

WELLNESS**How would you describe the following?**

	Poor		Fair		Good		Very good		Excellent		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Your overall physical health	63	1.7	355	9.6	1165	31.6	1385	37.5	722	19.6	3690	100.0
Your overall mental health	120	3.3	477	13.0	1087	29.5	1289	35.0	709	19.3	3682	100.0
Your overall diet	187	5.1	638	17.5	1371	37.5	1045	28.6	415	11.4	3656	100.0

How would you describe your weight?

	Very underweight		Slightly underweight		About the right weight		Slightly overweight		Very overweight		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Your weight	17	0.5	340	9.2	2204	59.9	991	26.9	129	3.5	3681	100.0

In the past month, which of the following behavior(s) have you pursued to improve you overall health?

	Not marked		Marked		Total	
	N	%	N	%	N	%
Increase in physical activity	1271	33.3	2549	66.7	3820	100.0
Incorporate more fruits, vegetables and whole grains into my meals	1316	34.5	2504	65.5	3820	100.0
Increase amount of sleep	1998	52.3	1822	47.7	3820	100.0
Choose sugars from naturally occurring sources such as fruits	2740	71.7	1080	28.3	3820	100.0
Prepare meals at home more often	1692	44.3	2128	55.7	3820	100.0
Engage in more social activities	2458	64.3	1362	35.7	3820	100.0
Seek counseling	3227	84.5	593	15.5	3820	100.0
Seek emotional support from a trusted person	2708	70.9	1112	29.1	3820	100.0
Engage in relaxation activities (e.g., yoga, meditation)	2648	69.3	1172	30.7	3820	100.0
I have not done any of these activities	3676	96.2	144	3.8	3820	100.0

During this academic year, how often have your negative thoughts/emotions interfered with your academic progress?

	N	%
Never	575	16.5
Rarely	1225	35.2
Sometimes	1302	37.5
Most of the time	266	7.7
Always	76	2.2
Not applicable	32	0.9
Total	3476	100.0

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How would you describe your average stress level since the beginning of this academic year?

	N	%
Very low stress	72	2.1
Low stress	321	9.2
Moderate stress	1510	43.4
High stress	1186	34.1
Very high stress	392	11.3
Total	3481	100.0

Please indicate how much time in the past month you have felt the following:

	Never		Rarely		Sometimes		Most of the time		Always		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Your daily life has been full of things that were interesting to you	26	0.7	303	8.6	1342	38.2	1527	43.5	316	9.0	3514	100.0
You felt loved and wanted	48	1.4	243	6.9	879	25.1	1472	42.0	861	24.6	3503	100.0
You have been a very nervous person	315	9.0	1146	32.7	1371	39.1	514	14.7	157	4.5	3503	100.0
You felt depressed	750	21.4	1303	37.2	1156	33.0	232	6.6	57	1.6	3498	100.0
You felt tense or "high strung"	220	6.3	856	24.6	1605	46.1	647	18.6	155	4.5	3483	100.0
You have been in firm control of your behavior, thoughts, emotions and feelings	37	1.1	241	6.9	997	28.5	1724	49.4	494	14.1	3493	100.0
You felt you had nothing to look forward to	1484	42.5	1155	33.1	655	18.8	156	4.5	41	1.2	3491	100.0
You felt calm and peaceful	68	1.9	659	18.8	1543	44.0	1087	31.0	146	4.2	3503	100.0
You felt emotionally stable	42	1.2	274	7.9	1011	29.1	1629	46.9	521	15.0	3477	100.0
You felt downhearted and blue	601	17.2	1481	42.3	1143	32.6	241	6.9	38	1.1	3504	100.0
You felt so down in the dumps that nothing could cheer you up	1766	50.4	1100	31.4	546	15.6	81	2.3	11	0.3	3504	100.0
You have been moody or brooded about things	521	14.9	1252	35.8	1472	42.1	231	6.6	18	0.5	3494	100.0
You felt restless, fidgety, or impatient	392	11.2	1078	30.8	1636	46.8	345	9.9	46	1.3	3497	100.0
You have been anxious or worried	206	5.9	829	23.8	1683	48.3	626	18.0	137	3.9	3481	100.0
You have been a happy person	36	1.0	277	8.0	1058	30.4	1867	53.6	243	7.0	3481	100.0
You have been in low or very low spirits	685	19.7	1594	45.7	968	27.8	208	6.0	31	0.9	3486	100.0
You have felt cheerful or lighthearted	44	1.3	360	10.3	1458	41.7	1485	42.5	146	4.2	3493	100.0
You have felt lonely/isolated	871	24.9	1153	32.9	1081	30.9	324	9.2	75	2.1	3504	100.0

