

Mental Health in the Transition to College: Experiences of Six Low-Income, High-Achieving Students

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This study examined the mental health issues of low-income, high-achieving undergraduate students, a largely overlooked population in mental health research. Study participants provided in-depth reports across their first semester of college through interviews and semiweekly audio-diary transcripts. Factors related to race, community, money, and access to counseling services were the major determinants of students' college experiences and mental health. Intensive case studies of six students raise implications for student affairs and counseling centers.

Keywords: low income, first semester, college transition, students of color, first-generation students

According to the Center for Collegiate Mental Health (CCMH, 2019), utilization of counseling services for mental health concerns has risen by 8.4% within the past 7 years. The number of students who have attempted suicide within their lifetime has grown from 8.0% to 10.3% since 2011. For students seeking counseling at college and university counseling centers, the “top concern” (CCMH, 2019, p. 13) has been anxiety (23.2%), followed by depression (19.2%) and relationship problems (7.7%). Of the students surveyed, 63.9% had never attended counseling for mental health concerns prior to college. According to the World Health Organization’s survey of mental health issues in college students (Auerbach et al., 2018), 18.5% of college students displayed symptoms of major depression, and 16.7% displayed symptoms of generalized anxiety disorder.

An often-overlooked group of students in college mental health research has been low-income students. Research has shown that low income is associated with increased risk of mood, anxiety, and substance disorders, as well as other health outcomes (Sareen et al., 2011; Schnittker & McLeod, 2005). Compared with the median-income college student, low-income students are more likely to drop out of college before getting a degree or take longer to graduate and earn less once they do graduate (Hoxby & Avery, 2013; Lehmann, 2007; Quinn, 2004). As Jack (2014) noted, “lower-income undergraduates whose lives before college are culturally and socially dissimilar to their lives in college . . . experience the effects of class marginality most acutely” (p. 454). Low-income college students experience heightened awareness of wealth and class disparities, which may lead to feelings of inadequacy, powerlessness, isolation, and alienation (Aries & Seider, 2005; Rice et al., 2017).

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Many low-income and first-generation students are members of racial or ethnic minority groups (Bui, 2002). Students of color who are enrolled in predominantly White institutions (PWIs) may face challenges, including experiences of racism, discrimination, and microaggressions (Blume et al., 2012; Suarez-Balcazar et al., 2003). These challenges may result in mental health concerns, such as substance abuse, stress, anxiety, and trauma (Greer & Chwalisz, 2007; Lopez, 2005; Pieterse et al., 2010). For low-income Black college students, class marginality combined with their racial minority status in PWIs may result in “culture shock” (Torres, 2009, p. 885), which, in turn, may lead to isolation, alienation, low self-esteem, and low academic performance.

To investigate the experience of this understudied population, we analyzed the mental health issues of six low-income, high-achieving undergraduate students across their first semester in college. These students were part of a larger sample of students in the CollegePoint Persistence Study (CPPS), a longitudinal experience sampling study looking at the first-semester experiences of 74 low-income, high-achieving students who had participated in a college access advising program in high school (Sullivan et al., 2019).

The goal of the present study was to investigate the first-semester college experience using a mental health lens. We began the study with a general research question: What are the experiences of low-income, high-achieving students who have managed to matriculate at highly selective colleges where they are underrepresented? On the basis of the overall study findings, we then asked the following questions: (a) In what ways do social class and other marginalized identities affect both mental health issues and coping strategies among this particular population? (b) How does the ecology of low-income, high-achieving students affect how students experience and respond to the environmental pressures of highly selective college transition? and (c) What individual and institutional factors appear to make a difference in how successful they are in dealing with their mental health?

Because the issue of college student mental health is tied into the interacting characteristics of students, their backgrounds, and their postsecondary institution, we chose a comprehensive systems theory in which to conceptualize the issues and our findings. For these reasons, this study used Bronfenbrenner’s ecological systems theory as its theoretical framework (Arnold et al., 2012; Bronfenbrenner, 1979, 1993; Bronfenbrenner & Morris, 2006; Renn & Arnold, 2003). This framework examines how multiple ecological systems (e.g., immediate surroundings, interpersonal relationships, cultural and societal beliefs) interact and influence one another and affect the individual’s development. For low-income, high-achieving college students, interactions between their systems create unique challenges that affect their mental health. Students’ individual characteristics, for example, include their race, income status, academic preparation, and characteristic ways of choosing and interacting with their immediate contexts. The availability and qualities of these immediate settings, such as peer groups, classrooms, and counseling, will affect students. These settings are, in turn, shaped by policies, practices, and

structures that lie outside of the students’ control or even outside of their awareness. Larger societal attitudes around race and poverty affect students’ lives at their institutions.

