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## College Transition Experience: First Year Undergraduate Students and Self-Identified Mental Health Challenges

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# College Transition Experience: First Year Undergraduate Students and Self-Identified Mental Health Challenges

## Abstract

Retention rates of college students has continued to be a large concern for those associated with higher education (Habley et al., 2004). A successful high school to college transition experience has been identified as a key factor in a student's decision to remain in college and persist to graduation (Broglia, et al, 2016). Furthermore, more students with mental health challenges are entering higher education settings (Bewick, et al., 2008).

The intent of this study was to describe the college transition experience through the lens of the theoretical framework from Schlossberg's (1984) transition theory. This theory provided a framework through which to study how students with mental health needs experience their transition to a college setting and how this experience is impacted by a campus environment. Therefore, this study provided an additional context to further impact college support and mental health providers at the college level in order to develop or improve the high school to college transition programs for this unique population of students.

The central research questions which guided study included: How do first year undergraduate college students who self-identify with mental health challenges, perceive their transition into college? What are the elements that contribute to a successful transition for first year undergraduate college students who self-identify with mental health challenges? How do first year undergraduate college students who self-identify with mental health challenges perceive the existing (and needed) support structures at a small private university, as it relates to their transition?

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Norma L. Hafenstein

## Second Advisor

Paul Michalec

## Third Advisor

Lindsey Reinert

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COLLEGE TRANSITION EXPERIENCE: FIRST YEAR UNDERGRADUATE STUDENTS  
AND SELF-IDENTIFIED MENTAL HEALTH CHALLENGES

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A Dissertation in Practice

Presented to

the Faculty of the Morgridge College of Education

University of Denver

---

In Partial Fulfillment

of the Requirements for the Degree

Doctor of Education

---

by

Kathlene R. Seymour

June 2020

Advisor: Norma L. Hafenstein, PhD

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Author: Kathlene R. Seymour

Title: COLLEGE TRANSITION EXPERIENCE: FIRST YEAR UNDERGRADUATE STUDENTS AND SELF-IDENTIFIED MENTAL HEALTH CHALLENGES

Advisor: Norma L. Hafenstein, PhD

Degree Date: June 2020

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with mental health challenges perceive the existing (and needed) support structures at a small private university, as it relates to their transition?

*Keywords: mental health, college transition, emerging adulthood, college, social support*

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*“Life is like riding a bicycle. To keep your balance, you must keep moving.”*

*Albert Einstein*

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## **Chapter One: Introduction**

Every year, approximately 42 million American adults suffer from some type of mental health illness, enduring conditions such as depression, bipolar disorder, schizophrenia or nervosa anexoria (Mowbray, 1999). In 2014, the Substance Abuse and Mental Health Services Administration (SAMHSA) reported the overall growing prevalence of mental illness within the United States (US Department of Health and Human Services, 2014). A closer examination of the survey's data revealed some alarming findings which further suggests that 1 in 5 adults have a mental health conditon; this translates into over 40 million Americans who suffer from this disability (US Department of Health and Human Services, 2014). Additionally, the report also suggests that the rates of youth depression has increased from 8.5% in 2011 to 11.1% in 2014 (US Department of Health and Services, 2014).

### **Persistent Problem of Practice**

In order to better understand the college transition experience of first year college students who self identify with mental health challenges, institutions must understand that the transition experience is a complex phenomenon in which students in their first year of college need to become integrated both socially and academically if they are to persist in the second year (Clark, 2005).

Additionally, retention continues to be a concern for a variety of people connected within the higher education industry (Crosling, et al, 2009). Therefore, the high school to college transition experience has been identified as a significant experience that impacts the transition process (Hicks, 2014). Additionally, students who experience mental health challenges during their first year of college, have increased drastically (Mobry, 2006). Despite the increased attention to mental health challenges, there is limited literature which portrays the transition experience of first year undergraduate students who self identify with mental health challenges.

### ***National Context***

Within the past decade, the status of mental health among college students has gained increased attention in the higher education environment as students are presenting with more serious issues and needs for services (Mowbray, 1999). Over the years, campus services have focused attention on mental health awareness, building an understanding of the increasing needs of students (Mowbray, 1999). Recently, one study suggests that the rates of treatment and diagnosis are increasing significantly for mental health and college students (Lipson, et al., 2019). Additionally, according to the Healthy Minds Study, student mental health concerns have escalated over the last ten years (Chessman, H., et al., 2019). One college president stated, “Mental health has become a major issue for retention and the general well-being of our students” (Chessman, H., et al., 2019).

A study by Kansas State University examined trends among students seeking psychological help (Kitzrow, 2003). The study found that the percentage of students who sought counseling for depression doubled and the proportion of students taking



psychiatric medication rose from 10% to 25%. The study also showed that the number of suicidal attempts tripled (Kitzrow, 2003).

Inevitably, as student mental health concerns continue to rise, and as higher education continues to wrestle with the complexity and severity of these issues, campuses remain in a position to support students who may be struggling. This is not a new role for institutions, but as these issues evolve, it becomes more important that assistance for students is available outside of counseling centers (Lipson, et al., 2019)

### ***Situational Context***

**Impact on Transition and Retention.** Mowbry (1999) found that colleges and universities are not retaining students with mental health challenges who could potentially be academically successful. Many students who suffer from a mental illness are treated with medication, therapy, or both. However, in a college setting, students face barriers due to lack of awareness of mental health challenges among their peers and it is essential to help address these issues in a timely manner (Lipson, et al., 2019).

Furthermore, retention of college students has continued to be a concern for higher education, especially as it relates to mental health challenges (Kitzrow, 2003). One study suggests that untreated mental health illness in the college student population is associated with a lower GPA and a higher chance of a student dropping out of school (Kadison, 2004). Consequently, the transition process from high school to college is important in retaining students; it is essential to understand how students with mental illness experience that transition. Additionally, mental health awareness is a critical issue for colleges to consider and ultimately address.

During the transition experience from the high school to college environment, student often experience personal and emotional problems, anxiety, depression, or another source of stress (Gerdes, 1994). Life transitions, such as moving away from the home environment to college, can create valuable opportunities for growth and change while also potentially heightening self-doubt and disappointment and even encouraging self-defeating habits (Hicks, 2015). Additionally, whether students live on or off campus, this transition period is filled with many firsts, for example living independently, learning to manage finances and developing decision-making skills (Darling et al., 2007, p. 16).

Tinto (1987, 1993) argues that students transition more effectively when they are able to navigate through three stages of development: separation, transition, and identification. Hicks (2015) suggests that the separation stage is the time during which students distance themselves from their pre-college identities and in turn they may then require some personal transformation and potentially some rejection. Consequently, students may struggle as they then experience conflicting emotions when separating from their familiar support systems for the first time (Larose, 1998; Mounts, 2004). Hence, according to Chickering (1996), the transition to college is marked by complex challenges in the emotional, social and the academic adjustment.

### ***Personal Context***

As a researcher and professional within the higher education industry, the researcher has been impacted greatly by this topic of study for many reasons. For the past 12 years, in the role of student affairs, specifically student affairs, the researcher has been working closely with students who have experienced mental health struggles that have

impacted many areas of their lives including the overall quality of life, academic achievement, physical health, and relationship. The researcher has also seen first-hand, the impact related to student retention and the idea of academic “unreadiness”. Many college students whom the researcher has worked with shared that their college transition was significantly impacted by their own mental health concerns. The researcher is passionate about sharing this study and developing a better understanding around this topic to help higher education professionals be more effective when working with college students who may have mental health challenges. If current trends continue, many more students will enter college with mental health concerns and/or challenges. Early intervention, referral to appropriate resources and support structures can be crucial to the success of these students. The goal of this study was to hear the voices and experiences of these students and to enhance the researcher’s ability to see through their eyes versus influencing any unconscious bias.

### **Study Purpose**

The purpose of this study was to examine the college transition experience of first-year college students who self-identified with mental health challenges. Specifically, the experiences of first year undergraduate college students during the transition year (first year) at a private university in the metro Denver, CO area, with approximately 1464 first year undergraduate students (total undergraduate population was 5000) was the focus of this study. The intent of this study was to describe the college transition experience, applying facets of the theoretical framework from Schlossberg’s (1984) transition theory. As discussed, this theory focuses on how individuals cope with

transition and furthermore provided a framework in examining how students with mental health challenges experience their transition to college and how such experiences are impacted by the campus environment and support structures that are in place. This approach provided a framework and guided the research methodology to better recognize how the study participants described their transition into college and how that experience was impacted by the campus environment and support systems.

### **Research Questions**

Three central research questions guided this study, and each are discussed along with a brief rationale. The first question was: How do first year undergraduate college students, who self-identify with mental health challenges, perceive their transition into college? First year undergraduate college students can have many challenges with the transition from high school to college especially when related to mental health (Yazedijian, et al., 2008). This question seeks to understand the perceptions students have when they transition into college and also have mental health challenges.

The next question was: What are the elements that contribute to a successful transition for first year undergraduate college students who self-identify with mental health challenges? This question further explored the elements in which contributed to a more positive and successful transition for the participants. This question was developed to determine any additional support structures and/or resources that may have helped with the transition process.

The final question was: How do first year undergraduate college students, who self-identify with mental health needs, perceive the existing (and needed) support

structures at the institution as it relates to their transition? Much like the last question, this question sought to understand the existing support structures that were in place to aid in the transition process and furthermore look at the perceptions in which students had about the support structures, including resources, faculty support, staff support, etc.

These three questions worked together with the overall purpose of the study and examined how first year undergraduate college students who self-identified with mental health challenges experienced their transition process from high school to college. When considering the research questions, there was a desire to better understand the lived experiences regarding the transition process for first year undergraduate college students who self-identified with a mental health issue. Therefore, analyzing the participants lived experiences further identified the meaning of the experiences and explored concepts from a new and different perspective (Creswell, 2014).

The questions stemmed from the problem of this study which was designed to investigate the impact of the college transition process of first year undergraduate college students who self-identified with mental health needs. By enhancing the understanding around these questions, strides can be developed to better understand how students with mental health needs experience their transition into a college setting and furthermore how this experience can be impacted by the campus environment. Together, the purpose, problem and questions can work collectively as the foundation for this study.

### **Community Partner**

The audience for this study includes, but is not limited to, higher education institutions, mental health professionals, administrators, faculty and staff. The selected

community partner for this project was a small private higher education institution. Through this partnership, the researcher had access to the participant group of first year undergraduate students during the fall 2017/2018 academic year. The study took place specifically during the spring 2018 quarter, through planning, verbal and written agreement from the community partner (Appendix A). The community partner is committed to this research and confirmed with the research the appropriate approval and permission that the research is important in the field of higher education as related to mental health and transition. Documentation of the partnership can be found in (Appendix A).

### **Research Methodology**

Through the framework of Schlossberg's Transition Theory, it is possible to better understand transition experience of first year undergraduate student with mental health challenges. Therefore, this study utilized a mixed methods investigation collecting both quantitative data and qualitative data to more fully understand each question which drove this study (Creswell, 2014). Therefore, the research methodology that best aligned with the study design was an explanatory sequential mixed method design to obtain a deeper, fuller understanding and better respond to the research question driving the study (Creswell, 2014). A full description of the specific methodology utilized for this study will be discussed in Chapter Three. First, an anonymous one-time survey was distributed to participants who were first year undergraduate college students who all self-disclosed with mental health challenges. The online survey asked participants closed ended questions for the quantitative analyses. Creswell (2014) suggests, "In this design, the

investigator typically collects both quantitative and qualitative data at the same time and then integrates the information into the interpretation of the overall results” (p.15).

The follow-up semi-structured interviews moved the study into an explanatory sequential model as three participants were interviewed using a pre-developed interview script and built “on the results of the survey to further explain the in more detail with the qualitative research” (Creswell, 2014, p.15). Through this method, there was an interest in identifying how complex interpretations are built out of simple units of direct experiences (Creswell, 2014). This methodology was chosen to provide a comprehensive account of lived experiences from which general meanings can be derived (Creswell, 1998). Creswell’s (2014) design was used to guide this research to understand the experiences of the participants.

The expected outcomes for this study include both the statistical analyses and the emergent themes which developed, providing a mixed-methods approach to thoroughly answer each of the research questions which guided this study. This study was designed to better understand and describe how students who self-identified with mental health challenges experienced the transition from high school to college. For this study, there were two selections of data that were used. First, an email survey was distributed to first year undergraduate college students who self-identified with mental health challenges. Then, willing participants were interviewed in a semi structure conducted interview. The data was reviewed thoroughly with the four Ss from Schlossberg’s Transition Theory at the forefront. The complete methodology is discussed in Chapter Three, and data analyses are discussed at length in Chapter Four.

The proposed implications for this study could impact future research and practice within higher education. For example, universities could utilize the data found in this study to implement practice to better support the first-year transition process for students who self-identify with mental health challenges. Additionally, this research could help to inform better transition practices in understanding Transition Theory. This theory focuses on how individuals cope with transition and could provide an institution a better framework to understand how students with mental health needs experience their transition to a college setting and furthermore how this experience is impacted by the campus environment.

### **Theoretical Framework**

As discussed, the intent of this study was to understand and describe the college transition experience of FTFY college students who self-identified with a mental health challenge. Based upon the results of this study, Schlossberg's (1984) Transition Theory provided a theoretical framework to inform the methodology, analysis and findings. This approach provided a framework to better recognize how the study participants described their transition into college and how that experience was impacted by the campus environment and support systems and further influences by Schlossberg's four Ss of Situation, Self, Social Support and Strategy. Schlossberg (1984) defines a transition as "any event or non-event that results in changed relationships, routines, assumptions, and roles". When a transition occurs, a process takes place as an individual integrates changes into daily life.



There are four aspects of a transition that affect how well individuals deal with change. These aspects (named the 4 S System) are Situation, Self, Support, and Strategies (Schlossberg, 1984). Situation examines the features of a transition and how they may influence its significance to the individual. The Self is composed of an individual's outlook on life, as influenced by personal characteristics (including demographics, such as socioeconomic status) and psychological resources. Support refers to the resources available to people (Schlossberg, 1984). Finally, Strategies are defined as actions that individuals take in response to transitions. By purposefully integrating these four aspects into the Appreciative Advising model, advisers can effectively empower adult students to be successful in college (Schlossberg, 1984).

***Transition Theory: Schlossberg***

Gerdes and Mallinckrodt (1994) examined the college transition as a key variable for understanding a student's decision to leave or remain in college. Their findings support that adjustment and early integration in campus life are "at least as important as academic factors in student retention" (p.286). Consequently, as students become socially and academically integrated into their educational career and then experience more success, they become more committed to individual long-term goals, thus leading to higher rates of graduation from college (Tinto, 1993). The transition from high school to college is acknowledged as an important time for students as they become integrated into the college lifestyle. As the high school to college transition is a significant experience that impacts retention, it is essential to better understand the lived experiences of students who experience such a transition (Schlossberg, 1984). Transition theory was first

introduced by Nancy K. Schlossberg (1984) to provide a framework that could help facilitate an understanding of adults in transition and then lead them to the help they needed to cope with the ordinary and extraordinary process of living (Evans et. Al, 2010). Schlossberg's (1984) theory of transition framework provides a needed model for better understanding the experiences of students in transition. It is also important when looking at Schlossberg's (1984) transition theory to look at ways in which students are working with faculty, staff and administrators to address mental illness. Despite the increased awareness of mental health challenges of beginning college students, there is a gap in the literature which implies the importance of the transition experience and the importance of the care of students who experience mental health challenges once they attend college.

More on the theoretical framework and additional resources will be discussed throughout Chapter Two. The study was intended to provide a basis for a more informative understanding of the phenomenon of the transition experience as relate to mental health struggles. The findings of this study shed light on how this population experienced the high school to college transition. It was the hope that the findings would provide additional context to further impact college support and mental health providers at the college level in order to develop or improve the high school to college transition programs for this unique population of students. Additionally, another goal of this study was to provide insight into how first year students entering college for the first time with self-identified mental health challenges may find the information presented useful when deciding what questions to ask when choosing colleges.

Finally, it was the intention that this study could have significant implications for future research. As stated, the focus of this study was to examine the experiences of a specific first time, first year student population, of the high school to college transition experience that was focused on students who self-identified with mental health challenges. Further studies may include examining second, third-, and fourth-year students as this topic relates to their yearly ongoing college transitions. Such a study would expand the research regarding how who students self-identify with a mental illness experience all levels of their years in college. Other potential studies may include examining the experiences of similar first year undergraduate college students with mental health challenges based on race, gender or socio-economic status. It would be helpful to understand how such variables, combined with mental health challenges may impact the college transition experience.

### **Definition of Terms**

**Retention** - the outcome of how many students remained enrolled from fall to fall based upon the successful completion of a student's academic goals of degree attainment. Students who meet the clearly defined educational goals include whether they are enrolled in course credits, career advancement, or achievement of new skills (see, e.g., Tinto, 1993; Levitz, 2001).

**Transition** - any event, or non-event that results in changed relationships, routines, assumptions, and roles (Schlossberg, 1984).

**Mental Health** - an individual's cognitive, behavioral, emotional and social well-being which can affect daily life experiences including how we think, feel, and act. It also

helps to determine how individuals recognize their abilities to cope with relationships, the normal stresses of life, work, productively and fruitfully and make a contribution to their communities (see, e.g., Mowbray, 2006, Wang, et al., 2005; Werchsler, et al., 2003).

**First Year Undergraduate Student** - a student who has had no prior postsecondary experience attending any institution for the first time at the undergraduate level (IPEDS Glossary, 2019-20).

**First Year Seminar Mentor Program (FSEM)** - The First-Year Seminar Program is an introduction to the intellectual life of the University. This course is offered in the Fall quarter with small class sizes. Each course is taught by a FSEM faculty member to enable students to engage with faculty in the exploration of challenging topics and lays the groundwork for extraordinary academic and personal growth (FSEM Program, Undergraduate Programs, 2018).

### **Delimitation of the Study**

The purpose of this research was to examine the college transition experience of first year undergraduate students who self-identified with mental health challenges and provides important findings to the field of higher education, including undergraduate transition programs, and support for students who experience mental health challenges. However, the researcher confirms that there are some flaws and limitations to this study.

One of the main delimitations for this study was the low response rate. Due to the purpose of the study itself, the researcher chose the participants as first year undergraduate students. The total sample size of 47 participants survey respondents and 3 semi structured interview respondents, was quite low, 5.22%. Overall, the total number of

students who received the survey was approximately 900 students out of the 1464 total number of first year undergraduates. It is important to note that the survey sample is not representative of the entire first year population at the institution.

### **Chapter Summary**

As noted, the awareness of mental health struggles of college students has become a critical and a somewhat complicated issue within higher education. While discussions have continued as to how to best address mental-health needs of students, the hope is that turning the focus and better understanding these experiences may provide better insight into some of the transition challenges that may occur. Additionally, understanding how the high school to college transition experience is as related to mental health struggles, may provide further insight as to how higher education professionals may be able to better support this population.

## **Chapter Two: Literature Review**

### **Introduction**

Due to the various avenues of scholarly insight that this research reflects, the literature review section will cover four main topical areas: the college transition experience of college students, the prevalence of mental health challenges for college students, and an overview of the conceptual framework from Schlossberg's (1984) Transition Theory and how it relates to the purpose of this research, and a conclusion. Each of these topical areas sets the stage for this study by providing context to the current status of self-regulated mental health challenges as they relate to the initial college transition experience.

While the impact of college transition on students has been widely documented, less research has focused on the impact of mental health challenges as related to the transition processes (Benton et al., 2006; Gallagher, 2012). Mental health challenges are a growing concern on college campuses (Benton, et al., Gallagher, 2012). The rise in concern is likely the result of recent national tragedies and the increase in numbers of students with serious mental health challenges identified on college campuses (Benton et al., 2006; Gallagher, 2012). The purpose of this study is to examine the college transition experience of first year college students who self-identify with mental health needs. In essence, this chapter will provide a deeper understanding of challenges relating to college student mental health and transition processes.

In the first section of the literature review, the college transition experience of first year college students will be discussed. This section consists of a brief review of key points to illustrate the college transition experience, the role of support structures in the college transition process, and the experience of transfer students enrolling into another college. Next will be a description of the impact of support systems that includes parental influences as related to the college transition experience. Findings in the literature related to the impact of mental health challenges for the college student transition and prevalence of mental health challenges and the college transition experience for first year undergraduate college students will then be addressed. Finally, an overview of the conceptual framework from Schlossberg's (1984) Transition Theory will be covered at the end of the literature review.

The research questions for this study include: How do first year undergraduate college students who self-identify with mental health challenges perceive their transition into college? What are elements that contribute to a successful transition for first year undergraduate college students who self-identify with mental health challenges? How do first time, first year college students who self-identify with mental health challenges perceive the existing support structures at a small private university as such structures relate to their transition process.

## **Exploration of the College Transition for Students**

### ***Expectations of First Year Undergraduate College Students***

It is essential to look at the factors that influence a college student's experience as related to the transition process. Factors that influence a college student's transition experience includes students' expectations and how those expectations may impact

transition, as well as strategies students develop to manage the transition to college (Mounts, 2004). For first-time, first year students, expectation of college may match the reality of college life (Mounts, 2004; Keup, 2007; Huh et al., 2005). If “a match” is found, these students are more likely to have a successful transition experience (Mounts, 2004). Student’s expectations focus on interpersonal interactions and relationships, living in the residence hall, studying, and a new range of freedom (Mounts, 2004). With this change, they expect high school relationships to fade as they develop new, more meaningful college relationships (Mounts, 2004). Laanan (2006) suggests that it is essential to address the needs of students in the midst of such a change. Therefore, this requires a full understanding of today’s students and what they bring and expect from new college experiences. Specifically, one author (Mounts, 2004) suggests that most students expect, once in college, to limit their extracurricular involvement and focus on adjusting to their new environment. Often times, students also anticipate that college will be a time of exploration and personal development including much more independence (Mounts, 2004). They also expect more freedom in relation to personal choices and social relationships but not in relation to the overall academics (Keup, 2007).

Additionally, many students may experience a change in family relationships (Mounts, 2006). Although, parental influences will be discussed later in the literature review chapter, it is important to note this influences student experience as related to the change students experience when leaving their families. Relationships with parent’s shift from one that was more controlled by the parents to one that is less restrictive (Keup, 2007). Mounts (2006) also suggests that students traditionally develop more meaningful



friendships, but that the process could take longer than expected. However, once students develop a meaningful network of friends on campus, it is considered to be one of their greatest transition successes (Keup, 2007).

Conversely, while college students expect that roommates will serve as a support system during their transition, they may have negative experiences with their roommate/s which could potentially have a negative impact on the level of satisfaction with their first-year college experience (Keup, 2007). First year college students may also learn that this new freedom means additional responsibility for academics than what they had experienced in high school (Kuh et al., 2005). Keup (2007) suggests that balancing social life and the academics is in an ongoing challenge.

One study indicates that college transition could generate many challenges in which students must then learn to manage these challenges (Yazedijian, et al., 2008). Students often must develop new adjusting and coping strategies in order to adjust to college life and modify their understanding of what it takes to be successful in college (Yazedijian, et al, 2008). For example, Clark (2005) suggests if a student is having difficulties in a first-year writing class in college, they may seek out a tutor as a strategy. College students may also develop strategies to seize opportunities presented to them (Kuh et al, 2005); some students perceive extracurricular activities such as becoming a peer mentor as an opportunity to reach a desired goal (Kuh et al, 2005). However, Clark (2005) suggests that students must evaluate their courses and schedule to make sure they can accommodate involvement in these activities.

## **Support and the Transition Experience**

In Tinto's (1993) model of college student transition, he suggests that once students matriculate into college, it is the social and academic environment of the institution that shapes their commitment to that institution. Therefore, if students are not engaged and integrated into the values of the institution, they will not develop the commitment needed to persist to graduation (Tinto, 1993).

Most first-time, first year students enter into a campus environment quite unknowingly and have little idea on what to expect and how the college environment can affect their lives (Banning, 1989). Banning (1989) proposes because an environmental transition can be very stressful for students, the more similar the old environment can be to the new environment the more likely it would be for a successful transition. An environmental transition can be very stressful for first year undergraduate college students. Therefore, there is an increased likelihood of student success as related to the transition process (Banning, 1989).

### ***Support Systems: Parent and Family Engagement***

One source of student support is parental support. Parental support is often provided in the form of financial and emotional support (Mac Iver, M., et al, 2015). Students who have limited access to their guardians may move toward independence more quickly (Karp, 2004). Christie (1991) suggests that parents can promote their student's integration by encouraging their student to become more involved with on campus activities. On the contrary, parental involvement could also hinder a college student's social integration (Christi, 1991). For example, one author proposes that parents

who live close to the university in which their student is attending and who require their student to live at home, could prevent the student from being integrated into campus life (Christie, 1991). As stated, parental influence can play a role in the college transition process for students.

Postsecondary institutions currently find themselves caught in the changing flow of defining parent and family engagement on the national level (Barton, et al., 2004). One study suggests that terminology in reference to parental engagement is experiencing a paradigm shift, as researchers trace “involvement” to deficit models of parenting by asserting that parents who do not participate in sanctioned and formalized ways are not “involved” in their child’s education (Barton, et al., 2004). As such, there has been a shift from parent and family involvement to parent and family engagement, wherein “the latter focuses more on the interaction of space, capital, experiences, resources, agents, etc.” (Barton, et al., 2004). Fundamentally, Barton, et al. (2004) argue that engagement needs to be understood through a parent’s presence in their children’s schooling, regardless of whether that presence is considered in formal or informal spaces. Furthermore, the authors recommend that parents engage in dialogue with their child that utilizes their life experiences and cultural capital in order to inform the schools’ cultural world (Mac Iver, M., et al, 2015).

Parent and family engagement were additionally found to have an impact on high-risk behaviors (Keup, 2007). Small, et al. (2011) found that compared to days when students did not communicate with parents, days when students communicated with parents for more than 30 minutes, they consumed 20 percent fewer alcoholic drinks.

Remarkably, Small (2011) found that students who communicated with parents for more than 30 minutes demonstrated 32% less likelihood to engage in heavy drinking. As a result, the authors highlight the benefits of parental interaction on student health outcomes (Small, 2011).

Many times, the adjustment to college life can prove the most challenging component for students to manage (Keup, 2007; Small et al., 2011; Kenny, 1991; & Barton et al., 2004). However, recent research has highlighted the positive impact that parents can have in easing students into this process, particularly in relation to attachment theories (Kenny, 1991). Kenny (1991) confirmed that for the securely attached adolescent, leaving home for college is likely to be perceived as an opportunity for environmental exploration and mastery. If parents remain important as a secure base, the college student is able to view them as still available as a source of support when needed in a way that does not threaten but supports the development of autonomy (Kenny, 1991). Additionally, Kenny (1991) argued,

The heavy emphasis on separation-individuation as the key dynamic in college adjustment was a male-centric view of development and that women's development of independence occurs best in a relational context, in which strong ties with others are maintained. From this point of view, the goal of development is interdependence, not independence (Mattanah, et al., 2004).

Mattanah, et al. (2004) examined separation in relation to parental attachment and it was found processes demonstrate a mediational affect in which a history of secure attachment leads to better feelings of separation, which further leads to better college adjustment. Consequently, these studies suggest that students adjust better if they maintain close connection with their families, which leads to the feeling that it is safe for them to explore. This becomes particularly important for students from marginalized

backgrounds (Mattanah et al., 2004). In addition, Inkelas et al. (2006) reported that “the constructive inclusion of parents in the educational process may serve to not only boost students’ aspirations but diminish the negative effects of college culture shock.”

However, Harper, et al. (2012) warned that adjustment outcomes vary across race and ethnicity, underscoring the fact that parental contact and involvement varies across demographics. In turn, this finding highlights the critical nature of intentionally tailoring the design of orientation and program elements to serve specific populations.

While the impact of the college transition on students has been widely researched, there has been little research on the impact mental health challenges have as related to a student’s transition process (Karp, 2004). Karp (2004) examines the challenges and opportunities associated with the transition process for students. Specifically, Karp (2004) suggests that the circumstance of children leaving home can mark a transition into a more distinct parent role and further calls for the interpretation of a student’s fundamental life role. Another author suggests that there is general recognition that a child’s departure would likely alter the equilibrium of a family’s home life in unpredictable ways (Bassoff,1988).

### ***Peer Support***

Peers can provide both social and academic support for college students (Yazedijian, et al., 2007). The social support of peers increases a college student sense of engagement to the institution (Yazedijian, et al., 2007). Similarly, Pittman et al. (2008) suggest that peer to peer relationships could enhance academic support by students supporting and encouraging one another’s academic achievements.

As previously indicated, Keup (2007) suggests that high school friendships and peers could provide early support for students who do not have college connections. Essentially, without peer connections, students could experience additional loneliness and isolation during the early stages of the college transition process (Keup, 2007). Some of this isolation could be alleviated with students making early connections with peers in their living environments, classroom settings, and through extracurricular activities (Yazedijian, et al., 2007). Alternatively, for other students, high school friendships posed a limitation for students when trying to develop new friendships on campus (Pittman, 2008). Nevertheless, positive friendships for college students are linked with lower problem behaviors such as stress, anxiety and depression (Pittman, 2008).

### ***Institutional Support***

Support from institutional personnel is also a factor in the transition process for college students (Kuh, et al., 2005). Supportive relationships with university personnel such as faculty, staff advisors, and teaching assistants, generally provide a supportive campus environment that aids in the transition process for college students (Keup, 2007). Even on a large campus, Kuh et al. (2005) suggests that students believe a friendly atmosphere can make the campus feel much smaller and more welcoming. Mounts, et al. (2006) indicate that college level administrators have created institutional programs and policies to increase the likelihood that students will adapt to the campus environment. Examples of some of these programs include living and learning communities, co-curricular opportunities, experiential learning, and clubs and organizations (Mounts et al., 2006). Perhaps all colleges and universities can improve the quality of their teaching and

student learning especially in the first year of college (Kuh et al.2005); but the challenge is figuring out how to do it. The DEEP (Documenting Effective Educational Practices) project is such example. Kuh et al., (2005) studied the successful transition programs at DEEP institutions. The DEEP project focused on discovering and describing what strong performing four-year colleges and universities do to foster student success citing categories of reasonable levels of student engagement, satisfaction and educational attainment (Kuh et al., 2005). The two-primary criterion for selecting the 20 schools in the study were higher than predicted scores on the NSSE (National Survey of Student Engagement) survey and higher than predicted six-year graduation rates determined by regression models, accounting for relevant student and institutional characteristics. A 24-member research team reviewed countless documents and interviewed more than 3000 people on these campuses and conducted observations in classes, studios and labs (Kuh et al., 2005).

The DEEP Project, an assessment to examine the everyday workings of a variety of educationally effective colleges, revealed strong indicators that promote student success (Walpole, et al., 2008). In looking at the DEEP institutions, the authors found that these institutions emphasize the importance of socializing students early on by creating a formalized way to incorporate students into their new environment (Walpole, et al., 2008). Successful transition programs introduce new students to the campus culture, institutional values, and educational and social environments of the institution (Walpole, et al., 2008). Additionally, the programs work with advising, residence halls, faculty, and campus resources. Other DEEP institution transition programs may include

early-warning systems to identify students at risk of dropping out, advising networks, mentoring, increasing accessibility of faculty, and creating networks for peers and residential environments in order to provide academic and social support (Kuh, et al. 2005). Whether students live on-campus or off-campus or involved in co-curricular activities, it is essential that they feel a sense of attachment and connection to the university (Yazedijian, et al., 2008). Social engagement through extracurricular activities is just as important to personal development and academic persistence as activities in the classroom (Kuh, 2005).

