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Caring for the Whole Self: Analyzing the Relationship Between Graduate Students' Involvement on Campus and the Onset of Imposter Syndrome

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Caring for the Whole Self: Analyzing the Relationship Between
Graduate Students' Involvement on Campus and the Onset of Imposter Syndrome

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May 2020

Abstract

The purpose of this study was to enhance the current understanding of Imposter Syndrome in the context of student involvement on campus, specifically the University of San Diego's (USD) graduate student population in an effort to better understand how higher education institutions can support students' growing mental health concerns and take action to add or adjust current resources to benefit those who may need it. The research question that guided this inquiry was if a graduate student's level of involvement on campus affects one's mental health, specifically, the onset and prevalence of Imposter Syndrome? My findings suggest that there is a slight correlation between the level of student involvement and the severity to which this mental health issue is prevalent. By focusing on this prevalent issue through the lens of Higher Education, I was able to connect developmental and psychological theories together to guide the work that I would do in my personal and professional life.

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Caring for the Whole Self: Analyzing the Relationship Between
Graduate Students' Involvement on Campus and the Onset of Imposter Syndrome

Before I began conducting research on my aforementioned topic, I had to first identify some of the values that I carry with me. These values include empathy, compassion, creativity, and inclusivity, all of which have played a large part in my development of an aspiring higher education professional, graduate student, and creative worker. Through these roles, and in talking with other members of the campus community, I have been able to meet many graduate students at the University of San Diego across the many programs that the school offered. In talking with this population of students, there seem to be two recurring patterns of thought that exist for many graduate students across a variety of programs and levels of involvement around campus: 1) "I don't feel like I am good enough" and 2) "I feel like I don't belong in this program."

It can be argued that, as an individual who has found themselves to be in a top-ranking graduate program, they should not feel the way they do or that they should feel grateful for being in a position that others would envy. Unfortunately, attempting to approach the problem in this way only compounds the feelings of Imposter Syndrome (also known as Imposter Phenomenon, IP, or IS for short) and sets up a scenario in which an individual's personal feelings and emotional needs are perceived to be invalidated. Imposter Syndrome, which is prevalent in many different career and academic fields, is particularly present in the lives of graduate students across a variety of disciplines.

While the focus of my research revolves heavily around Imposter Syndrome, a lot of the sentiments and data presented in this paper reflect a much larger issue: the mental health crisis that is currently gripping students across college campuses. Guided primarily by my core values and remaining conscious of my role as an aspiring higher education professional, I believe more

can be done to address the rising concerns of mental health issues in universities that see more members of the campus community taking part rather than relying solely on a Student Wellness Center to take on this daunting task.

Background

My action research is oriented around student involvement at the graduate level rather than at the undergraduate level, in which students are pursuing either a Master's or Doctorate degree in areas of study that are more specialized. At this level of academia, it is suggested that the prevalence of Imposter Syndrome and other mental health disorders appears more frequently in graduate students in comparison to their undergraduate counterparts due to a number of factors, including close working proximity to faculty and the cohesiveness of students in a cohort (Barreira, Basilico, & Bolotnyy 2018). However, this is not to say that the level of education one pursues is the deciding factor in whether or not an individual will experience this psychological phenomenon. Other factors, including one's gender, cultural background, and familial dynamics have all been cited as playing a role in the onset of Imposter Syndrome (Ewing, Richardson, & James-Meyer, 1996).

Despite the aforementioned factors playing a role in the onset of Imposter Syndrome, this action research project is primarily interested in contributing to the current literature on graduate student involvement and its effects on mental health in students. This is not to say that the factors mentioned are "not as valid" as one's involvement level in graduate school. To be cognizant of a student's entire experience, we have to also acknowledge that many different factors are at play and taking a holistic approach would provide the most in-depth and accurate explanation into who is most susceptible to Imposter Syndrome. Unfortunately, due to limitations in resources

and time, this action research project was focused primarily on the effects of high and low student involvement as a contributing factor.

What is Imposter Syndrome?

First coined by psychologists Dr. Pauline R. Clance and Dr. Suzanne A. Imes in their 1987 article titled “The Imposter Phenomenon in High Achieving Women: Dynamics and Therapeutic Intervention,” the research team described individuals who have faced Imposter Syndrome as having a wide range of symptoms that do not fall into a set diagnosis but instead as having generalized anxiety, depression, a lack of self-confidence, and a sense of frustration with oneself as a result of not being able to meet self-imposed standards (Clance & Imes, 1987). Though Clance and Imes (1987) primarily studied female subjects and suggested that Imposter Syndrome was more prevalent in females and “men who appear to be more in touch with their ‘feminine side’” (p. 242), later research has proven that these psychological patterns are equally prevalent across men and women (Cozzarelli & Major, 1990).

Since Clance and Imes (1987), much more research has been done in regard to this psychological phenomenon. In looking beyond gender as a contributing factor, the experiences of African-American graduate students in relationship to their academic environments, the opportunities to connect with a role model or mentor, and availability of resources such as financial aid and other student support services have all been hypothesized to contribute to an individual experiencing Imposter Syndrome (Ewing, Richardson, James-Meyers, & Russell, 1996). Furthermore, it was suggested that, in order for students from minoritized backgrounds to perform as well as White students, they needed to “demonstrate a greater variety of characteristics” outside of academic ability (Tracey & Sedlacek, 1984). This increased reliability on the aforementioned characteristics in conjunction with variables such as having to adjust to

new roles, having a negative self-image, or inability to access strong support systems have psychological implications that are closely linked to the onset of Imposter Syndrome (Harvey & Katz, 1985). Closer to home (and later discussed in more detail in the “Context” portion of this paper), it is possible that the University’s predominantly white student body may be a contributing factor in the Imposter Syndrome experience.

“Perceived Fraudulence” & The Case Against Imposter Syndrome

Despite pulling from Clance & Imes’ (1987) literature, opposing researchers view Imposter Syndrome as inadequate. The term “Perceived Fraudulence” has been offered as an alternate term as it is considered to be “more accurate” and should be viewed as a “specific self-perception or self-referential ideation with... cognitive and affective components” rather than a “pervasive mental disorder or categorical personality disorder (Kolligian & Sternberg, 1991, p. 308). Additionally, because Imposter Syndrome is not classified by the DSM-V (Diagnostic & Statistical Manual of Mental Disorders - 5th Edition) as its own mental disorder and is often comprised of multiple symptoms that derive from other diagnoses such as generalized anxiety disorder (GAD) or Depression, it is at times written off due to its inability to be assessed easily.

