

**THE EXPERIENCES OF BLACK FEMALE POSTGRADUATE STUDENTS WITH  
MENTAL HEALTH DURING THE COVID-19 PANDEMIC, 2019-2021, THE CASE  
OF WITWATERSRAND UNIVERSITY.**

**A report on a research study presented to**

**The Department of Social Work School of Human and Community Development  
Faculty of Humanities University of the Witwatersrand**

**In partial fulfilment of the requirements for the degree Master of Arts in Social  
Development**

**by**

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**31 May 2024**

## DECLARATION

I hereby declare that this research report is my own original and unaided work, and that all sources used have been properly cited. Ethics protocol number is SW23/07/08. This research report has never been submitted before for a degree or examination.

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15/04/2024

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**Date**

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## **ABSTRACT**

The COVID-19 global pandemic has compelled institutions of higher education to transition to emergency remote learning, leading many postgraduate students, both nationally and internationally, to begin their studies online. Research has shown the need for universities to support the transition from undergraduate to postgraduate as this is a major transition into academia. Research has also revealed that the struggle with mental health has increased with this transition and additionally with the COVID-19 pandemic, however, there is a lack of research investigating the experiences of Black females in the academic space and their experiences with mental health. Thus, this study aims to understand the experiences of Black female postgraduate students with mental health during the spread of COVID-19, 2019-2021. The research approach used for this study was the qualitative approach as it was the most appropriate in seeking to understand the experiences of a unique group such as a Black female postgraduate. A case study design was employed, and the experiences shared were explored through the lens of the intersectionality theory and the research was grounded by the interpretivist paradigm. The sample was drawn from the population of students from Witwatersrand University and the sample consisted of eight (8) participants. The method of data collection was computer-mediated interviews which were interpreted using a five-phase thematic analysis. The participants' responses revealed that although all eight participants experienced challenges with their mental health sharing symptoms associated with anxiety, stress, depression, and loneliness, only two participants used the psychosocial services offered by the university. The reasons for not seeking help from the university psychosocial services included fear of the unknown, services feeling unreachable, stigma and fear of not being assisted immediately. The most shared reason for not seeking help however was participants not perceiving the need to seek help. Participants, therefore, opted for coping mechanisms such as sleeping, partying, and using substances and most participants turned to their spirituality. The study, therefore, made recommendations for campus psychosocial services to employ more mental health practitioners such that there is education about mental health and the services offered.

**Keywords:** Mental health, COVID-19, Black, female, postgraduate

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## **LIST OF ABBRIVIATIONS**

CCDU	Counselling and Career Development Unit
MDG	Millenium Development Goals
NSFAS	National Students Financial Aid Scheme
SACAP	South African College of Applies Psychology
SANCA	South African National Council in Alcoholism and Drug Dependence
SBWS	Strong Black Woman Schema
SDG	Sustainable Development Goals
UN	United Nations
WHO	World Health Organisation

# **CHAPTER ONE**

## **BACKGROUND AND ORIENTATION OF THE STUDY**

### **1.1 INTRODUCTION AND BACKGROUND OF THE STUDY**

Globally, mental health has escalated to an overwhelming level with dire consequences (Shuja, 2020). A study conducted by Dattani (2021) shows that approximately 792 million people in the world have experienced mental health challenges, this accounts for more than 10% of the world's population and during the COVID-19 period between 2019-2021 these numbers increased. The World Health Organisation (WHO) (2021) reported that measures such as lockdowns that were implemented throughout the world have affected the increased levels of stress, anxiety, depression, substance abuse and suicidal ideations.

Despite the devastating increase in mental health disorders in Africa, mental health is still stigmatised with minimal response and resources to address it, and this makes the problem have severe potential harm (Bird et al., 2011). A survey conducted by the WHO showed that about 24% of countries in the world did not have any standalone mental health policies and in Africa, the proportion rose to 46%, where there are 1.4 mental health practitioners per one hundred thousand people (Sankoh et al., 2018). Jorns-Presentati (2021) also highlighted that adolescents in low-and-middle-income countries are more affected by mental health because of poor mental health policies than those in high-income countries.

It is important to note that mental health in South Africa is complex due to the history of apartheid and the COVID-19 pandemic therefore adding to an already long-standing and pre-existing challenge. Mental health among the black population in South Africa has been linked to diverse factors some are repercussions of colonial apartheid (Kleintjes & Schneider, 2023). This initiated the colonial rule of the indigenous people of South Africa which was characterised by dispossession, oppression, and the segregation of Black people (Kleintjes & Schneider, 2023). This was then further solidified through the development of the apartheid regime. Through the inequalities facilitated by the apartheid laws amongst other things, there were inequalities in access to health care where White people got access to the best health care whilst Black people were given basic health care, which is arguably something that we still witness to date (Kleintjes & Schneider, 2023).

Despite mental health not being understood then as it is today the paper argues that by being removed from your land without consent, having to labour forcefully and being ruled by

oppressive laws the mental health of Black people was in a dire state (Kleintjes & Schneider, 2023). Due to the depth of this psychological trauma and the then poor focus on mental health, the consequence was that psychological trauma was passed down from generation to generation. The development of mental health facilities in South Africa progressed slowly and this may among other things be attributed to the poor understanding of mental health, stigmatisation and those with mental health disorders being viewed as people who needed to be isolated from society (Gills, 2012). With a poor progression in developing mental health facilities, the already existing facilities became overcrowded and unable to adequately service patients, which is something that we still witness in 2024.

Important to note that despite mental health affecting all people living in South Africa the core function and purpose of the apartheid was to segregate people, this further translated into access to mental health services meaning White psychiatric patients took precedence over Black psychiatric patients (Gills, 2012; Kleintjes & Schneider, 2023). This then accounts for the long-standing history of Black South Africans with unresolved generational mental conditions. To date mental health is understood very differently, encompassing a variation of mental health disorders with the most common being depression, anxiety and substance use disorder. A vlog written in the South African College of Applied Psychology (SACAP) showed that 1 in 6 South Africans suffer from depression anxiety and substance use disorder and only 27% with severe mental disorders were receiving treatment, with the COVID-19 these numbers were further exacerbated (The South African College of Applied Psychology, 2018).

Inclusive of the above-mentioned statistics is the student population which is arguably the most affected and vulnerable as they form part of the youth. The impact of mental health challenges among students is tied to so many other factors such as financial stress, interaction with the immediate environment, issues surrounding belonging in the university space and socioeconomic background (Limone & Toto, 2022; Richardson et al., 2017). South Africa's education system has evolved so much, with those who were previously excluded and denied access to institutions of higher learning because of their race now being included. Whilst education has become more accessible, challenges facing students still exist, particularly mental health challenges in previously disadvantaged groups.

Despite the need South Africa among other African countries is considered to have mental health as the least of their priorities within the health care system (Bird et al., 2011). More

than 50% of respondents shared feelings that mental health is still a low priority in South Africa despite its ramifications (Bird et al., 2011). Theoretically, the Department of Health has a potential plan that prioritises mental health, however, the plan has not been put into action (Bird et al., 2011). Additionally, eclectic literature highlights that one in six South Africans is experiencing common mental health challenges (Nguse & Wassenaar, 2020). Atypical changes associated with COVID-19 have exacerbated the mental health problem. The problem has been noted to be rocketing among students in institutions of higher learning where more than 30% of university students have confirmed that they experienced mental health problems in the past 12 months (Nkanyane, 2021).

Multiple factors played a role in impacting the mental health of students this included disconnectedness from lecturers, supervisors and other students, unemployment, the loss of family and friends, academic pressure and for many the loss of income (Nguse & Wassenaar, 2021; Nkanyane, 2021). When seeking to understand these multiple factors one cannot ignore the fact that race and gender play a significant role in how mental health is experienced especially in a country that has a rich history of inequality in education, health care and economic opportunities (Bantjes et al., 2020). In South Africa, although efforts were made to include all students in the switch to online learning, for some Black students who were previously disadvantaged this only meant further marginalisation (Munyoro & Dube, 2020).

Moreover, some students encountered challenges not only related to being Black but also to being female. Gender norms play a significant role in how one would not only experience online learning but also how they would experience mental health, where stereotypes such as the Strong Black Woman Schema are ascribed to females thus uniquely shaping their experiences (Caesar-Richardson, 2012; Donovan & West, 2015). Therefore, the above forms the basis of this study that empirically aimed to explore the experiences of Black female postgraduate students with mental health during the COVID-19 pandemic 2019-2021.

## **1.2 STATEMENT OF PROBLEM AND RATIONALE OF THE STUDY**

The higher education period is crucial when looking at the aspect of mental health because it is a period that is associated with significant psychosocial changes (Wadder & Aminabhavi, 2013). From 2019 to 2021, the changes brought by the COVID-19 pandemic have further facilitated the increase of mental health challenges globally (Cullen, 2020; Gavin, 2020; Pfefferbaum & North, 2020). In South Africa, the challenges associated with mental health were at their peak, more especially among students in institutions of higher learning (Eloff &

Grabam, 2020). Visser and Law-van Wyk (2021) found that 45.6% of 5074 students have experienced anxiety and 35,05% have had depression. The changes associated with COVID-19 compelled institutions of higher learning to adopt synchronous and asynchronous learning which has been found challenging for new postgraduate students (Motala & Menon, 2020).

Postgraduate students experienced a big change in the method of learning and educational requirements, especially where research is concerned forcing them to adapt in such a short period (Potra et al., 2021). Online learning and distance learning have long been linked with high dropout rates due to isolation and disconnectedness where the lack of interaction leads to a loss of motivation to work (Potra et al., 2021). One of the biggest challenges with transitioning from undergraduate to postgraduate is balancing the workload, adjusting socially, and dealing with mental health challenges (Abuhmaidan & Al-Majali, 2020).

Often neglected in the context of South Africa is the intersectionality between mental health, race, and gender, which are critical determinants of mental health because they determine the power and control that one has to deal with the causes of their mental health (Waddar & Mahadevi, 2013). Additionally, females are more susceptible and exposed to facing mental health challenges and challenges with race and gender which further increases this susceptibility (Waddar & Mahadevi, 2013). In an attempt to contextualise the study within the COVID-19 pandemic and online learning, aspects of race and gender should not be neglected as they shape these experiences. Hence, this research explored the experiences of Black female postgraduate students with mental health during the spread of COVID-19.

### **1.3 RESEARCH QUESTION**

What are the experiences of Black female postgraduate students with mental health during the spread of the COVID-19, 2019-2021?

### **1.4 AIM(S) & OBJECTIVES**

#### **Broader aim:**

To explore the experiences of Black female postgraduate students with mental health during the spread of COVID-19, 2019-2021.

#### **Objectives:**

- To establish the impact of mental health challenges associated with COVID-19 on the academic progress of Black female postgraduate students from 2019-2021.

- To explore the coping mechanisms of Black female postgraduate students with mental health challenges during the COVID-19 period 2019-2021.
- To establish how race and gender shape the experiences of mental health among postgraduate students during the COVID-19 period.
- To explore the psychosocial interventions that were put in place by the institutions of higher learning to support Black female postgraduate students with mental health challenges.

## **1.5 DEFINITION OF CONCEPTS**

### **1.5.1 Mental health**

A state of well-being in which the individual realises his or her abilities, can cope with the normal stresses of life, can work productively and fruitfully, and can contribute to their community (World Health Organisation, 2004). In addition to the definition the World Health Organisation (WHO) argues that mental health should not be merely understood as the absence of mental illness but rather as a fundamental aspect of health (WHO, 2004). Mental health is also how the emotional, psychological, and social well-being of an individual affects the way they think, feel and act, however, this definition can further add to the stigmatisation of people living with mental illness as being incompetent and unable to think for themselves (MentalHealth.gov, 2022). The study, therefore, adopted the WHO definition.

### **1.5.2 Coronavirus (COVID-19)**

A respiratory disease caused by the SARS-CoV-2 virus which emerged in December 2019 (John Hopkins Medicine, 2022). The virus can affect both the upper and lower respiratory tract and manifests itself in flu like symptoms such as fevers, sore throat, shortness of breath, muscle aches and headaches (John Hopkins Medicine, 2022). The disease is transferred through droplets and virus particles which are spread when an infected person does anything that releases droplets into the air such as talking, sneezing, or breathing (John Hopkins Medicine, 2022). For the purposes of this study, this definition will be adopted and referred to as "COVID-19" throughout the paper.

### **1.5.3 Coping mechanism**

Strategies that are used to internal or externally manage stress through behaving and thinking in a certain way (Doumit, 2012). Coping is composed of four main categories, problem-focused, which is concerned with addressing the main cause of stress, secondly emotion-



focused which is aimed at dealing with the negative emotions (Folkman & Moskowitz, 2004). Thirdly meaning-focused which involves finding reason and lastly social coping which involves seeking support from family, friends, and the community (Folkman & Moskowitz, 2004). The study, therefore, adopted the definition by Doumit (2012) taking into consideration the four main categories adopted by Folkman & Moskowitz (2004).

#### 1.5.4 Psychosocial support

The term psychosocial refers to the complex relationship between the psychological and social dimensions in a person's life (Cardozo, 2008). Therefore, psychosocial support refers to actions which are put in place to address the psychological and social needs of people (Stankovska et al., 2020). These actions may be both preventative and curative depending on the needs, resources, and impact of the psychosocial problems (Cardozo, 2008). The study, therefore, adopted the definition by Stankovska et al (2020).

#### 1.5.5 Black

A racial identity ascribed by the Apartheid government to native South Africans who were previously oppressed and segregated by the Apartheid government (MacDonald, 2006). This definition was adopted because it places attention to cultural and historical contexts and acknowledges the diversity within the group, which is essential for meaningful and respectful analysis.

#### 1.5.6 Postgraduate

A type of qualification which is studied after a student has completed their undergraduate degree usually in the form of a master's degree, post graduate diploma or certificate and PhD (Finetti, 2022).

### **1.6 OVERVIEW OF THE RESEARCH DESIGN AND METHODOLOGY**

The study adopted a qualitative approach which is explanatory and descriptive in nature. All eight participants were from the University of the Witwatersrand postgraduate population. A snowballing sampling technique was used to recruit participants. The research instrument used was an interview schedule administered through Microsoft Teams. The findings from the study were analysed through a five-phase thematic analysis.

### **1.7 LIMITATIONS AND DE-LIMITATIONS OF THE STUDY**

Limitations refer to the occurrences which are out of the researcher's control but can impact the research study, the results and conclusion (Simon & Goes, 2013; Theofanidis &

Fountouki, 2018). Delimitations which refer to boundaries and limits set by the researcher in order to make the study goals and objectives more attainable and decrease the impact of the delimitations (Theofanidis & Fountouki, 2018).

- A limitation to the study was that the researcher was not able to see the participants as she would have been able to in face-to-face interviews and this was due to participants staying far apart from one another and the anxiety around the spread of the Corona Virus. This limited the ability of the researcher to see the participants body language and facial expressions. The researcher used interviewing skills such as active listening and listening for vocal non-verbal cues such as breathing and change in tone to capture what the participant is saying.
- The limitation was that the study used computer mediated interviews which excluded the students who did not have technological devices despite meeting the study criteria. A delimitation was that the study criteria catered to university students who were already learning online, familiar with the use of Microsoft Teams and got university data.
- The third limitation of the study was that not all faculties were represented, most people willing to participate were bias to the researchers reach. A delimitation was the study was not concerned with the faculty but rather focused on the race and gender of the participants and all the participants were black and female. The researcher was able to gather enough information through probing until saturation was reached with the faculties which were represented.