The students (listed by pseudonyms in Table 1) were chosen to investigate mental health issues and outcomes that were prevalent across the entire study sample. Analysis of coded interviews and audio-diary transcripts collected over 15 weeks resulted in core categories relating to students’ mental health: race, friends/community, academic stress, and experiences with counseling. Students in this study frequently discussed these four categories. Additionally, these categories had the largest impact on their mental health. Secondary categories included mental illness, family, and money. This article will discuss how the core categories affected these six students’ mental health across their first semester of college.

Method

This study is a narrative qualitative inquiry situated in a postpositivist approach (Creswell, 1998). Narrative qualitative inquiries gather data by collecting stories and reporting individual experiences. Postpositivist studies “view inquiry as a series of logically related steps, believe in multiple perspectives from participants rather than a single reality, and espouse rigorous methods of qualitative data collection and analysis” (Creswell, 1998, p. 20).

Participants

This study is a substudy of the CPPS, a research study investigating how students who were part of the CollegePoint virtual advising program in high school experienced their transition into college. The CPPS research team recruited

TABLE 1
Student Sample Characteristics

Pseudonym	University Type^a	Relevant Demography	Salient First-Semester Experience
Daniel	Large, 4-year public university, Midwest	White, male, low-income	Homesickness, social isolation, transferred
Ceebee	Medium, 4-year public university, Southeast	Black, female, low-income, first-generation student	Racial identity, activism, racial minority at a predominantly White institution (PWI)
Chinasa	Medium, 4-year public university, South	Black, female, low-income, first-generation student	Anxiety, academic stress, positive counseling experience
Shannon	Medium, 4-year public university, South	White, female, low-income, first-generation student	Prior mental illness diagnosis, financial stress, strong peer support
Tristan	Large, 4-year public university, Northwest	Black, male, low-income	Racial minority at a PWI, suicidality, strong peer support
Clara	Large, 4-year public university, Southeast	White, female, low-income, first-generation student	First experience with anxiety disorder, academic stress, delayed access to counseling

^aLarge = more than 15,000 students; Medium = between 5,000 and 15,000 students.

students by sending a text message introducing the study to a random sample of 1,200 college-bound students who had engaged with their CollegePoint adviser as high school seniors. Half of the 1,114 students who received the message responded. Three quarters of this group indicated that they were interested in participating, of whom 158 completed intake surveys and informed consent forms. From this group, 80 students were randomly selected. Six students never participated and were replaced by wait-list students in the 2nd week of the study. Of the 79 students in this final group (which included wait-list students), the CPPS research team retained 74 students in the study

Procedure

The 74 students in the CPPS study were prompted two times per week for 15 weeks by SMS text messages to record a 5-minute audio recording on their cell phone. Once per week, the prompt was worded for students to choose their focus:

Hi [first name]! Please create and send us a 5-minute audio recording and Instagram photo with a 2-to-3-sentence caption sometime today. Share anything about your life in college. It can be mundane and typical or notable and exciting, an experience or an interaction, a thought or a feeling.

The second time, each week, the prompt asked for the student to share something about a designated topic, for instance, a social experience, a challenge, or an interaction with a faculty member.

Additionally, the CPPS research team conducted 30-minute semistructured interviews by phone with a subset of 40 students at the beginning and end of the study. The preintervention interview was about the students' background and their experiences in the first weeks of entering college. The postintervention interview asked the students to reflect on their entire semester, talk about their experiences being in the study, and describe their goals for the following semester. In all, data sources included pre- and postintervention interviews with 40 students, as well as semiweekly 5-minute audio-diary recordings. All interviews were audio recorded, transcribed, and coded in a qualitative software analysis program, HyperRESEARCH (<http://www.researchware.com/products/hyperresearch.html>).

