



PROJECT TITLE:
Social Exclusion and Mental Health Challenges:
Exploring the experiences of Mental Health Challenges among University Students from
Marginalised Backgrounds

NATASHA SMIT

SMTNAT020

A Minor Dissertation Submitted in Partial Fulfilment of the Requirements for the
award of the degree of Master of Social Science in Social Development

Faculty of the Humanities

University of Cape Town

2020

The copyright of this thesis vests in the author. No quotation from it or information derived from it is to be published without full acknowledgement of the source. The thesis is to be used for private study or non-commercial research purposes only.

Published by the University of Cape Town (UCT) in terms of the non-exclusive license granted to UCT by the author.

TABLE OF CONTENTS

CHAPTER ONE: INTRODUCTION	1
1.1. INTRODUCTION	1
1.2. STATEMENT OF THE PROBLEM	1
1.3. RATIONALE AND SIGNIFICANCE OF THE STUDY	4
1.4. RESEARCH TOPIC	5
1.5. MAIN RESEARCH QUESTIONS	5
1.6. RESEARCH OBJECTIVES	5
1.7. MAIN ASSUMPTIONS	6
1.8. CLARIFICATION OF TERMS	6
1.9. ETHICAL CONSIDERATIONS	7
CHAPTER TWO: LITERATURE REVIEW	8
2.1. INTRODUCTION	8
2.2. REVIEW OF LITERATURE	8
2.2.1 Inequality in South Africa	8
2.2.2 Inequality in tertiary educational institutions	10
2.2.3.1 Mental health challenges	10
2.2.3.2 Financial difficulties	12
2.2.3.4 Race	15
2.2.3.5 Social exclusion	16
2.3. THEORETICAL FRAMEWORK	17
Diagram 1: Theoretical Framework Interplay	17
2.3.1. Social Exclusion Theory	19
2.3.2. Stress Vulnerability Model	21
2.3.2. Interplay	23
2.4. POLICY AND LEGISLATION	24
2.5. CONCLUSION	27
CHAPTER THREE: METHODOLOGY	28
3.1. INTRODUCTION	28
3.2. RESEARCH DESIGN	28
3.3 POPULATION AND SAMPLING	29

3.3.1. Study Population	29
3.3.2. Sampling Technique and Characteristics	30
3.3.3. Sampling Procedure	30
3.4. DATA COLLECTION	31
3.4.1. Data Collection Method	31
3.4.2. Data Collection Instrument	31
3.5. DATA ANALYSIS	31
3.6. DATA VERIFICATION	32
3.6.1 Credibility	33
3.6.2 Transferability	33
3.6.3 Dependability	33
3.6.4 Confirmability	34
3.7. LIMITATIONS OF THE STUDY	34
3.8. REFLEXIVITY	34
3.9. CONCLUSION	35
CHAPTER FOUR: FINDINGS	37
4.1. INTRODUCTION	37
4.2 BIOGRAPHICAL PROFILE OF THE PARTICIPANTS	37
4.3. DISCUSSION OF FINDINGS	41
4.3.1. Experiences of familial socio-economic hardship before coming to university	42
4.3.1.1 Lack of essential resources	42
4.3.1.2 Parents inability to secure permanent work	43
4.3.2. Effects of familial socio-economic hardship on transition from school to university	45
4.3.2.1 Securing funding	45
4.3.2.2 Adjusting to a new environment	47
4.3.2.3 Black Tax	48
4.3.3. Effects of persisting familial socio-economic hardship and stress on mental health	50
4.3.3.1 Stressful life event	50
4.3.3.2 Vulnerability	52
4.3.4. Effects of mental distress on academic performance	54
4.3.4.1 Struggling to concentrate	54
4.3.5. How students cope with the mental health challenges and stress	55

4.3.5.1 Stigma surrounding mental issues	55
4.3.6. Solution students believe should be implemented in order to address social exclusion and mental illness within universities	57
4.3.6.1 Student Wellness services	57
4.3.6.2 University environment	59
CHAPTER FIVE: CONCLUSIONS AND RECOMMENDATIONS	61
5.1. INTRODUCTION	61
5.2. SUMMARY OF MAJOR FINDINGS	61
5.2.1. To determine the students' experiences of familial socio-economic hardship before coming to university	61
5.2.2. To understand how the experiences of familial socio-economic hardship affect the student's transition from school to university	61
5.2.3. To ascertain if the persisting experiences of familial socio-economic hardship and stress affect student's mental health	62
5.2.4. To understand how the students' experiences of mental distress affect their academic performance	62
5.2.5. To determine how students cope with mental health challenges and stress	63
5.2.6. To determine which solutions students believe should be implemented in order to address social exclusion and mental illness within universities	63
5.3. RECOMMENDATIONS	64
5.4 CONCLUSION	65
REFERENCES	67
Appendix A -Consent Form	71
Appendix B -Interview Guide	73

ABSTRACT

The purpose of this qualitative study was to explore the experiences of mental health challenges among university students from marginalised backgrounds. The intention was to understand the effects of a university student's socio-economic background and circumstances on their mental health, as well as their access to the necessary mental health resources and services. South Africa continues to be plagued by high levels of poverty and inequality. The legacy of Apartheid persists post 1994, and many black South Africans still face financial and social exclusion (Marais, 2013). Poverty and inequality inhibit young people from having the material and non-material resources they need in order to complete university successfully (Rothmann and Van Zyl, 2012). When focusing on students' mental health challenges, we see that the transition from high school to university is a challenging time and without the relevant support structures, it can lead to an individual experiencing high levels of anxiety and other mental health challenges. The main objectives included determining the ways in which a student's financial and social exclusion affect their transition to university, mental health and the way in which they cope with stress. Ward's (2009) definition of social exclusion and Gamble and Brennan's (2005) stress vulnerability model were used as the lens' to examine the links between socio-economic deprivation and their experiences of mental health challenges.

Individual in-depth interviews were conducted with 18 students from marginalised backgrounds enrolled at an institute of higher learning. All 18 students were receiving financial assistance in order to cover their university costs. A semi-structured interview schedule was used as the instrument to guide the interviews. This instrument contained open-ended questions and enabled the researcher to gain a detailed picture of a participant's beliefs and experiences.

The findings reveal that since inception, NSFAS has played an important part in the transformation of the student population and addressing the inequality in South Africa. However, students from marginalised backgrounds continue to face unique socio-economic challenges at university and require support structures. The findings have also determined that the concept of black tax remains relevant and that the legacy of Apartheid still effects many young black South Africans. This material and non-material related stress renders a student prone to facing mental health challenges and their struggles to cope with their academics. Daily stress combined with

previous major life events and predisposed genetics, contribute to mental health challenges. It was also found that although there was still a stigma, most students still sought professional help.

Based on the findings of this study, it is recommended that universities need to involve students in finding practical, long-term solutions to the mental health crisis on campuses. It is also recommended that the university environment and staff be inclusive and also reflect the experiences of university students of colour. In addition, it was recommended that the government include higher learning institutes in their national policy regarding mental health in South Africa. The study aims to create further understanding and interest, as well as the need to better address these inequalities which manifest throughout a student's university life.

University of Cape Town

ACKNOWLEDGMENT

I would first like to thank my supervisor, Dr. Khosi Kubeka, for her constant support and guidance. Dr. Khosi Kubeka was always willing to listen and assist me when I needed, her experience and insight was extremely valuable to me. Thank you Dr. Khosi Kubeka for not only your intellectual support, but also your emotional support.

I would like to thank the University of Cape Town and the Department of Humanities for the opportunity to further my education. Thank you to all the staff members who assisted me throughout my Masters degree whether it involved administration, funding options or guidance.

I would like to thank the individuals who partook in my study. Thank you to all my participants who offered up their time to partake in this study and who were willing to open up and share their own personal experiences with me.

I would like to thank my friends and family for their encouragement, motivation and continuous support. Their emotional support was critical to the completion of my studies.

I am extremely thankful to all the above-mentioned individuals, departments and institutions. You made it all possible and I am eternally grateful. Thank you for the vital role each one of you played.

PLAGIARISM DECLARATION

This work has not been previously submitted in whole, or in part, for the award of any degree. It is my own work. Each significant contribution to, and quotation in, this dissertation from the work, or works, of other people has been attributed, and has been cited and referenced.

Signature:

Date: 22/12/2020

University of Cape Town

CHAPTER ONE: INTRODUCTION

1.1. INTRODUCTION

This chapter presents background to a qualitative study undertaken to examine the mental-health challenges and experiences among university students from marginalised backgrounds using the Social Exclusion Perspective and the Stress Vulnerability Model. A statement of the problem, and the rationale and significance of the study are presented in this chapter. The research topic, questions and objectives are also outlined. Lastly, the chapter also presents the main assumptions, clarification of terms and the ethical considerations of the study.

1.2. STATEMENT OF THE PROBLEM

South Africa continues to be plagued by high levels of poverty and inequality. The legacy of Apartheid still exists post the 1994 socio-political transformation and many black South Africans still face financial and social exclusion (Marais, 2013). Before 1994, black South Africans were forced into low skill and unskilled employment sectors given they received an inferior education (Gumede, 2015). Gumede (2015) emphasises that 350 years of Apartheid colonialism continue to plague South Africa with inequality and race so closely linked. When South Africa became democratic in 1994, the incumbent African National Congress (ANC) aimed to improve the lives of those living in poverty. Efforts included policy instruments such as the Reconstruction and Development Plan which aimed to alleviate poverty and address the shortage of social services (Marais, 2013). Despite these efforts there was no quick fix for the years of oppression and segregation, thus poverty levels kept on increasing into the late 1990s. The government released statistics revealing that the percentage of people living in poverty increased from 28% in 1995 to 33% in 2000 (Policy Coordination and Advisory Services, 2006). Marais (2013) states that the racial lines are also evident in South Africa's poverty and inequality levels. In 2005- 2006, 9.2% of the South African population was white yet accounted for 45% of total household income (Marais, 2013). This is eight times more than that of the black population, four times more than the coloured population and twice as much as the Indian and Asian population (Marais, 2013). Gumede (2015) refers to this as the metaphor of the "Two Economies". The First Economy is the part of the South African economy that is developed and is globally integrated (Gumede, 2015).

On the other hand, the Second Economy is marginalised, characterised by underdevelopment, consists of high unemployment levels and has weak social capital (Gumede, 2015). The inequality of the “Two Economies” manifests within all aspects of South African life including health care, education, housing and access to social services (Gumede, 2015). If an individual is born into a family in the “Second Economy”, this is likely to impact them throughout their childhood and youth. For an individual living in a marginalised community, the opportunities and resources they have will be limited. In terms of education, access to a quality school as well as managing the costs of transport, uniforms and stationery will also depend on the income bracket of individuals. This is similarly experienced in a university environment where securing tuition fees, accommodation, transport and food costs are a challenge.

Poverty and inequality prevents young people from having the material and non-material resources they need in order to complete university successfully (Rothmann, and Van Zyl, 2012). The majority of students tend to struggle with the transition to university because it is a time of major growth and change (Rothmann and Van Zyl, 2012). Poverty and inequality manifest within higher learning institutions and leads to some students not having the resources they need to better cope with these challenges (Rothmann and Van Zyl, 2012). These struggles include economic struggles and socio-cultural factors such as discrimination and a lack of support structures. This results in some students not coping with their academic work, failing subjects and ultimately dropping out. South Africa has one of the lowest graduation rates, approximately 15%, in the world. When analysing the racial breakdown of university graduates, it shows that race and inequality are again very closely linked (Letseka and Maile, 2008). Therefore the “graduation rate of white students is almost double that of previously disadvantaged groups” (Letseka and Maile, 2008:1). This is attributed to the lack of support systems and material resources mentioned above which are needed for students to cope with their studies and other forms of stress (Rothmann and Van Zyl, 2012).