## **1.8 RESEARCH REPORT OUTLINE**

Chapter one provides an introduction and background of the study, the goals and objectives and the limitations of the study. Chapter two focuses on the literature review and the theoretical framework which guided the study. Chapter Three explores the research methodology and design. Chapter four presents the findings and analysis of the study and lastly chapter five is a summary of the main findings, conclusions and recommendations for future studies, policy development and mental health practices.

## **CHAPTER TWO**

### **LITERATURE REVIEW AND THEORITICAL FRAMEWORK**

#### **2.1 INTRODUCTION**

This section presents an extensive literature review of mental health issues in institutions of higher learning, and the role of race and gender in shaping these experiences. The second part of this section is the theoretical framework underpinning the study which is the intersectionality theory. The section explores the intersectionality theory in depth through the exploration of the origins of the theory, advantages of using the theory, the critiques pointed out by other authors, and how the study counteracted these critiques.

#### **2.2 LITERATURE REVIEW**

##### **2.2.1 Impact of gender and race on mental health experiences**

Diverse literature shows that Black women all over the world face a double discrimination based on their race and gender (Beal, 2008; Okoro et al., 2020). The term double jeopardy was coined by a Black feminist who realised that Black women simultaneously experience sexism and racism (Beal, 2008). Beal (2008) argues that due to the history of discrimination against Black people, particularly the exclusion from economic activities, had resulted in multiple psychological challenges in Black households associated with poverty.

In South Africa, it had been found that the apartheid regime which was aimed at segregating the Black majority group from the white minority through systems of oppression, had further marginalised Black women (Gills, 2012). In retrospect the double jeopardy discussed in the previous paragraph of this paper argues that Black women in South Africa as a result of apartheid had faced racism, sexism, and social exclusion. Attached to social exclusion was the restriction of movement without a pass which is an identity document (UNESCO, 2020). This was known as the Pass Law which actively restricted people of colour from being outside of their designated areas without a pass even if it was to seek employment opportunities and for those who were employed, they would lose their jobs should they fail to renew their pass in time (UNESCO, 2020).

As a result of the Pass Laws, most Black people were excluded from economic activities because most economic activities took place in the predominantly white areas. This led to the poverty which is deeply entrenched, and passed down through generations of Black families (Tshishonga, 2021). In response to the Pass Laws act, more than twenty thousand

women advocated against carrying passes, and among other reasons was the fact that this would allow for them to attain jobs as domestic workers in the white areas to help provide for their families (Tshishonga, 2021). Even with these efforts by Black women to infiltrate the economy, and later even having the ability to occupy professional jobs in teaching and nursing, systemic powers still put the Black women at the bottom of the food chain.

In a report compiled by the World Bank, it was found that South Africa is the most unequal country in the world, with only 1% of the population owning 70.9% of the wealth in the country whilst the bottom 60% of the population only owned 7% of the wealth (World Bank 2022). The report showed that groups which were most affected by the inequalities included Black South Africans, females, and those who are unemployed, further proving the concept of double jeopardy (World Bank, 2022). The paper further argues that based on the findings in the report and the history of apartheid, race determines class for most South Africans. The intersectionality between race, gender and class thus shapes the experiences of Black females with mental health uniquely.

In a comparative study conducted among Black women and white women`s mental health the results yielded that white women had a significantly higher prevalence of anxiety than Black women however, Black women had a higher prevalence of depression even though it was by a small margin (Alur-Gupta, 2021). The study suggested that the reasons Black women reported significantly lower levels of anxiety is because Black women have a greater resilience to stressors, bigger support systems and depend on spirituality (Alur-Gupta, 2021; Himle, 2009). In addition, this paper argues that Black women were taught to be strong and as a result fail to perceive challenges associated with their mental health.

The Strong Black Woman Schema (SBWS) refers to the societal and cultural expectation placed on Black women to show characteristics of emotional strength and take care of others whilst facing adversity (Abrams et al., 2014; Castelin & White, 2022). The SBWS is achieved consciously and subconsciously through suppressing and belittling ones emotional, physical, and psychological needs in order to meet the needs of other people such as family, work, and society (Abrams et al., 2014; Woods-Giscombe & Lobel, 2008). According to Collins (2000) at the core of the SBWS are controlling images which are expectations that are placed on Black women to normalise injustices and adversities in order to bring satisfaction to their white superiors.

The SBWS is still present to date as it has been passed down from generation to generation of Black women some even argue that it has greatly contributed to their resilience, upkeep of their communities, positive self-concept, and overall survival (Abrams et al., 2014; Woods-Giscombe & Lobel, 2008). On the contrary multiple authors have raised concerns about the implication of the SBWS on mental health, arguing that the adaptation of the SBWS may lead to possible psychological harm (Beauboeuf-Lafontant, 2007; Black & Peacock, 2011). A Black 25-year-old Canadian woman shared in one study that she grew up with the perception that depression is for white people and as a result internalised the idea that Black women have to be strong (Chatelaine, 2018).

The disparities in mental health services also contribute significantly to Black women seeking help with their mental health, and these disparities were further worsened by the COVID-19 pandemic (Thomeer et al., 2023). A study investigating the racial and ethnic disparities found that Black, Hispanic, and Asian adults' mental health declined significantly during the COVID-19 pandemic in comparison to the White participants (Thomeer et al., 2023). The study also found that more White participants had access to mental health services, and sought out professional help more than Black participants (Thomeer et al., 2023). This paper, therefore, aims to study particularly the experiences of Black females in order to inform policy and decrease disparities in mental health services.

### **2.2.2 Prevalence of mental health among students in the institutions of higher learning.**

Diverse literature shows that mental health challenges within institutions of higher learning have always been an issue, and the COVID-19 pandemic has played a significant role in worsening the problem (Visser & Law-van Wyk, 2021). These mental health issues include depression, anxiety, eating disorders, and substance use disorders among others (Abuhmaidan & Al-Majali, 2020). In a study conducted by the WHO World Mental Health International College Student project 35% of 13,984 full-time students reported to having experienced common mental health challenges in their lifetime, and 32% reported experiencing mental health challenges within the last 12 months (Auerbach et al., 2018). Although the study was conducted before the spread of COVID-19, other challenges associated with the spread could have further exacerbated these mental health challenges. Challenges such as the pressure of meeting academic requirements despite a new way of learning, losing family and friends, and for some the threat of hunger as a result of poverty could have further exacerbated the issue (Cao et al., 2020; Munyoro & Dube, 2021).

A comparative study conducted by Eloff and Graham (2020) at the beginning, and end of 2019 academic year showed a significant decline in mental health and wellbeing meaning by the end of the year most participants had greater challenges with their mental health. The study found that the second group of student participants had a decline in their emotional, psychological, and social wellbeing (Eloff & Graham, 2020). It is important to note is that these factors were prevalent even before COVID-19 was widespread in South Africa, and the study was conducted with undergraduate students. Therefore, although postgraduate students may be able to better support their well-being, there are other factors which could have further contributed to the decline of their mental health.

The quick closure of institutions of higher learning globally led to students feeling insecure regarding their studies, and as a result this led to increased levels of anxiety, stress, and depression (Elmer et al., 2020; Spreing, 2019). Prowse et al (2019) urges that it is important to recognise that students were also transitioning into adulthood, and that the transition in itself can cause multiple challenges with mental health which could have only become more complex living through a pandemic. Although, institutions of higher learning have put in place multiple intervention strategies, the challenge is that the demand exceeds the capacity of institutions, often leading to ineffective interventions (Auerbach et al., 2018; Eloff & Graham, 2020).

### **2.2.3 Impact of mental health on academic performance**

The escalating problem of mental health among students inside the institutions of higher learning has been found affecting their academic performance (Breslau et al., 2008; Son et al., 2020). Son (2020) highlights that mental health is the leading impediment to academic success, and degree completion of the students. Son (2020) is of the view that mental health affects the motivation of students, concentration, and their ability to interact socially all of which are essential contributors of academic success. A study conducted by Bantjes et al., (2020) to investigate the stressors of students, indicated that the most prevalent stressor was academic performance, 75.8% of participants reported having academic performance related stressors. The second highest was financial stress with 73.5% of students relating to this stressor. The study by Bantjes (2020) points out that student`s biggest stressor is academic performance which puts into perspective the findings of Son`s (2020) study.

Anxiety and depression are the most studied, and leading mental health issues which contribute to the distraction in academic performance where 15% of student`s self-reported to

the American College Health Association to having been diagnosed with both anxiety and depression (Lade et al., 2021; VanderLind, 2017). Similarly, the study conducted by Son (2020) found that 62.7% of 82, 685 students who took the Counselling Centre Assessment for Psychological Symptoms were struggling with anxiety.

The COVID-19 pandemic has brought about numerous changes to education systems all over the world and compelled emergency remote learning (Ali, 2020; Heltne et al., 2020; Mhlanga & Moloi, 2020; Mpungose, 2020; Nkanyane, 2020). The switch to online learning resulted in an overwhelming workload as most universities and colleges were trying to make up for the time they had lost. In cognisance of the above, when universities opened students had to figure out ways in which they could catch up in efforts to try save the academic year (Fawaz et al., 2021; Sahu, 2020). In addition, part of most post graduate course requirements is the expectation to conduct research and with the change to remote learning methods of research had to be altered thus prolonging some post graduate studies.

This adjustment has resulted in students experiencing increased anxiety around the methods of assessment which would be used to make up for their exam (Fawaz et al., 2021; Sahu, 2020). This is because with every course there is a particular method of testing which students become accustomed to, however, in an effort to mitigate cheating because of the lack of supervision while conducting assignments and exams, some courses had to change their method of examining students, further adding to the anxiety. In addition, the anxiety was also caused by possibility of technological challenges and network connections failing during these online assessments (Fawaz et al., 2021; Sahu, 2020).

#### **2.2.4 Impact of mental health on suicides among students**

According to the WHO 700 000 people commit suicide every year and mental health is one of the leading causes. Mental health has facilitated high numbers of deaths among young people between the ages of 15-29 years, and inclusive of this age group are students in institutions of higher learning who are considered as a vulnerable population (WHO, 2021). In South Africa, the reported successful suicides are 23.5 per 100 000 people which means there is about 14 000 suicide related deaths per annum (WHO, 2019). There is no data available for the number of suicide attempts per se however, based on the estimation that for every 1 successful suicide there is 20 attempts this puts the number of suicide attempts at 280 000 per year and this number could be higher (WHO, 2019).

There are multiple causes of suicide however, depression and hopelessness are some of the leading causes in youth (Meel, 2009). In low- and middle-income countries, the depression and hopelessness are unique because it is caused by issues of poverty, joblessness, and the spread of disease with poor health response (Meel, 2009). Students all over the world are more susceptible to suicide or suicidal thoughts due to experiencing multiple mental health problems (Abuhmaidan & Al-Majali, 2020; Pillay et al., 2020). These mental health problems are associated with the stress of transitioning from undergrad to postgrad and the loneliness that comes with adjusting to being away from home and from primary caregivers, and the pressure of fitting in among other things (Abuhmaidan & Al-Majali, 2020; Lee, 2013; Pillay et al., 2020). The COVID-19 pandemic has intensified the causes mentioned because it has increased poverty, job loss and the burden on the health care system therefore, it could be deduced that suicidal thoughts have increased among university students (Joska, 2020; Kim, 2020; Posel, 2021).

A study conducted among college students in South Africa investigating suicide produced results that there was a 16% prevalence of attempted suicides in the lifetime of the participants (Alabi, 2022). The main method of attempting suicide was overdosing on medicine followed by self-harm through cutting (Alabi, 2022). Pointing to the interest of this research report is the fact that there were reportedly more suicides among females than males and this could perhaps be attributed to the fact that more females than males reported being sexually abused, bullied, and had challenges with body image (Alabi, 2022). The relationship between suicide attempts and gender has been noted in several other studies hence the importance of studying the experiences of post graduate female students with mental health (Alabi, 2022; Khuzwayo et al., 2018).

### **2.2.5 Coping mechanisms for mental health among students in the institutions of higher learning**

COVID-19 compelled international and national institutions of higher learning to make rapid changes in their education system and switch to remote learning (Mhlanga & Moloi, 2020). This meant that students who were starting their postgraduate in the years 2019 and 2020 would begin their studies learning online. In response to the changes associated with COVID-19, modus operandi for mental health interventions also changed. In addition, some students struggled to access interventions.



Students have not been passive to this whole transition; they have actively found methods to cope. The research study conducted in Poland among 17 universities has shown inter alia that acceptance, planning, and seeking emotional support were the more prevalent methods of coping mechanisms employed by students (Babicka-Wirkus et al., 2021; Son, 2020). Coping mechanisms are highly influenced by the support of family, friends, and the community (Fawa et al., 2020; Babicka-Wirkus et al., 2021). The results above show the role of the micro system as being particularly important to the students coping with the impact of the COVID-19 pandemic which according to the ecological systems perspective is the closest to the individual. Proximity played a crucial role in students seeking support from family as due to the physical restriction students were stuck with their families, while their fellow students could have potentially had other coping mechanisms.

In a study conducted in 2021 among 275 students in Brazil, internet use was essential to the coping strategies associated with escaping the real world, and avoiding their mental health challenges (Mota et al., 2021). Based on the knowledge that not all students in South Africa had smart electronic devices and internet access especially during the COVID-19 pandemic this method of coping might have not been as prevalent in South Africa. Other coping strategies at a micro level included withdrawal, self-control, acceptance of responsibilities, confrontation, problem solving, and positive appraisal (Lade et al., 2021; Mota et al., 2021). In exploring coping mechanisms, it is important to interrogate whether a coping mechanism is healthy or unhealthy as some coping mechanisms when done without moderation such as substance use, and sexual activity could lead to students hurting themselves.

Although the studies were conducted four (4) years apart, one within the context of the COVID-19 pandemic and one outside of the COVID-19 pandemic, it is notable that there are some commonalities in coping strategies. In both studies the participants reported the importance of seeking social support however, in the context of the study conducted by Mota et al. (2021) social support took the form of digital socialising. This points to the idea that students do not exist in isolation, and that their support system plays a crucial role in their academic success, however it is arguable that the COVID-19 pandemic could have also compromised that support system due to the multiple rapid deaths associated with being infected with COVID-19.

### **2.2.6 The role of family in the mental health of students**

According to Hudson and Rapee (2005) family is one of the most important factors to consider when investigating mental health experiences because an impaired family system could result in increased mental health challenges not just within the student`s lives but also among other family members. The rapid spread of the COVID-19 outbreak put institutions of higher learning all over the world in a compromising position where most institutions were forced to implement social distancing measures which led to students having to move back home to their families.

In an effort to save the academic year through online learning the inequalities among students were overlooked, forcing students to return to dysfunctional families, crowded households, abusive homes, and poverty-stricken homes among other challenges (Liu et al.,2023). These extended periods of isolation meant more time spent with family and for some students this was the longest time which they had ever spent with their families.

In a study conducted by Liu et al (2023) to investigate the state of college student`s mental health across 22 colleges, students were provided with four surveys to complete accounting for their mental health, during their break, twice during the lockdown with online learning, and lastly when colleges reopened. For the purposes of this report the researcher explored the results of family functioning, and mental health respectively. The study showed that students from severely dysfunctional homes had higher levels of depression and anxiety than those living within highly functional and moderately functional homes (Liu et al., 2023). Additionally, it was found that there was an increase in depression rates from 33.87% to 43.53%, and an increase in anxiety rates from 17.45% to 22.50% during the lockdown period (Liu et al., 2023).

Even though studies have shown that family plays a crucial role in mental health experiences, coming from a highly functional family does not automatically guarantee better mental health experiences than those coming from highly dysfunctional families. Needless to say, that most studies which investigated the role of family neglected the South African context where families could range from nuclear families to multigenerational families. Where other factors such as poverty, inequality, and socio-economic background shape family dynamics.

