

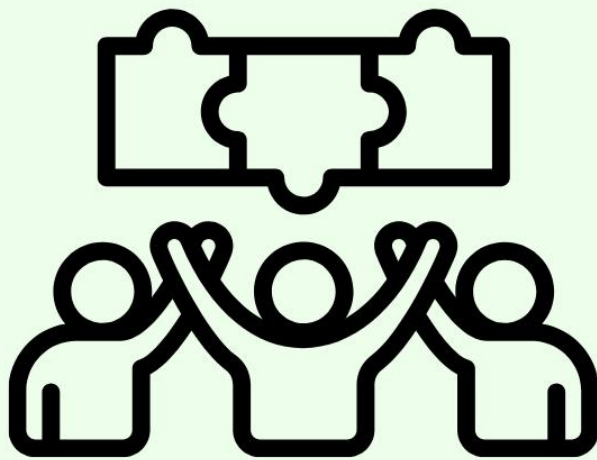


PhDWELL

**Assessment of Forms of Ad Hoc and
Emergency Psychological Support
Availability in Polish Higher
Education Institutions and Research
Institutes**

Research Report





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Executive Summary

The Polish National Association of Doctoral Candidates conducted a nationwide survey in July 2025 regarding the availability and quality of psychological support in entities operating doctoral schools. The study involved 315 doctoral candidates, representing 1.65% of the total population and ensuring statistical representativeness for drawing conclusions about the entire population of doctoral candidates in Poland.

The study results reveal an alarming situation regarding mental health in the doctoral candidate environment. As many as 63% of doctoral candidates experience high or very high levels of stress related to doctoral education, and 66% report symptoms of burnout in connection with their scientific work. Particularly concerning is the fact that the level of stress and burnout increases with each year of education, peaking among those who use the option to extend the deadline for submitting their doctoral dissertation, where 80% of them experience burnout symptoms.

The scale of mental health problems among doctoral candidates is dramatic. In the past 12 months, 51% of respondents experienced a crisis situation related to mental health, such as panic attacks, suicidal thoughts, or nervous breakdowns requiring immediate help. Additionally, 23.5% of doctoral candidates receive psychiatric treatment for mood or anxiety disorders, which significantly exceeds the percentage in the general population (8%). Paradoxically, only 27.6% of doctoral candidates use private psychological support, while in the general population this percentage is 38%, which may indicate significant barriers in accessing professional support.

The psychological support system in Polish universities and research institutes proves insufficient. Only 46% of doctoral candidates study in entities offering any form of psychological support, and as many as 39% do not know whether their university or institute offers such support at all. The situation is even worse regarding urgent and emergency help - only 15% of entities offer support in crisis situations, and only 1.6% have a 24-hour psychological support line.

The main barriers to accessing help include lack of information about available support (40% of indications), fears of stigmatization (32%), lack of trust in the quality of offered services (28%), and fear that using help could negatively affect the evaluation of the doctoral candidate's work (24%). These concerns are reflected in practice - in crisis situations, only 10% of doctoral candidates turn to their university or institute, while 44% use private consultations, and 12% do not seek any support at all.

Paradoxically, where institutional help is available, it proves effective. Among doctoral candidates who sought support at their university or institute, 70% received it, and the majority (75%) assess the received help as good or very good. The problem therefore lies not in quality, but in availability and awareness of the existence of such help.

Doctoral candidates' expectations regarding the psychological support system are clear and justified. As many as 85% believe that providing psychological support should be the obligation of every entity operating a doctoral school, and 83% support employing psychologists specializing in working with doctoral candidates. Preferred forms of support are primarily individual on-site consultations (83% of indications), online consultations (51%), stress management workshops (48%), and work-life balance workshops (44%). Ensuring anonymity is also important - 67% of doctoral candidates expect the possibility of anonymous contact with a psychologist, and 74% believe that help should be free of charge.

This study reveals a serious problem concerning the doctoral education system in Poland, requiring urgent systemic intervention. High levels of stress and burnout, combined with limited access



to psychological support, create a situation threatening not only the well-being of young scientists, but also the quality of Polish science.

Introduction

The Polish National Association of Doctoral Candidates ("KRD") has for many years recognized the need for a systemic approach to mental health protection in the academic environment. We pay particular attention to urgent and crisis situations, in which immediate psychological help can play a crucial role in protecting the lives and well-being of doctoral candidates. Problems in this area are diagnosed through:

- developing and analyzing surveys directed at the doctoral community,
- implementing projects aimed at identifying barriers in access to psychological support,
- cooperation with experts, university representatives and organizations dealing with mental health.

In connection with its statutory goals, which include in particular representing and promoting the doctoral community, as well as its educational, social, economic and cultural needs, identifying and removing barriers to the scientific, cultural and sports development of doctoral candidates, as well as promoting behaviors and actions improving general psychological well-being and counteracting violent and inequality situations, KRD implements the "PhD Well - Integrated activities for the psychological well-being and development of the doctoral environment" project, which includes a cycle of workshops, webinars, psychological consultations available to doctoral candidates. In addition, within the framework of the project, research is carried out to enable the diagnosis of current challenges related to mental health and the availability of urgent and long-term psychological support.

In connection with this, KRD conducted a nationwide survey from July 2 to 12, 2025, whose purpose was to assess the availability and quality of urgent and emergency psychological support in entities operating doctoral schools. The survey was anonymous, and the obtained data served to develop this report on the mental health of doctoral candidates and the availability of psychological support in academic centers.

The online survey conducted via Google Forms involved 315 people, i.e., 1.65% of all doctoral candidates in Poland¹. The sample size enables statistical analysis and formulating inductive conclusions relating to the population of doctoral candidates in Poland.

The research form was distributed electronically through:

1. KRD websites and social media,
2. doctoral student government communication tools,
3. e-mailing distributed to doctoral candidates through doctoral schools,
4. e-mailing distributed directly to doctoral candidates.

The survey structure was developed in a way that allows for a comprehensive assessment of the situation of doctoral candidates regarding mental health and available forms of support.

¹ According to data from the Information Processing Center - State Research Institute, in 2024, 19,097 doctoral candidates studied in Poland, source: https://radon.nauka.gov.pl/raporty/doktoranci_szkoly_doktorskie_2024 (accessed on August 15, 2025).

The questionnaire consisted of 52 questions divided into six sections:

1. current mental health situation, including questions about experiencing mental crises,
2. availability of general psychological support in entities providing doctoral candidate education,
3. availability of urgent and emergency help, including emergency situations,
4. barriers and needs, identifying obstacles in using available forms of support,
5. perspectives and recommendations, regarding expectations towards the support system,
6. demographic data, enabling analysis of results in cross-sections such as gender, university, field of science or year of education.

The survey form is attached to this report.

In this report, we presented the results of the survey and indicated recommendations whose implementation can significantly contribute to improving the psychological support system for doctoral candidates - both in crisis situations and in the context of preventive and systemic actions.



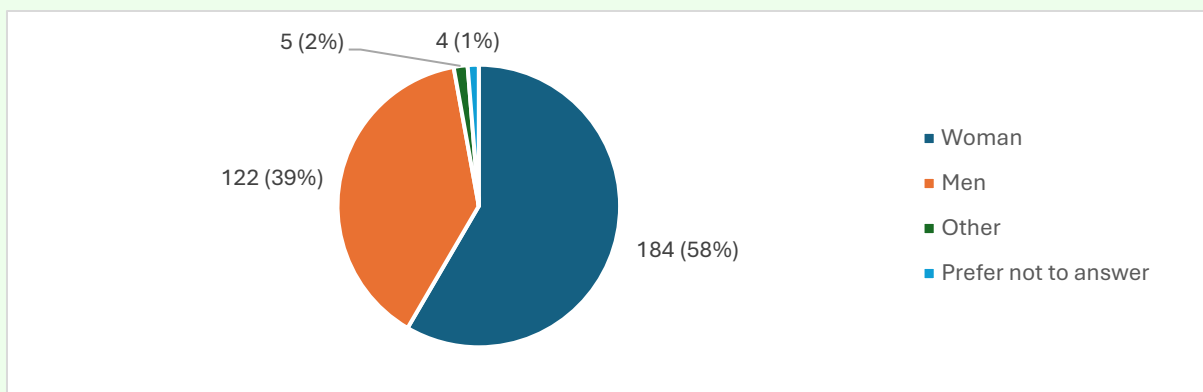
I. Characteristics of the research group



Gender structure of respondents

315 people participated in the survey, of which 281 chose the Polish version of the form, and 34 chose the English version. 58.4% of all respondents are women (184 people), and 39.2% are men (122 people); 1.6% of respondents indicated another gender (5 people), and 1.3% (4 people) refused to answer. Relating this to the number of people studying in doctoral schools in 2024, where women were 9,605 (50.3% of the total), and men 9,492 (49.7% of the total)², one can venture to state moderate overrepresentation of women among those who participated in the study.

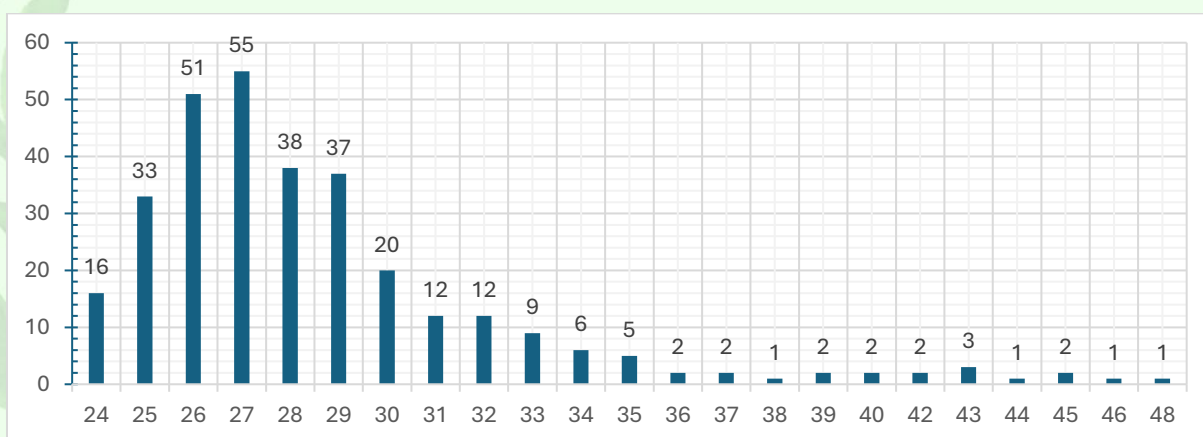
Chart I.1. Structure of surveyed persons by gender.



Age structure of respondents

The age structure of respondents is quite diverse and presents a unilaterally extended distribution. The asymmetry is related to the boundary value of the age of starting education in a doctoral school, which occurs after completing master's studies, i.e., usually after starting the 24th year of life. We excluded two unclassified responses (99 years and 6 years). The average age in the studied group is 28.8 years, the median was 28, and the mode 27 years. Over 75% of respondents are people under 31 years old. The youngest were 24 years old (5%), and the 40+ group constituted 3.7%.

Chart I.2. Age structure of surveyed persons.

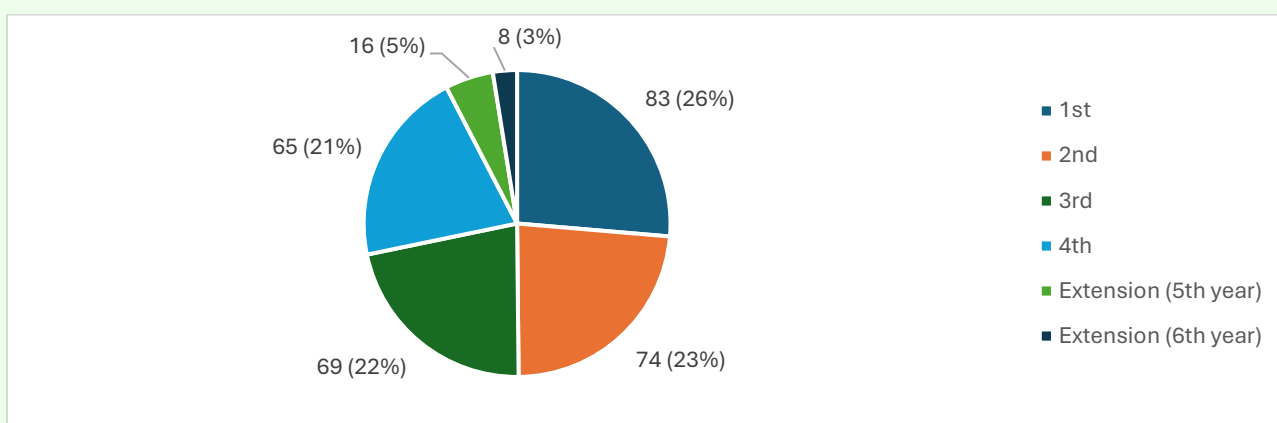


² Data from the Information Processing Center - State Research Institute, https://radon.nauka.gov.pl/raporty/doktoranci_szkoly_doktorskie_2024 (accessed on August 15, 2025).

