

Project College Success

Survey Instrument

Instructions

Please complete the survey below.

Thank you!

Questions

1. Did you transfer from a Virginia community college to a 4-year college/university in Virginia?
 - Yes [Skip to Next Question]
 - No [Skip to End of Survey]
2. Which community college did you attend?
 - Richard Bland Community College
 - Blue Ridge Community College
 - Central Virginia Community College
 - Dabney S. Lancaster Community College
 - Danville Community College
 - Eastern Shore Community College
 - Germanna Community College
 - J. Sargeant Reynolds Community College
 - John Tyler Community College
 - Lord Fairfax Community College
 - Mountain Empire Community College
 - New River Community College
 - Northern Virginia Community College
 - Patrick Henry Community College
 - Paul D. Camp Community College
 - Piedmont Virginia Community College
 - Rappahannock Community College
 - Southside Virginia Community College
 - Southwest Virginia Community College
 - Thomas Nelson Community College
 - Tidewater Community College

- Virginia Highlands Community College
- Virginia Western Community College
- Wytheville Community College
- I transferred from a community college in another state
- Prefer not to answer

3. Do you currently experience any of the following? (Choose all that apply.)

- Feelings of worry, nervousness, or anxiety
- Feelings of sadness, depression, or hopelessness
- None of the above [Skip to End of Survey]

4. I first sought or received help for my mental health concerns:

- Prior to COVID shutdown (i.e., prior to March 2020)
- After COVID shutdown started (i.e., after March 2020)
- Have not sought or received help

5. How do you identify yourself?

- Woman
- Man
- Gender variant/non-binary
- Not listed
- Prefer not to answer

6. Which race/ethnicity best describes you? You may choose more than one.

- American Indian or Alaska Native
- Asian
- Black or African American
- Hispanic or Latino
- Native Hawaiian or Other Pacific Islander
- White/Caucasian
- Two or more races, ethnicities, or origins
- Not listed
- Prefer not to answer

7. Have you ever served in any branch of the US military (active duty, veteran, National Guard, or reserves)?

- Yes
- No

8. Are you the first generation in your family to attend college?

- Yes
- No
- Not sure

9. What is your age?

- 18-22
- 23-26
- 27-30
- 31-35
- 36-40
- 41-45
- 46-50
- 51-55
- 56-60
- 61-65
- Over 65

10. What is the 5-digit zip code of your home residence/permanent address (not your school zip code)?

11. Are you currently enrolled full-time or part-time?

- Full-time (enrolled in 12 or more credit hours per semester)
- Part-time (enrolled in fewer than 12 credit hours per semester)

12. When did you transfer to your 4-year college or university?

- Spring 2021
- Summer 2021
- Fall 2021

13. Thinking about all of the current demands in your life, please rate the extent to which each of the following has contributed to your anxiety, nervousness, depression or sadness:

	Doesn't contribute at all	Rarely contributes	Occasionally contributes	Very often contributes
Personal/Family life relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The health of a loved one	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food insecurity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homelessness/Housing insecurity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finding childcare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. When you were planning and in the process of transferring to a 4-year college or university, how concerned were you about the following aspects of the process?

	Not concerned at all	A little concerned	Somewhat concerned	Very concerned
Locating mental health counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning my way around campus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Making friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finding the Disability Support Services (DSS) office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finding wellness resources, such as relaxation, stress reduction, the gym, wellness centers, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Joining special interest groups or clubs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Making sure my credits transferred	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finding a place to live	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finding a job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Locating on-campus health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintaining my personal safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staying healthy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Not concerned at all	A little concerned	Somewhat concerned	Very concerned
Connecting with my academic advisor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Experiencing increased anxiety and depression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anticipating academic demands	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicating with professors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15. Once I transferred, I was able to:

	Not a concern	On my own	With help from a friend	With help from university/college faculty or staff member	Wasn't able to do
Locate mental health counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learn my way around campus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Make friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Find the Disability Support Services (DSS) office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Find wellness resources, such as relaxation, stress reduction, the gym, wellness centers, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Not a concern	On my own	With help from a friend	With help from university/college faculty or staff member	Wasn't able to do
Join special interest groups or clubs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Make sure my credits transferred	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Find a place to live	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Find a job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Locate campus health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintain my personal safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stay healthy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Connect with my academic advisor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reduce my anxiety and depression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fulfill academic demands	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicate with professors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16. How do you attend class?

- All of my classes are online
- All of my classes are in person

Hybrid (some classes are online, some are in person)

17. What is your work status?

Full-time

Part-time

Not currently working

18. Are you registered with the office for disability services on your campus as having a documented disability?

Yes

No

19. I know how to locate a campus resource to help with my mental health concerns.

Yes

No

20. My experience with connecting with someone on my campus was the following:

I connected and was able to locate mental health resources with their help

I connected and did not receive a response

I connected, but was not able to locate mental health resources with their help

Not applicable (did not connect or attempt to connect with someone)

22. Choose all of the following resources that you have accessed and that have helped reduce your mental health concerns:

- Disability Support Services
- Academic advisors
- Faculty members/instructors
- Career center
- Peer support groups
- Military Student Services
- Special interest groups (i.e., sports, hobby)
- Administrators
- CARE Team (Campus Assessment Response and Evaluation)
- Designated "safe" or quiet spaces
- Food pantry
- Referral to counseling in the community (outside of college)
- Mental health counselor
- Wellness-focused activities or resources

23. With the existing resources available at my college or university, I feel like my mental health needs are being met.

- Strongly Disagree
- Disagree
- Neither Agree nor Disagree
- Agree
- Strongly Agree

24. Which of the following virtual options would be helpful to you and your mental health moving forward, even after everyone comes back to campus in person? (Choose all that apply.)

- Virtual meetings to discuss mental health concerns
- Telehealth meetings with campus mental health counselors
- Virtual meetings to connect with other students through common interests, clubs, etc.
- Other

Thank you for your response!

You will be directed to Google Form that is not connected to this survey to provide your information for the gift card payment.