### ***Transfer Students***

With the increase in students transferring from community colleges to four-year institutions, researchers have begun to examine the unique transition experiences of transfer students (Flaga, 2006). Specific transitional needs of the “transfer population” include examining academic concerns, financial concerns, grades, family responsibilities, and work-related responsibilities (Lester, 2006). Additionally, transfer students recognize that the campus environment may be different and academic standards may be higher at a four-year institution than it had been at a community college (Flaga, 2006; Townsend, 1995). Such students find that the four-year teachers are more focused on research than on teaching, as faculty at the community college may have been (Flaga, 2006). Transfer students also tend to be more concerned about academics than social life activities (Townsend, 1995).

Often times, for transfer students, academic connections are made through group projects, attending faculty office hours, and class participation (Townsend, 1995). As



well, transfer students may connect to the physical environment by spending time on campus before and after class (Flaga, 2006). As transfer students become better adjusted to differences in a new institution and as they develop strategies to be successful in the academic, social, and physical environment, they become integrated to the campus environment and consider themselves students, not transfer students (Flaga, 2006).

### **Prevalence of Mental Health Challenges in College Students**

This study seeks to explore how new students with a diagnosed mental illness transition to college. The rise of mental health challenges is well documented in the literature (Kadison et al., 2004; Kessler, et al., 1995; Sharpe, et al., 2003; Patterson, 2004; Soet et al., 2006). Therefore, it is necessary to understand the increased prevalence of mental health challenges in recent years. Every year, about forty-two million American adults suffer from some type of mental health illness such as depression, bipolar disorder or schizophrenia (CDC, 2016). In 2011, The Substance Abuse and Mental Health Services Administration (SAMHSA) also reports that the growing prevalence of mental illness in the United States is increasing significantly (CDC, 2016). Research indicates that 1 in 5 adults have reported having a mental health condition, which translates to over 41 million Americans (CDC, 2016). According to the Centers for Disease Control (CDC, 2016) anxiety and depression are the two most common mental health disorders in the US. The CDC reports that the rates of youth depression have increased from 8.5 percent in 2011 to 11 percent in 2014 (CDC, 2016). Additionally, there appears to be a gender gap in incidence of mental health challenges. According to 2016 CDC data, the lifetime prevalence rate for anxiety disorders is 15 percent for women and 10 percent for men.

This indicates that anxiety is more common among women than men in both the college population and the general population (CDC, 2016).

Bipolar disorder also appears to be more prevalent in the US population but, however, appears more common in males, with men having an earlier age of onset when compared to women (CDC, 2016). The lifetime hospitalization rate for individuals diagnosed with bipolar disorder is close to 40 percent (CDC, 2016). Due to these staggering numbers, Munson et al. (2012) looked at the current state of mental health service as related to students. The authors suggest that young adults, specifically traditionally aged college students, are in a vulnerable position overall and there needs to be a better job diagnosing and treatment for such individuals (Munson et al., 2012).

### ***Mental Health and College Students***

Over the past two decades, there has been an increase of college students requesting help for a mental health issue (Gallagher, 2013). A recent survey found that college counseling centers are meeting with and treating more students with severe mental health diagnosis (Gallagher, 2013). Most of the research on students diagnosed with mental illness focuses on students who seek out appropriate resources and assistance at college health and counseling centers. In addition, a majority of college counseling centers reported an increase in students in crisis who required an immediate response and students with psychiatric medication needs (Gallagher, 2013).

Results from the National Comorbidity Survey (Kessler, et al., 2005) examined the social consequences of psychiatric disorders as related to college students. The authors present data from this survey empowering the relationship between preexisting

psychiatric disorders and subsequent educational attainment (Kessler, et al., 2005). Likewise, the study provides evidence that the early onset of psychiatric disorders is present in more than 3.5 million people in the age range of the National Comorbidity Survey who did not complete high school (Kessler, et al., 2005). This study also suggests that the proportion of school dropouts with psychiatric disorders has increased dramatically (Kessler, et al., 1995). Therefore, early onset psychiatric disorders can have a variety of adverse consequences. The overall results presented of this study implies a need for attention to treatment of mental disorders within the United States (Kessler, et al., 1995).

Kadison et al. (2004) proposes that students with a mental illness often experience social and academic barriers in college. Therefore, due the rising number of suicides on college campuses, there is a desperate need to better understand what can be done to prevent serious emotional and mental health problems among students (Kadison, 2004).

Results from research conducted over the past 20 years regarding prevalence rates of mental health challenges in the college population have varied significantly (Ibranim et al., 2012). Undergraduates experience depression, academic difficulties, and substance abuse symptoms at higher levels than graduate students (Kadison, et al., 2004). In a national survey, more than 50 percent of college students reported feeling so depressed that it was difficult for them to function during the past academic year (Arria et. al., 2008). Moreover, Arria et al. (2008) suggests that there is an increasing number of college students that are reported using non medically prescribed stimulants during the past year. Therefore, this suggests that there is a need to address this issue on college

campuses. According to the study, students who were using stimulants also had a lower GPA, spent less time studying and completing schoolwork (Arria et al., 2008).

As noted, there are some significant differences between different groups of students with mental illness. Ibranim et al. (2012) found that there were higher rates of depression among female college students when compared to male college students. With regard to student age and depression rates, there was no clear consensus within the study (Ibranim et al., 2012). Another study by Eisenberg et al. (2007) examined anxiety levels and prevalence rates among females. It showed that females had higher anxiety rates at almost two times that of male students. It was also discovered that females are most likely to be dealing with depression and eating disorders and twice as likely as men to be taking medication (Mowbray, 1999). Eisenberg et al. (2007) administered online surveys in 2007 and 2009 to 175 students from 26 campuses. Findings indicated a strong prevalence of depression (17 percent), panic disorder (4 percent), anxiety (7 percent), suicidal ideation (6 percent), and non-suicidal self-injury (15 percent) (Eisenberg et al., 2007).

Results from other studies indicate that mental health problems are significantly associated with race/ethnicity, sex, relationship status, campus residency and financial status (Eisenberg et al., 2007). Sakuro (2000) suggests that other differences related to mental health challenges are driven by ethnicity and race. For example, international students report mental health distress at the same level as domestic students but are significantly less likely to have sought or currently be seeking mental health services (Sakuro, 2000). One study indicated that African Americans report less mental health

distress and academic stress when compared to White and Asian-Americans (Sakuro, 2000). Furthermore, sexual orientation could also be a factor (Soet et al., 2006). LGBT (lesbian, gay, bisexual and transgender) students are three times as likely to report depression (Soet et al., 2006) and are more likely to take medication than other demographic groups. (Soet et al., 2006). Other differences are driven by academic status (Aggarwal, 2012). Graduate students are twice as likely to be dealing with depression as much as undergraduates (Kadison, et al., 2004). Nevertheless, one study suggest that undergraduates rate their level of distress higher then graduate students (Kadison, et al., 2004).

In addition to depression and anxiety, suicide is also a critical issue for college students (Bearteaux, 2015; Drum et al, 2009; Eisenberg et al., 2007; Gallagher, 2013; Kadison, et al., 2004; Ibranim, et al., 2012; Sakuro, 2000; Tinklin et al., 2005 & Yazedijian et al., 2007). The most recent results in 2013 from the National College Health Assessment indicate that suicidal thoughts and attempts continue to be an extreme concern of college students (Gallagher, 2013). Alarmingly, one study examined the prevalence of college student suicide and found that of the students who had attempted suicide in the prior 12 months, 23 percent of undergraduates who reported an attempt indicated they were currently considering making another attempt (Gallagher, 2013). The study also indicated that students reported that their periods of serious suicidal ideation often lasted for one day or less (Gallagher, 2013). The American College Health Association suggests that there is an increased rate of students who have seriously considered suicide and attempted suicide (ACHA, 2019). The ACHA also suggests an

increase of overwhelming anxiety and depression over the past 12 months (ACHA, 2019).

Overall, the current state of mental health of college students is shown in the large number of students who have sought counseling as well as the severity of the challenges being presented (ACHA, 2019). This review suggests that without appropriate treatment, the number of mental health challenges are expected to increase (ACHA, 2019). Finally, for those working in a higher education setting, it is important to understand the impacts of mental health challenges as related to students' transition process to college (Yazedijian, et al., 2007).

### ***Mental Health Needs: Barriers and Stigma***

While research from college counseling centers demonstrates that there is an increase in the number of students seeking treatment, students are not receiving appropriate psychological support (Drum et al, 2009). The Healthy Minds Study, designed specifically for colleges and universities, relies on gathering the diverse perspectives of students across campus (Healthy Minds Network, 2017). The study is an annual web-based survey study which examines mental health, service utilization, and related issues among undergraduate and graduate students (Healthy Minds Network, 2017). Since its national launch in 2007, the Healthy Minds Survey has been implemented at over 150 colleges and universities, with over 175,000 survey respondents (Healthy Minds Network, 2017). The study reported that just under 50% of students taking the survey screened positive for major depression disorder or anxiety disorder

(Drum et al, 2009). Alarminglly, these students reported not having received any treatment in the past year (Hunt et al, 2010).

Bearteaux (2015) suggests that there are barriers to educational experiences for struggling students when transitioning into college. For example, negative stereotypes and stigma can create an overall negative environment and negative consequences when students disclose their diagnosis (Bearteaux, 2015). One author indicates that students are aware of the stigma related to mental illness, which then makes them very cautious about sharing their diagnosis (Tinklin et al., 2005). Some students also feel that campus culture does not allow for differences or for students to admit they are then experiencing difficulties (Tinklin et al., 2005). The academic environment may also exacerbate a college student's challenges (Bearteaux, 2015; Kadison et al., Tinklin et al., 2005). For example, the flexible schedule that is part of typical college experiences could eventually create more stress for students that need stability and structure (Kadison et al., Tinklin et al., 2005).

### ***Access to Resources***

Much of today's research on students diagnosed with mental illness focuses on students who seek out assistance at college counseling centers (Bearteaux, 2015; Drum et al, 2009; Eisenberg et al., 2007; Gallagher, 2013; Kadison, et al., 2004; Ibranim, et al., 2012; Sakuro, 2000; Tinklin et al., 2005 & Yazedijian et al., 2007). On many college campuses, counseling centers are reaching out beyond therapist's walls by working with faculty to include wellness awareness in their interactions with students (Kadison, et al., 2004). Kraft (2011) states that the role of the college counseling centers is to see and treat

individuals. However, counseling centers are going beyond their walls by working with faculty and staff for trainings, consultation, outreach/prevention, and crisis work (Kraft, 2011). This could be a response to the fact that some faculty and staff are perceived as unsupportive as related to mental health challenges and college students (Tinklin et al., 2005).

One author suggests that often times staff members who are not of a clinical background may dismiss students' experience as simple stress that all students may experience, when in fact there could be a severe mental health issue present (Tinklin, et al., 2005 & Kadison, et al., 2004). The complexity of a college student's mental health has been a challenge for not only the student to manage but also for staff, faculty, and other administrative roles of support (Tinklin, et al., 2005 & Kadison, et al., 2004). This overall situation poses a problem for student to access resources in higher education (Tinklin, et al., 2005 & Kadison, et al., 2004). If there is a lack of coordination and communication on a college campus, students will often struggle with understanding how to access needed resources (Tinklin, et al., 2005 & Kadison, et al., 2004).

### **Schlossberg's Transition Theory**

Schlossberg's (1984) Transition Theory was the guiding theoretical framework for this research study by explicating the necessity of support for first year undergraduate college students who self-identify with mental health challenges, in facilitating successful transition. For the purpose of this research, the transition process was examined which occurred for students entering college. Additionally, this theory also examined the transition process for college students who self-identified with mental health challenges.



As a result, Schlossberg's theory was the theoretical framework in looking at the transition experience of students who self-identify with mental health challenges.

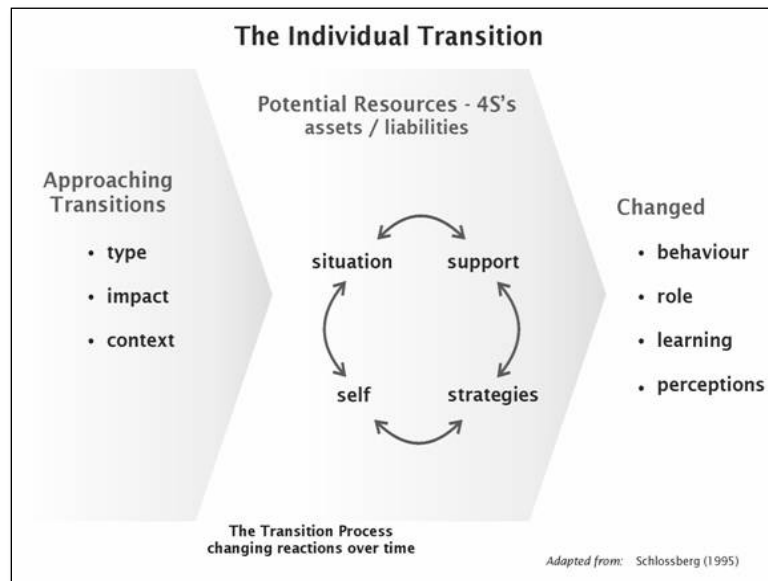


Figure 2.1: Schlossberg (1984) Transition Theory

In examining Schlossberg's (1984) Transition Theory, Goodman, et. al. (2006) defines a "transition" as any event or non-event that results in changed relationships, routines, assumptions, and roles. The process and new experiences of starting college can impact the student, parents and family members. However, as Goodman et. al. (2006) suggests, these components can only be considered transitions by the individuals experiencing them. As such, if students, parents, and families do not perceive any relationship, routine, assumption, and/or role changes, they may not consider themselves as undergoing any transition (Goodman et al, 2006). Therefore, individual perception and/or lack of perception, defines transition. This notion becomes important when examining the college transition process overall. While many college students may anticipate transitional aspects of the college process, other aspects may not be anticipated at all (Goodman et al., 2006). These unanticipated changes can then impose stress and

possible mental health challenges, creating problematic circumstances for effective transition and development (Goodman et al, 2006).

Projected transitions are defined by the roles that occur within the scope of the unfolding life cycle (Pearlin & Lieberman, 1979). Fundamentally, these transitions expectedly occur at particular times during one's lifespan. For many, the college transition is one of these anticipated transitions. However, while many students have planned for this transition for a long while, others may have only begun planning for it upon entering high school (Pearlin & Lieberman, 1979). Goodman et al., (2006) propose that as a result, the concept of "relativity" applies here; that is, an anticipated change for one person may be unanticipated for another. For example, parents and families may anticipate their child going to college, while the student perceives college as a dream (Goodman et al., 2006). In contrast, a student may work hard to attend college, while parents assume that the student will obtain a job upon high school graduation instead of attending college (Goodman et al, 2006). In both of these cases, an anticipated transition may only be experienced by a portion of the family. As a result, these opposing perceptions will likely require critical attention in order to effectively manage transition as a cohesive family unit.

In the college transition, often times, higher education professionals expect parents and families to simply cut ties with their student when dropped off for college (Goodman, 2009). This expectation negates the value of student support systems and minimizes what may be felt as an extremely difficult and substantial change (Goodman, 2009; Yazedjian, et al., 2007). As a result, it becomes clear that institutions must begin

recognizing their responsibility in facilitating such transitions by designing and implementing more programmatic efforts directed at guiding family change. This becomes especially true when considering the dramatic and well-documented trend of increased mental health challenges at the college level (Yazedijian, et al., 2007).

Situation	Self	Support	Strategies
<ul style="list-style-type: none"> <li>• Triggers</li> <li>• Control (planned or unplanned transfer?)</li> <li>• Role Change</li> <li>• Duration</li> <li>• Previous experiences with similar transition</li> <li>• Concurrent Stress</li> <li>• Assessment</li> </ul>	<p><b>Personal/Demographic Characteristics</b></p> <ul style="list-style-type: none"> <li>• Socioeconomic Status</li> <li>• Gender</li> <li>• Age/Stage of Life</li> <li>• State of Health</li> <li>• Ethnicity/Culture</li> </ul> <p><b>Psychosocial Resources</b></p> <ul style="list-style-type: none"> <li>• Ego Development</li> <li>• Outlook</li> <li>• Commitment and Values</li> <li>• Spirituality and Resiliency</li> </ul>	<p><b>Needs:</b></p> <ul style="list-style-type: none"> <li>• Acceptance</li> <li>• Self-Esteem</li> <li>• Love and Physical Intimacy</li> <li>• Personal &amp; Work Connection</li> <li>• Stimulation and Challenge</li> <li>• Role Models &amp; Guidance</li> <li>• Comfort and Assistance</li> </ul> <p><b>Types:</b></p> <ul style="list-style-type: none"> <li>• Intimate Relationships</li> <li>• Family Units</li> <li>• Networks of Friends</li> <li>• Institutions/Communities</li> <li>• Convoy of Support (Kahn)</li> </ul> <p><b>Functions:</b></p> <ul style="list-style-type: none"> <li>• Affect &amp; Affirmation</li> <li>• Aid &amp; Honest Feedback</li> </ul>	<ul style="list-style-type: none"> <li>• What strategies is the student using that is impacting the transition?</li> <li>• How effective are current strategies in helping them cope with transition?</li> <li>• <b>3 Ways of Coping:</b> <ul style="list-style-type: none"> <li>• Modifying the situation (hope and optimism)</li> <li>• Controlling the meaning (reframing)</li> <li>• Managing stress after transition (selective denial)</li> </ul> </li> </ul>

Figure 2.2: Schlossberg's (1984) 4 S's (Goodman, et. al. 2006)

Schlossberg's (1994) Transition Theory lends itself to this research, as it enhances the understanding of the unique facets of the college transition process. Figure 2.2 outlines Schlossberg's four S's to demarcate the theoretical framework utilized for this research: situation, self, social support, and strategies. For the purpose of this research, it is important to note that all four of these components are relevant to transition, including, situation, self, support and strategies. This framework provides a concise direction for the study to think about how the four S's could impact the college transition experience as related to mental health challenges.

Related to situation, Goodman et al (2006) indicate that a situation impacts triggers, role change and previous experiences in looking at the transition process. It is necessary to incorporate this framework in order to really understand the impact of the situation the participants experiences. Self, defined as personal demographic characteristics of students plays a vital role in understanding the personal experiences, demographics and well-being (Goodman et al., 2006).

Goodman et al. (2006) indicates that support is a fundamental component in easing students through the college transition process. Goodman, et al. (2006) categorize support into four types, including intimate relationships, family units, networks of friends, and institutions and communities. First, family unit support can moderate the transition process if all members approach the shift with a shared vision and expectation. On the other hand, institutional support also plays a vital role in the transition process. In this case, university personnel such as faculty, staff, counseling center staff, and administration may all act within the role of institutional support. These constituencies have the knowledge and ability to clarify and guide the transition process as well as to assist in situations where transition may become difficult or complicated, such as for students with mental health challenges. See Figure 2.2.

Within the frame of support, Goodman, et al. (2006) also define four functions of support: affect, affirmation, aid, and honest feedback. Affect refers to “expressions of liking, admiration, respect and love,” affirmation refers to “the appropriateness or rightness of some act or statement of another person,” aid refers to “the exchange of things, money, information, time and entitlements,” and honest feedback refers to

reactions offered that might be perceived as negative as well as positive (Goodman, et al., 2006, p. 76). Each of these functionalities plays a critical role in the transition process for college students to further understand strategies students are using to impact the overall transition. See Figure 2.2.

### **Chapter Summary**

Equally important in examining transition are the strategies that individuals employ to process change. Goodman, et al. (2006) focus on the concept of coping when conceptualizing strategies. According to Pearlin (1978), three types of coping exist: responses that modify a situation, responses that control the meaning of a problem, and responses that manage stress in the aftermath of a problem. In addition to coping strategies, Lazarus (1984) classify coping into two primary categories: “instrumental or problem-focused behavior that aims to change the situation, and palliative or emotion-focused behavior that aims to help minimize emotional distress”. Further, the authors offer four coping modes: information seeking, direct action, inhibition of action, and intrapsychic behavior, which refers to “the mindsets that individuals use to resolve problems that arise”. While all four coping methods will inevitably emerge, utilizing strategies that are aimed at reducing stress at the time of the college transition will act as the primary guide scope for this action research.

In the methodology section, the researcher utilized Schlossberg’s (1994) Transition Theory in order to better understand the critical environmental variables and impact on the experiences of the students. The intent, based on the researcher’s data collection, was to further describe the college transition by looking at the conceptual

framework from Schlossberg's (1984) transition theory and better understand how individuals cope with transition. Additionally, the researcher recognized and discussed how students who self-identify with a mental illness experienced their transition into college and how that experience was further impacted by the campus environment.

## **Chapter Three: Methodology**

### **Introduction**

Chapter two provided a robust basis of research that suggests that the importance of the transition process from high school to college is vital in retaining students and it is crucial to understand how students with mental health challenges experience the transition. Additionally, the research suggests mental health awareness is indeed a critical issue for colleges to consider and ultimately address. This methodology chapter provides a detailed description of the research methodology, the research questions, the study's setting and participants, the instrument and data collection procedures, the data analysis, threats to reliability and validity within this study and the role of the researcher.

### **Study Purpose and Problem**

The purpose of this study was to examine the college transition experience of first year college students who self-identified with mental health challenges. The intended study participants were first year undergraduate college students during their transition year at a small private university in the state of Colorado in the Denver metro area. The theoretical framework from Schlossberg's (1984) transition theory was then used to better understand how such individuals cope with transitions. This theory focuses on how individuals cope with transition and provides a framework to better understand how students with mental health needs experience their transition to a college setting and how this experience is impacted by a campus environment. This approach provided a

framework to better recognize how the study participants described their transition into college and how that experience was impacted by the campus environment and support systems and further influences by Schlossberg's four Ss of Situation, Self, Social Support and Strategy.

### **Research Methodology and Study Design**

Strauss, et. al. (1998) defines methodology as “a way of thinking about and studying a social reality by using a method as a set of procedures and techniques for gathering and analyzing data”. The literature discusses that the transition into adulthood as a time of significant change and intense challenge to student's emotional health and well-being (Strauss, 1998). Additionally, research indicates that many students are struggling with mental health concerns like anxiety, depression, and substance abuse (Tinklin, et al., 2005). However, there appears to be a disconnect for these students to seek out support. For this study, an explanatory sequential mixed method research design was selected in order to explore and describe how first year undergraduate college students who self-identified with mental health challenges experienced the transition from high school to college. The researcher's intent was to explain the quantitative results with the qualitative data by utilizing this “two-phase model” explanatory sequential mixed methods approach.

#### ***Explanatory Sequential Mixed Methods***

The explanatory sequential mixed methods research approach was utilized for this study to further collect and analyze both quantitative and qualitative data. A mixed methods research approach suggests that mixed methods is research intentionally combining or integrating quantitative and qualitative approaches as components of the



research (Moerer-Urdahal & Creswell, 2004). For this study, the researcher selected this methodology because it best aligned to obtain a deeper, fuller understanding and better response to the research questions driving the study (Creswell, 2015). Specifically, Creswell (2015) suggests that this “two phase model” is to explain the quantitative results with the qualitative data. The quantitative data was collected first and then the qualitative data was then used to refine the results from the quantitative data.

### ***Rationale for Methodology Choice***

This methodology was selected in order to broadly explore and understand the experiences of first year undergraduate college students who self-identified with mental health challenges through Schlossberg’s (1984) Transition Theory to better understand the situations that impact the participants transition from high school to college. Plano (2011) suggests that explanatory sequential design consists of first collecting the quantitative data and then collecting the qualitative data to help to explain or elaborate on the quantitative results. The rationale for this approach is that the quantitative data and results provide a general picture of the research problem, more analysis and helps to refine and explain the overall research (Plano, 2011).

Ponce et al. (2015) suggests that the objective of an explanatory design utilizing sequential phases is to further describe the research problem in depth. Therefore, in order to do so, this approach first utilized a quantitative approach by way of the survey instrument (phase I) and then a qualitative approach through the semi-structured interviews (phase II) to deepen the findings of phase I. In this case, because the researcher wanted to answer in what way the qualitative data helped to explain the

quantitative results, the survey asked the participants questions related their socio-demographic characteristic, lifestyle, student life stressors, and health status (Hicks, 2007). Following the structured quantitative survey, the survey continued with an “opt in” semi-structured qualitative interview, to really understand the reasons for the participants survey responses and to further gauge how those answers related to their overall transition experience. The follow-up semi-structured interviews moved the study into an explanatory sequential model as three participants were interviewed using a pre-developed interview script and built “on the results of the survey to further explain the in more detail with the qualitative research” (Creswell, 2014, p.15).

Through this method, there is an interest identifying how complex interpretations are built out of simple units of direct experiences (Creswell, 2014). This methodology was chosen to provide a comprehensive account of lived experiences from which general meanings can be derived (Creswell, 1998). As shown in Table 3.1, each phase is identified with the corresponding procedure and outcome.

Table 3.1: Methodological Approach: Explanatory Sequential Model

Phase	Procedure	Outcome
(I) Quantitative (survey) Data Collection	<ul style="list-style-type: none"> <li>• Recruitment email sent to Faculty to distribute survey</li> <li>• Survey sent to students via Faculty</li> </ul>	<ul style="list-style-type: none"> <li>• Numeric Data from Survey results</li> </ul>
(II) Quantitative (survey) Data Analysis	<ul style="list-style-type: none"> <li>• SPSS Data Analysis                             <ul style="list-style-type: none"> <li>○ Descriptive Statistics</li> <li>○ Cronbach Alpha</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Participant Demographics</li> <li>• Descriptive Statistics</li> <li>• Examination of variables</li> <li>• Measure of internal consistency</li> </ul>
(III) Qualitative (interviews) Data Collection	<ul style="list-style-type: none"> <li>• Interviewees opt-in</li> <li>• Develop interview protocol</li> <li>• Conduct interviews with 3 self-selected participants</li> </ul>	<ul style="list-style-type: none"> <li>• 3 Interview participants</li> <li>• Interview protocol</li> <li>• Transcribed interviews and notes</li> </ul>
(IV) Qualitative (interviews) Data Analysis	<ul style="list-style-type: none"> <li>• Coding and Thematic Analysis</li> </ul>	<ul style="list-style-type: none"> <li>• Emergent themes</li> <li>• Codes and themes</li> <li>• Coding matrix</li> </ul>
(V) Integration of Quantitative and Qualitative Findings	<ul style="list-style-type: none"> <li>• Integration and explanation of quantitative and qualitative findings as related to theoretical framework of transition (Schlossberg)</li> </ul>	<ul style="list-style-type: none"> <li>• Discussion</li> <li>• Implications</li> <li>• Future Research</li> </ul>

### Research Questions

Three research questions guided this study, and each are discussed along with a brief rationale.

1. How do first year undergraduate college students, who self-identify with mental health needs, perceive their transition into college? As discussed in Chapter Two, first year undergraduate college students can have many challenges with the transition from high school to college especially when related to mental health challenges (Yazedijian, et al, 2008). This question seeks to understand the

perceptions students have when they transition into college and also have mental health challenges.

2. What are the elements that contribute to a successful transition for first year undergraduate college students who self-identify with mental health challenges?

This question further explored the elements in which contributed to a more positive and successful transition for the participants. This question was developed to determine any additional support structures and/or resources that may have helped with the transition process.

3. How do first year undergraduate college students, who self-identify with mental health challenges, perceive the existing (and needed) support structures at the institution as it relates to their transition? This question sought to understand the existing support structures that were in place to aid in the transition process and furthermore look at the perceptions in which students had about the support structures, including resources, faculty support, staff support, etc.

These three questions worked together with the overall purpose of the study and examined how first year undergraduate college students who self-identified with mental health challenges experienced their transition process from high school to college. When considering the research questions, there was a desire to better understand the lived experiences regarding the transition process for first year undergraduate college students who self-identify with a mental health challenge. Therefore, analyzing the participants lived experiences further identified the meaning of the experiences and explored concepts from a new and different perspective (Creswell, 2014).

## **Community Partner**

The selected community partner for this project was a small private higher education institution. Through this partnership, the researcher had access to the participant group of first year undergraduate students during the fall 2017/2018 academic year. The study took place specifically during the spring 2018 quarter, through planning, verbal and written agreement from the community partner (Appendix A). The community partner was committed to this research and confirmed with the research the appropriate approval and permission that the research is important in the field of higher education as related to mental health and transition.

It was also communicated with the community partner that in order to maintain confidentiality, Qualtrics Software was used to ensure protection of all participant data using the industry best standards (Qualtrics, 2019). Students who completed the survey were informed that the survey was anonymous, voluntary, and that results were not tied to their personal information.

## **Setting and Target Population**

The setting of this study was in the state of Colorado and the research took place within a private higher education institution in the metro Denver, CO area, with approximately 1,464 first year undergraduate students (total undergraduate population was 5,000). This location was selected purposefully as a result of the researcher's interest to understand the experiences of students related to transition into college and mental health within the higher education setting. The researcher gravitated towards this site based upon their own experience working at a small private institution. It was the

researcher's intention to explore the lived experiences of the student participants as they related to the research questions, specifically. Colorado is also the state in which the private higher education institution, the guiding research institution, for this study is located. The target population is defined as "the total set of individuals, objects, groups, or events in which the research is interested" (Frankfort-Nachmias & Leon-Guerrero, 2011, p. 17). For this study, the target population included first year undergraduate college students at a private four-year institution and were at least 18 years of age at the time of data collection. They were all enrolled full time during their first quarter of college. All students included in this study self-identified their mental health challenges prior to coming to college, some as early as their first year in high school.

### **Participant Criterion**

For the purpose of the participant criterion for the distribution of the survey questionnaire and the semi-structured interviews, the researcher utilized the criterion sampling approach in which participants meet predefined criteria (Patton, 2001). Criterion sampling involves selecting cases that meet some predetermined criterion or importance (Patton, 2001). For example, the researcher looked for participants that had a shared experience but varied in characteristics and their individual experiences.

Four criteria were utilized to determine if students were qualified to be selected for this study. The researcher included only participants who: (a) were first year undergraduate college students; (b) were enrolled in one of the 89 sections of the FSEM course; (c) indicated on the demographic portion of the survey they had experienced or self-identified with mental health challenges; and (d) were over the age of 18 years.

Additional considerations were utilized to express a balanced blend of both student demographics and experience as the sample group was anonymously selected. These included socio-demographic characteristics such as age, sex, race, marital status, living conditions, resident of Colorado classification, parental educational achievement and source of income. There were four major sections of the questionnaire; those sections consist of socio-demographic characteristics, lifestyle, student life stressors and health status (Hicks, et al, 2007). This sampling method was chosen because it was important that the participants share the same experience in order to understand the research problem or central phenomenon in the study (Creswell, 2013, p. 156).