The material resources required by students are funding for university fees, as well as paying for food, transport and accommodation (Bokana, 2010). Students whose parents cannot afford their university costs can secure funding through the National Student Financial Aid Scheme (NSFAS), in the form of a loan or a bursary. A NSFAS bursary covers a student’s tuition fees

and costs reflecting on their student statements (IEASA, 2009). If a NSFAS student is not accepted into campus accommodation which includes catering, they have to find private accommodation which is then not covered by NSFAS (IEASA, 2009). In addition to this, NSFAS only includes student household income which is below R350 000 and therefore does not include the “missing middle” (IEASA, 2009). Living costs are important in sustaining the necessary productivity levels while completing a degree. If these living costs cannot be met, a student may struggle with various issues, such as how to get to campus without money for transport, and struggling to concentrate without enough nutritious food (Bokana, 2010). Food insecurity is likely to affect a student’s academic performance due to this/her concentration and health being affected negatively; this has been identified as a major challenge among university students (Chewe et al., 2019). If a student struggles to buy food and afford other living costs, this adds to their stress and detracts their focus from attending classes and studying.

In addition to the importance of material resources, there are also non-material resources which are required in order for an individual to navigate life’s challenges and opportunities (Rothmann and Van Zyl, 2012). For example, an individual needs emotional support from friends and family in order to cope with stress and other issues. An individual may also have few social networks and formal connections (Bokana, 2010). This lack of access to networks can also manifest in the long term when a student completes their degree and is looking for an internship or employment. The lack of formal connections limits their connections when trying to break into the job market in South Africa where there is a very high unemployment rate (Bawa, 2019). Therefore, non-material resources such as support structures and upward mobility are also affected negatively by the presence of inequality. As mentioned previously, many students struggle to cope with the transition to university because it is a time of major growth and change. In order to cope with this big change, a student needs certain material and non-material resources to help them manage this stress. If this stress is not addressed and managed it can accumulate and lead to mental health challenges among university studies.

We see that the transition from high school to university is a challenging time and without the relevant support structures, it can lead to an individual experiencing high levels of anxiety and other mental health challenges (The South African Depression and Anxiety Group, 2017). A

report released by the Intuitional Reconciliation and Transformation Commission (IRTC) of the University of Cape Town in 2019, found that there were only four psychologists to attend to 27 000 students. Clearly there was a disparity between the demand for student wellness services and the effort made to meet this demand. The South African Depression and Anxiety Group (SADAG) released a report in 2018 which stated that one in four university students are likely to be diagnosed with depression and anxiety-related challenges. In addition to dealing with the transition to university, some students also have stress related to their socio-economic challenges.

The transition from school to university is a complex and difficult one, especially when there is a lack of resources. These hardships can negatively affect a young person's mental health and his/her potential. This is because they may even be the first from their family to attend university, they could be far away from home and struggle to afford the cost of living (South African Market Insights, 2018). Such an individual would have access to few social support structures and less money to be able to travel back home freely. This is confirmed by a Student Pathways study by the Human Sciences Research Council (HSRC, 2005), that found that "first generation" students from low income, less educated families are the most likely to drop out. This shows how the experiences of poverty and inequality continue to persist generationally due to the legacy of Apartheid. The links between socio-economic background, social exclusion and mental health challenges will further be examined by using the Social Exclusion Theory and the Stress Vulnerability Model.

1.3. RATIONALE AND SIGNIFICANCE OF THE STUDY

Findings from this study provide a greater understanding of the statistics on mental health in South Africa, especially among university students from disadvantaged backgrounds. The study engaged with individual, personal experiences which ensured a greater understanding of the complexity and depth of social exclusion and mental health among university students in the South African context. Therefore, more effective solutions and practical responses could be developed to address mental health challenges at higher learning institutions. The study provides a grassroots perspective ensuring that solutions and responses are developed from a bottom-up approach. This could assist in the development of future policies and programmes to be evidence-based rather than being based on perceptions or assumptions of what students need.

In addition to using this study to improve student wellness solutions within higher learning institutions, it could also be used to create awareness and understanding among university staff. Lecturers should receive a form of training regarding mental health challenges among students, including the complexities and differences in socio-economic backgrounds. This study could also be used as a foundation for future studies based on deprivation and mental health challenges among university students. This study provides a good, solid basis for potential future studies as the findings are in depth and multi-faceted and therefore could offer more research opportunities.

1.4. RESEARCH TOPIC

Social Exclusion, and Mental Health Challenges: Exploring the Experiences of Mental Health Challenges among University Students from Disadvantaged Backgrounds.

1.5. MAIN RESEARCH QUESTIONS

- What were the student experiences of familial socio-economic hardship before coming to university?
- How did experiences of familial socio-economic hardship affect the student's transition from school to university?
- How do the persisting experiences of familial socio-economic hardship and stress affect a student's mental health?
- How do student experiences of mental distress affect his/her academic performance?
- How do the students cope with the mental health challenges and stress?
- What solutions do students believe should be implemented in order to address social exclusion and mental illness within universities?

1.6. RESEARCH OBJECTIVES

- To determine the student experiences of familial socio-economic hardship before coming to university;
- To understand how the experiences of familial socio-economic hardship affect a student's transition from school to university;

- To ascertain if the persisting experiences of familial socio-economic hardship and stress affect a student's mental health;
- To understand how a student's experiences of mental distress affect his/her academic performance;
- To determine how students cope with mental health challenges and stress;
- To determine which solutions students believe should be implemented in order to address social exclusion and mental illness within universities.

1.7. MAIN ASSUMPTIONS

The study set out to explore the experiences of mental health challenges among university students from marginalised backgrounds using a social exclusion perspective. It was therefore assumed that the subjective experiences and perceptions of the effects of poverty on university students' respective mental states were examined.

1.8. CLARIFICATION OF TERMS

Inequality: The situation in society when some people have more opportunities and money than other people (The World Bank, 2016). South Africa is one of the most unequal societies in the world (The World Bank, 2016). There is a contrast between students from privileged and disadvantaged backgrounds and how they are able to address challenges. Race and inequality cannot be divorced due to the legacy of Apartheid.

Tertiary institutions: Tertiary education is the educational level following the completion of secondary education at a high school. A tertiary institution can either be public or private, and includes technical universities which place a greater focus on skills (South African Market Insights, 2018).

Mental illness: Mental illness can include depression, bipolar disorder and anxiety disorders (van Heeringen, 2012). Mental health problems may be related to excessive stress due to a particular situation or series of events, as well as hereditary factors (van Heeringen, 2012). Symptoms can include changes in mood, personality, personal habits and social withdrawal (van Heeringen, 2012).

Social exclusion: Exclusion from the dominant social system and its rights, opportunities and privileges (Ward, 2009). Social exclusion is multi-dimensional (Ward, 2009). Both material and

discursive factors, and the relationship between these two factors, contribute towards the process of social exclusion (Ward, 2009).

1.9. ETHICAL CONSIDERATIONS

Avoidance of Harm: My participants may be exposed to emotional harm because we are delving into their perceptions and feelings about topics such as financial difficulties and their mental struggles. It is my responsibility to thoroughly inform participants beforehand about the potential impact of the investigation in order to avoid or minimise emotional harm (De Vos, 2005). In this study I communicated this verbally before the interview started.

Informed Consent: The participants were given accurate and complete information on how the study and interview would be done, so that they could fully comprehend the study and its consequences (De Vos, 2005). Participation was voluntary, and participants were made aware that they were at liberty to withdraw from the interview at any time (De Vos, 2005). All this information was provided in a written format on the consent form which each participant signed on the day of the interview.

Violation of privacy/anonymity/confidentiality: The steps that were taken to safeguard and be sensitive to the privacy and identity of the participants included only taking a verbal recording of interview, i.e. no visual recording, as well as participants being numbered and names not being exposed (anonymity).

Release of findings: It was ensured that the final report was accurate, objective, clear, and contained significant information (De Vos, 2005). In order to achieve this, I included a verbatim transcript of each interview, I did not ask leading questions and I was objective when analysing the data collected.

Debriefing Participants: I ensured that the participants got an opportunity to reflect upon their experience of the interview, which could be useful in minimising harm (De Vos, 2005). I informally asked participants how they experienced the interviews and gave them a space to express their thoughts and the emotions they felt.

CHAPTER TWO: LITERATURE REVIEW

2.1. INTRODUCTION

This chapter presents a review of literature on poverty, inequality, mental health and social exclusion. Concepts such as inequality within South Africa and tertiary institutions will be presented. A critical review of previous studies, conducted in our research field, will be done. Ward's (2009) definition of social exclusion and the Stress Vulnerability Model will be outlined as theoretical frameworks or concepts in relation to our study. Lastly, we will set out major policy and legislation linked to our study, which has been identified as the National Youth Policy for 2015–2020 and The National Mental Health Policy Framework for South Africa and strategic plan 2014-2020.

2.2. REVIEW OF LITERATURE

2.2.1 Inequality in South Africa

The disenfranchisement of black South Africans started with colonisation in 1652 and it was in 1948 when Apartheid was officially instituted by government (Baker, 2019). Discrimination according to race under colonial rule and then Apartheid, set the foundation and landscape of socio-economic development in South Africa divided along racial lines (Gumede, 2015). It was only in 1994, that South Africa held its first free and fair democratic election. Prior to this significant socio-political transformation, the majority of the South African population, black Africans, were discriminated against and oppressed for centuries by receiving an inferior education and being placed in low skilled jobs (Marais, 2013). This discrimination and oppression led to high levels of poverty and inequality. There has been much debate as to whether these poverty levels actually increased or decreased post-1994, but whichever way we look at it, South Africa today has one of the most unequal societies in the world, with a Gini coefficient ranging from about 0.660 to 0.696 (The World Bank Group, 2016). It was also reported that “the richest 20% of the population accounted for over 61% of consumption in 2011” (Lehohla, 2014). The divide between rich and poor remains one of South Africa's biggest economic issues and as mentioned above, the legacy of Apartheid is still evident when analysing this inequality in terms of racial breakdown.

Marais (2013) states that inequality is clear in racial groups, not only economically but socially as well. In 2011, 54% of black South Africans were living under the upper-bound poverty line of R620 per capita per month (Lehohla, 2014). In 2011, 37,80% of coloured South Africans were found to be poor and less than 1% of the white population were found to be poor (Lehohla, 2014). Although the implementation of legislation such as Black Economic Empowerment (BEE) and Affirmative Action has created a larger black middle-class, it is also the reason for greater inequality within the black racial group given it is only a tiny percentage overall who are doing better financially (Marais, 2013). Marais (2013) further states that black and coloured South Africans also face structural inequalities and discrimination in the democratic South Africa, which includes a lack of access to fully resourced schools, and opportunities for promotion in the work environment. Baker (2019:8) agrees with Marais (2013) in stating that this inequality is multifaceted; as he says, “unemployment, poor education programs and a collapsing public health system all play a role.” Baker (2019) cites a lack of affordable housing as one of the biggest challenges, with the number of townships increasing from 300 in 1994 to 2,700 in 2019. Spatial inequality is prevalent, with predominantly black and coloured South Africans living in townships and informal settlements, and white South Africans generally living in suburban areas or close to the city centre (Marais, 2013). Further inequality is experienced within South Africa’s public transport system; it is often unreliable, unsafe and expensive (Baker, 2019). According to Brett Herron, the Cape Town Mayoral Committee member for Transport and Urban Development, “Low-income families in outlying suburbs like Khayelitsha spend around 43% of their income on transport” (Fin24, 2018). The combination of social inequality and an inefficient transport system makes the cycle of poverty almost impossible to break. Job opportunities are further from townships and the transport system does little to close this gap. The existing inequality experienced by many South African students, and all the corresponding challenges are explored by following some of their lives from childhood up until university.