Another case against Imposter Syndrome is that critics view I.S. as more of a “buzzword” within Pop Psychology than of legitimate concern. In a “Think Piece” article published to the website i-D (a subsidiary of VICE Media Group) titled “Why does everyone suddenly seem to have Imposter Syndrome?”, it is argued that everyone will experience anxiety or some level of discomfort when placed in an unfamiliar situation and that alone should not constitute Imposter Syndrome. However, the article also provides evidence that suggests that environmental factors play a large role in determining whether an individual simply feels anxious or is suffering from this psychological phenomenon (Euse, 2017).

The Needs of Graduate Students & Astin's Theory of Student Involvement

In a one-off conversation that I had with my supervisor and Assistant Director of Student Engagement within SOLES, I learned that the needs of undergraduate students differ in comparison to their graduate school counterparts. During this discussion, it was noted that the (traditional) undergraduate student may be navigating a four-year institution for the first time and be more inclined to gravitate towards student organizations or affinity groups that best serve their own desire to develop personally. This is different than the needs of graduate students who may lean more towards opportunities that are centered around professional and career development. Furthermore, the lives of graduate students outside of academics may include full-time careers, families, or other aspects that the traditional undergraduate student may not have yet even begun to think about. This is reminiscent of Astin's Theory of Student Involvement (1984), which focuses primarily on the student and their time, living situation, means of involvement, and other factors as resources rather than being an overlooked part of the system.

Astin's Theory of Student Involvement (1984) is one such theory that diverges from other student development theories in the way that students are not viewed as a "black box" of sorts. To make sense of this statement, Astin (1984) suggests that previously conducted research primarily focuses on a student's outcomes as a derivative of the university's policies in place and ignores the "mediating mechanisms that would explain how educational programs and policies are translated into student achievement and development" (Astin, 1984, p. 519-520). Interestingly, Astin's definition of "student involvement" differed from what I originally defined as student involvement in the beginning stages of my action research. To me, I viewed student involvement as a quantifiable aspect, meaning that the number of organizations or extracurricular activities a student did was a part of determining their level of involvement on campus.

However, Astin's theory was less limiting on what student involvement entailed. According to Astin, student involvement is defined as "the amount of physical and psychological energy that a student devotes to the academic experience" (Astin 1984, p. 518). Furthermore, what separates Astin's theory from other practitioner-based theories is the focus on the behavioral aspect of involvement; he states:

"involvement implies a behavioral component. I am not denying that motivation is an important aspect of involvement, but rather I am emphasizing that the behavioral aspects, in my judgment, are critical: It is not so much what the individual thinks or feels, but what the individual does, how he or she behaves, that defines and identifies involvement (Astin 1984, p. 519).

Furthermore, Astin continued on, saying:

"Regardless of its object [an "object" in Astin's case refers to the task or responsibility that a student engages in], involvement occurs along a continuum; that is, different students manifest different degrees of involvement in a given object, and the same student manifests different degrees of involvement in different objects at different times (Astin 1984, p.519).

This was not only useful in shifting how I viewed student involvement during the course of my action research, but important to keep in mind as involvement (when viewed from the lens of psychology) can be a finite "resource" that all college students are able to possess to varying degrees. Furthermore, viewing student involvement through this lens can also help student affairs professionals, particularly those who work in more student-facing roles (Student Services,

Associated Students, Fraternity and Sorority Life, etc.) understand how to best gauge how to serve students and their mental health as well as prevent things such as burnout from occurring.

Imposter Syndrome (and the Mental Health Crisis) in Graduate School

In the past ten years, the rate at which college students have been diagnosed with a mental health issue has risen significantly. In a study conducted by Harvard University, it was found that graduate students were more than three times more likely to develop mental health disorders and depression in comparison to the national average. In the same study, it was found that one in ten (11%) graduate students had suffered from suicidal thoughts (Barreira et al., 2018). This is an alarming statistic that points to the severity of the mental health crisis surrounding graduate students throughout their time while in school. As mentioned earlier, there are several factors that play a significant role in this, some of which are directly linked to Imposter Syndrome. According to Barreira, several findings have pointed to this, including:

- 1) 96% of students who met with their advisor in the past few months feared making a bad first impression and “doubt the quality of their thoughts and ideas” (Barreira et al., 2018, p. 4).
- 2) Students who perceive their peers as being competitive often have worse mental health than those who do not.
- 3) Students who have a “source of meaning and usefulness” often fare better as it is viewed as crucial to their mental health (Barreira et al., 2018, p. 4).

Not only has the presence of mental health concerns have made itself more known within the academic community over the past decade, but it has also been a personal concern in my own life. As an individual who has gone through their undergraduate and most of their graduate career with a diagnosed mental health issue, a large part of my own academic experiences and

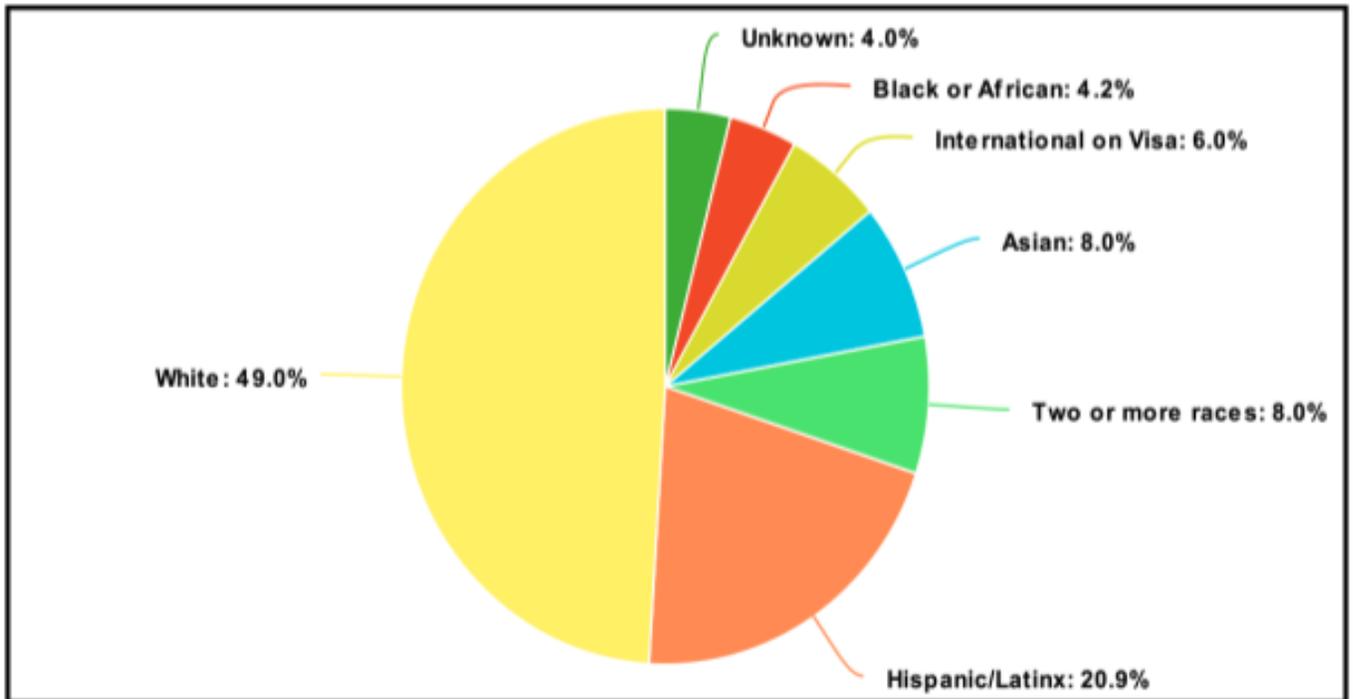
being involved on-campus was to find a sense of community that I could not only seek support from but also confide in. While I have been fortunate to have found a sense of community among my peers through my graduate assistantship and student organizations, I have still struggled with Imposter Syndrome throughout my graduate school career despite the personal achievements I have attained. So why is it that, despite finding camaraderie amongst my peers through student involvement, I feel as if I am not enough for my program? Is there something deeper that is not being discussed - “the elephant in the room” - that could be driving this feeling, not only in myself but my classmates?

