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Examining Mental Health Differences between Transfer and Nontransfer University Students Seeking Counseling Services

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ABSTRACT

This article sought to examine the differences between transfer and nontransfer students on mental health factors, social involvement, and academic success. It was found that transfer students had significantly higher scores on several mental health factors as compared to nontransfer students. It was also found that transfer students were less involved in athletics and campus organizations, but engaged in more work hours per week. Finally, results indicated that the transfer students were not experiencing significant differences in their academic performance compared to nontransfer students. Future research should examine these differences to better understand the impact of the transition and adjustment of transferring to a new institution.

KEYWORDS

Academics; college counseling; mental health; transfer students

Transfer students (i.e., students who have at one time attended another institution prior to the current one) are a significant subset of the college student population and it is important for campuses, and more specifically university counseling centers, to be attuned to their clinical needs. According to the U.S. Department of Education, almost 60% of college students attend more than one university (Adelman, 2006; Peter & Forrest Cataldi, 2005). Additionally, according to the National Student Clearinghouse Research Center, one third of students who started at 2-year public institutions and 13% of students who started at 4-year public institutions finished at institutions other than the one where they first enrolled (Shapiro, Dundar, Wakhungu, Yuan, & Harrell, 2015). Transfer students may have diverse reasons for transferring, such as difficulties with adjustment at original institution, changed finances, new career goals, or simply advancing from community college to a 4-year institution. Clearly, a large number of students are transferring and it is important that college counseling professionals

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address their specific needs, which may differ from nontransfer students (i.e., students who have only ever attended the current university).

Research on the transfer student adjustment process has primarily focused on academic experiences, with a particular emphasis on grade point averages (GPAs) and retention rates. “Transfer shock” (Hills, 1965), which refers to the initial decline in academic performance (e.g., GPA) for new transfer students, is the most commonly examined construct within this population. While the majority of research provides evidence for transfer shock (e.g., Glass & Harrington, 2002; Porter, 2003; Townsend, 2008), it has also been found that differences in academic performance and retention rates diminish the longer that the student continues at the university (Glass & Harrington, 2002).

Some authors have conceptualized transfer shock as encompassing both scholastic challenges and the adjustment to a new social environment (Eggleston & Laanan, 2001) and have noted that transfer students tend to feel disconnected and invisible on the new campus (Kodama, 2002). Transfer shock has also been considered within the broader context of “campus culture shock,” which refers to the challenge of transitioning to a new university environment along with fewer helpful resources for transfer students (Davies & Casey, 1999; Wawrzynski & Sedlacek, 2003). Making social connections can be harder for transfer students given greater likelihood of work and family responsibilities as well as less awareness of how to get involved in campus events (Wang, 2009). Struggling to establish new friendships in an environment where many friendships have already been established by nontransfer students is also a challenge (Townsend & Wilson, 2006). The challenges experienced by transfer students are especially unfortunate because students who are more involved in the campus experience have a greater likelihood of remaining in college and obtaining their degrees (Pascarella & Terenzini, 2005). Townsend and Wilson (2006) found that adapting to a new institutional culture, not having enough information in the process of transferring, and lacking social relationships in the new institution contribute to transfer adjustment issues. These adjustment issues can lead to or exacerbate psychological distress such as depression, anxiety, low self-esteem, and somatic distress (Duggan & Pickering, 2007–2008; Ishitani, 2008; Rhine, Milligan, & Nelson, 2000; Sherer, 1985; Vredenburg, O’Brien, & Kramer, 1988).

Although academics are an important aspect of the college student experience, we were interested in taking a broader perspective by also examining differences in social and psychological factors between nontransfer and transfer students who seek counseling services at our university. Additionally, we sought to look beyond the initial transition to the institution and examine the ongoing experience of transfer students as compared to nontransfer students. Given the transition and adjustment concerns of

transfer students, we hypothesized that transfer students would demonstrate higher levels of mental health distress than nontransfer students.

