes, massages, acupuncture, and more!

Specialty Care at HUHS and beyond

There is only so much your general practitioner can do for you—certain conditions will simply require more specialized care. Try to avoid getting stuck on a cycle of “let’s monitor your symptoms for a few more weeks” with your general practitioner, and be firm in requesting to get a referral to a specialist (Note: In our healthcare system, other than for mental health visits, you *must* get a referral from a PCP to see a specialist; you cannot go directly to them).

You can access specialty practitioners at HUHS or at any other medical institution of your choice. **We recommend sticking to “in-network” practitioners, as these will be covered by your Harvard student health insurance plan** (administered by health insurance company Blue Cross Blue Shield). The HUHS general practitioner that initiates the referral can give you a list of relevant in-network practitioners that are covered by your insurance. If you want to make sure the specialist you want to see is covered, you can call your insurance company to check before you confirm an appointment. If the specialist works outside of HUHS, you will be responsible for giving their office a call and scheduling a visit. For specialists that work at HUHS, your general practitioner might be able to help you schedule the visit internally.

Specialist doctors can have a really long wait time, so you should try to get on their calendar as soon as possible to avoid any further delays to diagnosis and corresponding treatment.

Unfortunately, oftentimes it takes being very pushy to receive the care you need. When you call to schedule an appointment with a specialist (or if the HUHS practitioner you are seeing tries to help you do it), be clear about the urgency of your situation—this can make them more likely to “squeeze you in” for potentially a much earlier appointment than they might otherwise give you. While you wait for your appointment, you could also try calling their office back a few times to see if they have had any cancellations that you might be able to take.

Getting Financial Support

Harvard Student Health Fee and Student Health Insurance Plan (SHIP)

Harvard offers GSAS Ph.D. students coverage for medical care through the Student Health Fee and the Student Health Insurance Plan, which we describe briefly below. Importantly, **both are paid by the university** (not the student) along with your tuition.

We recommend you take a close look at the [Harvard Student Health Program Handbook](#) for more details, and call Member Services directly (617-495-2008) to clarify any coverage questions ahead of your medical visit to avoid any surprises. Healthcare insurance terminology and provisions tend to be confusing and unintuitive, and you should definitely ask as many questions as you need.

- **[Student Health Fee](#).** From the website: *“The Student Health Fee (SHF) is required for all registered students who are enrolled more than half-time in Massachusetts and*

covers most services at Harvard University Health Services (HUHS) with no copay. All students who pay the SHF will have access to many of the HUHS Clinic services in-person, as well as via telemedicine appointments. Students are encouraged to reach out to HUHS with their medical needs.

- Services covered by this fee include preventive care, urgent care, and specialty care at HUHS, periodic flu clinics offered by the university, wellness workshops, etc. You can expect all these services to be free of charge.
- **Student Health Insurance Plan (SHIP)**. From the website: “SHIP offers hospital, specialty care coverage, and prescription drug coverage throughout the United States and abroad. This plan is administered by Blue Cross Blue Shield (BCBS)”.
 - In general, SHIP makes specialty care, including surgeries, pretty affordable. Currently, for in-network specialty care visits outside of HUHS you would pay \$35, and for an outpatient surgery you would only pay \$75. Emergency room visits have a \$100 copay. SHIP also covers obstetrics/gynecology services, laboratory services, prescription medications, immunizations, routine eye exams, and durable medical equipment.
 - Note that prescription medications do have a co-pay. From the [Harvard Student Health Program website](#): “Prescriptions fall into three tiers that determine your co-payment. Prescription co-payments have an out-of-pocket maximum of \$1,300 per individual and \$2,600 per family in a plan year. Once you meet your out-of-pocket maximum, you will not be charged a copayment for your prescriptions for the remainder of the plan year. Over-the-counter drugs are not covered by the health plan.”
 - **For any healthcare costs you incur not covered by SHIP, you can apply to be reimbursed through the Harvard Graduate Student Union’s [Healthcare Reimbursement Fund](#), which we cover in more detail below.**

Reimbursements through the Harvard Graduate Student Union’s Healthcare Fund

** NOTE: This part of the document is currently only relevant for students who are considered a “student worker,” such as a teaching fellow (TF) or a graduate research assistant (GRA). Students typically take on these roles during their G3 year, as the first two years you get full funding without teaching requirements. Students in our department are currently working diligently to fight for union benefits for all students, regardless of their funding source, so stay tuned. **

Harvard students who are considered student workers can apply to **be reimbursed for any medical costs not covered by your health insurance** through the [HGSU Benefit Funds](#). There are two health-related funds – the [Dental Fund](#) and the [Healthcare Reimbursement Fund](#). These funds are very comprehensive; see below for the scope provided on their website.