South Africa has a unique and complex society as a result of its history. Corruption also continues to plague its government, and there is a lack of accountability or transparency of power. High levels of poverty, inequality and violence continue to plague the country. Whilst this study will focus specifically on the inequalities within tertiary institutions, it is important to note

that similar inequalities manifest in SA society; in other words, universities, for example, are simply microcosms of a larger society.

2.2.2 Inequality in tertiary educational institutions

According to the International Education Association of South Africa (IEASA, 2009), in 2009 the tertiary education system had eleven traditional universities: six universities of technology and six comprehensive universities (offering both Bachelor and technology qualifications). After 1994 and the introduction to a democratic and non-racial South Africa, universities were required to build a student body that more accurately reflected the country's demographics (IEASA, 2009). The government-funded National Student Financial Aid Scheme (NSFAS) was founded in 1999 and has played a vital role in addressing the racial imbalances in higher education (IEASA, 2009). Consequently, there has been impressive growth and transformation of the South African student population. However, there are still racial, social and economic divides in education due to capacity limits (Bokana, 2010). Students from disadvantaged backgrounds face unique social and economic challenges and because of this are more likely to drop out (Bokana, 2010).

The report released in 2019 by the Intuitional Reconciliation and Transformation Commission (IRTC) of the University of Cape Town concurred with Bokana's findings. The report by the IRTC (2019) highlights the protests that came to be known as the “#RhodesMustFall, #FeesMustFall culminating in the 2016 Shackville protest.” The report by the IRTC (2019) states that protests were a result of “the lack of opportunities that predominantly black South Africans students face on a daily basis.” These issues were deeply rooted in the greater student movement which addressed racism and the legacy of colonisation at South African universities. There exists an undeniable frustration at the social and racial injustices which continue to prevail in South African society, despite the attempts at transformation (Bokana, 2010).

2.2.3.1 Mental health challenges

Mall et al. (2018) studied the relationship between childhood adversity, recent stressors and depression in students attending a South African university during the last year of study. In terms of methodology, 686 first-year students at Stellenbosch University in South Africa completed a health- focused survey online (Mall et al., 2018). The results from this online survey showed that

about one in six students reported depression during the last 12 months. This confirmed that mental illness was prevalent and a serious issue among university students. Mall et al. (2018) further looked at the predictors of depression and found that emotional abuse or neglect during childhood were one of the strongest predictors of depression in adulthood. With regard to recent stressors, Mall et al. (2018) found that serious conflict with a close friend, romantic partner or family member, academic stress and a sexual or gender identity crisis were the strongest predictors of depression. The study also clarified that often a combination of these predictors and stressors were responsible for depression (Mall et al., 2018).

Bantjes et al. (2016) and Mall et al. (2018) did studies that both showed that rates of suicidal ideation are higher among university students in South Africa than among the general population of the country, as well as when compared to student populations globally. Bantjes et al. (2016) describes suicidal ideation as a “cognitive occurrence characterised by thoughts of death and a desire to die, whereas suicidal behaviour entails observable actions directed towards ending one’s life.” Bantjes et al. (2016) studied the symptoms of trauma, post-traumatic stress, depression and anxiety as predictors of suicidal ideation among South African university students. Data for the study was collected from 1 337 students between May and August 2013 according to Bantjes et al. (2016) and hierarchical regression analysis was used to analyse the data.

Gibbs, Govender and Jewkes (2018) studied depression in vulnerable youth living in informal settlements in South Africa. Gibbs et al. (2018) agreed with both Bantjes et al. (2016) and Mall et al. (2018), confirming that mental health challenges were an issue among South African youth. Gibbs et al. (2018) discussed how poverty and inequality, and specifically living in an informal settlement, related to the prevalence of depression among young South Africans. According to Gibbs et al. (2018) informal settlements were growing rapidly, and their study aimed to develop a better understanding of the young people living in this context who were dealing with mental health challenges. Data was collected from 232 young people aged 18–30 in urban informal settlements in South Africa and logistic regression was used for the analysis (Gibbs et al., 2018). Symptoms of depression in this study population group were 49.5% for men and 57.9% for women (Gibbs et al., 2018). Among the male participants depression manifested in a number of

ways: being more controlling in relationships and being ashamed about lack of work (Gibbs et al., 2018). For women, depressive symptoms were mostly associated with greater stress about lack of work and food insecurity (Gibbs et al., 2018). The study emphasises that socio-economic factors have a great influence on depression in young people (Gibbs et al., 2018). Gibbs et al. (2018) suggest reducing economic distress may play an important role in reducing depression in vulnerable youth living in informal settlements in South Africa. All three studies highlight the link between socio-economic circumstance and depression. The next session will look at how financial circumstances could influence mental health challenges.

2.2.3.2 Financial difficulties

Van Breda (2018) studied the resilience of vulnerable students transitioning into a South African university. A survey was conducted with 500 second-year and third-year students at the University of Johannesburg, which measured their vulnerability and resilience (Van Breda, 2018). The study found that students often worry about their families and their finances. Sometimes students also had to assume an adult role in their household from a young age and were also relied on to send a portion of their monthly allowance from university funding back home (Van Breda, 2018). Van Breda (2018) found that financial worries distract students from their studies and is often a reason why students dropout of university, therefore a student's financial situation has a big impact on their ability to cope at university.

Bokana (2010) studied the attrition crisis in South African universities, as well as how to keep students from dropping out. The overwhelming pressure experienced by students was a persistent and seemingly uncontrollable problem of higher education in South Africa (Bokana, 2010). Focus group discussions were conducted with randomly selected education stakeholders on reasons for the overwhelming pressure experienced by students particularly at UKZN. Bokana's (2010) conclusion that financial difficulties were one of the factors that could lead to various challenges during university and ultimately, dropping out is confirmed by Van Breda (2018). In their studies, Bokana (2010) also argues that if a student drops out this leads to further social and financial exclusion. This relates to Ward's (2009) definition of social exclusion which states that social inclusion includes financial and discursive factors.

Ward (2009) states that social exclusion can be experienced and prolonged due to the structural, social and economic inequalities which exist. Despite each student having the same opportunity to be at university, each struggles with different circumstantial challenges such as a lack of financial resources or emotional support structures. Emotional support structures can include family members or friends that one can rely on and speak to when having issues. The influence of this stress and the relevant support structures on a student's mental health will be discussed next.

Mpofu (2015) studied "student perceptions and the quality of the undergraduate experience in one faculty at a South African university." Mpofu (2015) used the institution's Student Profile Questionnaire Survey dataset and linked this to their academic progress from 2008 to 2013. Mpofu (2015) found that since 1994, race and class continued to affect tertiary education outcomes and social mobility. These outcomes included the average mark of new, first-year university students in South Africa (Mpofu, 2015). On average, black students from low-income households had lower marks than the wealthier, white students. In addition to this, black students had greater financial worries than their white counterparts, in both poor and rich groups. Both Mpofu's (2015) and Bokana's (2010) findings clarified the influence of an individual's financial circumstance on their academic performance.

2.2.3.3 Stress

In addition to socio-economic background, stressful events and experiences are also a major predictor of mental health challenges. Pillay et al (2001) studied anxiety among 214 undergraduate students in a historically disadvantaged university using a quantitative perspective. Pillay et al (2001) found that anxiety was related to academic pressure and non-academic issues in their lives. Pillay et al (2001) also found that the legacy of Apartheid was still very visible; black students were likely to experience difficulties in coping with the demands of university due to academic stress and non-academic issues, such as finding your identity at university and managing relationships. Pillay et al (2001) focused on everyday stress while Bokana (2010) and Mall et al (2018) studied stressful life events. Both everyday stress and

stressful life events can contribute to an individual's anxiety and mental health challenges depending on how they can cope with this stress.

Mall et al (2018), found that the strongest predictor of depression in the previous year was being a victim of bullying and emotional abuse or neglect during childhood. With regard to recent stressors, serious conflict with a close friend, romantic partner or family member and a sexual or gender identity crisis were the strongest predictors of depression. Mall et al. (2018), states that university students are at a high risk of depression which may be increased by the experience of childhood adversity and/or recent stressors. This relates to the Stress Vulnerability Model which states that stressful life events can be a cause of mental health challenges, along with hereditary factors (Gamble and Brennan, 2005). Therefore the factors that cause mental health challenges are complex and can be interrelated.

Mall et al (2018) confirmed Bokana's (2010) findings that stressful life events contribute towards challenges when dealing with university work, and may lead to mental health challenges due to the pressure of managing these various aspects of university life. According to Bokana (2010), exclusion on academic grounds and financial difficulties are not completely to blame. Other reasons exist including the quality of the educational background of the student, life events such as death of a parent and additional costs such as food, accommodation, textbooks and transport also play a vital part in a student's life and ability to successfully complete a degree. As discussed above, Bantjies et al (2016) also found that exposure to trauma or stressful life events most likely caused depression and could therefore lead to suicidal thoughts. A factor that relates to all these predictors of mental health challenges is race, which will be discussed as the next subject.

Van Breda (2018) studied a combination of everyday stress relating to an individual's socio-economic background and stressful life events. Van Breda (2018) states that young South Africans are vulnerable as they transition into university. Students that experience high rates of family deaths, poverty and violence are considered vulnerable (Van Breda, 2018). Many of these adversities take place before students enter university, while others occur or continue during their first year of study (Van Breda, 2018). Van Breda (2018) found that many of these vulnerable

students were also some of the most resilient and despite the hardship they experience they preserve and strive for success. Van Breda (2018) reiterates Pillay et al's (2001) findings that students from marginalised backgrounds experiencing stress are more vulnerable to mental health challenges.

2.2.3.4 Race

South Africa has a history of racial segregation and oppression therefore, race cannot be separated from topics such as economic and social development. Cornell and Kessi (2017) studied black students' experiences of transformation at a previously "white only" South African university. The participatory action research (PAR) methodology photovoice was used for this study. The study participants comprised 24 full-time undergraduate and postgraduate black UCT students. The study found that black students experienced feelings of inferiority due to statues and symbols from colonial times which remained on campus (Cornell and Kessi, 2017). These racial issues that have persisted post-1994 resulted in the creation of movements such as Rhodes Must Fall. Cornell and Kessi (2017) state that black students take on the burden of disproving black stereotypes and fighting a system which is still based on the country's history of colonisation and Apartheid. The recommendations conclude that solutions such as increasing the number of black academic staff could create more diverse teaching experiences and more reflective black students (Cornell and Kessi, 2017).

Bowman and Payne (2011) also looked at the role of race in universities, they studied a profile of students receiving counselling services at a university in post-Apartheid South Africa. The purpose of this study was to describe a profile of students seeking counselling at a racially diverse university in post-Apartheid South Africa. Student data was extracted from the only two counselling centres based at the University of the Witwatersrand in Johannesburg that provided services to 831 students during 2008 (Bowman and Payne, 2011). The 26 243 students that did not seek counselling during this period formed the comparison group (Bowman and Payne, 2011). It was found that black, female students within the 21–25 year age category were more likely to receive counselling (Bowman and Payne, 2011). This may have been due to the fact that students of colour are more likely to experience social exclusion due to financial and social deprivations (Bokana, 2010). This is because of the inequality that still exists between racial

groups due to the legacy of Apartheid. Mpofo (2015) agrees with Bokana (2010) and Bowman and Payne (2011), as their study found that race along class lines continues to affect tertiary education outcomes and social mobility. Female students could also face more obstacles due to inherent patriarchal structures, however, because female students were more likely to receive counselling, this did not necessarily imply that they were more prone to mental illness (Bowman and Payne, 2011). Other factors to consider include the stigma around men with depression and other mental illnesses; however for the purpose of this study we did not look at mental health challenges from a gender perspective.