Context

The Profile of SOLES

The context in which Imposter Syndrome occurs can range anywhere from academic institutions to professional fields (i.e., Medical field, management, etc.) to even the entertainment industry. However, my research is primarily focused on the context of the University of San Diego (USD), a private Catholic university located in the heart of San Diego. Specifically, I am focused on graduate students’ level of involvement within the School of Leadership & Education Sciences (SOLES), a graduate school located on the university’s campus that offers Master’s and Doctoral degrees in fields of study falling under the realm of Leadership Studies, Counseling and Marital & Family Therapy, or Learning & Teaching. Demographically, the University of San Diego’s student population (composed of undergraduate, graduate, and law students) is nearly half White at 49%, followed by Hispanic & Latinx students at 21% (University of San Diego, 2019). While the demographic make-up of graduate students within the University of San Diego is slightly more diverse, collected data shows that the demographic breakdown is similar across all groups.

Figure 1: Demographics at the University of San Diego (2019)



How Are Students Involved at SOLES?

Within SOLES, there are opportunities for graduate students to be involved on campus in a variety of ways, whether it is through student organizations, graduate assistantships, intramural sports, or being a part of the school's admission's outreach program as a SOLES Ambassador. In total, SOLES houses over ten student organizations and affinity groups that are dedicated to a variety of work, including: academic and professional development, honor societies, community outreach, and social networking. As the President and former Communications Director of the SOLES Graduate Student Association (SGSA), a majority of the work that occurred within this organization was focused on building a sense of community for students across all departments. Additionally, there are opportunities for students to obtain graduate assistantships in a variety of offices across campuses in positions that are student-facing and/or administrative. Working in the Dean's suite within SOLES, I was the graduate assistant for student engagement, in which

one of the main responsibilities centered around the planning and implementation of student programming, including events such as SOLES Welcome Week.

In these roles, I was not only able to connect with students across departments and backgrounds but also see some of the pressing issues that the school was not currently providing to students. Of these pressing issues, one was centered around resources for students relating to mental health, or the lack thereof. As a way to provide some support to students, I helped to put together a couple of events that focused on student wellness. This included having a wellness wall posted outside of the SOLES Student Lounge in which students could freely participate in a “Dreams vs. Fears” activity as they pass by to encourage dialogue around mental health. Furthermore, I oversaw a widely-attended event titled “Wiggles for Wellness” that brought therapy animals from the San Diego Humane Society to campus in an effort to provide an opportunity for students to take a break from their studies and unwind. During and after this event, students who had participated expressed joy and gratefulness for there being events that centered around student wellness and asked if more opportunities would be available. This was the first tangible interaction that I had with members of the SOLES student body that showed a desire for more programming centered around mental health. This, coupled with past interactions with members of my cohort who had shared feelings that were associated with imposter syndrome indicated that there might be an underlying issue at play that was not being addressed.

Methodology

Overview: O’Leary’s Model of Action Research

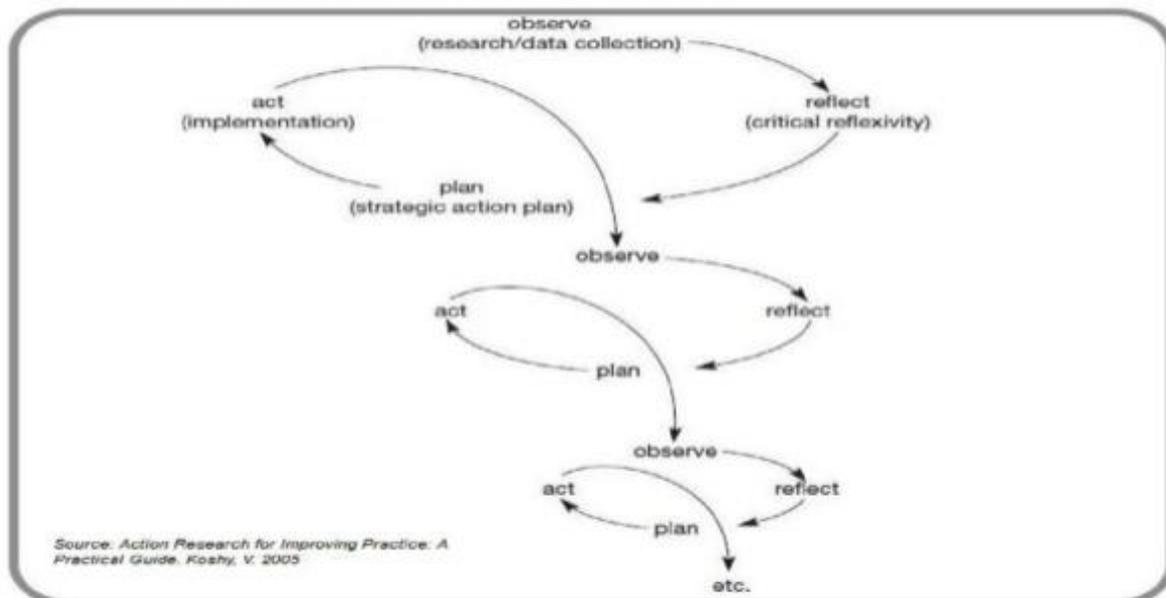
Utilizing O’Leary’s Model of Action Research (2004), my action research project was organized into a less-traditional fashion: two pre-cycle and two cycles (one completed, and one affected by the Coronavirus pandemic). Unlike other methodologies that are used in action

research, such as Cooperrider and Srivasta's Appreciative Inquiry model (2001), O'Leary's model is focused on the non-linear process that research takes and "converge towards better situation understanding and improved action implementation; and are based in evaluative practice that alters between action and critical reflection" (Fox et al., 2009). Constructed as a cyclical process, the path of conducting action research is broken up into "cycles" that are informed by collected data and personal reflections. This marriage between qualitative data collection and personal reflection has pushed O'Leary's Model of Action Research from being viewed as simply "plan, do, review" process towards "a more complex annual cycle of communication, evaluation, planning and implementation... through which we, as a community of learners, investigate and evaluate our own practices and programmes" (McNiff & Whitehead, 2006, p. 20).