“Co-pays (for covered visits) and full visit costs (for visits beyond plan limits) for mental health and specialist (including PT/OT/speech therapy) visits are all covered and eligible

for partial reimbursement. Diagnostics, inpatient hospital stays, medical devices and prescription eyewear are also eligible for partial reimbursement. Prescription drug copays and costs associated with prescribed over-the-counter and compounding pharmacy drugs are also covered.”

In short – if you purchased something, anything, for a medical reason (yes, including Ibuprofen for those headaches that won’t go away), add it to the list of potential costs to be covered! If you plan on accessing these funds, **we recommend keeping a detailed tracking log of your costs and relevant receipts because you have to prove that you covered the costs in your application** – your future self will thank you. Also, take note of the due dates [here](#)!

Implications for your Work and Other Activities

Your health concerns and related medical appointments might interrupt some of your daily activities, including your Ph.D. research and teaching commitments. This can definitely be frustrating and stressful, but a little planning and communication can make a big difference.

As you have a clearer sense of what your medical issues are, we first recommend that you take some time to think through how these new circumstances might impact your daily activities, and **brainstorm a plan** of potential accommodations and updated timelines. For example, you might want to identify which of your current projects and duties you might still feasibly complete “as normal” and which might have to be postponed or take longer than usual.

To clarify expectations accordingly and give you the peace of mind you need to focus on your health, you should **communicate** these potential changes in your schedule and timelines as early as you can to everyone who might have specific expectations of you, including your advisor. A formal letter from the [Harvard Disability Access Office](#) can be a helpful starting point for these conversations. We cover all these recommendations in detail below.

Brainstorm and plan for your needs and accommodations

Take some time to make a list of all your commitments, including research, teaching, and mentoring/advising. These might include ongoing data collection, manuscript writing, course assignments, weekly teaching, etc. Think through how each of these commitments might be affected by your medical concerns. For example, an arm injury might prevent you from using your computer as swiftly as you were used to, which might delay the work on a paper you were writing. Or the pain levels you are experiencing might make it difficult for you to attend your usual meetings and/or teach. As you think through these things, try to **be as concrete and realistic as possible**, so that you can better advocate for yourself later (with the Disability Access Office, with your advisors, etc.) and set the right expectations with the people you interact with.

Since we are used to a culture of productivity, it might be tempting to just try to continue our lives as “normal”, but especially in the early stages of a health condition, the diagnosis and

prognosis might not be clear, your symptoms might seem unpredictable, and you might need to take several medical appointments just to figure out what is going on. Cut yourself some slack and allow yourself the time you need to take care of your condition now, so that you may get closer to your normal routine later! And keep the following in mind:

- **Academic research tends to have very flexible deadlines; don't sweat a small delay!** You might feel that waiting another month or two to make progress on a manuscript is just *unacceptable*, but guess what: the journals will still be receiving papers by the time you get back to it.
- **You have colleagues and collaborators that are likely able to cover some of your activities for a while.** The fact that you can't accomplish all your tasks exactly as you used to doesn't mean the world is coming to an end. A fellow TF can probably cover your section here and there, a member of your lab might be able to help run some of your study sessions, and one of your research collaborators might be able to take on some of your data analysis or writing work. Everyone is likely to be much more understanding than you think!

Taking a Leave of Absence

If your medical condition is severe enough, you might consider requesting to take a formal [leave of absence](#), which can be granted for one semester or a full academic year. Note that, according to GSAS, "In reviewing requests for a voluntary leave of absence for medical reasons, the [Office of Student Affairs](#) may consult with Harvard University Health Services and/or the Disability Access Office, who may consider information from the student's current and/or former health care providers, if made available by the student."