### **2.2.7 Challenges associated with online learning.**

More than 160 countries were forced to temporarily close institutions of learning to curb the spread of COVID-19, leaving more than 1.6 billion children and young adults without schooling (Hedding et al., 2021). In an effort to save the academic year institutions of higher learning all over the world had to switch to online learning. For African countries in particular this meant a drastic, unfamiliar, sudden change in learning (Aboagye et al., 2020; Dube, 2020). A change which further exacerbated the inequalities facing students (Aboagye et al., 2020; Dube, 2020).

Institutions of higher learning in South Africa have become more inclusive regardless of socio-economic background, however it is understood that those from disadvantaged backgrounds find it difficult to navigate the university space due to issues of funding, housing, food, and the often neglected digital divide. The rapid change to online learning meant that students had to make use of a wide range of digital devices such as smartphones, computers, television, radio and most of these devices are dependent on a good internet connection (Mhlanga, 2021).

The change to online learning led to students in rural areas facing unprecedented challenges in an effort to adjust to online learning. These challenges included unavailability of network which is essential, the shortage and/or lack of smart electronic devices, the closure of internet cafes due to restrictions on business, the lack of computer skills and high data costs (Dube, 2020; Hart et al., 2021; Kuntz & Manokore, 2022). Although these studies were conducted with high school learners and institutions of higher learning did make efforts in providing data and loaning out devices it does not take away from the exclusion that some students face due to an already existing digital divide in South Africa (Dube, 2020; Mhlanga, 2021).

Online learning together with movement restrictions have meant that not only are students now having to adapt to learning online, but they are also restricted to learning online within their home. Some additional challenges associated with this dynamic include having to care for family members who were infected by the virus, having to parent and help with home schooling for children, balancing work and studies, and for some fulfilling household chores (Blankstein et al., 2020). The learning within itself also presented challenges as the classroom engagements had decreased both from a student to student and from teacher to student perspective (Chimbo et al., 2023).

In a study conducted by Chimbo et al. (2023) with honours students from various courses three main categories were explored by the study namely, teaching presence, cognitive presences, and social presences. 10 out of 30 students mentioned that teaching presence was a challenge because some lectures were presented through videos without the lecturer being present online, and even after having submitted assignments to be marked the response time would be long and without significant feedback (Chimbo et al., 2023). This points to the simultaneous and similar challenges which staff and students faced.

The second category of cognitive presence, the students reported that the course content became increasingly hard in order to compensate for everything being an open book exam, however this resulted in complicated content with complex question and unclear instructions as to what exactly is required (Chimbo et al., 2023). This contributed to feelings of anxiety and fear around completing assignments and tests. Lastly online learning also presented some challenges in terms of social presences, where virtual interactions and discussions between students and the teachers were limited, and cameras were off in an effort to save data and not interrupt the connection (Chimbo et al., 2023). Unique to postgraduate students whom the study focuses on was the need to conduct research as a requirement to obtain their postgraduate degree.

### **2.2.8 Conducting research during COVID-19 pandemic**

This research study takes a particular interest in the postgraduate population as these are students who are essential to the contribution of academic research yet insufficient research explores their experiences around conducting research during the COVID-19 pandemic. The spread of COVID-19 and the restrictions which came along with it forced postgraduate students to make alterations to how their research was conducted, challenged the methods used to gain participants and compromised the validity of most research studies (Dinis-Oliveira, 2020; Mudzi & Mudzi, 2022). Due to the restrictions in physical movement and gatherings, most research studies had to be conducted through the use of various online platforms such as Microsoft Teams, Zoom, and WhatsApp (Mudzi & Mudzi, 2022). Some also had to change their research method of data collection to surveys (Mudzi & Mudzi, 2022).

Physical restrictions to research meant that researchers were deprived of immersing themselves within the participant's context, and not only that but it presented with it difficulty for researchers to read nonverbal cues which are crucial to probing (Park et al., 2021).

Furthermore, challenges of data, connectivity, and having the correct software meant that technologically disadvantaged groups were automatically excluded (Park et al., 2021). This research paper, however argues that the researcher not having been exposed to the participant's environment could have decreased any bias in the research study.

Quantitative methods of research were also challenged by these restrictions as multiple clinical trials which were registered in medical research had questionable methodologies and results (Park et al., 2021). Burgees et al., (2023) argues that research ethics committees were under a lot of pressure as they needed to carefully consider risks and ethics and grant permission timeously as the Corona Virus was rapidly spreading. This could have led to a compromise in ethics and validity of studies. In this study however, had less pressure as a significant amount of time was spent collecting and analysing data as the study explored past experiences .

### **2.2.9 Sustainable development goals and mental health**

The relevance of investigating mental health in a social development postgraduate degree might be questionable, however, this section aims to bring an understanding of the importance of prioritising mental health in achieving social development. The Sustainable Development Goals (SDGs) were developed in 2015 under the agenda of a 2030 roadmap towards ending poverty and inequality globally whilst protecting the planet by the year 2030 (Jayasooria & Yi, 2023). This was following the Millennium Development Goals (MDGs) for 2000-2015 which focused on achieving eight goals, however, after evaluating the goals the conclusion was that the goals were more achievable in developed countries than developing countries (Jayasooria & Yi, 2023).

The SDGs are made of 17 goals, however the most relevant to this study is sustainable development goal three which is to promote good health and wellbeing. The primary focus under SDG three is achieving mental health through working preventatively towards treating substance abuse as it is one of the key factors affecting mental health (SDGs, 2019; WHO, 2017). In high income countries there is a link between depression and alcohol abuse and it is known that drug usage increases mental health conditions which could result in suicides (SDGs, 2019; WHO, 2017). According to Pillay (2019) one in six South Africans suffer from a substance use disorder and simultaneously struggle with other mental disorders.

In addition to tackling substance use, SDG three focuses on the importance of regulating tobacco as this is a substance which is used twice as much among people with mental health conditions, therefore, by regulating tobacco, there will be an improvement in mental health (WHO, 2017). A study conducted among high school learners who were already receiving treatment from the South African National Council on Alcoholism and Drug Dependence (SANCA) after concerns were raised about substance use in high schools the study discovered that the substances most abused by learners were cigarettes followed by marijuana and alcohol (Nzama & Ajani, 2021). Results such as the ones found in the mentioned study raise concerns about access to substances and further pushes the need to regulate trade and to work preventatively in order to achieve sustainable development goal three.

The link between physical health and mental health is one that is undeniable, studies found that people who are living with conditions such as obesity, cancer and diabetes also struggle with mental health conditions and this can be attributed to the stigma around these conditions, poor quality of life and discrimination (United Nations, 2017). To address mental health would therefore, mean to prevent illnesses through working proactively to detect early signs and educate people about prevention, symptoms, and treatment (WHO, 2017). This need therefore, trickles down into the need to ensure that everyone has equal access to quality mental health treatment. In a World Mental Health Survey conducted by WHO, it was found that in high income countries one in five people have access to mental health treatment for depressive disorder (Freeman, 2022). However, shockingly is that in middle- and low-income countries only one in twenty seven people had access to mental health treatment for depressive disorder (Freeman, 2022).

The need for an inclusive and participatory move towards addressing mental health is essential such that no one is left behind. People living with mental health conditions are usually stigmatised and isolated making it difficult to seek help therefore, there is a need to protect those groups and one way to do so is through strengthening policy (WHO, 2017). It is important that policymakers take into consideration the multiple intersectionalities which influence and shape mental health such as race, gender, age, nationality, and ability hence the purpose of this study. Global target 1.1 for mental health is for 80% of countries to develop and update their mental health policy and global target 1.2 is for countries to update their laws to support these policy updates (WHO, 2017). The COVID-19 pandemic in South Africa left the country in a spiral regarding mental health care because the Mental Health Care Act

17 of 2002 had expired and also did not have a directive as to how to manage a pandemic. Hence the need for such studies to inform policy and drive Social Development.

### **2.2.10 Mental health policy in South Africa**

Among most research studies associated with mental health in South Africa the common frustration was the fact that South Africa had no mental health policy as it had expired in 2020. Mental health problems represent a significant portion to the burden of disease globally. In high economic countries one in four to five young people suffer from mental health disorders, however, there is not sufficient literature on the burden of disease in low- and middle-income countries especially Africa (Baranne & Falissard, 2018; Patel et al., 2007).

The Mental Health Care Act 17 of 2002 has been South Africa's guiding policy when it comes the direction of mental health treatment in South Africa. The act is considered the first post-apartheid mental health act, and its main focus was to include the previously excluded Black majority group and to provide structure and direction for mental health practitioners and service users (South African Government, 2002). This act prohibits the exclusion of Black or disabled people from receiving treatment based on the premise that mental health is health and that everyone has the right to quality health (South African Government, 2002). Due to the strain on the tertiary healthcare system this act introduced the implementation of psychiatric care at secondary and primary health care level in order to reach more people and decrease the burden of disease on tertiary hospitals (South African Government, 2002). Whilst a good idea, the paper argues that mental health care still remains inaccessible for most because primary health care facilities are overcrowded and the ratio of mental health practitioner to patient is still great, furthermore some in remote areas are still unable to access a primary health care facility.

On 24-26 April 2023 the long awaited national mental health policy framework and strategic plan 2023-2030 was presented at the South Africa Mental Health Conference and some of the key challenges pointed out by attendees was the frustration with the fact that the previous mental health policy had expired in 2020 at a time when it was needed the most (Molelekwa, 2023). The policy, although it was well written as with the previous one, the challenge still remains the poor implementation associated with the lack of resources. Points raised from the conference was the lack of psychiatrists in the public sector for example in the Northern Cape there are only three psychiatrist (Molelekwa, 2023)

Closely associated with the need for treatment professionals there is also a lack of funding because most psychiatrist tend to move to the private sector in efforts to make more income. Whilst there is a need to overcompensate for years when there was no implementation, the health budget for 2023 was reduced and as a result the mental health budget was also affected (Molelekwa, 2023). To however, put all the financial responsibility on the department of health would result in poor implementation once again due to funds running out, this paper therefore suggests that there should be a collaboration with other departments such as the department of social development, education and correctional services to name a few in order to meet the demand for mental health services.

### **2.3 THEORITICAL FRAMEWORK**

This study is grounded by the intersectionality theory. This theory was developed by a group of feminist scholars from the United States of America who challenged the notion that gender is experience the same by all women and argued that Black women`s experience are not only shaped by their gender but also by their class and race (Collins et al., 2019). The Intersectionality theory refers to a framework of understanding that there are multiple social identities such as race, class, socio-economic status, and disability at a micro level which shape one`s interaction with systems of power and oppression at a macro level and thus impacting and shaping their individual experiences (Bowleg, 2012).

The intersectionality theory argues that instead of thinking of race, class and gender as social categories which stand alone, the intersectionalities between these systems of oppression work simultaneously to produce inequality (Cole, 2009; Collins et al., 2019). Bowleg (2012) poses forth the notion that the intersectionality theory is essential in public health as it focuses on historically disadvantaged groups which in the context of this study would be Black females, additionally the study focuses on an often-neglected aspect of public health which is mental health.

With the focus on mental health the paper explored three tenants of the intersectionality theory as a means to understand and interpret the experiences of the participants. The first tenant is that people do not have singular independent social identities but rather multiple dependent identities (Bowleg, 2012). This tenant, therefore, argues within the context of this research study that in order to understand the experiences of Black female postgraduates, race, gender, and other social identities should not be interpreted as standalone but rather as coexisting and interacting with one another. The researcher therefore explored the



participants background, living arrangements and family systems in order to relate their mental health experiences to their context.

The second tenant of this theory as suggested by Bowleg (2012) is that at the core of the intersectionality should be groups which were historically marginalised and oppressed as a result of the first tenant altering their experiences with macro systems. Based off of this tenant the study focused on Black, female postgraduate whom due to the Apartheid era were disadvantage both academically and denied access to quality holistic health on the basis of not only being Black but also on the basis of being female (Ramnund-Mansingh, 2023).

The third tenant of the intersectionality theory is that the interaction of multiple social identities with macro level structural factors such as poverty, inequality and racism produce poor health outcomes or within the context of this paper poor mental health outcomes (Bowleg, 2021). As per this tenant this research study then understood the poor and non-existent interactions with mental health resources among Black female postgraduate students to have been as a result of intersection between the micro and macro level.

In healthcare research however, the intersectionality theory has been critiqued for the fact that it is not quantitative however, this paper argues that with all aspects of health, particularly mental health a qualitative theory is appropriate (Heard et al, 2020; Kelly et al.,2021). Another commonly held critique of the theory is that in an attempt to incorporate the theory more into other fields of study other than gender studies, the theory loses its vigorous antiracist edge (Heard et al., 2020; Kelly et al., 2021).

The argument is that with the intersectionality theory being focused on social transformation which looks into race and gender from a bottom-up approach, as scholars attempt to align it with dominant knowledge systems it becomes watered down (Heard et al., 2020; Kelly et al., 2021). Despite critiques of the theory multiple scholars have argued that the intersectionality theory works well in humanities research because it firstly compliments the qualitative research approach and secondly it focuses on much more than social identities, but it also focuses on social justice which is often linked to micro level social identities (Cole, 2009; Heard et al., 2021).

The intersectionality theory, therefore, argues that an attempt to understand the experiences of people would be insufficient if race, class, and gender are analysed individually. This research paper, therefore, explored the experiences of Black Female postgraduate students with mental

health during the COVID-19 pandemic and the study aimed to do so by analysing the intersectionality between mental health, race, and gender within the context of the COVID-19 pandemic. An exploration of this theoretical framework aimed to yield unique findings which will inform interventions by institutions of higher education to better accommodate students from different backgrounds.

Figure 2.1 Intersectionality Wheel



An intersectional wheel illustrating how race, gender, ethnicity, ability or disability, age, sexual orientation, and ethnicity intersect and determine or rather shape other factors such as education, socio economic background, geographic location, and job classification, among others.

## 2.4 CHAPTER SUMMARY

This chapter provided the literature review and theoretical framework which informed the study. Mental health at a global and local level was discussed. The issue of mental health was contextualised within the South African context and discussed in relation to the history of apartheid. The prevalence of mental health challenges in institutions of higher learning was discussed along with the coping mechanisms employed by students. The challenges faced by students during the COVID-19 pandemic such as online learning were explored. Furthermore, policy applicable to mental health was explored and the intersectionality theory was discussed as the grounding theory for the study. The following chapter, which is the presentation and analysis of the findings, will draw literature from this chapter.

## **CHAPTER THREE**

### **RESEARCH METHODOLOGY**

#### **3.1 INTRODUCTION**

This chapter focuses on providing a discussion of the steps which were followed during the research. The chapter begins by clearly stating the research question, aim and objectives which the methodology attempts to answer. This is then followed by an explanation of the research approach, design and the population and sampling procedure. The chapter further explained the research instrument, method of data analysis, and explore the trustworthiness of the research and ethical considerations.

#### **3.2 RESEARCH QUESTION**

What are the experiences of Black female postgraduate students with mental health during the spread of the COVID-19 2019-2021?

#### **3.3 AIM(S) & OBJECTIVES**

Broader aim:

To explore the experiences of Black female postgraduate students with mental health during the spread of COVID-19 2019-2021.

Objectives:

- To establish the impact of mental health challenges associated with COVID-19 on academic progress of Black female postgraduate students from 2019-2021.
- To explore the coping mechanisms of Black female postgraduate students with mental health challenges during COVID-19 period 2019-2021.
- To establish how race and gender shape the experiences of mental health among post graduate students during COVID-19 period.
- To explore the psychosocial interventions that were put in place by the institution of higher learning to support Black female postgraduate students with mental health challenges.