### **Pilot Study**

A pilot study is one of the essential stages in a research project and is useful in providing the groundwork in research (Lancaster, et al, 2004). A pilot study, a small study to test research protocols, data collection instruments, sample recruitment strategies was essential in preparing for the overall study of this research (Lancaster, et al, 2004). Before committing fully to the methodology for this study, a pilot study was conducted. The purpose of this research was to examine the college transition experience of first-year college students who self-identify with mental health challenges. The data collected through this study included an online, structured survey titled “Health Behaviors, Self-Rated Health and Quality of Life Questionnaire”, developed by Hicks et. al (2007). Additionally, the pilot study concluded with optional participation in a semi-structured interview designed by the researcher. The pilot study was conducted in preparation to further describe the specific practical and methodological challenges emerging as well as

any modifications that were made for the main study. The implementation of this pilot study proved to be essential by finding issues and barriers related to recruiting potential participants, engaging the distribution of the structured survey and further having a better understanding of the perception of the survey questions.

As part of the confidential survey, the first question asked the participants in the pilot study if they self identify with mental health challenges. It was critical that the participants state that they had experienced mental health challenges. The beginning of the survey included a disclaimer stating that all answers will remain confidential, the survey will be voluntary, and that no individually identifying information will be used. Willingness to participate in this study was sought and obtained via the optional nature of participating. The survey questionnaire as well as the semi-structured interview included a statement asking respondents to agree for consent to participate in the study. It was important to note that the purpose of the overall research was to examine the college transition experience of first year undergraduate college students who self-identify with mental health challenges while, for this pilot study, the purpose of the study was to determine practical and methodological issues that may have emerged from the survey.

### ***Pilot Study Participants***

The pilot study consisted of three female participants, all graduate students, who agreed to participate in the pilot in order to further identify any potential flaws in the questionnaire and provide a better understanding of how to implement the survey; in this case administering the survey via an anonymous link. The criteria for participant selection included a person who was willing to take the online structured survey and was



interested in aiding the researcher in better formulating any methodical issues that may emerge. The three female participants also agreed to participate in a semi-structured interview following completing the survey (see Appendix E).

### ***Pilot Study Findings***

The findings of this pilot study informed the methodology in a few ways. This included a slight modification to the distribution of the survey, and the explanation of the consent form. Additionally, the pilot study resulted in removing the last nine questions from the original questionnaire that focused on addiction, substance abuse, and sexual activities. These questions did not help to answer the central research questions which include, (1) How do first year undergraduate college students, who self-identify with mental health challenges, perceive their transition into college? (2) What are the elements that contribute to a successful transition for first year undergraduate college students who self-identify with mental health challenges? (3) How do first year undergraduate college students, who self-identify with mental health challenges, perceive the existing (and needed) support structures at a small private university as it relates to their transition? And thus, the questions were eliminated from the study. Additionally, for the semi-structured interview portion, the pilot study informed the researcher to go beyond a casual conversation and furthermore explore student experiences of high school to college transition and the impact of mental health in a way that would provide ample time to focus and truly hear each student participant's unique story. Therefore, the questions were modified, as such.

## **Data Collection**

### ***Survey***

The researcher began with a partnership with the private institution in which the research took place to distribute the final survey to the participants (Appendix E). To explore the college student's experience of transition as related to mental health challenges, the researcher was granted approval from the University Institutional Review Board (IRB) to distribute the survey to First Year Seminar (FSEM) faculty during the spring 2018 quarter. The researcher was intentional in conducting this research study in the spring 2018 quarter (following the IRB approval), as faculty would have already established a mentorship relationship with their students. Permission was also gained from the appropriate leadership to distribute the survey.

Of the 89 faculty members who were teaching a section FSEM during spring 2018 quarter, 60 faculty members agreed to distribute the survey once to their students enrolled in their course section. The survey was distributed one time to the student participants by way of the faculty member. Therefore, a total of 900 first year undergraduate students out of 1,464 total undergraduates received the survey. The researcher provided an email template in which the faculty member could utilize to directly send to the student participants including the survey instrument link.

Upon receiving the online survey in May 2018, during the spring quarter, the participants spent about 15 minutes answering the questions. The survey began with a consent form then continued on to 26 questions, each forced response. This meant participants could exit and quit the survey if desired, but the participants were not able to

omit any questions. Once the survey was completed, the data was saved in the Qualtrics data warehouse that was password protected and only could be accessed by way of the researcher.

Once the window was closed, the data from Qualtrics was exported into SPSS in order to run statistical analysis, including only descriptive statistics and Cronbach's alpha test for close-ended questions. Prior to the export into the SPSS software, the survey data was pulled from the Qualtrics password protected data warehouse and then placed into an Excel spreadsheet password protected and accessed only by the researcher. This ensured a secure data storage to protect any of the anonymous responses from the participants. The researcher then manipulated the data in order to export the data into SPSS for statistical analysis. "The process of coding involves aggregating the text or visual data into small categories of information, seeking evidence for the code from different databases being used in this study and then assigning a label to the code" (Creswell, 2013, p. 184). The survey was completed, and the results were analyzed using descriptive statistics and Cronbach's alpha prior to the occurring interviews.

Of the 900 students who received the survey, the student participants received an invitation to complete the survey and engage in the research. The timeline of events which occurred included:

- 1.) **May 2018 - Faculty Recruitment Email:** Initial introduction of the survey was sent by the researcher to 89 total FSEM faculty during the spring 2018 asking their participation to distribute the survey to their student caseload (Appendix B).

- 2.) **May 2018 - Email sent to Researcher by Faculty:** 60 FSEM faculty members responded to the researcher agreeing to distribute the survey to their students. Approximately 900 students received the survey. The researcher charted, as responses came in, how many faculty members were interested in helping with the research and how many were going to send out the survey in an Excel document.
- 3.) **May 2018 - Student Survey Completion:** A total of 60 students filled out the survey during the 1-month time period in which the survey was open. Of the 60 students who filled out the survey, 2 students reported they were under 18 years of age, 1 student reported they were a graduate student, and 12 students opened the survey, but did not fill out the survey. Therefore, the total number of survey respondents was 47. The researcher recorded this information in a running and ongoing document, password protected, to ensure there was consistency.
- 4.) **June 1, 2018 - Survey Closed.**
- 5.) **Early June 2018 - Semi Structured Interview Request to Participate by Student:** At the end of the survey, there was an option for student participants who were inclined and chose to email the researcher to then engage in a semi-structured interview. 3 students reached out to the researcher and indicated they would like to be considered for the study and participate in the semi-structured interview (Appendix G).
- 6.) **June 2018 - Semi-Structured Interviews Conducted:** An interview location was selected by the researcher and agreed upon by the participant (location was the

same for each participant – on campus in a quiet study room within the campus library building).

### ***Interview Protocol Development***

Creswell (2013) suggests that utilizing prefigured codes or categories (often from a theoretical model or the literature) is popular in health science research but use of these codes does serve to limit the analysis to the prefigured codes rather than opening up the codes to reflect the views of the participants in the traditional qualitative way. Therefore, if a prefigured code is used in analysis, Creswell (2013) encourages the researcher to be open to additional codes that can emerge (p. 185). Therefore, the researcher utilized several additional codes that emerged during the data analysis of the interviews. Schlossberg's (1984) Transition Theory provided a framework that facilitated an understanding of the participants transition experience. It is important to note that though transition and adaptation are closely aligned one is not synonymous to the other. Therefore, Schlossberg (1984) defined adaptation as "a process during which an individual move from being totally preoccupied with the transition into integrating the transition into his or her life" (p. 7).

Transition refers to any event, or non-event that results in changed relationships, routines, assumptions and roles (Schlossberg et al., 1995). Furthermore, different individuals react differently to change, the same individual reacts differently to different changes and the same individual can then in turn react different to the same change depending on the other variable in their lives (Schlossberg, 1984). It was important to understand the participants experiences regarding how they perceived their individual

experiences around change. There are many factors that influence the adaptation to the transition and are categorized in three different areas: (a) the characteristics of the particular transition, (b) the characteristics of the transition environments, and (c) the characteristics of the individual (Schlossberg, 1981). These factors were reframed by Schlossberg (1984) as the four S's. The four S's provided a theoretical framework for this study which uncovered four consistent themes throughout: The overall transition experience, the individual, the environment and coping strategies.

The protocol of semi-structured interviews included 10 questions, along with prompt questions if needed. The first question, "How did you make the decision to attend the University?" was designed to put the respondent at ease and obtain a better understanding of why the participant chose to attend the university. The next two questions were intended to collect general information about the participant's initial transition experience. The remaining six questions included questions that would elicit responses related to the research questions about the elements including individual and environmental factors that influenced their transition experience as well as how the participants perceived their existing support structures as related to their transition.

Three students participated in answering the predetermined questions within the interview protocol to gather richer descriptive data about the transition experience of first year undergraduate college students who self-identified with mental health challenges. The selected participants were communicated with via email to set up a date, time and location for the semi structured interview. An interview location was selected by the researcher and agreed upon by the participant (location was the same for each participant

on campus in a quiet study room within the campus library building). Each interview was audio recorded and then transcribed. Once the interview was transcribed, the audio recording was then deleted and destroyed. Utilizing the transcribed interviews, open coding was utilized to determine themes (Strauss, 1987). Strauss and Corbin (1990) suggest that open coding aims at developing substantial codes describing, naming or classifying the phenomenon under consideration.

### ***Instrumentation***

**Construct Survey.** A survey was utilized in response to the overall purpose and problem of the study. Groves (2004) suggests that a survey is a systematic method for gathering information from (a sample of) entities. For the purpose of this study, this study utilized the “Health Behaviors, Self-Rated Health and Quality of Life Questionnaire” (Hicks, 2007). Prior to choosing to use the survey for this study, permission was granted by Dr. Terence Hicks, Dean of Clemmer College of Education at East Tennessee State University. Dr. Hicks (2007) corresponded via email with me and shared the survey. He also suggested that it would be appropriate to use it for this study, in particular, based on his previous research and findings in utilizing the “Health Behaviors, Self-Rated Health and Quality of Life Questionnaire” (Hicks, 2007). Additionally, Hicks (2005) indicated that the questions from the “Health Behaviors, Self-Rated Health and Quality of Life Questionnaire” were derived from an instrument used in a previously published study on Sweden college students (Vaez & Laflamme, 2004). According to Vaez and Laflamme (2004) the survey shows good validity and reliability. As such, the survey “Health Behaviors, Self-Rated Health and Quality of Life Questionnaire” was selected

and then was distributed anonymously to students by FSEM faculty via email. This process allowed some standardization in the questions asked and also allowed the participants to respond freely about their transition experience (Rossman, et al., 2003).

The survey was anonymous and consisted of 36 total questions. It is important to note, questions 27-36 were eliminated from the original survey implemented by Hicks et. al (2007) as the questions were not relevant to this particular study. The first page of the survey contained the Institutional Review Board's Consent Form. It disclosed pertinent information to the participants, including the study's purpose, procedures, voluntary participation, risks, or discomforts, benefits, incentives, confidentiality, questions, and contact information for the researcher, faculty advisor and the Health and Counseling Center. If the consent was given by the participant, then the participant was moved into the survey. If consent was not given, then Skip Logic within the Qualtrics platform was activated and the participant was exited from the survey. Once the participant was in the survey, every question had to be answered in order to submit; however, participants could exit and quit the survey at any time.

Additionally, following the survey, there was a prompt asking the participants if they were willing to participate in a semi-structured interview with the investigator. It was important to note that the purpose of this study was to examine the college transition experience of first year college students who self-identified with mental health challenges. Therefore, only for students who self-identified with mental health challenges were analyzed. For the students that did self-select with a mental health challenge, were



then prompted to complete the “Health Behaviors, Self-Rated Health and Quality of Life Questionnaire” as the next step in the data collection process (Hicks, et al, 2007).

The questions were clear, easily understood and unoffending. As mentioned above, to explore college student’s experience of transition as related to the issue of mental health, the researcher sought approval from Institutional Review Board (IRB) to distribute the survey to faculty during the spring 2018 quarter. The researcher conducted the research study in the spring 2018 quarter (following the IRB approval), as faculty would have already established a mentorship relationship with their students. Permission was also gained from the appropriate leadership to distribute the survey.

For the purpose of the participant criterion for the distribution of the survey questionnaire, the researcher utilized the criterion sampling approach in which participants met predefined criteria (Patton, 2001). Criterion sampling involves selecting cases that meet some predetermined criterion or importance (Patton, 2001). For example, the researcher looked for participants that had a shared experience but varied in characteristics and their individual experiences.

Four criteria were utilized to determine if students were qualified to be selected for this study. The researcher included only participants who: (a) were first year undergraduate college students; (B) were enrolled in one of the 89 sections of the FSEM course; (c) indicated on the demographic portion of the survey they had experienced or self-identified with mental health challenges; and (d) were over the age of 18 years. Additional considerations were utilized to express a balanced blend of both student demographics and experience as the sample group was anonymously selected. These

included socio-demographic characteristics such as age, sex, race, and marital status living conditions, resident of Colorado classification, parental educational achievement and source of income.

Table 3.2 contains each question used for this survey where the rationale for the format was designed as a closed response “select one response” to quantify each response. The 26-item survey inquired about demographic information, lifestyle choices, life stressors, health status, and overall perceptions of quality of life. Schlossberg’s Transition Theory (1984) was employed as the rationale for the framework.

Table 3.2: Health Behaviors, Self-Rated Health and Quality of Life Questionnaire  
Socio-Demographic Characteristics and Lifestyle

Survey Question	Rationale for Question	Supporting Literature
Age:	Socio-Demographic Characteristics	Mounts, N. (2004)
Sex:	Socio-Demographic Characteristics	Kuh, G., Kinzie, J., Schuh, J., Whitt, E., & Associated (2005)
Race:	Socio-Demographic Characteristics	Kuh, G., Kinzie, J., Schuh, J., Whitt, E., & Associated (2005)
Marital Status:	Socio-Demographic Characteristics	Laanan, F. (2006)
Living Conditions:	Socio-Demographic Characteristics	Laanan, F. (2006)
Parent Educational Status:	Socio-Demographic Characteristics	Mounts, N. (2004)
Source of Income during the university year:	Socio-Demographic Characteristics	Mounts, N. (2004)
How often do you drink alcohol?	Life – Style	Munson, M., Scott, L., Smalling, S., Werner, J. (2012)
If you do drink alcohol, what is the usual amount consumed on each occasion?	Life – Style	Sakuro, C., (2000).
Do you smoke cigarettes?	Life – Style	Tinklin, T., Riddell, S., & Wilson, A. (2005)
Do you use recreational drugs?	Life – Style	Tinklin, T., Riddell, S., & Wilson, A. (2005)
How often do you exercise?	Physical Activity	van Manen, M. (1990)

(Hicks, et al, 2007)

Table 3.3 contains questions on Life Stressors such as not coping academically, family problems, and financial problems. The rationale for the format was that each question was rated on a 4-point scale ranging from “not stressed at all” to “highly stressed”. Schlossberg’s Transition Theory (1984) was employed as the rationale for the framework.

Table 3.3: Life Stressors

Survey Question	Rationale for Question	Supporting Literature
My stress over the academic year have been based on the following issues: <i>(not at all, slightly, rather, highly)</i>	Life Stressors	Mounts, N. (2004)
Not Coping Academically	Life Stressors	Kuh, G., Kinzie, J., Schuh, J., Whitt, E., & Associated (2005)
Problems with Professors	Life Stressors	Kuh, G., Kinzie, J., Schuh, J., Whitt, E., & Associated (2005)
Problems with Roommate	Life Stressors	Laan, F., (2006)
Poor Finances	Life Stressors	Laan, F., (2006)
Problems with Friends	Life Stressors	Laan, F., (2006)
Poor Housing	Life Stressors	Laan, F., (2006)
Family Problems	Life Stressors	Laan, F., (2006)
Not Having a Relationship	Life Stressors	Laan, F., (2006)
Relationship Problems	Life Stressors	Laan, F., (2006)

(Hicks, et al, 2007)

Table 3.4 identifies the overall physical health which was rated on a 5-point scale, ranging from “very poor” to “very good” while specific health problems such as anxiety, headaches, upset stomach, and fatigue. The rationale for each question was based on the physical and psychological factors and were rated on a 4-point scale ranging from “not a lot” to “a lot”. Perceived quality of life was measured using a 10-point ladder scale with 1 representing “the worst” and 10 representing “the best” life the participants have ever had. Schlossberg’s Transition Theory (1984) was employed as the rationale for the framework.

Table 3.4: Health Status - Physical and Psychological Health

Question	Rationale for Format	Supporting Literature
Please select any physical or psychological health issues that you may have exhibited during the academic year 2017/2018	Selection of 10 responses	Mounts, N. (2004)
Please rate your overall self-rated physical health status	Rate Response 5-point scale	Kuh, G., Kinzie, J., Schuh, J., Whitt, E., & Associated (2005)
Please rate your overall self-rated psychological health status	Rate Response 5-point scale	Kuh, G., Kinzie, J., Schuh, J., Whitt, E., & Associated (2005)

(Hicks, et al, 2007)

Table 3.5 identifies the overall health which was rated on a 5-point scale, ranging from “very poor” to “very good” while specific health problems such as anxiety, headaches, upset stomach, and fatigue. The rationale for each question was based on the physical and psychological factors and were rated on a 4-point scale ranging from “not a lot” to “a lot”. Perceived quality of life was measured using a 10-point ladder scale with 1 representing “the worst” and 10 representing “the best” life the participants have ever had. Schlossberg’s Transition Theory (1984) was employed as the rationale for the framework.

Table 3.5: Health Status – Overall Health

<b>Question</b>	<b>Rationale for Format</b>	<b>Supporting Literature</b>
How do you rate your general state of health?	Rate Response 5-point scale	Kitzrow, M. (2003)
What do you think about your own health condition compared with that of other people of your age?	Rate Response 5-point scale	Kitzrow, M. (2003)
Did you experience any of the following psychological or psychosomatic problems?  (Difficulty in concentration, Irritation, Anxiety, sleeping disorder, Depression, Tiredness, Poor appetite, Headache, Upset stomach)	Rate Response 4- point scale	Kitzrow, M. (2003)
Did you experience physical difficulties that restricted your life because of temporary disease, chronic disease, injury or functional impairment?	Rate Response 4- point scale	Kitzrow, M. (2003)
Were you troubled by psychological difficulties that restricted your everyday life?	Yes/No response	Kitzrow, M. (2003)
Did you seek health care due to physical or psychological problems?	Yes/No response	Kitzrow, M. (2003)
Did you seek health care due to physical or psychological problems?	Yes/No response	Kitzrow, M. (2003)
Were you hospitalized due to physical or psychological problems?	Ladder Scale (1) worst and (10) best	Kitzrow, M. (2003)
Did you take prescription drugs due to physical or psychological problems?	Ladder Scale (1) worst and (10) best	Kitzrow, M. (2003)
Where on the ladder is your life right now?	Ladder Scale (1) worst and (10) best	Kitzrow, M. (2003)
Where on the ladder was your life one year ago?	Ladder Scale (1) worst and (10) best	Kitzrow, M. (2003)
Where do you expect your life to be in one year from now?	Ladder Scale (1) worst and (10) best	Kitzrow, M. (2003)

(Hicks, et al, 2007)

**Semi-Structured Interviews.** As noted, to collect rich data, Moustakas (1994) suggests an “interview protocol with broad questions that facilitate rich, vital and substantive descriptions” (p.116). These inquiries are appropriate to keep the protocol open to alterations in real-time that may help participants to better verbalize their own experiences. Following the structured quantitative survey, the survey continued with an “opt in” semi-structured qualitative interview, to really understand the reasons for the participants survey responses and to further gauge how those answers relate to their overall transition experience.

The follow-up semi-structured interviews moved the study into an explanatory sequential model as three participants were interviewed using a pre-developed interview script and built “on the results of the survey to further explain in more detail with the qualitative research” (Creswell, 2014, p.15).

After reviewing the initial data from the student responses to the survey, semi-structured interviews were conducted with three students who indicated a willingness to participate. It is important to note that each question was adapted by the researcher as related to the four Ss defined by Schlossberg’s (1984) Transition Theory. There were three participants who were interested in participating in a semi-structured interview with the researcher. The participant then emailed the researcher to schedule an interview time. Data collection for this portion of the study occurred through interviews designed to further examine the transition experiences of first year students as related to mental health challenges. Participants were asked to attend an interview scheduled for approximately 45 minutes. In order to understand the student’s experiences, open ended



questions were used to allow the students to best describe their individual experiences. The questions also encouraged students to give a full description of their experiences, thoughts, feeling, images, sensations, and memories. The semi-structured interview questions were piloted in the early part of winter of 2018 prior to the study taking place in the spring quarter of 2018. The interview data was also housed through Qualtrics securely on a university server password protected (Appendix E). Creswell (1998) suggests a qualitative study involves longer interviews with up to five people. While it was intended to have five or more participants, the study yielded a total of three interview participants. Approval from the IRB as well as university personnel was sought in order to conduct the semi-structured interviews.

Interview times and dates were determined through an email correspondence with the researcher and the participants to establish student availability and convenience. The setting of the interviews was a confidential environment where students felt safe sharing without distraction. Specifically, the location was determined in a study room within the institution. At the onset of the interview, participants were given the consent form, which included the study's purpose, procedures, voluntary participation risks or discomforts, benefits, incentives, alternatives, confidentiality, questions and contact information for both the researcher, the faculty advisor, as well as the Health and Counseling Center. It was also shared to the participants that the role of the researcher was to better understand the meaning of their experiences. By using this inquiry method, the impact of the experience of participants and summary of their experiences combining the descriptions from the student survey and semi structured interview(s) will be developed/generated.

The intention was for this study to further provide information that may benefit other students as indicated in their transition into college as related to mental health. Prior to drawing any final conclusions, a review of the data will uncover themes that will convey the overall essence of the student's experiences. At the bottom of the form, the participant had the option to give consent for the interview, agree and give consent for the interview to be audio recorded or not give consent at all. Once the consent was given, the following statement was read:

Thank you for meeting with me today. The purpose of this study is to examine the college transition experience of first year undergraduate college students who self-identify with mental health challenges. Specifically, this study will examine first time, first year college student's experiences during their transition year (first year) attending a private four-year university. This research is part of the requirements for my doctoral degree. I sent you the informed consent by email and we can review that together if there are any additional questions that you may have. Once you sign the form, we will begin the interview. Do you have any questions?

Once the statement was read, the interview began. The interview questions are shown in Table 3.6. The rationale for the question was a text entry response (open ended question) that allows for vast amounts of possible answers to this question. Each question was open-ended, and the participant's maximum time allotted was 45 – 60 minutes. Schlossberg's Transition Theory (1984) was employed as the rationale for the framework. To ensure accuracy, participants were provided with an electronic copy of

their transcribed interview and asked to verify correctness, clarify any discrepancies or further remark on the inquiry.

Table 3.6: Semi-Structured Interview Questions

<b>Interview Question</b>	<b>Rationale for Question</b>	<b>Supporting Literature</b>	<b>Rationale for Framework: Schlossberg's Transition Theory (1984)</b>
How did you make the decision to attend the University?	Collect general information about student to better understand college selection.	Flaga, C. T. (2006)	Theme: Situation
What was it like leaving high school and coming to college?	Collect general information about student to better understand college selection.	Gallagher, R. (2014)	Theme: Situation
Tell me about your first few days/weeks on campus?	Collect general information about initial transition process.	Flaga, C. T. (2006)	Theme: Situation
What expectations do you have about the academics and social life at this University?	Collect general information about student expectations (academic and Social) at the institution.	Laanan, F. (2006)	Theme: Situation
What has been your greatest challenge since starting college?	Collect general information about initial challenges student faced.	Laanan, F. (2006)	Theme: Self
Since entering college, what has been your greatest success?	Collect general information about success student experienced.	Laanan, F. (2006)	Theme: Self
Thinking back to when you first started college, what has been your best relationship? What has been your most challenging relationship?	Collect general information about student's relationship building experiences.	Karp, D., Holmstrom, L., & Gray, P. (2004)	Theme: Social
Thinking about your academics here at this University, what has been the most challenging?	Collect general information about student's initial experiences	Laanan, F. (2006)	Theme: Strategies
What is the most memorable experience you have had since you transition into college?	Collect general information about most memorable experiences.	Townsend, B. K. (1995)	Theme: Self

## **Data Analysis Process/Procedures**

As indicated, there were two data sets which included the survey given to the participants (quantitative) and the follow up semi-structured interviews (qualitative). Because the researcher wanted to answer in what way the qualitative data helped to explain the quantitative results, the survey utilized asked the participants questions related their socio-demographic characteristic, lifestyle, student life stressors, and health status (Hicks et al, 2007). Following the structured quantitative survey, the survey continued with an “opt in” semi-structured qualitative interview, to really understand the reasons for the participants survey responses and to further gauge how those answers relate to their overall transition experience. The follow-up semi-structured interviews also moved the study into an explanatory sequential model as three participants were interviewed using a pre-developed interview script and built “on the results of the survey to further explain the in more detail with the qualitative research” (Creswell, 2014, p.15).

Through this method, there is an interest identifying how complex interpretations are built out of simple units of direct experiences (Creswell, 2014). This methodology was chosen to provide a comprehensive account of lived experiences from which general meanings can be derived (Creswell, 1998).

## ***Statistics Process Utilized***

A descriptive statistics analysis was conducted on all survey data using the SPSS software to determine the mean, median and mode of the data. Additionally, a Cronbach’s Alpha test was conducted to measure internal consistency of the survey questions that were used to determine reliability (Drost, 2011). Pallant (2001) suggests

that if the Cronbach Alpha value is at 0.60 and below, it would mean that the instrument has a low reliability and it's unacceptable. If the value of Cronbach Alpha is within the range of 0.60 to 0.80, it means that the value of Cronbach Alpha is moderate and acceptable. Then, if the value of Cronbach Alpha is above 0.80 to 1.00, then the value of Cronbach Alpha is very good. Therefore, Cronbach Alpha was tested to ensure the internal consistency and reliability of the survey instrument.

### ***Threat to Reliability and Validity***

Validity is defined as the extent to which a concept is accurately measured in a quantitative study while reliability is the accuracy of the instrument (Hale & Tycross, 2015). Fowler (2013) suggests that there could be various disadvantages of internet surveys, all which could then affect the reliability and validity of the administration. This includes the limitation of samples of internet users, the need for comprehensive address lists, challenges for enlisting cooperation, and various disadvantages of not having interviewer involved in the data collection (Fowler, 2013, p.73).

The sample of this study was first year undergraduate college students who received the survey via their FSEM faculty mentor. The survey was sent through the First Year Seminar list serve, going to all FSEM faculty mentors who were teaching a section during the academic year 2017/2018. Therefore, faculty members had to agree and then choose to share the survey with their student's and in turn the students had the choice to complete the survey.

## **Role of the Researcher**

It is essential with any study for the researcher to reflect on their own experiences and biases which may exist. Creswell (2014) suggests that strengths of research is based on determining whether the findings are accurate from the standpoint of the researcher and the participants as well as the importance of clarifying researcher bias. It is important to clarify the researcher bias brought into the study. This self-reflection created an open and honest narrative that will resonate well with readers (Creswell, 2014, p. 202).

Additionally, good qualitative research contains comments by the researchers about how their interpretation of the findings is then shaped by their background, such as their gender, culture, history and socioeconomic origin (Creswell, 2014, p. 202).

In this study, the researcher employed several strategies to look at the consistency of the findings. First, the researcher utilized two data sources including the survey responses and three interview transcripts. In using multiple sources of data, this assisted in establishing converging themes because the researcher could then compare data sources to strengthen the validity of the study (Creswell, 2014). Then, member checking was employed by sharing the interview transcripts with the student participants to check for accuracy (Creswell, 2014). Finally, the analysis included robust descriptions of identified themes based upon the findings of the survey data and each participant's experiences.

Confidentiality of student participant identity was vital for this study. The researcher took several steps to protect the participant's identity and keep all findings and responses anonymous. First, as part of the confidential survey, the first question asked the

participant in the study to self-identify if they have a mental health challenge. It was critical that the participant states that they have had experiences with mental health challenges allowing the participant the voluntary option to select this choice. Secondly, the beginning of the survey included a disclaimer stating that all answers will remain confidential, the survey will be voluntary, and that no individually identifying information will be used. Thirdly, willingness to participate in this study was sought and obtained via the optional nature of participating. And finally, the survey questionnaire included a statement asking respondents to agree to consent to participate in the study.

For the student participant interviews, informed consent was essential to ensure that the participants were fully aware of the purpose of the study. The process incorporated an anonymous process of selecting the student participants and a voluntary prompt asking if the participants were willing to participate. As well, the researcher further addressed any questions or concerns regarding confidentiality, potential harm, overall process and the intention of the results. Finally, the research provided contact information to the university's health and counseling department if the participant wanted to reach out to an additional support research.

### **Chapter Summary**

Chapter Three described the research methodological process, the data collection procedure, including the survey distribution, interview protocol development, the role of the researcher, and threats as related to validity and reliability. The purpose of this study was to examine the college transition experience of first year college students who self-identify with mental health challenges. The intent, based on the data collection, was to

further describe the college transition experience and further understand how the student participants coped with their own transition experience as related to mental health. The focus of this study was to recognize how students who self-identified with a mental health challenge experience their transition into college and how this experience is impacted by the campus environment. The student questionnaire survey and semi-structured interviews investigated the phenomenon through the lived experiences gathered by the participants as they related to the research questions. Chapter Four presents the data gathered from the online survey as well as from the semi-structured interviews with the student participants.



## **Chapter Four: Data Results and Analysis**

### **Introduction**

The purpose of this study was to examine the college transition experience of first year college students who self-identify with mental health challenges. Specifically, the experiences of first year undergraduate college students during the transition year (first year) at a private university was the focus of this study. The intent of this study was to describe the college transition experience by applying facets of the theoretical framework from Schlossberg's (1984) transition theory. In this chapter, the transition experiences of first year undergraduate college students who self-identified as having a mental health challenges will be discussed. The overarching research looked at the college transition experience of first year college students who self-identified with mental health challenges. To further explore this topic, the central research questions which guided this study included:

1. How do first year undergraduate college students who self-identify with mental health challenges, perceive their transition into college?
2. What are the elements that contribute to a successful transition for first year undergraduate college students who self-identify with mental health challenges?

3. How do first year undergraduate college students who self-identify with mental health challenges perceive the existing (and needed) support structures at a small private university, as it relates to their transition?

Data for this study was collected utilizing an explanatory sequential mix methods methodological approach by utilizing an anonymous online survey, as well as a face-to-face, semi-structured interview. The online survey titled, “Health Behaviors, Self-Rated Health and Quality of Life Questionnaire”, consisted of 26 questions, all close-ended utilizing a variety of response option scales including Likert, rank order, and sliding scale (Hicks, 2007). The full survey is located in Appendix E.

This chapter discusses the analysis of the experiences of first year undergraduate college students as related to their high school to college transition who self-identified with having mental health challenges. Data analysis procedures were conducted in two ways including the analysis of the survey and the analysis of the semi-structured interview. First, the survey data analysis procedures were discussed including the survey response rate as well as the implications of the response rate. Following, the results from the data collected from the “Health Behaviors, Self-Rated Health and Quality of Life Questionnaire” were examined looking at the data collected from the close-ended quantitative questions (Hicks, 2007). Next, the semi-structured interview data analysis procedures were explored, and the themes uncovered through the interviews were discussed. The full interview protocol is located in Appendix G.