Taking a leave of absence shouldn't be considered lightly. Requesting a formal leave can be a lengthy process, requires close and potentially multiple conversations with your advisor and financial aid officer, and will [impact your Harvard student health insurance coverage](#) (and visa status, if you are an international student). In most cases, if possible, you might want to work out some type of temporary break or reduction in activities rather than taking a formal leave. But if you think you might need an extended break from your graduate student status, you should certainly discuss the possibility of a formal leave with your advisor, Director of Graduate Studies, and/or the [Office of Student Affairs](#) (this office is the one that formally administers leave requests).

Register with the Disability Access Office (DAO) to get a formal letter outlining your accommodation needs

The [Harvard Disability Access Office](#) (formerly called Accessible Education Office) can help you access the accommodations you need to better deal with your medical condition while fulfilling your various duties as a graduate student. The DAO is the primary point of contact for

undergraduate, GSAS, and SEAS students seeking medical and disability-related accommodations, and can serve as an advocate and **liaison between you and your supervisors/instructors**. From their website:

“PhD students should register with DAO for all medical and disability-related accommodation requests, including requests related to academics, lab research, and teaching. We acknowledge that disability may impact various areas of the PhD student experience. Therefore, once you connect with DAO, we will partner with University Disability Resources and any other campus partners needed to determine and implement reasonable accommodations.”

[Registering with the DAO](#) is relatively straightforward, and involves filling out a form with information about your health issue, submitting appropriate documentation, such as a note from your healthcare provider, and attending a brief meeting with an DAO officer so they can get more information on your specific accommodation needs.

Once you agree on the specific accommodations you would like to request (e.g., greater flexibility on assignments, access to specialized software), **the DAO officer will prepare a letter explaining your accommodation requests** (note that this letter does not contain any information about your medical condition), **which they can email directly to the recipients of your choosing** (e.g., your advisor, instructors of any courses you are taking, etc.) and cc you.

You should use this letter to *initiate* conversations about your needs with your supervisors/instructors. Although the DAO will send a formal accommodation request letter directly to your advisors/instructors of choice, **this letter alone is not enough to ensure all relevant parties are on the same page regarding the accommodations you need.** The DAO recommends that you meet with your advisor/instructors to discuss specific needs and accommodations for each aspect of your research work/courses/teaching commitments. See some pointers on this below. Many people (the DAO, the Director of Graduate Studies, the authors of this document, etc.) can offer support as you prepare for these conversations, so you should definitely reach out to them if you need help.

Accessing ergonomic or other specialized hardware and software to help with your health condition

- **Ergonomic assessment and recommendations through the Harvard [Environmental Health and Safety Office](#):** The EHSO offers free “workstation ergonomic evaluations” to anyone at Harvard to help you assess whether your on-campus workstation meets ergonomic guidelines. You can request an evaluation by filling out a brief online form [here](#). A safety officer will be in touch with you to schedule an in-person visit to your workstation and give you specific recommendations for upgrades. You should make sure to tell them about any current health conditions and how they might impact the way you work at your workstation (e.g., you might benefit from a standing desk, adjustable keyboard tray, etc.). Based on your current setup and

needs, the safety officer will email you a list of recommended equipment to acquire. They will cc your advisor on this email, so that you can use these expert recommendations to start a conversation with your advisor about the equipment you would like the lab to acquire for you. If your advisor says they do not have funding for this, you should consult with the Disability Access Office to see if they might be able to cover part of the cost (see below). Otherwise, consider consulting with the Psychology Director of Graduate Studies to see if they might help brainstorm funding sources within the department to pay for the equipment you need. If all else fails, you could contact representatives of the Harvard Graduate Student Union to see if their Healthcare Fund might cover some of this equipment (see more information about the HGSU [Healthcare Fund](#) above).