Method

Participants

Participants were 700 undergraduate students (182 identified as transfer students; 518 identified as nontransfer students) attending an intake appointment at a counseling center at a public university in the northeastern United States. Of the participants, 214 (30.6%) classified themselves as freshmen, 153 (21.9%) as sophomores, 196 (28%) as juniors, 128 (18.3%) as seniors, 6 (.9%) classified themselves as other, and 3 (.4%) did not report their academic standing. Women represented 71.4% of the sample ($n = 500$), men 28.1% (197), 1 (.1%) identified as transgender, and 2 (.3%) did not identify within these gender categories. In terms of ethnicity, 514 (73.4%) identified as Caucasian, 98 (14%) as African American, 32 (4.6%) as Hispanic/Latino(a), 13 (1.9%) as Asian American, 2 (.3%) as Native Hawaiian or Pacific Islander, 32 (4.6%) as Multiracial, 7 (1%) as “self-identify,” and 2 (.3%) did not answer. It is important to note that just because a student self-identified as a transfer student, she or he did not necessarily transfer during the semester that the data was collected.

Measures

Standardized Data Set (SDS; Center for Collegiate Mental Health, 2012). The SDS is a standardized set of demographic and mental health history questions. Demographic information, including race/ethnicity, gender, class standing, GPA, perceived social support, perceived family support, and involvement in sports, work, and club activities, was collected using this form.

Counseling Center Assessment of Psychological Symptoms-62 (CCAPS-62; Locke et al., 2011). The CCAPS-62 is a 62-item standardized measure designed to assess mental health distress in a clinical college student population on a variety of psychological symptoms. It consists of eight subscales: Depression, Generalized Anxiety, Social Anxiety, Eating Concerns, Substance Use, Hostility, Academic Distress, and Family Distress, as well as an overall Distress Index. Subjects respond based on their experience over the previous 2 weeks, with each item rated on a 5-point Likert-type scale anchored at 0 (*not at all like me*) and 4 (*extremely like me*). The subscale scores are calculated by summing item scores such that higher scores indicate more distress. The subscale scores have demonstrated acceptable internal consistency and test-retest reliability estimates, as well as initial evidence of convergent validity in a largely nonclinical college population (Locke et al., 2011).

Procedure

Data for this study was collected from students attending an intake appointment for counseling services at a counseling center at a public university in the northeastern United States which had contributed data to the Center of Collegiate Mental Health (CCMH), a nationwide practice research network, during the 2013–2014 academic year (fall and spring semesters). Students presenting to this counseling center provided demographic and mental health history by completing the SDS and CCAPS-62 at intake. In the version utilized at the university at the time of data collection, there was no information acquired about type of institution from which students transferred, year in school at time of transfer, or length of time since transfer to the current university.

Results

Mental health

A one-way multivariate analysis of variance (MANOVA) was conducted to assess whether transfer and nontransfer students had different scores on the subscales of the CCAPS-62. A significant difference was found between transfer and nontransfer students on a combination of the nine dependent variables, $F(9, 690) = 3.61, p < .001$, Wilks' $\lambda = .955$. Given the significance of the overall test, the univariate effects were examined, using the Bonferroni correction to set the significance level to $p < .0056$ to account for multiple analysis of variances (ANOVAs). Univariate testing found the effect to be significant for the depression subscale, $F(1, 698) = 10.91, p = .001$; social anxiety subscale, $F(1, 698) = 9.25, p = .002$; academic distress subscale, $F(1, 698) = 20.65, p < .001$; family distress subscale, $F(1, 698) = 17.76, p < .001$; and the distress index subscale, $F(1, 698) = 15.71, p < .001$. On each subscale for which there was a significant effect, the transfer students had higher mean scores than nontransfer students, which suggests they experience more mental health distress. There was no significant effect for the generalized anxiety, eating concerns, hostility, and substance use subscales. The subscale means, standard deviations, and effect sizes of transfer and nontransfer students can be viewed in [Table 1](#).

Social involvement

A one-way MANOVA was conducted to assess whether transfer and nontransfer students differed significantly in terms of social involvement. A significant difference was found between transfer and nontransfer students on a combination of the five dependent variables, $F(5, 521) = 4.87, p < .001$, Wilks' $\lambda = .955$. Given the significance of the overall test, the univariate effects were examined, using the Bonferroni correction to set the significance

Table 1. Means, Standard Deviations, and Effect Sizes of Mental Health Subscales.