Structure of respondents by year of education

Each year of education in a doctoral school is represented by a comparably numerous groups of doctoral candidates, with the number of people decreasing with subsequent years of education. Among respondents, 26% (83 people) study in the first year, 23% (74 people) in the second, 22% (69 people) in the third, and 21% (65 people) in the fourth. Meanwhile, 8% of respondents (24 people) are in the period of extension of the deadline for submitting the doctoral dissertation. The decreasing number of doctoral candidates with each subsequent year of education is a natural consequence of completing education in the doctoral school, both as a result of submitting a doctoral dissertation and being removed from the list of doctoral candidates or deciding to resign from education.

Chart I.3. Structure of surveyed persons by year of education.



Scientific fields

Taking into account the scientific fields contained in the Polish classification of scientific and artistic fields and disciplines, most respondents represent engineering and technical sciences (111 people; 36.0% of respondents) and exact and natural sciences (88 people; 28.6% of participants). The next in terms of number of participants were the field of social sciences (38 people; 12.3% of respondents), the field of medical sciences and health sciences (21 people; 6.8% of respondents) and agricultural sciences (19 people; 6.2% of respondents). Humanities (17 people; 5.5% of respondents), theological sciences (2 people; 0.6% of respondents) and art (2 people; 0.6% of respondents) had smaller representation. A small group of responses (17 people; 5.4%) was classified as unassigned due to ambiguity or errors in the given discipline names.

Type of entity operating the doctoral school

The vast majority of respondents are associated with public universities (86%; 269 people), while 11% (34 people) study in a doctoral school associated with institutes of the Polish Academy of Sciences. Representatives of private universities, other research institutes or international institutes constitute only 3% of respondents (12 people in total).

Place of residence of respondents

Doctoral candidates who participated in the study most numerous represented voivodeships: Lower Silesian (22%), Lesser Poland (17%), Greater Poland (15%), Masovian (14%), Silesian (13%) and Pomeranian (9%). Other voivodeships were characterized by a total 11% share. This is related to the location of the largest public universities in Poland.

It is worth noting that 67% of respondents (211 people) live in cities with over 500 thousand inhabitants, i.e., consecutively in Warsaw, Kraków, Wrocław, Łódź and Poznań. Meanwhile, 14% of respondents (45 people) live in cities with a population of 250-500 thousand inhabitants. Consecutively, 8.6% of respondents (27 people) live in cities with a population of 100-250 thousand; 2.9% (9 respondents) in cities with a population of 50-100 thousand people; 3.8% of respondents (12 people) in cities below 50 thousand inhabitants, and 3.5% (11 people) - in rural areas.

Family situation of respondents

From the point of view of family situation, most of the respondents indicated that they are single (130 people; 41.2% of respondents). Next, most people indicated that they are in an informal relationship (123 people; 39%), are married (59 people; 18.7% of respondents), are divorced (3 people; 0.9% of respondents). The above characteristics should not be surprising, taking into account that doctoral candidates are essentially young people. At the same time, the characteristics of academic work, i.e., unstable employment, the need for frequent trips - including the need to change place of residence in connection with doctoral education or postdoctoral internship - do not favor stabilization of the family situation of doctoral candidates.

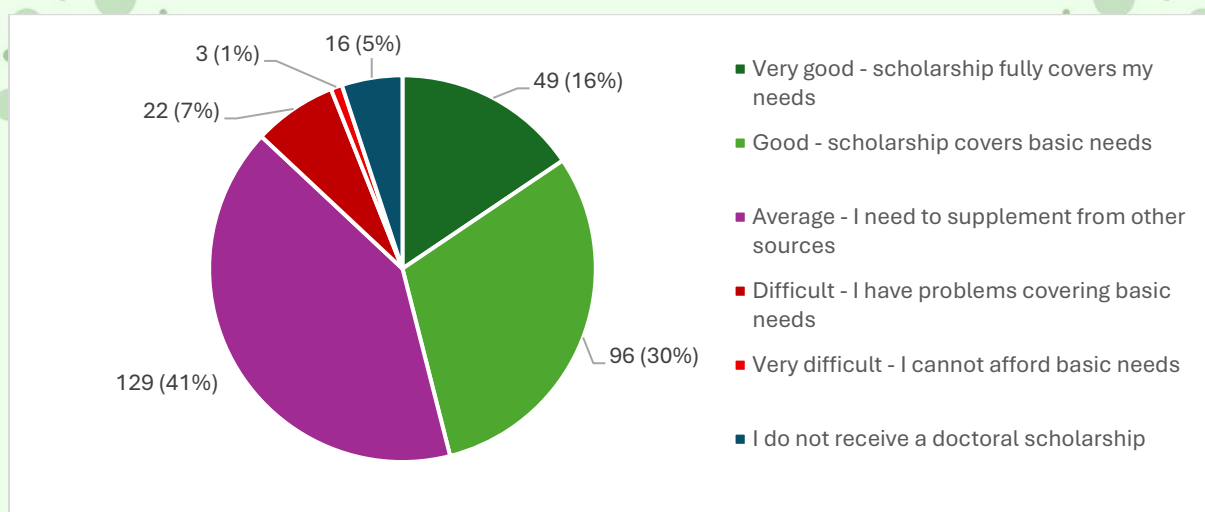
This also affects fertility. Among respondents, the vast majority (291 people; 92.4%) do not have children. 12 respondents (3.8%) have one child, 10 respondents (3.2%) have two children, and 2 respondents (0.63%) have more than two children.

Assessment of the financial situation of respondents

The assessment of their own financial situation by respondents is diverse. Among respondents, 49 people (16%) assess their financial situation very well, where the doctoral scholarship allows them to fully cover their needs. 96 people (30% of respondents) assess their situation well, where the scholarship allows them to meet basic needs. 129 people (41% of respondents) indicate that their situation is average, and they have to add funds from sources other than the doctoral scholarship. 22 people (7% of respondents) declare that their situation is difficult, i.e., the scholarship does not allow them to cover basic needs. 3 people (1%) indicate that they are unable to cover basic living needs with the scholarship; 16 people (5% of respondents) do not receive a doctoral scholarship; these are mainly people who have used the option to extend the deadline for submitting their doctoral dissertation.

Such diverse assessment results from several factors. First of all, the amount of the doctoral scholarship differs depending on whether a given person has obtained a positive result of the mid-term evaluation (3rd and 4th year of education) or not yet (1st and 2nd year of education). In addition, living costs differ depending on the place of residence and whether a given person creates a household with other people (partner, parents, children). In addition, some people may receive additional benefits, e.g., higher scholarship for scientific achievements, scholarship within grants (their own or other academic teachers), or scholarship for outstanding young scientists. The perception of the financial situation may also depend on having other sources of income (e.g., from work performed outside the entity operating the doctoral school).

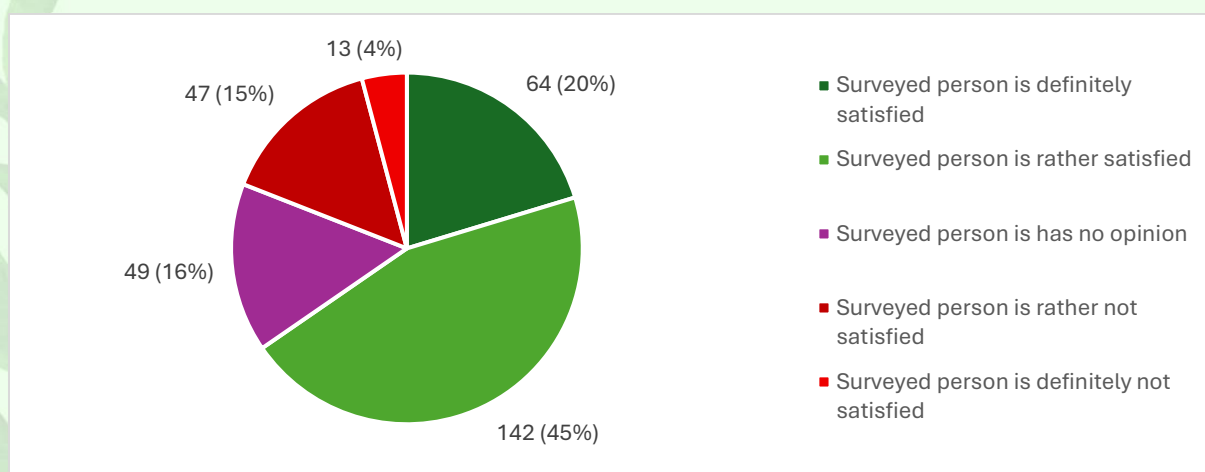
Chart I.4. Assessment of own financial situation of respondents.



Satisfaction with scientific work and plans for its continuation after completing education in the doctoral school

Scientific work very often involves autonomous, independent actions in accordance with the scientific method. The goal of research, recognition of the research gap and selection of adequate tools are, however, a derivative of the scientist's vision. These are not always accurate choices, they are often difficult and requiring compromises. However, these are always actions for which the scientists themselves are responsible. It happens that in the course of conducted research and analyses, doubts arise about both the goal and sense of research and the methods used. Doctoral candidates asked whether they think their scientific work makes sense answered positively in only 20% of cases. 45% answered that their research rather makes sense. On the other hand, more negative than positive responses were given by a total of 19% of respondents. It is worth adding that as many as 76% of respondents conduct empirical research in their scientific work, and only 32% use the possibilities of Open Science, i.e., registration of research protocols, registration of data analyses or registration of databases.

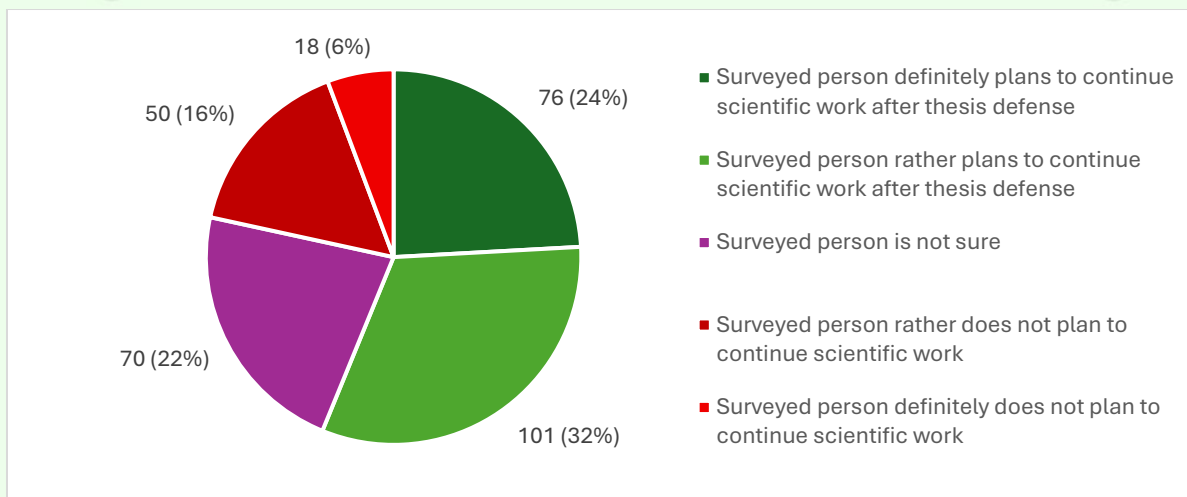
Chart I.5. Assessment of satisfaction with scientific work.