- **Specialized software and others through the [Disability Access Office](#):** In addition to documenting (and legitimizing) your accommodations, the DAO officer you talk to can also get you **free access to any relevant specialized software currently covered by Harvard** (e.g., dictation software like Otter.ai), though the current list of available free software is rather limited. The DAO officer might also offer additional resources within reason. For example, regarding ergonomic equipment, the DAO might be able to purchase ergonomic keyboards or mice if they are recommended through an ergonomic assessment done by the Harvard Environmental Health and Safety Office, *if* your lab/department cannot cover these costs, *and if* they are relatively inexpensive. **There is no harm in trying! We recommend you at least ask what they might be able to cover given your current understanding of your hardware and software needs.**

Communicate with advisors and instructors early and periodically

As you form a clearer picture of how your condition is affecting or will affect your daily activities, you should try your best to communicate early with a few key people that might have expectations of you and your work, including your Ph.D. advisor and any collaborators you are working with, the instructors of classes you are currently enrolled in, and if applicable, the instructor of the course you are teaching. **Early and periodic communication** can make it easier for them to understand what you are going through and adjust expectations accordingly, as well as give you the peace of mind you need to focus on your recovery.

A formal **letter from the [Disability Access Office](#)** (discussed above) can help you initiate these conversations with some concrete documentation in front of you, but it will ultimately be **up to you to clarify how your medical condition will affect *specific* assignments, deadlines, and other deliverables** that others might be expecting from you. We understand that the sole idea of having these conversations might seem daunting, but things will probably go way more smoothly than you think! Here are some general things to keep in mind as you prepare for these conversations:

- **Seek support and advice from a trusted mentor, colleague, our Director of Graduate Studies (currently Leah Somerville) and/or the Disability Access Office if you're not sure how to approach the situation with your advisor and/or professors.** Everyone's situation is different. Whereas some advisors and professors might be super understanding and actively support you, others might need a bit more guidance on how to do so. You can always get help with identifying action steps that work well for you – including with drafting emails, preparing for conversations, etc.
- **While you should be specific about the accommodations you need, you don't have to reveal every detail about your condition.** You should only share what you are comfortable with. A general explanation that you are having certain health issues that are limiting your usual productivity should be all the information they need regarding your health status.
- **Be as specific as you can regarding the accommodations you need.** Avoid ambiguities and blanket statements about the support they will give you. Based on the brainstorming you did on what your new needs are, make sure to explicitly discuss the accommodations you require (or anticipate requiring). These might include:
 - **Changes to your work schedule and work station.** For instance, you might now have recurring medical appointments and might need to miss lab meetings or get extensions on deadlines you had agreed on for your research work. You should also discuss any changes to be made to your workstation to make it easier for you to complete your work. You will have a better chance at securing these accommodations if your requests are informed and backed up by your conversations and consultations with the Disability Education Office and the ergonomic experts at the [Environmental Health and Safety Office](#) (see more detail on the DAO and the EHSO in the blue box above).
 - **Research projects.** Every student's research responsibilities are different, and the degree to which you advocate for support is a spectrum, depending on your needs and goals. For example, you might consider identifying your top-priority research project and working with your advisor to only focus on that one project during a period of time (which, by the way, you don't have to specify!). On the other hand, you might benefit most from taking a break from all research projects and only focusing on absolute requirements, such as classes you are taking.
 - Some students work with a group of collaborators. In that case, it can be helpful to set expectations with your team from the get-go. For example, you could send a brief email advocating for your needs – e.g., you need an extension, you can no longer complete a specific set of tasks, you need to delegate responsibilities, etc. Remember – you do not have to share any information that you are not comfortable sharing. Kind collaborators who are in your corner will understand; if you get a response that is unkind and/or harmful, let a trusted mentor and/or department

member know, such as our Director of Graduate Studies (currently Leah Somerville).

- **Course assignments:** For any class you are taking, meet with the course instructor to outline expectations for *each* assignment you have left in the semester. For example, you might need extensions for some but not all assignments. Be specific about the nature of extensions or other accommodations you would like (e.g., you anticipate needing two additional weeks to turn in the final paper, you would prefer that the final assignment is done orally rather than in written format, etc.).
 - If it seems like your medical concerns might prevent you from finishing the course assignments within the timeframe of the semester, you have the option of **petitioning your instructor to take a temporary “incomplete” grade**, which effectively gives you a much longer extension to complete the course assignments. From the Harvard [GSAS website](#):

“Incomplete grades (INC) are granted to graduate students only at the discretion of the instructor. If a student receives an INC, the student must complete the work of the course before the end of the next regular term. For example, if a student receives an INC during the fall term, the student must complete the coursework during the subsequent spring term by submitting work before the final day of the spring term. Even if the student’s registration status during the term is “[leave of absence](#),” the student must complete coursework during this time frame. However, the only exception is if the student is given an earlier deadline by the instructor.”