Variable	Transfer		Nontransfer		<i>F</i>	<i>p</i>	Cohen's <i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
Depression	1.96	.90	1.68	1.00	10.91	.001*	.294
Anxiety	2.02	.91	1.78	1.02	7.60	.006	.248
Social Anxiety	2.12	.98	1.87	.94	9.25	.002*	.260
Academic	2.06	.92	1.67	1.02	20.65	.001*	.402
Eating	1.22	1.02	1.07	.96	2.97	.085	.151
Family	1.59	1.00	1.24	.94	17.76	.001*	.361
Hostility	1.26	.88	1.06	.88	6.64	.010	.227
Substance	.89	.96	.80	.90	1.29	.257	.097
Distress Index	2.01	.81	1.70	.92	15.71	.001*	.358

* $p < .0056$.

Table 2. Means, Standard Deviations, and Effect Sizes of Social Involvement Variables

Variable	Transfer		Nontransfer		<i>F</i>	<i>p</i>	Cohen's <i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
Athlete Status	1.97	.17	1.89	.31	7.06	.008*	.320
Club Hours	2.98	4.55	5.27	6.10	15.84	.001*	-.426
Work Hours	11.43	11.34	8.29	10.43	7.61	.006*	.288
Family Support	3.43	1.33	3.56	1.34	.045	.832	-.097
Social Support	3.50	1.18	3.63	1.22	.475	.491	-.108

* $p < .01$.

level to $p < .01$ to account for multiple ANOVAs. Univariate testing found the effect to be significant for athlete status, $F(1, 525) = 7.06$, $p = .008$, number of campus organization hours, $F(1, 525) = 15.84$, $p < .001$, and number of work hours, $F(1, 525) = 7.61$, $p = .006$. Transfer students had a lower level of athletic and campus organization involvement (2.8% vs. 10.7% identified as athletes, and 2.98 versus 5.27 hours of involvement, respectively), but had significantly higher number of work hours (11.43 vs. 8.29 hours). There was no significant difference in family or social support (see Table 2).

Academic success

Given research comparing transfer and nontransfer students with regard to academic performance (Carlan & Byxbe, 2000; Luo, Williams, & Vieweg, 2007; Pennington, 2006; Wang, 2009), an independent-samples t-test was conducted to compare self-reported GPA between transfer and nontransfer students. There was no significant difference found between the groups (see Table 3).

Table 3. Mean, Standard Deviation, and Effect Size of GPA.

Variable	Transfer		Nontransfer		<i>t</i>	<i>p</i>	Cohen's <i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
GPA	3.12	.56	3.13	.62	-.038	.970	.017

Note. GPA = grade point average.+

Discussion

Mental health

It was hypothesized that transfer students would demonstrate higher levels of mental health distress than nontransfer students, as measured by the subscales of the CCAPS-62. Our analyses showed that transfer students endorsed higher levels of symptoms of depression (e.g., hopelessness, social isolation, sadness, crying) and social anxiety (e.g., discomfort around people; feeling judged or disliked interpersonally), as well as greater academic and family problems. One reason for this difference could be difficulties that transfer students experience as they transition and adjust to a new campus environment and culture. As research has described previously (Townsend & Wilson, 2006), transfer students often struggle to adjust to the new campus culture, make connections with faculty in the classroom, and engage socially with their peers. These difficulties could negatively influence their transition experience and thus negatively impact their mental health. Another possible explanation for this difference could be that transfer students arrive to their new institution with more existing mental health concerns than nontransfer students. A third potential explanation is that transfer students may hesitate more than nontransfer students prior to seeking help and thus present as more distressed on their intake paperwork. It is recommended that future research explore the possible explanations.