Analysis

The first round of analysis consisted of identifying students with rich information about mental health. For the purposes of this study, mental health was defined as the overall emotional, psychological, and social well-being of students. In contrast, mental illness was defined as having either a diagnosed or debilitating mental disorder that impaired normal functioning. Only the 40 students who participated in the preintervention interviews and postintervention interviews were included in this first round of analysis in order to use the interview transcripts as a data source. To select eligible students, we

read transcripts that indicated mental health as a central theme. After the first round of analysis, Daniel, Ceebee, Chinasa, Shannon, Tristan, and Clara were identified as the subset of six students for the mental health analysis. These six students were chosen because they had completed pre- and postintervention interviews, and their major theme across the 15 weeks of the CPPS was mental health. The sampling frame was maximum variation sampling (Patton, 1990), in which a small number represents elements of diversity in the sample. According to this method, “common patterns that emerge from great variation are of particular interest and value in capturing the core experiences” (Patton, 1990, p. 172). The participants were full-time freshmen at 4-year public universities and differed with respect to race, gender, first-generation student status, geographic location, and experience with prior mental health issues. These six students were selected because they all discussed mental health issues extensively in their transcripts.

The second round of analysis, which began after the six students were selected, consisted of coding units of text in the students’ interviews and audio-diary transcripts. We used CPPS codes to screen students and established new codes for this substudy. Coding was completed using the HyperRESEARCH software. We assigned codes related to mental health to chunks of texts in audio diaries and interview transcripts. The codes were then organized to represent core categories that had the biggest impact on the six students’ mental health. These core categories were race, friends/community, academic stress, and experiences with counseling. Secondary core categories were mental illness, family, and money.

Findings

In this section, we analyze how the core categories affected students’ mental health. It is important to note that multiple core categories are present in a student, and it is the unique combination and interaction of multiple categories that makes each individual’s personal experience distinct. Discussing individual core categories across students provides insight into these six students’ mental health issues during their first semester.

Race

Race was an important core category for both Black and White students’ mental health. When Clara, a White woman, was looking for resources and support groups to manage her anxiety, she considered joining the first-generation students’ support group. However, she was reluctant to do so because “it’s been so hard to find first [generation] resources that aren’t targeted towards minorities.” She added, “I guess sometimes I just don’t feel right using those resources because I’m White. I know the struggles are obviously different.” Despite needing support and community, Clara chose not to attend her school’s first-generation students’ support group because she thought the group would be directed solely at students of color. Thus, for Clara, her university lacked a space for the intersectionality of being a White first-generation student.

For Tristan, a Black student at a PWI, race was a complicated topic. He said, “Here, not only are African Americans the minority, they’re the superminority, being that less than a percent of us are such.” During his preintervention interview conducted in the first weeks of college, he stated that he did not expect to make friends at first. When the interviewer asked why he felt this way, he said, “Because I’m not White.” In his audio diaries he stated, “I had immensely prepared myself, ‘All right, don’t get your hopes too high. You’re probably not going to have a lot of friends. You’re probably not going to find people that are like you.’” Tristan also felt the pressures of being the only Black student in his fraternity in the past 28 years. He stated, “I’m proud of it, but at the same time I do realize that because of this fact I have a lot to live up to. I have a lot of expectations that people are looking for.” Despite his fears of having a “superminority” status in college and battling stereotype threat (Blume et al., 2012), Tristan reported that he was met with understanding, compassion, and acceptance. He said that his fraternity “made him feel welcome” and “wanted”; they “boost one’s self-worth.” He said that the cultural dissimilarity between him and his peers was “OK because everybody accepts your culture. They make you feel like you matter.” Even though Tristan’s experience as a Black student at a PWI started with fear and doubt, he saw that he was accepted and supported by his community.

Ceebee’s first semester was defined by her experience of being a Black woman at a PWI. Like Tristan, she was worried about being a minority student; she felt “somewhat isolated because of how small the Black population was.” She felt ostracized by her family because she chose to go to a PWI. She said, “For a while, I was really ashamed of myself . . . I was beginning to feel like I sold out.” Starting college was Ceebee’s first time experiencing what it meant to be a minority since she grew up in a predominantly Black environment. Regarding this experience, she said, “I guess that’s what it means to feel like a minority, finally. Feeling like I have to monitor myself and filter who I am for the majority.” For example, when a Black man was killed by the police in her hometown, Ceebee felt hurt and distressed. She wanted to take a day off class or, in her words, “call out Black.” However, she was reluctant to talk to her professors because she “felt like they wouldn’t be receptive” to how the shooting affected her.