A scientific-didactic career is associated with an unstable lifestyle, domestic and foreign trips, field research, sleepless nights, stress and responsibility. The income of Polish academic scientists in most cases loses in competition with income obtained in corporations. Hence, doctoral candidates may be tempted to develop professionally, e.g., in business instead of science. Moreover, the perspective

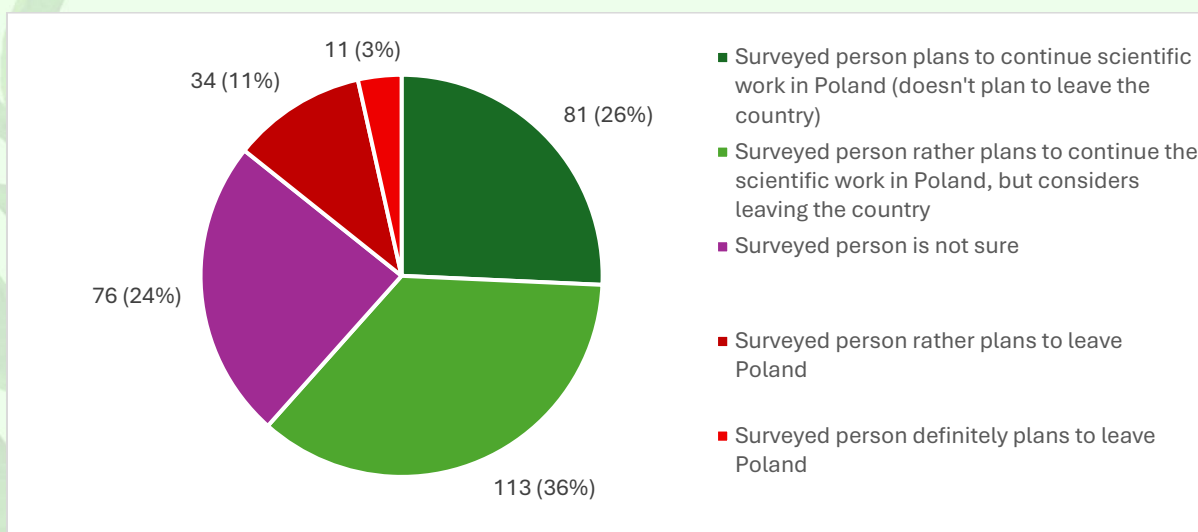
of more favorable earnings and potentially higher social status as a scientist abroad remains tempting. Therefore, it is worth noting that a significant number of respondents definitely plan (76 people, 24.1%) or rather plan (101 people, 32%) to continue scientific work after defending their doctoral dissertation. 70 respondents (22.2%) do not know whether they plan to continue scientific work after the doctorate. 50 respondents (15.9%) rather do not plan, and 18 people (5.7%) definitely do not plan to continue scientific work.

Chart I.6. Plans for continuing scientific work after defending the doctoral dissertation.



26% of respondents, in case of continuing their scientific career, would definitely prefer to stay in Poland, and 14% would be inclined to go abroad for scientific development. Meanwhile, 71% of respondents are not yet decided whether to continue their career in Poland or abroad. This may also result from the fact that more and more scientific projects have an international character, and in conditions of progressive globalization of the academic environment, the emergence of research opportunities even on another continent is not uncommon. On the other hand, the lack of a spouse and offspring favors flexibility in this matter.

Chart I.7. Plans for continuing scientific work in the country.



II. Current mental health situation of doctoral candidates

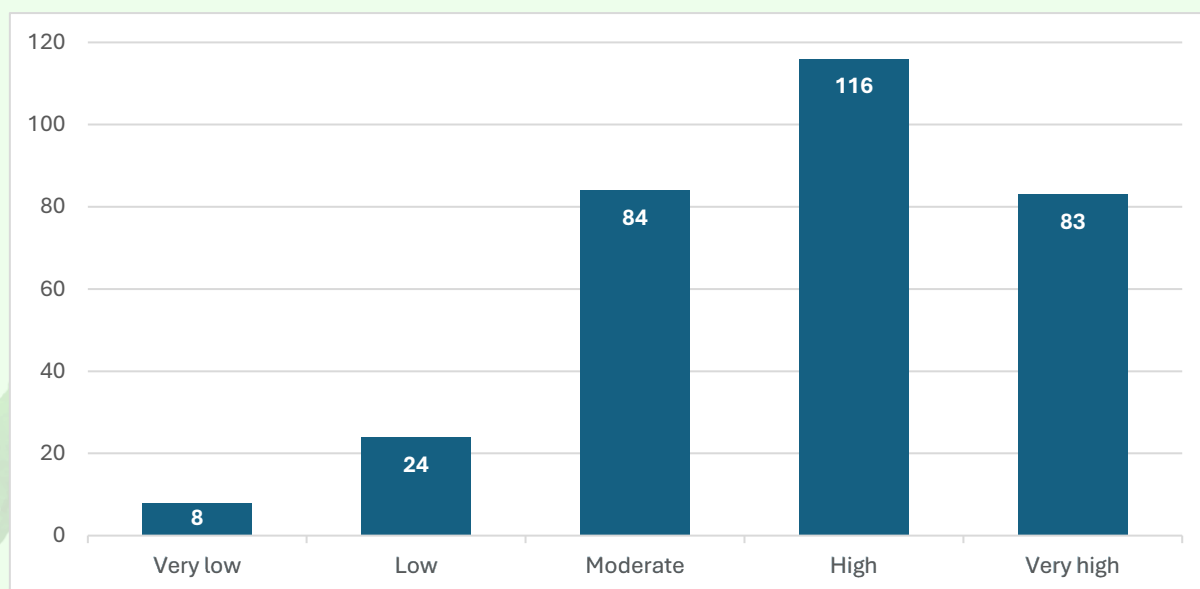


Making the decision to further scientific development after completing master's studies involves a series of challenges and sacrifices. Doctoral candidates, entering the world of science, commit to conscientious and responsible intellectual work, which has an uncertain return. This uncertainty can significantly translate into the level of stress, general psychological well-being and consequently - even physical health.

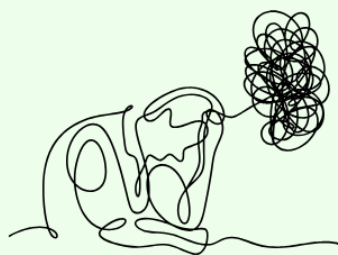
Stress level

As part of assessing the current mental health situation, respondents were asked to answer questions about self-assessment of their mental health and use of organized forms of help (including treatment) in the field of mental health. In particular, surveyed persons were asked to assess the level of stress related to education in the doctoral school on a scale from 1 to 5, where 1 means a very low level of stress, and 5 - a very high level of stress. The distribution of responses to this question is presented in Chart II.1 below.

Chart II.1. Level of stress experienced by respondents in connection with education in the doctoral school.

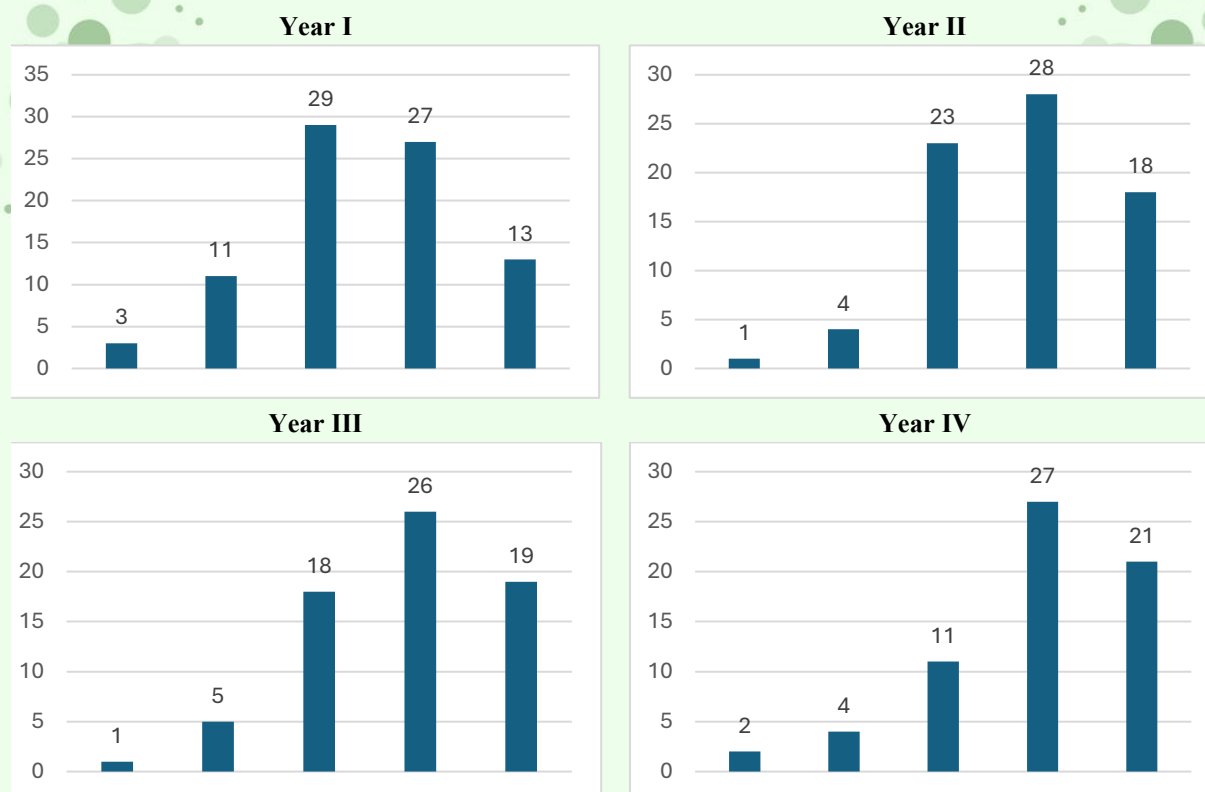


The data shows that the majority of doctoral candidates experience high and very high levels of stress (about 63% of responses). This is a very high level. Importantly, as the following comparison shows - the declared level of stress is higher in the case of people studying in higher years of the doctoral school, which may be related, among other things, to the need to obtain a positive result of the mid-term evaluation and the approaching deadline for submitting the doctoral dissertation³.



³ The breakdown did not include doctoral candidates studying in the 5th year (1st year of extension of the deadline for submitting the doctoral dissertation) and 6th year (2nd year of extension of the deadline for submitting the doctoral dissertation) due to their small participation in the research sample (16 and 8 people respectively).

Chart II.2. Declared level of stress depending on the year of education in the doctoral school.



On the horizontal axis - stress level (from left: very low, low, moderate, high, very high); on the vertical axis - number of responses.

Long-term sustained stress - according to current scientific knowledge - has a number of negative consequences for a person's overall health, not only mental health, but also physical health. In particular, the experience of long-term stress can affect physical health, increasing the risk of cardiovascular diseases, diabetes, cancer and even diseases of the bone and muscle system⁴.

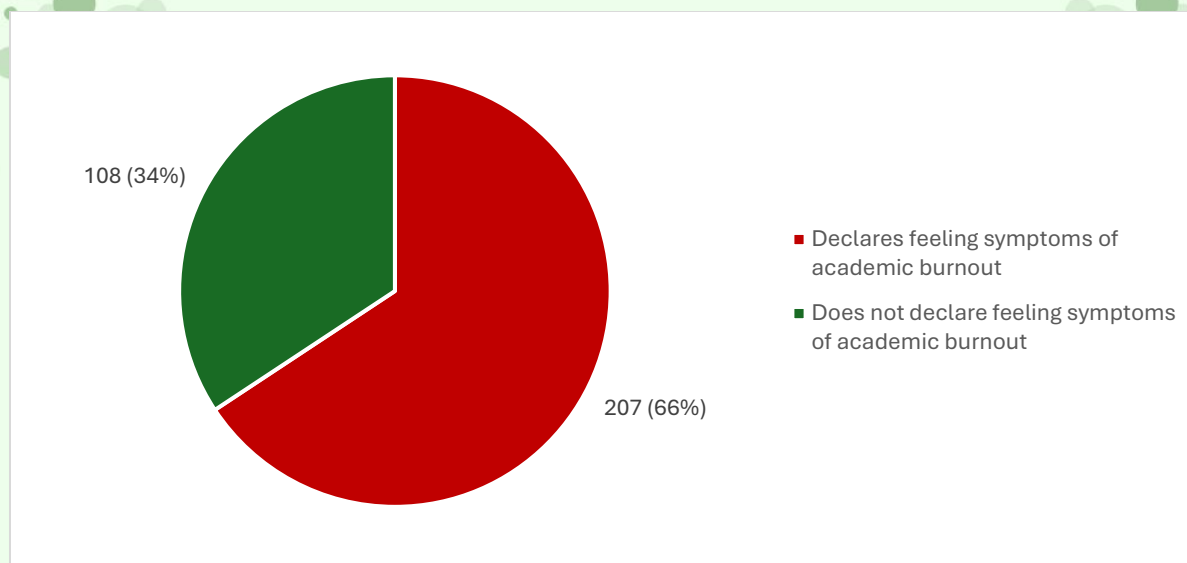
Experiencing symptoms of occupational burnout

As indicated in the literature, long-term stress can be a cause of occupational burnout⁵. The percentage of respondents who declare that they experience symptoms of occupational burnout is high, as it exceeds 66% (207 responses) indicates that they notice symptoms of occupational burnout in themselves in connection with their scientific work; the opposite opinion was expressed by less than 34% of respondents (108 responses).

⁴ L. Öhman, J. Bergdahl, L. Nyberg and L. G. Nilsson, *Longitudinal analysis of the relation between moderate long-term stress and health*, Stress and health: Journal of the International Society for the Investigation of Stress 2007, No. 23(2), pp. 131-138.