#### **3.4 RESEARCH APPROACH**

The qualitative research approach was adopted for this study because a qualitative research approach unlike quantitative approach is a human centred approach which is concerned with

an in depth understanding of lived experiences and the study seeks to understand the experiences of Black female postgraduate students with mental health during the spread of the COVID-19 pandemic (Pathak, et al., 2013). Williams et al. (2023) argue that it is particularly crucial to healthcare research as it helps provide insight of the patient's experiences, directs policy relating to patient safety and provides an understanding of chronic illnesses which is inclusive of mental health.

The qualitative approach allowed for the researcher to gain an understanding of participants interactions with the subject matter for example as used in this study the interaction between Black female postgraduates with mental health (Yin, 2012). One of the qualities of qualitative research is gathering information rich data and that it uses an inductive approach meaning that it moves from one simple idea to a broader understanding through the experiences of those closest to the subject (Fossey et al., 2002; Neuman, 2011). In the research study initially, the idea was understanding mental health experiences in relation to gender and race however, the idea broadened to other contributing factors such as nationality, socioeconomic background, and family dynamic.

In support of the qualities mentioned qualitative research focused on the process of the research rather than the results through ensuring that good rapport was established with the participants to ensure comfortability (Fossey et al., 2002). Neuman (2011) asserts that qualitative research only requires a small group of cases to understand the larger portion of the population and it is highly open to using multiple resources. These qualities were all advantages to this study because they allowed for the researcher to fully explore and describe the experiences of Black female postgraduate students with mental health during the spread of COVID-19 through a sample of eight students from the whole population of approximately forty thousand Witwatersrand University students.

The qualitative method of study has been critiqued by many for lacking rigour and the argument is therefore, that it lacks validity, and this is due to the comparison made against quantitative research which is concerned with proving or disproving hypothesis through experiments and calculations (King, 2021). Additionally other critiques such as Potter & Hepburn (2012) are of the idea that interviews as a method of research have become the go to simple method for many qualitative researchers and they argue that it is almost a simple way to provide poor quality research. This idea is supported by other critiques who believe that interviewees providing their account of certain subject matter does not necessarily make it

true, alluding to the idea that interviewees point of views are not critiqued but rather taken as truth (Schaefer & Alvesson, 2017). Whilst these critiques of qualitative research and interviews as a methodology raise concerns, this paper argues that qualitative research is not concerned with what is right or wrong but rather with what is the lived experience and perceptions of the population.

### **3.5 RESEARCH DESIGN**

The research design refers to the framework of methods which were used by the researcher to collect the data (Braun & Clarke, 2013). This study adopted the case study design because this study design is most appropriate when the researcher is seeking to understand in depth an event or phenomenon of interest such as mental health within COVID-19 pandemic in its real-life context (Gerring, 2006; Harrison et al., 2017). Case study design is particularly beneficial in healthcare research because it is essential to the development of person-centred interventions and theory and helps with the evaluation of the programmes (Baxter & Jack, 2013; Crowe et al., 2011).

Case study designs can be understood as more naturalist than experimental meaning that the participants are not controlled as variables would be in an experimental study (Crowe et al., 2011). Crowe et al (2011) categorises the case study design into three; the intrinsic case study which is concerned with investigating the uniqueness of an object being studied, the instrumental case study which is about using on single event to understand wider spread issue and a multiple case study which involves the use of multiple case to gain greater understanding of a specific issue (Crowe et al., 2011). This research study adopted both an intrinsic case study and a multiple case study because whilst there is a uniqueness when merging the study population, demographics and time period the research also depended a lot on literature from multiple case studies prior to this research.

Similarly, Yin (2014) is of the view that case study can be descriptive, explanatory, and exploratory. The descriptive case study aims to describe a key phenomenon of a certain subject within its context (Yin, 2014). Secondly the explanatory design aims to answer the questions how and why which can often be used to account for certain behaviours and the development of policies (Yin, 2014). The third type of case study design is the exploratory design which aims to find something new and unique (Yin, 2014).

Yin (2013; 2014) is of the idea that the nature of case study research is empirical, and that context is important in every case. The intrinsic case study design is advantageous because it allows for the researcher to make a detailed account of the participants experience through providing a space for the participant to share their fully detailed experience (Babbie, 2008; Handcock & Algozzine, 2021; Mills et al., 2010). Therefore, the case of this study was drawn from University of Witwatersrand student population. The case study design has also been critiqued for its lack of classification as it focuses on a small sample to generalise a whole population and because human who are the main subject in most case study research are ever changing, this means results might be valid for a short period of time. Another disadvantage of case study research is that it is time consuming as it often requires studying multiple cases at once either in an effort to prove a certain point or to find the uniqueness of a case.

### **3.6 POPULATION, SAMPLE, AND SAMPLING PROCEDURE**

Study population is a group of individuals from which the sample for the study was selected (Unger et al., 2021; Yin, 2016). Therefore, the population of this study was drawn from the University of the Witwatersrand postgraduate community of 2019-2021. From the population the researcher recruited eight participants as a sample to be part of the research.

Sampling refers to the process of picking a portion from the population which to be used as participants in the research (Unger et al., 2021; Yin, 2016). The intention of having a sample is to reach saturation, where saturation refers to a point where the data obtained fails to yield any new information (Braun & Clarke, 2013). Taking into consideration that the research design of this research is a case study, the recommended sample size is about 3-10 participants (Creswell & Poth, 2018). In order to ensure that saturation is reached the study aimed to have 12 participants, however, two withdrew, one was a post-graduate however, not during the specified timeframe of the study between 2019-2021, and one other participant confused being an alumni for being a postgraduate therefore, the results were not relevant to the study and the sample size ended up being eight participants. Consequently, this study employed a non-probability sampling, specifically, a snowballing technique.

This type of sampling is used when the participants have traits that are hard to find therefore, the subjects provide referrals to be part of the study (Patton, 2015). Due to the fact that the research data collection took place in late 2022 and early 2023, the researcher encountered difficulties with reaching postgraduates who were students during the years 2019-2021 as most were no longer part of the university community. The researcher, therefore, had to make

means of social medias such as WhatsApp, Instagram, and LinkedIn to gain participants. The researcher posted a digital poster (Appendix F) stating the title of the study, the requirements and contact details and three participants were reached whilst other participants were recruited by the initial participants. The snowballing sampling method worked best because the researcher had a challenge with reaching the participants and depended on the other participants to recruit their ex-classmates and friends.

This research recruited eight (8) participants among the population to be the sample of the study and this consisted specifically of Black female postgraduate students who are above the age of 18 years and have experienced mental health challenges during the period of 2019-2022 whilst doing their post graduate studies (See Appendix A) (Braun & Clarke, 2013). The researcher found that availability was an overall challenge due to the fact that some of the participants were employed full time and had other commitments outside and after work, and some were full time students.

### **3.7 RESEARCH INSTRUMENT (S) AND PRE-TESTING OF THE RESEARCH INSTRUMENT**

#### **3.7.1 Research instrument.**

A research instrument was used to obtain the data and this study adopted an interview schedule (Smith & Osborn, 2015). The interview schedule sets out the questions in a manner which the researcher thinks it will be most appropriate for the interviewee. Although the interview might take a different approach, the interview schedule provides the researcher with a loose agenda and allows them to foresee issues that are potentially sensitive (Appendix C) (Smith & Osborn, 2015). Furthermore, Creswell and Poth (2017) add that an interview schedule is advantageous because it merges flexibility with a coherent structure. In this study the research schedule was created with a coherent structure aimed at building rapport first and as a result the participants were more open to sharing their experiences.

According to Greef (2005) the interview schedule is also very advantageous because it allows for the researcher to think deeply about the type of pre-determined questions to ask in order to explore the topic of interest in a manner that helps achieve the overall aim of the study. Additionally, it is advantageous to the participants as well, as the questions are usually structured in such a manner that they allow for the participant to share their experience in a narrative storytelling way thus allowing the researcher to gather information rich data (Greef, 2005).

### 3.7.2 Pre-testing

A pre-test is a technique used to measure the suitability of the research instrument (Patton, 2015). Pre-testing is advantageous because it allows for the researcher to pick out any mistakes in the questions and the structure of how they are asked before the actual research (Patton, 2015). Therefore, in this study the researcher conducted an interview with one colleague and one participant who was not part of the study. This helped the researcher to re-evaluate the logical flow of the overall interview, clarity of questions, the type of questions and language barriers both from the professional and the participant`s point of view. Presser et al (2004) petitions that pre-testing is the only way that a researcher can foretell whether the interview questions will potentially create challenges for both the researcher and participant. From the pre-test conducted the researcher found that some questions were embedded questions and only the first part of the question was answered, the researcher therefore, had to simplify questions and probe more.

### **3.8 METHOD OF DATA COLLECTION**

A method of data collection this study adopted was semi-structured interviews. Semi-structured interviews allow for interaction between the researcher and the participant, where the researcher poses questions and the participant responds, however, these questions are not rigid therefore, other questions may be asked (Smith et al., 2009). This type of interview was beneficial in this research study because it allowed for participants to share their experiences regarding mental health without being limited to a rigid set of questions.

Semi-structured interviews as a research instrument have an advantage because they allowed the researcher to establish rapport with the participant, the researcher established rapport by basing the first few questions around the client`s background and interests and this helped the researcher find common ground with the participant (Smith et al., 2009). The second advantage of semi-structured interviews is that the researcher can observe non-verbal cues which are an essential tool to probing. The interviews in this study took place over Microsoft Teams due to the difference in location of the participants.

The researcher had anticipated that participants would be open to sharing their screen however, that was not the case for most participants. There was a general preference for cameras to be off and whilst this was a disadvantage in terms of reading non-verbal cues associated with body language and facial expression the researcher being a social worker was able to actively listen for vocal non-verbal cues such as a change in tone of voice, change in



breathing pace and other external sounds such as children in the background. Whilst this study did not have participants who could not read or write, in the case that it did the semi-structured interview would have still been appropriate because it is inclusive in nature and allows participants who cannot read, write or speak a specific language to participate and share their experiences (Smith et al., 2009).

The disadvantage of interviews is that the participants might not pitch up to the interview, and this was a common challenge among the participants as some would forget that they have interviews. The researcher had to implement sending reminders on the day of the interview and ensure that the participants have the correct software. Interviews themselves can be time consuming, some interviews in this study ranged from 30 minutes to 1 hour 20 minutes however, the most time-consuming aspect was correcting the automated Microsoft transcription (Smith et al., 2009).

Interviews are disadvantages because they provide less anonymity as the interviewer and participant could potentially see each other, and the interview can be bias based on how the participant perceives the interviewer either according to race, class, or gender (Yin, 2016). The researcher having a social work background of working with diversity was able to eliminate biases through self-awareness practices.

The study was supposed to make use of both in person and computer mediated interviews which involve the use of computer or smartphones, using apps such as Microsoft Teams, Zoom and even WhatsApp video call, however, because of how scattered the participants were the researcher made use of computer mediated interviews only (Stephens et al., 2021). This was also taken as a safety precaution as there was still a lot of anxiety around the spread of the Corona Virus and computer mediated interviews therefore, minimised the risk (Stephens et al., 2021). The participants of this research study were all above the ages of 18, making them all adults and therefore, able to consent to their own participation in the study (Appendix B). The interview schedule consisted of 10 open ended questions (Appendix C) and interviews were expected to run for 40-60 minutes however, they ranged from 30 minutes to 1 hour 30 minutes, connectivity issues also contributed to this increased time (Smith et al., 2009).

### **3.9 METHOD OF DATA ANALYSIS**

A method of data analysis refers to various processes which are used to describe, analyse, and evaluate raw data which was collected in order to draw inductive inferences and distinguishes what is of interest to the subject matter from the rest of the data (Alhojailan & Ibrahim, 2012). The type of data analysis most appropriate for this study is the thematic analysis. Kiger and Varpio (2020) add that thematic analysis is most appropriate when the research seeks to find out the experiences, thoughts, and behaviours.

The thematic analysis analyses the different classifications and themes which arise from the participants responses and identifies similar occurrences throughout data in order to find meaning (Alhojailan & Ibrahim, 2012; Braun & Clarke, 2006). Furthermore Guest et al (2011) highlights that it allows for the researcher to also capture the sub-themes which may arise whilst exploring the themes already drawn which is advantageous in making the study unique. Specifically, the analysis of this study was guided by the six steps proposed by Braun and Clarke. The first phase is becoming familiar with the data, Braun, and Clarke (2006) suggest that the researcher is the key person engaging with all the data which is being collected and that it would be advantageous for the researcher to be well knowledgeable about the data which they have collected. In the context of this study the researcher spent time listening to the recordings from the interviews and transcribed the interviews correctly.

When the researcher has successfully completed the first step, the next step would be to compile an initial list of ideas of what is of interest in the data (Braun & Clarke, 2006). Coding is essential to the organisation of data into significant groups; therefore, the researcher generated codes which were best fit for the data collected and this was done through seeking similarities, patterns and relationships in the data collected (Braun and Clarke, 2006). This was done through colour coding similar responses and outlier responses. In the next phase, which is searching for themes, the researcher rechecked and studied the data analysis made in the previous phase, this included combining all the relevant coded data and seeking out for more new emerging themes (Braun & Clarke, 2006). In this study, the researcher focused on finding and separating significant themes in accordance to how relevant they are to the study.

The process of reviewing the themes is important because it allows for the researcher to further differentiate what is more important than the other and what addresses the objectives of the research more (Braun & Clarke, 2006). During this stage, the researcher carefully

compared the themes which emerged during the previous phase to search for any missing data and made corrections which are needed. According to Braun and Clarke (2006) the fifth phase includes characterizing each theme and this included the researcher defining and further refining the themes whilst analysing the data (Braun & Clarke, 2006). To apply this phase the researcher identified core themes and aspects in preparation of compiling a research report.

In the final stage, the researcher finalised and prepared the presentation of their findings in the form of a research report (Braun & Clarke, 2006). Furthermore, Braun and Clarke (2006) suggest that at this stage the report should be written using the core themes that would have come up throughout the data analysis process. Hence this research report followed the coherent structure and guidelines as provided by the university.

### **3.10 TRUSTWORTHINESS OF THE STUDY**

Trustworthiness is the process of checking and ensuring the quality of the study (Connelly 2016; Yin, 2016). Trustworthiness is essential in qualitative research because it does not take the same form as in naturalistic work (Yin, 2016). There are four components which determine trustworthiness in qualitative research, credibility, dependability, confirmability, and transferability (Connelly 2016).

#### **3.10.1 Credibility**

Refers to the confidence that the study is testing that which it is set out to test and that it is not influenced by other factors or variables, basically the credibility seeks to ensure that there is internal validity (Yin, 2016). The researcher would have to become well acquainted with the culture, customs, and traditions of the community which they are going into, practically the researcher emerged herself in the population through spending time with postgraduates, finding out more about their fields of study, and even learning their lingo (Shenton, 2004). The researcher additionally spent time on social media engaging postgraduate females to get an understanding of what it meant to be a postgraduate student to them. Member checking was also applied through analysing interviews, the researcher might share a summary of the themes with participants to verify that the conclusions accurately reflect their experiences (Yin, 2016).

### 3.10.2 Transferability

Transferability focuses on how far the results of the study can be applied into contexts other than the one being investigated and this is achieved through providing information rich data (Shenton, 2004; Yin, 2016). To ensure transferability the researcher provided detailed and descriptive information about the participants, context of the study, methodology, analysis, the period during which the data was collected and accounted for how many participants there were in the study (Shenton, 2004).

### 3.10.3 Dependability

Dependability is concerned with whether the study would yield the same results if the methods of transferability and credibility remained fixed (O'Neil & Koekemoer, 2016). The researcher therefore, ensure the dependability in the study, through conducting the research interviews herself and allowing the interviews to be spaced out such that there is time to process what was shared in all interviews individually. A thick description was also applied as the researcher provided a detailed, rich, and nuanced account of the research setting, participants, and events so that the readers can fully understand the context (Yin, 2016).