Ceebee immediately joined a Black women’s group in her first semester. Early in the semester, she attended a sit-in protest against police shootings and a “die-in” protest where students lay down on the floor. Ceebee had a formative experience after one of these protests. After a particularly emotional protest, a White student walked up to her, hugged her, and apologized. Ceebee recounted this experienced, saying,

The way she said it needed no further explanation. . . . She can’t apologize for her entire demographic, but the fact that she doesn’t know me, had never seen me or communicated with me a day before in her life and she hugged me like we were family, and apologized like she had personally offended me herself. It made me realize how much I love [her college] and how much I never want to leave here and how much I love being Black and how much I love people.

After her positive experiences with White peers, she said that

[my experiences] let me know that I didn't sell out. I didn't Uncle Tom my way into a PWI, basically. I was me and being me is what got me here and being me is what's going to keep me here. Since getting here, I've realized that. It's helped me to allow myself to enjoy it here and allow myself to tell myself that I do deserve it.

Race played a big part in Clara's, Tristan's, and Ceebee's first semester of college. It led Clara to isolate herself and not use the resources available to her, and it helped Tristan and Ceebee be happier where they were. For Tristan and Ceebee, attending a PWI as Black students was a daunting experience. However, they were both able to flourish in their respective colleges by creating a community where they were accepted.

Friends/Community

Friends/community was a category for all six of the students in this study. Friends/community was the most impactful category on whether the students had a positive or negative first-semester experience. Tristan's first semester was full of tragedy: His fiancé passed away when he started college, and he was prescribed antidepressants. His fraternity and a cappella group were the biggest supports in helping him. He said, "I joined an a cappella group, and I'm in a fraternity, all of those things combined together have really helped bring me out of a really dark place in my life" and "they made sure that . . . I stayed up in my grades, I stayed up on my studies, I stayed up on everything. And I'm so, like, [I'm] eternally forever grateful for that." For Ceebee, her involvement in a Black student publication served as emotional support: "The way they've received me in this big, this huge school, where I have felt alone on multiple occasions, I feel like I found a wonderful family." For Shannon, her friends in her dorm served as a community: "The community we have here in our hall, you never have to be alone, ever, if you don't want to be. You always have friends there to support you or to do stupid stuff with." After a particularly difficult day, Shannon said, "When I walked back into my dorm . . . it was just overwhelming relief to be back in this room, back in this building. I love it here so much, it makes such a difference to my state of mind to be here." Another student, Chinasa, commented that

involvement in extracurriculars not only helps you further yourself, or at least set up connections in the future, but it especially helps you reach out to your community or at least know what's there. Because, what a sad place it would be if you literally blindly stumbled into the dark.

Daniel was certainly "blindly stumbling into the dark" during his first semester. Whereas many of his friends chose to stay in state for college, he decided to attend a school out of state. His first semester was characterized by homesickness and isolation. He said, "I was a little shell shocked when I got here because people don't really talk to each other. . . . It's nothing like

it was back in my hometown where you could just talk to someone and they talked back to you.” He described himself as a social person and talked at length about how his experiences in college did not live up to his expectations: “Most of the time people don’t really care to busy their life with you” and “It’s supposed to be some social place, but it’s really not. . . . I miss my friends a lot . . . and it kind of sucks that they’re far away and I’m here and I miss them and I wish I could see them more often.” Over the course of the semester, Daniel decided to transfer and continue his second semester at an in-state university to be closer to his family and friends. He was in his new college when he did his postintervention interview for the CPPS where he was more social and involved, and his mental health had improved significantly.

The six students in this study had varying levels of involvement in college communities and varying experiences with friends. For some, friends were so supportive that they could pull them out of depression. For others, lack of friends led to isolation, regret, and homesickness. The experiences of these six students demonstrate that friends and community play a vital role in college students’ mental health and can have a significant impact on a student’s first-semester experience.

Academic Stress

Despite their overwhelming success in high school, all six of the students experienced academic challenges and immense academic stress during their first semester. Many of the students reported that they were surprised by their academic struggles in college because they were at the top of their class in high school. After her first failing grade in her life, Clara said, “[My grade] made me question how smart I am. I know I’m smart and I know I have some natural ability, but it made me question how much natural ability I actually do have.” Shannon had the opposite reaction to her academic struggles. She said, “Here, I’m pretty average. Honestly, for me, that’s kind of liberating. I don’t know how to explain that, but it is, that I don’t have to be number one all the time.” In both cases, academically struggling for the first time in their lives caused these two students to reevaluate their identities as smart and high-achieving students. Whereas Clara felt anxious and lost, Shannon accepted her new relative ranking and felt liberated.