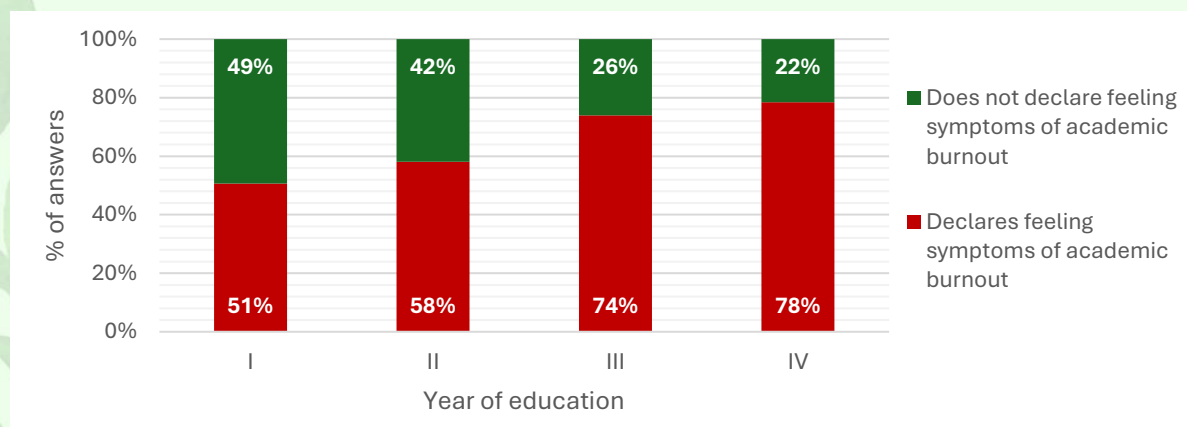
⁵ See e.g., M. Kraczkla, *Occupational burnout as an effect of long-term stress*, Scientific Papers of Humanitas University. Management 2013, No. 14(2), pp. 69-81.

Chart II.3. Percentage of doctoral candidates declaring experiencing symptoms of academic burnout.



More detailed analysis shows that the percentage of people declaring that they notice symptoms of occupational burnout in themselves increases with each subsequent year of education in the doctoral school. The smallest percentage of people declare experiencing such symptoms among those studying in the 1st year (51%), the most - in the period of extension of the deadline for submitting the doctoral dissertation (5th and 6th year of education in the doctoral school - over 80%). Detailed data in this regard is presented in Chart II.4 below.

Chart II.4. Percentage of doctoral candidates declaring experiencing symptoms of academic burnout broken down by year of education.



The high percentage of people declaring experiencing symptoms of occupational burnout is alarming, especially among people from the 1st year of education in the doctoral school. However, the increase of this percentage in subsequent higher years of education is not surprising. This indicates, however, the lack of systemic actions to counteract occupational burnout among people studying in doctoral schools. Particularly alarming is the high percentage of people declaring occupational burnout in the period of extension of the deadline for submission. In this case, however, it is difficult to unambiguously determine whether declaring symptoms of burnout is the result of prolonged work on the doctoral dissertation, or whether the extension of this work is the result of experiencing occupational burnout.

Using psychological support

A significant number of doctoral candidates participating in the study declare that they use psychological support outside the university or institute (87 affirmative responses, i.e., 27.62%). This is, however, less than in the general population. According to the results of a study conducted by the Institute of Psychology of the Polish Academy of Sciences, 38% of respondents declared that they used professional psychological support at least once in their lifetime⁶. A lower percentage of doctoral candidates using professional psychological support than in the general population may indicate significant barriers in access to psychological support. Barriers in access to psychological support in the entity operating the doctoral school were analyzed and described in the further part of the report.

Significant is also the number of respondents who declare that they receive psychiatric treatment for mood disorders or anxiety disorders (74 affirmative responses, i.e., 23.49%). According to the cited study of the Institute of Psychology of the Polish Academy of Sciences, 15% of respondents declared receiving a diagnosis of mental or psychiatric disorder, of which 55% (i.e., 8% of all respondents) received a diagnosis of anxiety disorders⁷.

Occurrence of crisis situations

The high level of stress, along with its consequences for respondents' health, also translates into the occurrence of crisis situations related to mental health, such as panic attacks, suicidal thoughts, deep emotional crisis, nervous breakdown, which require immediate help. 51% of respondents (161 people) indicated that they experienced such a crisis situation in the last 12 months; 42% (132 people) did not find such a case in themselves; the remaining 7% of respondents (22 people) refused to answer the question⁸. Such a result may indicate excessive psychological burden, lack of adequate institutional support and chronic stress related, among other things, to professional uncertainty, publication pressure and social isolation.

Psychological support for people experiencing crisis situations

As part of the study, we asked respondents who declared experiencing a mental health crisis in the last 12 months (N=161) about the psychological support available to them in these situations and the quality of support that was provided to them.

First, we asked respondents whether in a crisis situation they sought support from the entity operating their doctoral school. Only 15% of people (24 people) who experienced a crisis decided to seek support from the entity providing education. Of these, the majority, i.e., about 70% received help (17 people; i.e., 11% of all who experienced a mental health crisis in the last 12 months); 30% of those who sought help at the university or institute operating their doctoral school did not receive such support (7 people; 4% of all who experienced a crisis situation).

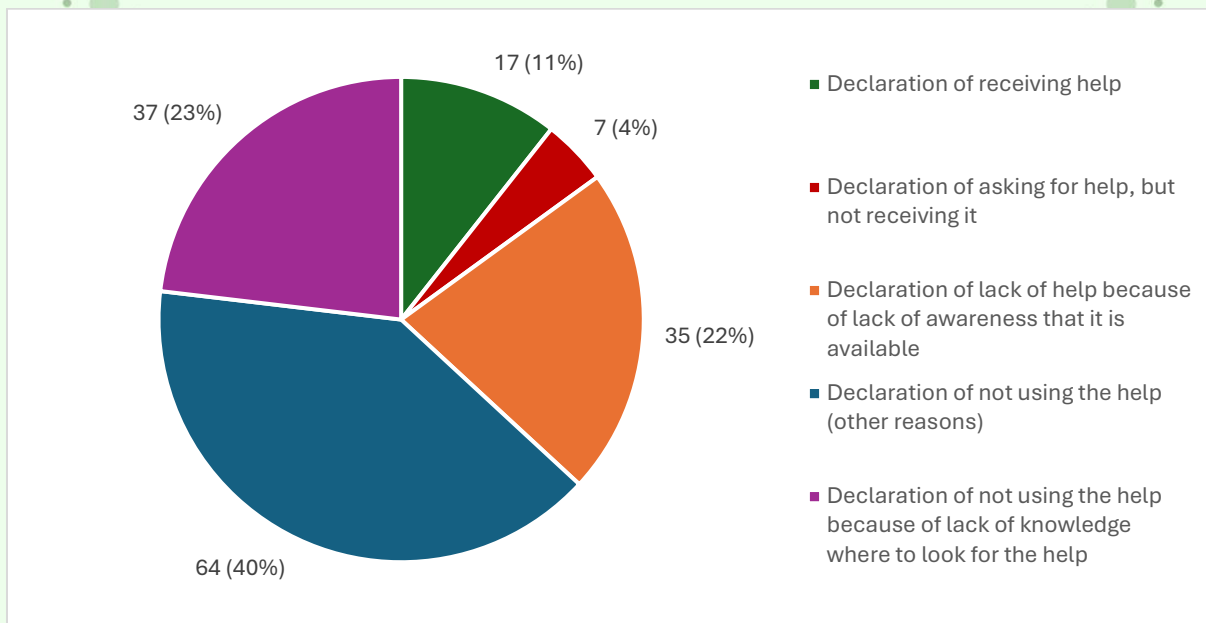
⁶ M. Marchlewska et al., *Dobrostan psychiczny w Polsce. Co myślimy o pomocy psychologicznej. Raport z badania ilościowego [Psychological well-being in Poland. What we think about psychological help. Report from quantitative research]*, Warsaw 2024, p. 43.

⁷ Ibid, pp. 32 – 33.

⁸ Taking into account only people who answered the question, 55% of respondents indicated that they experienced a mental health crisis in the last 12 months; 45% of respondents indicated that they did not experience such a situation.

Due to awareness of the lack of possibility of obtaining such help from their institution, 22% of respondents who declared experiencing a mental health crisis in the last 12 months (35 people) did not attempt such; 23% of these people (37 people) did not know where to look for such support. As many as 40% of respondents (64 people) indicated that they did not try to seek help for other reasons.

Chart II.5. Seeking psychological support in conditions of mental health crisis.

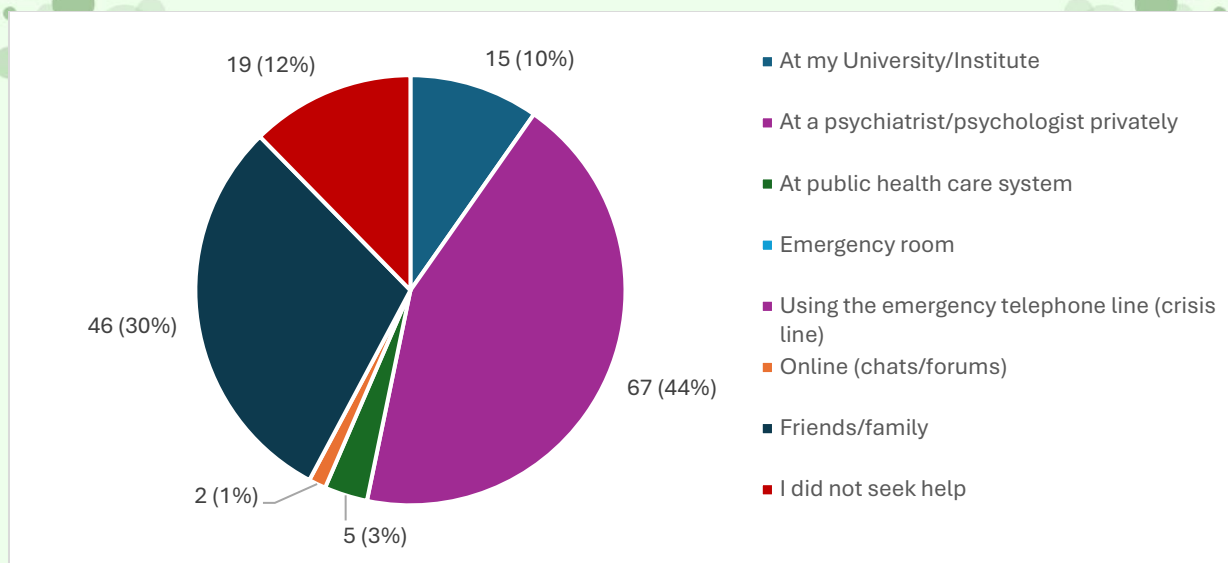


Based on the above data, it can be seen that doctoral candidates who sought support from entities where they receive education generally received such help. It can therefore be concluded that in cases where the university or institute offers crisis support, it is generally of good quality. At the same time, taking into account the relatively large percentage of responses in which respondents indicated lack of awareness of where they could obtain psychological support, it is reasonable to strive to expand knowledge about available sources of help, both by entities providing education, doctoral student governments, and KRD.

Where did doctoral candidates who were going through a more psychologically demanding period seek help? The path of private consultations with a psychologist or psychiatrist as the main source of support was chosen by 44% of people (67 respondents), and only 3% (5 respondents) used the services of specialists from the public health care system. 30% of respondents who experienced a mental health crisis in the last 12 months (46 people) used help from family or friends, and 10% of respondents (15 people) indicated their university/institute as a place where they sought support in a crisis situation. 12% of respondents of doctoral candidates who went through a mental crisis in the last 12 months (19 people) did not seek any support, while no one indicated that they used help at the emergency room/emergency department or from a crisis telephone line.



Chart II.6. Place of seeking help by respondents who experienced a crisis situation in the last 12 months.



When assessing the help received in a crisis situation, more than half of the respondents assessed it as good or very good (40 respondents, i.e., 25% assessed it as very good; 50 respondents, i.e., 31% as good). 37 respondents (23%) assessed the obtained help as average; 7 people (4%) as bad and 5 people (3%) as very bad. Particularly alarming is that 22 people (14%) did not receive help in conditions of experiencing a mental health crisis.

Regarding long-term support after the occurrence of a crisis situation, 30% of respondents (49 people) indicated that they received appropriate and fully sufficient long-term support, while 21% of respondents (33 people) stated that the long-term support they received was insufficient. As many as 30% of respondents (48 people) did not receive long-term help, although they believe they needed it. Among people who experienced a mental health crisis in the last 12 months, 19% (31 people) stated that they did not receive long-term help and did not need it.