In O'Leary's Model of Action Research, each cycle consists of four steps that researchers follow as they pursue their research. The first step in the cycle - "Observe" - is what the name suggests. As researchers begin to question their own place within the system, they simultaneously observe some of the issues that are apparent to them or their place of employment. Whether it be the implementation of a policy that leaves a population of students out of the loop or the mismanagement of a leader within an organization, observing the system in real-time both as a participant and "on the balcony" allows researchers to gauge their own emotional investment and values within a certain topic of personal interest (Miller, 2007, p. 237). The second step in the cycle - "Reflect" - comes after an individual observes their place within the system and is directly influenced by the data that is collected during the initial step. During this stage in the cyclical process, an individual takes account of their own closely-held values and its interaction with data collected during the "observing" stage. From here, an individual can

begin to thread together trends and put a name to some of the feelings that they have not thought of previously. After completing the first two steps in the cycle, the “planning” stage occurs next, in which researchers create a plan of action that will address some of the initial trends that were uncovered during one’s self-reflection. For example, in this stage, a researcher may come up with new policies or protocols that directly address the issue being diagnosed. Once a plan of action has been created, the researcher’s next step (and last in the cycle) would be implementation as part of the “act” stage. In this phase of the cycle, researchers get their first opportunity to be present within their own action research by enacting any new practices that they believe would best address the issue at hand. Once all of the steps in the cycle have been met, the process starts again, this time utilizing information and data that was collected in the previous cycle to inform researchers on what direction they should take moving forward with research.

Figure 2: O’Leary’s Model of Action Research (2005)



What separates action research from other types of research is that a key component of the research process is that mistakes made are seen as opportunities rather than obstacles, which

then allow researchers to modify their research and allows for the development and modification of implemented practices (Koshy, 2005, p. 21). This way of approaching mistakes made during the research process gives action research its characteristic non-linear pathway towards an answer.

Purpose of Study

The purpose of this study was to explore the relationship between a graduate student's level of involvement and whether or not the amount of psychological and physical energy that one puts in results in Imposter Syndrome. While studies have shown that student involvement is positively correlated with academic success, many are focused on undergraduate population versus graduate students. Furthermore, the amount of literature that exists regarding graduate student involvement is miniscule in comparison. With this in mind, the goal of my research is twofold: 1) to contribute to the literature surrounding graduate students, student involvement, and Imposter Syndrome as well as 2) to promote dialogue with graduate students regarding wellness and mental health at SOLES. My research question was: does the level of graduate students' level of involvement affect one's mental health, specifically the onset and prevalence of Imposter Syndrome?

Pre-Cycle 1: Lofty Goals and Limited Time

The journey through this action research project is one that has taken many turns and revisions, which should be expected, considering the very nature of action research itself. Initially, my action research project would focus on a specific population of students: students with disabilities. Specifically, I was interested in analyzing what accommodations and/or programs were being provided to students with disabilities that best foster a sense of inclusivity and promoted student involvement. Meeting with student affairs professionals from the

University of Florida, Purdue University, and the University of California, Riverside at the National Association of Student Personnel Administrators (NASPA) conference in Los Angeles, I was inspired by the programs that were in place that promoted the values of inclusivity and compassion; Purdue's Peer Mentoring Program was particularly noteworthy for their success in creating a well-established program that many students with disabilities and learning differences participated in. Noting what was done at other institutions, my original aim was to compare the efforts of local universities and community colleges' disability resource centers (i.e., University of San Diego, University of California San Diego, San Diego State University, Mesa Community College) in an effort to better understand what accommodations and programs offered on campus were promoting this inclusivity whilst simultaneously gauging the community. Unfortunately, the scope of this plan would have been too large to complete for the amount of time I had. Additionally, having to seek IRB approval from every school in order to hold focus groups with students across multiple universities would prove time-consuming and beyond what I was capable at the time. With these things in mind, it was back to the drawing board to determine what my next steps would be.

Pre-Cycle 2: Same Values, Different Approach

Before I could adjust the course, I had to reflect on where I was at the moment mentally and physically. At the time, I had been working on a number of projects as a graduate assistant within SOLES; This included working on an assessment that would be sent school-wide to students to determine gaps that were present in student services as well as working under the Associate Provost in benchmarking recruitment, retention, and outcome (RRO) efforts by comparable graduate programs at regional institutions. During the same time period, I had taken a more active role on campus through my extracurricular involvements but could not shake a

feeling that I could not name. I felt inadequate in the sense that I held onto the idea that I could not live up the roles that I had taken on and that someone else would almost certainly do a better job than I could do.

This lingering feeling led to cycles of self-doubt, anxiety, and a fear that I would fail, which would confirm my suspicions that I was not adequate in my roles - classic symptoms of Imposter Syndrome. Unfortunately, I was unable to name this at the moment. Having never heard of Imposter Syndrome, I felt as if my feelings were only felt by me and I had everyone fooled.

Cycle 1: An Initial Survey of Graduate Students

Observe

During the initial phase of pre-cycle two while I was comparing mental health resources that were available at regional universities, I came across an article that discussed some of the experiences that students had while pursuing graduate school. In it, Imposter Syndrome was described, and - for the first time - I was able to put a name to the feelings that I had. Once I understood this phenomenon better and the ways it pervades a student's experience, I began to observe what other students have been saying in passing and had begun to connect these comments to what Imposter Syndrome was describing. Were others feeling similar to what I was experiencing?

Reflect

Though passing comments could provide some insight into what graduate students were feeling, it would be foolish to conclude that a single comment alone is concrete proof that an individual was dealing with Imposter Syndrome. However, what was apparent was the lack of dialogue in regard to these ill feelings. The stigma associated with mental health can be deadly if

not recognized but is often swept under the rug to avoid stirring up undesirable feelings from emerging. In ways, this could be likened to the “elephant in the room” scenario that was mentioned earlier; That is a topic that is obvious to many or all members of a system but is often disregarded in an attempt to create a “safe space.” The issue with this is that, for those who choose to ignore the elephant in the room, progression towards a goal is stunted and “work avoidance” becomes inevitable. As a result, the idea of being transparent about mental health is stigmatized and individuals suffer in silence versus seeking out the help that could potentially save their life.