2.2.3.5 Social exclusion

Social exclusion is the exclusion from opportunities due to an individual's financial constraints or being part of an oppressed, discriminated group (Bokana, 2010). Shefer, Strebel and Ngabaza (2018) explored "student accounts of space and safety at a South African university, focusing on the implications for social identities and diversity." This study drew on the experiences of 147 third-year students in a research methodology class in an Arts Faculty Department at a historically disadvantaged university (Shefer, Strebel and Ngabaza, 2018). Findings highlight the way in which historical inequalities on the basis of race, class, and gender continue to shape experiences, both materially and psychologically, in South African institutions of higher learning (Shefer, Strebel and Ngabaza, 2018). The study found that black students struggled to find belonging and inclusion in South African institutes of higher learning which was remnant of an oppressive and discriminatory history.

Bokana (2010) looked at how a lack of material and non-material resources led to further social exclusion. Bokana (2010) found that about half of students drop out of university in their first year and only 15 percent of them complete their degrees in the fixed time. This study confirmed that the pressure and stress experienced by students, and a lack of support to deal with this, could result in long-term consequences. Students from previously disadvantaged backgrounds may have fewer resources and tools to deal with these challenges resulting in further social and economic exclusion. Bokana (2010) also notes that the challenges facing these students not only lies with the accessibility of resources at university but also their background. If a student did not have quality early childhood development, this will also influence a student's retention in a

higher education facility (Bokana, 2010). If an individual does not graduate with a degree, they are more likely to struggle to find a job and build networks, and they will be unable to escape the poverty cycle. Mpofu (2015) also highlights that race and socio-economic background influences one's social mobility.

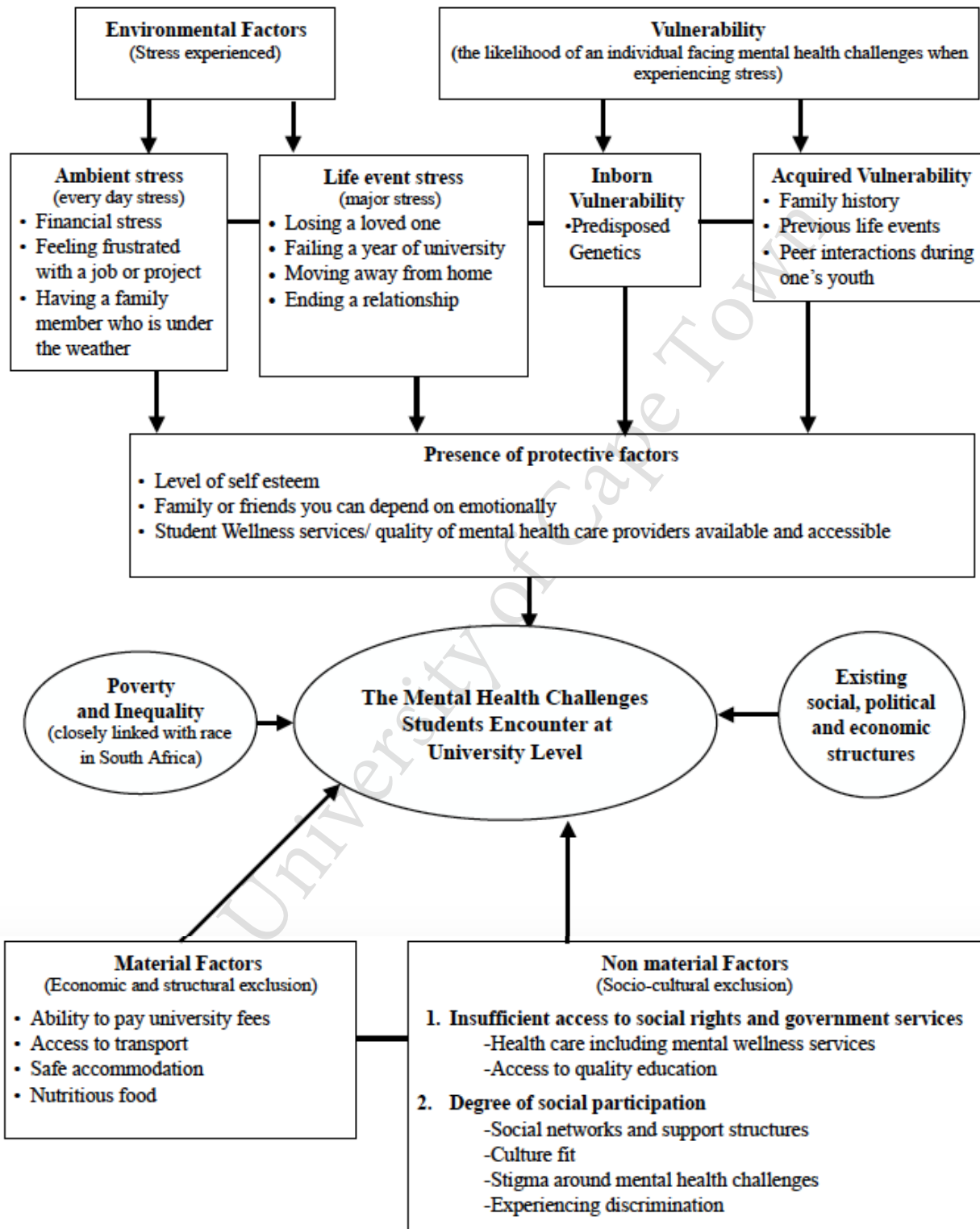
2.3. THEORETICAL FRAMEWORK

This section will present three theories used as a framework of analysis for this study. Ward's (2009) concept of social exclusion, Jehoel-Gijsbers and Vrooman's (2007)'s operational definition of social exclusion and the Stress Vulnerability Model are used as the theoretical frameworks for the study. A theoretical framework diagram will be presented to show the interplay between social exclusion and the Stress Vulnerability Model. Each theory will be discussed and explored, and this will be followed by a description of the interplay between the theories.

Diagram 1: Theoretical Framework Interplay (on following page)

University of Cape Town

The Stress Vulnerability Model



Social Exclusion Theory

2.3.1. Social Exclusion Theory

Ward's (2009) social exclusion theory analyses the various ways that people may lack or be denied the opportunity to fully participate in society. Ward's (2009) defines social exclusion as a multi-dimensional process and uses a broader approach rather than an individualistic approach when analyzing the ways in which people are socially excluded. Social exclusion goes beyond income poverty, it includes the broader context, circumstances and environment in which people live. Ward (2009) explains that the environment includes both financial and discursive factors, and the relationship between these two factors contributes towards the process of social exclusion. Financial factors are those concerned with material objects and the physical aspects of an individual's experience. This could include an individual's income level, access to basic needs such as housing, electricity, water and sanitation infrastructure. Material factors are mostly around finances, whereas discursive factors are more concerned with the social aspect of individuals and society.

Discursive factors are non-physical and include relationships and discrimination (Ward, 2009). Relationships include family structures and dynamics, which can affect an individual's position in society (Ward, 2009). For example, if one's parents are absent and not supportive, it may lead to an individual lacking emotional support, guidance and even social mobility. Discrimination could include racism, sexism and any form of bigotry. Furthermore, social exclusion can be experienced whether poverty is present or not. However, the existence of poverty and inequality is more likely to present challenges and contribute towards social exclusion (Ward, 2009).

Ward (2009) also argues that when addressing social exclusion, the solution should not be individualistic but rather take broader existing social, political and economic structures into account. An individualistic approach puts the emphasis on the individual and their responsibility to take advantage of potential opportunities, but ignores the barriers individuals may face due to a lack of material resources and discursive factors (Ward, 2009). As discussed above, if an individual lacks certain material and discursive factors, they are more likely to experience social exclusion. Therefore, social exclusion can be experienced and prolonged due to inequality and poverty (Ward, 2009). Inequality and poverty need to be addressed in order to achieve sustainable transformation in society rather than using a narrow, individualistic approach. This

transformation refers to more equitable societal structures leading to greater social inclusion rather than exclusion, giving all people the opportunity to fully participate in society (Ward, 2009). Ward (2009)'s social exclusion definition is theoretical and for the purpose of this study, this definition will be expanded by using a practical explanation of social exclusion by Jehoel-Gijsbers and Vrooman's (2007).

In order to operationalise social exclusion as a function of the hardship Ward (2009) explains, this study will also unpack Jehoel-Gijsbers and Vrooman's (2007) explanation of social exclusion. Jehoel-Gijsbers and Vrooman's (2007) earlier studies support Ward (2009) in finding that social exclusion has both non-material and material aspects. The authors argue that social exclusion manifests as socio-cultural exclusion (non-material) and economic/structural exclusion (material). Jehoel-Gijsbers and Vrooman (2007) operationalizes social exclusion by explaining how it is a function of existing social, political and economic structures. They do this by breaking social exclusion down into characteristics, three of which apply to this study and will be discussed.

Jehoel-Gijsbers and Vrooman (2007) identify the economic/structural exclusion characteristics which are a combination of material deprivation and insufficient access to social rights. ON the other hand, socio-cultural exclusion involves a low degree of social participation (Jehoel-Gijsbers and Vrooman, 2007). Material deprivation refers to an individual's financial status including his/her assets and debts, in addition to deficiencies in relation to material goods and basic needs (Jehoel-Gijsbers and Vrooman, 2007). Insufficient access to social rights such as government services includes access to housing, education, health care, employment opportunities, social services and other government services (Jehoel-Gijsbers and Vrooman, 2007). Socio-cultural exclusion which focuses on a low degree of social participation, the third characteristic, refers to a lack of informal and formal networks, support structures and leisure activities (Jehoel-Gijsbers and Vrooman, 2007). A lack of the three characteristics highlighted will contribute to an individual experiencing greater social exclusion. Jehoel-Gijsbers and Vrooman (2007) also emphasize that these characteristics describe the actual state of social exclusion and are influenced by certain risk factors that increase one's chance of experiencing this state of social exclusion.

Jehoel-Gijsbers and Vrooman (2007) state that “the risk factors operate at the micro-level of the individual, at the meso-level of formal and informal organisations and social settings, and at the macro-level of government and society at large.” Jehoel-Gijsbers and Vrooman (2007) also explain that the actual state of social exclusion and risk factors have a two-way causal relationship, they influence and respond to each other. Risk factors can be background characteristics such as family composition, race and gender (Jehoel-Gijsbers and Vrooman, 2007). Risk factors such as coping abilities and an individual’s health can be improved or worsened by intervention which shows the two-way causal relationship (Jehoel-Gijsbers and Vrooman, 2007). If an individual has access to and can afford quality healthcare they are more likely to decrease the effect of some risk factors on their state of social exclusion. Lastly, contextual factors also affect an individual’s state of social exclusion, such as inadequate government intervention, experiences of discrimination or even an economic recession (Jehoel-Gijsbers and Vrooman, 2007).

2.3.2. Stress Vulnerability Model

The Stress Vulnerability Model is a psychological model that attempts to explain why we develop mental health issues and challenges (Gamble and Brennan, 2005). This model proposes that all mental challenges arise from an interaction and relationship between stress and vulnerability. Gamble and Brennan (2005) define the forms of stress as ambient stress and life event stress. Ambient stress is relevant to all people and may include financial stress, feeling frustrated with one’s job, struggling with a university project or having tension with a family member (Gamble and Brennan, 2005). The way in which this stress is managed can either alleviate or aggravate symptoms. The emotional atmosphere of a family influences how stress is dealt with, either in a positive or negative manner, and ultimately influences people’s health and long-term coping abilities (Gamble and Brennan, 2005). A resilient emotional atmosphere of a family can be one where emotions are addressed, discussed and processed. Whereas, in a household where discussions around emotions and stress are avoided could lead to the mismanagement of stress.