### **Quantitative Data Analysis Procedures**

It was vital to understand the demographics of the student participants. Therefore, in order to reach as many student participants as possible, the researcher formed a

community partnership with the small private institution and in working with the appropriate personal within the organization. In May 2018, an initial email including the anonymous Qualtrics link to the survey was distributed by the researcher to an associate who in turn then distributed the email with the link to 89 faculty members who were teaching a section of the First Year Seminar (FSEM). Of the 89 faculty members, 60 faculty members agreed to distribute the survey to their students who had been enrolled in the course. See Table 4.1.

Table 4.1: Total number of Questionnaire Participants Breakdown  
Health Behaviors, Self-Rated Health and Quality of Life Questionnaire

Total number of students enrolled in an FSEM spring 2018 = <b>1464 students</b>
Total number of FSEM faculty who received survey = <b>89 faculty members</b>
Total number of FSEM faculty who SENT the survey to their students = <b>60 faculty members</b>
Total number of Students who received the survey = <b>900 students</b>
Total number of students who filled out the survey = <b>60 students</b>
Total number of excluded students = <b>13 excluded</b>
Total number of survey respondents = <b>47 students</b>
n = 47 students
Sample Size:
61% of students received the survey
6% response rate
5% total sample size

(Hicks, et al, 2007)

There were several touchpoints in which the participants received outreach from either a faculty member or the researcher to participate and engage in the research.

- 1.) Initial introduction of the survey was sent by the researcher to 89 total FSEM faculty during the spring 2018 asking their participation to distribute the survey to their student caseload (Appendix B).

- 2.) 60 FSEM faculty members responded agreeing to distribute the survey to their students. Approximately 900 students received the survey.
- 3.) 28 FSEM faculty members did not respond to the researcher at all and 1 faculty member noted that they would not send out the survey to their students.
- 4.) In all responses in which the researcher received an email from an FSEM faculty member, a “thank you” email was sent thanking them for their time.
- 5.) A total of 60 students filled out the survey during the 1-month time period in which the survey was open. Of the 60 students who filled out the survey, 2 students reported they were under 18 years of age, 1 student reported they were a graduate student, and 12 students opened the survey, but did not fill out the survey. Therefore, the total number of survey respondents was 47.

As mentioned above, the total number of survey respondents was 47 resulting in a response rate of 5.22%. It is important to note that the survey sample is not representative of the entire first time-first year population at the institution. Gilner, et al. (2009) suggest that a low response rate could be attributed to many different factors. A representative sample utilizing a survey can be difficult to obtain because “even if the selected sample was quite representative of the theoretical population, the actual sample size may be unrepresentative” (p.118). The researcher sent out the survey to an associate of the university who oversees the distribution list utilized by the institution. This distribution list should have gone directly to the FSEM faculty, in total 89 faculty members. However, there was no way to view if the email was opened by the faculty members. Additionally, the email could have gone into the faculty members junk email and in turn

never seen. Some faculty members also may not have wished to distribute the survey to their students as they either did not want to participate because they did not either believe in the importance of the research or they just did not respond.

As suggested by Gilner, et. al (2009), a survey should include a minimum of 30 participants. This study did meet the minimum, but only by a few participants, 47 total sample size. The use of descriptive statistics was utilized in the data analysis as well as Cronbach's alpha. As noted, validity and reliability are two fundamental elements in the evaluation of a measurement instrument. The reliability of an instrument is closely associated with its validity. Cronbach's alpha was used to provide a measure of the internal consistency to ensure validity (Fong, Ho & Lam, 2010). Therefore, Cronbach's alpha is sensitive to the number of the items in the scale and can be biased when there are inconsistent responses, and an adjustment is recommended for better assessment of the internal reliability of a multi-item scale (Fong, Ho & Lam, 2010). Because of the response rate and the Cronbach's alpha results, the data gathered from the three semi-structured interviews becomes even more valuable when looking at the research questions for this study.

### **Online Survey Quantitative Data Results**

The quantitative data gathered as a result of the survey was summarized initially using descriptive statistics in an effort to determine differences and similarities between the sample population. The intent by the researcher was to describe what the data shows not necessarily reach a conclusion or make inferences form the data to more general conditions. Additionally, it is important to note that the researcher utilized Schlossberg's

(1984) Transition Theory as a lens through which to view and understand the quantitative data results. The questions provided within the online survey, specifically focused on the participants characteristics and experiences as related to situation and self, two of the four S's in which Schlossberg (1984) provides.

Descriptive statistics enabled the researcher to simplify the data in a sensible way. The data collected from the closed ended, quantitative questions from the survey were imported into the Statistical Package for the Social Sciences (SPSS) software which is utilized for statistical analysis (Arkkelin, 2014). As suggested, using SPSS, a Cronbach's alpha test was then conducted to determine the questions' reliability. One author suggests the importance of interpreting the value of the alpha in the context of the particular study, taking into account the expected dimensionality of what the study is seeking to measure, and the total number of items included in the instrument or scale discusses (Arkkelin, 2014). Cronbach's alpha was calculated to test for the internal validity of the scales and the data (Arkkelin, 2014). Alphas greater than or equal to 0.70 and less than 0.90 are said to be "good". Alphas greater than or equal to 0.60 and less than 0.70 are "acceptable". Alphas greater than or equal to 0.50 and less than 0.60 are "poor", and alphas less than 0.50 are "unacceptable" (George, 2003). Cronbach's alpha calculations was calculated at .612, which indicated mostly "acceptable" levels of validity (George & Mallery, 2003). Each question was analyzed using descriptive statistics and Cronbach's alpha calculations (see Table 4.2).

The first eight questions within the survey provided general demographic information about the participant. These data were collected to provide insight to the

participant’s background. By looking at the descriptive statistics, it allowed the researcher to lay out the foundation for the data analysis and interpretation of the collected interview data. Next, the survey inquired about lifestyle choices, including alcohol and drug use and exercise, life stressors, health status and the overall perceptions of quality of life. The common themes which emerged from the data collected by the survey are then supported by the data from the semi-structured interviews. The findings helped to inform the main research questions as well as provide additional context of the participants and relate back to the themes found in the interviews. This section will explore the data collected from the close-ended responses from the online survey. All data gathered from the semi-structured interviews were discussed in the following section of this chapter.

Table 4.2: Reliability Statistics

<b>Reliability Statistics</b>		
Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.612	.685	42

### ***Survey Results Part 1: Descriptive Data (Questions 1 – 9)***

The participants in this study included first year undergraduate college students at a private four-year institution and were at least 18 years of age at the time of data collection. They were all enrolled full time during their first quarter of college. All students included in this study self-identified their mental health struggles prior to coming to college, some as early as first year in high school. The questionnaire included socio-demographic characteristics such as age, gender, race, marital status, living conditions, parental education status, and source of income. There were four major sections of the questionnaire; those sections consisted of socio-demographic characteristics, lifestyle, student life stressors, and health status.

The total sample size utilized for this research study included 47 students, which represents 6% of the population. Of the 47 students, there were 32 female students who filled out the survey and 16 male students who filled out the survey. Table 4.3 provides a basic description of the demographics of the survey participants, including age, gender, race, marital status living conditions, residential status, parental educational status and sources of income.



Table 4.3: Description of Demographics of Survey Participants  
Age, Gender, Race, Marital Status, Living Conditions, Residential Status, Parental  
Educational Status, & Sources of Income.

<b>Description of Demographics</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	47	100.0	100.0	100.0

Note: All responses were self-reported.

### Gender

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Female	32	68.1	68.1	68.1
	Male	15	31.9	31.9	100.0
	Total	47	100.0	100.0	

Note: All responses were self-reported.

The survey then asked the participants to identify their race. Results indicated that 2 participants (4.3%) selected American Indian or Alaska Native, 4 participants (8.5%) selected Asian, 1 selected Black or African American (2.1%), 6 participants (12.8%) selected other, and 34 participants (72.3%) selected White.

### Race

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	American Indian or Alaska Native	2	4.3	4.3	4.3
	Asian	4	8.5	8.5	12.8
	Black or African American	1	2.1	2.1	14.9
	Other	6	12.8	12.8	27.7
	White	34	72.3	72.3	100.0
	Total	47	100.0	100.0	

Note: All responses were self-reported.

*Marital Status.* The fourth question on the survey asked participants about their marital status. Forty-six participants (97.9%) indicated they were never married, while one participant (2.1%) selected separated.

**Marital Status**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never married	46	97.9	97.9	97.9
	Separated	1	2.1	2.1	100.0
	Total	47	100.0	100.0	

Note: All responses were self-reported.

*Living conditions.* Almost all of the participants indicated that they are living on campus (97.9%). Additionally, (74.5%) of participants are non-Colorado residents; while (25.5%) are Colorado residents.

**Living Conditions**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Living off campus	2	4.3	4.3	4.3
	Living off campus with family	2	4.3	4.3	8.5
	Living on campus	43	91.5	91.5	100.0
	Total	47	100.0	100.0	

Note: All responses were self-reported.

**Residents of Colorado**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	35	74.5	74.5	74.5
	Yes	12	25.5	25.5	100.0
	Total	47	100.0	100.0	

Note: All responses were self-reported.

*Parental education status.* The seventh socio-demographic question asked the participants for information on their parental education status. This question revealed that (83%) of the participants parents or guardians have a college degree, while (17%) do not.

**Parent Educational Status**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Parent/parents/guardian do not have a college degree	8	17.0	17.0	17.0
	Parent/parents/guardian have college degree	39	83.0	83.0	100.0
	Total	47	100.0	100.0	

Note: All responses were self-reported.

*Source of Income.* The final demographic question inquired about the participants source of income during the university year. The results of this question showed that the majority of participants have student loans and support from parent(s)/spouse/ or guardian (72%) while few responded that they rely on only student loans during the university year (4.3%).

**Source of income during the university year**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Student loan and income from paid employment	5	10.6	10.6	10.6
	Student loan and other source of income	6	12.8	12.8	23.4
	Student loan and support from parent(s)/spouse/guardian	34	72.3	72.3	95.7
	Student loan only	2	4.3	4.3	100.0
	Total	47	100.0	100.0	

Note: All responses were self-reported.

***Survey Results Part 2: Lifestyle (Questions 10 – 13)***

The next series of questions were asked to each student participant to better understand the college transition experience of first year undergraduate college students who self-identify with mental health challenges as related to their lifestyle. Respondents were asked questions on their self-identified lifestyle and physical activity.

Table 4.4 Part 2 Lifestyle provides a visual breakdown of participant responses for questions ten through thirteen.

Questions 10 were asked to understand how often the participants drink alcohol. Results indicated that six of the forty-seven (12%) participants indicated that they never drink alcohol. Seventeen of the forty-seven respondents (36%) indicated that they drink 2-4 times a month. Eighteen student respondents (18%) indicated that they drink 2-3 times a week, while 2 respondents (.4%) indicated they drink 4 times a week or more (see Table 4.4).

Question 11 asked participants the usual amount of alcohol consumed in one setting. Fourteen respondents out of the forty-seven respondents (29%) indicated that they drink 1-2 glasses in one setting. Although seventeen out of the forty-seven respondents (36%) shared that they drink 3-4 glasses in one setting. Thirteen respondents out of the forty-seven respondents (27%) shared that they drink 5-6 glasses in one setting and four respondents (.8%) indicated they drink 7-9 glasses in one setting (see Table 4.4).

Question twelve prompted the student participants to reveal if they smoked cigarettes. The results of this question showed that only two of the forty-seven participants (.4%) indicated that they smoke daily. While 6 of the respondents (8%) indicate that they smoke sometimes and thirty-nine participants (83%) indicate they do not smoke at all. The results of this question showed that a majority of the participants do not engage in smoking cigarettes. This question did not define smoking other than “smoking cigarettes”, specifically. Therefore, it was not specified if other type of substances were smoked, such as vapor pens, marijuana, etc. (see Table 4.4).

Question thirteen asked about the respondent’s lifestyle and physical activity, specifically how often the participants engage in exercise. This question showed that the majority of the participants indicated they engaged in some form of exercise. Only one respondent out of the forty-seven participants (.2%) indicated they did not engage in any form of exercise. While five respondents (11%) indicated they exercise once a month. Twelve of the participants (25%) indicated they exercise 2-3 times a month and seventeen of the forty-seven participants (17%) responded they exercise 2-3 times a week. Finally, twelve respondents (25%) indicated they exercise 4 times a week or more (see Table 4.4).

Table 4.4: Part 2 Lifestyle

<b>Alcohol Consumption</b>	
	N= 47 (%)
Never (1)	6 (12%)
Once a month (2)	4 (8%)
2-4 times a month (3)	17(36%)
2 -3 times a week (4)	18 (38%)
4 times a week or more (5)	2 (.4%)
If you do drink, what is the usual amount consumed?	
1-2 glasses (1)	14 (29%)
3-4 glasses	17 (36%)
5-6 glasses	13 (27%)
7-9 glasses	4 (.8%)
10 glasses or more	0 (0%)
<b>Smoking</b>	
Yes, daily	2 (.4%)
Yes, sometimes	6 (8%)
No	39 (83%)
<b>Physical Activity</b>	
Never	1 (.2%)
Once a month	5 (11%)

2-3 times a month	12 (25%)
2-3 times a week	17 (36%)
4 times a week or more	12 (25%)

***Survey Results Part 3: Student Life Stressors (Question 14)***

This section shows the participants life stressors. To gauge student life stressors, the researcher asked questions concerning the participants potential sources of stress over the preceding academic year. Responses were based on a 4-point scale (not at all stressed, slightly stressed, rather stressed, highly stressed) (see Table 4.5).

**Not Coping Academically.** Participants responded to their self-identified potential source of stress over the preceding academic year, as related to not coping academically, highlighted in Table 4.5. The results indicated that students indicated that they were rather stressed (38%) and highly stressed (28%) versus only five respondents indicated they were not stressed at all. Furthermore, (11%) and eleven respondents out of the forty-seven respondents (23%) indicated that they were slightly stressed. This data showed that the majority of the respondents indicated they had some sort of stress relative to their academics.

**Problems with Professors.** This section revealed how the participants responded to a potential source of stress as related to problems with professors. Interestingly enough, a total of 23 respondents, almost half of participants out of the forty-seven participants (49%), indicated they were not stressed at all, while only three participants indicated that they here highly stressed (.6%). Sixteen respondents shared they were slightly stressed, and five participants indicate that they were rather stressed with potential problems with their professors. This data indicated that the participants

responded that they denoted a low potential source of stress regarding problems with their professors (see Table 4.5).

**Problems with Roommates.** Participants were then asked their potential source of stress as related to problems with roommates. As highlighted in Table 4.5, participants indicated lower rates of stress relative to their roommate situations. Surprisingly, over half of respondents self-reported that they were not at all stressed or only slightly stressed. Twenty-one participants (45%) responded they were not at all stressed and ten respondents (21%) indicated that they were only slightly stressed. Although only four participants responded they were highly stressed with their roommate problems.

**Poor Finances.** Participants self-reported levels of stress related to poor finances. Over half of the student participants reported they were either not at all stressed (30%) as regarding finances or slightly stressed (25%). Seven respondents indicated that they were rather stressed (15%), and fourteen respondents (30%) reported they were highly stressed. This data showed a little over half of the participants reported a lower level of stress while just below half indicated more stress as related to their poor finances (see Table 4.5).

**Poor Housing.** Similar to the above, participants were asked to self-report their stress as related to poor housing. The responses suggest that the participants were minimally stressed relative to their housing situation. It is important to note that all of the participants in this study were first year undergraduate college students, who were living in some type of on-campus housing. Eighteen participants responded they were not at all

stressed with poor housing and only three out of the forty-five participants responded they were highly stressed (see Table 4.5).

**Family Problems.** Participants were asked to self-report their stress as related to family problems. Twelve participants indicated they were not at all stressed with family problems and eight respondents indicated they were highly stressed. Based on the results, most of the participants indicated they were either slightly stressed (17%) with family problems or rather stressed (40%). Therefore, students indicated that family problems may have impacted their stress level (see Table 4.5).

**Not Having a Relationship.** Participants were asked to report their stress level as related to not having a relationship. Data indicated that most of the participants responded that not having a relationship does not indicate higher stress levels. Twenty participants (42%) reported they were not stressed with not having a relationship and nineteen participants (40%) indicated they were only slightly stressed. This encompasses over 80% of the total participants. Only four participants (.8%) indicated they were rather stressed and four (.8%) reported highly stressed. This data suggests that the participants indicated that not having a relationship does not necessarily impact their self-reported stress level. However, it is important to note that the term relationship was not defined and therefore these findings cannot be generalized to encompass all relationships (see Table 4.5).

**Relationship Problems.** Similar to not having a relationship, participants to report their stress level as related to relationship problems. Again, the majority of the participants reported they were not at all stressed (51%) or only slightly stressed (23%)



related to their stress levels and relationship problems. Nine participants (19%) shared they were rather stressed with their relationship problems. However, as suggested, it is important to note that the term relationship was not defined and therefore these findings cannot be generalized to encompass all relationships (see Table 4.5).

**Problems with Friends.** Participants were then asked to report their stress level as related to problems with friends. Fourteen of the participants reported they were not at all stressed with problems with friends. Thirteen indicated they were slightly stressed. Just under half of the participants indicated they were rather stressed (27%) or highly stressed (14%). Therefore, the findings in this data indicated that problems with friends could impact stress levels. Table 4.5 illustrates the participant responses for Part 3 – Student Life Stressors Rating.

Table 4.5: Survey Results Part 3 - Student Life Stressors Rating

Not coping academically	<i>N=47</i>	%
1. Not at all stressed	5	11%
2. Slightly Stressed	11	23%
3. Rather Stressed	18	38%
4. Highly Stressed	13	28%
<b>Problems with professors</b>		
1. Not at all stressed	23	49%
2. Slightly Stressed	16	34%
3. Rather Stressed	5	11%
4. Highly Stressed	3	.6%
<b>Problems with roommates</b>		
1. Not at all stressed	21	45%
2. Slightly Stressed	10	21%
3. Rather Stressed	12	25%
4. Highly Stressed	4	.8%
<b>Poor finances</b>		
1. Not at all stressed	14	30%
2. Slightly Stressed	12	25%
3. Rather Stressed	7	15%
4. Highly Stressed	14	30%
<b>Poor housing</b>		
1. Not at all stressed	18	38%
2. Slightly Stressed	18	38%
3. Rather Stressed	8	17%
4. Highly Stressed	3	.6%
<b>Family problems</b>		
1. Not at all stressed	12	25%
2. Slightly Stressed	8	17%
3. Rather Stressed	19	40%
4. Highly Stressed	8	17%
<b>Not having a relationship</b>		
1. Not at all stressed	20	42%
2. Slightly Stressed	19	40%
3. Rather Stressed	4	.8%
4. Highly Stressed	4	.8%
<b>Relationship problems</b>		
1. Not at all stressed	24	51%
2. Slightly Stressed	11	23%
3. Rather Stressed	9	19%
4. Highly Stressed	3	.6%
<b>Problems with friends</b>		
1. Not at all stressed	14	30%
2. Slightly Stressed	13	27%
3. Rather Stressed	13	27%
4. Highly Stressed	7	14%

Note: All responses were self-reported.

**Survey Results Part 4: Health Status (Questions 15 – 26)**

To assess the participants health status and quality of life, the researcher used the participants’ self-evaluation in the following manner: For health status, the participants were requested to rate their physical, psychological, and overall health respectively on a 5-point scale (very good, good, neither good nor poor, poor, very poor). Table 4.6 represents an overview of the Health Status Survey Results. More in-depth findings will be reported in Table 4.6.

**Table 4.6: Survey Results Part 4 - Overview of Health Status Survey Results**

<b>Health Status</b>		
Please rate your overall self-rated physical health status		
	N=47	%
Very good	13	28%
Good	25	53%
Neither good nor poor	8	17%
Poor	1	.2%
Very poor	0	0%
Please rate your overall self-rated psychological health status compared to others:		
Very good	6	12%
Good	18	38%
Neither good nor poor	11	23%
Poor	5	10%
Very poor	0	0%
<b>Overall Health</b>		
How do you rate your general state of health?		
Very good	7	14%
Good	21	44%
Neither good nor poor	15	32%
Poor	5	10%
Very poor	0	0%
What do you think about your own health condition compared with that of others of your age?		
Much better	4	8%
A bit better	12	26%
Neither better nor worse	17	36%

A bit worse	12	25%
Much worse	2	4%

During the preceding academic year, did you experience any of the following psychological or psychosomatic problems?

<i>Difficulty in Concentration</i>		
Not at all	5	10%
A little	16	34%
Quite a lot	15	32%
A lot	11	23%

<i>Irritation</i>		
Not at all	11	23%
A little	15	32%
Quite a lot	11	25%
A lot	10	21%

<i>Anxiety</i>		
Not at all	3	6%
A little	8	17%
Quite a lot	10	20%
A lot	26	55%

<i>Sleeping Disorder</i>		
Not at all	9	20%
A little	14	30%
Quite a lot	11	23%
A lot	13	27%

<i>Depression</i>		
Not at all	15	32%
A little	11	23%
Quite a lot	12	25%
A lot	9	19%

<i>Tiredness</i>		
Not at all	2	4%
A little	10	21%
Quite a lot	9	19%
A lot	26	55%

<i>Poor Appetite</i>		
Not at all	12	25%
A little	12	25%
Quite a lot	11	23%

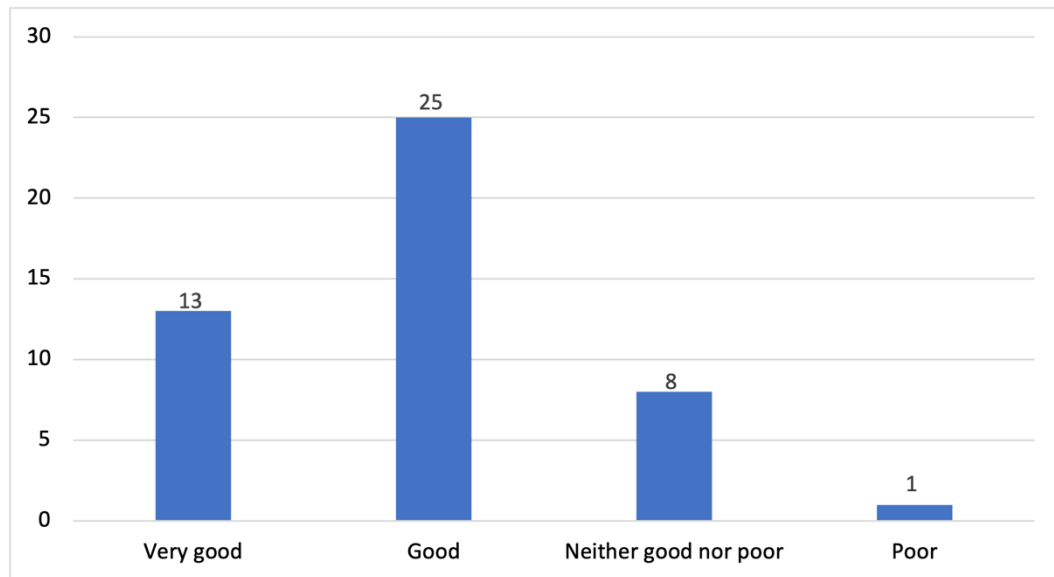
A lot	12	25%
<i>Headache</i>		
Not at all	10	21%
A little	17	36%
Quite a lot	9	19%
A lot	11	23%
<i>Upset Stomach</i>		
Not at all	11	23%
A little	19	40%
Quite a lot	8	17%
A lot	9	19%
<p>During the preceding academic year, did you experience physical difficulties that restricted your life because of temporary disease (less than once a month), chronic disease (more than once month), injury or functional impairment?</p>		
Not at all	22	46%
A little	20	42%
Quite a lot	4	8%
A lot	1	2%
<p>During the preceding academic year, were you troubled by psychological difficulties that restricted your everyday life?</p>		
Yes	25	53%
No	22	46%
<p>During the preceding academic year, did you seek health care due to physical or psychological problems?</p>		
Yes	23	48%
No	24	51%

**Question 15. Physical and Psychological Health.** Question fifteen asked if respondents had any physical or psychological health issues that you may have exhibited, including: temporary disease, chronic disease, injury functional impairment/handicap, utilization of university health services, hospitalization, use of prescription medication, mental healthcare, psychosomatic symptoms, psychological trauma. Survey respondents

were able to choose multiple selections. Participants indicated that almost (30%) of the respondents had engaged in mental health care and (57%) of the participants had either a temporary disease, injury or used prescription medication. As well, (43%) of the respondents indicated that they had utilized the university health service resources and (22%) of the respondents had some sort of psychological trauma during the academic year.

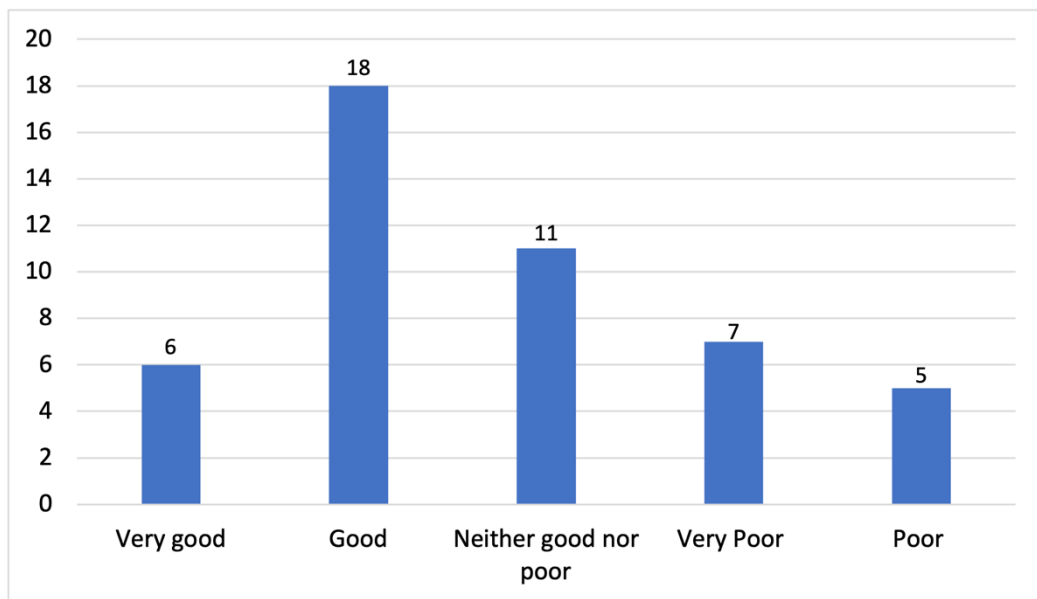
**Question 16. Self-Rated Physical Health Status.** Respondents were asked to self-rate physical health status. The majority of respondents rated their physical health as very good (28%) or good (53%). Only one respondent (.2%) out of the forty-seven participants self-rated at poor and no one rated a very poor. This suggested that generally the participants felt that their overall physical health was good (see Figure 4.1).

Figure 4.1: Self Rated Physical Health Status



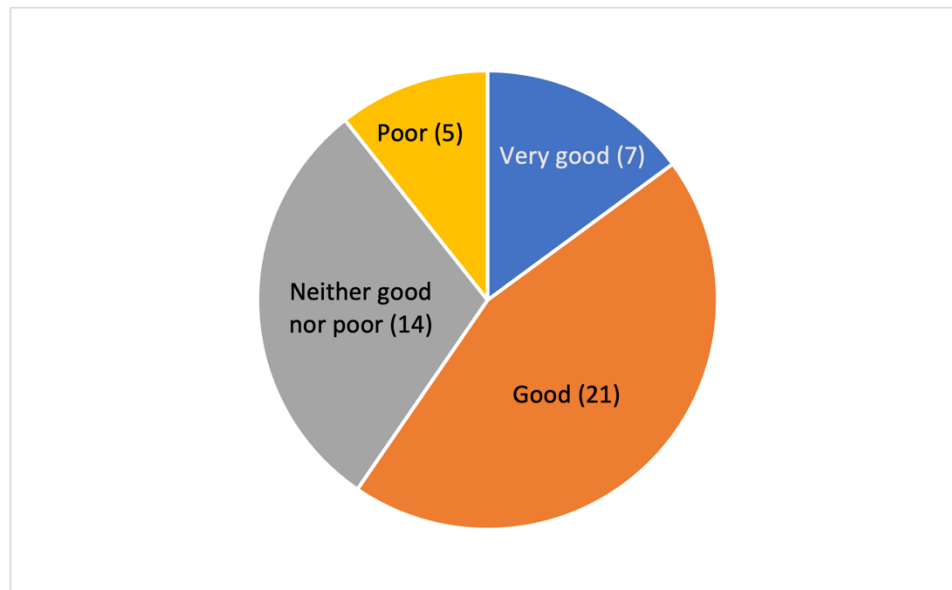
**Question 17. Overall Self-Rated Psychological Health Status.** In survey question 17, survey respondents were asked to self-report their psychological health. Overall, half of the respondents rated their psychological health at very good or good; while eleven respondents (23%) rated at neither good nor poor and five participants responded with poor (10%). Not one respondent (0.0%) rated at very poor (see Figure 4.2).

Figure 4.2: Self-Rated Psychological Health



**Question 18. General State of Health.** Question 18 asked participants on their self-reported general state of health, overall. Similar to the self-rated physical and psychological health questions, the participants rated overall health very good or good. Seven respondents (14%) selected very good and only 5 participants (10%) responded with poor to their general state of health. While the majority of respondents selected good (44%) or neither good nor poor (32%). This data aligns with the results of the previous question which revealed few, if any, participants who saw their health as poor.

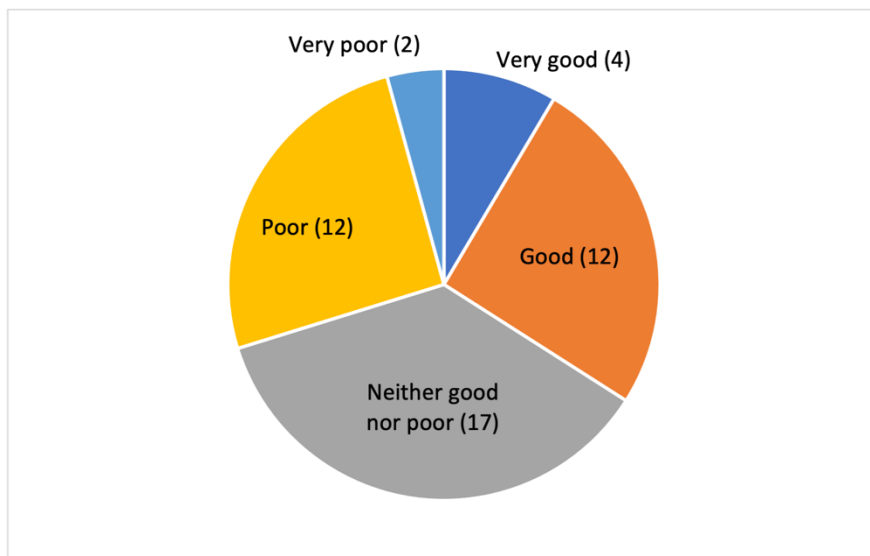
Figure 4.3: Rating of General Health



**Question 19. Rating of Health Conditions Compared with Others.** The next survey question asked respondents to self-report their health as compared to others. In an effort to understand how participants rated their health compared to others, when respondents were asked to self-report on their own health condition compared with that of others, the data showed that the majority of respondents thought their health was a bit better (26%), neither better nor worse (36%) and a bit worse (25%). Unlike the previous survey question, rating of general health, in which participants viewed their own health as mostly good, as compared to others, participants actually responded their health was worse than that of others.