III. Availability of psychological support



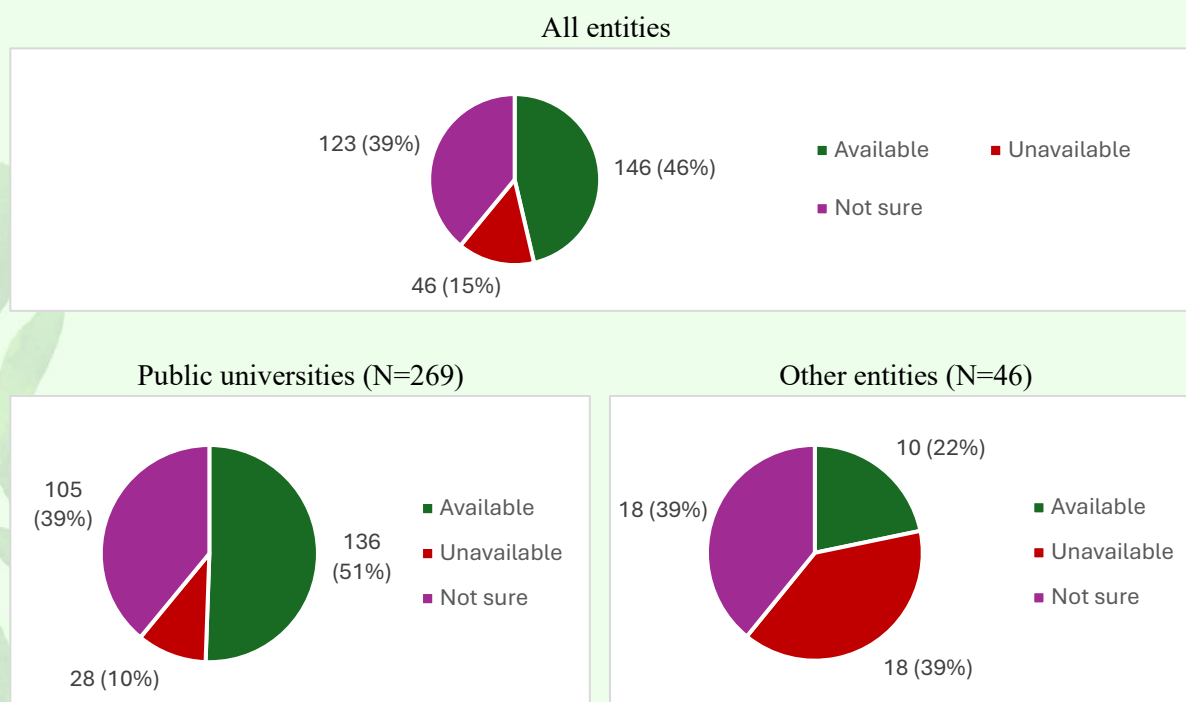
A key element of this study was obtaining information and opinions from doctoral candidates related to the availability and quality of institutional support provided in entities operating doctoral schools.

Availability of general psychological support

First, we asked respondents whether the entity where they receive doctoral education offers psychological support for doctoral candidates. 146 people (46.3% of the total) indicated yes, 46 people (14.6% of the total) indicated no. The remaining respondents (123 people, 39%) could not give a clear answer to this question. Such a high percentage may indicate that information about the availability of psychological support is difficult to access or that these people did not have knowledge about the availability of such help because it is not provided, but they did not have 100% certainty in this regard.

Interesting information is provided by looking at the data broken down by public universities and other entities operating doctoral schools. In the case of people studying at public universities (N=269), 136 respondents (50.6%) indicated that the entity where they study offers psychological support; 28 people (10.4%) indicated that psychological support is not offered, and 105 people (39%) declared lack of knowledge in this regard. In the case of people who receive education in a doctoral school in another type of entity⁹ (N=46), 10 of them indicated that the entity operating the doctoral school offers psychological support (21.7%), 18 people - that it does not offer psychological support (39.1%). Another 18 people (39.1%) indicated that they have no knowledge on this topic.

Chart III.1. Availability of psychological support in entities operating doctoral schools.



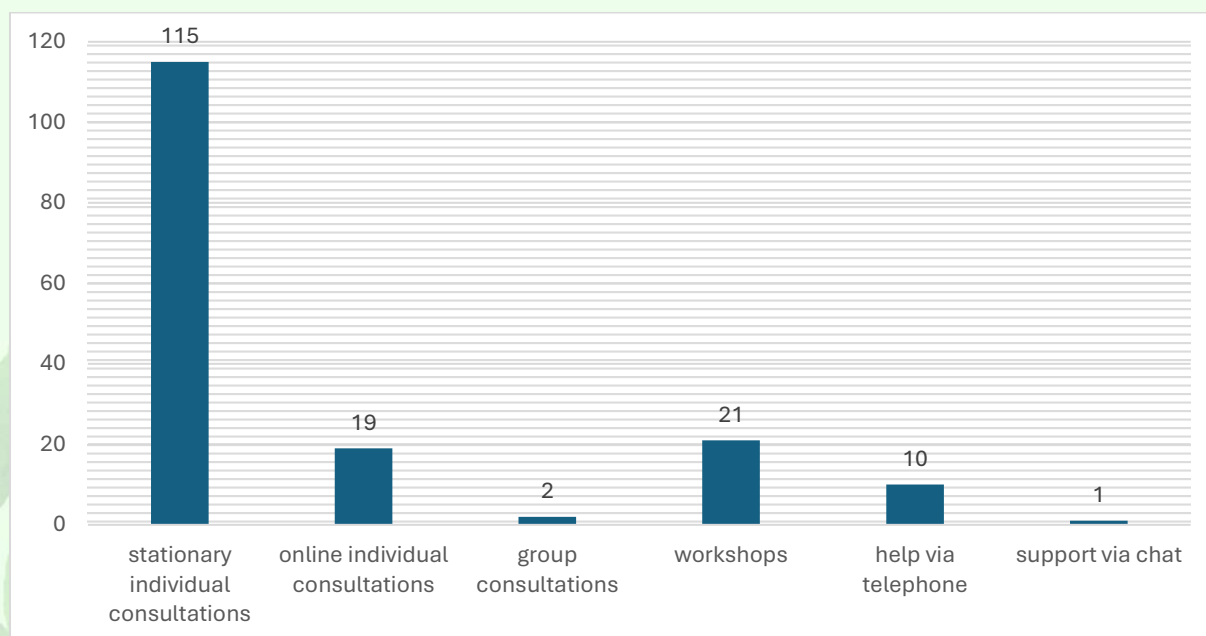
⁹ Private university, institute of the Polish Academy of Sciences, research institute or international institute.

We asked people who indicated that psychological support is provided in their university or institute (N=146) about the availability of information about it, forms of psychological support and use of this help.

Most respondents indicate that information about psychological support provided in their universities/institutes is definitely easily accessible (18 people; 12.3%) or rather easily accessible (77 people; 52.7%). 33 people indicated that information about psychological support provided in their institute/university is rather not easily accessible (22.6%) and 9 people - that it is definitely not easily accessible (6%). The same number of people indicated that they have no opinion about the availability of psychological support in the entity where they receive doctoral education.

Doctoral candidates who answered that psychological support for people during the doctorate is offered in their universities/institutes most often indicated that the form of discussed help in these entities is individual on-site consultations (93% of respondents indicated this option). 17% of respondents indicated workshops on mental health, and 15% of respondents - individual online consultations¹⁰. Detailed data in this regard is presented in Chart III.2.

Chart III.2. Forms of psychological support provided in entities operating doctoral schools.



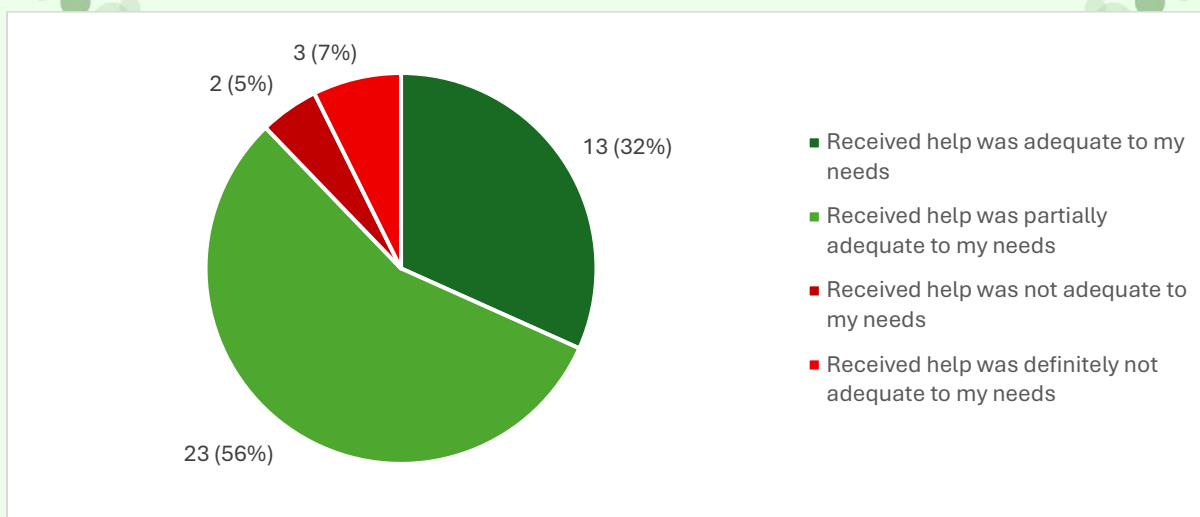
Next, we asked respondents whether they used psychological support offered in the entity where they receive education. 41 people (28% of people responding to the question, 13% of all respondents) indicated that they used such help. 105 people (72% of respondents) indicated that they did not use help in the entity where they receive education.

People who used psychological support provided in the entity where they receive education in the doctoral school (N=41) were asked to assess the quality of received help and its adequacy in relation to needs. Most respondents assessed the quality of received help very well (12 responses; 29%) or well (18 responses; 44%). 8 respondents (19.5%) assessed the received help as average, 1 as bad (2.5%) and 2 people as very bad (5%).

¹⁰ Data do not sum to 100%, as respondents could indicate more than one response option.

Regarding the adequacy of help to needs, most people responding to this question indicated that the psychological help they received in the entity operating the doctoral school fully responded to their needs (13 responses; 31.7%) or partially responded to their needs (23 responses; 56%). The remaining people indicated that the help rather did not respond to their needs (2 responses; 5%) and definitely did not respond to their needs (3 responses; 7.3%).

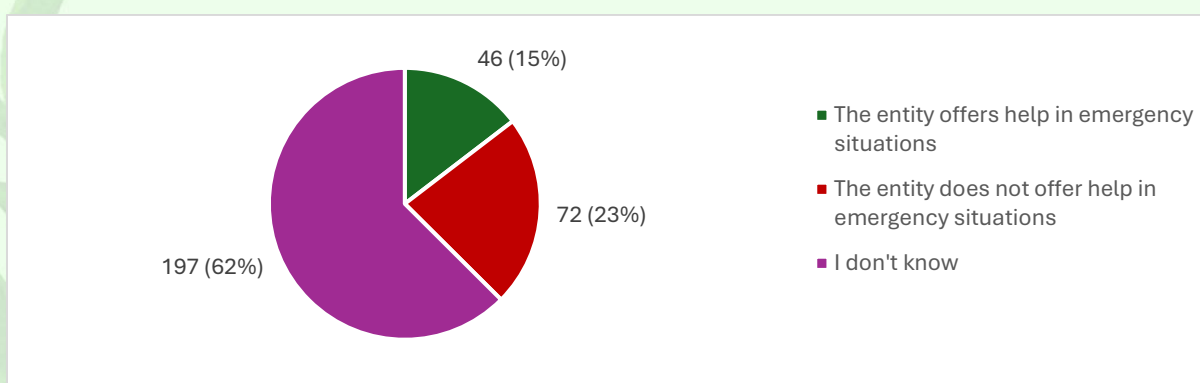
Chart III.3. Adequacy of received psychological support in relation to needs.



Availability of urgent and emergency help

Regarding the availability of urgent and emergency psychological support in crisis situations, 15% of respondents (46 people) indicated that such a form of help is available in their university/institute. 23% of respondents answered that such help is not available (72 people), and as many as 62% of respondents (197 people) indicated that they do not know about the availability of such a form of psychological support provided by their university/institute.