The second form of stress is life-event stress, a major negative life event that occurs, and most likely results in high levels of stress for an affected individual. Life-event stress can include losing a loved one, failing a year of university or ending a relationship (Gamble and Brennan, 2005). The emotional atmosphere of a family influences how an individual manages stress in the case of life- event stress as well, however life stress often has long-term effects on an individual's mental and emotional state (Gamble and Brennan, 2005). The immediate trauma and long term effects of life- event stress therefore often contribute to the development of mental health issues and challenges (Gamble and Brennan, 2005). When an individual experiences life-event stress, they are more likely to require external support such as a psychologist or support group to address the stress related to the trauma.

Vulnerability is the second component of the Stress Vulnerability Model. Gamble and Brennan (2005) refer to vulnerability as the likelihood of an individual facing mental health challenges when experiencing stress. There are two aspects of vulnerability, inborn vulnerability (nature) and acquired vulnerability (nurture). Inborn vulnerability depends on an individual's predisposed genetics, in other words a specific mental illness may run in the family and therefore make one more prone to experience it. An individual has no control over their predisposed genetics however, medication could help manage certain mental illnesses. Acquired vulnerability is specific to an individual's life experience such as family history, and life events during one's youth (Gamble and Brennan, 2005). Such experiences could have been, for example, years of abuse taking place in one's household and the loss of a parent while young (Gamble and Brennan, 2005).

Each individual has varying levels of protective factors which affects how they cope with stress and their state of vulnerability to mental health issues (Gamble and Brennan, 2005). Therefore, someone who has protective factors such as a high self-esteem and good supportive networks (family and friends) can better cope with stress and may be less likely to develop mental health challenges even if they are seen to have a high level of vulnerability. Gamble and Brennan (2005) also highlight the importance of government in establishing external support systems for people dealing with mental health issues. Gamble and Brennan (2005) state that governments

need to ensure that quality mental health care providers are available and accessible as an integral part of coping with mental health challenges.

Mental health challenges are the result of a complex interaction of many factors, some of which are genetically predetermined and others of which are a result of the environment and overall stress experienced. The theory therefore reinforces the importance of managing your mental health issues by addressing ambient stress and life event stress, alongside an individual's state of vulnerability (Gamble and Brennan, 2005). In order to address and manage this stress and vulnerability an individual needs to work on improving their protective factors (self-esteem and supportive friends and family), as well as using external resources such as a psychologist (Gamble and Brennan, 2005).

2.3.2. Interplay

Diagram 1 above shows how experiencing stress and having higher levels of vulnerability, as well as having a lack of material and non-material resources, can contribute to social exclusion and mental health issues. Every individual has varying levels of vulnerability and some people may be more predisposed to mental health issues (Gamble and Brennan, 2005). The presence of protective factors also plays a part in how individuals respond to and cope with stress. In addition, if an individual does not have access to the necessary material and non-material resources, they are more likely to have difficulty coping with stress and managing mental health issues (Ward, 2009).

For a student, stressful situations could include failing a subject at university, struggling to pay university costs and living costs, persistent conflict with a family member or losing a loved one. This stress will be more difficult to manage if a student does not have a support system, access to wellness services or lacks financial assistance, and are therefore more likely to experience social exclusion (Jehoel-Gijsbers and Vrooman, 2007). Despite students attending university, and in that sense having an even playing field, they hail from different socio-economic backgrounds which continue to affect how they manage stress at university (Ward, 2009). The lack of access to the necessary resources (material and non-material) adds to an individual's stress and makes it more difficult to cope academically and mentally. These material resources can include access to

safe transport, accommodation and nutritious food. Non-material resources could include a mental health service provider, social networks and a support system. The inequality which students from marginalised backgrounds experience growing up exists due to the existing social, political and economic structures in the South African context (Jehoel-Gijsbers and Vrooman, 2007). These existing structures also contribute to and influence mental health issues and social exclusion among university students. If an individual has a history of mental illness in his/her family, they are also more prone to mental health issues (Gamble and Brennan, 2005). Diagram 1 above shows that social exclusion is multi-dimensional and that there are many inter-linked factors as discussed that contribute to mental health issues among university students.

2.4. POLICY AND LEGISLATION

This study will focus on government policy documents centered around the youth, tertiary education, mental health and social exclusion. The National Youth Policy for 2015–2020 (NYP, 2015) is “developed for all young people in South Africa, with a focus on redressing the wrongs of the past and addressing the specific challenges and immediate needs of the country’s youth.” In addition to the NYP 2020 (NYP, 2015), the Department of Health developed the National Mental Health Policy Framework for South Africa and strategic plan 2014-2020. Both plans will be critically discussed to determine whether they effectively address the social exclusion and mental health challenges experienced by young people.

The NYP 2020 acknowledges the importance and vital role of the education system in building an inclusive society, specifically those previously disadvantaged by the Apartheid regime. One way the NYP 2020 (NYP, 2015) aims to do this is by strengthening and expanding the number of further education and training (FET) colleges to increase the participation ratio to 25 percent, increase the graduation rate of FET colleges to 75 percent, provide full funding assistance to students from poor families and develop community safety centres to prevent crime. The National Student Financial Aid Scheme is currently the main source of funding (NYP, 2015). This can be seen as a positive approach because it acknowledges the importance of providing full funding (including living expenses) in order to achieve those participation and graduation rates at higher learning institutions (NYP, 2015). The document also mentions the importance of accessibility and access to resources and services which are crucial to a young person’s holistic

development (NYP, 2015). However, the document fails to discuss how these multi-dimensional aspects of financial and social exclusion at tertiary institutions are related. The document also fails to state how more funding will be made available. In addition, the specific supportive structures which will be created or improved are not specified or detailed in the document. Therefore, the NYP 2020 is a surface-level document, and omits greater detail and practical implementation of the suggested solutions.

The NYP 2020 aims for “the graduates of South African universities and colleges to have the skills and knowledge to meet the present and future needs of the country”. This aim is presented at a macro level and disregards the individual and his/her unique aspirations. The youth should be encouraged and included by having the opportunity to fulfil an education which they are passionate about rather than obtaining a skill to meet the demand of the job market. The importance and potential of entrepreneurship is also omitted. If a student is not fulfilled with the degree they are doing, it could lead to stress and possibly dropping out. This links to mental health challenges as well because a student needs to feel fulfilled and happy with what they are studying. However, if students study what they are passionate about and where their unique abilities can be utilised, that passion will manifest and ultimately fill a gap in the market. A culture of entrepreneurship can also be encouraged and cultivated as this is a viable solution to filling gaps in the economy.

The NYP recognises that young people are not a homogenous group (NYP, 2015). This acknowledgement of youth not being homogenous and the intersectionality which exists, is vital (NYP, 2015). Solutions cannot be linear, but they should rather be adaptive and multi-dimensional. However, an evident short fall of the NYP 2020 is that it failed to consult the youth of South Africa, specifically those socially and economically excluded (NYP, 2015). Nowhere in the document does it state that a participative approach was used for the research and formulation of the document. The document should be for the youth, by the youth in order to have buy-in from the target population.

In addition to the (NYP, 2015), the Department of Health developed the National Mental Health Policy Framework for South Africa and strategic plan 2014-2020. This national mental health

policy framework aims for “the delivery of effective, equitable and affordable treatment and coordinated actions across all agencies and sectors in response to the mental health needs of our people,” (National Mental Health Policy Framework for South Africa and strategic plan 2014-2020, 2012). This framework focuses solely on mental health and acknowledges the prevalence of mental illness in South Africa, as well as its broader effect on society (National Mental Health Policy Framework for South Africa and strategic plan 2014-2020, 2012). Mental illness affects people’s ability to be active, healthy and contribute towards society in a positive way (National Mental Health Policy Framework for South Africa and strategic plan 2014-2020, 2012). It has a huge impact on people's functionality and cannot be ignored.

The National Mental Health Policy Framework for South Africa and strategic plan 2014-2020 (2012) also reiterates the important link between poverty and mental health challenges as discussed using the two theoretical frameworks above. The framework also describes this link as a “vicious cycle” and confirms that people who experience socio-economic deprivation are at a higher risk of mental health challenges due to financial stress, a lack of support structures, discrimination and exposure to violence (National Mental Health Policy Framework for South Africa and strategic plan 2014-2020, 2012).

In response to these issues, the framework highlights low-cost antidepressants, awareness campaigns to de-stigmatize mental health struggles and/or psychological interventions (National Mental Health Policy Framework for South Africa and strategic plan 2014-2020). There is also an emphasis on the need for poorer communities to have greater access to mental health resources and interventions in order to bridge the inequality as wealthier individuals may have greater access to the necessary resources (National Mental Health Policy Framework for South Africa and strategic plan 2014-2020, 2012). In terms of “inter-sectoral roles and responsibilities” the framework mentions schools, NGOs and various government departments who need to work together in order to implement solutions (National Mental Health Policy Framework for South Africa and strategic plan 2014-2020, 2012). However, the framework does omit the role and responsibilities of higher learning institutions, which is problematic because students are vulnerable to stress and mental health struggles. Higher learning institutions should play an integral part in addressing mental health challenges in South Africa, the government needs to

work with higher learning institutions to ensure that enough effective student wellness resources and services are available for all students. Overall, the National Mental Health Policy Framework for South Africa and strategic plan 2014-2020 (2012) is a thorough document highlighting the importance of mental health interventions at various levels in society, as well as the systemic issues of inequality, which need to be addressed in order to achieve transformation. The document does however need to expand to include institutes of higher learning; if integrated, sustainable change is to be achieved while addressing mental health in South Africa.

2.5. CONCLUSION

From this literature review we can conclude that social exclusion is multi-faceted. We discussed economic and social inequality within South Africa and tertiary institutions, as well as identifying mental illness as one of the main themes in the six studies reviewed. In addition, we can conclude that mental illness is caused by a combination of predisposed factors, as well as stressful life events. In the South African context, we concluded that the effects of Apartheid are still prevalent and many university students from disadvantaged backgrounds face challenges that they do not necessarily have the tools to deal with. The main themes identified from the critical review of previous studies included financial difficulties, stressful life events, social exclusion, mental health challenges and race. It was also concluded that Ward's (2009) definition of social exclusion and the Stress Vulnerability Model are the relevant theoretical frameworks for our study. Lastly, we set out the National Youth Plan 2020 of South Africa, and the National Mental Health Policy Framework for South Africa and strategic plan 2014-2020 (2012). The NYP 2020 (2015) had to be analyzed as it addresses social exclusion in the youth, and the National Mental Health Policy Framework for South Africa and strategic plan 2014-2020 (2012) had to be explored as it focuses on mental health interventions. Considering all of these conclusions, it was identified that there are statistics available on inequality among university students however, there is a gap in the research of peoples' perceptions and experiences of this inequality (mental health challenges and social exclusion) and this is what we will further explore in this study.

CHAPTER THREE: METHODOLOGY

3.1. INTRODUCTION

This chapter presents the research design and methodological approach used in the study. The study population, sampling method, data collection approach, data collection instrument and data- recording methods will be explored. The data verification and limitations of the study will also be identified, as well as defining and revealing the researchers' concerns about the study.

3.2. RESEARCH DESIGN

A qualitative research design was used to guide the study. Qualitative research is exploratory in nature and the researcher aims to understand people's perceptions and opinions (De Vos, 2005). This approach was therefore appropriate for this study because the researcher was able to explore peoples' experiences behind existing statistics on mental health challenges among university students from disadvantaged backgrounds. Greater understanding is attached to the numbers that exist and therefore the researcher could explore, catch glimpses and try to interpret bits of reality (Creswell, 2014). This understanding could also be used to assist in existing or future prevention or intervention programmes within various tertiary institutions. This is because the qualitative research reflects bits of reality, rather than what an outsider would prescribe based on what they think. Qualitative studies are open ended and set up research opportunities designed to lead the researcher into unexpected areas of discovery (Creswell, 2014). This open-ended approach allowed for the actual participant to also guide the interview and lead the interview towards issues which were important to them. It allowed participants' individual voices to be heard and expressed. This contributed to a bottom-up-approach as the participants were given control through-out the interviewing process. There were no right or wrong answers. They were also protected in that they could stop and discontinue the interview process if, and whenever they wanted to. In other words, it was a voluntary process.