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EXERCISE

In an average week, on how many days do you do the following...

	0 days		1 day		2 days		3 days		4 days		5 days		6 days		7 days		Total	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Engage in MODERATE-INTENSITY physical activity, such as walking briskly, biking at a casual pace or light weight lifting for at least 30 minutes	393	10.9	580	16.1	738	20.5	660	18.3	369	10.2	404	11.2	186	5.2	271	7.5	3601	100.0
Engage in VIGOROUS-INTENSITY cardio or aerobic exercises, such as running, bicycling, or aerobics for at least 20 minutes	1043	29.0	754	21.0	647	18.0	565	15.7	278	7.7	199	5.5	70	1.9	41	1.1	3597	100.0
Do 8-10 strength training exercises (such as resistance weight machines) for 8-12 repetitions each	1808	50.4	605	16.9	486	13.5	393	10.9	142	4.0	110	3.1	27	.8	19	0.5	3590	100.0

How much of this exercise took place on the UCLA campus or in UCLA facilities?

	None		Some		Almost all/All		Not applicable		Total	
	N	%	N	%	N	%	N	%	N	%
MODERATE-INTENSITY physical activity	1279	40.2	1052	33.0	788	24.7	65.0	2.0	3184	100
VIGOROUS-INTENSITY cardio or aerobic exercises	1211	48.0	545	21.6	715	28.3	52.0	2.1	2523	100
Do 8-10 strength training exercises (such as resistance weight machines) for 8-12 repetitions each	812	46.4	286	16.4	625	35.7	26.0	1.5	1749	100

MEAL SKIPPING

On average, how many meals do you skip in a week?

	N	%
None	1407	38.9
1-3	1581	43.7
4-6	482	13.3
7 or more	145	4.0
Total	3615	100.0

To what extent are the following reasons why you skip meals?

	Not at all a reason		Somewhat a reason		A major reason		Total	
	N	%	N	%	N	%	N	%
Time constraints in schedule	161	7.6	640	30.1	1323	62.3	2124	100.0
Cost of food on campus	893	43.2	729	35.3	445	21.5	2067	100.0
Overall cost of food	1068	52.0	681	33.2	305	14.8	2054	100.0
Location of restaurants on campus	1167	57.2	656	32.1	218	10.7	2041	100.0
Hours of operation of restaurants on campus	1232	60.2	581	28.4	234	11.4	2047	100.0
Not hungry	711	33.9	964	46.0	421	20.1	2096	100.0
Desired weight loss	1346	65.8	573	28.0	128	6.3	2047	100.0
Don't have time to prepare food to bring from home	472	22.7	829	39.8	782	37.5	2083	100.0
Have nowhere to store food brought from home	1377	67.3	446	21.8	224	10.9	2047	100.0

SLEEP

In the past month, how often did you do the following?

	Never		Sometimes		Often		Almost always		Don't know		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Get enough sleep so that you felt rested when you woke up	254	6.9	1145	31.1	1414	38.4	853	23.2	16	0.4	3682	100.0
Have difficulty sleeping (e.g., intermittent sleep, difficulty falling asleep, waking earlier than intended)	924	25.2	1418	38.7	898	24.5	412	11.2	15	0.4	3667	100.0
Feel so tired during the day that it affected your ability to work or study	651	17.7	1730	47.0	929	25.2	362	9.8	10	0.3	3682	100.0