Social involvement

Although our primary aim was to examine differences in mental health distress between transfer and nontransfer students, we were also interested in any differences in social involvement. As described previously, transfer students were less involved in athletics and campus organizations, which is consistent with previous research (Ishitani & McKittrick, 2010) but they engaged in more work hours per week. While there were no statistically significant differences between transfer and nontransfer students in perceived family and social support, transfer students reported significantly higher family distress on the CCAPS-62 subscale. It is important to note that the perceived social support question encompasses all social support, not just on-campus social support. Thus, transfer students could experience strong social support from peers that are not attending their current institution, which could explain why there are no significant differences between transfer and nontransfer students in this area. A possible area of future research would be exploring whether transfer students who demonstrate more social engagement are more buffered from psychological distress.

Academic success

In contrast to the academic decline that has been described as part of the transfer shock experienced by transfer students (Hills, 1965), our study found no significant differences in self-reported GPA between transfer and non-transfer students. Since this study did not examine when transfer students transferred to this current institution, these results could be a result of transfer students adjusting academically over time and thus having adapted to the transfer shock experienced in the classroom.

Conclusion & recommendations

It is important to acknowledge that in the context of this study, transfer students were defined as any student who originated at a different institution, regardless of when they transferred to the current university, as we were interested in the impact of being a transfer student beyond the semester in which they transferred to the university. Our study found that there were significant differences in mental health between transfer and nontransfer students who seek counseling services, which suggests that the impact of transferring colleges may extend beyond the initial adjustment period. However, this study only reports on students who were seeking counseling services so it is not known whether there are mental health differences between transfer and nontransfer students within the general student population. For transfer students who seek help, it may be that even after spending time at the university, they feel one step behind their nontransfer counterparts within the university system. Additionally, transfer students may have unique experiences, such as greater family obligations or life stresses. It is recommended that clinicians explore the transfer experience of clients regardless of when they transferred because it is possible that the adjustment process, even if it occurred semesters earlier, still impacts their academic performance, interpersonal connections, and psychological well-being.

Clinicians will typically not encounter transfer students until they are already in distress. We recommend that college counselors take a proactive outreach role with transfer student needs. An ideal partnership for college counselors would be with the university's orientation services. Townsend and Wilson (2006) highlighted the usefulness of orientation programs for transfer students at the receiving institution as it is an opportunity to provide helpful and important information. If a solid orientation program is already in existence for transfer students, college counselors can provide an educational session about transfer adjustment and how to manage this transition. However, if the orientation is briefer in nature, college counselors may offer to serve as consultants to assist

in the expansion of orientation. College counselors can speak to the importance of disseminating important information to transfer students, such as information about activities, organizations, and clubs and ways to join them (Townsend & Wilson, 2006), as well as healthcare, housing, and the local community. In either case, college counselors can directly educate new transfer students about transfer shock, normalize adjustment challenges, describe warning signs of psychological distress, as well as provide resource information at the outset before difficulties emerge. Other important offices for participation in a transfer orientation include student affairs, academic support services, advising services, financial aid, registrar, bursar, library services, student activities, and healthcare services. In addition, there may be benefits of break-out sessions for commuter versus residential students, community college versus 4-year institution transfers, and traditional versus nontraditional students.

Another population to whom college counselors can provide education about transfer issues would be student orientation leaders, perhaps some of whom were transfer students themselves. Ongoing booster sessions to support transfer students in their longer-term adjustment to the university could also be beneficial. In order to increase attendance, incentives such as eligibility to enter a raffle if they attend all sessions could be useful. College counselors can also offer training to faculty and staff about transfer adjustment and signs of psychological distress.

Limitations

There are limitations to the generalizability of the findings in this study because data were collected at a single institution that has many transfer students and is located close to a large metropolitan area. Another limitation of the study is that it is not known from what type of institution the students transferred (i.e., 2 year vs. 4 year). We were interested in the transfer student population as a whole, but intend to conduct further research of within-group differences between students who transferred from community colleges versus 4-year institutions. A third limitation of the current study is that it is unknown when these students transferred to this current university and how many times these students have transferred. This information would be important to help delineate if there are any differences between transfer students with respect to their mental health, social involvement, and academic success based on how long they have been at their current institution. Future research should examine these differences to better understand the impact of the transition and adjustment in transferring to a new institution.

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