Exploratory research may be the first stage in a sequence of studies due to the fact that it is a process of discovery and new issues of interest can be raised, which may require more in-depth research in the future. Qualitative research is conducted to gain insight into a situation,

phenomenon, community or individual (Creswell, 2014). In this study we aimed to understand the link between mental health challenges and social exclusion, which university students from disadvantaged backgrounds were experiencing within tertiary institutions.

3.3 POPULATION AND SAMPLING

3.3.1. Study Population

The sample for this study was selected from the South African student population. According to the International Education Association of South Africa (IEASA, 2009), in 2009 the tertiary education system had eleven traditional universities, six universities of technology and six comprehensive universities (offering both Bachelor and technology qualifications). After 1994 and the introduction to a democratic and non-racial South Africa, universities were required to build a student body that more accurately reflected the country's demographics (IEASA, 2009). This did in fact lead to impressive growth and transformation of the South African student population. According to IEASA (2009), "in 1993 nearly half of all students were white, 40% were African, 6% were coloured and 7% were Indian, by 2005 the portion of white students had shrunk to 25% and the African share had grown to 61%." This indicated that access to higher education had improved, however there were remaining racial, social and economic divides in education.

The government-funded National Student Financial Aid Scheme (NSFAS) was founded in 1999 and has played a vital role in addressing the racial imbalances in higher education (IEASA, 2009). The purpose of NSFAS is to enable financially disadvantaged students to access higher education opportunities. According to IEASA (2009), bursaries and loans were estimated to benefit over 140,000 disadvantaged students in 2009 and the numbers have grown yearly. The shortfall with these loans and bursaries is that they do not always cover the full costs of study, leaving students struggling to cover living and other costs (IEASA, 2009). Financial difficulties among the country's pool of poor black students are largely to blame for the drop-out rate among students (IEASA, 2009). This is confirmed by a Student Pathways study by the Human Sciences Research Council (HSRC, 2005), that found that "first generation" students from low income, less educated families are the most likely to drop out. The sample for the study was purposefully

selected from this South African student population and participants had to fit the above-mentioned requirements.

3.3.2. Sampling Technique and Characteristics

Eighteen individual interviews were conducted using a semi-structured interview guide as the instrument. Non-probability specifically, purposive sampling was used as the sampling technique for this study. The purposive sampling method meant that not everyone in the population had a fair chance of selection (De Vos, 2005). The sample was purposefully selected based on our knowledge of the population and the nature of the research aims (De Vos, 2005). For this study, 18 male and female students between 19-32 years old, who came from disadvantaged backgrounds, who were currently enrolled in a Cape Town institute of higher learning and had a history of mental health challenges, were selected. All registered students received an email informing them of the study. The email also requested that students who fell into the above-mentioned criteria and were interested in partaking in the study contact the researcher. Once these potential participants contacted the researcher, the researcher confirmed that they fitted into the criteria, answered any questions that they had and scheduled respective interviews.

3.3.3. Sampling Procedure

The Student Development Office of the university was approached for permission to interview students and permission was granted according to their standard procedure. Participants were selected according to how they responded to the email request, whether they were willing and fulfilled the criteria. In addition, the snowballing technique was used (participants referred people they may know). This was used to access more potential participants matching the criteria. The interviews took place in places acceptable to the participants, which was mainly a private venue on the University campus.

3.4. DATA COLLECTION

3.4.1. Data Collection Method

The data collection approach included interviewing individuals and recording them on a specific device; interviews were personal and in-depth. This approach was taken to understand

individuals' personal experiences and perceptions of mental health challenges and social exclusion. The interviewee played a part in which direction the interview went, and some participants introduced issues the researcher had not thought of (Creswell, 2014). The interviews ranged between 40 and 90 minutes depending on how long each interviewee took to answer the questions. The interviews were recorded and then transcribed verbatim in order to be analysed.

3.4.2. Data Collection Instrument

A semi-structured interview schedule was used as the instrument to guide the interviews. This instrument contained open-ended questions and enabled the researcher to gain a detailed picture of a participant's beliefs about and experiences of a particular topic. The topics covered in the instrument included demographics, household characteristics, conditions and experiences of studying, financial deprivation, personal aspirations and identity, and mental illness experiences. A semi-structured interview instrument gave the researcher and participant much more flexibility because the interview was guided by the schedule rather than dictated by it (Creswell, 2014). The researcher could also be seen as an instrument of data collection due to their leading the interview and being allowed to probe (Creswell, 2014).

3.5. DATA ANALYSIS

Data analysis involves bringing order, structure and meaning to the mass of collected data. For data analysis, we looked at Tesch's (1990) eight steps:

- Acquired a sense of the whole by reading carefully through all the interviews. This gave the researcher the necessary background information. If something came to mind about the data, the researcher wrote these ideas down.
- While going through each interview, the researcher asked themselves 'What is this about?' The question did not refer to the content of the document, but to the topic and theme. These topics and themes were written down.
- After completing this process for each interview, the researcher made a list of all the topics in a document, one column per interview. The researcher needed to compare all the

topics and group similar topics together. The researcher then wrote these groups in columns.

- Then the researcher abbreviated these topics as codes. With this list of codes, they went back to the data and wrote the codes next to the appropriate segments of the interviews. If any ideas about the data came to mind, they wrote it down.
- The most descriptive words for the topics were found, which then began to turn into categories. The researcher tried to reduce the categories by grouping together those that related to each other and created subcategories (20-50). This is known as the data-organising system.
- The researcher made a final decision on the abbreviation of each category and alphabetised the codes to ensure that no duplication occurred. A segment of data can fit in two or three categories.
- The researcher put the data belonging to each category together and performed the initial analysis, looking at all the material in one category at a time. The focus was then on the content of each category. During this process, they kept the research question in mind in order to discard irrelevant data.
- If necessary, the researcher could have recoded the existing data.

Tesch's (1990) steps provided detailed guidelines to develop an organised system for the unstructured qualitative data that the researcher collected in this study.

3.6. DATA VERIFICATION

According to Lincoln and Guba (1985), all qualitative research should respond to principles that stand as criteria against which the trustworthiness of the study can be evaluated as follows:

3.6.1 Credibility

Qualitative researchers must take on activities that increase the probability that the findings will be trustworthy and credible (Lincoln and Guba, 1985).

- There should be a long period of engagement. The researcher needed to stay in the field long enough to build trust with participants, as well as examining any misrepresentations,

including perceptual, selective and misconstruction of the questions asked in the interviews.

- External checks are very important to help ensure none of the researchers are using their biased opinion. Researchers can also ask other persons to look over the study for credibility and determine if the findings seem to align from the data (audio recordings and verbatim transcripts).

3.6.2 Transferability

The researcher needs to examine how transferable these findings are to another setting or group of people (Lincoln and Guba, 1985). One can ensure greater transferability by doing the following:

- Transferability depends on similarities therefore sufficient detail must be provided in the original data collected. The two contexts can then be compared and if similar, only the transferability would be possible.
- Use purposive sampling in order to maximize the range of specific information that can be obtained from and about the context.

3.6.3 Dependability

The researcher should be reasonably sure that the findings would be replicated if the study was conducted again with the same participants in the same context (Lincoln and Guba, 1985).

- If one can show credibility one shouldn't have to prove dependability.
- An inquiry auditing of the data, findings, interpretation and recommendations should be done by an auditor to determine dependability and confirmability simultaneously.

3.6.4 Confirmability

Confirmability is achieved when findings of a study reflect from the participants of the study and are not based on biases and assumptions of the researchers (Lincoln and Guba, 1985).

- There must be an audit trail that includes raw data, such as electronically recorded materials, written field notes, documents and records. This method is used for other researchers to be able to verify the study when presented with the same data.

3.7. LIMITATIONS OF THE STUDY

The research had a few limitations. This included a lengthened process of getting permission from the Student Development Office of the University. The researcher needed permission to interview students from the university and could not start looking for participants or interviewing participants until permission was granted. This put the researcher behind their timeline by one month. Once permission was granted, some university students had gone home for the June/ July holidays. However, “Plan B” was followed and online interviews were conducted via Skype and recorded. Despite these limitations, the researcher was still able to obtain in depth data, reflective of the 18 participants’ experiences.

3.8. REFLEXIVITY

In qualitative research, the researcher reflects about how their role in the study and their personal background and experiences hold potential for shaping their interpretations (Creswell, 2014). I will firstly explain how I developed my research topic and then my experience while undertaking this study. My research topic was developed through various conversations with my supervisor regarding my passion for social justice in South Africa. One conversation led to another and eventually I opened up about my experience with depression. I was clinically diagnosed with depression halfway through my first year at university. I had experienced bouts of depression throughout school but always managed to deal with it and get better. At school I was a top student and a big fish in a small pond, however when I came to university, I started failing subjects and struggled being far from home. This stress coupled with low self-esteem led to me falling into a deep depression. After months of confusion and frustration, I eventually opened up to my parents who were fortunately extremely supportive. They also had the financial means to afford a private psychologist subsequent to an unsuccessful experience at the University’s student wellness center. After months of therapy I dealt with my underlying psychological struggles and complemented this with daily exercise. When I think back to this time, I realised I

was so fortunate to have had the financial resources and emotional support needed to manage my depression. I wonder what would have happened had I not had those resources? These questions and concerns are what led to the formation of my research topic.

The study required me to use a diary in which I recorded a variety of information to reflect on, unique thoughts and concepts that came up during interviews. It was also important that I be objective throughout the study although this was difficult at times due to my personal struggles with mental health challenges. I would have to control my emotions when hearing my participants' experiences of socio-economic exclusion and mental health struggles. I also often felt emotionally drained and exhausted after interviews, partly because I felt helpless and unable to do anything regarding my participants' difficult and sometimes traumatic experiences. However, there were also many times when I felt inspired by the participants' strength and resilience, which motivated me to complete this study as best I could, reflect on their experiences as accurately as I could, and develop effective recommendations. Another vital acknowledgement and concern was my background as a white, privileged, young, female South African. I needed to be aware of and acknowledge this throughout my whole study while I learned from my participants and their experiences.

3.9. CONCLUSION

In conclusion, the study used a qualitative and exploratory research design. The study population was university students and the non-probability sampling method used was purposive. Data was collected using one-on-one interviews and semi-structured interviews were used as the instrument. Data was recorded verbally on a recording device and then transcribed verbatim. For data analysis the researcher used Tesch's (1990) eight steps to bring structure and meaning to the mass of collected data. The researcher also used Lincoln and Guba's (1985) criteria against which the trustworthiness of the study was evaluated. The limitations in the study and the concerns about the study were also identified such as how the researcher's personal background could affect the results of the study. In conclusion the study aimed to provide in depth personal and first-hand experiences of students from disadvantaged backgrounds that have dealt with mental health challenges and social exclusion at university level.

CHAPTER FOUR: FINDINGS

4.1. INTRODUCTION

This chapter presents the findings from qualitative interviews conducted with 18 university students on their experiences of socio-economic exclusion and mental health challenges. A framework for the discussion of the findings has also been set out. Lastly, the findings of the study are explored and discussed, including quotes from the interviews. Then the next and final chapter of the research report concluded on the major findings, and recommendations were suggested.