However, the notion that there is comfort in mutual discomfort rings true. By providing a platform for students to be able to communicate their feelings through healthy dialogue, the less taboo it will be to discuss such topics. In fact, the University of San Diego’s Student Health Center provides a variety of wellness groups, one of which is tailored to graduate students in an effort to provide resources that promote well-being and balance. In my case, however, I was unable to attend these wellness groups due to it being scheduled at a time that I was working in my graduate assistantship: a barrier that other students have expressed displeasure with.

Plan

Since there was a lack of dialogue in regard to Imposter Syndrome at the University, it was difficult to understand where individuals stood in regard to their knowledge on the topic as well as perceptions on the issue. In order to measure this, I designed a 27-question survey (see Appendix A) that asked a multitude of questions ranging from an individual’s on-campus involvement, a self-assessment of one’s thought patterns (derived from the Clance Imposter Phenomenon Scale or CIPS for short), and a short answer section that sought out respondent’s opinions towards Imposter Syndrome and the availability of mental health resources at USD.

Conducted via Google Forms, the survey was sent out to graduate students within SOLES in an email (Appendix B). In total, there were 33 students who completed the survey across SOLES with a majority of them falling under the Department of Leadership Studies (57%), followed by the Department of Counseling and Marital & Family Therapy (28%), and the Department of Learning & Teaching (15%). Based on the students’ responses, the average number of extracurriculars (i.e. Intramural sports, student organizations, honor societies, Greek Life) that an individual was involved in equated to 2.15.

Table 1	
<i>Demographic Breakdown of Survey Responses Based on Graduate Program</i>	
<u>Graduate Program</u>	<u>Students</u>
Higher Education Leadership	15
Learning & Teaching*	5
Marital & Family Therapy	4
School Counseling	4
Leadership Studies	3
Clinical Mental Health Counseling	1
Nonprofit Leadership & Management	1

Note: Number of responses within Learning & Teaching includes TESOL and Credential programs

Act

Utilizing a Likert scale, students were asked to do a self-assessment of their own experiences with Imposter Syndrome based on questions deriving from the Clance Imposter Phenomenon Scale. While each student’s response was based on their own feelings and is considered valid on their own, I averaged out the scores (from 1-7) of responses to see if certain sentiments were felt more strongly than others (see Table 2). Surprisingly, one of the more

common signs of Imposter Syndrome - that is “feeling like a fraud” - scored among the lowest in comparison to other sentiments. On the other hand, more students expressed difficulty in being able to accept praise in regard to their accomplishments as well as discounting their own success. However, one sentiment that was not only echoed in the self-assessment but further along in the survey was that students often felt pressure to present themselves as being successful to their peers.

Table 2: The averages of Likert-Scale scores based on initial survey responses

It's hard for me to accept compliments or praise about my accomplishments and/or intelligence	5.24
I often discount my own success	5.18
I often feel pressure to present myself as successful to my peers	5.1
I'm disappointed at times in my present accomplishments and think I should have accomplished much more.	4.97
Sometimes I am afraid of others will discover how much knowledge or ability I really lack	4.94
I often take on more responsibilities to prove my worth	4.7
I often times attribute my successes to "luck" or "good timing"	4.67
I am ambivalent towards my own achievements	4.48
I'm afraid I will be exposed/found out as an imposter	4.15
I rarely do a project or task as well as I'd like to do it.	4.15
I feel like a fraud	3.73
I feel like my school/program made a mistake in accepting me	3.5
I avoid starting new tasks because I'm afraid to fail	3.3

Note: Scores based out of seven on a 1-7 self-assessment scale

In the section of the survey titled “Personal Attitudes Towards Imposter Syndrome,” students were given the option to complete a few free-response questions, the first asking their perspective in regard to if being involved on campus helps combat feelings associated with Imposter Syndrome. While responses were mixed about if student involvement could play a role in combating these feelings, there were similar themes that appeared. One prominent theme was that being involved on campus increased one’s own expectations on how they present themselves to others. Furthermore, the ability to present oneself in a successful way adds an extra layer of pressure that one carries with them. In one student’s experience, they shared:

“I feel like it is both yes and no. Yes because I am recognized as a leader amongst my peers to represent my peers which makes me feel as though I exude confidence and competence enough for others to see the value in me. And also no because I find myself constantly comparing myself to other in equivalent positions or my predecessors and I almost always feel as though I am not doing enough”

Additionally, another student shared a similar experience in which they became involved on-campus as a way to reassure themselves of their own achievements and ability, stating:

“I have been very involved on campus and feel it might make me feel better about myself but oftentimes, I end up regretting it because I am stretched so thin and I constantly wonder how others perceive me. Initially I thought involvement equated to reassurance of myself and although I feel assured sometimes, I am hard on myself most times.”

On a personal note, the experiences that I have had while being involved on campus at the graduate level were similar to what was shared by others; specifically, the idea of being involved as a way to reassure myself of my own efforts was something that I initially felt would help me overcome my experience with Imposter Syndrome. However, it is interesting to note that being more involved was something that students sought out but ended up contributing to their experiences with Imposter Syndrome.

When asked about their undergraduate experience in comparison to graduate experience, students shared that the expectations of graduate school are higher and may play a large role in why Imposter Syndrome is more prevalent at this level of education. Here, the overarching

theme of “internal pressure” continues to manifest in students’ lives. The reasons for why this internal pressure exists come from different aspects of the graduate student experience, ranging from the size of their cohort to the increased sense of competition to the underlying notion that one’s accomplishments are linked to their worth.

In one student’s account, they shared how the size of their cohort played a role in how they perceived themselves, stating that they felt more “exposed” in a smaller crowd as compared to “blending in” to the large student body at their undergraduate institution. The student stated the following: “It feels easier to blend in the crowd in undergrad. Grad school tends to be a smaller group of people, so it feels like there are more eyes on you or more opportunities for you to be ‘exposed.’” As a result, the student shared that the pressure to perform well is magnified under the eyes of their peers on top of there being more opportunities to be “found out.”

In another student’s account, the theme of pressure appears in a different way. They shared that their experience with the competitive nature of graduate school. This student stated the following:

“In undergrad, I felt that my community... understood where I was coming from and that there wasn't a need to compete or show off. In graduate school, I feel that my experience and effort is tied to my worth. I've been contemplating no longer participating because I feel guilty for choosing myself and focus on my studies. In undergrad, we strived to create an environment where everyone could be themselves, I don't necessarily feel that here.”