### 3.10.4 Confirmability

Confirmability focuses on making sure that the study is objective rather than subjective. However, considering that studies are created by human beings, there is some room for subjectivity because the interview schedules, surveys and questionnaires are subject to who the researcher is and what they want to find out (O'Neil & Koekemoer, 2016). The researcher did try to minimize subjectivity through pretesting. Additionally, the researcher peer debriefed by asking colleagues familiar with qualitative research to review their analysis and suggest alternative interpretations or point out possible biases (Shenton, 2004).

## **3.11 ETHICAL CONSIDERATIONS**

According to Arifin (2018) ethical considerations are a set of ethical principles which are put into place when conducting research with human subjects to protect them from possible harm. Ethical considerations are important because research can be collaborative, involving multiple parties from different institutions and background therefore, ethical considerations set a standard by which everyone has to abide (Resnik, 2020). In this study the ethical considerations included ethical clearance, informed consent and voluntary participation, anonymity and confidentiality, no harm and debriefing of participants.

### 3.11.1 Ethical clearance

This study was cleared by the University of the Witwatersrand Human Ethics Committee, Protocol number SW22/07/08 (Appendix E). A request to conduct research with university students was approved (Appendix D)

### 3.11.2 Informed consent

According to Denzin and Lincoln (2005) informed consent is the foundation of ethical research. Informed consent is the process by which prospective participants agree to be part of the study out of their own free will (Arifin, 2018). Arifin (2018) affirms that informed consent is a process which firstly involves prospective participants understanding what it is exactly that they are consenting to, the researcher provides participants with adequate information to decide whether or not they want to be part of the research study and only after that explanation can consent be obtained.

For this research study a participant information sheet was used, where the researcher provided a written explanation of the nature of the research, duration of the study, procedure, and the right of the participant to withdraw at any point (Appendix A). Additionally, the researcher also provided contact details should anyone need further explanation. The researcher additionally added a request to record the sessions to increase the accuracy of the study (See Appendix C). An added advantage with this research study is that all participants were above the age of 18 years and could consent for themselves, the researcher therefore, did not have challenges obtaining consent.

### 3.11.3 Voluntary participation

In research it is crucial that participants are not forced or manipulated into participating as this helps the participant to not be put at a disadvantage by merely participating (Babbie, 2001). To ensure voluntary participation, the researcher made sure to include this in the participants information sheet (Appendix A).

### 3.11.4 Anonymity and confidentiality

Anonymity and confidentiality are the reassurance that the participants personal details and other self-identifying information will not be exposed in the study (Fleming & Zegwaard, 2018). Confidentiality means that although the participants are known to the researcher, the data received by the researcher from the participants was de-identified (Fleming & Zegwaard, 2018). The assurance of confidentiality increases the subject's willingness to participate, and it is therefore, important for the researcher to assure the subject (Denzin & Lincoln, 2011).

Therefore, the researcher did not reveal any of the participants identifying information in data analysis and findings and opted to using pseudonyms, this information was also shared with the participants to ensure that they have that extra assurance. The privacy of the interview involves protecting the data from the onset of the interview throughout, given that the interviews were conducted through Microsoft Teams the researcher could not fully ensure that the participants had privacy however, the researcher made recommendations that participants get a private room when sending out reminders for the interviews. The researcher ensure that she got a private room when conducting interviews.

#### 3.11.5 No harm

No harm is the ethic which takes into consideration possible harm which could be caused to the subjects or lessen the possibility of hurting subjects in any way possible (Fleming & Zegwaard, 2018). Harm can range from physical, emotional, psychological harm, and the loss of resources (Babbie, 2008). The researcher anticipated that some of the questions asked could harm the participants however, to lessen the possibility of harm the researcher ensured that the participants are well knowledgeable about the potential emotional and psychological distress and the researcher referred the participants to the Wits Counselling Career Development Unit (CCDU) where they can get counselling.

#### 3.11.6 Debriefing

Debriefing of the participants involves the researcher allowing for clients to express their feelings after the session and how they felt about the questions being asked (Babbie, 2008). At the end of the interview the researcher allowed time for the participants to talk about their feelings and also to give feedback as to how they found the questions. The researcher then also reminded the participants of the counselling which is available to them.

### **3.12 CHAPTER SUMMARY**

This chapter has provided a detailed explanation of the strategy which was employed and the methods which were used in the study. The chapter provided an in-depth analysis of the research question, objectives, approach, population and sample. The chapter then explored the research instruments, method of data collection trustworthiness and ethical considerations. The next chapter will present and discuss the findings of the study

## CHAPTER FOUR

### PRESENTATION AND DISCUSSION OF FINDINGS

#### 4.1 INTRODUCTION

This chapter is a presentation and discussion of the findings of the study. The discussion begins with a simple breakdown of the participants` demographics followed by a discussion of the findings following a thematic analysis as discussed in the methodology. The thematic analysis is discussed in relation to the goals and objectives of the study and direct quotations are used. As with every study the inherent limitations of the research design, methodology and analysis are discussed.

#### 4.2 PARTICIPANTS SOCIO-DEMOGRAPHIC

Table 4.1 Participants socio-demographic profile (N=8)

Demographic factor	Sub-category	No.
<b>Race</b>	Black	8
<b>Gender</b>	Female	8
<b>Nationality</b>	Local	4
	International	4
<b>Postgraduate level of study</b>	Honours	6
	Masters	2
<b>Faculty</b>	Humanities	5
	Science	2
	Commerce, Law, and Management	1
<b>Year</b>	2020	5
	2021	3
<b>Accommodation during postgraduate</b>	University residence	2
	Home/with family/relatives	4
	Both university residence and home	2
<b>Funding</b>	Self-funded	2
	Bursary/Scholarship/Sponsor	3
	Partially funded	3

Table 4.1 represents a summary of the participants` socio demographic profile, all eight participants were Black and female as it was a requirement for the study. Majority of the participants (six) were in their post graduate honours year, whilst two were in their

postgraduate masters. All eight participants lived in South Africa, however, four were international students and the other four were local students. Of the five faculties within the institution, five participants were in the humanities faculty, two in science and one in Commerce, Law and Management. Five students were doing their postgraduate degree in 2020 and two in 2021. In terms of living arrangements and accommodation, two participants lived at home or with family or with relatives, four at a university residence whilst two lived between the two. Lastly the table looks into funding, two participants were self-funded, three on bursary or scholarship or sponsorship and three were partially funded.

### 4.3 THEMES AND SUB-THEMES THAT EMANATED FROM THE STUDY

Table 4.2 Themes and sub-themes that emanated from the study.

<p>4.3.1 Perceived challenges of being a postgraduate student 2019-2021.</p>	<p>4.3.1.1 Adjusting from contact learning to online learning.</p> <p>4.3.1.1.1 Perceived advantages of online learning</p> <p>4.3.1.1.2 Perceived disadvantages of online learning</p> <p>4.3.1.2 Restricted access to academic resources due to COVID-19 physical restrictions.</p> <p>4.3.1.3 Interruptions in living environment arrangements due to COVID-19 restrictions.</p> <p>4.3.1.4 Contrasting experiences around gender roles and expectations.</p> <p>4.3.1.5 Fear of unemployment and desire to become more employable</p>
<p>4.3.2 Mental health challenges experienced</p>	<p>4.3.2.1 Anxiety around the death and loss of loved ones due to COVID-19.</p> <p>4.3.2.2 Experiences with symptoms associated with depression.</p> <p>4.3.2.3 Stress associated with a lack of finances to fund post graduate studies.</p>



4.3.3 Coping mechanisms implemented to help deal with mental health challenges.	4.3.3.1 The role of family and social support in promoting students’ mental health 4.3.3.2 The use of substances and partying as a coping mechanism. 4.3.3.3 Engaging spirituality and religion to find meaning. 4.3.3.4 Sleep as a coping mechanism
4.3.4 Challenges with university to psychosocial services	4.3.4.1 Access to mental health services 4.3.4.2 Perceptions of psychosocial support services on campus. 4.3.4.3 No perceived need for mental health services 4.3.4.4 Fear of the unknown

**4.3.1 THEME 1: PERCEIVED CHALLENGES OF BEING A POSTGRADUATE STUDENT 2019-2021.**

The COVID-19 pandemic caused a lot of changes to learning and one of the biggest changes was switching from contact to online learning. Students have different learning styles and as a result this type of learning had a different impact on the students, some expressed positive outcomes whilst some expressed negative outcomes. Shaping these perceptions around online learning were factors such as socio-economic background, living arrangements and course requirements.

**4.3.1.1 Adjusting from contact learning to online learning**

The transition to online learning was an adjustment for both students and lecturers. In this study three participants had to do their undergraduate final year at the peak of the COVID-19 pandemic, and they expressed that by the time they were starting their postgraduate degree they had already adjusted to online learning. None of the eight participants expressed challenges in navigating the technological devices and system use for learning despite the university having changed from SAKAI to Ulwazi.

*“So I think because I did, I’m third year with the full attendance of my third year was in 2020, and that was the full, you know, lockdown, having to learn everything online by the time I got to my postgrad, I kind of had a rhythm of what was going on, I kind of kind of knew*

*what was expected of me. The balance, the having to attend lectures online, doing consultations online I was used to that” (P1).*

Another participant (P7) shared similar experiences as participant one:

*“So, I wouldn’t say it was much of a challenge for me because with undergrad it was attending and it was tuts and whatnot, but when I got to do my honours, most of it was online and I’d only go on campus to do the lab work. So, for me, I enjoyed it. I didn’t have much of a challenge when it comes to that because I felt like I adapted very quickly, and I was like in my element I was in my element.” (P7)*

#### **4.3.1.1.1 Perceived advantages of online learning**

An advantage of online learning is that for students who learn independently this was an ideal method as it eliminated the pressure of attending lectures at a specific time and grasping the lecture content under pressure. Online learning came with some form of comfort such as learning from home with the assistance of family (Mukhtar et al., 2020). A participant shared that completing a postgraduate degree online had no negative impact on her but rather a positive one because it allowed for her to attend lectures with her mother which provided her with the much-needed support.

*“Funny enough the COVID-19 regulations didn’t impact me negatively. I think it even impacted me positively. I attended lectures with my mom, my mom would wake me up and say come today we have a class let’s go to it... my mom would sit there and listen if I had to run to the bathroom when I came back, she was like, “Oh no, he said 123 check activity 3 check this activity”. My mom was there, so having the support of of family next to you it was, I think, funny enough, the COVID regulations made my under...postgrad much better.” (P1)*

Another participant added that online learning allowed for her to learn at her own pace.

*“At that time if I’m being honest, I think I preferred online cause obviously I did my honours during the COVID times, so I kind of I worked better when I work in my own space, at my own pace.” (P6)*

These perceived advantages point to an important aspect of different learning styles and the role of family support in shaping academic experiences. In a study conducted by Alkabaa (2022) on the effectiveness of the E-learning systems during the COVID-19 pandemic the study concluded that perceptions of E-learning differed based on gender and the stream field

of study. Therefore, experiences differ based on one's home environment, role in the family, resources, internet connection and learning style.

#### **4.3.1.1.2 Perceived disadvantages of online learning**

A participant shared about how their classes went from face to face to asynchronous learning which involves prerecorded material to interact with at one's own pace. This method was perceived to be disadvantageous as it had no time limit as with physical lectures, therefore, requiring of students to spend longer time watching lecture recordings. Participants also shared that reaching lectures and their peers to aid their online learning was a challenge as they were no longer seeing each other in person and one could not simply stop the lecture and request further explanation (Simamora et al., 2020).

*“So, you could tell for example I did say earlier that varsity is quite structured we do have timetables you know your class is going to be for 45 minutes. But then the recorded videos would go until two hours and you're like, OK, how can I plan my day now? I mean, it's quite tiring to be hearing someone for 20 hours I mean, for two hours, which isn't really like, which isn't really practical and there's a lot of work on top of that.” (P6)*

The same participant added that in addition to the change in delivering lectures, methods of testing were also altered.

*“...so, most of the papers that we wrote in 2020 were new to us, like there was research which was very unlikely to happen because you're just used to doing papers, mastering the theory, and then get to an exam room just to show them how good you are with that concept. But it was quite a weird exam setup where we need to research on things we have never even seen in class or or things that we have never been taught in class so from an academic perspective the papers were hard because of that inherent risk that lies... that laid on during that exam with other people...” (P7)*

Other participants added that with online learning there was no contact between student and lecturer which added academic stress.

*“I was stressed because some of the lecturers you couldn't get a hold of them and some of them were just being difficult for no reason and some of the courses was just hard...” (P6)*

The participants deemed it necessary to have access to their lectures and peers whilst adjusting from an undergraduate degree because a new way of speaking, writing, and

understanding lecture material was presented. Another participant shared sentiments regarding challenges in understanding legal terminology and as a result had to use other resources to aid her learning.

*“All right, um so this meant starting a new degree online. You don’t see your lectures. The language was so intense and so different from what I’ve known from my undergraduate that at every stage that I’ll read one line and then have to translate one word from Google Translate, Google Research or Google Dictionary just so I can understand what’s happening” (P2)*

Participant 1 added that even though there were lectures most of the responsibilities fell on the students.

*“Yes, you still have the lecturers, but now it’s it’s the onus is on you. You can’t say that you didn’t do good cause you didn’t attend lectures. A lot of the things are on you. Did you do the readings? Did you do the research that was needed for you to to understand your topic more? The the undergrad was based on what the lecturer was teaching.” (P1)*

Another participant touched on the importance of one-on-one interactions with lecturers and other students to support the learning experience.

*“You realize now that we sort of come out of the pandemic, that there’s a lot that goes into just experiencing people physically. Maybe that doesn’t sound right, but actually having one-on-one interactions with people, be it your classmates, be it your lecturers, you know, and a lot of that support was just not there.” (P2)*

An international student shared about the difficulty of incorporating herself into a whole new department with its own procedures and challenges with building interpersonal relationships with her new classmates which she had never seen in person as there were no contact classes.

*“We had recently started our journey of Masters. We are new in this department, is not department that was actually familiar with, right. So, we’re in the process of just trying to adapt. And then there’s this world big thing happening, haven’t even made friends yet. So, the whole lockdown now how do I look at this? How do I access notes? How do I work and relate and find out how other guys are doing because we don’t even know each other to to that personal level, so academically it’s also challenging and personally it is also challenging.” (P5)*

#### **4.3.1.3 Restricted access to academic resources due to COVID-19 physical restrictions.**

A majority of the participants shared having challenges related to the physical restrictions that were put in place to curb the spread of COVID-19. Those in postgraduate fields of study which required some form of group work, practicals and utilization of laboratories and libraries at the university expressed having had challenges in doing their academic work. These challenges included not being able to utilize the libraries to study which meant that students would have to find alternative environments which were conducive to learning. For those who had access to the labs the challenge was that one could not access the lab on demand as a booking system was employed and caused delays in meeting academic deadlines.

*“...I remember when I had to go back there was so much restrictions we couldn't even use the library actually as much as we would love to, and that was the type of environment that I loved because as I said you know. There was a lot of restraint, so even at at the risk, I didn't have things like Wi-Fi and so on, so I had to use the school's you know provision...the Wi-Fi, so when the libraries themselves were also restricted, it just it made a lot of things difficult. I couldn't use, we couldn't use the honours rooms where we were able to go, you know, stay overnight, cause libraries now are no longer staying overnight.” (P8)*

Another participant in the Science faculty expressed challenges around doing laboratory work with COVID-19 physical restrictions in place.