4.2 BIOGRAPHICAL PROFILE OF THE PARTICIPANTS

Participant A is a 29 year-old black female doing her Masters in Electrical Engineering. She is originally from the Eastern Cape and grew up in a township in Cape Town, Mfuleni. She moved from the Eastern Cape to Cape Town to live with her aunt when her mother passed away. Her dad works as a miner so he could not take care of her. She lived with seven other family members in her aunt's home where everyone depends on her uncle's income. She obtained funding from a UCT bursary and an external bursary for her undergraduate degree. She struggled with clinical depression throughout her undergraduate and sought professional help. She currently works full-time at Eskom who had provided her with a bursary for her post-graduate degree.

Participant B is a 19 year-old black female in her second year studying Politics and Sociology. She grew up in Gauteng with her mom and does not know her dad well. He lost his job a few years ago and is still unemployed. She started university 3 weeks late as she only received confirmation of her NSFAS funding then. Once she found out she had NSFAS funding, she managed to raise enough money with her family for a flight and had to find a space in a university residence once she arrived. She struggled with mental health challenges in her first year, as well as with her university work. She continues to manage her mental health challenges through a support group at university.

Participant C is a 20 year-old Indian male in second year studying Politics, English and History. He grew up in Kwa-Zulu Natal in his grandfather's house with his mother and siblings. His dad passed away before he was born. He has

been doing part time jobs since high school to contribute to family finances and is very close to his mother. He is on a NSFAS bursary and pays an expected family contribution. He struggles with depression and anxiety and takes medication for this. Stress that contributed to his mental health challenges was the end of a long-term romantic relationship and being overwhelmed with university work.

Participant D is a 27 year-old black male in his first year studying Analytics. He is from Mpumalanga where he was raised by his mother who has worked in a nut factory for many years. His mother is the sole breadwinner and raised five children alone. He has a volatile relationship with his dad who left early in his life. He is currently struggling to find what he really wants to study and what work he would like to do after he finishes university. He is currently on a NSFAS bursary.

Participant E is a 32 year-old coloured female doing her PhD in a science field. From the Bo-Kaap in Cape Town, she grew up in a big family who all lived with her grandparents. She and her sisters had to start working early on in life so as to contribute financially. She has supportive parents who value the importance of education. She has been on bursaries and scholarships since she started studying. She currently has funding from the NRF.

Participant F is a 22 year-old black male in his third year of Medicine. He is from the Eastern Cape. He was raised by his mother and though his father was mostly absent, he did occasionally contribute financially. Participant F lost one of his friends from the Eastern Cape to suicide as a result of depression which had a big effect on him. He is funded through NSFAS and lives in university accommodation.

Participant G is a 27 year-old Indian male in his final year of Finance and Accounting. He is originally from Kwa-Zulu Natal. He has managed to pay his university fees through contributions from his parents, various UCT bursaries and an external bursary from Old Mutual. In addition, he works part time. He has also taken extra time to finish his degree as he struggled with mental health issues and adjusting when leaving Durban for Cape Town to study.

Participant H is a 21 year-old coloured female in her final year studying English and Film. She has a NSFAS bursary and her family pays an expected contribution. She is from Strandfontein in Cape Town and still lives there off campus. She has experienced deep trauma as she lost her mother in first year and experienced sexual abuse the year before she started university. She also has a very tumultuous relationship with her dad. She sought professional help to deal with her depression.

Participant I is a 21 year-old Indian male in his final year of Audiology. He has funding from NSFAS and is from Kwa-Zulu Natal. He grew up in a household with five other family members where his dad was the sole breadwinner. He now lives in private accommodation in Mowbray with his brother. He has particularly struggled with the stigma around depression and has struggled to speak about his mental health challenges.

Participant J is a 25 year-old coloured female in her final year of Medicine. She is on NSFAS and is from Bonteheuwel in Cape Town. Her mother struggled with serious mental illness and they were reliant on her dad's income, however he was also very negligent with his money. She grew up in an abusive, unsupportive household and this continued to have a major effect on her mental health while transitioning to university.

Participant K is a 28 year-old coloured female doing her PhD Medical Anthropology. She grew up in Cape Town in an unstable household with a violent father and in a community with high levels of poverty and violence. She secured funding from a private company for her postgraduate study. She struggles with depression which has been prevalent in her family history.

Participant L is a 25 year-old black female studying for a Masters in Pharmaceutical Science and who is originally from the Eastern Cape. She grew up with an abusive father who eventually left the family. She has struggled with depression since her undergraduate studies and sought professional help. She has a UCT bursary and CSIR scholarship for her postgraduate studies.

Participant M is a 25 year-old black female studying Film, Literature and Media. She is originally from Kwa-Zulu Natal. She lost her father when she was young and her mother passed away during M's first year of university. She struggles

with depression and had to take a year off from university to address it; her panic attacks started in high school. She has a UCT bursary and NSFAS.

Participant N is a 24 year-old coloured female doing her fifth year of Psychology. She is originally from Gauteng. She grew up living with different family members and moved around a lot as her parents struggled financially. She struggled with university work and family drama, with depression and anxiety for which she sought professional help. She secured a UCT bursary and NSFAS.

Participant O is a 21 year-old coloured female studying Sociology and Film. She is from the Western Cape, is currently in her fifth year, struggles with depression and has sought professional help. She lives with her mom and does not have contact with her dad as he is a drug addict. She has funding from NSFAS and has considered dropping out before to work instead in order to earn an income and financially contribute to her family.

Participant P is a 24 year-old black male doing his Masters in Mathematical Science and dealing with depression. He is on a Mandela Rhodes Scholarship as he excels academically and is originally from Zimbabwe. He feels immense pressure to succeed and provide for his mother and other family members as he is one of the first in his family to have the opportunity to get a great job.

Participant Q is a 19 year-old black female in her second year of Medicine. She struggles with depression and anxiety, and has found it difficult to make friends in residence and build a support system at university. Her dad lost his job a few years ago and became an informal trader, whereas her mom worked part time at an orange farm. She struggled to register initially as she did not have access to a smartphone, as well as having to work to save up for her registration fee. She is on NSFAS and is from Limpopo.

Participant R is a 32 year-old male doing his PhD in Media Studies and he struggles with anxiety. He funds his own studies by working full time and is from Zimbabwe. Both his parents passed away when he was very young, and he had to assume adult responsibilities early on in life. He feels a lot of pressure to not let his own family down and is responsible for extended family members as well.

4.3. DISCUSSION OF FINDINGS

THEMES	CATEGORIES	SUBCATEGORIES
Experiences of familial socio-economic hardship before coming to university	Lack of essential resources	Food insecurity
		No school uniforms
		Lack of school supplies
	Parents inability to secure permanent work	Only part time work available
		Lack of skills
		Death of a parent
Effects of familial socio-economic hardship on transition from school to university	Securing funding	Difficulties securing a registration fee
		Confirming a space in accommodation
	Adjusting to a new environment	Unable to go home as often as one would like
		Language differences
	Black Tax	Sending money home
		Pressure to perform academically in order to be able to provide financially after completion of degree
Effects of persisting familial socio-economic hardship and stress on mental health	Stressful life events	Emotional and verbal abuse
		Physical abuse
	Vulnerability	Genetics
		Family history
		Previous life events
Effects of mental distress on academic performance	Struggling to concentrate	Failing tests, assignments and subjects
		Extending degree completion time
How students cope with stress and mental health challenges	Stigma surrounding mental issues	Fear of family's disapproval
		Cultural stigma

Solution students believe should be implemented in order to address social exclusion and mental illness within universities	Student wellness services	Limited Capacity
		Western centric
	University environment	Focus on inclusivity
		Transformation of staff

4.3.1. Experiences of familial socio-economic hardship before coming to university

4.3.1.1 Lack of essential resources

Participants were asked about their background, where they came from and the circumstances in which they grew up in. It was important to understand the respective students' experiences of socio-economic hardship before coming to university and how it shaped them. These questions were asked to engage a better understanding of how these circumstances may have shaped them into the individuals they are today and how they handle the challenges they face in adulthood. All participants came from marginalised backgrounds.

I excelled in everything, and I loved high school, it was a great experience. But it was also a very rocky experience, because I had to deal with a lot more, because I had a part-time job in high school, over and above everything else committed to, in the school, and also I had to pay for my own uniforms and things like that, I tried my best to pay for those as best as I could, because I didn't like the idea of asking my grandfather to pay for that, because he's also just a pensioner (Participant C, Male, 20, Second Year studying English, History and Politics).

My mom's been through so freaking much, like having to deal with not working because her son's disabled, you want your children to have food, but you don't have money, so you're depending on a man who's cheating and he's an alcoholic. I fully understand her anger now; but it was just like. so she was almost violent towards my dad because she was so angry, and she needed money because we needed food (Participant K, Female, 28, PhD Medical Anthropology).

My dad and I got into this argument, at the end of last year, because he would just. every day, when he'd come home, he'd find something to scream at me about, and it got to the point where it was even bothering my sister, because I would make sure that the house is

clean, and make sure that I cooked food; and after my mom passed away, that kind of became my thing, like I kind of became the motherly / wife, figure in the house, which is something that really bothers me. Cleaning up after people and cooking for a grown man, and my sister (Participant H, Female, 21, Final year English and Film).

Most participants had to take on a lot of responsibility when they were young and assume adult responsibilities. Participant H spoke about having to take on household duties after her mother had passed away and having to take on all that responsibility. They could not afford additional help and her dad did not play a supportive role. In addition to this, most participants had grown up in low income households because of reasons including a single income, unemployment or low- paying jobs. Participant K's mother could not work as she had to take care of her brother who was disabled; they thus had to depend on the participant's father for income despite the participant's mother wanting to leave him as he was abusive. All participants came from backgrounds where the financial difficulties experienced by their families affected them growing up. The financial struggles increased the levels of pressure participants experienced over time. Participant C mentioned this pressure as he had to do a part-time job and pay for his uniform himself. As reflected in the narratives above, most participants had to find part-time jobs to pay for living costs and/or assume an adult role in running the household. The narratives above link to the findings from Marais (2013) and Lehohla (2014), who both state that South Africa has high levels of poverty and inequality. This poverty and inequality was evident within the participants' socio-economic backgrounds (Marais, 2013). All participants had complex childhoods with various financial restrictions and challenges that they had to navigate which would have created a sense of instability and stress.

4.3.1.2 Parents inability to secure permanent work

Participants were asked about their parents' education and the breadwinners in their households. These questions were intended to explore each student's experience of familial socio-economic hardship during childhood. Most participants' parents hadn't managed to secure full-time work due to a lack of skills or there was only a single household income.

So the house is in Bo-kaap, but it's kind of like if.. they wouldn't have been able to have buy the house themselves, it's because my grandfather bought the house and split it down. Also like none of my father's family have tertiary. Well, they don't have matric or tertiary education. So like my father's a storeman, my uncle is a tour guide, other uncle used to drive taxis, so they're not able to sort of sustain that, or sustain employment. So my mother, doing the Moslem School, she sort of substituted, that sort of thing, ja. So ja, within our household, like I don't personally remember my father not working, but I know.. my mother told me of a time where... I mean, she started doing the Moslem School because my father wasn't working. So that would have been like just before I was born, or something, ja. No, just after I was born (Participant E, Female, 32, PhD Science).

At the time, my uncle worked, and no one was working, my cousins were not working; I was the youngest in the house. My aunt was a pastor at home, we had church in the backyard. So I had the five cousins, all of them were older than me, they were in high school when I was in primary, so we only had one source of income from my uncle, and my mother was self-employed; my mother passed away 2005. So when we were staying with my aunt, my mom was self-employed, selling clothes, so she used to go to Durban, buy clothes, and sell them, and send money for groceries and food, for us, to my aunt, send money to my aunt But my mother did not send money every month because maybe she keep like three months, four months, doesn't send money, because it's not guaranteed that business will go well, so if she did not send money for groceries, aunt would have to make a plan (Participant A, Female, 29, Masters in Mechanical Engineering).