- **Teaching commitments:** While your responsibility to head instructors and to your students is important, you could chat with the head instructor to decide together on a contingency plan for medical emergencies (e.g., days when your symptoms are severe and need time-sensitive care / medical attention). This might involve setting an alternative section time (in coordination with your students) for the occasions when you might not be able to teach your section at the usual time, agreeing to record your section at an earlier/later time to then disseminate to students, or having a substitute/shift system in place so one of your fellow TFs can take on your section that week, etc.
- **Clinical practicum (*applicable to students in Clinical Psychology only*).** Every clinical practicum site is different, so attitudes toward taking time off to navigate health concerns can be variable. If you trust your supervisor(s), you might consider speaking with them directly, applying the same approach that you might use with a research advisor or professor. If you think you might need “back up,” it can be helpful to work with DAO to explicitly explain the importance of

taking time off for your health in a formal letter, which you can provide to your supervisor. Most supervisors will likely respond well to these steps. That being said, some might require additional support from the university, such as our clinical training directors (e.g., Dr. Becca Shingleton). No matter how much a clinical site might push back against you advocating for yourself, it is your right to do so. In fact, it is discriminatory for sites to treat you differently based on a medical condition and/or disability, and there are members of our department who will support you through this, such as Dr. Shingleton.

- **Consider adding an automatic email reply feature indicating that you are going to be slower to respond during this period of time.** This can be helpful for some students by relieving the feeling that they have to keep up with non-urgent emails and explain their “delayed responses” each time. Generally speaking, it is also a good reminder or indication to collaborators, etc. that you are in low power mode...so they might think twice before asking you to do something again during that time of recharge.
 - One option - “Thanks for your email! During this time, I will not be responding to emails as quickly as usual. I appreciate your patience and will respond to you as soon as I am able.”
 - Another option (which you can use even if you aren’t technically “off” work the whole time) - “Thanks for your email! I am away from regular email for health reasons. I will respond to you when I am back at work.”

Other Health and Wellness Related Resources At Harvard

- **[Center for Wellness](#):** In addition to online wellness education materials, the Center for Wellness offers discounted massage and acupuncture appointments, and free classes including yoga, pilates and meditation. The Center is located on the second floor of the Smith Campus Center (75 Mount Auburn Street, Harvard Square).
- **[Harvard Recreation](#):** Harvard Recreations offers a free student membership to access all gyms at Harvard as well as a variety of free [group fitness classes](#), from conditioning and weight training to yoga, pilates, and zumba.
- **[Environmental Health and Safety Office](#):** The EHSO offers free “workstation ergonomic evaluations” to help you assess whether your on-campus workstation meets ergonomic guidelines. You can request an evaluation by filling out a brief online form [here](#). A safety officer will be in touch with you to schedule an in-person visit to your workstation and give you specific recommendations for upgrades. In addition to this expert consultation, the EHSO website offers online resources on the basics of ergonomics and helpful guidelines to apply to your daily work routine.
- **[Counseling and Mental Health Service](#) (CAMHS):** This is the on-campus mental health counseling service that all students have access to for free.

- [Off Campus Counseling Database](#): If you'd like to skip CAMHS and go straight to a community clinician, you can check out these databases to find one that fits any desired criteria and accepts our insurance (Blue Cross Blue Shield).
- [SHARE with Office for Gender Equity](#): If you would like support surrounding gender equity (e.g., harm based on gender identity or expression), you can reach out to SHARE at any time.

APPENDIX: Condition-Specific Recommendations

As available, we will add condition-specific recommendations shared by students in our department.

Cubital Tunnel Syndrome (Ulnar Nerve Entrapment at the Elbow)

Cony Vidal Bustamante (graduate student and author of this document) experienced cubital tunnel syndrome symptoms for several months and eventually received surgery for it. You can contact Cony for more information about her experience: cvidal@g.harvard.edu.