Academics permeated every aspect of these students’ lives. Many of the students had to deal with major challenges, such as deaths in the family, health problems, and mental illness, over the course of the semester. For them, the question following a tragedy was, “How will this affect my academics?” Shannon went home for a family member’s funeral, and in her audio diary when she came back to school, she said,

I missed 2 days of class and that had me going insane because all I can think of is like, “Oh my God, I’m going to fall behind. Oh my God, I can’t get behind like this. I can’t miss this. I’m going to fail.” Yeah, that was going through my mind the entire time I was home plus everything else.

After Clara experienced a panic attack for the first time in her life during an exam, she said, “After [the panic attack] I was really worried about how I was

going to do on the next couple exams.” Tristan was suffering from depression after his fiancé’s death, and his biggest worry during his grieving process was his grades. Despite this tragedy, he ended his first semester with a grade point average (GPA) of 3.4; however, he was not satisfied with that GPA and was disappointed in himself. He said,

One of the main things I told myself was, regardless of what’s going on with me, I was not going to let my personal situation stop me from succeeding. I could have done better . . . I just became too complacent in what I was doing.

For these students, every hardship had two layers: the hardship itself and how the hardship affected their grades. Academics played such a big part in the students’ first semester that no tragedy was isolated; the meaning they assigned to their grades added yet another thing to be worried about during adversity.

Professors played a large role in either alleviating or exacerbating academic stress and other difficult situations. Tristan’s professors were immensely helpful in easing his battle with depression and helping him succeed academically: “I had professors that cared, I had instructors that listened and worked with me. . . . They helped me go around the issues that I was having in my life to get to my destination of my grade.” Ceebee’s African American Studies teacher, the only Black professor she had during her first semester, helped her be more comfortable as a Black woman at a PWI and served as a mentor through the semester. In contrast, however, Ceebee had a professor who “rejected” her request to take the day off after a Black man was killed by the police in her hometown, which caused her to feel “drained” for the rest of the week. Daniel’s negative experiences with his math professor caused him to isolate further. He said, “It’s frustrating that [professors] don’t necessarily care about your success. They kind of just care that you can eventually get out of their hair, and they can move on with their day and get their paycheck.” His social isolation was exacerbated further by his professor’s apathy:

It’s really weird being in this void of “Do people around me really care about my success and all that? Do I mean something, or am I just a person existing? Am I just a number on your attendance? Am I a name on your sheet? Is that all I am, or am I actually a person?”

The experiences of these six students with their professors were diverse: Whereas some professors served as mentors, friends, and helpers, others served to only worsen students’ difficulties.

Experiences With Counseling

Three of the six students in this study, Tristan, Clara, and Chinasa, sought counseling services at their colleges. Tristan’s and Chinasa’s experiences with counseling were overwhelmingly positive and beneficial for their mental health. Their counselors served as mentors and support systems during a difficult first semester. Clara’s experience, however, was more complicated.

Tristan started counseling after contemplating suicide. He talked to his roommate, who informed Tristan's adviser, and Tristan's adviser contacted the counseling center. His support systems worked collaboratively to help him reach the appropriate care. Even though his school allowed only six counseling sessions for a student, Tristan's counselor was able to "make an exception," which let Tristan have continuous access to counseling services. Regarding his counselor, Tristan said, "[He's] the biggest support that I have, hands down."

Chinasa decided to seek counseling because of her anxiety, especially around her classes and grades. Early in the semester, she described her experiences in class as sitting in the back seat of a car "screaming [her] head off," "literally waiting for the car to crash." She said that for her, "it's more a matter of learning how to breathe, how to calm down, how to relax." She was appreciative and hopeful that, unlike high school, she had resources such as counseling that could help her in college. Counseling helped her with public speaking and relaxation and helped her become more compassionate toward herself when it came to academics. She said that her favorite place on campus was her counselor's office and the women's center within the counseling office. She said, "I feel more comfortable there. People kind of open up about mental health, body image" and "I actually really enjoy going between two places because I can talk about real talk, like serious things that actually affect me, bother me."