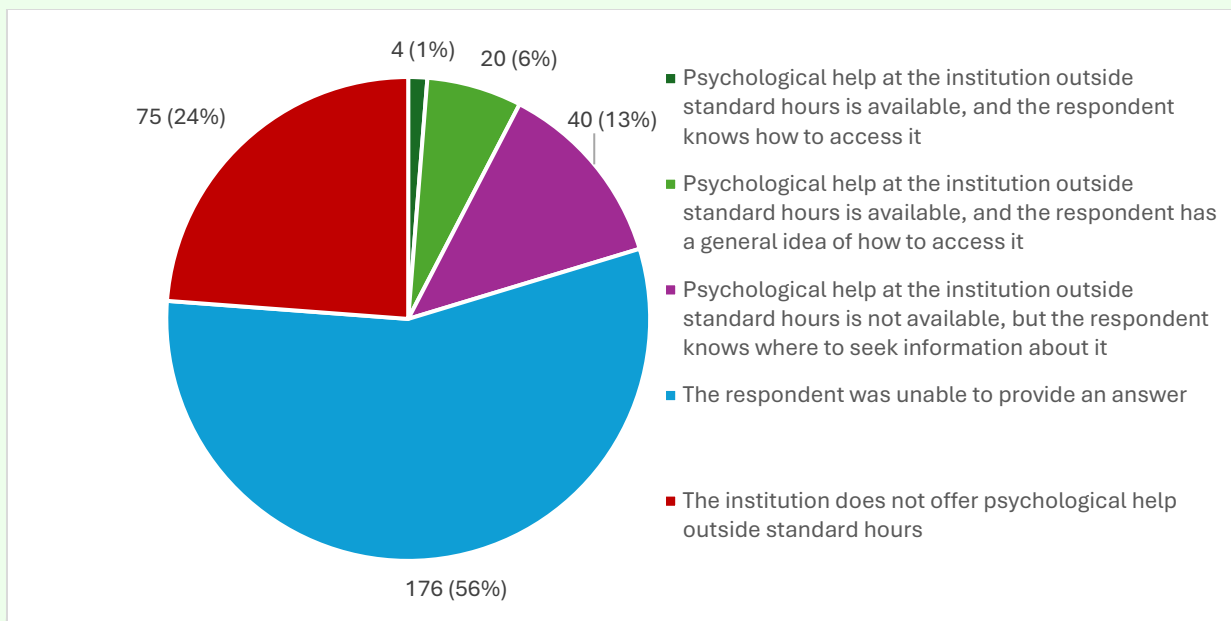
Chart III.4. Offering psychological support in emergency situations (crisis intervention) by entities operating doctoral schools.



Doctoral candidates were asked whether the entity where they receive doctoral education offers a 24-hour psychological support line. Only 5 people (1.6%) indicated that such a line functions in their entity; 148 people (47%) indicated that such a line does not function in their entity, and 162 people (51.4%) chose the answer "I don't know."

Respondents were also asked whether they know how to obtain psychological support in their university/institute outside standard working hours (evenings, nights, weekends). Only 4 people (1.3% of respondents) indicated that they know exactly how to obtain such help offered by the entity where they study; another 20 people (6.3%) indicated that they have a general idea of how to obtain such support. More than half of the respondents (176 people, i.e., 55.8%) admitted that they have no idea how to obtain such non-standard support, and 75 people (23.8%) indicated that the entity operating the doctoral school does not offer psychological support during non-standard hours.

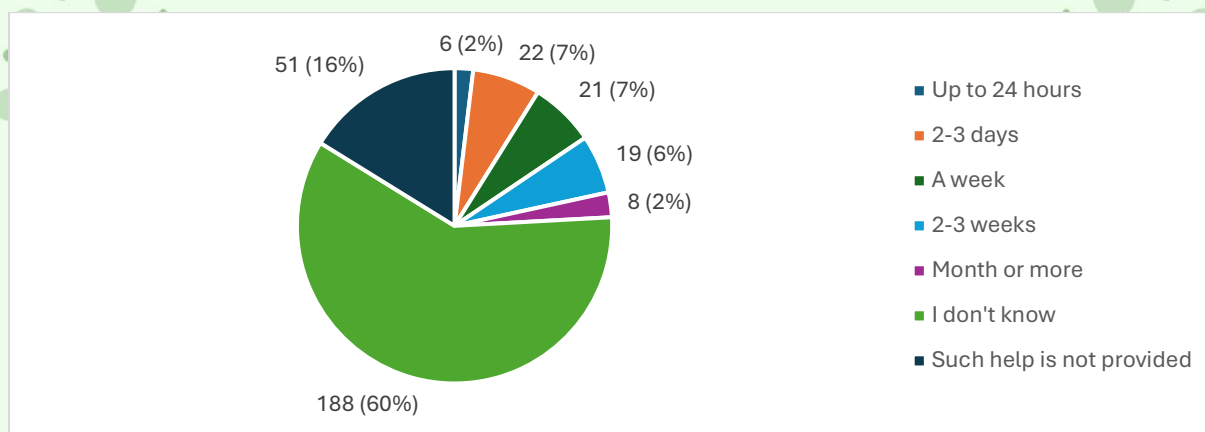
Chart III.5. Awareness of information about access to urgent and emergency psychological support provided in the entity operating the doctoral school.



Crisis situations in the psychological dimension have the characteristic that they can appear suddenly. In such situations, providing "first aid" psychological shortly after the occurrence of a crisis situation can be crucial for limiting the negative effects of a mental health crisis. In connection with this, we asked doctoral candidates how long - in their opinion - they would have to wait for urgent psychological help in the entity where they receive education. Most respondents (188 people; 59.7%) could not estimate the waiting time for such help; meanwhile, 51 people (16.2%) indicated that such help is not provided. Among those who indicated an estimated waiting time for help, only 6 people (1.9% of all respondents) indicated that the waiting time - in their opinion - would be shorter than 24 hours. 22 people (7%) indicated that the waiting time would be about 2-3 days, 21 people (6.7%) that about a week, 19 people (6%) that about 2-3 weeks, and 8 people (2.5%) that the waiting time exceeds a week.



Chart III.6. Estimated waiting time for urgent psychological help.

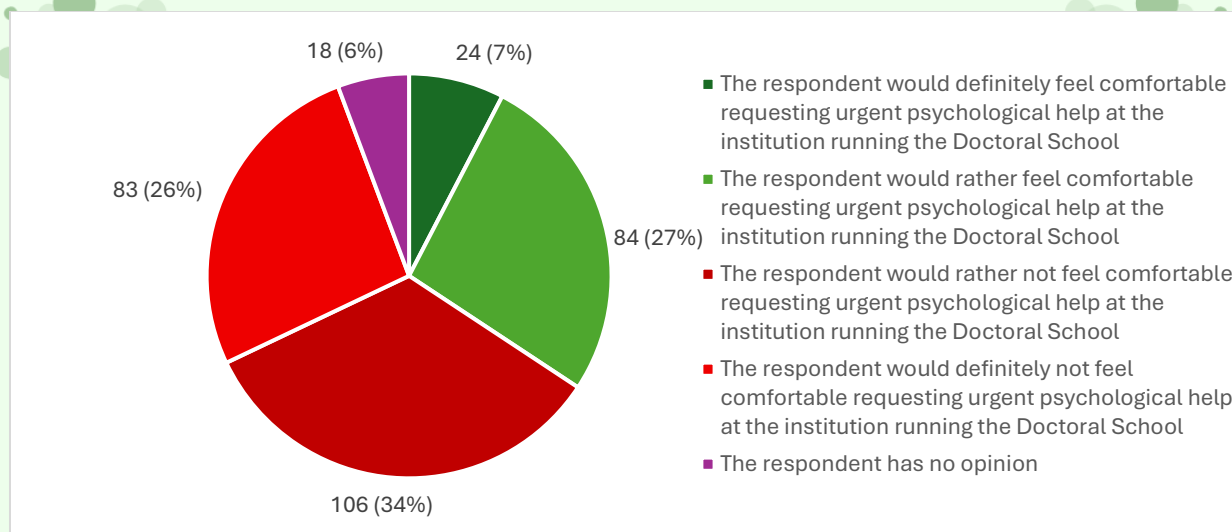


Few people indicate that they have knowledge about the existence of procedures for dealing with a mental crisis of a doctoral candidate. Among respondents, 198 people (62.9%) indicated that they do not know whether such procedures exist in the entity where they receive education. 86 people (27.3%) indicated that there are definitely no such procedures. Only 5 respondents (1.6%) indicated that such procedures exist in their entities and are well communicated, and another 26 people (8.3%) indicated that appropriate procedures exist but are not well communicated.

Respondents were asked to indicate whether they would feel comfortable asking for urgent psychological help in the entity where they receive education. The answer to this question may be important for proper design of the psychological support system for doctoral candidates. As the study results showed, presented in earlier chapters, doctoral school education is associated with a high level of stress, which can lead to both short-term mental crises and the development of mental disorders or illnesses (e.g., burnout, anxiety disorders, depression). Among all respondents, about 1/3 would feel comfortable asking for urgent psychological help at their university or institute (definitely yes: 24 people, 7.6%; rather yes: 84 people, 26.7%). About 2/3 of doctoral candidates would feel uncomfortable asking for urgent psychological help at the university or institute (definitely no: 83 people, 26.3%; rather no: 106 people, 33.7%). 18 people (5.7%) indicated that they have no opinion on this topic.

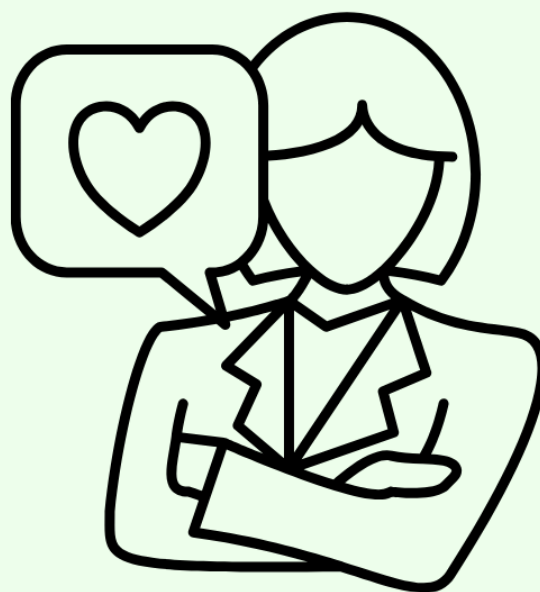


Chart III.7. Feeling of comfort in connection with seeking urgent psychological help in the entity operating the doctoral school.



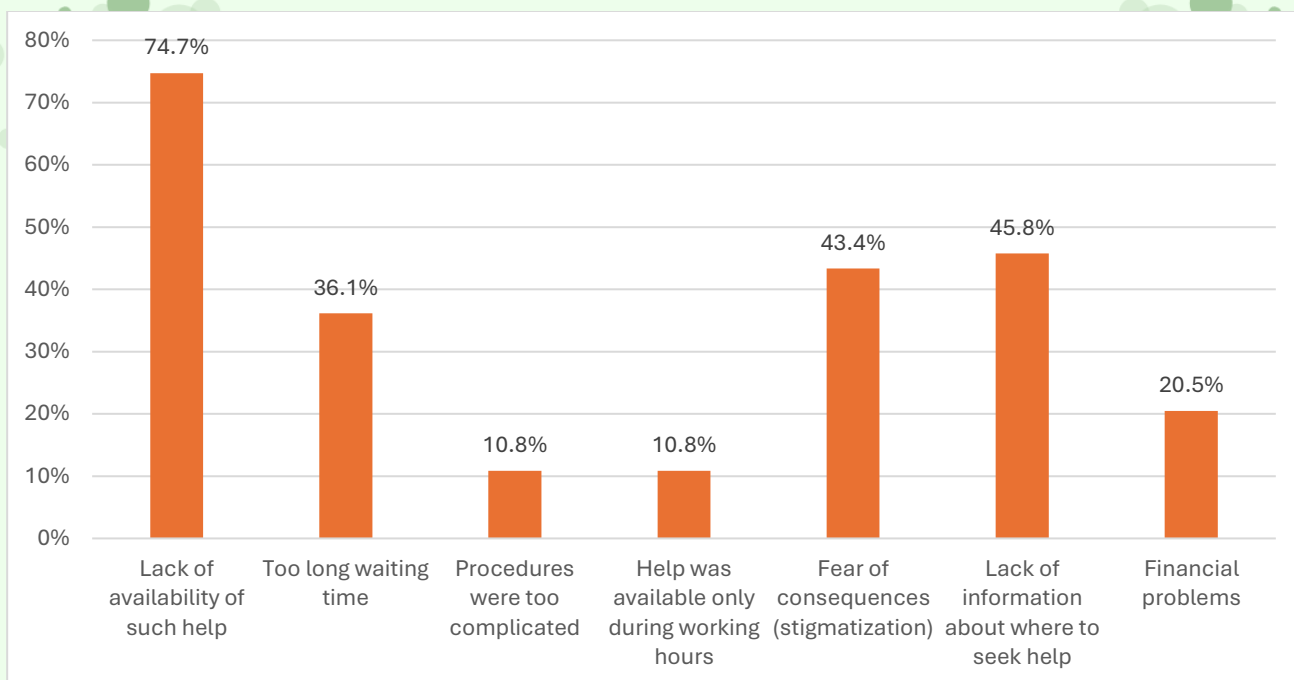
Respondents were asked to indicate whether they ever needed psychological help urgently but could not obtain it at the university or institute where they receive education. 83 people (26.3%) indicated that they were in such a situation; 232 people (73.7%) indicated that they were not.

People who, despite the need, did not receive urgent or emergency help at the university or institute where they receive education (N=83) were asked to indicate the main reason(s) that prevented them from obtaining help. The responses of respondents are presented in Chart III.8¹¹.



¹¹ Respondents could choose more than one response option; hence percentages do not sum to 100%.