The competitive environment not only made the student rethink their involvement on campus but also feel guilty for wanting to put themselves first. This sentiment was similarly shared by a

doctoral student who felt the competitive nature of graduate school leads to unwelcome comparisons between themselves and their peers, which further cemented the idea that one's accomplishments were linked to their worth. This student remarked that "Imposter Syndrome feels more prevalent in graduate school because the sense of competition is even higher, especially at the doctoral level. There is constant comparison between you and your classmates."

Lastly, students were asked about the mental health resources provided to them by the University of San Diego and if enough was being done to support graduate students' mental health. Overwhelmingly, responses suggested that more can be done by the university to support graduate students. In one student's account, they shared:

"I feel left behind, falling through the cracks. I am not on campus to get to know faculty, staff or other students. Most events or workshops are during the day while I am at work. I loved my undergrad because I was able to be a part of the school. I thought this new journey would feel the same. I am not sure why because it is a different school."

Other prominent themes that appeared included 1) the lack of support that students felt they did not get at SOLES and 2) inaccessibility of resources for graduate students. In one student's experience, they shared that after disclosing their troubles with anxiety to a faculty member, they received "little to no support" which led them to believe that the "culture of care" that the school promotes wasn't as genuine as they thought. Additionally, other students stated that they felt that the resources available for them weren't only inaccessible but actually disregarded the needs of graduate students, whether it's because programming wasn't supportive of "graduate students who have families" or that there was a lack of mental health professionals of color who they could relate more to.

Cycle 2: Graduate Student Interviews

During the month of March, universities began shutting down their campuses and going completely virtual across the country as a result of the ongoing COVID-19 pandemic, including the University of San Diego. As a result of this, my second cycle changed from being a focus group and workshop to one-on-one interviews via Zoom in an attempt to continue conducting my research. Below, I highlight the original plan for cycle two, as well as what took its place.

Observe

Originally, I had planned to conduct an “Imposter Syndrome Workshop” in which participating students would come in for an hour to learn more about resources and mindfulness techniques that they can utilize in their day to day lives. Additionally, students would have time during the workshop to complete a self-assessment using the entire Clance IP Scale (see Appendix C) then have a focus group discussion to promote a dialogue surrounding this topic. By comparing the results of one’s CIPS test results to their level of student involvement, a key highlight of this cycle would have been if discrepancies exist between those with high and low levels of student involvement or if Imposter Syndrome is apparent regardless of this factor.

Instead, what I decided to do for my second cycle was have one-on-one student interviews with members of the SOLES community to hear about their experiences in graduate school, if they had any experiences relating to Imposter Syndrome, as well as how student involvement has played a role in their time at USD. In order to conduct these interviews, several students who had expressed interest in the workshop during the first cycle were contacted for their interest in participating in the second cycle.

Reflect

After conducting the first cycle, a couple of themes emerged based on the responses that were shared by students: 1) a sense of pressure that one feels as a result of being involved, 2) a lack of accessibility in regards to mental health resources, and 3) a lack of support from faculty and the school. Utilizing these themes, I wanted to dive deeper into student involvement and see how it emerged within the student experience. Furthermore, I wanted to gain some insight from other students regarding a more recent development: COVID-19. With students not being able to attend classes or be involved on campus, let alone be within six feet of others in public, being involved on campus was no longer a luxury. Instead, it brought up questions for what being involved could look like in the future as well as how current restrictions on socializing could impact students who seek support from a community.

Plan

Utilizing Zoom as the medium, I used six questions (see Appendix E) to guide the conversation that I would have with graduate students, all encompassing the aforementioned themes of pressure, accessibility, and lack of support. In an effort to have the interactions be as open and safe as possible, I first shared my own experiences with Imposter Syndrome with participants and how utilizing student involvement has played a role in my student experiences in an effort to “break the ice.” Specifically, I shared that my involvement on campus has led to finding a community that I could not only learn from but have a support system while going through graduate school. Despite finding a community of kind-hearted and supportive peers through my involvement on-campus, I simultaneously felt myself slipping into patterns of thought that resulted in lower self-esteem, higher levels of anxiety, and feeling as though my achievements weren’t the result of hard work but by error. Thus, what was supposed to help me find a place within the community only exacerbated feelings of inadequacy.

Act

In total, three individuals participated in the second cycle of my action research project. All participants were current graduate students within the Department of Leadership Studies and involved on campus working closely with the rest of the graduate student population in some capacity. Due to the interview's flexible structure, all interviews lasted between 30-60 minutes and often veered from the cycle's guiding questions as students shared insights that would prompt follow-up questions. During these interviews, what became apparent was that the desire to present oneself as successful contributed to the internal pressure. In one instance, student "A" shared that the external pressure of "fitting in" and being "on the same playing field" eventually led to them internalizing that sense of pressure, which ultimately led to discomfort and anxiety. In a separate interview with student "B", they discussed how other's perception of their reputation played a large role in the internalization of Imposter Syndrome. Using the example of planning events for a student organization, "B" shared that the success or failure of the said event would coincide with how they perceive themselves, acknowledging that this may not be the most logical pattern of thought but still valid nonetheless.

Additionally, I asked students what their perspectives were on COVID-19 and how that could potentially affect a student's wellbeing. Surprisingly, answers differed among participants. Student "A" shared that they actually felt more at ease being away from campus and their peers as the external pressure to appear successful that they were experiencing was no longer there. On the other hand, students "B" and "C" shared common responses, stating that being away from campus and back at home magnified feelings of Imposter Syndrome. By being disconnected from their peers, students "B" and "C" thought they were falling behind in comparison to the rest of their cohort. This is interesting as it demonstrates how Imposter Syndrome can manifest itself

differently between individuals and the context in which it occurs. With this in mind, mental health is entirely subjective in the way that each individual's experiences are unique and as student affairs practitioners, we must be conscientious of our efforts when supporting all students.

Conclusion

I titled my action research "Caring For The Whole Self" as I felt it best encapsulated what I wanted my action research project to serve; not only as a reminder that we should take a few moments from our own day to check in with ourselves but how we should support all of the students we serve. We hold multiple identities that form who we are; each with their own underlying meanings and value. When a student or peer walks into our office, they too are informed by the identities that they hold and the experiences they have had. In my research, I have found that a graduate student's level of involvement does in fact play a role in the onset of Imposter's Syndrome. By becoming "more visible" to their peers through involvement, students feel a greater need to be "successful" at the expense of their mental health. Whether it be due to the increased academic rigor of graduate school, closer proximity to working with faculty and peers, or lack of support from the school, Imposter Syndrome is only the tip of the iceberg to a larger issue at hand. Referring back to the "elephant in the room," the fragile nature of a graduate student's mental health and its toll is something that needs to be at the forefront of all members of the institution rather than pushed into our blind spots. Whether you are a part of campus leadership, a faculty member, staff member, or fellow students, we must make a conscious effort to "care for the whole self" regardless of if it is a peer, employee, student, or ourselves.