Figure 4.4: Rating of Health Compared to Others



**Question 20. Psychological and Psychosomatic Problems.** This question asked respondents to report if they experienced any of the following psychological or psychosomatic problems: difficulty in concentration, irritation, anxiety, sleeping disorder, depression, tiredness poor appetite, headache and upset stomach. Of the sources, fifteen participants (32%) reported that they had quite a lot of difficulty with concentration and eleven (23%) reported they had a lot of difficulty. Only five respondents indicated they didn't have any difficulty when it came to concentration and 34% of participants, they had a little difficulty (see Figure 4.5).

When asked if participants experienced irritation, almost half of the respondents indicated they had quite a lot (25%) or a lot (21%) of irritation during the year (see Figure 4.6). Similarly, when participants were asked about difficulty with anxiety, over half of the participants indicated they had a lot (55%) of difficulty with anxiety. Additionally, 20% shared they had quite a lot and only three respondents indicated they

had no difficulty with anxiety issues. This data suggested that self-respondents felt high levels of difficulty when it came to anxiety (see Figure 4.8). Respondents also reported they had difficulties with sleeping disorders. It is noteworthy that (50%) of participants self-reported they had difficulties with sleep (see Figure 4.7).

Interestingly, when participants were asked if they experienced depression during the academic year, fifteen respondents (32%) indicated that they had not been depressed at all. However, over half of the forty-seven respondents self-reported that they had experienced quite a lot (25%) and a lot (19%) when it came to depression. This data indicated that the majority of participants experienced some level of depression during the school year (see Figure 4.9). Exceedingly, almost (74%) of survey participants, self-reported quite a lot (19%) or a lot of tiredness during the academic year (see Figure 4.10). Finally, when asked about poor appetite, headache and upset stomach, participants were across the board on their responses. About half of the participants indicated they had experienced quite a lot (23%) or a lot (25%) of difficulty when it came to poor appetite (see Figure 4.11); eleven participants (23%) self-reported quite a lot of difficulty with headaches (see Figure 4.12) while 40% of participants reported a little bit of difficulty with an upset stomach (see Figure 4.13).

Figure 4.5: Concentration

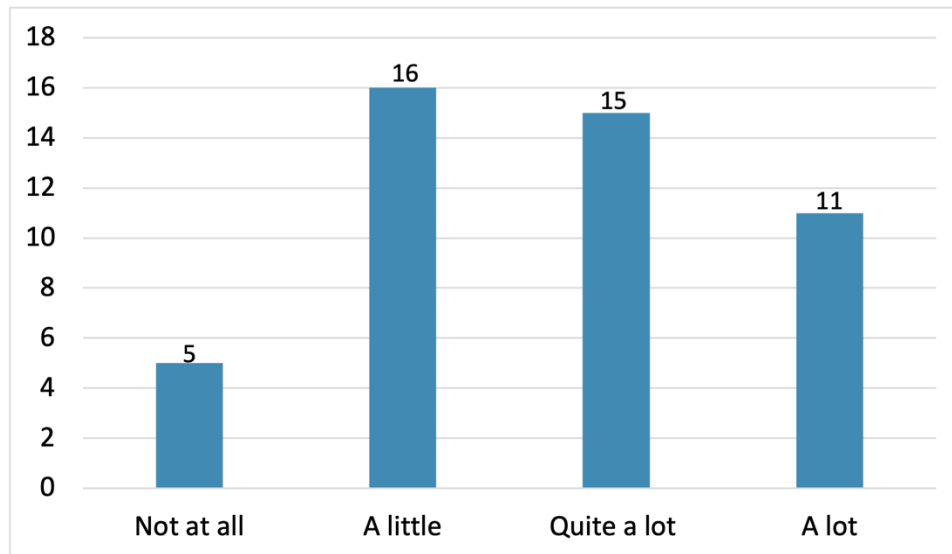


Figure 4.6: Irritation

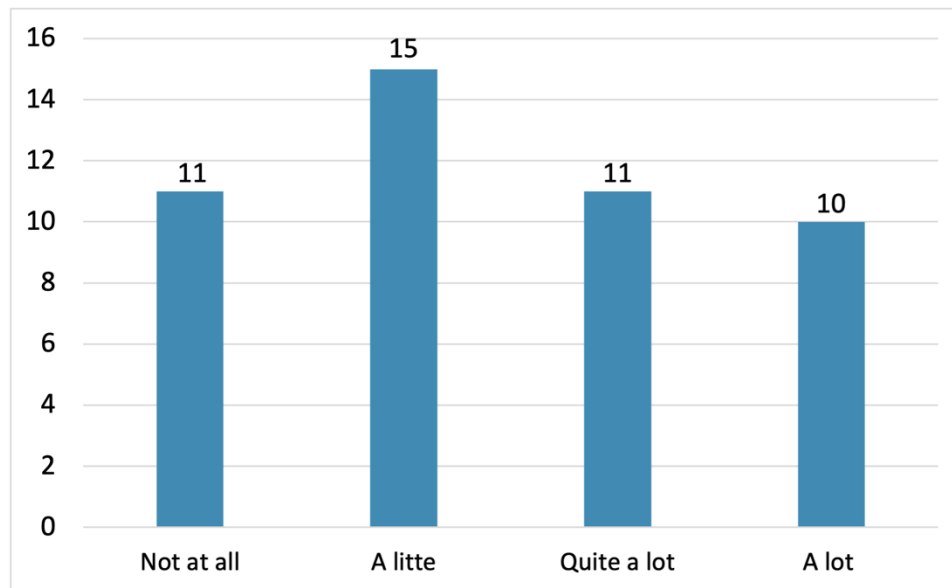


Figure 4.7: Sleeping Disorder

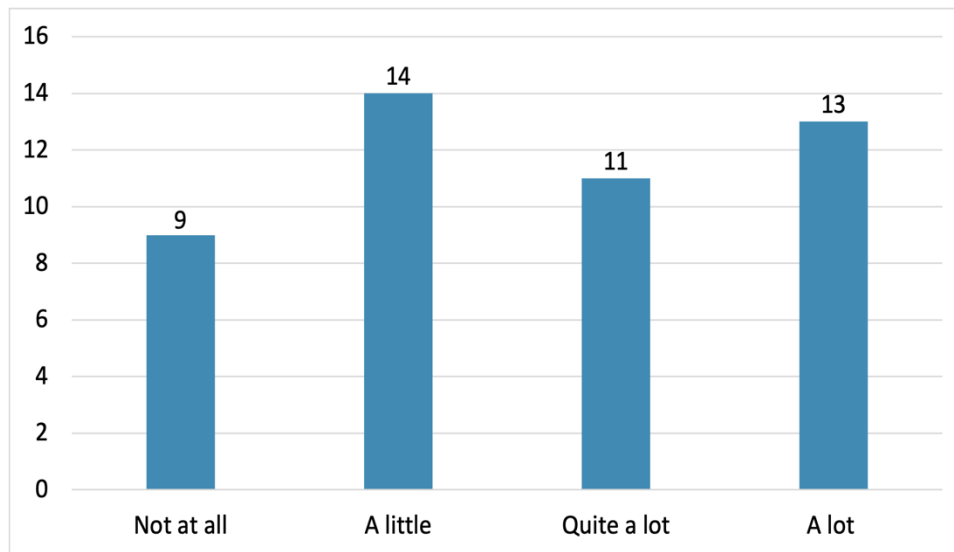


Figure 4.8: Anxiety

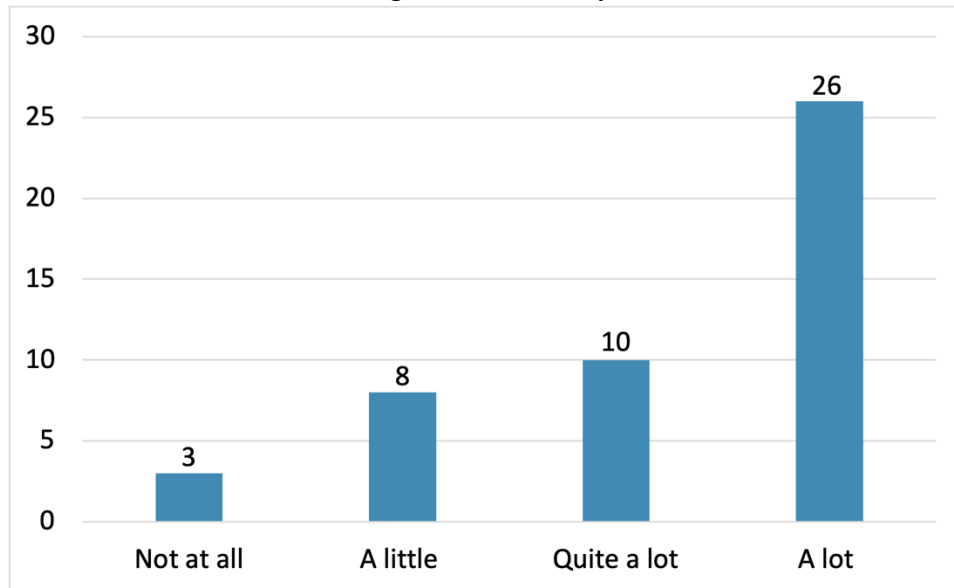


Figure 4.9: Depression

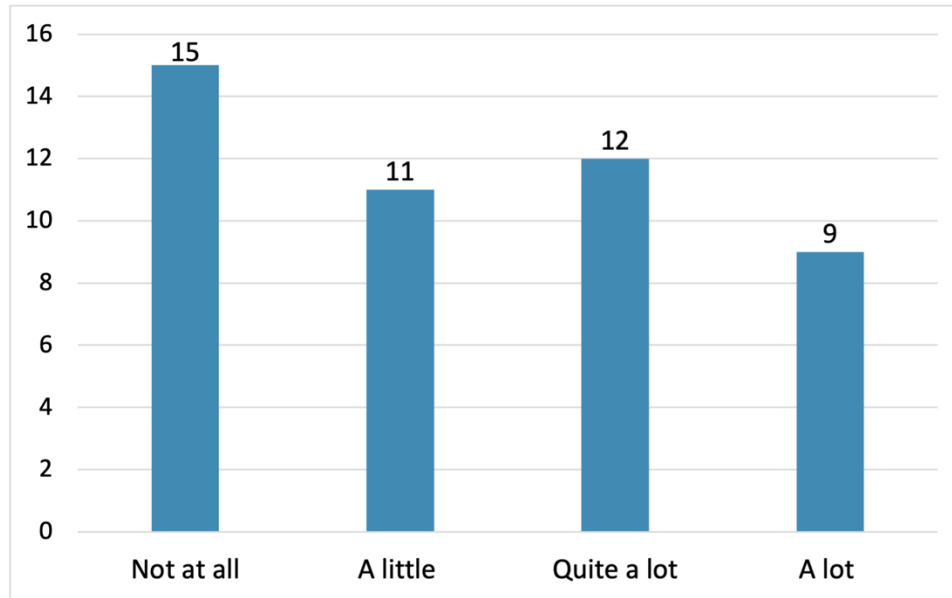


Figure 4.10: Tiredness

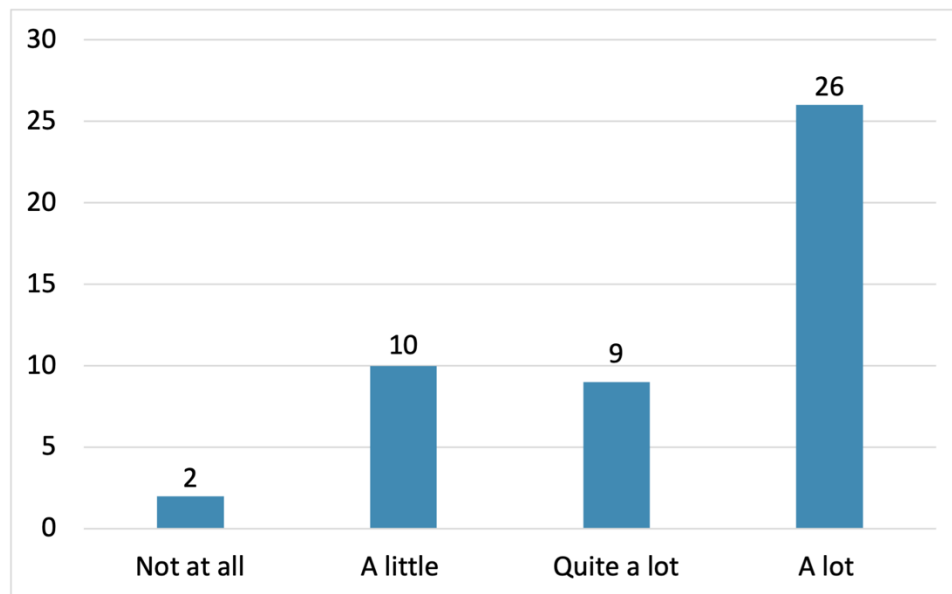


Figure 4.11: Poor Appetite

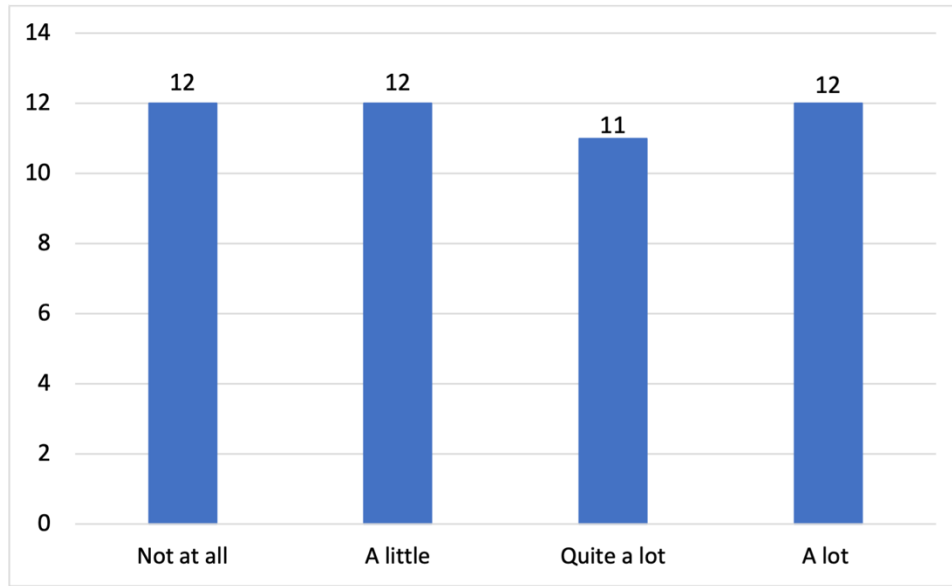


Figure 4.12: Headache

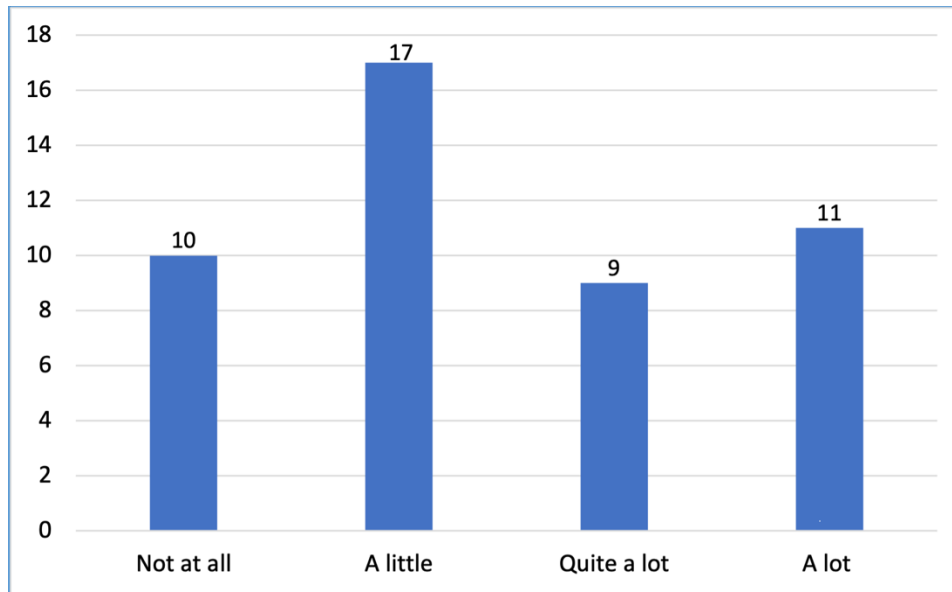
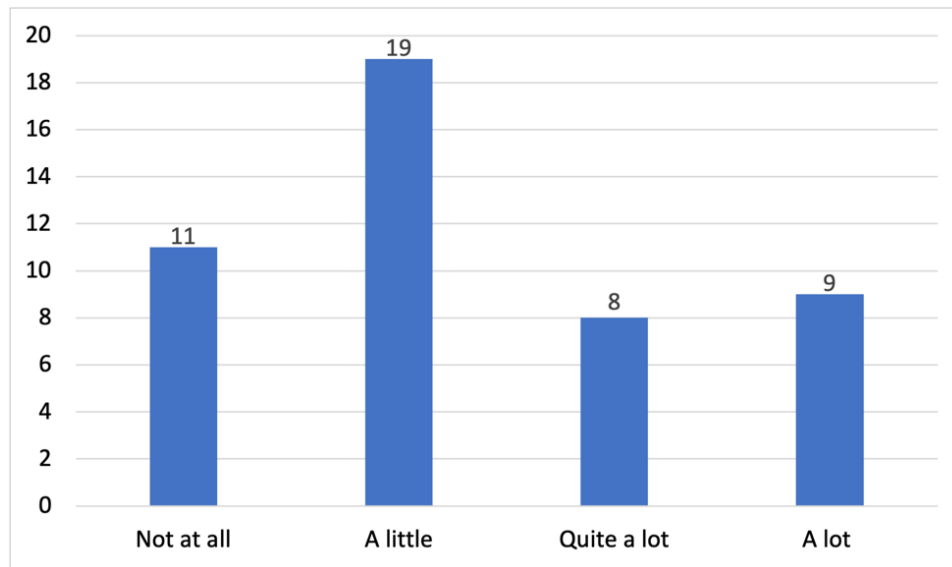
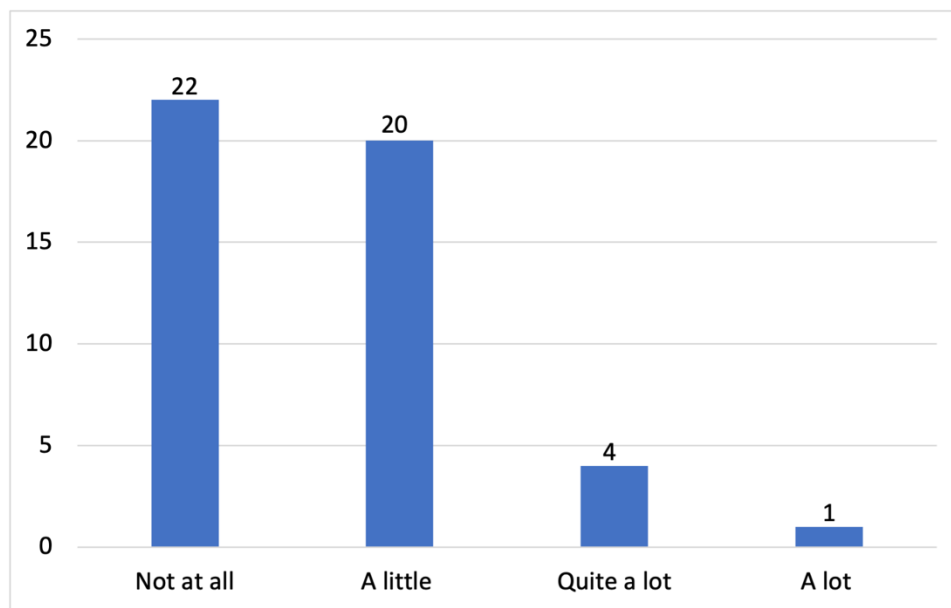


Figure 4.13: Upset Stomach



**Question 21. Experiences of Physical Difficulties.** Participants were asked if they had experienced physical difficulties that may have restricted their life due to temporary disease, chronic disease, injury or functional impairment. This data provides conflicting results (see Figure 4.14). For this question, (47%) of participants indicated that they did not have any physical difficulties that restricted their lives due to temporary disease, chronic disease, injury or functional impairment while (43%) shared that they only had “a little”. This conflict could have suggested that physical difficulties can be defined in different ways for each participant and perhaps the participants may not connect their physical difficulties to their mental health struggles.

Figure 4.14: Physical Difficulties that Restricted Life because of Temporary Disease, Chronic Disease, Injury, or Functional Impairment

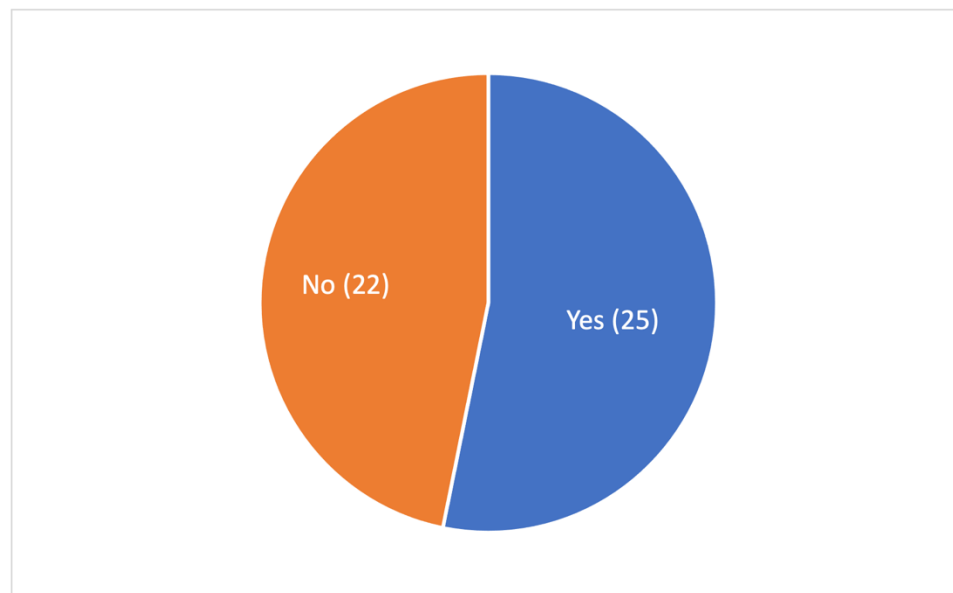




### Question 22. Psychological Difficulties Restricting from Everyday Life.

When respondents were asked about troubles related to psychological difficulties that restricted everyday life, (52%) of participants indicated “yes”, while (47%) stated “no”. It was interesting to note that over half of the participants felt that psychological difficulties restricted their lives. However, it is important to consider that each participant can define “psychological difficulties” in a different way.

Figure 4.15: Psychological Difficulties that Restricted Everyday Life

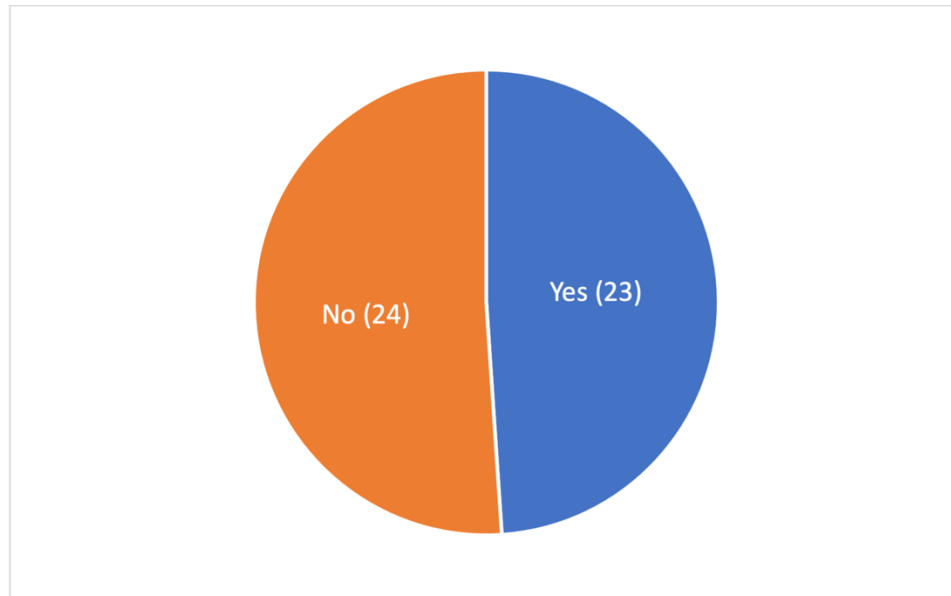


### Question 23. Prescription Drugs taken Due to Physical or Psychological

**Problems.** Question 23 asked the participants if they took any prescription drugs due to physical or psychological problems. The results of the data analysis for this question shows that (53%) of participants shared that they did take prescription drugs and (47%) did not. Though, it is impossible to truly understand if the prescription drugs were taken due to physical or psychological problems. Although the findings of this data is similar to the findings of question 22 when participants were asked about psychological difficulties,

the findings cannot be generalized specifically related to psychological problems where the question asked about physical and psychological problems.

Figure 4.16: Prescription Drug Usage Due to Physical or Psychological Problems



**Question 24-26. Rating of Psychological/Psychosomatic Problems.** To measure the participants psychological or psychosomatic problems, the researcher based those responses on a 4-point scale (not at all, a little, quite a lot, a lot). To measure self-perceived quality of life, the researcher chose a ladder scale. According to Hicks (2008) the ladder scale is now a widely recognized measure that has good validity. The researcher introduced the ladder question in the following way: “Here is a picture of a ladder. At the bottom of the ladder, 1 is the worst life you might reasonably expect and 10 at the top is the best life you might reasonably expect to have. Indicate where on the ladder your life is right now.”

**Question 24. Self-Rating of Life (Current).** Question 24 asked participants to rank in order, where on the ladder their life is right now, one being the worst life the

participants might reasonably expect and 10 at the top is the best life the participants might reasonably expect to have. Table 4.7 shows the summary statistics for each question as well as the mean. On the far-left column, lists the question asked and on the far-right column is the calculated mean scale. This mean rank scale was interpreted as the lower the mean, the worst life “you might reasonably expect to have”, based upon each specific question. Participants reported their *lives at that moment* were low with a mean of (M=4.7) out of 10, being the best life.

**Question 25. Self-Rating of Life (One Year Ago).** Question 25 asked the participants where on the ladder scale was their life one year ago. Much like the previous question, participants reported their *lives one year ago* were also lower with a mean of (M=4.6). (See Table 4.7)

**Question 26. Self-Rating of Life (In One Year).** Finally, question 26 asked participants where on the ladder scale will their live be in a year from now. According the participants they reported their lives one year from now will also be lower with a mean of (M=4.7). (See Table 4.7)

Table 4.7: Life Ranking

N=47 Question	1		2		3		4		5		6		7		8		9		10		Mean
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	
Where on the ladder is your life right now?	0	0%	0	0%	3	6%	6	13%	4	8%	9	19%	7	15%	15	32%	2	4%	1	2%	4.7
Where on the ladder was your life one year ago?	2	4%	5	10%	3	6%	3	6%	2	4%	6	13%	10	21%	8	17%	1	2%	6	13%	4.6
Where do you expect your life to be in one year from now?	1	2%	0	0%	1	2%	1	2%	2	4%	6	13%	12	25%	12	25%	8	17%	4	8%	4.7

## **Summary of Quantitative Results**

The data were analyzed question by question to determine the number and percent of responses for each question. This study also presented compelling information regarding certain types of lifestyles, stressors, physical and psychological problems among the participants. This could potentially indicate that first year undergraduate college students may have adjustment problems and experience unwanted stress and psychological problems during the first year of attending college. According to Karp (1996) students appeared to be aware that going to college means changes in their friendship patterns and part of the excitement of college relates to the anticipation in making new friends. Therefore, the results of the quantitative survey provided an important snapshot of the current lifestyles, college life stressors and health behaviors of first year undergraduate college students and it was important to move into phase 2 of the results in analyzing the themes and responses from the semi-structured interviews conducted.

## **Qualitative Data Analysis Procedures**

### ***Interview***

The next section will analyze the themes which emerged from the one-time, semi-structured interviews in which three student participants were interviewed. One interview protocol was developed for the data collection, semi-structured interviews. Based upon the results of this study, Schlossberg's (1984) Transition Theory provided the theoretical framework which uncovered four consistent variables throughout: The overall transition experience, the individual, the environmental resources and support and strategies. Three

main themes emerged from the findings. It is important to note that the theoretical framework, Schlossberg Transition Theory, guided this research. As Schlossberg (1984) suggests, there are four S's to delineate the framework around transition: situation, self, support, and strategies (Schlossberg, 1994). It was noteworthy that all four components of the theoretical framework (situation, self, support and strategies) emerged in the findings.

The protocol of semi-structured interviews included 10 questions, along with prompt questions if needed. The first question, "How did you make the decision to attend the University?" was designed to put the respondent at ease and obtain a better understanding of why the participant chose to attend the university. The next two questions were intended to collect general information about the participant's initial transition experience. The remaining six questions included questions that would elicit responses related to the research questions about the elements including individual and environmental factors that influenced their transition experience as well as how the participants perceived their existing support structures as related to their transition. The interview protocol was piloted on a small sample of students who self-identified with having mental health challenges who were not eligible to participate in the full study but offered feedback on the clarity of the questions and timeframe of the interview.

All interviews took place at the selected private higher education institution at a date, time and location selected by the researcher and agreed upon by the participants. The location was a small private study room at the institution's university library. To

protect each participants identity, pseudonyms were assigned in place of each participants' name.

The interview protocol, available (Appendix A), shows the opening and questions used with all participants. Based on the participants' responses, the researcher asked a variety of subsequent questions in order to attempt to understand the participant's transition experiences as related to their self-identified mental health challenges.

### ***Data Analysis Procedures Interview***

To analyze the data collected through the semi-structured interviews, a blend of a priori or preexisting codes and open coding was applied to further determine categories of information (Creswell, 2013). Then, a priori coding was utilized and demonstrated specific themes that emerged from the online survey. The survey was closed, and the data was analyzed prior to completing the interviews. As Creswell (2013) suggests, it is important for the researcher to be open to the emergence of additional coding during the interview data analysis. Each individual interview was audio-taped and then transcribed verbatim by the researcher. Additional codes were added as they emerged throughout the data analysis portion. It was important for the researcher to describe the college transition experiences of first year college students who self-identified with mental health challenges.

During the data analysis process for the semi-structured interviews, it allowed the researcher to look at each of the student participant's individual story and experiences based upon their own "voices" and perspective versus the researcher's perspective. In using this approach, the researcher was able to illustrate each step in the data analysis

process to understand the essence of each participants lived experience. Additionally, the researcher was able to incorporate the findings from the questionnaire to provide an important snapshot of the current lifestyles, college life stressors and health behaviors as indicated in the results.