*“Uh, that was tricky because we do lab work, we do. We work with physical work because you need to hold the rock. Unfortunately, in your hand and see it. So, it was a it was weird and kind of restricting working around the schedule cause you couldn't just show up...” (P6)*

The same participant added:

*“Access to the lab with the restrictions, you had to book a lab, and there was only amounts of people that were allowed. So, if those amounts of people were in the lab for that day, you are not going anywhere and maybe that person booked the lab and they'll get there and spend 30 minutes, but it comes up as if they booked it that whole day. You you might plan that OK on Friday, I want to go to a lab but when you wanna book the lab, the lab is fully booked and so remember, at that time, it's not just honours, as there's master students, there is PhD. There's also some of the undergrads. So, it was it was a struggle...” (P6)*

A participant in the faculty of Commerce, Law and Management shared that their postgraduate degree required for the students to help each other and that a petition was signed for them to return to their university residences so that even though they were not able to attend lectures in person they could help one another.

*“So we we had a petition we’re like, can we at least, even if we don’t go to class, can we at least be at school where we are around each other where we can help each other because that’s another thing about accounting, it needs a community, you can’t do it alone because also see it in corporate like there’s so many questions you ask about, understanding the business and you can’t do it alone. You can’t say I have financial statements I know the understanding of the business and then you run with it. Even your bosses ask questions, so accounting is more like a community a community subject you need people and if you do it alone then something is wrong” (P7)*

#### **4.3.1.4 Interruptions in living environment arrangements due to COVID-19 restrictions.**

A student’s living environment plays a very important role in their student experience, with the COVID-19 restrictions, the students had to move back home and with relatives and for the ones who remained in university residences, there were very strict restrictions. These changes in the living environment had implications on how the participants engaged with their academic work therefore, the change threw some students off balance as they consistently had to adjust to a new environment putting more stress on the student (Evandrou et al., 2021). For some students this was the longest they had been home since starting university therefore, they also had to adjust to living with their family members and relatives.

*“So, I was moving around. I was moving, so I was in. I left. I left um South Point, I think just the day before the lockdown, I leave South Point. I travel to my cousins in Nelspruit so there. I think I was there for I don’t remember the time frames because I know once things started opening up, I didn’t stay long after at home. I just wanted to leave. So, I think I was there back home for like 3 months. I probably spent one and a half months in Nelspruit and then another one and a half months back at my aunts in Bushbuck Ridge, and you just reminded me, the other thing is, during this time, you’re with your family full time. So, it’s easy for them to think you on vacation. So, they’re not always understanding of the, the fact that I’m attending classes. I need to be doing assignments. So now you also have this element where because you can’t maybe clean the house first thing when you wake up in the morning because first thing when you wake up in the morning, you in a lecture.” (P2)*

Another participant shared a challenge with the home environment and having noisy neighbours which was part of the reasons why the participant was compelled to sign a petition to move back to the university residence.

*“And and it’s well, apart from the noise, I mean, I can’t tell my neighbour to calm down, but there was a lot of noise, you know, so Soshanguve is quite a fun place to be in and my neighbour happened to have a little child where all the kids were playing, so there was really a constraint. I also now had to change my timetable that OK, during the day we’re doing something light at night. We need to do something that’s really deep because it’s silent and that’s where I can focus properly.” (P7)*

A participant who had to move from the university residence back to her home in Soweto pointed out the challenge of service delivery in her hometown and how that affected her studies.

*“Secondly, I I couldn’t reside like in res because of COVID-19, so I couldn’t reside in res, so I, I was staying at home at the time eSoweto, which yoh had its own challenges you know. There was load shedding at that time in South Africa so in in Soweto it’s it’s even worse because we have like infrastructure problem like ama transformer nama cable nje a nokumosheka ( transformer and cables just get damaged) out of nowhere and we wait like a long period of time for Eskom to come and fix things. So it was really hard to what can I say to to to work man because of that electricity, even the environment it was not that conducive, you know, cause at home you are with your family and they don’t even really understand all they know is, yoh o hlezi ekhuluma nge research kotwa nje (she is always talking about research) you know, asazi ukuthi kwenzekani (we don’t understand what she is talking about) so it’s just hard you know to it was it was a challenge to actually, like, be productive at home.” (P4)*

Another participant shared similar sentiments with regards to not having a conducive environment to study.

*“And even the space that I was sitting, you know, in a student accommodation that is a bit crowded, and we are with students that are coming from different backgrounds and from different universities, so trying to say okay guys, I am studying. Can you please lower your volume and it’s COVID period, some universities they opened a bit late, some had their own way of of of educating their student, which was actually different from the way, so talking to*

*get people to understand that okay guys, now I have a class. I know you are having a party, or you have your own music, and we are trying to distress because of what is happening with COVID.” (P5)*

The same participant who is an international student shared about the difficulties of being stuck in a foreign country.

*“Here in a foreign country and I’m the only one here in a foreign country. So, when the borders closed, we are all in a state of panic during COVID-19 there is nothing that we could do.” (P5)*

According to Limone & Toto (2022) experiences which students have with their immediate environment play a crucial role in predisposing students to psychological distress. In a study conducted by Lukens et al (2022) the conclusion was that students living in student residence were able to foster lifelong relationship which contributed to their overall wellbeing. With the experiences shared the study deduces that the participants were deprived of a conducive space to study and furthermore foster relationships with their peers which affected their overall mental health. In addition is that their academics were also greatly interrupted by their physical environment and living arrangement which further increased academic stress.

#### **4.3.1.4 Contrasting experiences around gender roles and expectations**

Gender roles and expectations play a crucial role in shaping mental health experiences among females as some expectations such as fulfilling domestic task, caring for children and sick family members can contribute to a decline in mental health (Parlak, 2021). Gender roles and expectations have evolved over the years and what this study has shown is that fulfilling gender roles is dependent on one’s home environment and family. The participants experiences were split regarding gender roles and expectations, whilst some were expected to fulfil household duties and chores, and some were not.

*“So, they’re not always understanding of the, the fact that I’m attending classes. I need to be doing assignments. So now you also have this element where because you can’t maybe clean the house first thing when you wake up in the morning because first thing when you wake up in the morning, you in a lecture. So now you have all of these things where your family thinks you are dis, being disrespectful or you are better than them or what not what not you understand all of that stuff you still expected. Whereas in you still expected to cook, you’re*



*still expected to clean, you still expected to babysit you expected to be okay with being sent around.” (P3)*

Another participant had a completely different experience:

*“Like when I’m tired, I take a nap and then get back to it. So, from my family side, they were really supportive, never touched a dish. And at some point, I used to want to clean, and they’d be like, no, you need to focus on your schoolwork”.*

#### **4.3.1.5 Fear of unemployment and desire to become more employable.**

Amongst all eight of the participants fear of unemployment was the most common and underlying reason which was provided to account for pursuing a postgraduate degree. Most of the participants had done their postgraduate degrees in the years 2020 and 2021. Statistics show that unemployment rates in South Africa ascended in the fourth quarter for the year 2021 from 34.9% to 35.3% and this was attributed to companies shutting down or downscaling due to the COVID-19 pandemic (Stoddard, 2022). Participants seemed very aware of this unemployment and shared a general sense of fear around being a university graduate and still struggling to find employment.

*“OK, so I’ll be honest, right, when I was, I remember in my in my last year in undergrad I remember everyone was was panicking about, OK what’s next? What’s next, what’s next? And for me, I was like there is no way I’m gonna be sitting at home so let me just apply for something in case I don’t find a job, then I’ll have something to do...” (P4)*

Another participant (P8) who was enrolled into an undergraduate Bachelor of Biological Science shared the same sentiments as those enrolled in the BA undergraduate degree, adding to the argument that a generalised degree is not enough to secure employment.

*“...the first one is because with the type of degree that I have, it’s difficult and almost impossible to get a job straight out of a bachelors for biological science because they often expect some level of specialization whether it’s OK, you did biological of science, but did you specialize in marine biology and environmental biology? In animal, which side did you go to? So often times when it comes to finding a job, they don’t usually take people who just have BSc, so that was one reason that I had to continue.*

Another participant (P8) was of the similar sentiments that even though they had an undergraduate degree, having a post graduate degree would give them the upper hand in the job market.

*“OK, honestly, for me in my field of study, honours are an advantage. Like you can get a job when you have undergrad, but then when you get to the workplace, they’ll always push for you to go and carry on and get your honours and your masters. Currently, now they’re motivating for me to go get my master’s so they’re always pushing for you to get a higher qualification.” (P6)*

A participant (P7) shared about the fear of unemployment from having experienced it among classmates who had taken the decision to not continue with their post graduate degree.

*“And you can tell from the chats you have with other people who have given up ...they feel like, you know, not really give up, but accepted the undergrad and choose to run with that it is challenging because when you are looking for a job, they want Cas, they acknowledge your BCOM but we prefer CA’s because they’re more advanced.” (P7)*

Another participant (P1) shared about pursuing a specific postgraduate degree in order to become more employable overseas:

*“And also, because anthropology is very sort after, yeah, sought after in, like European countries in America and in essence social science degrees are very valued overseas. So, I just wanted to have that option in case I wanted to move overseas that ok, I have the degree that they’re looking for so that should be good to go overseas” (P1)*

These responses highlight a very serious concern among not just graduates in South Africa but youth as a whole. Youth unemployment is approximately at 61% and with the refined definition of unemployment now including those who have given up on seeking jobs that puts the percentage at approximately 71% (Magome, 2023). Unemployment has been associated with mental health conditions such as depression and substance use disorder. Based of the experiences shared by the participants is that there was general anxiety around not being employed or employable and therefore the decision was taken to continue studying.

#### **4.3.2 THEME 3: MENTAL HEALTH CHALLENGES EXPERIENCED**

Mental health can be understood differently by different people however, for the purpose of this paper it was understood a state of well-being in which the individual realises his or her

own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to contribute to their community (United Nations, 2008). Whilst only one of the participants was diagnosed with at least one mental health disorder all eight of the participants expressed having symptoms associated with mental health conditions. These were grouped into the following sub-themes; anxiety around death of self and loved ones, experiencing symptoms of depression and stress associated with a lack of funding to finance studies.

#### **4.3.2.1 Anxiety around the death and loss of loved ones due to COVID-19**

Anxiety is a mental health condition associated with overwhelming and excessive feelings of fear about a perceived real or unreal threat (Hapter, 2012). The COVID-19 brought about a lot of anxiety because of the death tolls, some participants shared having lost loved ones and therefore had a lot of anxiety around contracting the Corona Virus and dying too. A participant shared about living in fear and how this fear of contracting the disease was also present among their family members.

*“I was always in fear I am not gonna lie cause COVID was so unpredictable and that applied to everyone like you hear people are dying and you just like you I am with my family. Like the moment they step out of the house you just like you know what’s gonna happen to you? I remember my mom was just those rules where you need to go to the shop, come back, change your clothes, freshen up and then be human again, because we don’t want to touch whatever virus that is out there.” (P7)*

Other participants who shared experiences around death shared about having had already lost relatives. A participant explained how the news and social media were occupied with death statistics and the death of people, and that those were not just strangers but also people that the participant knew.

*“Every day you wake up, you read the news, you read statistics, you open WhatsApp, it’s always rest in peace to this person, rest in peace in this person like you now see that you are living in a reality. Each and every one of us is losing people that are close to it. And for me, the fact that I couldn’t be close to my family, that was something that was very challenging.” (P5)*

The same participant added that as a result of being in a foreign country this also affected the way she grieved these losses as she was far from family and could not perform certain rituals to cleanse herself.

*“You lose cousins, you lose close relatives, and you can’t even attend that funeral, right. I’m I’m a Black person and I’m an African and there are a lot of things that we do as Africans that are traditional in that are part of our culture and one of those things is being present and performing those cultural practices that also actually help you during the the grieving and the healing process. But for the mere that you’re skipping those processes then the it just defeated the whole part of healing process” (P5)*

A participant shared about how they actually lost their grandmother and child and that they found themselves sinking into depression.

*“And then two weeks after that, I was bowling my eyes every single week. Just stressed, depressed, I just fell down that hole was like what’s happening? Why do I delay feeling things? Well, turned to therapy last year. So got to figure out why that was the reason I delayed stuff, but before then, so now we’ve got 2021, defunded, loss of my child, my life is just a mess. I’m in a career I’m not even sure about.”*

#### **4.3.2.2 Experiences with symptoms associated with depression.**

Whilst only one participant was officially diagnosed and the rest were not, most participants explained feeling symptoms associated with depression from time to time. Two participants who are qualified social workers explained that they knew the symptoms associated with depression and were able to identify these symptoms in themselves.

*“I’ve I’ve never been officially diagnosed with a psychiatrist or psychologist.” (P5)*

The same participant added...

*“I’m I’m a free person if I may say, who’s the loner I get, I isolate myself a lot. I prefer my own space and and being alone and which at times also associated in terms of depression. And I’m also a therapist and you can easily pick up some of these things when they’re happening to you also well. So, during that period of time, you can actually tell the symptoms are now kicking. You are alone in this place” (P5)*

Another participant with the same qualification shared similar sentiments when explaining her experience with living at home and not being able to move to res.

*“I was not like diagnosed by a professional but of course as a social worker, I could see that these are definitely depression symptoms, you know? Yeah. I was very much depressed because I couldn’t function, you know, and it was a thing of ohh God, what do I do now?” (P4)*

A participant who was officially diagnosed shared about experiencing feelings of depression caused by her living arrangement.

*“I know that during, during um the lockdown at some point my sister travelled back home to Nelspruit and I was like she must leave me because I just wanted to be alone. So, I deal with a bipolar and unipolar depression, right? So a lot of that is my mood sort of fluctuates a lot and then I become very frustrated when I’m I’m around people most of the time and I didn’t I didn’t understand it and it was very hard for me because I was like, how do you want to be alone yet, you are in someone’s house, yet someone is currently helping you?” (P2)*

#### **4.3.2.3 Stress associated with a lack of finances to fund postgraduate studies**

Finances play a very important role in whether the student gets to continue with their studies or not. Another factor which presented in this study was the role of finances in mental health. A participant who was doing their first year of LLB after graduating from their BA general degree shared about getting defunded by the National Student Financial Aid Scheme (NSFAS).

*“It did not help at all that I then became defunded because of COVID. So, what NSFAS was told us was that due to COVID, they no longer have money to fund postgraduate degrees anymore. We were told this after registering it’s it’s already waiting. I already started my first 2-3 days of the semester of the block, and we’re told they can’t fund us anymore and I remember having so, luckily, because of the place that we stay in at South point, you just bring in your previous proof of funding and then the you sign your contract. But I stayed six months in fear every day that they’ll find out that I no longer have funding and I’m gonna be liable for six months’ worth of rent because I knew when you know something, you’re always gonna be liable for it.” (P3)*

Funding plays a fundamental role in the student’s academic journey and mental wellbeing (Schreiber, 2019). The COVID-19 pandemic resulted in job loss for most people, and this included the parents and caregivers of students who play a role in financially supporting them. With parents and caregivers being unemployed, some participants had to depend solely

on sponsors and bursaries which came with an added pressure to perform well academically. Participant three added that she started questioning her postgraduate degree as a whole and that her motivation to continue with her studies diminished as she had anticipated that the lack of funding will cause for her finances to get worse.

*“And that really really um killed the the the motivation I had to study law because I began to think maybe this is not even the right field that I’m supposed to be. I don’t understand it. So heavy I don’t have funding for the degree, so I might just leave it right here these six months before things get worse.” (P3)*

Another participant when asked about a challenge affecting her mental health shared that funding was the biggest because she did not have the financial backing of her parents as she did in her undergraduate degree.