Limitations

Small Sample Size

One of the major limitations of this research is that the amount of collected data only accounts for a small percentage of graduate students, not only at the University of San Diego but as an entire subset of higher education. Despite collected data from my research that suggests that a slight correlation exists between a student's level of student involvement and the onset of Imposter Syndrome, a larger sample size would be needed to confirm if a correlation truly exists between graduate students' level of involvement and the onset of Imposter Syndrome.

Lack of Doctoral Student Representation

As mentioned previously, doctoral students are more susceptible to falling into problems surrounding mental health in comparison to masters students. However, my action research did not have as much representation from doctoral students. Being that doctoral students are heavily invested (financially, emotionally, academically) in their academic experience for longer periods of time (most doctoral programs range from 5-7 years as compared to 1-3 years for Masters programs), a future study addressing the needs and experiences of doctoral students experiencing Imposter Syndrome may prove useful in determining what resources or opportunities would best support this population of graduate students.

COVID-19 (Novel Coronavirus)

A third limitation, and more recent development, is the spread of COVID-19 and its effects on students' ability to attend on-campus events and classes. COVID-19 (also known as "Novel Coronavirus" or simply "Coronavirus"), which was recognized as a pandemic by the World Health Organization (WHO) in March 2020, has shuttered many higher education institutions around the United States, including the site of where my own action research project was being conducted. Known for its ability to be easily transmitted from one person to another as well as for its potentially fatal symptoms, measures were taken by university officials,

government leaders, and community members to slow the exponential growth of the disease in an attempt to “flatten the curve”. As a result, thousands of students had their Spring semesters become virtual classrooms overnight while hundreds of events held by student organizations and the university were either postponed or cancelled. As a result of the sudden pivot to what is becoming the “new normal,” student involvement on-campus seems to have taken a backseat as many students deal with the emotional toll that Coronavirus has taken on their daily lives.

Recommendations

School-wide Efforts to Promote Student Wellness

The ability to combat Imposter Syndrome and the mental health crisis across the nation’s university campuses is more important now than ever before. It is imperative that schools provide graduate students with the support they need to not only succeed in school, but also carry into their own lives as well. My first recommendation would be to hold mindfulness workshops and other educational efforts to not only to teach students a healthier way of living but bring the topic of mental health out of the shadows and into dialogue. More frequent collaborations between SOLES and Student Wellness would also help in making resources more accessible and catered to the graduate student population.

Collaborations Between Student Organizations and Faculty

Another recommendation would be to have more collaborative efforts between student organizations and faculty to facilitate an environment where students can feel as though they can be more accessible. By having student organizations host a collaborative event that faculty can attend, this fosters a sense of community among all members of the school as well as allows for students to interact with them in a low-pressure environment as compared to only meeting during class time.

Expanding the Scope of Research

Finally, expanding the scope of my research would be a recommendation for future research as well. While student involvement seems to play a role in one experiencing Imposter Syndrome, it admittedly is not as holistic of an approach as it can be. Looking through the lens of Intersectionality, there are many different identities that one holds and can be affected by environmental factors outside of their control, such as if someone is a first-generation student, has a disability, is in the middle of switching careers, or a multitude of other things. In order to better understand how institutions can support students, it must be able to first see where its blind spots are and work together with students to provide a more well-informed solution.

Reflection

We often are our own worst critics. We often view our accomplishments through the narrowest of lens. It is sometimes through others that we see ourselves. That being said, it is reassuring to have been able to pursue this topic in greater depth and open up a dialogue about Imposter Syndrome and mental health as a whole. Through this lens, a lot can be learned about the student on a level that goes beyond their roles in graduate school. By pursuing this study, I have been able to tie in my background of Psychology to gain a better understanding for what the motivations are for students to want to be involved and what they desire from their immediate academic community. Thinking back to Astin's Theory of Student Involvement, it is important to recognize that the energy that a student invests is finite and speaks greatly to the underlying motivations, or obstacles, that one faces throughout their academic career. Looking ahead as I begin to move into the field of Student Affairs, I plan to utilize what I have gained through this action research project to promote mindfulness and students' mental health as a part of their overall experience.

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Appendix A: Recruitment Email

Hello,

My name is Christian Perez and I am contacting you in regards to an opportunity to participate in an action research project that is being conducted on graduate students' involvement on campus and the Prevalence of Impostor Syndrome. The study aims to add to current research that is being conducted regarding Imposter Syndrome and mental health through the lens of graduate students, particularly those who may be involved in on-campus extracurriculars.

If you are interested in participating in this short (5-10 minute) survey, you may do so by following the link below:

<https://forms.gle/dHfTttbP1DGn5z2f7>

Thank you for your time and have a great rest of the week.

Best,

Christian Perez

-

Christian A. Perez

(Pronouns: He, Him, His)

President - SOLES Graduate Student Association (SGSA)

SOLES Student Ambassador - Higher Education Leadership

University of San Diego | School of Leadership & Education Sciences

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Appendix B: The Prevalence of Imposter Syndrome In Relation to Student Involvement

- 1) I have read and understand this form, and consent to the research it describes to me. If I would like a copy of this consent form for my records, I will contact the Principal Investigator of this study
- 2) What graduate program are you in?
- 3) How many extracurriculars (student orgs, intramurals, Honor Societies, Greek Life, etc.) are you involved in on campus?
- 4) Of these extracurriculars, do you hold a leadership position (i.e. President, Board Member, Coach, Advisor, etc.)?
- 5) Do you see yourself as more of a "follower" or a "leader"? Please select what most accurately describes you using the scale below.
- 6) Would you be interested in participating in a focus group & workshop regarding Impostor Syndrome, mindfulness, and student wellness in Early March? (Your email will be used to contact you with further details
- 7) If you answered yes to the question above, what is the best email to reach you at?

For Questions 8-20, Rate on a scale from 1-7 (7 being completely agree)

- 8) I feel like a fraud.
- 9) I am afraid that I will be exposed or "found out" as an impostor.
- 10) I feel like my school and/or program made a mistake when they accepted me.
- 11) I avoid starting new tasks because I am afraid to fail.
- 12) I am ambivalent towards my own achievements.
- 13) I often discount my own success.
- 14) I often take on more responsibilities/roles than I can handle to prove my worth to others.
- 15) I often feel pressure to present myself as successful to my peers
- 16) It's hard for me to accept compliments or praise about my accomplishments and/or intelligence
- 17) I often times attribute my successes to "luck" or "good timing"
- 18) Sometimes I am afraid of others will discover how much knowledge or ability I really lack
- 19) I rarely do a project or task as well as I'd like to do it.
- 20) I'm disappointed at times in my present accomplishments and think I should have accomplished much more.