Chart III.8. Reasons for not receiving urgent and emergency help in entities operating doctoral schools.



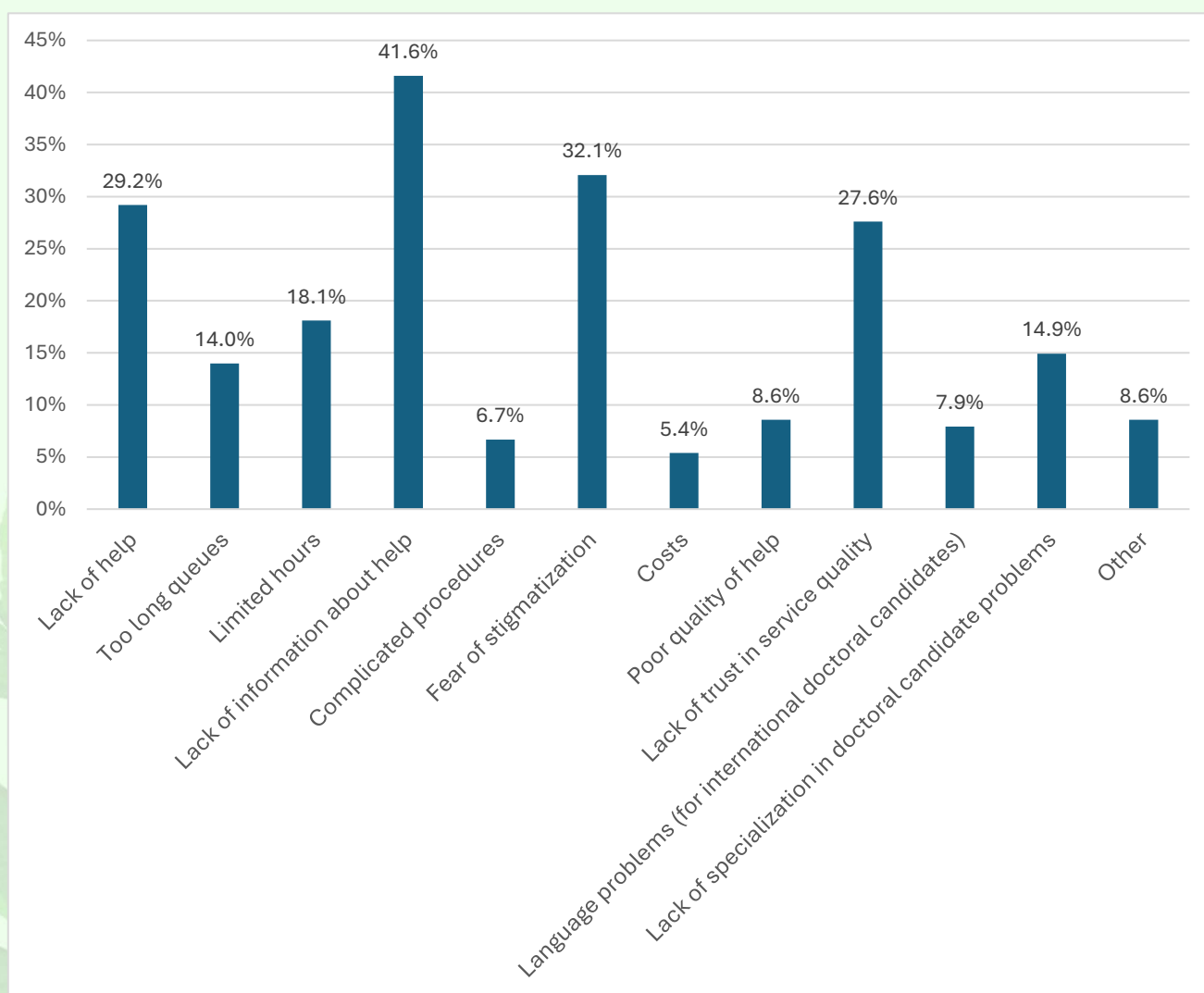
The above highlights some of the difficulties related to functioning in entities operating doctoral schools. On the one hand, doctoral candidates do not feel comfortable signalling the need for mental support, so from the institution's perspective, the problem is unnoticeable. Therefore, insufficient pressure is exerted to implement systemic solutions. On the other hand, pro-doctoral initiatives of institutions are often unnoticed by the doctoral candidates themselves. It might therefore seem that if the problem or solution is not visible, then they do not exist. However, this only emphasizes the broad scope of the phenomenon and lack of transparency.



IV. Barriers and needs

Implementation of systemic solutions should be preceded by recognition of the weak points of current psychological support procedures for people in need. We asked doctoral candidates about the greatest barriers they perceive in access to quick psychological help in their universities/institutes¹². Over 40% of respondents indicated lack of information about available help, and 29% indicated its absence, which may result from both objective lack of such help, objective communication failures or individual ignorance of doctoral candidates. It should also be remembered that someone who has never sought help may not be aware of its existence. 32.1% indicated fear of stigmatization, and 27.6% have no trust in the quality of services available in entities where they receive education. Two issues conditioning psychological support for doctoral candidates continue to be evident. First, doctoral candidates do not perceive solutions that their universities/institutes could provide or provide in the field of psychological care. Second, doctoral candidates express doubts about the quality of possible support and its confidentiality.

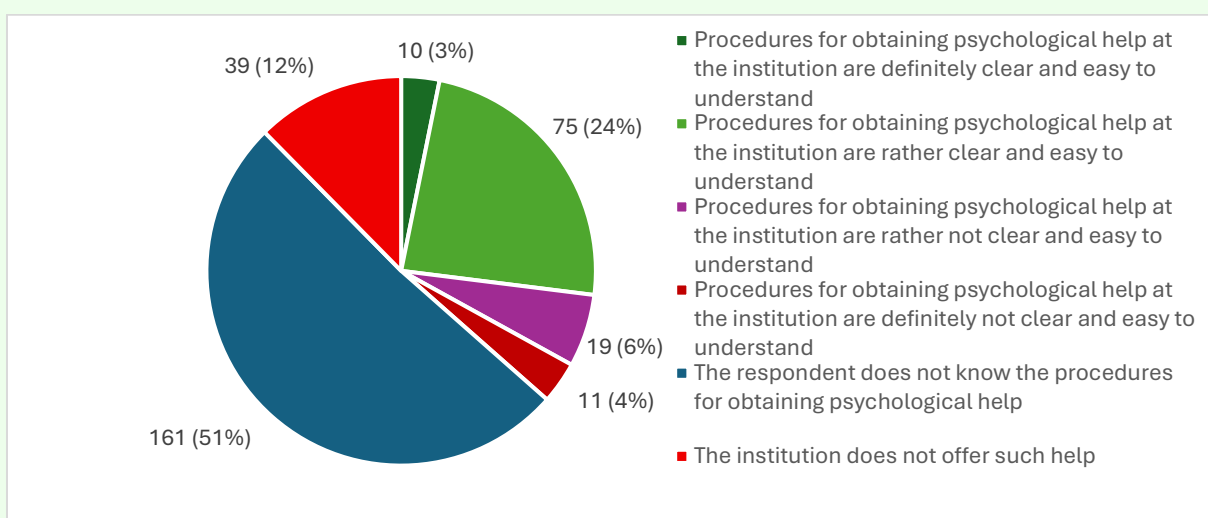
Chart IV.1. Barriers to access to quick psychological help in the entity operating the doctoral school.



¹² When answering the question, respondents could indicate more than 1 response option, hence percentages do not sum to 100%

Another issue we addressed in the study was the clarity and ease of understanding procedures for accessing psychological help at the university or institute. Most respondents (151 people; 51.1%) indicated that they do not know the applicable procedures. 39 people (12.4%) indicated that the entity where they receive doctoral education does not offer psychological help. 10 respondents (3.2%) indicated that the existing procedures in their entities are definitely clear and easy to understand; 75 people - that the procedures are rather clear and easy to understand (23.8%). 19 people indicated that the procedures are rather not clear and easy to understand (6%) and 11 - that they are definitely not clear and easy to understand (3.5%).

Chart IV.2. Clarity and ease of understanding procedures for obtaining psychological help applicable in entities operating doctoral schools.



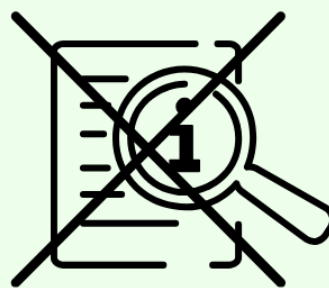
Respondents were also asked whether the current psychological support system for doctoral candidates in their university/institute is sufficient. 11 people (3.5%) considered it definitely sufficient, 21 people (6.7%) considered it rather sufficient. 89 respondents (28.2%) considered the psychological support system in the entity operating the doctoral school rather insufficient, and 84 people (26.7%) considered it definitely insufficient. 110 people (34.9%) indicated that they have no opinion - which may result from lack of knowledge about such a system.

It is significant that 63% of surveyed doctoral candidates (197 people) have ever considered using psychological help, but ultimately changed their minds, while 37% (118 people) did not consider using such support. This indicates that the majority of respondents perceived some internal difficulty that they could not - at least for some time - resolve.

We asked respondents who, despite considering using psychological help offered by the entity operating the doctoral school, did not decide on such action (N=197) to indicate the reasons for resignation¹³. Most often, respondents indicated that they decided to solve problems independently (43.7% of indications). 38.1% indicated lack of trust in the quality of provided help, and 36% indicated lack of time. Meanwhile, in 35.5% of cases, a response referring to costs as a reason was also given. 31.5% indicated lack of information about the possibility of obtaining appropriate psychological support. Fear of stigmatization was indicated by 30.5% of respondents. As many as 23.9% believed that using such help could somehow negatively affect the evaluation of their work.

¹³ When answering the question, respondents could indicate more than 1 response option, hence percentages do not sum to 100%.

Chart IV.3. Reasons for resignation from seeking psychological help in the entity operating the doctoral school.



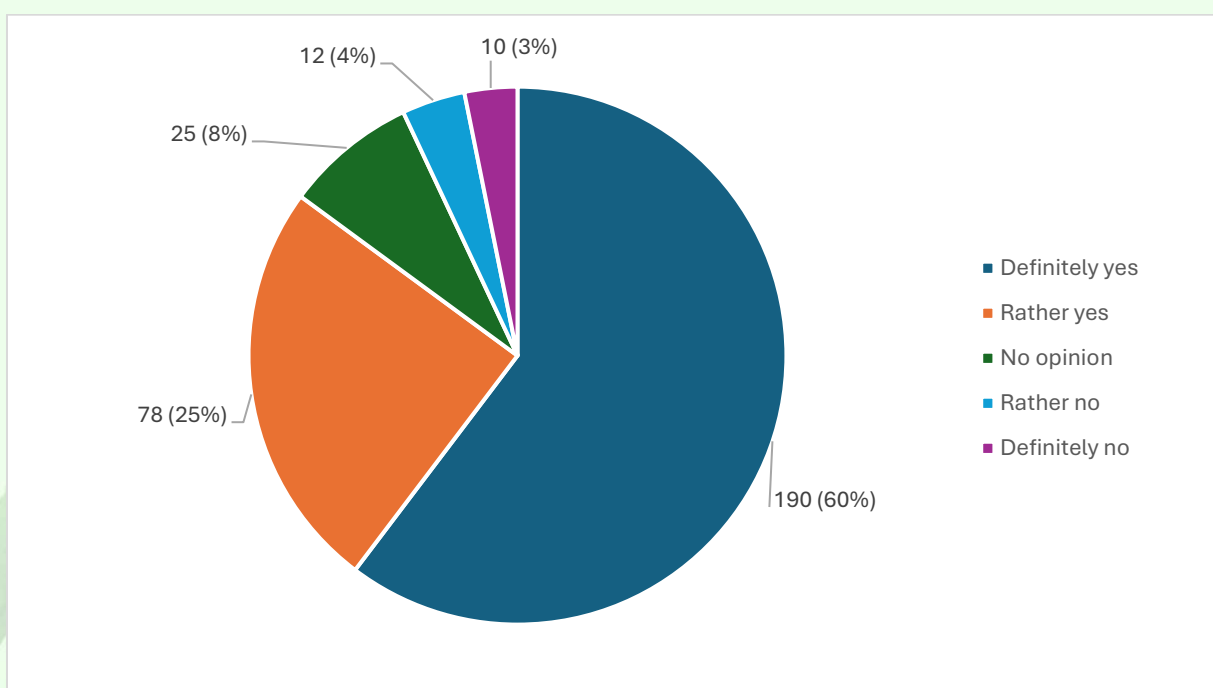
V. Expectations of doctoral candidates



The last part of the study was devoted to the expectations of doctoral candidates regarding how the psychological support system should look in the entity where they receive education. We wanted to check whether doctoral candidates expect psychological help from the entity where they receive education and how such a support system should look.