*“I think a big one would have been finances because in my undergrad my family was supporting me in paying my school fees and everything, but I was given an out, not really an ultimatum, but I was told to say if I’m going back for my honours they are not going to sponsor that I need to find a way. To pay off my accommodation and studies and everything. So that is the main, you know, challenge for me questioning a lot of things at the beginning of the year...”*

A participant who had a sponsor also shared about the pressure of keeping that funding.

*“And you also have this pressure of doing well because you don’t want to repeat the same mistake or failing. I mean, if your sponsor gave you another chance, you also feel like you’re on thin ice like, this is your last chance to prove that you are worth my money...” (P7)*

#### **4.3.3 THEME 4: COPING MECHANISMS IMPLEMENTED TO HELP DEAL WITH MENTAL HEALTH CHALLENGES.**

All participants in this study had some form of coping mechanism, some more healthier than others. These are methods which were shared and according to the participants, helped them to live with their mental health challenges during the COVID-19 pandemic in 2019-2021. The sub-themes identified include the role of family and social support, the use of substances as a coping mechanism, suppression and ignoring symptoms of mental health challenges and excessive sleep.

#### **4.3.3.1 The role of family and social support in promoting students' mental health**

All 8 participants mentioned the role of family, although there were mixed opinions shared about the role of family, four out of eight participants shared that support from family made their challenges slightly better. A participant who had previously shared that her family gave her an ultimatum that should she choose to continue with a post graduate degree they would not be liable for her funding shared that her family was supportive of what she does. This suggests that support is not just financial.

*"...the type of family I have, all these are people that surround me, my community. They are quite supportive in whatever it is anyone decides to do..." (P8)*

Another participant who had previously shared about her parents not being able to support her financially shared that she received other forms of emotional support through her parents calling to check on her.

*"Any other year had this happened I know for a fact my dad would be like okay cool that's fine um we'll pay for your rent, at least in the meantime try applying for bursaries, if you can't, then we'll make a payment plan with Wits. It would have been there, but that was not there 2021 at all, because bekukubi (it was bad), it was so bad. All they did was just make sure they check up on me. Um they tried to support me every single week with like petty cash." (P3)*

Two other participants shared having received support specifically from their mothers and one of the two participants shared that COVID-19 restrictions made her postgraduate year much better.

*"My mom was there, so having the support of of family next to you. It was, I think, funny enough, the COVID regulations made my my my postgrad much better." (P1)*

The other participant shared that...

*"So, my mom was very supportive, but she was very supportive. Everyone was very supportive because they knew that the industry I wanted to go in, it's a very competitive industry." (P7)*

Coping mechanisms are highly influenced by the support of family, friends, and the community (Babicka-Wirkus et al., 2021; Fawa et al., 2020). Therefore drawing from these

responses the research argues that the participants who had family support copped better in comparison to those who did not have family support.

#### **4.3.3.2 The use of substances and partying as a coping mechanism.**

Substance use is a coping mechanism employed by many students in order to suppress their mental health challenges (Van Der Mewer et al., 2020). Substance use is a dysfunctional coping mechanism as it can lead to risk behaviour and often provides only a short-term relief from mental health conditions which could lead to other forms of risky behaviour (Van Der Mewer et al., 2020). Studies additionally prove that those who adopt dysfunctional coping mechanisms such as substance use tend to have a lower resilience score than those with adaptive coping mechanisms (Van Der Mewer et al., 2020). Three participants shared that they used partying and drinking as a method of coping, one participant shared that she just wanted to be around people who were not necessarily going through the academic stress she was experiencing such that conversation would be centred around anything but studies.

*“I went out with people that weren't serious. If that can make sense, like you know when you wanna just go to people that are not gonna ask you about work not gonna ask you about school. Not gonna ask you about your dreams and goals. You just wanna sit those people and and just lost and go home after like it became nothing way. I just wanted to hang out with people that didn't care about those kinds of things and that would release me. You start drinking more, you start talking more like you just start doing things where you feel like admin” (P1)*

Another participant shared very similar sentiments with participant one regarding wanting to occupy her thoughts with anything else.

*“I just turned to earthly things I like to call them and into zomhlaba (worldly things), which will groove every now and then. I go outside, drink and entertain boy all of this, just anything to not make me remember or feel what was happening in my life.” (P3)*

Another participant also added that they started consuming more alcohol.

*“Oh, I was drinking. Especially after, after what's this after the first hard lockdown, I think. I was drinking quite often. I was drinking quite often after that.” (P2)*



#### **4.3.3.3 Engaging spirituality and religion to find meaning.**

The COVID-19 pandemic created a lot of questions around the existence of a higher power and studies show that spirituality plays a crucial role in helping adults who live with mental health disorders to cope better (Rathakrisnan et al., 2022). Spirituality and religion are centred around a higher power, the concept that everything happens for a reason even though the reason is unknown, and it also provides a sense of hope. Four out of eight participants shared having turned to their spirituality and religious beliefs which helped them to cope, some even argued that the lockdown gave them more time to spend with a higher power.

*“For myself, I really drew closer to God I was like, you know what, the best thing to do right now is to believe in you is to trust in you, there's a lot going on. I can't rely on my own strength to get through this so walk with me, you know, and prayer was really something that kept me positive because you knew that you were not alone and just talking to him really made me feel a lot better.” (P7)*

A participant shared that she had more time to spend on her spirituality.

*“I should have mentioned first, prayer like funny enough in the midst of all of this, my relationship with God like grew stronger. So, I could say spirituality or religion played like a crucial role in just giving me hope and motivation in that like I'm placed in this place not by mistake, but God is with me. He needs me here and he'll see me through.” (P4)*

Another participant shared that even other people around her played a crucial role by praying for her.

*“And I'm from a Christian background. You know, I'm a Christian myself. So, everybody was just praying for me, you know, and everything...” (P8)*

Although churches were closed due to lockdown restrictions, one participant went on a solo journey and engaged with her spirituality as she would if church was open.

*“I try by all means to always go to churches as well, law is so that demanding that the things that you just submit Monday that takes so much time on Sundays and with them being six hours long, didn't have the time for that. But I made sure uguthi (that) every night ngiyakhuleka (I pray) with my candles and my garments at least just to be near to God and I stopped doing, or limited other earthly stuff then this year.” (P3)*

#### **4.3.3.4 Sleep as a coping mechanism to suppress mental health challenges.**

Sleep is deemed as a positive coping mechanism as it provides students with rest which leads to better thinking and reasoning. Sleep however, when done excessively may lead to missing lectures, submissions and lessen study time which could hinder academic success. In addition, when done excessively, it could also be a symptom of an underlying mental health condition (Zhang et al., 2018). When asked about their coping mechanisms a participant shared that they would sleep and that it is still a coping mechanism which they employ even now.

*“Sleep. Sleep was one of them that time, and even now, a good one for me, has always been working out I've always I've always done very well when I'm working out, I hardly struggle with a lot of stuff when I'm working out and so it would be sleep, working out.” (P2)*

Other participants referred to sleep more as a method of suppressing their mental health challenges.

*“But in sense in the sense of hoping I think sleep. Yeah, became my my escape. So, whenever I feel like everything's just getting very overwhelming, I'm I'm getting anxious and I'm getting stimulated or really stimulated. I'll just take a nap. And when I wake up, my head would be calm” (P6)*

And...

*“I'd just switch it off and just go back to sleep. I'll miss classes. Um I missed tutorials. I'll try to submit every now and then” (P3)*

And...

*“You wanna just be in a cool, dark place and spend the whole day sleeping and not doing anything.” (P5)*

#### **4.3.4 THEME 5: CHALLENGES WITH UNIVERSITY PSYCHOSOCIAL SERVICES**

Institutions of higher learning have made it a priority to offer psychosocial services however, students still find themselves battling mental health challenges. Participants although being able to identify challenges in their mental health that did not translate in the utilisation of psychosocial services offered by the university which is a common trend among university students (Nash et al, 2017). Often the challenge with mental health services is access and the stigma attached to the services and this was a common theme in this study. However, it is

important to note that participants received information regarding psychosocial services via email but did not engage it.

#### **4.3.4.1 Access to mental health services**

All eight of the participants were aware of the psychosocial services offered by the university through the Counselling and Career Development Unit (CCDU) however, only two of the eight participants had used the services and of the two, one had used the services during the years 2019-2021. A participant shared that although information is shared regarding the CCDU via email, the services still felt out of reach.

*“I think something like the CCDU we know that it's there, right? As a Wits student, you get the emails, you get everything. You know that it's there, but it seems so like one out of reach. It just seems like you know those emails you get from clothing stores or those emails you you just those things that are almost bothering me, you don't know how this can help you?” (P1)*

Another participant shared similar sentiments with regards to the communication:

*“I know that they send out these emails informing you that to do is open or not, but I I I didn't quite know if the city was even operating at that time. So, I think maybe better communication in regards to what was happening the the office CCDU was offering and stuff like that, yeah.” (P6)*

A participant, even though they were aware of the services, the participant shared that they felt out of reach.

*“Yes, CCDU I just, I don't know, maybe they felt very far like ohh these are the ones who are to help us. They cannot really relate. I don't know. Yeah, I can't put a finger on as to why I didn't go but yeah.” (P6)*

For another participant, they did not want to add to the perceived burden on the CCDU to cater to the entire student population.

*“And I could imagine the line, the list of people who want to see people who can assist with what they're going through with their mental health. So that wasn't even an option to add a list... to add my name to the list.” (P7)*

When it comes to mental health services in Africa 46% of countries do not have a standalone mental health policy and the proportion of mental health practitioner to service user is 1.4

mental health practitioners per 100000 people (Sankoh, 2018). Although statistics are not available for the ratio of mental health practitioner at the university to students, with these numbers it is arguable that the students' perceptions of a burden on mental health is correct.

#### **4.3.4.2 Perceptions of psychosocial support services offered by the university.**

Two participants expressed their reservations about utilizing the services because of the stereotypes and stigma around university psychosocial interventions.

*“So yeah, I didn't try out any psychosocial services around campus, and that's because there's, like, stereotypes man around campus.” (P4)*

The same participant shared that from her first year there was already a stereotype that the services do not work and this was based on secondary experiences shared by friends, the participant therefore, did not bother.

*“This is this is something I knew from, like first year, o guthi CCDU is not helpful. You know, if you go there really, it's a waste of time. You know, it's not that effective. You know, some of my friends have tried to go there and consult and they it, it hasn't helped in any way. So, I was just like, I let me not even bother, you know?” (P4)*

Another participant shared that they think the services offered could be better if they were informalized.

*“But I think they could possibly, you know, look into help outside of the. Office, you know, outside of a formal setting to say, OK, if you're going through a struggle, go to the CDU office or call this number.” (P8)*

The same participant added...

*“...the people who work for them to infiltrate, to find themselves in the hostels. Amongst the people speaking to them, you know, in that casual setting. Cause another thing I believe that might turn people away is the fact that I have to go to an office...”*

#### **4.3.4.3 No perceived need for mental health services**

Three out of eight participants shared that during their postgraduate degree regardless of the symptoms they shared, they did not perceive the need for mental health services. Whilst this is a common trend among university students to not use psychosocial services provided to them for various reasons, another contributing factor was aspects of the SBWS (Castelin &

White, 2022; Nash et al., 2017). Some participants diminished their mental health challenges when relating to others and for another participant there were feelings of normalcy around mental health challenges. This is a demonstration of what Collins (2000) terms controlling images which is the idea of normalising adversity and in this case it was done so participants can complete their degree.

*“I didn't think I had a problem honestly and and the reason I didn't think I had a problem is because you sit down with your peers in varsity and you guys are all feeling the same thing so you just like haibo. um there's nothing out of the ordinary for me. We're all going through this, you know, I'll be fine.” (P2)*

Another participant shared the same idea that mental health challenges had to be extreme to seek help.

*“So throughout I never, I never felt like I'm that bad. You know how many people we have an image of? OK. These are mental cases. These are people who are very serious. Yeah. So, I guess I had that type of idea to say no, I'm not that. Bad of a case? You know I'm not. I'm not suicidal. I'm not feeling anything bad, so why should I call these people? Why should? I go to them. I guess that could have been my prejudice as to why I didn't go.” (P8)*

A participant shared about the aspect of time and felt there was no time to give towards going to therapy.

*“And there was no time for therapy. I didn't think I would need therapy cause CCDU there is a department that this where they deal with these things...” (P7)*

#### **4.3.4.4 Fear of the unknown**

Two of the participants shared that they were not exactly sure of what services were offered even after having been at the university for their undergraduate. A participant shared that they did not know whether using the services would appear on their record or not.

*“...What it looks like when I get there, what's going to happen? Who am I gonna talk to 100%? It's literally just that thing of, I don't know...” (P1)*

The same participant added.

*“I don't want that when I go and apply, they're gonna ask have ever been here, I don't want that. I don't want to go to a workplace and it's on my record that I was once admitted.” (P1)*

Another participant added.

*“But I think maybe if I had been, if I'd known more because I said I didn't know what was happening in CCDU You I know that they send out these emails informing you that to do is open or not, but I I I didn't quite know if the city was even operating at that time.”(P6)*

#### **4.4 CHAPTER SUMMARY**

This chapter provided the presentation and discussion of findings when attempting to reach the objectives set out. Perceived challenges of being a postgraduate during COVID-19 period 2019-2020 were discussed. Mental health challenges encountered were explored and the different coping mechanisms. Challenges with university psychosocial services were also explored. Chapter five will present a summary of the findings, conclusions and recommendations.

## **CHAPTER FIVE**

### **MAIN FINDINGS, CONCLUSIONS AND RECOMMENDATIONS**

#### **5.1 INTRODUCTION**

The aim of the study is to explore the experiences of Black female postgraduate students with mental health during the spread of COVID-19, 2019-2021. This chapter presents the main findings of the study, conclusions, and recommendations. The research question which guided the study was: What are the experiences of Black female postgraduate students with mental health during the spread of the COVID-19, 2019-2021?

#### **5.2 KEY FINDINGS**

##### **5.2.1 Perceived challenges with being a postgraduate student 2019-2021**

One of the perceived challenges with being a student during the COVID-19 period in 2019-2021 was the transition to online learning. Participants shared mixed perceptions around online learning some positive and some negative. Those who expressed positive experiences shared that this method of learning allowed them to learn at their own pace and another participant shared that it allowed for family to be more involved in their learning process. Some participants also shared that there was not much of a transition because they started with online learning in their final year when COVID-19 had started to spread in South Africa. Other participants shared negative perceptions about online learning, expressing challenges such as difficulty with reaching lectures and difficulty learning without someone in person. Participants expressed that there was a greater workload and that testing methods were changed and perceived as more difficult, participants assumed that it was to mitigate possible cheating.

Most participants in some or other way expressed difficulties with the physical restrictions that came with COVID-19. The restrictions negatively affected those who were doing postgraduate degrees which required some form of practical or group work. Participants shared difficulties in accessing and utilising campus facilities such as laboratories and libraries which also determined access to Wi-Fi for some students. Physical restrictions also existed among students which made it difficult to incorporate and form academic relationships with other students within the same postgraduate degree.

Participants also shared challenges with their living arrangements, some participants had to live between home and university residence, some had to move back home fully, and some

had to stay at university residence. All these different living conditions somehow had an impact on the academics of the participants and largely on their mental health. Participants shared how their homes, residences and communities were not conducive to learning due to noise pollution, loadshedding, poor service delivery and having to share a space with other students who were in different phases of their academic journey. Closely related to living arrangement was another challenge raised around fulfilling gender roles through domesticated tasks. Participants shared different experiences, some participants were expected to cook, clean, and help with babysitting and still have to attend classes. Other participants had completely different experiences as their families did not expect of them to do any household duties but to just focus on their academic work. This theme helped with achieving objective four which was to understand how race and gender shape the experiences of mental health among post graduate students and objective one which was to explore the impact of changes associated with COVID-19 to mental health challenges among Black female postgraduate students.