Clara went to her college's counseling center after having a panic attack during her chemistry midterm. Initially, she talked to her math professor because she wanted to get exam accommodations for her anxiety. Her professor directed her to the disability office, which directed her to the counseling center. She waited 2 weeks to get her initial appointment from the counseling center, and the center told her that she would need an additional session to see a counselor who could arrange her paperwork. She was still waiting to hear back from the counseling center by the time she started her second semester; she had been waiting for 2 months to see a counselor. However, she managed to lower her anxiety over the course of her first semester by using resources connected to the counseling center. She took a stress and anxiety management class taught by a counseling PhD student. This instructor became a mentor and an important source of support. Clara said, "I'm able to talk to her and be open in class with her and other students about things I normally wouldn't tell anyone. It makes me feel better to be able to talk and actually really have someone listen." Additionally, she used the biofeedback lab in the school, which taught her to control her stress levels by monitoring her physical responses. Even though Clara was not able to obtain counseling services at her college, she reached out to resources that ultimately helped her with her mental health.

Other Categories

Mental illness, family, and money were identified as other core categories that affected the students' mental health during their first semester. These categories were considered to be secondary compared with the core categories discussed above. Even though they were present in the students' experiences, they had

a smaller impact on their mental health and were discussed less frequently than the core categories.

As noted earlier, for the purposes of this study, mental illness was defined as having either a diagnosed or debilitating mental disorder that impaired normal functioning. Of the six students, only Shannon had a mental illness diagnosis prior to college. However, she did not talk about her diagnosis in the context of her daily experiences in her audio diaries or interviews. Tristan started seeing a counselor and was prescribed antidepressants for suicidality following his fiancé's death. Luckily, he had a strong support network in place—his fraternity and counselor—that helped him function normally during the semester. Finally, Clara experienced a panic attack while taking an exam and continued to suffer from anxiety over the course of the semester. Although these three students battled with varying degrees of mental illness, they did not talk about their experiences in the context of mental illness. For example, Tristan talked extensively about how supportive his fraternity was but talked little about his depression and grief.

Family was another category that varied across participants. The student who was affected most by their family was Shannon; her family was a big source of stress for her. After she went home for a family member's funeral, she said, "The whole going home thing was so challenging just because my family's so fucking toxic. It's not at all good for my mental health and I hate it and it makes me absolutely miserable to be back there." Ceebee talked about her family when she discussed her fight with her sister in which her sister "basically bashed me for choosing to go to a PWI." As noted earlier, this was impactful for Ceebee because it made her feel that she "sold out." Daniel's feelings of homesickness were worsened by his mother's health problems. He felt anxious and feared that choosing an out-of-state college could prevent him from "being there if something were to happen."

Because the participants were low-income students, money played an important part in their experiences. Finances became another source of regret for Daniel because he had to pay more as an out-of-state student. His worries relating to money contributed to his final decision to transfer to a college in his state. Additionally, financial problems prevented the students from getting involved in extracurricular activities and communities. Daniel was unable to join a fraternity because he had to work during the rush period. Chinasa was anxious about attending a conference because she did not know whether she would be able to pay for her meals and transportation. Finally, concerns about money affected the students' academics. Shannon had trouble paying for her textbooks and felt anxious because she did not have enough money to fix her laptop. Chinasa's anxiety regarding her classes was worsened by the possibility that she could lose her scholarship if she failed a class. In essence, money served as an additional stressor for students that also exacerbated existing stressors.

Our findings show that these six students went through similar experiences over their first semester in college. The three Black students faced difficulties being a racial minority at their respective PWI. Students who were able to find communities felt a greater sense of belonging and had more positive

first-semester experiences. All of the students in the study felt overwhelmed by academic pressures. Students who had access to counseling at their college were able to improve their mental health with the help of their counselor and counseling center. Additionally, all of the students expressed that money and finances exacerbated existing stressors, particularly issues related to academics and social life.

Discussion

This study evaluated the mental health issues of six low-income, high-achieving undergraduate students during their first semester in college through a qualitative analysis of interviews and semiweekly audio-diary transcripts. Data were coded and organized to represent core categories that had the biggest impact on the six students' mental health. These categories were race, friends/community, academic stress, and experiences with counseling. Secondary core categories were mental illness, family, and money.

We found that community was the most important category for students' mental health. Students who were able to find friends, clubs, organizations, and communities had better mental health outcomes. Friends/community protected students from stressors and, overall, improved their first-semester experiences. For example, Tristan and Ceebee initially felt isolated, alienated, and lost because they were racial minority students at PWIs. Their overall mental health declined. However, for Tristan, feeling supported by his fraternity and, for Ceebee, being involved in the university's Black student publication significantly improved their mental health. In contrast, Daniel was not able to find a community, which caused his feelings of isolation and homesickness to worsen and his mental health to decline.