The vast majority of respondents indicate that, in their opinion, providing psychological help should be the obligation of every entity operating a doctoral school. To the question concerning this, 190 people (60.3%) answered definitely yes, while 78 people (24.8%) answered rather yes. 12 people (3.8%) indicated that they rather do not think that it is the obligation of the entity operating the doctoral school to provide psychological help, while 10 respondents (3.2%) definitely do not think so. 25 people (7.9%) indicated that they have no opinion on this topic.

Chart V.1. Opinion of respondents regarding whether providing psychological care should be the obligation of the entity operating the doctoral school.

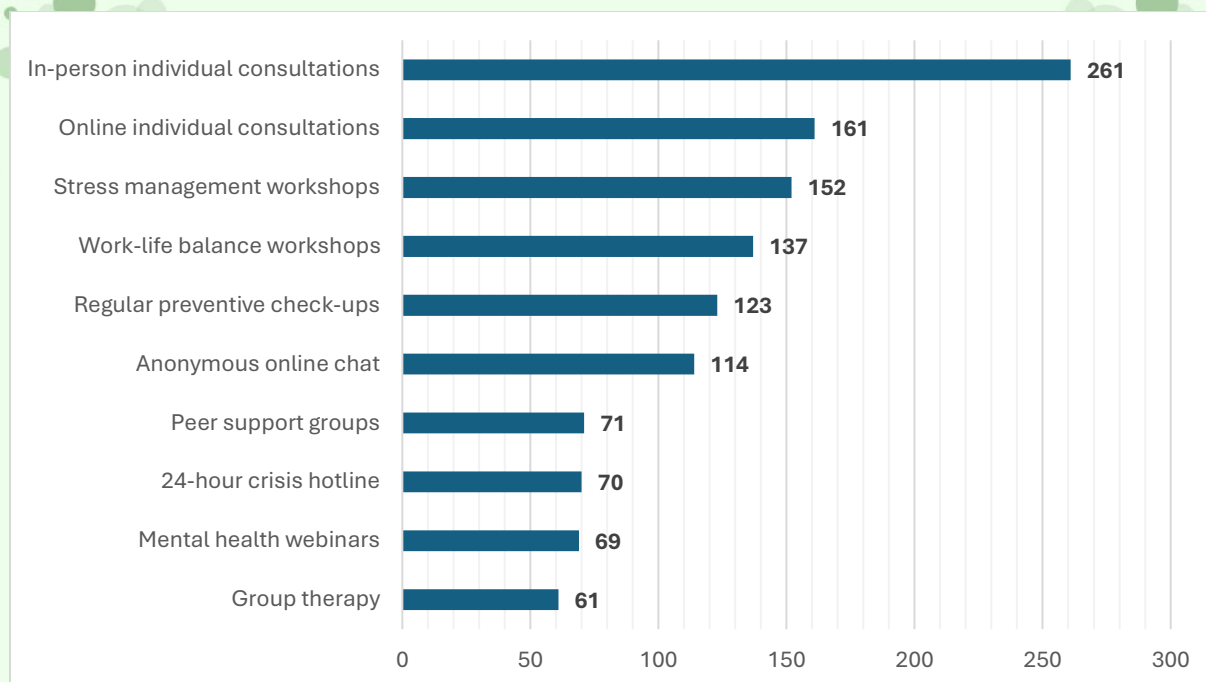


Surveyed doctoral candidates also indicate that entities operating doctoral schools should employ psychologists who specialize in working with doctoral candidates. Such a position is definitely supported by 181 respondents (57.5%) and rather supported by 82 people (25.9%). 11 people (3.5%) rather do not share the view that universities/institutes should employ psychologists specializing in working with doctoral candidates, and 9 people (2.9%) definitely do not share this view. Among respondents, 32 people (10.2%) have no opinion on this topic.

Regarding forms of support, respondents most often indicated that, in their opinion, the most desired form of support would be individual consultations conducted in on-site form (261 indications; 82.9%)¹⁴. Subsequently, respondents indicated as desired forms of providing psychological help: individual online consultations (161 indications; 51.1%), workshops on stress management (152 indications; 48.3%) and workshops on so-called *work-life balance* (137 indications; 43.5%). The detailed indications of respondents are presented in Chart V.2.

¹⁴ When answering the question, respondents could indicate more than 1 response option, hence percentages do not sum to 100%.

Chart V.2. Forms of psychological support expected by doctoral candidates to be provided by the entity operating the doctoral school.

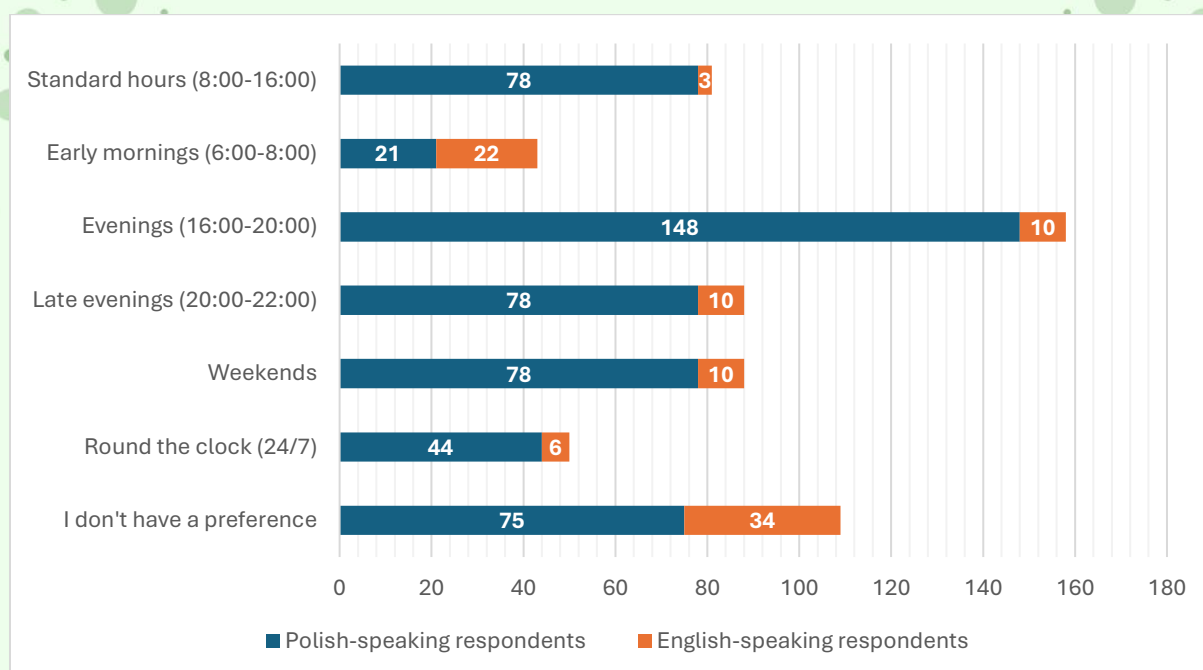


Doctoral candidates were also asked about the hours in which psychological help would be most accessible to them. In this regard, significant differences were revealed between people who filled out the research form in Polish and in English. Among the first group, the most people, 148, indicated that help provided in afternoon-evening hours (between 4:00 PM and 8:00 PM) would be most accessible, while people who filled out the questionnaire in English most often indicated that it is indifferent to them what hours the help will be available (34 indications, i.e., all who filled out the questionnaire in English). This may indicate two phenomena:

- 1) non-Polish-speaking doctoral candidates, unlike their colleagues who use Polish, do not undertake other professional activities besides preparing their doctoral dissertation - scientific work allows for greater flexibility in planning commitments than, e.g., work provided on the basis of employment relationship.
- 2) doctoral candidates not using Polish have a greater need for access to psychological help provided by the entity operating the doctoral school and therefore - are more willing to accept it at any time.

Detailed results of responses to the question about the hours in which psychological help would be most accessible to respondents are presented in Chart V.3 below.

Chart V.3. Hours in which psychological help would be most accessible to respondents.



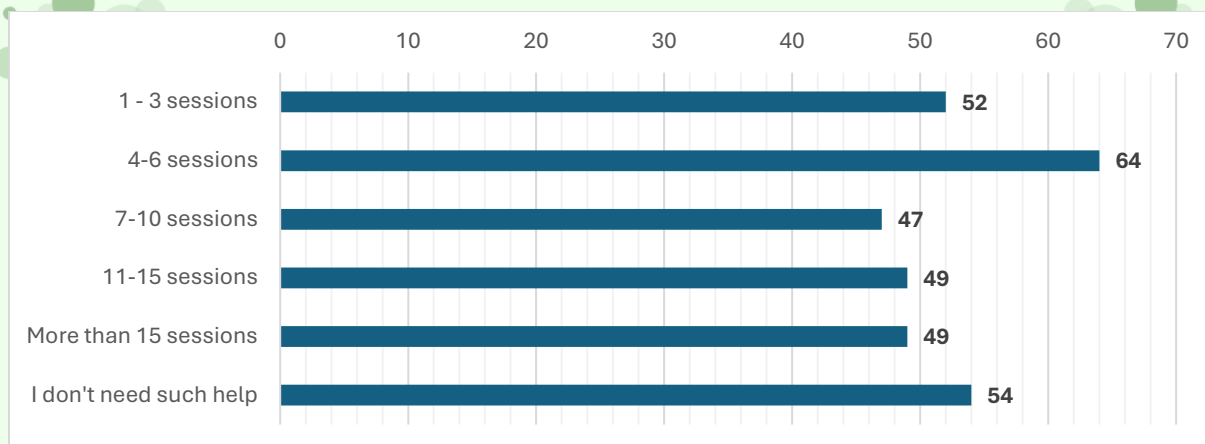
We also asked whether respondents would expect the possibility of anonymous contact with a psychologist. Most respondents would like such a possibility (definitely yes: 114 people, 39.2%; rather yes: 89 people, 28.2%). The answer to this question is consistent with the concerns expressed by respondents regarding the confidentiality of provided psychological support¹⁵. 72 respondents (22.9%) have no opinion on this matter, and the rest - rather would not want to have the possibility of using psychological help anonymously (definitely no: 11 people, 3.5%; rather no: 29 people, 9.2%).

In the context of access to psychological or psychotherapeutic sessions, respondents were asked to indicate the maximum number of free sessions they would need in a year. The distribution of responses to this question is quite even, without a clear dominant, which is presented in Chart V.4 below.



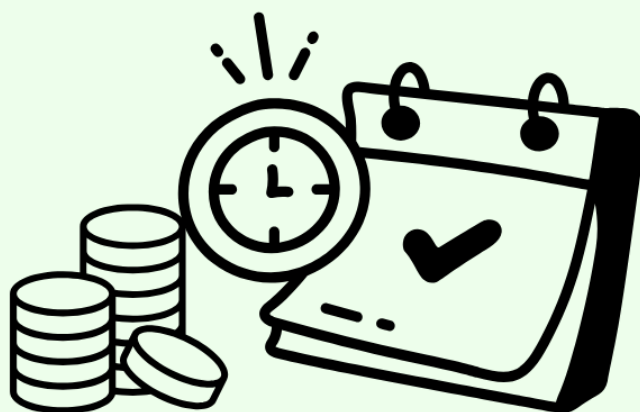
¹⁵ According to Article 14 paragraph 1 of the Act of June 8, 2001, on the profession of psychologist and professional self-government of psychologists (Journal of Laws of 2019, item 1026), a psychologist has the obligation to keep confidential information related to the client, obtained in connection with performing the profession. However, in a situation where the organizer of psychological help is the entity operating the doctoral school, the very information about using psychological help may be disclosed, e.g., to representatives of the entity's administration.

Chart V.4. Indication of the number of free therapeutic sessions that respondents would need in a year.



Most respondents are also convinced that psychological help provided in the entity operating the doctoral school should be free of charge. However, respondents differ on whether such help should be completely free - 112 people (35.6%) indicated this - or free with a limitation on the number of sessions that one person can use (121 indications, 38.4%). 49 people (15.6%) stated that a doctoral candidate should partially bear the cost of psychological help; 6 people (1.9%) indicated that such help should be fully paid. 27 people (8.6%) have no opinion.

Attention is drawn to the relatively high percentage of people who indicate that free psychological help should be limited in terms of the number of sessions available to one person. This attitude may result from concerns about the availability of help for other people if one person would be able to use a significant number of sessions. This may also indicate concern that the psychological support system will become too expensive and limit access to other resources (e.g., funds for scientific research) or will be completely eliminated in connection with the need to provide funds for other aspects of university or institute functioning. Such a perspective does not take into account the needs of people experiencing psychological difficulties and the fact that in case of lack of possibility to continue psychological help due to exhaustion of a predetermined limit, the previously provided support may prove ineffective or not as effective as it could be. This raises justified doubts from the point of view of effectiveness of spending public funds on psychological help.





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Appendix:
Research Questionnaire