***Semi Structured Interview Participants***

The participant sample was relatively small (N=3); all between the ages of 18-23. See Table 4.8. Two participants identified as females and one as male. All three participants additionally self-identified as being of Caucasian decent. To participate in this study, the students were aware that the purpose was to examine the college transition experience of first year college students who self-identified with mental health challenges. All three participants did self-identify as having some type of a mental health challenge. However, it was noted that to participate in this study, they were not required to have formally been diagnosed with a mental-health disorder or even to have sought professional help. Once selected for the study, each participant was asked to choose a pseudonym which was used maintain privacy.

Table 4.8: Semi-Structured Participant Demographics

Pseudonym	Gender	Age	Ethnicity	Mental-Health Struggle or Diagnosis
<i>Emily</i>	Female	18	Caucasian	Depression/Anxiety
<i>Michelle</i>	Female	19	Caucasian	Depression/Anxiety/Substance Abuse
<i>Blake</i>	Male	18	Caucasian	Anxiety

### ***Interview Participant Descriptions.***

The following brief descriptions of each student participant provides further detail about their backgrounds, including context provided.

**Emily.** Emily was an 18-year-old Caucasian female first year undergraduate college. She disclosed that she was diagnosed with depression and anxiety during her junior year of high school. She was an honors student in high school and shared that she “has always struggled and put pressure on herself regarding her honors courses”. She also shared that perseverance was very important to her when she applied to college and her family was very supportive of her pursuit. Overall, Emily shared that she couldn’t wait to go to college, but she didn’t realize that it was going to be such a struggle.

**Michelle.** Michelle was a 19-year-old Caucasian female, first year undergraduate college student. She disclosed that in her sophomore year of high school she was diagnosed with Depression/Anxiety and put onto medication. She then shared that she thinks she may have a substance abuse issue, but she wasn’t formally diagnosed. She also shared that she didn’t think she really wanted to go to college, but her parents made her. She was the first person in her family to attend college and she said she didn’t really have the family support of navigating the whole process, but that her parents made her. She stated that she never “had to work really hard” to do well in high school, but college has been a struggle for her academically. She stated that she doesn’t really have a lot of friends and feels like she is more mature than the peers around her.

**Blake.** Blake was an 18 Caucasian male, first year undergraduate college student. He disclosed that he had looked at several schools prior to attending the current



institution. Early on, he disclosed he was diagnosed with anxiety and he had struggled to take his medication in the past. He shared that he was in an awful relationship in high school, and he was excited to attend college to start fresh. He also shared that in the past he has had difficulties finding his friend group and has a hard time connecting with people. He also shared that in the past he had disappointed his parents and is doing his best to “make up” for that.

### ***Interview Themes as Related to Guided Research Questions***

Three themes emerged from the findings. It is important to reiterate; Schlossberg Transition Theory guided this research. As Schlossberg suggests, there are four S’s to delineate his framework around transition: situation, self, support, and strategies (Schlossberg, 1984). It was noteworthy that all four components suggested by Schlossberg (1984) emerged within the findings of this research. However, in order to understand the experiences of the participants, the findings in this chapter will present four main distinct themes which included: The Transition Process, the Individual Experiences, and Environmental/Resources. Under each theme, several subthemes emerged. An explanation of each theme including each subtheme is shown in Table 4.9.

Table 4.9: Summary of Themes as related to Guided Research Questions

<b>Research Questions</b>	RQ 1: How do first year undergraduate college students who self-identify with mental health challenges, perceive their transition into college?	RQ2: What are the elements that contribute to a successful transition for first year undergraduate college students who self-identify with mental health challenges?	RQ 3: How do first time, first year college students who self-identify with mental health challenges perceive the existing (and needed) support structures at a small private university, as it relates to their transition?
<b>Main Theme</b>	Transition	Individual Experience	Environmental/Resources
<b>Sub Theme</b>	<ul style="list-style-type: none"> <li>• Fear</li> <li>• Anticipation</li> <li>• Growth</li> </ul>	<ul style="list-style-type: none"> <li>• Stress</li> <li>• Coping Strategies</li> <li>• Living with Mental Health</li> </ul>	<ul style="list-style-type: none"> <li>• Academic Support</li> <li>• Connection with faculty</li> <li>• Social</li> <li>• Developing Meaningful Connections/Friendships</li> </ul>
<b>Connection to 4 S's</b>	Situation	Self	Support/Strategies

**Research Question 1: Transition/Situation.** As indicated, Schlossberg’s (1984) Transition Theory guided this research. As Schlossberg suggests, there are four S’s to delineate the framework around transition: situation, self, support, and strategies (Schlossberg, 1994). It was noteworthy that all four components suggested by Schlossberg emerged within the interview findings of this research.

To help answer the first research question proposed in this study: “*how first time do first year college students who self-identify with mental health challenges, perceive their transition into college*”, three themes were identified. Additionally, in this section, the researcher provided participant responses which further built upon the first research question in the study. The student voice provided insights related to the participants transition experience and their mental health challenges. Given the importance of

understanding the essence of the transition experience, the three themes that emerged were: (1) fear, (2) anticipation, and (3) growth/responsibility. Table 4.9 summarizes the data.

During the first part of the interview, the researcher asked participants several questions related to the transition process, including how they decided to attend the institution and how their first few days/weeks on campus were. All three participants shared they were anxious, yet very excited to leave high school and begin their college journey. One participant, Blake, shared that he was excited to be out of high school to leave behind an “awful relationship”. He stated, “I was doing poorly at school, not sleeping at all, and was just ready to leave. I needed to transition to college because I became very anti-social and needed a change. I was excited.”

Emily shared that she was excited for her college experience. She stated, “I was a strong student in high school and was in the honors program. I was very driven and put a lot of pressure on myself, especially my senior year. I was just, like, ready to leave the high school clicks and find a new me.”

Michelle shared that she was very anxious for the college experience. Originally, she was not looking forward to attending college. She said, “My parents really made me go. I know I was smart in high school, but I just didn’t really think college was my thing. But, now that I am here I am actually enjoying my time. I have met a few people whom I like”. All three participants described their transition as “they were looking forward to the anticipation of change, growth, but genuinely scared of what to expect.”

*Theme 1: Fear.* The first theme, fear, emerged. All three participants talked extensively about their fears of leaving high school. Both Blake and Emily shared that they knew that a college degree was essential to their future success in life and careers, but it brought tremendous anxiety to their experience. Emily described that she was afraid of failure, specifically related to academics.

High school was difficult, and I really wanted to remain in honors. I had to work super hard to get through my honors courses, especially my senior year. They were really difficult. I put a lot of pressure on myself and ended up taking on more than I could handle. The stress really got to me and my parents were worried. But I was afraid that if I couldn't make it in these honors classes in high school, I wouldn't be able to make it in college. When I got to college, I knew I needed perseverance. I knew that I had to do well. My roommate was okay, but we didn't really connect. She partied a lot.... And we really, like, didn't have a ton in common. And that wasn't really what I wanted to do. I mean, I wanted friends and to fit in and stuff... but I wasn't really a partier type. Then, my first quarter, I got really sick; I was sick for like four weeks. I had a sinus infection, the flu, and then got super stressed out. I was afraid I wasn't going to make it in my classes. I missed a lot of class. And my professors were somewhat supportive. At the end of the quarter, I ended up getting my worst grade ever, a B-. I feared that I wasn't cut to make it in my major.

Michelle shared that she was afraid to actually be on campus. She expressed conflicting feelings of being afraid, anxiety and the fear of not fitting in in great detail.

Michelle's description captures many of the fears of move-in day:

I was extremely scared. I didn't know anyone on campus and didn't even talk to my roommate before the first day of move-in. The day for move-in... my mom came to college with me to drop all of my stuff off. We didn't really know where to go, but the people were really helpful. Like me and my mom are close, but I was scared. I guess I like didn't really think that I would miss her and all... she was being kind of weird the whole time, and I think was holding back her crying. She stayed for a while, because I think, like, she was super scared to leave... or something.

Some of the participants expressed a sense of fear, particularly with dealing with their mental health challenges. Blake shared:

Even though I was ready for a new start, I was a little worried about fitting in. I partied a lot during the first week...well, not even the first week, the week of orientation. There was a lot of stuff and activities going on so I decided to go out because I was...like, sort of, antisocial... and I knew that if I was going to find friends I needed to be like going where the people on my floor where. One night, I went downtown with my roommate and we like got into a bar... and then I realized that I like lost my medication... ya the medication I take for my anxiety... and I was drunk, like real drunk, and I was like sorta of wandering all over downtown looking for it and then I walked back to campus and my dorm...

and when I got back... I couldn't like to get in... and there were these two girls who wouldn't let me in... I guess I may have looked like crazy or something, but they didn't let me in... I didn't feel very welcomed to campus... I mean I couldn't even get in my dorm.

***Theme 2: Anticipation.*** The theme, anticipation, refers to how the participants compared their college transition experiences in relationship to what they hoped it would be and what their expectations were. Emily shared that she didn't realize that college would be more challenging than high school. She expected that because she was a good student and an honors student in high school, she would be more prepared.

You know, I wasn't really sure what to expect because high school was difficult for me, but that was because I took like all of the hard classes... and people always told me that if I did, I would be like... um... prepared. So, I didn't want to come in thinking I would like totally be good with academic in college and that I would need to sit down and like study and do my homework. I knew I needed to do that, of course. But, I didn't anticipate to like get super sick and not have any friends or anything right off the bat.

Blake talked about his eagerness to begin a fresh start. He talked a lot about the desire and need to transition and was anticipating a better experience for him once he starts college. He shared:

I was really anticipating that this school was going to be super hard and super tough... I was surprised with the classes... I mean like, I was kind of scared about the academics and if I was able to do all of the assignments... I guess I just

needed to figure out how to do the assignments... The seemed kinda easy... and my major is kinda hard, from what I have heard. I guess like for school and stuff it has come sort of easy to me... but, I didn't expect this. One thing I didn't anticipate was that...like...there was a big pot lifestyle here. I mean I guess that doesn't make sense... because of like where we are located, but I was surprised. I mean, in high school, my senior year I didn't have like any friends... because most of my friends like smoked pot a lot and stuff...like every day all week.

***Theme 3: Growth/Responsibility.*** The third sub-theme depicted under transition, growth and responsibility, emerged from all three participants. Upon arriving onto campus, all of the participants shared their experiences around growth and responsibility. Some of the participants were anxious about this and others were very relieved to finally be on their own. They talked about how they were now redefining their relationships with the families back at home and felt more like an adult than ever before. The participants also expressed that they had more freedom to make decisions to take on more responsibility, from taking care of themselves when they are ill and managing their medication. Blake talked about his experiences of living with anxiety:

Ya, like my mom always reminded me of taking my medication. Really bad things happen when I don't take it. Like that story I told you during my first week here. I mean I was like really scared and after that experience I knew I like needed to step up...and remember to refill my prescription and take my medicine every day. It seems like the smallest thing. But like it wasn't. I also knew... I needed to join a better group of friends... like my anxiety was up... and I knew that I

couldn't be around friends who were like smoking pot all the time. That was just not what I wanted to do. So, I called my mom to tell her to see if it was a good idea to change my friend group... they were not good for me. And she said that was exactly what she did when she was in college. This was like kind of a big deal, because I didn't used to get along with my family members... like in high school I didn't make the greatest choices and like calling my mom to tell her that I was being like more responsible and actually making good decisions was really great... I was like really proud. It was good.

Emily also described her experiences about coming to college as a signal that they were moving toward becoming more responsible. She was also beginning to see herself as an adult, more mature, and even older:

I was just sort of like freaking out. Like not only am in college, but I guess I'm like getting older. This means I have all of this responsibility and I am completely in control. Like my mom and I are really like close... but, I can't believe that I am already over halfway through my first year in college. I have already overcome so much, like making new friends and like after I got really sick my first quarter, it made me realize that I can like totally do this... I was disappointed in my grades, but I know that I need to make responsible and good decisions. I actually joined a sorority, and I am going to live in the house next year. I made that decision on my own.... And I know that this is a good incentive to actually keep my grades up.



Blake felt that he has grown a lot during his first year. He noted that this new independence came with new responsibilities. He shared that his parents were not there to tell him when to eat, when to study, to go to class, etc. He had to be more responsible:

There was this one class that I didn't like at all during my first quarter... I think it was like a "weed out class" or something. Like in high school my mom would tell me what to do and to make sure I would get a tutor or something so I could pass the class. But now, I like realized that I'm responsible to make sure I go to class and get the help I need. Like my mom, like calls me all the time now... which is good, cause we are actually talking again... but, like I don't really need her to tell me now to take my medicine and go to class. I learned that I need to do that now. I mean, there is a little struggle here and there... but I guess I need to figure it out on my own.

Michelle shared that she was beginning to redefine her relationship with her parents. She felt her parents were still very involved, sometimes too involved in her day-to-day life.

During the first few weeks my mom would call me every day. I mean, I guess I could understand it. She was really sad when I left for college and I guess like she was worried. I mean I have some pretty big mental health issues and I guess like she didn't like want me to fall in the same trap. I mean, I like partied a lot in high school... I didn't make the greatest choices and she thinks she knows me better. Which isn't like really true. One of the most difficult things had been trying to like wean her off of me. She calls... like once and sometimes twice a day. And I

remember over the break we got in an argument and I said, “Mom, I’m not going to be able to like talk to you every day... I mean I am really busy and I am doing good and making good choices in college.” Like I was trying to hint at her to let me do my own thing. I guess she is still scared. I mean, I’m not doing any of those things I did in the past. I mean, I like to party and go out, but I am not going to extreme. I have to live.

The participants learned early on, that college offered new opportunities for growth and responsibility. They learned to take on new responsibilities and recognized that the transition to college provided opportunities for growth. However, with the anticipation of growth and responsibility came added challenges, specifically around their mental health struggles. For example, all three participants shared that they wanted more independence and growth, but their parents played a strong role in helping them cope, specifically. They also felt a strong sense of responsibility for their own mental health in medication management and dealing with the negative aspects if they if they did not take care of themselves. Based upon the essence of the experiences from the lens of the participants, they struggled with their own fears, anticipation and growth as they entered into college.

**Research Question 1: Summary.** As noted in this section, the participants provided stories of their experiences and perceptions around the college transition experience. To answer the first research question proposed in the study, “*how do first year undergraduate students, who self-identify with mental health challenges, perceive their transition into college?*”, one main theme, *transition*, emerged. Additionally, three

subthemes, *fear*, *anticipation*, and *growth*, transpired from the study. Schlossberg's (1984) Transition theory was the guiding framework to support in answering this question as related to the four S's. The "S" which emerged from this question was, situation. For the participants, they perceived their transition by looking at the situation in what precipitated the transition. For example, Emily shared that during her first quarter she was very ill and was sick for several weeks. In this, she was afraid and fearful that she was not going to make it to class and in turn, not do well academically. For Emily, her particular situation presented her fear to complete her coursework because she was ill. Blake expressed a sense of fear, specifically related to his mental health challenges. He shared that he was worried about fitting in and finding a friend group because, as he shared, "I was antisocial."

The participants also struggled to balance their new college transition experience with their perception around anticipation, which was the second sub-theme that emerged. Emily shared that she anticipated college was going to be a better experience than high school and she was anticipating new opportunities to develop her own identity.

The final theme that emerged, was growth and responsibility. The participants learned the importance of taking on new responsibilities early on. Their perceptions were that the transition to college did provide experiences and opportunities, but there were added challenges, specifically around their mental health challenges. All three participants perceived that it was important to gain more responsibility to take ownership of their mental health challenges as they transitioned into this new experience.

**Research Question 2: Individual/Self.** The second research question: “*What are the elements that contribute to a successful transition for first year undergraduate college students who self-identify with mental health challenges?*”, uncovered the primary theme of Individual Experience. In this section, the researcher provides participant responses which build upon the above question. The student voice provided insights related to the individual experience and mental health struggles. Following the primary theme of individual experience, three additional themes emerged: (1) stress, (2) coping strategies, and (3) living with mental health struggles.

The second research question addresses the individual experience that emerged from all three participants. It was apparent in the descriptions of their experience, that each participant felt like it was their own individual experience relative to the college transition experience. Participants shared that they felt like they needed to experience the transition by themselves and when asked about their “greatest challenges and greatest successes” as related to their experience, they all talked about how they had to learn how to manage their time for the first time in their lives. The participants then shared how they had more distractions in college, and many were unaware of how to balance their academics with a busier social life, work life, and their own individual experience.

Emily shared that she really wanted to keep her academics up to par, but with her sickness during the first quarter she really struggled with balance. After she got better, she spent most of her days playing catch up and didn’t really have time to balance and prioritize her life.

My biggest fear was figuring out how to manage my time with school stuff and then of course make friends and fit in. I bet every single student would say that, thought. I think I am getting better and better at it, especially after last quarter. The time dedicated to schoolwork is a lot. I thought I could handle it and have a social life too, but that wasn't the case. I realized that I can't compare my experiences and be like the other students and some of my friends. I mean, I am my own individual person and...like... I just had to figure it out. Like, I had to figure out how to manage my own time, of course, get healthy, and then had to stick with the plan.

Michelle shared that she needed to figure out her time management as relate to her own mental health challenges:

I am a super bad procrastinator. It is funny because I was like talking to my psychiatrist about this and she told me that people with anxiety and depression are really prone to it. And, I totally believe her. I think that's probably why I tend to drink more sometimes. It's almost like I am so buried and behind that I just don't want to do the school stuff. Plus, for me, school kinda comes easily. But college is getting harder. I am really trying to battle getting onto of the school stuff and not get behind... especially on the quarter system.

Blake shared that he had to learn to develop new individual skills around crating a schedule and sticking to it. In addition, to learning new skills around time management, he also realized he needed to figure out what he needed specifically in setting his priorities around balancing his academic and social life.

I guess I needed to learn for myself that I had to get out there and actually meet people... all at the same time of figuring out my own major and classes. That was kinda tough for me. I am sort of an introvert and pretty antisocial. My friends when I first started here are totally different than now. All of my friends were like not totally interested in like studying... and I said my major is hard. So I had to like learn that I needed to put myself out there to like meet other people versus just like hanging out with the pot heads... which is like what I did in the beginning.

The transition into college can provide a variety of experiences for students. All participants shared that they had to learn the importance of understanding their own individual needs in order to have a successful college transition experience.

***Theme 1: Stress.*** A transition can be very stressful for first time college students. Therefore, stress can play an instrumental role in the college transition process as it relates to student success (Banning, 1989). Stress was a consistent theme that came up with all three participants many times. The participants shared that there were several different concerns that caused negative stresses, such as: difficult academics, friendships, roommates, parents, and social norms, to name a few. Emily shared:

I really was struggling with stress in the beginning of the quarter when I first got here. I like didn't really form a good group of friends and didn't feel like I fit in. I mean, I like really liked my major and my classes, but I was sick, depressed, stress out and I sort of felt a little left out. I guess there was like a lot going on. I

mean, so many things were happening all at once and I just got into a zone of like not thinking about it really.

Blake also shared his struggles with stress:

I mean, for the transition experience, I like really didn't think that stress would be an issue. I mean I was moving to a new place and like I said, was like excited and all. But, like there was a lot of stuff going on all at once. I mean, there was like this one time in the beginning of the quarter where I was accused of academic dishonesty. I was like trying to complete one of my lab projects and I guess a classmate and I had like the same answers and she said we cheated... and I didn't. I like don't cheat and know that cheating isn't like gonna get me anywhere. I mean from the beginning the professor didn't like me... at the end of the day, she didn't believe me but like didn't have enough evidence to prove I cheated... that was really stressful on me.

All three participants talked about different ways they tried to manage stress.

Blake stated, "Well, when I find that I am in a stressful situation, I try to take a step back and really see what is going on." Michelle shared, "stress is really tricky for me...it sometimes can lead to making bad decisions, so I need to be sure I in the right frame of mind and hanging around good people." Emily shared:

Ya, I guess stress is really hard for me. But, like it has been nice for me to actually turn to someone to help me deal with it. Like when my sorority stuff was getting stressful, I realized that it was time for me to see my therapist so I can just talk it out. Like... this is what is happening, and I didn't know what to do with

classes, etc... and how to balance everything. She always helped me to see a different side of things that helped. That is something I probably need to continue, I guess...

Not surprisingly, stress was a consistent theme in which every participant discussed. All three participants shared their experiences and stories about the situations, people, and current challenges that caused them stress. Additionally, students shared several coping strategies that also helped them with their stress and transition experiences.

***Theme 2: Coping Strategies.*** Several positive and negative coping strategies emerged when the participants all shared their experiences related to a managing a successful transition experience. They all discussed their individual experiences and tips with coping with transition which included: sleep, taking substances in moderation, making academic a priority, getting to know campus resources and ease into social activities.

Emily stressed that it was imperative for her to meet regularly with her therapist and her academic advisor. She shared, “I guess I didn’t really think that learning good coping strategies would be so helpful and important... I mean, the support is there it’s just something you need to seek out.”

Blake shared that he found the support in a more active lifestyle:

Yeah, when it comes to coping and managing this whole transition... it took me a little while to figure it out. Like, for me... in the beginning, I was not coping really well... I was smoking pot and drinking at first... I guess I just wanted to be



included and because I am not great at meeting people, that's what I did. But, now, I am like really enjoying my college life and I think a lot of it is because I decided to totally change friends in the winter quarter. Like... I just up and left them. It was really hard but I pushed myself to meet other people and I actually met some kids who were really active. I mean, like they were running like ultra-marathons and stuff... and like, that wasn't something I was going to do, but I ended up like becoming their "pacers". It was kinda funny, I was like running 20 miles at once. It was kind of crazy. These kids were good for me, and I knew it. Like coping with drinking and smoking weed wasn't really what I wanted to like do... so I started to become active... oh, and I started climbing. I found this great climbing team and found that I really liked it and a really did meet a better group of friends.

Michelle shared that in the beginning she really turned to some negative coping experiences when she first transitioned.

I was really struggling and wanted to like fit in. I mean, like, I wasn't doing my normal stuff like exercising, reading and going to yoga. In high school I did that stuff and it helped me. When I got to college I was like staying up all night, and not really taking my medication either. That was really bad. My grades like kind of suffered but because I was able to like get by, it really didn't hurt me all that much. I mean, it was hard and all...I wasn't really like eating all that well and I became more depressed and started drinking. I was like going into a real bad cycle. I guess I need to figure out how to really look at my stress and maybe start

exercising more... I know I need to see my therapist too. That could help.

***Theme 3: Living with Mental Health.*** Living with mental health struggles is the third theme related to the individual experiences of all three participants. The descriptions of the participant's stories really focused on what it is like to be a first-year student who struggles with mental health challenges. All of the participants talked about how their transition experiences had been greatly impacted by their mental health challenges. As Emily stated, "just because I was in college, it didn't mean that my anxiety had gone away." In essence, the shared stories and experiences portrayed in this section depict the difficulties in which mental health played as related to the participants transition experiences.

Beyond medication management, it was evident that the three participants were not fully prepared to successfully cope with their mental health struggles in college. For Blake, he shared he decided to attend a smaller school because of his mental health diagnosis.

...I think that is really why I chose this school. I didn't want to just get lost and I heard many good things about the resources here. I guess my biggest problem was that I really needed to figure out that I needed to actually take my medication... I mean, I like talk to my doctor on the phone like every week and when I go home from breaks, I always schedule an appointment. But, I probably need to find someone here. I mean, it would probably be easier and my parents might appreciate that.

Emily shared that she chose this institution because it was close proximity of her support system and family. “My parents were much more comfortable with me going here because it is so close to our home. Originally, they wanted me to live at home because of my issues, but I didn’t think that would be good for me. I mean, I told them that I would go to the health and counseling center if I really needed to and that was good enough, I guess.”

Michelle shared that she knew that she needed to have some type of support system in place. But she had a very difficult transition in her first quarter. She shared that she learned the importance of asking for help and began to utilize the resources offered.

I mean I think talking to my therapist back at home and also going to the counseling center here has helped, but, like, I feel there is a new problem every week. I have an academic counselor here that I talk to, which I think is helping. I think my biggest problem is actually accepting I am just not like everyone else. I mean, I am the first in my family to go to college so this is like all new to me... I have had mental health issues for a while and I think sometimes some of these college students are like just diagnosed and I’ve been struggling for a while. Like, I also have a hard time asking for help. I don’t know what got in my head thinking that I need to do this on my own but it isn’t true, I have learned that. I know there are people to help me here and that is helpful.

Related to the elements that contribute to a successful transition experience, it was apparent that all three students had to learn to manage their individual and unique mental health challenges in a new and different way. The participants experiences spoke to the

importance of support structures, including parents, academic counselors, mental health professionals, and peers as related to their transition. The environment also played an important factor in navigating a successful transition experience. The next section describes several themes related to the environment related to the transition experience.

**Research Question 2: Summary.** To answer the second research question guiding this study, “*what are the elements that contribute to a successful transition for first year undergraduate college students who self-identify with mental health challenges?*”, individual experience and the three themes emerged: stress, coping strategies and living with mental health struggles. In the guiding theoretical framework, Schlossberg (1984) suggests that “self” is a factor that is considered important in relation to how individuals view themselves. Additionally, “self” also suggests that psychological traits including ego development, is an important attribute for the individual’s outlook and commitment to values (Schlossberg, 1994). Therefore, the participants answered this question by suggesting that their individual experiences contributed to their stress, coping strategies and living with mental health.

Emily shared that stress was really difficult for her. She knew it was important to connect with her therapist when times became stressful. This was one of the elements that provided support for Emily when she was stressed with a situation. For Michelle, she knew that one of the elements that contributed to her success was her coping strategies. She shared that she was initially struggling to fit in and wasn’t doing her “normal stuff, like exercising, reading and going to yoga.” She was also not taking her medication at

first. She shared that positive coping mechanisms was an essential element for a successful transition.

And finally, when participants responded to mental health as related to the individual or self, the elements that supported transition included the participants experiences on what it actually like to be a first-year student struggling with mental health. For example, all three participants shared that it was essential to own their own mental health challenges in order to successful transition into college. Emily shared that, “just because she was in college, it didn’t mean her anxiety had gone away.” In essence, it was apparent and noted that all three participants knew the importance of learning to manage their individual and unique mental health challenges in a new and different way in order to support a successful transition experience.

**Research Question 3: Support and Strategies.** The third and final research question posed in this study is: *“how do first time, first year college students, who self-identify with mental health needs perceive the existing (and needed) support structures at a small private university, as it relates to their transition”* two main themes emerged: Environment/Resources and Institutional Expectations. In this section, the researcher provided participant responses which build upon the above question. The student descriptions and stories provided insight and suggested several themes. In looking at the environment as related to the transition experiences of the participants, four themes emerged: (1) academic support (2) connections with faculty, (3) social, and (4) developing meaningful connections/friendships. The influence of the institutional environment greatly impacts the transition experience of students with mental health

struggles. All three participants spoke about the academic environment in context as to how it compared to their experiences in high school.

***Theme 1: Academic Support.*** This theme includes comments in which the participants shared about receiving additional academic support such as tutoring, the disability support service, academic counseling and coaching.

Emily shared that she found several important academic resources that were necessary for her transition experience. One resource, in particular, that was very helpful for her was the services of the disability service program. She stated:

When I first got here, I enrolled in the disability services program. My mom actually made me do this and I am so glad that I did. I guess I didn't really think of my anxiety and depression as a disability, but I guess it is. It has been so helpful for me because I am able to get extended time on some of my exams. This is great because I don't have to rush and I know my anxiety, at least when I am taking the exam, can be in check.

Blake also had a similar experience with the disability service resource. He shared:

...disability services have been really great. I am really glad I got in touch with this service. It has been helpful to me to know that I have the accommodations and support needed if I need it.

Michelle found additional academic resources beyond accommodations:

I do actually work with an academic coach here and it has been super helpful. I am glad to have her to really get me on track. That has been great. One thing I

have learned is that I really need to make lots of lists and be sure to check off what I have accomplished. This is helpful to me. But, mostly, it has helped me when I get really overwhelmed and like can't get back on track. That has been really hard.

Blake also talked about his experiences in working with the campus writing center. He described his challenges with one of his writing courses.

I really hate writing. It is like one of my worst classes. Like, I can pass the course, but it is really challenging for me, so I figured I needed to do something. I went to the writing lab, like almost weekly, sometimes a few times during the week. And, they really helped me to get my writing together. I mean I am still not the best writer, but like I can actually formulate a sentence on a paper and the teacher understands. I was actually really proud of myself for that.

***Theme 2: Connections with Faculty.*** The second sub-theme that emerged in looking at the environment and resources was faculty connections. All three participants shared the positive and negative interactions they had with their professors and how those experiences influenced their transition. The positive experiences with faculty members were faculty who were supportive to their students. Michelle shared her experience with one particular instructor who really provided her support.

My psychology professor is one of the best professors I have ever had. She is so helpful and supportive and really is great and explaining things. The class is actually a pretty big class, but she is always willing to meet after class if we are confused or something like that. I can tell she cares about her students. Like,

sometimes when she lectures, and she can tell we are all like confused she really stops to be sure we understand, and she will change the content and syllabus if needed.

Blake shared that he has supported that most of his faculty member are willing to meet outside of office hours and are good with checking in with students.

I had one professor who actually sent me an email because I missed one class because I was sick. I sent him an email the morning right before class because I like couldn't get out of bed and was really sick. He probably didn't see the email I sent him until like after the class period was over, but apparently, he was worried. I really appreciated that he took the time to reach out and then we scheduled a time to meet together so he could catch me up on what I missed. He definitely did not need to do that.

The participants also shared that they had developed more personal relationships with the faculty which then, in turn, made them feel more supported and integrated into the community. Emily stated, "I really enjoy the faculty here and I have appreciated the support they provided. One of my professors even helped me to get in contact with someone who helped me to get an internship this summer. That was great." Michelle stated, "...yes, I really appreciate the support of some of the instructors I have had... I mean, these classes can be tough, and the quarter system is fast...so it has been helpful they have been supportive."

Although participants felt their interactions with faculty were fairly positive, there were also some negative feelings related to faculty in which the participants revealed.



Primarily, the participants shared they had a difficult time trying to actually reaching out to faculty members. Michelle shared that because she was a first-generation student, she was not comfortable confronting her faculty face to face.

I guess I just didn't know how to reach out to my instructors. I mean, they all have office hours and email addresses they shared, but when I started to go downhill in a class, I was scared. I didn't want my instructors to think I didn't know what I was doing. One teacher I had in the first quarter, didn't really use his office hours and every time I wanted to meet with him I was intimidated to ask him. So, one day I sent him an email and I never heard back. I passed the class, but really didn't learn all that much. I guess if I was more comfortable to reach out to him, maybe I would have done better? Who knows?

Blake shared his struggles with one faculty member, in particular, whom accused him of academic dishonesty.

...I mean when I confronted the professor to share my side of the story, she had already made up her mind. She wouldn't even listen to the fact that I actually didn't cheat at all and I didn't realize that I was like supposed to share any group members who I like worked with. I mean, I wasn't trying to cheat, and I think it wasn't really fair that she wouldn't even talk to me... I guess she just didn't like me.

The participant's experiences with their faculty members played an important role in how they perceived the support structures at the institution as related to the transition experience. As noted, all three participants did, in fact, have positive interactions and

experiences with their faculty members. However, the participants also shared their negative experiences which greatly impacted their transition experience at the institution.