Students' experiences also showed that adults who served as mentors had a positive impact on the students' mental health. Tristan's counselor became a mentor and his "biggest support" while he faced a difficult first semester in college. Ceebee's only Black professor helped her become less alienated as a Black woman at a PWI. The instructor of Clara's stress and anxiety management class became a mentor and helped her reduce her anxiety over the course of the semester. Students who found adult mentors were able to have a smoother transition into college and felt supported on campus. Mentors served as a protective factor for mental health problems and helped students overcome mental health crises.

Three of the six students sought counseling services in their first semester of college. Both Tristan and Chinasa were easily able to obtain counseling services at their universities. Tristan's social support network connected him with a counselor, and Chinasa reached out to a counselor by herself. Chinasa was grateful that, unlike her high school, her college had the resources for counseling services. Counseling was readily available to Tristan and Chinasa, and having access to counseling was associated with a positive first-semester experience for them, despite their battles with mental illness. Clara was able

to go to counseling only once because of the wait times at her school's counseling office. Even though she was able to reduce her anxiety by using other resources at her college, she was not able to receive treatment and continued to feel stressed during her first semester. Students who were able to obtain treatment improved their mental health, found mentors, and felt supported. Thus, access to counseling served as an important factor that positively affected the students' mental health.

The experiences of these six students corroborate existing research on factors that promote low-income, first-generation, and racial minority students' success. For example, our findings support previous research indicating that adult mentors help students succeed both academically and socially (Guiffrida & Douthit, 2010; Wang, 2012). Furthermore, the experiences of the students in this study support previous literature on how involvement, engagement, and integration influence student success (DeBerard et al., 2004; Wolf-Wendel et al., 2009; Woosley & Shepler, 2011).

Directions for Future Research

This study was based on detailed qualitative experiences of six students. Additional research is needed to determine whether the core categories found among these six students can be generalized across low-income, high-achieving first-year students. In investigating these core categories, future researchers should use larger sample sizes as well as low-income, high-achieving students attending different kinds of institutions (e.g., small universities, private universities). Studies with larger samples and studies with quantitative and mixed-methods designs are needed to determine whether these core categories are nationally applicable for the focus population of this study.

Additionally, further research should investigate aspects of using audio diaries as a data collection method. Recording audio diaries helped students in this study to be open, vulnerable, and honest. Compared with their pre- and postintervention interviews, students were able to be more personal and emotional in their audio diaries. Students were able to create their own narratives and talk through their mental health issues more freely because of the anonymity provided by recording audio notes. Thus, audio diaries may be a more effective way to study people's thoughts, feelings, and emotions in that they may help researchers get a more honest and unfiltered look into people's narratives.

Implications for Practice

The students' experiences have significant implications for student affairs, college counseling, and the relationship between the two. Tristan ended up going to the counseling center through the help of his social support network. The series of events that led Tristan to counseling displays how peer support can help counseling center staff identify mental health problems in students. Tristan's experience shows that peers can be a less intimidating first step for

students to reach out for help. Administrators and college counseling centers can support students in monitoring and identifying their peers' mental health problems and teaching students when and how to reach out. First, counseling centers can engage in programming to teach students how to identify mental health issues in the community and reach out for help. For example, counseling center staff can teach students how to identify symptoms of the most common mental health issues in college, such as depression, anxiety, suicidality, and panic attacks (CCMH, 2019, p. 13), and teach students how to contact resources, including campus police, the suicide hotline, and emergency services. Similarly, counseling centers can engage in programming to educate professors, academic advisers, and other staff that students regularly interact with on how to monitor for mental health issues and how to contact resources. Second, counseling centers and administrators can collaboratively establish a clear line of communication for mental health crises. For example, colleges can create their own mental health crisis hotlines that students can call. These hotlines can refer the students to the counseling center or other resources.