21) According to research conducted by Dr. Valerie Young, there are five types of "Impostors". Please read through each type thoroughly and select the one in which you most associate with. If none apply to you, please leave blank.

- The Perfectionist - "Perfectionists set excessively high goals for themselves, and when they fail to reach a goal, they experience major self-doubt and worry about measuring up."
- The Superhero - "People who experience this phenomenon are convinced they're phonies amongst real-deal colleagues and often push themselves to work harder to measure up to others"
- The Natural Genius - "People with this competence type believe they need to be a natural "genius." As such, they judge their competence based ease and speed as opposed to their efforts. In other words, if they take a long time to master something, they feel shame.
- The Soloist - People who feel as though asking for help reveals their phoniness are what Young calls Soloists. It's OK to be independent, but not to the extent that you refuse assistance so that you can prove your worth."
- The Expert - "Experts measure their competence based on "what" and "how much" they know or can do. Believing they will never know enough, they fear being exposed as inexperienced or unknowledgeable."

Personal Attitudes Towards Imposter Syndrome

22) Do you believe that being actively involved on campus helps combat feelings associated with Impostor's Syndrome?

23) Explain your reasoning to the question above.

24) In comparison to your undergraduate experience, do you believe that feelings associated with Impostor Syndrome are more or less prevalent in graduate school?

25) Explain your reasoning to the question above.

26) Do you believe that enough is being done to support graduate students' mental health while attending USD?

27) If you selected "No", what are some resources that USD could provide to better assist graduate students?

Appendix C: Clance Imposter Phenomenon Scale (CIPS)

Clance IP Scale

For each question, please circle the number that best indicates how true the statement is of you. It is best to give the first response that enters your mind rather than dwelling on each statement and thinking about it over and over.

1. I have often succeeded on a test or task even though I was afraid that I would not do well before I undertook the task.

1	2	3	4	5
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

2. I can give the impression that I'm more competent than I really am.

1	2	3	4	5
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

3. I avoid evaluations if possible and have a dread of others evaluating me.

1	2	3	4	5
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

4. When people praise me for something I've accomplished, I'm afraid I won't be able to live up to their expectations of me in the future.

1	2	3	4	5
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

5. I sometimes think I obtained my present position or gained my present success because I happened to be in the right place at the right time or knew the right people.

1	2	3	4	5
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

6. I'm afraid people important to me may find out that I'm not as capable as they think I am.

1	2	3	4	5
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

7. I tend to remember the incidents in which I have not done my best more than those times I have done my best.

1	2	3	4	5
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

8. I rarely do a project or task as well as I'd like to do it.

1	2	3	4	5
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

9. Sometimes I feel or believe that my success in my life or in my job has been the result of some kind of error.

1	2	3	4	5
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

10. It's hard for me to accept compliments or praise about my intelligence or accomplishments.

1	2	3	4	5
(not at all true)	(rarely)	(sometimes)	(often)	(very true)

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11. At times, I feel my success has been due to some kind of luck.

1 (not at all true) 2 (rarely) 3 (sometimes) 4 (often) 5 (very true)

12. I'm disappointed at times in my present accomplishments and think I should have accomplished much more.

1 (not at all true) 2 (rarely) 3 (sometimes) 4 (often) 5 (very true)

13. Sometimes I'm afraid others will discover how much knowledge or ability I really lack.

1 (not at all true) 2 (rarely) 3 (sometimes) 4 (often) 5 (very true)

14. I'm often afraid that I may fail at a new assignment or undertaking even though I generally do well at what I attempt.

1 (not at all true) 2 (rarely) 3 (sometimes) 4 (often) 5 (very true)

15. When I've succeeded at something and received recognition for my accomplishments, I have doubts that I can keep repeating that success.

1 (not at all true) 2 (rarely) 3 (sometimes) 4 (often) 5 (very true)

16. If I receive a great deal of praise and recognition for something I've accomplished, I tend to discount the importance of what I've done.

1 (not at all true) 2 (rarely) 3 (sometimes) 4 (often) 5 (very true)

17. I often compare my ability to those around me and think they may be more intelligent than I am.

1 (not at all true) 2 (rarely) 3 (sometimes) 4 (often) 5 (very true)

18. I often worry about not succeeding with a project or examination, even though others around me have considerable confidence that I will do well.

1 (not at all true) 2 (rarely) 3 (sometimes) 4 (often) 5 (very true)

19. If I'm going to receive a promotion or gain recognition of some kind, I hesitate to tell others until it is an accomplished fact.

1 (not at all true) 2 (rarely) 3 (sometimes) 4 (often) 5 (very true)

20. I feel bad and discouraged if I'm not "the best" or at least "very special" in situations that involve achievement.

1 (not at all true) 2 (rarely) 3 (sometimes) 4 (often) 5 (very true)

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Appendix D: Recruitment Email For Graduate Student Interviews

Hello,

My name is Christian Perez and I am contacting you regarding your interest in participating in an Imposter's Syndrome workshop and focus group, as noted by your response within the survey.

Due to current restrictions as a result of COVID-19, I will now be conducting one-on-one graduate student interviews in place of a workshop. These interviews will be conducted the week of April 13-17th. If you are still interested in being a participant in this action research project, please let me know no later than Saturday April 11th, 2020 with your availability and a Zoom link will follow. Once again, thank you for your time and I wish you the best.

Sincerely,

Christian Perez

-

Christian A. Perez

(Pronouns: He, Him, His)

President - SOLES Graduate Student Association (SGSA)

SOLES Student Ambassador - Higher Education Leadership

University of San Diego | School of Leadership & Education Sciences

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Appendix E: Guiding Questions for Graduate Student Interviews

1. Do you feel as though the student community contributes to a feeling of pressure? How about faculty? If yes, How so?
2. Do you believe Imposter Syndrome to be strictly internal, external, or a combination of both?
3. Do you believe there is an “elephant in the room” when it comes to mental health at SOLES?
4. In light of the Coronavirus outbreak, do you think feelings of Imposter Syndrome would be amplified or lessened as a result of students not being able to attend on-campus events or other functions related to student life?
5. Within my research, a common theme that appeared was a lack of accessibility regarding mental health resources for graduate students, do you believe that to be the case in SOLES? Why or why not?
6. As someone who is involved on campus, do you believe you would have a harder time disclosing your sentiments if mental health resources were more readily available for you compared to if you were not involved?