**Theme 3: Social.** The third theme, social, was depicted by the experiences and stories presented by the participants. All three participants shared that they faced a variety of social challenges regarding their college transition experience. This section provides the essence of the participant's experiences around social challenges. Blake shared:

...Yeah, I like had to leave my friend group from the first quarter because I mentioned that they were like not making the greatest decisions. I found that my interests and lifestyle was totally different. Like one of my friends whom I met first quarter would always make me give him my dining card, because, you know, I like had unlimited dining. It was kind of annoying and honestly got on my nerves. So, I decided to stop hanging out with those people. Like one day, I just stopped going into their rooms.

Emily shared that she had a very difficult time with making connections. She also shared her experiences with the social pressures she didn't really expect.

Fall quarter was a struggle and so was winter quarter. My depression and a lot of other stuff came up. But I really wanted to experience the fun college setting and engage in some of the social activities. I mean, I felt a little left out because there was this party, I couldn't go to because I went back home and like all of my friends sort of formed a click. It kind of made me feel crappy. I guess I didn't really expect the big drug thing. I mean, I was surprised that cocaine was such a

big thing here... and so is pot. I mean, I have seen both at parties, but I don't do it... and whatever, if others want to judge me, then that's fine.

This reiterated the social scene and pressures of the drinking and drug culture as well as the party scene. All three participants shared that they consumed alcohol even though they were underage, either because they wanted to because drinking is a part of the college lifestyle. Michelle stated, "... All of my friends do fun things together in the dorms, we play different kinds of games... of course we are drinking... but we are being smart about it... we don't want to get caught... and we keep it down and don't go crazy." As noted previously, Blake mentioned his experiences with his "former friend group" and was no longer interested in the partying lifestyle.

Emily shared that she did party occasionally but was cautious with her medication. She stated, "...yes, the party and like drug scene can be really bad here... but, I know for me, with the medications I take, drinking too much isn't good. I guess I can still go out and have a good time even if I am not drinking a ton."

The descriptions above suggest that the participants had to learn to navigate the challenges impacted by the social environment. It was described by all three participants that the social experience was essential as part of the support structure as it related to their transition experience.

***Theme 4: Developing Meaningful Connections/Friendships.*** The theme of developing meaningful connections was a consistent need for a successful transition experience among all three participants. Emily shared that she really struggled to make friends at first.

Early on, I realized that I needed to put myself out there and make a good group of friends. At first, most of the people I met were big partiers and I didn't really want to do that, but I wanted to like fit it. I knew a few people whom I went to high school with, but they were mostly like acquaintances and I didn't really connect with them. Luckily, I met some good girls who were on my floor and we really all connected. We are always like there for each other and stuff.

Michelle shared that when she developed her friendship that was one of her greatest successes at college. She said, "I guess probably my greatest success was the people I have made friendships with here. My closest friends are actually good people and I know really care about me."

Blake expressed his initial struggle with meeting friends. However, he then was able to find meaningful friendships with people who he trusted and shared similar interests. He shared:

...and since I was able to connect with the new guys, I was really able to succeed better. I guess I was really proud of moving into a different group. Most of my friends know about my mental health stuff and they don't care. Really, I guess, they care about me and I think that helps with our friendships. They have taught me to do a lot of good active things and they challenge me. Maybe this has helped me to be better acclimated and more focused here.

All three participants described their experiences of making meaningful friendships as a significant part of their transition. This further demonstrates the shared

essence of the participants' experience in establishing meaningful relationships to positively impact a successful transition experience.

**Research Question 3: Summary.** To answer the final research question which guided this study, *“how do first year undergraduate college students who self-identify with mental health challenges perceive their existing (and needed) support structures as it relates to their transition,”* one main theme emerged: environmental resources which was guided by the Schlossberg's (1994) theoretical framework as related to the final two, S's, “support” and “strategies”. Additionally, to support this, three sub themes emerged, which included, academic support, faculty support, social support and friendships. All three participants shared their perceptions regarding the existing and needed support structures as related to their transition. Specifically, when the participants shared about the academic environment, they noted the importance of faculty connections. Specifically, the second sub-theme that emerged as an important transition to the overall environment were positive and influential faculty connections. All three participants shared the positive and negative interactions they had with their professors and how those experiences influenced their transition. The positive experiences with faculty members were faculty who were supportive to their students. Michelle shared her experience with one particular faculty who provided a high level of support. She stated that she perceived this support as essential for her own transition.

Specifically, in observing the support of faculty, the participants indicated that they developed more personal relationships with the faculty which then, in turn, made them feel more supported and integrated into the community. Emily stated, “I really

enjoy the faculty here and I have appreciated the support they provided. One of my professors even helped me to get in contact with someone who helped me to get an internship this summer. That was great.” Michelle stated, “...yes, I really appreciate the support of some of the instructors I have had... I mean, these classes can be tough, and the quarter system is fast...so it has been helpful they have been supportive.”

Related to social support, all three participants shared that they faced a variety of social challenges regarding their college transition experience. This reiterated the social scene and pressures of the drinking and drug culture as well as the party scene. All three participants shared that they consumed alcohol even though they were underage, either because they wanted to or because drinking is a part of the college lifestyle. Michelle stated, “... All of my friends do fun things together in the dorms, we play different kinds of games... of course we are drinking... but we are being smart about it... we don't want to get caught... and we keep it down and don't go crazy.” As noted previously, Blake mentioned his experiences with his “former friend group” and was no longer interested in the partying lifestyle. The descriptions above suggest that the participants had to learn to navigate the challenges impacted by the social environment.

It was described by all three participants that the social experience was essential as part of the support structure as it related to their transition experience. And finally, developing meaningful connections and friendships was a consistent and needed support structure for all three participants. Michelle shared that when she developed her friendship that was one of her greatest successes at college. She said, “I guess probably my greatest success was the people I have made friendships with here. My closest friends

are actually good people and I know really care about me.” These findings indicate how important the participants perceptions around positive support structures, specifically academic support, faculty support, social support, and friend support is essential in the overall transition process.

### ***Descriptive Statistics Findings as Related to Guided Research Questions***

When considering the research questions posed in this study, there was a desire to better understand the experiences related to the transition process for first year undergraduate college students who self-identify with mental health challenges. Therefore, it was vital to understand the demographic and population of the student participants and analyze the descriptive statistics presented in the study. Descriptive statistics were conducted on all of the survey data using SPSS in an effort to determine differences and similarities between the population. The intent by the researcher was to further describe what the data shows to not necessarily reach a conclusion but make inferences from the data.

Schlossberg’s (1984) Transition Theory was utilized as the theoretical framework to understand and interpret the quantitative findings. Schlossberg’s Theory suggests four major sets of factors that influence a person ability to cope with transition: situation, self, support, and strategies, also known as the four S’s. Within the survey questionnaire, only two of the four S’s were shown, therefore, it was noted the necessity for the researcher to engage in an explanatory sequential mix methods methodology to be able to answer all three research questions thoroughly.

While the survey questionnaire was already previously tested for validity and reliability, it was important for the researcher to ensure that the internal validity of the data was viable in the context for this particular study. Therefore, Cronbach's Alpha was calculated to test for the internal validity of the scaled and the data (Arkkelin, 2014). The Cronbach's alpha calculations was calculated at .612, which indicated mostly "acceptable" levels of validity (George & Mallery, 2003).

**Research Question 1: Survey Results.** In order to answer the first research question, "*how do first year undergraduate college students, who self-identify with mental health needs, perceive their transition into college?*", understand the participant population was important. The researcher was interested in understanding the population as a whole and utilized the descriptive statistics to help identify the population characteristics.

As generated by the descriptive statistics, the total sample size for this research study included 47 total participants, 32 female students and 16 male students. The survey then asked the participants to identify their race. Results indicated that 2 participants (4.3%) selected American Indian or Alaska Native, 4 participants (8.5%) selected Asian, 1 selected Black or African American (2.1%), 6 participants (12.8%) selected other, and 34 participants (72.3%) selected White. Regarding marital status, of the participants, almost all participants, 98% of the first-year undergraduate participants were not married. Additionally, almost all of the participants indicated that they were living on campus and (74.5%) were non-Colorado residents. Finally, it was interesting to note that most (72%) of the participants had student loan and support from their parent(s)/spouse or guardian



while few (4.3) responded that they rely on only student loan during the university year. Unfortunately, this data was limited in aiding to answer the first research question posed in this study, as there was no indication based on the quantitative data how first year students perceived their transition. The first part of the survey questionnaire only portrayed basic information related to “self” connecting back to the theoretical framework.

**Research Question 2: Survey Results.** The second research question asked, “what are the elements that contribute to a successful transition for first year undergraduate college students who self-identify with mental health challenges?” It was important for the researcher to understand the specific elements in which contributed to a positive and successful transition experience for the participants. This question was also developed to determine any additional support structures and/or resources that may have helped with the transition process. The next series of questions were asked to each student participant to better understand the college transition experience of first year undergraduate college students who self-identify with mental health challenges as related to their lifestyle. Respondents were asked questions on their self-identified lifestyle and physical activity. Results indicated that (36%) of the participants drink at least 2-4 times a month and (18%) indicated that they drink two to three times a week. It was interesting to note that in this study, a high number of participants not only engaged in the usage of alcohol but a larger percent (61%) of the participants also engaged in physical activity. Not surprisingly, a very small percentage, only one person, indicated that they smoked cigarettes. Much like the results of the first research question, the results of this data as

related to lifestyle, showed basic information related to “self” connecting back to only one part of the theoretical framework incorporated into this study. Therefore, this reiterates that the data gathered from the three semi-structured interviews becomes even more valuable when looking at the research questions for this study.

**Research Question 3: Survey Results.** The next section of the survey questionnaire asked participants about student life stressors. This section can be closely aligned with the third research question posed in this study, *“how do first year undergraduate college students, who self-identify with mental health challenges, perceive the existing (and needed) support structures at the institution as it relates to their transition?”* However, because of the close ended nature of the survey questions, this data gathered is a small representative sample of the participants. To connect this question to Schlossberg’s Transition Theory, the theoretical framework utilized in this study, “situation” and “self” is depicted.

To gauge student life stressors, survey asked concerning the participants potential sources of stress over the preceding academic year, those responses were based on a 4-point scale (not at all stressed, slightly stressed, rather stressed, highly stressed). In looking at coping mechanisms, the questionnaire asked students how they coped academically. The results indicated that students indicated that they were rather stressed (38%) and highly stressed (28%) versus only five respondents indicated they were not stressed at all (11%) and eleven respondents out of the forty-seven respondents (23%) indicated that they were slightly stressed. This data showed that the majority of the respondents indicated they had some sort of stress relative to their academics.

Interestingly enough, when respondents were asked about potential problems with processors, only a small number (3%) indicated stress related to faculty. Additionally, when asked about roommate problems as related to stress, over half of the respondents self-reported that they were not at all stressed or only slightly stressed.

Housing and finances did not pose a high level of stress as (55%) of respondents indicated slight stress related to poor finances and only (18%) of participants indicated they were not stressed at all as related to housing. When participants were asked self-report their stress as related to family problems. Twelve participants indicated they were not at all stressed with family problems and eight respondents indicated they were highly stressed. Based on the results, most of the participants indicated they were either slightly stressed (17%) with family problems or rather stressed (40%). Therefore, students indicated that family problems may have impacted their stress level. When the participants were asked to report their stress level as related to relationship problems, participants indicated that relationship problems do not necessarily impact their self-reported stress level. It is important to note that these findings cannot be generalized to encompass all relationships in which students have.

Furthermore, it is interesting to note when participants were asked about problems with friends, just under half of the participants indicated they were rather stressed or highly stressed if they had problems with their friendships. These findings indicate that problems with friends could indeed impact the stress levels for these students. This finding is also consistent with the findings presented in the semi-structured interview findings. Again, because of the close ended nature of the survey questions, and the

limited nature of connecting the survey results to the theoretical framework, it was essential for the researcher to utilize an explanatory sequential mixed method design to obtain a deeper, fuller understanding by incorporating the survey questionnaire and semi-structured interviews (Creswell, 2014).

The last part of the questionnaire asked participants to rate their overall physical and psychological health. It was interesting to note that (30%) of the respondents had engaged in some sort of mental care and (43%) indicated they had utilized the university health service resources and (22%) of respondents had some sort of psychological trauma during their academic year. This data suggests the necessity of needed support structures at the institution to aid with the transition process. However, in conflicting data, it was interesting to note that over half of the participants self-rated their psychological health at very good or good.

Lastly, participants were asked specific questions related to psychological problems. Over half of the participants shared they have difficulty with concentration, a lot or quite a lot of irritation, (75%) indicated a lot of anxiety during the academic year and (44%) indicated a lot of difficulty when it came to depression. Not surprisingly, (74%) of participants self-reported quite a lot of tiredness during the academic year.

The use and examination of the *Health Behaviors, Self-Rated Health and Quality of Life* data can be helpful in identifying patterns of first year students who are transition into college. More specific, the overall analysis of these questions provided a snapshot of the findings on first undergraduate students' lifestyles, health behaviors and quality of life. However, this snapshot was not enough to help answer all three of the research

questions posed which is why it was essential for the research to further analyze the themes and supporting responses from the individual semi-structured interviews, discussed previously, in order to fully connect the findings to the theoretical framework.

### **Chapter Summary**

This chapter connected the data collected through both the online survey and the in person, one-time interviews. The data collected through the online survey was focused specifically on the quantitative data collected through close-ended questions. As noted, validity and reliability are two fundamental elements in the evaluation of a measurement instrument. Subsequently, Cronbach's alpha is sensitive to the number of the items in the scale and can be biased when there are inconsistent responses, and an adjustment is recommended for better assessment of the internal reliability of a multi-item scale (Fong, Ho & Lam, 2010). Because of the response rate and the Cronbach's alpha results from the study was calculated at .612, which indicated mostly "acceptable" levels of validity, the data gathered from the three semi-structured interviews becomes even more valuable when looking at the research questions for this study (George & Mallery, 2003). The final chapter discusses the findings in regard to this study's research questions. As well, the limitations, lessons learned and implications for practice and further research was discussed.

## **Chapter Five: Discussion and Implications**

### **Introduction**

The purpose of this study was to examine the college transition experience of first year college students who self-identify with mental health challenges. Specifically, the experiences of first year college students during the transition year (first year) at a private university was the focus of this study. The intent of this study was to describe the college transition experience by applying facets of the theoretical framework from Schlossberg's (1984) transition theory. The overarching research looked at the college transition experience of first year college students who self-identified with mental health challenges. To further explore this topic, the central research questions which guided this study included:

1. How do first year undergraduate college students who self-identify with mental health challenges, perceive their transition into college?
2. What are the elements that contribute to a successful transition for first year undergraduate college students who self-identify with mental health challenges?

3. How do first year undergraduate college students who self-identify with mental health challenges perceive the existing (and needed) support structures at a small private university, as it relates to their transition?

This section is followed by several sections which make up the final chapter of this study. The next section begins with a brief overview of the theoretical framework utilized within this study, which is Schlossberg's Transition Theory. Then, the data collected through both the anonymous online survey and the semi-structured interviews was integrated to answer each of the three guiding research questions denoted in this study. This was done by examining the integrated data and results from both the survey question as well as the semi structured interviews based on the three guiding research questions.

Following this section, the researcher will address the limitations of this study including the limitations around the survey instrument and the validity and reliability of the survey instrument. Additionally, limitations will also be discussed in relation to the semi-structured interviews and the low participant response. It is critical to note that the results of this data cannot be generalized to the entire population of first year undergraduate college students.

### **Theoretical Framework Revisited**

Schlossberg's (1984) Transition Theory was the guiding theoretical framework for this research study by explicating the necessity of support for first year undergraduate college students who self-identify with mental health challenges, in facilitating a successful transition. For the purpose of this research, the transition process was

examined which occurred for students entering college. Furthermore, this theory examined the transition process for college students who self-identified with mental health illness. As a result, Schlossberg's theory was the foundational framework in looking the transition experience of students who self-identify with mental health challenges. Schlossberg's (1994) Transition Theory lends itself to this research, as it enhances the understanding of the unique facets of the college transition process. Schlossberg outlines four S's to demarcate the framework: situation, self, support, and strategies. While all four of these components are relevant to transition, the support and strategies most align with this research in further providing college students, parents and families the tools necessary to successfully navigate their role in the college transition process (Schlossberg, 1994).

### **Findings, Conclusions and Response to Research Questions**

The three research questions posed in this study guided this mixed methods study. The questions were: How do first year undergraduate college students who self-identify with mental health challenges, perceive their transition into college? What are the elements that contribute to a successful transition for first year undergraduate college students who self-identify with mental health challenges? How do first time, first year college students who self-identify with mental health challenges perceive the existing (and needed) support structures at a small private university, as it relates to their transition? Each question was discussed individually by utilizing the data from the online survey as well as the data from the semi-structured interviews conducted. Following the discussion of the theoretical framework, each question is discussed in depth



encompassing the data from the online survey, the interview data and incorporating the theoretical framework into the findings.

### **Research Question One**

*How do first year undergraduate college students who self-identify with mental health challenges, perceive their transition into college?*

The first question sought to understand how first year undergraduate college student's college students perceive their transition process into college as related to the participants self-identified mental health challenges. Based upon the data found, participants reported that there were several different experiences as related to the participants transition experience, overall. The vast data collected via the online survey indicated several factors in which student life stressors and overall health could impact the transition experience. Overall, the survey participants self-reported higher stress levels related to not coping academically, poor finances, family problems and problems with friends. While not generalizable to all first-year undergraduate college students, the findings from this data highlighted important information about how first year undergraduate college students could perceive their experiences with the high school to college transition.

Participants responded to the survey question which asked, please select any physical or psychological health issues that you may have exhibited, including: Temporary disease, chronic disease, injury functional impairment/handicap, utilization of university health services, hospitalization, use of prescription medication, mental healthcare, psychosomatic symptoms, psychological trauma. Survey respondents were

able to choose multiple selections. Results indicated that almost 30% of the respondents had engaged in mental health care and 57% of the participants had either a temporary disease, injury or used prescription medication. 43% of the respondents indicated that they had utilized the university health service resources and 22% of the respondents had some sort of psychological trauma during the academic year. The results of this data confirm the complex nature in which students may have with adjustment to college and in turn experience unwanted stress and psychological problems during their first year of attending college.

### ***Transition***

The data provided insights related to the overall struggles as associated to transition. The transition from high school to college is a time of great challenges and changes for students. Many students experience personal problems, emotional problems, anxiety, depression, and distress when making the decision to transition from high school to college (Hicks, 2015). The participants shared their experiences around fear, anticipation, and growth/responsibility as it related to their transition.

### ***Fear***

The participants were asked several questions related to the transition process, including how they decided to attend the institution and how their first few days/weeks on campus were. All three participants shared they were anxious, yet very excited to leave high school and begin their college journey. Additionally, the participants indicated their fears of leaving their high school and transitioning into college. As the survey data indicated and the interview data suggest, participants experienced anxiety and the fear of

“not fitting in”. Participants also expressed a sense of fear, particularly in dealing with their own individual mental health struggles.

### ***Anticipation***

In the semi structured interview, participants were asked to compare their college transition experiences were in relationship to what they hoped it would be and what their expectations were. Participants indicated the desire for change and the eagerness for a new experience. Similarly, the data collected through the interviews suggested that the interview participants believed there were challenges with the overall transition process. The student voice provided insight to the transition experience as related to mental health challenges. The study participants expressed that the transition process led to fear, anticipation and more growth and responsibility efforts. Interestingly enough, the survey data revealed that participants responded that they self-identified a low potential source of stress regarding problems with their professors. As well, participants reported slight stress with roommate and relationship issues. This could indicate that as related to the participants anticipation and perhaps excitement to transition into college, they had better experiences with relationships, overall. However, it is important to note that this data cannot be generalizable to the entire first year undergraduate college student population.

### ***Growth/Responsibility***

The conception of growth and responsibility emerged from all three participants, specially outlined in the interview data. Upon arriving onto campus, all of the participants shared their experiences around growth and responsibility. Some of the participants were anxious about this and others were very relieved to finally be on their own. Participants

reported how they were now redefining their relationships with the families back at home and felt more like an adult than ever before. The participants also expressed that they had more freedom to make decisions to take on more responsibility, from taking care of themselves when they are ill and managing their medication.

The data indicated that the participants revealed that that college offered new opportunities for their growth and opportunities. However, with the anticipation of growth and responsibility came added challenges, specifically around their mental health struggles. For example, all three participants shared that they wanted more independence and growth, but their parents played a strong role in helping them cope, specifically. They also felt a strong sense of responsibility for their own mental health in medication management and dealing with the negative aspects if they did not take care of themselves. Based upon the essence of the experiences from the lens of the participants, they struggled with their own fears, anticipation and growth as they entered into college.

### **Research Question Two: Transition**

*What are the elements that contribute to a successful transition for first year undergraduate college students who self-identify with mental health challenges?*

The data provided insights related to the individual experience and mental health struggles as associated to the transition. Individual experiences emerged from the participants. It was apparent in the descriptions of their experience, that each participant felt like it was their own individual experience relative to the college transition experience. Participants shared that they felt like they needed to experience the transition by themselves and their “greatest challenges and greatest successes” was learning how to

manage their time for the first time in their lives. The participants shared how they had more distractions in college and many now how to balance their academics with a busier social life, work life, and their own individual experience.

### ***Stress***

Stress a common concern for college students and stress can play an instrumental role in the college transition process as it relates to student success (Banning, 1989).

Stress was a consistent theme that came up with all three participants many times. The participants shared that there were several different concerns that caused negative stresses, such as: difficult academics, friendships, roommates, parents, and social norms, to name a few.

Similarly, the survey data reported that participants reported not coping academically, problems with roommates, poor finances, relationship problems with family and friends all could be viable causes of stress. Furthermore, the data reported that over half of the respondents (55%) reported they had difficulty with their anxiety. In the interviews, all of the participants shared their experiences regarding their challenges with stress and coping strategies that helped them with stress and their transition experiences.

### ***Coping Strategies***

As indicated from both the survey data and the interview data, participants engaged in several positive and negative coping strategies to manage a successful transition experience. When participants were asked to discuss their coping strategies, they shared that sleep, taking substances in moderation, making academics a priority,

understanding campus resources and easing into social activities all helped to manage their transition experiences.

Participants reported that they had to balance their academic and social life and in turn it was essential to develop coping strategies for dealing with their mental health challenges and the overall transition experiences. Dealing with the day-to-day challenges of their mental health was an issue for all participants. Participants reported that almost 42% exercise at least once a week and almost 25% reported that they exercise 4 times a week or more. Additionally, when participants were asked about alcohol consumption almost 20% indicated that they drink at least 2-3 times a week and of those who drink, 27% indicated that they drink 5-6 glasses of alcohol in one setting. Participants also shared that initially when they transitioned into their first year of college, participants reported the apparent struggles with coping strategies and negative behaviors. However, once the participants realized the importance of utilizing support resources, including mental health support, participants acknowledge the degree to which stress could impact their lives and the importance of developing coping mechanisms early on in their college experience.

### ***Living with Mental Health Struggles***

Findings from this study revealed that first year undergraduate college students who self-identify with mental health challenges, had many of the same developmental and transition experiences. In general, the survey data reported that over half of the participants reported they were troubled by psychological that could restrict their everyday lives. Participants shared that their transition experiences were complicated by

the daily tasks of managing medications, symptoms, health and counseling appointments, academic support services, maintaining relationships and the overinvolvement of their parents and guardians. All of the participants reported their transition experience had been greatly impacted by their own individual mental health challenges. However, participants indicated that they were learning to take responsibility for their own wellbeing but still needed some sort of a safeguard. Additionally, the data revealed that the participants described resources and strategies that they used to adjust academically and socially, such as the importance of utilizing their resources and disclosing their diagnosis to faculty, staff and friends.

### **Research Question Three: Environment/Resources**

The third and final research question posed in this study was: *how do first year undergraduate college students who self-identify with mental health challenges perceive the existing (and needed) support structures at a small private university, as it relates to their transition?*

Two main themes emerged: Environment/Resources and Institutional Expectations. The participant descriptions provided insight and suggested that the environment plays an important role as related to the transition experience. The influence of the institutional environment greatly impacts the transition experience of students with mental health struggles.

#### ***Academic Support***

Participants indicated that receiving additional academic support such as tutoring, the disability support service and academic counseling and coaching was essential for the

transition process. Generally, the student participants reported that in order to have a successful transition process, it was important to engage in academic support and connect to these resources early on. The participants reported that there were several important resources that were necessary for their transition experience, including the services to the disability program. Additionally, another participant reported the positive experiences and outcomes with working with the writing center.

### ***Connections with Faculty***

The interview data indicated both positive and negative interactions in which the participants reported they had with their faculty connections and further expressed how those experiences influenced their transition. In all cases, the participants reported that the positive experiences with faculty members were faculty who were supportive to their students. Additionally, the data suggested that the participants had development more personal relationships with the faculty which then, in turn, allowed the participants to feel more supported. One participant reported that one faculty member aided in a summer job internship.

Although the participant data reported that they felt their interactions with faculty were fairly positive, there were also some negative feelings related to faculty in which the participants revealed. Primarily, the participants shared they had a difficult time connecting with faculty. These findings suggest that the participants experience with faculty members play an important role in how the students perceive the support structures in college. As noted, all three of the interview participants did, in fact, have positive interactions and experiences with their faculty members. However, the



participants also shared their negative experiences which greatly impacted their transition experience at the institution.

### ***Social***

The data revealed that the participants faced a variety of social challenges related to their college transition experience. The participant reported difficulties with making connections and the social pressures in which they did not really expect. Both of the survey data and the interview data report that the participants consumed alcohol and the participants reported that drinking is part of the college lifestyle. Additionally, one participant reported that the social scene and pressures of the drinking, drug and party culture. The data suggested that the participants had to learn to navigate these challenges that were impacted by the social environment. Furthermore, all of the participants reported that even though there were challenges navigating the social pressures, it was essential as part of their support structures as related to the transition experience.

### ***Developing Meaningful Connections/Friendships***

The interview data indicated that making meaningful friendships and connections was a significant part of the participants transition process. This further demonstrates the shared essence of the participants' experience in establishing meaningful relationships positively impacted the participants transition experience. As shown in the interview data, the participants reported their struggles with making friendships and connections during their first year. Yet, the participants also reported meaningful friendships were a significant part of their transition processes. Those participants who reported that they established new friendships shared that they felt a greater sense of belonging on campus.

The data also revealed that some of the participants created a core group of friends in college. These friendships seemed to make even the simplest college experience, like eating lunch at the cafeteria, more meaningful. Participants also reported that they felt they could share their personal struggles and their mental health challenges with their friends. Therefore, these meaningful friendships seemed to help the participants with the overall social transition.

### **Personal Lessons Learned**

There were several lessons learned throughout the work of this study in which the researcher will utilize in the future. The first lesson in which the researcher learned, was the importance of timing as related to the research. Due to life limitations and obligations, the researcher struggled with fully engaging themselves into the research at the beginning. This topic, chosen by the researcher, was extremely important and the passion around learning how to best support students with mental health challenges, was apparent. However, it was an extremely difficult process, and it was of the utmost importance to the researcher to provide the necessary time to complete and analyze all of the data presented.

The second lesson learned was around methodology. When the researcher developed the research questions, the researcher tried effortlessly to incorporate a phenomenological method. However, based upon the two instruments utilized for the study, the survey and the semi-structured interviews, a mixed-methods methodology was more appropriate, and in turn, truly allowed for a more thorough examination relative to the purpose of the study.

Additionally, the researcher also learned the importance of an in-depth analysis of the data, inclusion and further expanding the theoretical framework was essential. The topic of mental health and college transition is an important topic which influences the researcher on a day-to-day basis.

### **Limitations**

As with any research, this study had several limitations. This section outlines the limitations presented which are important to recognize. First, the student participant population was not very diverse. The survey was sent out to only first year undergraduates who were all attending a small private institution. Only 47 participants were included in the survey sample and only 3 students participated in semi-structured interviews. Additionally, the majority of the students, based upon the demographic population of the small private institution, share similar racial, sexual and socioeconomic backgrounds. Second, there was difficulties with the recruitment process. The researcher worked with a second party to send out the recruitment email along with the link to the survey. There was no way for the researcher to determine if the recruitment email was received by the faculty who was distributing the survey. Therefore, based upon the recruitment email sent out, the researcher relied only on the faculty if they responded they would be willing to send out the survey or responded they would not. There was also no way for the researcher to determine if the recruitment email went to the faculty members junk box and if the passed survey in turn went to the student participant email junk in box. In addition, the anonymous nature of the survey prevented the researcher from contacting respondents to understand more fully the reason for not completing the

survey instrument and possibly yielding a higher response rate. There is a possibility that the participants thought the instrument was too long and then experienced survey fatigue. Again, due to the anonymous nature of the survey, the researcher was unable to determine the true case for this without contacting both the participants.

Next, there were several factors related to the sample size that may have limited the findings. Creswell (1998) suggests a qualitative study involves longer interviews with up to five people. While it was intended to have five or more participants, the study yielded a total of three interview participants. In this case, the criteria for inclusion were that students self-identified as experiencing a mental health challenge. However, findings may not fully reflect the experiences of students with a mental challenge who did not self-identify with a mental health illness and who may not be receiving or had received assistance. A second factor was the limitation of the interviewing process. The intention was to conduct five or more semi-structured interviews. Based upon student responses, three students came forth and agreed to participate in the semi-structured interviews. Thirdly, there was limited interest in the semi-structured interviews related to the sample size. Only three participants indicated interest by reaching out personally to the researcher to participate in the semi-structured interviews. This could potentially be due to the lack of incentive for the participant. Additionally, the results of this study are not generalizable to other first year undergraduate college students as they represent only one institution in one specific region in the United States, in Denver, CO.

As noted, validity and reliability are two fundamental elements in the evaluation of a measurement instrument. The reliability of an instrument is closely associated with

its validity. Cronbach's alpha was used to provide a measure of the internal consistency to ensure validity (Fong, Ho & Lam, 2010). Therefore, Cronbach's alpha is sensitive to the number of the items in the scale and can be biased when there are inconsistent responses, and an adjustment is recommended for better assessment of the internal reliability of a multi-item scale (Fong, Ho & Lam, 2010). Because of the response rate and the Cronbach's alpha results, of .612, which as indicated mostly "acceptable" levels of validity, this presented a limitation as Cronbach's alpha is considered "good" if it is between .7 and .9. This suggests that the survey utilized in this study could also stand as a limitation. Therefore, the data gathered from the three semi-structured interviews becomes even more valuable when looking at the research questions for this study. (Appendix F).

Additionally, the general predisposition one must assume before commencing a study is essential. However, setting aside all biases, assumptions and personal experiences to focus on the participants experiences can be challenging especially if the researcher can relate to an experience (Moustakas, 1994).