With the increase in number of students seeking counseling services, many college counseling centers in the United States find that they are insufficiently staffed to accommodate the demand (Bushong, 2009). Clara's experience with her counseling center is a clear example of what can happen when counseling centers are understaffed. After experiencing a panic attack during a test, Clara had to wait 2 weeks to see someone from the counseling center. After her initial session, the center told her that she would need an additional session. By the time she completed her postintervention interview in her second semester, she had waited 2 months and was still waiting to hear back from the counseling center for a second appointment. Counseling centers may do several things to support students' mental health while students wait to be seen by a counselor. Centers should start thinking of counseling beyond the traditional 45-minute individual appointments because engaging only in individual sessions critically limits the resources of counseling centers. First, counseling centers should engage in programming and group therapy to reach more students at once. Counseling centers can specifically target stress and anxiety in their programming given that these are the biggest mental health concerns in colleges across the nation (CCMH, 2019). Second, counseling centers can train students to use existing resources to monitor and support their own mental health while they wait for their appointments. The counseling center at Clara's university recommended that she use the biofeedback lab to monitor her stress. Even though she was not able to obtain timely individual counseling at her university's counseling center, her overall experience with counseling was helpful because her center helped her access other resources on campus.

The experiences of the students in this study show that counseling centers play a big part in students' mental health. The counseling center was Chinasa's favorite place on campus. The counseling center at her university was a relaxed and friendly space where students could socialize and talk about

mental health. Transforming counseling centers into spaces where students can simply spend time would help students feel less intimidated by counseling. Counseling staff can be more present in students' lives by engaging in mental health programming, teaching seminars, and being visible on campus. Additionally, counseling centers can be more present on campus by collaborating with other centers on campus, such as the women's center, LGBTQ+ (lesbian, gay, bisexual, transgender, queer plus) center, and international student center. Chinasa's experience with counseling shows that by being more visible on campus, college counseling centers and staff can become more accessible and supportive.

Finally, this study found that recording audio diaries helped students in many ways. Over the course of their semester, students in the CPPS received two prompts per week to talk about their experiences. Students stated that recording these audio diaries helped them gain insight, reflect, and talk through their problems. Tristan said, "Doing these [audio diaries], I got to actually listen to how I felt yesterday or a week ago. Kind of reflect on exactly how things affected me." Similarly, Ceebee said, "I notice like the times when I might've been down and the times I might've been up and how it changed and what events happened that just helped changed and developed me." Ceebee also said that she was going to continue recording audio diaries after the study was over. The students' experiences with audio diaries show that audio diaries could be used as treatment by counseling centers. For example, if the center is insufficiently staffed and a student has to wait 2 months for another session, the counselor can ask them to record weekly 5-minute audio diaries, which could then be reviewed by the counselor for any immediate risk. Audio diaries can be helpful for students to reflect on their issues and gain insight when individual counseling is unavailable.

Limitations

This study has some limitations worth noting. First, although the sample of students was diverse in several ways, our qualitative findings are not generalizable to the larger low-income, high-achieving student population because of our small sample size ($N = 6$). As discussed previously, future researchers should replicate this study using a larger sample. Second, this study examined only the first-semester experiences of the six students. We do not know how these students are currently doing or whether they experienced any mental health problems later in college. College-reported enrollment data from the National Student Clearinghouse StudentTracker (<https://www.studentclearinghouse.org/colleges/studenttracker/>) indicated that all of the students were still enrolled after five semesters but that Daniel and Clara had transferred to other institutions. Finally, the fact that data in this study were gathered solely through self-report is a limitation. Despite the advantages of using audio diaries as a data collection method (see Directions for Future Research section), the participants in this study

might have exaggerated their responses or might not have shared the whole truth about their mental health struggles.

Final Thoughts

The experiences of the six students in this study show that the first semester of college is a complex period. These students experienced many of the challenges college students across the country face (CCMH, 2019, p. 13). However, because of the intersections of the many layers to their identity, the students in our study faced unique mental health challenges. These challenges intersected, combined, and collided with challenges related to race, money, academic preparedness, and previous mental illness, among others. Using Bronfenbrenner's (1979, 1993) ecological systems theory, our study showed that interactions between multiple systems create unique challenges that affect the mental health of low-income, high-achieving students. Universities and counseling centers need to understand these interactions and put programs and strategies in place to account for these interactions that contribute to mental health challenges faced by low-income, high-achieving students.

All six students in our study went through similar experiences during their first 4 months of college. Within 4 months, they struggled with their minority statuses in their schools, with the weight of their academics, with mental illnesses, and with money problems. In the same 4 months, they made new friends, discovered new passions, and became part of exciting communities. They had counselors, mentors, professors, and friends help with their struggles along the way. As the following quotation from Ceebee demonstrates, the transition to college can be positive even for students who face considerable mental health challenges:

I'm enjoying every second of it, even the hard parts. It's not easy and I don't suspect it's going to get any easier, but I will say that I've enjoyed it immensely and I've learned a lot about myself since I've been here.

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