### **5.2.2 Mental health challenges experienced**

The main aim of this study was to explore mental health experiences of Black female postgraduate students. Although only one participant was officially diagnosed by a psychiatrist all the other participants shared symptoms associated with mental health conditions. The mental health challenge expressed by majority of participants was feelings of anxiety around death and the loss of loved ones due to COVID-19. Participants expressed anxiety around contracting the virus and the fear of death as that is what they were exposed to on multiple forms of media. Two participants shared these anxieties based off of having lost loved ones and they also expressed challenges with grieving.

Another common response was regarding symptoms associated with depression. Two participants who are qualified social workers explained that they were not officially diagnosed but knew the symptoms and were able to identify that they are depressed. Another participant who was officially diagnosed explained that their mental health challenges were further exacerbated by their living conditions, this is the same participant who had to juggle domesticated tasks and academic work. Other participants shared that the hard lockdown caused for them to fall into depression.

Another crucial element affecting mental health was stress associated with finances. Participants shared experiences of being under pressured to keep their sponsor. Two other



participants shared that they had no financial support from their parent, and this impacted negatively on their living arrangements ultimately affecting their mental health negatively. Closely related was the fear of unemployment as most companies were closing down and some downsizing, the lack of practical skills and experience therefore resulted in participants having no confidence in their employment prospects. This theme aimed to achieve objective one and two which were to explore the impact of changes associated with COVID-19 to mental health challenges among Black female postgraduate students and to establish impact of mental health challenges associated with COVID-19 on academic progress of Black female postgraduate students.

### **5.2.3 Coping mechanisms implemented to help deal with mental health challenges.**

All eight participants had some or other coping mechanism in place to help them with their mental health. The most commonly shared answer when it comes to coping mechanisms was the role of family support. Participants shared about their families supporting decisions to continue with their post graduate degrees and providing other forms of support such as calling to check in and see how they are doing. Another commonly shared answer was turning towards spiritual practices and depending on a higher power to sustain them. These participants shared about spending more time in prayer and other religious practices despite physical restrictions around fellowshipping. Some participants even added that the hopelessness surrounding COVID-19 and the time spent indoors forced them to look nowhere else but to a higher power.

Other coping mechanisms employed by participants in this study included the use of substances and partying, participants shared that they wanted some form of release and to spend time with people who would not talk about academics. Another coping mechanism was drinking alcohol, a participant shared that their intake had increased after the first hard lockdown, and another used the alcohol to numb the pain of symptoms associated with their mental health condition. More than half of the participants shared that they turned to sleep as a coping mechanism, one participant shared that even now they still turned to sleep.

## **5.3 CONCLUSIONS**

Mental health is an important aspect of health which has gained a lot of attention over the past five years. Institutions of higher learning are spaces for students to advance themselves academically and with this advancement comes multiple challenges which hinder academic success, and these challenges include mental health. Mental health services have not always

been inclusive and accessible and as the universities move towards prioritising mental health it is important that previously disadvantaged groups are given priority particularly in a country with a history of segregation, inequality and oppression.

This research study focused particularly on Black female postgraduates in order to reveal the complexities surrounding their experiences with mental health. The study found that the idea of mental health does not exist in isolation but rather that there are multiple contributing factors. The COVID-19 pandemic further complexified mental health experiences as it added an element of heightened anxiety around getting infected or dying. The study found that mental health is shaped by environmental factors, living arrangements, support by loved ones and finances.

In light of the challenges presented the participants in the study employed coping strategies around spirituality, substance use, sleep and family support. Despite universities having made efforts to provide psychosocial services however, the service utilisation in comparison to the need remains low. The study therefore concludes that there is a need for the university psychosocial services to hire more staff in order to have a greater reach in the student population. Furthermore, psychosocial services need to be informed by policies that adopt an intersectional approach such that mental health services become more inclusive.

## **5.4 RECOMMENDATIONS**

Drawing from the findings and conclusions discussed, the study makes the following recommendations:

### **5.4.1 Recommendations for university psychosocial services**

- Hire more therapist such that the services are accessible to everyone on demand without a long waiting period. Each faculty should have their own psychosocial services specialised to assist students of that faculty; this could perhaps help to not only assist the therapist at the CCDU with the workload but to also increase more campus visibility.
- Improve communication methods because emails are easily ignored and not taken seriously as shared in the study. The CCDU could make use of social media platforms such as WhatsApp, X, TikTok and Facebook as that is where most students spent their time.

- Improvement on education about mental health such that students are aware of symptoms associated with mental health. In relation to education on mental health is education on what services are offered and what the student should expect.
- Utilize final year or post graduate student in counselling fields of study such as Social Work and Psychology. This will be beneficial in providing those students with practical experience and assist with reaching more students.

#### **5.4.2 Recommendations for policy change**

- Mental health policies should be developed with previously disadvantaged groups in mind and an understanding of intersectionalities as mental health does not exist in isolation. Therefore, to address mental health is to address issues of unemployment through job creation, to improve service delivery and to address loadshedding.

#### **5.4.3 Recommendations for future research**

- The sample size of this study was significantly small due to challenges associated with recruiting participants who were no longer in the university system therefore, the recommendation for future studies is to have a larger sample size.
- In this study not all faculties were represented therefore, the recommendation is for future studies to sample all faculties.
- A limitation to the study was that the researcher was not able to see the participant as she would have been able to in face-to-face interviews and this was due to participants staying far apart from one another and the anxiety around the spread of the Corona Virus thus limiting the ability of the researcher to see the participants body language and facial expressions. The recommendation for future studies is to conduct physical interviews.

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## APPENDIX A : PARTICIPANT INFORMATION SHEET

Dear Participant,

My name is Sphiwe Mashiane, a Social Development MA candidate at the University of the Witwatersrand. As part of the requirement for the degree, I am required to conduct a research study and my research topic is **‘The experiences of Black female postgraduate students with mental health during the COVID-19 2019-2021: The case of the University of the Witwatersrand’**.

It is hoped that the information gathered from this study will contribute towards understanding mental health in institutions of higher learning.

I, therefore, wish to invite you to participate in my study. Participation involves availing yourself at your preferred time and place for an in person or virtual interview, which will approximately last for 40-60 minutes. Your participation is voluntary and refusal to participate will not be held against you in any way. If you agree to take part, we will arrange a time and place to meet, for a virtual interview. You may withdraw from the study at any time, and you may refuse to answer any question that you feel uncomfortable with answering.

I would appreciate it if, with your consent, to record the interview, the purpose of the recording will be to solely with the purpose of gathering accurate data, no one other than my supervisor will have access to the recording. The recording and interview transcripts will be kept for two years following any publications or for six years if there is no publication from the study.

As the interview will include sensitive issues, there is the possibility that you may experience some feelings of psychological and emotional distress. If there is any psychological trauma or harm you experience during the research study, you may contact CCDU at 017 717 9140 or the Wits crisis line which is available 24/7 at 0800 111 331. Should you be an Engineering and Built Environment student then Bathandwa Mtshikwana will be ready to receive you at the Academic Development Unit for Counselling 011 717 7023

Please feel free to ask any questions regarding the study; I shall answer them to the best of my ability. For more information I may be contacted on 074 249 8390 or email [1612460@students.wits.ac.za](mailto:1612460@students.wits.ac.za) or contact my supervisor, Dr Samkelo Bala on 078 665 7731 or email her at [Samkelo.Bala@wits.ac.za](mailto:Samkelo.Bala@wits.ac.za). If you have any concerns or complaints about the ethical procedures of this research study, you are welcome to contact the University Human

Research Ethics Committee (Non-Medical), telephone +27(0) 11 717 1408, email hrecnon-medical@wits.ac.za.

Your participation will be greatly appreciated.

Yours sincerely,

Sphiwe Mashiane.



**APPENDIX B: CONSENT FORM**

**The experiences of Black female postgraduate students with mental health during the COVID-19 2019-2021: The case of the University of the Witwatersrand.**

I hereby consent to participate in the research study. The purpose and procedures of the study have been explained to me.

I understand that:

My participation in this study is voluntary and I may withdraw from the study without being disadvantaged in any way. YES/ NO

I may choose not to answer any specific questions asked if I do not wish to do so. YES/ NO

There are no foreseeable benefits or risks associated with participation in this study. YES/ NO

My identity will be kept strictly confidential, and any information that may identify me, will be removed from the interview transcript. YES/ NO

A copy of my interview transcript without any identifying information will be stored permanently in a locked cupboard and may be used for future research. YES/ NO

I understand that my responses will be used in the write up of a research project and may also be presented at conferences, in book chapters, journal articles or books. YES/ NO

Name of Participant: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

## **APPENDIX C: INTERVIEW SCHEDULE**

The experiences of Black female postgraduate students with mental health during the spread of COVID-19 2019-2021, the case of the University of the Witwatersrand.

### **Questions**

May you please tell me a little bit about yourself, where are you from?

Why did you choose to do your post graduate degree?

Where do you live now?

What are some of the challenges you experience with being a postgraduate student?

How has the COVID-19 impacted you?

What are some of the mental health challenges which you face?

What are some of the coping mechanisms which you have adopted?

Have you visited a mental health practitioner in the past 12 months?

How has your experience with mental health been now that you are doing postgrad?

What are some of the ways you think the university could help you cope?

**APPENDIX D: LETTER REQUESTING PERMISSION TO CONDUCT  
RESEARCH AT THE UNIVERSITY OF THE WITWATERSRAND**



University of the Witwatersrand,  
School of Human and Community Development  
Social Work Department

Faculty Registrar

Hale Modau

1 Jan Smuts Ave

Wits University

Johannesburg

2001

28 September 2022

Dear Sir/Madam,

Re: Permission to conduct research at University of the Witwatersrand

My name is Sphiwe Mashiane

I am studying for a master's in social development in the School of Human and Community Development at the University of the Witwatersrand. I am seeking permission to do research at the University of the Witwatersrand.

I am conducting research on the experiences of Black female postgraduate students with mental health during the COVID-19 pandemic 2019-2022, the case of the University of the Witwatersrand. The COVID-19 global pandemic has forced institutions of higher learning to switch to emergency remote learning and for many postgraduate students internationally and nationally that has meant starting their postgraduate studies online.

Research has shown the need for universities to support the transition from undergraduate to postgrad as this is a major transition into academia. Research has also revealed that the struggle with mental health is increased with this transition and additionally with the COVID-19 pandemic.

The changes brought by the COVID-19 pandemic have further facilitated the increase of mental health challenges globally (Cullen, 2020; Gavin, 2020; Pfefferbaum & North, 2020). In South Africa, the challenges associated with mental health were at peak, more especially among students in the institutions of higher learning (Eloff & Grabam, 2020). While research on mental health during COVID-19 pandemic has been conducted often neglected is the intersectionalities of race and gender which play a crucial role in the experience of mental health during the COVID-19 pandemic, hence researching the experiences of Black female postgraduate students with mental health during the COVID-19 pandemic 2019-2021.

The research will entail collecting data from post graduate students in the university.

If they agree the data will be collected using individual interviews, these interviews will be semi-structured consisting of 10 open ended questions and the interviews will be expected to run for 40-60 minutes to allow participants to share their experiences fully.

Audio recording will be used to record all interviews using a Smartphone, this will assist the researcher in transcribing accurately and then data of the recordings will then be kept on a cloud for safe keeping and destroyed after 6 years. This tool will be used for both individual interviews and computer mediated interviews.

Another research method which will be used in the study is the use of computer mediated interviews on Microsoft Teams or Zoom for participants that do not stay near campus. The

researcher will check the availability of participants and schedule interview times with them, then send a unique link to the participants a week prior the interview.

Participants will be asked to give their written consent before the research begins. Their responses will be treated confidentially, and identities will be anonymous. Individual privacy will be maintained in all published and written data resulting from the study. The research participants will not be advantaged or disadvantaged in any way. They will be reassured that they can withdraw their permission at any time during this study without any penalty. There are no foreseeable risks in participating in this study. The participants will not be paid for this study, however, should they need data to participate in interviews it will be provided.

I, therefore, request permission in writing to conduct my research at the University of the Witwatersrand.

Please let me know if you require any further information. I look forward to your response as soon as is convenient.

Yours sincerely,

Sphiwe Mashiane

Sphiwe

074 249 8390

1612460@students.wits.ac.za

Dr Samkelo Bala

0117174094

Samkelo.Bala@wits.ac.za

## APPENDIX E: ETHICAL CLEARANCE CERTIFICATE



### **SCHOOL OF HUMAN AND COMMUNITY DEVELOPMENT ETHICS COMMITTEE** **CONSTITUTED UNDER THE UNIVERSITY HUMAN RESEARCH ETHICS COMMITTEE (NON-MEDICAL)**

**CLEARANCE CERTIFICATE**

**PROTOCOL NUMBER: SW22/07/08**

**PROJECT TITLE**

The experiences of Black female postgraduate students with mental health during the spread of COVID-19, the case of the University of the Witwatersrand

**INVESTIGATOR**

**MASHIANE SIMPHWE**

**SCHOOL/DEPARTMENT OF INVESTIGATOR**

SOCIAL WORK

**DATE CONSIDERED**

14 September 2022

**DECISION OF THE COMMITTEE**

Approved unconditionally

**RISK LEVEL**

LOW RISK

**EXPIRY DATE**

29 September 2025

**ISSUE DATE OF CERTIFICATE** 29 September 2022

**CHAIRPERSON**

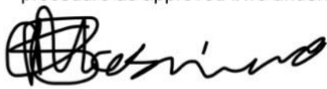
  
(DR L PETERSEN)

cc: Supervisor: Dr S Bala

**DECLARATION OF INVESTIGATOR**

To be completed in duplicate and **ONE COPY** returned to the Chairperson of the School/Department ethics committee.

I fully understand the conditions under which I am authorized to carry out the abovementioned research and I guarantee to ensure compliance with these conditions. Should any departure to be contemplated from the research procedure as approved I/we undertake to resubmit the protocol to the Committee.



Signature

Date

30/09/2022

PLEASE QUOTE THE PROTOCOL NUMBER ON ALL ENQUIRIES

## APPENDIX F: CALL FOR PARTICIPANTS TO JOIN THE STUDY



**YOU ARE INVITED TO PARTICIPATE IN A RESEARCH STUDY, COME SHARE YOUR EXPERIENCES WITH ME.**



### DESCRIPTION

AS PART OF MY MASTERS IN SOCIAL DEVELOPMENT, I WILL BE RESEARCHING THE EXPERIENCES OF BLACK FEMALE POST GRADUATE STUDENTS WITH MENTAL HEALTH DURING THE COVID-19 PANDEMIC 2019-2021.



### PURPOSE OF THE STUDY

TO GAIN AN IN-DEPTH UNDERSTANDING OF THE INTERSECTIONALITIES BETWEEN RACE & GENDER AND HOW THEY SHAPE MENTAL HEALTH EXPERIENCES DURING THE COVID-19 PANDEMIC. THE STUDY WILL FOCUS ON SOME OF THE MENTAL HEALTH CHALLENGES ENCOUNTERED, COPING MECHANISMS & HOW YOU'D LIKE FOR THE UNIVERSITY TO SUPPORT YOU.



### REQUIREMENTS

- WITS POST GRADUATE STUDENT
  - BLACK
  - FEMALE
  - 18 YEARS & OLDER
- HAVE EXPERIENCED MENTAL HEALTH CHALLENGES DURING POST GRADUATE DEGREE IN THE PAST 3 YEARS
- HAVE TIME FOR A 30-45 MINUTE INTERVIEW



**CONTACT SPHIWE: 068 391 8750**  
**SPHIWE.MASHIANE@WITS.AC.ZA**