It is also important to note that another limitation is related to the theoretical framework chosen for this study, Schlossberg's (1984) Transition Theory. This framework provided one understanding of a theory as related to transition. Schlossberg views transitions as we are all involved in a transition at any point in time, whether we are moving in, moving through our moving out of a situation (Goodman, 2012). Schlossberg's (1984) Transition Theory suggests that impact is determined by the degree to which a transition alters one's daily life. The 4 S's proposed with this framework,

situation, self, support and strategies, were identified as the set of factors that influence a person's ability to cope with transition (Goodman, 2012). Because Schlossberg's (1984) Transition Theory is a learning theory that focuses on objectively observable behaviors and told through experiences, this could discount any independent activities of the mind (Staats et al., 1993). Behavior theory defines learning as the acquisition of new behaviors based upon environmental conditions (Staats et al., 1993). Therefore, this could limit the experiences of the participants within this study. For the purpose of the participant demographic for this study, the Schlossberg's Transition Theory was deemed appropriate. However, to critique a behaviorist approach, it is essential to look beyond. Additionally, one of the consistent themes throughout the findings from this study was fear. Fear was discussed as an essential factor contributing to each of the participant's transition experience. It is essential to go beyond this consider other factors that could impact transition, such as trauma. Specifically implementing a trauma based theoretical framework into this study could lead to a better understanding of understanding student experiences. As research suggests, college students are at a higher risk of experiencing new trauma (Galatzer-Levy, 2012). Trauma also increases susceptibility to depression and substance abuse, making it a pressing concern for campus mental health and student service administrators and professionals (Bowen, et al., 2016). If college campuses work together to ensure a sense of shared responsibility for a student's physical, social, emotional and academic well-being, perhaps a sense of resilience and success will help with persistence.

## **Implications**

The research on the high school to college transition experience as related to mental health struggles is very limited. The current study provides a foundation for future research on this topic. The results of this study suggest several possible implications for practice for those working in higher education. The use and examination of the survey presented in this study can be helpful in identifying stressors, physical and psychological health behaviors for students as related to the transition process. In terms of practice, there are several constituencies that may benefit from this research, including higher education administrators, faculty, staff, mental health practitioners, students and support resources including advising.

This study indicated the specific needs of students who have mental health challenges and that this should be addressed early even before students set foot on campus. As noted, it is essential that information should be provided to students about campus resources including counseling and academic support, with clear guidelines about how to receive these services. However, it is essential that institutions should examine their social programs and services to make sure they are providing the appropriate support structures. Student affairs programs and services, which are linked to persistence and retention through the emphasis on student support, provide an excellent outlet to incorporate the findings of this study into the student experience (Troxel, 2010). In doing so, students could then develop a greater sense of belonging and will be more likely to persist because they will be integrated into the institution.

## **Recommendations for Future Research**

This study suggests that as the population of college bound students grow and as access to higher education changes, professional in academia, including both faculty and staff, should keep in mind the stress patterns and at-risk demographics for these types of students. There are several recommendations for future researcher with the purpose of obtaining a more comprehensive understanding of first year undergraduate college students who struggle with mental health challenges. Therefore, the researcher first recommends this study be replicated to a larger selection of institutions versus just one, so that the results can be generalized to a larger population. Additionally, the researcher would also suggest that the survey instrument be provided to a larger sample versus a single classification of students. This could help with the reliability and validity of the analysis.

Another recommendation for future research includes a more robust qualitative examination with a larger sample size. Although the qualitative data presented in this study provided data around the student experiences as related to the high school to college transition, the smaller sample size could not be generalized to a larger population. Future studies could examine differences in the experience and transition process by gender and/or race to determine whether there are any disparities. Moreover, expanding this current study to pilot the implementation of a transition or mental health support program for all first-year students at a college institution, either private or public could influence and/or impact a first-year undergraduate students transition experience, overall. Additionally, this could affect the social and emotional wellness of students by building



support groups or support co-curricular events to aid in the transition process. There is also an opportunity to further investigate the college transition experience and mental health challenges by looking at two-year institutions vs. a four-year institution, as such did study focused on.

Furthermore, the implementation of a pilot transition orientation program could aid in helping students understand to make better choices for independent living once in college, such as the DEEP Project. This pilot and implementation could provide a set curriculum and instruction for students around the idea of stress management, social awareness skills, health and nutrition and other essential life skills. The focus of this type of pilot program would focus on educating students to make better choices during their first year in college. It would be interesting to investigate other small private institutions which have employed a current program for a type of social and emotional learning model to aid in the transition process for students. This could significantly aid in the support of first year undergraduate students to understand and learn how to manage self-awareness and focus on managing their own emotional intelligence in order to aid in the transition process.

Finally, the researcher suggests a longitudinal study be conducted to identify certain trends through the student's college experiences as related to mental health challenges. As advocated in the field of higher education, it is essential to conduct further research to accurately address and improve this problem. This could impact reducing more complex behavioral problems.

## **Impact on the Field**

The findings in this research suggest that there are a variety of challenges as related to the transition experience from high school to college for undergraduate students, in particular for those who have mental health challenges. To move this research forward, the field of higher education could gain a better understanding on how to support students during the first year and beyond. The researcher recommends that there are three different examples as to why this work is important and could impact higher education as a whole. First, if appropriate attention was put forth into college transition as related to mental health, dropout rates could decrease. Hartley (2010) indicates that college students with mental disorders are twice as likely to drop out without obtaining a degree. Second, with the focus on mental health and student transition experience, graduation success rates may increase. It is essential to prioritize students' mental health and well-being throughout the educational journey and ensure that they graduate as whole beings who can contribute to society. This also allows for a higher graduation success rate for the institution in which the student attends. And finally, mental health and the impact on student success is everyone's responsibility and must be addressed. If addressed appropriately, this could greatly impact suicide rates. It is important for colleges to identify, early on, students with mental health concerns and any other students who are at risk for suicide before they are in crisis. The National Alliance on Mental Health (NAMH) suggests that it is important to support the transition to college for incoming students with mental health challenges. As well, by providing a diverse touch points in the students experience and training campus community members

to identify, reach out to and refer students at risk could aid in support (2019). It is everyone's responsibility to have a stake in the game of supporting students who are transiting into college.

### **Chapter Summary**

The transition to college is marked by complex challenges in emotional, social and academic adjustment (Chickering, 1996). The transition process is filled with many first experiences, such as independent living, learning to manage finances and in turn developing decision-making skills (DSarling, et. al, 2007, p. 216). Therefore, understanding the first-year transition experience is crucial for creating effective strategies to promote retention and student success. Student success as related to mental health challenges requires strong social support to help students adjust to college successfully and furthermore reduce stress (Gerdes and Mallinckrodt, 1994).

Preparing young adults for their successful future within the university experience is the primary goal of many college administrators. However, it is difficult to for support members to best understand how to support this transition. To date, there is relatively little known about the experiences that focus on the data collected from students during their first year as related to mental health challenges. Thus, this study addressed the high school to college transition as related to mental health challenges and proposed implications for students, parents, faculty, staff, administrators, college health and counseling resources, as how they might play a role in the impact of the transition and retention of first-time undergraduate students. This study was guided by the following research questions:

1. How do first year undergraduate college students, who self-identify with mental health challenges, perceive their transition into college?
2. What are the elements that contribute to a successful transition for first year undergraduate college students who self-identify with mental health challenges?
3. How do first year undergraduate college students, who self-identify with mental health challenges, perceive the existing (and needed) support structures at the institution as it relates to their transition?

The results of the research found that first year undergraduate college students with mental health challenges experience a complex struggle as they navigate their transition experiences into college. Moreover, this study also provided compelling information regarding the experiences of students with mental health challenges and how they navigated their social, academic and personal relationships.

### **Postscript**

During the final completion of this study the unprecedented COVID-19 pandemic revealed itself. It is not the first time our world has had to cope with a global pandemic, nor will it be the last. Humanity suffered horrific losses. Educational systems came together to create new modalities of learning and a worldwide healthcare collaboration came together as a system fearlessly to fight to ensure the safety of patients. Additionally, in this time of an epidemic, the horrifying scenario of suffering at the hands of the virus became the ground of human vulnerabilities and prejudice. The mental health impacts will linger far after the pandemic is over. The impact of trauma will continue into the years. Students will continue to struggle. Humanity will continue to struggle. Therefore,

more than ever, the need to research, lean in and learn about the impact will be essential. There is a lot of work to do and so much unknown. However, as educational systems, administrators, faculty, students, parents and peers, we need to talk to our children, teens, and young adults about the COVID-19 pandemic and the address those concerns of racism and equality to commit to ensure their voices are part of the solutions for a healthier and safer equal world.

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## Appendices

## Appendix A: Community Partner Agreement Letter

### Community Partner Agreement

**Dr. Sarah Hoffman, University of Denver AND Kathlene Seymour**

**Community Partner**

**Research Partner**

This agreement is completed by the community partner and research partner. Both parties will maintain original file copies.

Community Partner: NAME Dr. Sarah Hoffman, University of Denver		Research Partner: Kathlene R. Seymour	
TITLE Director of Academic and Persistence Initiatives		Doctoral Researcher   University of Denver   Morgridge College of Education   Curriculum and Instructions	
ADDRESS 2199 S. University Blvd., Denver, CO 80208 Mary Reed Building, Room 303		7427 S. Lamar St., Littleton CO 80128	
PHONE 303-871-3240	<a href="mailto:sarah.hoffman@du.edu">sarah.hoffman@du.edu</a>	303-601-9831	<a href="mailto:Kathlene.Seymour@du.edu">Kathlene.Seymour@du.edu</a>
Primary Contact/Coordinator: Dr. Sarah Hoffman		Primary Contact: Kathlene Seymour	

Partnership Start Date: 12/01/2017      End Date: 12/01/2018

**Purpose of Study:**

To examine the college transition experience of first-year college students who self-identify with mental health issues. Specifically, this study will examine first time, first year college student's experiences during their transition year (first year) attending a private four-year university.

**Shared Partner Goal(s):**

To secure rich interview data toward the understanding of the lived experiences of students who self-identify with mental health issues as relating to their transition experience during their first year of college.



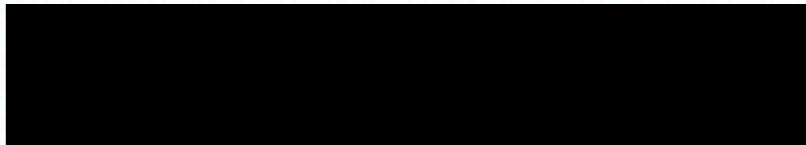
**Partner Commitments:**

We agree to a partnership which will help to better understand the lived experiences of students who self-identify with mental health issues and how this relates to their college transition experience.

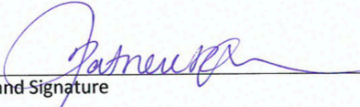
We agree to 1.) partnership responsibilities as stated; 2.) to review progress and partner status on a monthly and/or bi-monthly basis and; 3.) to any mutually agreed upon changes to the partner agreement.

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**SIGNATURES**



3-7-2018  
Date

Kathlene Seymour   
Research Partner - Printed Name and Signature

3/10/2018  
Date

## Appendix B: Recruitment Flyer



**Title of Research Study:** College transition experience: first time first year students and self-identified mental health challenges

**Researcher(s):** Katie Seymour, Doctoral Student, University of Denver  
(303) 871-3363 (office)  
(303) 601-9831 (mobile)

**Faculty Sponsor:** Dr. Norma Hafenstein, Daniel L. Ritchie Endowed Chair in Gifted Education, Full Clinical Professor  
(303) 871-2527  
[nhafenst@du.edu](mailto:nhafenst@du.edu)

**Study Site:** University of Denver, Denver, CO

### **Introductory Email to Faculty:**

Dear Faculty:

This message is being sent to all First Year Seminar Faculty. My name is Katie Seymour and I am a doctoral student in the Curriculum and Instruction program at the Morgridge College of Education at the University of Denver. For my dissertation research, I am examining the college transition experience of first time first-year college students who self-identify with mental health challenges, specifically the college experience during the transition year (first year) attending DU. The outcome of this study may help to provide information that will benefit students with their transition into college.

I have gained permission from the Office of Undergraduate Academic Programs to reach out to you for assistance. Because you work with first time first year students as their FSEM mentor/advisor, I am reaching out to ask if you are willing to send out an email survey to your first year seminar advisees to participate in a voluntary survey (Qualtrics) and a voluntary semi-structured interview. If you are interested, please see the recruitment email to students below. Please let me know if you do not wish to have your students participate, this is not a problem at all. It is important to emphasize that this research has nothing to do with your FSEM course taught in the fall or your advising/mentorship role. In the recruitment email I provided below, I have indicated that you are offering to help me (the student investigator) to recruit. In order to obtain confidentiality, my role as the student investigator will not be involved with sending out emails directly to students.

Additionally, for students who wish to fill out the survey, at the end there will be a prompt asking if students are willing to participate in a semi-structured interview with myself.

Thank you so much for your consideration,

*Katie Seymour*

## Appendix C: Recruitment Script Email to Student Participants



### **Introductory Recruitment Email to FSEM students to participate in Survey:**

Dear Student:

I am sending this email out on behalf of a doctoral student, Katie Seymour, in the Curriculum and Instruction program at Morgridge College of Education, the University of Denver. This academic year she is conducting research with first-year students about their transition to college as related to self-identified mental health issues. I have offered to help this student with her research. This study may provide information that will benefit other students with their transition into college. This research is in no way related to the curriculum in the First Year Seminar course I taught in the fall 2017 quarter or our advisor/advisee relationship.

If you are a first time first year student and entered college for the first time in fall of 2017, if you are 18 years of age or older, and if you self-identify with having any mental health issue, you are eligible to participate.

If you are willing, you can fill out the anonymous and confidential survey in the [link](#). The survey will take approximately 10 minutes.

Additionally, for students who wish to participate and fill out the survey, at the end there will be a prompt asking if students are willing to participate in a semi-structured interview with the researcher, Katie Seymour.

If you have any additional questions about this study or research please contact the student directly, Katie Seymour [kathlene.seymour@du.edu](mailto:kathlene.seymour@du.edu). She will arrange a time to contact you by phone to explain the study. Rest assured that I have not divulged your name to Katie, so unless you contact her she will not know who you are.

Sincerely,

*FSEM Faculty Name*

## Appendix D: Informed Consent for Participation in Survey Instrument



### Consent Form for Participation in Research Online Survey

**Title of Research Study:** College transition experience: first time first year students and self-identified mental health challenges

**Researcher(s):** Katie Seymour, Doctoral Student, University of Denver  
(303) 871-3363 (office)  
(303) 601-9831 (mobile)

**Study Site:** Denver, CO

#### **Purpose**

You are being asked to participate in a research study. The purpose of this study is to examine the college transition experience of first-year college students who self-identify with mental health challenges. Specifically, this study will examine first time, first year college student's experiences during their transition year (first year) attending a private four-year university.

#### **Procedures**

If you participate in this research study, you will be asked to:  
Complete a one-time, 30 minute online survey

#### **Voluntary Participation**

Participating in this research study is completely voluntary. Even if you decide to participate now, you may change your mind and stop at any time. You may choose to answer some or all of the questions in the survey. You will remain anonymous throughout the study and may discontinue your role in the study without penalty or other benefits to which you are entitled.

#### **Risks or Discomforts**

There are minimal risks involved with participating in this study. Given the nature of the topic, it is possible that the questions may create some discomfort. The survey is being held on a completely online and you will remain anonymous. However, if you would like to speak to a professional, the university Health and Counseling center is available for assistance. Because of the small size of the participant group, measures will be taken to ensure confidentiality (see Confidentiality section).

## **Benefits**

As a participant, you may benefit only indirectly from this study. You may gain insight into your college transition experience. There is no promise or guarantee of benefits that have been made to encourage you to participate. The findings of this study will also provide information to other researchers and college administrators about students who identify with mental health challenges. This information may also improve services provided to such students. You may contact the researcher/investigator at a later time for a summary of the research results.

## **Confidentiality**

The study consists of one online survey, which will take about 30 minutes. All surveys are completely anonymous. Access to the data will be limited to myself, the sole researcher in the study. The findings from this study will be utilized within a dissertation but may additionally be used in meetings, conferences, or other published works.

Before you begin, please note that the data you provide may be collected and used by Qualtrics as per its privacy agreement. This research is only for participants over the age of 18 years. Please be mindful to respond in private and through a secured Internet connection for your own privacy. Your confidentiality will be maintained to the degree permitted by the technology utilized. Specifically, no guarantees can be made regarding the interception of data sent via the Internet by any third parties. The research records are held by researchers at an academic institution; therefore, the records may be subject to disclosure if required by law. The research information may be shared with federal agencies or local committees who are responsible for protecting research participants.

## **Freedom to Withdraw:**

You are free to withdraw from this study at any time.

## **Questions**

If you have any questions about this project or your participation, please feel free to ask questions now or contact **Katie Seymour** at **303-601-9831** or [kathlene.seymour@du.edu](mailto:kathlene.seymour@du.edu) at any time. You may also contact my advisor, Dr. Norma Hafenstein at 303-871-2527 or [Norma.hafenstein@du.edu](mailto:Norma.hafenstein@du.edu).

If you have any questions or concerns about your research participation or rights as a participant, you may contact the DU Human Research Protections Program by emailing [IRBAdmin@du.edu](mailto:IRBAdmin@du.edu) or calling (303) 871-2121 to speak to someone other than the researcher.

## **Please take all of the time you need to read through this document and decide whether you would like to participate in the research study.**

- Yes, I have read the above consent form and will participate in this study by completing in the following survey
- No, I will not participate in this study

If no, I will not participate... Is selected, Then Skip to End of the Survey.

## Appendix E: Pilot Interview Questions

Interview Question	Rationale for Question	Supporting Literature
How did you make the decision to attend the University?	Collect general information about the student to better understand the college selection.	Flaga, C. T. (2006)
What was it like leaving high school and coming to college?	Collect general information about the student to better understand the college selection.	Gallagher, R. (2014)
Tell me about your first few days/weeks on campus?	Collect general information about the initial transition process.	Flaga, C. T. (2006)
What expectations do you have about the academics and social life at this University?	Collect general information about the student expectations (academic and Social) at the institution.	Laanan, F. (2006)
What has been your greatest challenge since starting college?	Collect general information about the initial challenges the student faced.	Laanan, F. (2006)
Since entering college, what has been your greatest success?	Collect general information about the success the student experienced.	Laanan, F. (2006)
Thinking back to when you first started college, what has been your best relationship? What has been your most challenging relationship?	Collect general information about the student's relationship building experiences.	Karp, D., Holmstrom, L., & Gray, P. (2004)
Thinking about your academics here at this University, what has been the most challenging?	Collect general information about the student's initial experiences	Laanan, F. (2006)
What is the most memorable experience you have had since you transition into college?	Collect general information about the most memorable experiences.	Townsend, B. K. (1995)

## Appendix F: Survey Questionnaire

### KRS DRP 2018 Survey Questionnaire

---

Thank you for agreeing to participate in this survey!

The purpose of this study is to better understand to college transition experience as it relates to self-identified mental health and related challenges. The Healthy Behaviors, Self-Rated Health and Quality of Life Questionnaire was designed specifically for colleges and universities, and its success depends on gathering the diverse perspectives of students across campus – therefore I appreciate your participation. By participating, you will be providing University of Denver with valuable information that will improve student life. Please know that participation is completely voluntary, and your answers will be anonymous.

Thank you for considering this important study!

---

Q Age:

- Under 18 years of age (1)
  - Between 18 and 23 years of age (2)
  - Between 24 and 30 years of age (3)
  - Over 31 years of age (4)
- 

Q Gender:

- Male (1)
  - Female (2)
  - Other (3) \_\_\_\_\_
  - Prefer not to say (4)
-

Q Race:

- White (1)
  - Black or African American (2)
  - Hispanic or Latino (7)
  - American Indian or Alaska Native (3)
  - Asian (4)
  - Native Hawaiian or Pacific Islander (5)
  - Other (6)
- 

Q Marital Status:

- Married (1)
  - Cohabiting (2)
  - Divorced (3)
  - Separated (4)
  - Never married (5)
- 

Q Living Conditions:

- Living on campus (1)
  - Living off campus (2)
  - Living off campus with family (3)
  - Living with children without any other adult (4)
  - Living with parents (5)
  - Others (6)
-



Q Residents of Colorado:

- Yes (1)
  - No (2)
  - No (4)
- 

Q Classification at University:

- First Year (1)
  - Second Year (2)
  - Junior (3)
  - Senior (4)
  - Just taking a class (5)
  - Other (6) \_\_\_\_\_
- 

Q Parent Educational Status:

- Parent/parents/guardian have college degree (1)
  - Parent/parents/guardian do not have a college degree (2)
- 

Q Source of income during the university year:

- Student loan only (1)
  - Student loan and support from parent(s)/spouse/guardian (2)
  - Student loan and income from paid employment (3)
  - Student loan and other source of income (4)
-

Q How often do you drink alcohol?

- Never (1)
  - Once a month (2)
  - 2-4 times a month (3)
  - 2-4 times a week (4)
  - 4 times a week or more (5)
- 

Q If you do drink alcohol, what is the usual amount consumed on each occasion?

- 1-2 glasses (1)
  - 3-4 glasses (2)
  - 5-6 glasses (3)
  - 7-9 glasses (4)
  - 10 glasses or more (5)
- 

Q Do you smoke cigarettes?

- Yes, daily (1)
  - Yes, sometimes (2)
  - No (3)
-

Q How often do you exercise?

- Never (1)
  - Once a month (2)
  - 2-4 times a month (3)
  - 2-3 times a week (4)
  - 4 times a week or more (5)
- 

Q Please rate the following potential sources of stress. My stress over the academic year have been based on the following issues:

	Not at all stressed (1)	Slightly stressed (2)	Rather stressed (3)	Highly stressed (4)
Not coping Academically (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Problems with Professors (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Problems with roommate (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Poor finances (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Poor housing (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family problems (6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Not having a relationship (7)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Relationship problems (8)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Problems with friends (9)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q Please choose any physical or psychological health issues that you may have exhibited during the academic year 2017/2018.

- Temporary disease (less than a month) (1)
  - Chronic disease (lifetime) (2)
  - Injury (3)
  - Functional impairment (4)
  - Utilization of a University Health Service (such as the Health and Counseling Center, HCC) (5)
  - Hospitalization (6)
  - Use of prescription medicine (7)
  - Mental Health Care (8)
  - Psychosomatic symptoms (9)
  - Psychological trauma (10)
- 

Q Please rate your overall self-rated physical health status:

- Very good (1)
  - Good (2)
  - Neither good nor poor (3)
  - Poor (4)
  - Very poor (5)
-

Q Please rate your overall self-rated psychological health status:

- Very good (1)
  - Good (2)
  - Neither good nor poor (3)
  - Poor (4)
  - Very poor (5)
- 

Q How do you rate your general state of health?

- Very good (1)
  - Good (2)
  - Neither good nor poor (3)
  - Poor (4)
  - Very poor (5)
- 

Q2 What do you think about your own health condition compared with that of other people your age?

- Much better (1)
  - A bit better (2)
  - Neither better nor worse (3)
  - A bit worse (4)
  - Much worse (5)
-

Q During the academic year of 2017/2018, did you experience any of the following psychological or psychosomatic problems?

	Not at all (1)	A little (2)	Quite a lot (3)	A lot (4)
Difficulty in concentration (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Irritation (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Anxiety (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sleeping disorder (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Depression (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tiredness (6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Poor appetite (7)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Headache (8)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Upset stomach (9)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q During the 2017/2018 academic year, did you experience physical difficulties that restricted your life because of temporary disease, chronic disease, injury or functional impairment?

- Not at all (1)
- A little (2)
- Quite a lot (3)
- A lot (4)

Q During the 2017/2018 academic year, were you troubled by psychological difficulties that restricted your everyday life?

- Yes (1)
- No (2)

---




Q During the 2017/2018 academic year, did you take prescription drugs due to physical or psychological problems?

- Yes (1)
- No (2)

---

Q At the bottom of the scale (1) is the worst you might reasonably expect to have. At the top (10) is the best life you might expect to have. Rank where you feel fits best.

0 1 2 3 4 5 6 7 8 9 10

Where on this scale is your life right now? (10 being best and 1 being worst) ( )	
Where on the scale was your life one year ago? ( )	
Where do you expect your life to be in one year from now? ( )	

---

Thank you so much for your participation in this study! If you are willing to participate in a follow up interview with the researcher, Katie Seymour, please email Katie Seymour at [kathlene.seymour@du.edu](mailto:kathlene.seymour@du.edu). She will reach out with further details.

For any questions, please contact:  
Katie Seymour, [kathlene.seymour@du.edu](mailto:kathlene.seymour@du.edu)

## Appendix G: Informed Consent for Participation in Research

### Consent Form for Participation in Research Semi-Structured Interview



**Title of Research Study:** College transition experience: first time first year students and self-identified mental health challenges

**Researcher(s):** Katie Seymour, Doctoral Student, University of Denver  
(303) 871-3363 (office)  
(303) 601-9831 (mobile)

**Faculty Sponsor:** Dr. Norma Hafenstein, Daniel L. Ritchie Endowed Chair in Gifted Education, Full Clinical Professor  
(303) 871-2527  
[nhafenst@du.edu](mailto:nhafenst@du.edu)

**Study Site:** University of Denver, Denver, CO

#### **Purpose**

You are being asked to participate in a research study. The purpose of this study is to examine the college transition experience of first-year college students who self-identify with mental health challenges. Specifically, this study will examine first time, first year college student's experiences during their transition year (first year) attending a private four-year university.

#### **Procedures**

You have identified yourself as someone who may be interested in participating in this study. If so, you will participate in one 60-minute interview at a location and time of your choosing on the DU Campus area. Specifically, you will be able to choose from several campus locations that are convenient for you. If you agree, your interview will be digitally recorded and transcribed so I am sure I accurately interpret your information.

#### **Voluntary Participation**

Participating in this research study is completely voluntary. Even if you decide to participate now, you may change your mind and stop at any time. You may choose to answer some or all of the questions in the semi structured interview. You will remain anonymous throughout the study and may discontinue your role in the study without penalty or other benefits to which you are entitled. You will be audio recorded during the interview process. If you do not want to be audio recorded, please inform the researcher, and only hand-written notes will be taken during the interview.

#### **Risks or Discomforts**

There are minimal risks involved with participating in this study. Given the nature of the topic, it is possible that the questions may create some discomfort. Your interview is being held in close



proximity to one of the following offices on the DU campus; The Health and Counseling Center, The Disability Services Center, or Campus Life and Inclusive Excellence. If at the end of the interview you would like to speak to a professional, I can take you to someone that you can talk with. I will also provide you with information about the Health and Counseling Center available at the institution. Because of the small size of the participant group, measures will be taken to ensure confidentiality (see Confidentiality section).

### **Benefits**

As a participant, you may benefit only indirectly from this study. You may gain insight into your college transition experience. There is no promise or guarantee of benefits that have been made to encourage you to participate. The findings of this study will also provide information to other researchers and college administrators about students who identify with mental health challenges. This information may also improve services provided to such students. You may contact the researcher/investigator at a later time for a summary of the research results.

### **Confidentiality**

The researcher will ensure that all names are given pseudonyms so as to keep your information safe throughout this study. Your individual identity will be kept private when information is presented or published about this study. Only I and my faculty advisor will have access to the data. All forms, printed transcripts and digital voice files (on a USB drive) will be stored in a locked filing cabinet that is in a location only known to the researcher. The researcher will work in a secure location while analyzing data. All data will be used only for the purpose of understanding the findings of the study. All recordings will be destroyed within two years of collection.

### **Freedom to Withdraw:**

You are free to withdraw from this study at any time.

### **Questions**

If you have any questions about this project or your participation, please feel free to ask questions now or contact **Katie Seymour** at **303-601-9831** or [kathlene.seymour@du.edu](mailto:kathlene.seymour@du.edu) at any time. You may also contact my advisor, Dr. Norma Hafenstein at 303-871-2527 or [Norma.hafenstein@du.edu](mailto:Norma.hafenstein@du.edu).

If you have any questions or concerns about your research participation or rights as a participant, you may contact the DU Human Research Protections Program by emailing [IRBAdmin@du.edu](mailto:IRBAdmin@du.edu) or calling (303) 871-2121 to speak to someone other than the researcher.

### **Participants Responsibilities:**

I voluntarily agree to participate in this study.

- To participate in one 60-minute interview.
- To review the transcript from my interview to ensure that it accurately reflect what I said during the interview.

### **Options for Participation**

Please initial your choice for the options below:

- The researcher may contact me again to participate in future research activities.
- The researcher may audio/video record or photograph me during this study.

Please take all the time you need to read through this document and decide whether you would like to participate in this research study.

If you agree to participate in this research study, please sign below. You will be given a copy of this form for your records.

\_\_\_\_\_

**Participant Signature**

\_\_\_\_\_

**Date**

Should I have any pertinent questions about this research or its conduct, and research subject's rights, I may contact:

Katie Seymour  
(303) 601-9831  
[Kathlene.seymour@du.edu](mailto:Kathlene.seymour@du.edu)

Dr. Norma Hafenstein (Faculty Advisor)  
(303) 871-2527  
[nhafenst@du.edu](mailto:nhafenst@du.edu)

## Appendix H: Semi Structured Questionnaire and Interview Protocol



### **Semi Structured Questionnaire and Interview Protocol:**

**Title of Research Study:** College transition experience: first time first year students and self-identified mental health challenges

**Researcher(s):** Katie Seymour, Doctoral Student, University of Denver

**Study Site:** University of Denver, Denver, CO

Name:                      Pseudonym:                      Date/time:

#### **Beginning Script:**

Thank you for meeting with me today. The purpose of this study is to examine the college transition experience of first-year college students who self-identify with mental health challenges. Specifically, this study will examine first time, first year college student's experiences during their transition year (first year) attending a private four-year university. This research is part of the requirements for my doctoral degree. I sent you the informed consent by email and we can review that together if there are any additional questions that you may have. Once you sign the form we will begin the interview [Review Informed Consent Form].

#### **Semi Structured Interview Questions: Created and Piloted by Katie Seymour**

1. How did you make the decision to attend this University? (transition)
2. What was it like leaving high school and coming to college? (transition)
3. Tell me about your first few days/weeks on campus? (transition)
4. What expectations did you have about the academics and social life at this University? (social and academic support)
5. What has been your greatest challenge since starting college? (transition)
6. Since entering college, what has been your greatest success? (environment variable social support and options)
7. Thinking back to when you first started college, what has been your best relationship? What has been your most challenging relationship? (environment variable social support and options)
8. Thinking about academics here at this University, what has been the most challenging? (environment variable social support and options)
9. Compared to the first few days of the fall start, what is a typical day like for you now?

10. What is the most memorable experience you have had since you transition into college here?

**End Script:**

Thank you so much for participating in this study. As I explained at the start of the interview, I will send you a transcript of the interview and ask that you review it and send any changes back to me by email. I know some of the things we talked about may have brought up some uncomfortable feelings. Would you be interested in speaking with a professional at this time? [If participant wants to meet with a staff member, I will then escort them to the appropriate person/department]. I would also like to provide you contact information for the Health and Counseling Center at The University of Denver so that if you decided later that you want to speak with someone you will know who to contact.

Thank you so much for your time!

## **Appendix I: Timeline of Research**

### **Timeline of Research and Distribution of Survey and Semi-Structured Interview**

**December 2017-** Established relationship with Community Partner

**March 2018-** Meet with my community partner

**April 26, 2018-** IRB Approval

**May 2018-** Faculty Recruitment Email sent out vial First Year Seminar List Serve

**May 2018-** Student Invitation to complete survey sent out

**June 1, 2018** – Survey Closed

**June 2018-** Semi-structured interviews were conducted

**September-December 2018-** conduct analysis of survey and semi-structured interview results to