Overview of the condition: Cubital tunnel syndrome occurs when the ulnar nerve, one of the three main nerves in the arm, becomes pinched or irritated at the level of the elbow. Symptoms include numbness and tingling in hand and fingers (specifically, the little and ring fingers), and general discomfort in your arm, especially after you have been bending your elbow for a while (e.g., after working on your computer). Orthopedic doctors might recommend resting the arm for extended periods of time, or at least that you adjust your daily activities to avoid bending the elbow. If the symptoms persist for several weeks after adjusting your daily routine, or the symptoms are worsening, your doctor might recommend surgery.

My experience: I started feeling tingling in my right arm and hand seemingly out of nowhere in the middle of winter break. It took several months, a series of medical appointments (including a nurse practitioner, a couple of hand orthopedists, and several physical therapists), and lots of persistence to get diagnosed. It took a few additional months to receive surgery. Luckily, the post-surgery recovery process has been very smooth and I'm now close to fully back to where I was before the symptoms started, about eight months ago.

Work-related adjustments: For several months, pain and tingling in my arm and hand made it difficult to work on my computer for longer than 30 minutes. I therefore had to make some adjustments to get (at least some of) my work done:

- **Voice dictation and external microphone:** I pivoted to using voice dictation mode as much as possible to make progress on research manuscripts and course assignments. There is definitely a learning curve here: you will quickly realize that writing a paper using voice dictation is far from reading a story out loud. It will be frustrating when you

have to go back and forth between different paragraphs and restart sentences. It is even more frustrating when the computer writes something completely different from what you said and you have to repeat yourself several times over. I found that getting an external, professional microphone led to better results than simply using the built-in microphone in my laptop. Some recs:

- **Dictation software:** Although I got a free account for Otter.ai through Harvard's Accessible Education Office (now called Disability Access Office), I ended up barely using it. Instead, I relied on the built-in voice dictation features in Microsoft Word and Google Documents. Google Docs had overall better performance, and also offers voice commands in addition to voice typing (e.g., you can say "New paragraph" and it will start a new paragraph instead of typing "new paragraph").
- **External microphone:** I did some research on the microphone market and landed with the [Blue Nano Yeti](#) microphone, which I found on sale for about \$80. I found this mic to represent a good balance between price and quality, and I was very satisfied with my purchase (someday soon I might finally start my podcast dreams with this microphone). There are definitely cheaper options out there, and a lot of more expensive ones!
- **Ergonomic adjustments:** Following doctor recommendations, I made my workstation as conducive as possible to leaving my arm in a neutral position with minimal bending of the elbow and wrist. I got the following adjustments to my desk in my lab, following conversations with my advisors and an expert consultation with the Harvard [Environmental Health and Safety Office](#):
 - **Standing desk and height-adjustable external monitor:** Luckily, my lab had extra standing desks and height-adjustable external monitors. Having these two made it a lot easier to keep my desk surface at the right height and adjust it dynamically throughout the day (e.g., I can easily switch between sitting and standing)
 - **Tilt-adjustable keyboard tray:** This was recommended by the EHSO and my lab luckily paid for it. This made a huge difference; I was now able to adjust the tilt of the keyboard such that the elbow was close to fully extended, without needing to bend my wrist (which would have led to other problems down the road), and regardless of whether I was sitting or standing.
- **Academic accommodations:** I registered with the DAO and communicated early and often with my advisor, the instructors of the courses I was taking, and the head TF of the class I was teaching. I prioritized teaching and getting my course assignments done, but discussed contingency plans with everyone mentioned above in case things took longer than expected. In fact, as the pain got worse over the course of the semester, I requested to take an ["incomplete grade"](#) in one of my more demanding classes (see more info about this above, on p.13, under "Course assignments"), and the instructor was luckily very receptive to it.

Financial support: During the eight months between the start of my symptoms and the end of my surgery recovery period, I incurred several costs not covered by the Harvard Student Health Insurance Plan (SHIP): specialty care visits with hand orthopedists and physical therapists outside of HUHS (\$35 per visit), an emergency room visit (\$100), outpatient surgery fee (\$75) and some medications. Fortunately, I was able to get fully reimbursed for all this through the Harvard Graduate Student Union's [Healthcare Reimbursement Fund](#). There were also several other costs that were directly covered by SHIP that I was never charged for, including the general practitioner visits I took when symptoms had just started, the various arm splints my primary care team recommended before we reached a diagnosis, and physical therapy sessions at HUHS.