There were often high levels of uncertainty within the household as employment of the breadwinners was not always guaranteed with piecemeal jobs or low-income jobs. There were also many family members, including extended family depending on a single income. Participant E stated that her whole family including extended family members lived in her grandfather's house. She also said that her father and uncles struggled to find permanent, stable income, as well as that they never received their matric certificates. Participant A grew up with her aunt and cousins who all had relied on one income after her mother passed away. Baker (2019) states that a lack of access to quality education and a high unemployment rate continues the 'cycle of poverty' in South Africa. Most of the participants were amongst the first members of their respective families to have had the opportunity to attend university.

4.3.2. Effects of familial socio-economic hardship on transition from school to university

4.3.2.1 Securing funding

In order to understand how participants were able to afford their university fees, they were asked questions about funding, including the registration fee, cost of food, accommodation, textbooks and transport. Most participants were funded through NSFAS and therefore stood below the R350 000 combined household income threshold (Bokana, 2010).

Originally, my mom was trying to save up as much as she could, but then when my dad lost his job, my mom had to kind of pick up what he was kind of doing, so that depleted my school fund; so then I applied for funding very, very late, and luckily I got it, but I got it pretty much three weeks after the date that I was supposed to get it, so that just pushed everything behind for me. But I was happy that I got it eventually, so that's how I'm studying, NSFAS (Participant B, Female, 19, Second Year Politics and Sociology).

I really really wanted to, but there wasn't money for it, not even for the application fee; and so my sister was working at the time, and she said, okay - because I tried to always get good grades - and she said, if you get a bursary, a scholarship, whatever, I'll get your registration and your application fee; and she did. Undergrad was bursaries and I worked. Honours was bursary. partial bursary, and I worked. Masters was all scholarship, and currently my PhD I'm still funding that (Participant K, Female, 28, PhD Medical Anthropology).

I really felt the pressure last year, because I was... ja, I needed to finish, I really would have loved to have finished last year, but I just couldn't, because the money just didn't quite come together. So this year, like I've said, I've just had to put certain things aside. I think at some point you don't feel like you're being fair to your family, because you denied them certain privileges, so that you pay up your fees (Participant R, Male, 32, PhD Media Studies).

And I was speaking to... I don't know what his job was, but he was kind of under the Dean of my faculty, so I was communicating with him, and letting him know everything; and they had given me one day to make it here, which was pretty much impossible, so my granny stepped in, and she said, we can work it out after a weekend. So the Monday, I raised enough money, and I flew this side and I had no idea what I was doing, where I was going, I had no rest, I had nothing in order, but eventually, I remember just walking up and down between upper and middle campus, and I found this student housing people, and when I

went there, I told them that I'd just landed right now, I don't have a plan or anything, and they said, we don't have a place for you to stay, come back tomorrow; and I said, no way, I can't come back tomorrow, just give me something for now and then they spoke to, I think, the manager there, and then there was somehow, a room at Fuller, so they allowed me to stay there, and then that's how it became my permanent res. And then I did the physical application at the building, and it took probably two weeks, for me to get registered because they had just mixed my applications with international students, so I was pretty much unregistered for two weeks, and I was under lots of stress, but then I still tried to attend my classes, which I was also very behind, by probably like five weeks behind, so ja,. But then, ja, everything worked out slowly, and then I got the hang of things, and then, ja, I kept making sure that all of my financial aid stuff was in order, and then I just did my part, academically (Participant B, Female, 19, Second Year Politics and Sociology).

Most participants expressed stress related to affording and securing funding for university. The majority of participants knew they would go to university however, they were not certain where the funding would come from. Participant B started university late due to challenges when trying to secure funding, therefore she fell behind academically. Participant R, on the other hand, had to extend his/her degree time due to a lack of funds. Most participants were on NSFAS and acknowledged the impressive growth and transformation of the South African student population. This linked with findings of the International Education Association of South Africa (IEASA, 2009) that the government-funded National Student Financial Aid Scheme (NSFAS) played a vital role in addressing the racial imbalances in higher education. However, all participants highlighted that they still faced unique social and economic challenges as they came from marginalised backgrounds. Participant B struggled to secure her registration fee and a place in accommodation, causing her to fall behind academically. This narrative is reflected in Bokana (2010)'s findings that students from marginalised backgrounds faced unique social and economic challenges and because of this were more likely to drop out (Bokana, 2010). Without the necessary material and non-material resources, it is more difficult for a student to cope with university work and other daily stresses.

4.3.2.2 Adjusting to a new environment

Participants were asked about their transition from high school to university, how this had affected them and what challenges they experienced. All participants had had challenges adjusting to university life.

To be honest, like I've just noticed this general like classmates of mine, and stuff, like grades and language barriers, I mean they're still there, but like they're not like the biggest of barriers; but I think [...] might be, and it's not because people like, you know, you don't come from like this family, you don't have much money, so I won't hang out with you; it's just like you'll be friends with people, right, and they'll like.. you won't be able to go out as much as they do, and then you kind of loose ties with them, and that you know. It's just the way the world is, you know, it's just no one's to blame for it, to be honest, it's just I mean, like if it's the [...], then like we go out like ten times a month, and you're only able to come like two times a month, you won't exactly, like you know, but you'll just feel left out because you don't know what we are talking about, like the other eight times, so you're kind of stuck relating less, then ja, and then shoot yourself in the... but ja (Participant F, Male, 22, Third Year Medicine).

Oh no, I was just going to say, before the accident even, when I first started varsity here at UCT, I felt a bit out of place, in terms of; there are just very few people that come from the Cape Flats, and that speak like me and stuff, so when I first entered my first tutorial, everyone kind of spoke like they were from Model C schools, or whatever, and I felt extremely out of place, like I didn't belong here, even though I got the marks to be here. Ja, so that also caused anxiety; but that was before the accident, and that's not something I'm worried about now; that's the norm now ...culture shock, ja. No one has ever like made fun of the way I speak or where I come from, or whatever, but I feel like the voice inside my head can be mean sometimes, and I'll kind of convince myself that no one wants to speak to me, because I'm not as rich as them, and.. you know (Participant H, Female, 21, Final year English and Film).

So the challenges that I had were the language barrier, because I moved from an environment where I learnt everything in isiXhosa, I learnt English isiXhosa, Maths isiXhosa, literally everything. Now when I got to UCT, I had to be learning Computer Science, Stats, Maths, everything in English, and let alone that the issue was the English, it also was with the accent. UCT has all these international lecturers, especially in ComSci, or whatever you find [...], you know, with different accents from all over the world. So for me, there.. and also like now, because I learnt only how to write English, not speak it, so it

was a challenge, and even in socialising with my peers, it was an issue, because a lot of kids there are, you know, prep schools and all that, so I felt like I did not fit in anywhere; I was just an outsider. Ja, and there's a minority of us with the same background as me, I also experienced this language barrier. So I got into student politics, student leadership, I was advocating a lot of transformation, and trying to address issues of language barrier, ja (Participant A, Female, 29, Masters in Mechanical Engineering).

So when you come here, I come from a school that cost R800 a year; one of my black friends came from a school that cost even less. There is not one white person in my class who's come from a school like that, okay (Participant J, Female, 25, Final year Medicine).

Most participants moved away from home and therefore had to deal with being away from their homes, family and friends. They had to adjust to a new environment where they sometimes felt out of place because of financial struggles and language differences. Participant F spoke about not being able to fit into certain groups, as he could not afford the same social activities. Participant J highlighted the link between income and race, saying that as a black student they came from a school that cost R800 a year, and s/he hadn't come across any white students with a similar background. Participants H and A both pointed out the language difficulties as English was not their home language, as well as feeling judged for speaking a certain way with an accent. The effects of socio-economic hardship during the transition from school to university is evident in the narrative above. It is a big adjustment for students to adapt to a completely new environment. The narrative above echoes Bokana's (2010) study which found that about half of students drop out of university in their first year and only 15 percent of them complete their degrees in the fixed time. Students are overwhelmed with university life and trying to balance everything. Many students needed to ensure their academic performance was good enough, secure funding, all this while trying to find a group of friends with whom they felt comfortable with, often being far away from familiar family and friends.

4.3.2.3 Black Tax

Participants were asked about their responsibilities towards their parents and family members. These questions were asked in order to explore the link between black tax and the legacy of apartheid. Most participants had experiences relating to black tax.

For me, the only thing that I want is to see myself with money, so that I can assist with my family. That's the only thing, it doesn't matter what kind of a job I get. Yes, I want to take care of my mom and my siblings, ja, that's the only thing (Participant D, Male, 27, Second degree- First Year Analytics).

So my cousin would always be like, we need to work so that we can provide for them, in a way; because if I'm going to become successful and I have money, I will have to be looking after anyone in my family that doesn't have, because well, we didn't have, my family was there to support us, financially (Participant O, Female, 21, Fifth year Sociology and Film).

Ja, so my uncle's son, feels entitled to be supported by me, and I will feel obligated to do something for him, because they are part of the extended family, that's the [...] we're talking about. So you can even get my father's sister, an aunt, who expects me to help her with food. So it's not a responsibility you may say you're really forced to help, but ja, from a cultural perspective, it's expected. (Participant R, Male, 32, PhD Media Studies)

My mom has no debt to this day, and that is like since I was super young. My mom: I don't know how she does not have debt; but she pays every bill always, and the little she has left, that's food, but she never sacrifices the bills for food; she always saw that we never had to live in debt. So I, to this day, don't have to help my mom with debt; I'm helping her with her day-to-day living (Participant K, Female, 28, Phd Medical Anthropology).

Most participants spoke about the pressure to pass, graduate and find employment in order to provide for their parents and be able to take care of them financially. Participants either felt an external pressure put on them by family members or an internal pressure where they felt the responsibility to utilise their opportunity in order to give their family a better life. Participants D and O said that they both wanted to graduate and find a job to provide for their families. Participant R highlighted that although black tax was a lot of pressure, it was also part of the

culture of Ubuntu. From the narrative above, it can be concluded that the concept of black tax remains relevant and that the legacy of apartheid still effects many young South Africans of colour. Despite every student having the same opportunity to be at university, they struggle with different circumstantial challenges (Ward, 2009). Van Breda (2018) confirmed that marginalised students often worry about their families and their finances. A student that is responsible to provide for other family members has extra pressure to succeed and this increases the stress a student experiences at university.

4.3.3. Effects of persisting familial socio-economic hardship and stress on mental health

4.3.3.1 Stressful life event

Participants were asked about their relationships with family members and family support structures in order to understand how this shaped them as individuals. Most participants had experienced a particular stressful life event.

*So we got into an argument and whenever we get into arguments, my dad always tells me that I shouldn't be mad about what he's putting me through, because life it going to f*** me over anyway, and that nothing bad has happened to me yet, so I just need to shut up. And then during this argument, he said those words again, that nothing bad has ever happened to me, and I just exploded and I told him [about my rape], and he told me that.. he was shocked when I initially told him, and then he said, no, but you were eighteen, so it couldn't have been rape (Participant H, Female, 21, Final year English and Film).*

So growing up, my family. I was born into an abusive situation, right from the word-go; there was a lot of physical abuse. My father had to be the father of his siblings, because his father - it's like a generational thing, the cycle never got broken - so my father.. my grandfather on my father's side, so my paternal grandfather, was raising like he had different families, like two or three wives, and they all lived separately, so he was never there for my father and his siblings. And my mother was... I mean, my grandmother, his mother, was very depressed, and very... I mean, she was treated badly by her stepmother, and she was abused by her stepmother, so when it came down to it, my father would be instructed by his mother, to discipline the children, and in those days, it just meant beating them (Participant J, Female, 25, Final year Medicine).

My mom was angry, understandably so, I mean, he [dad] was also unfaithful, a lot, and I thought it was only two women, only to live with my granny and find out there were a lot.

And also rebelling against my mother, because she was always angry, and screaming and I didn't understand it, so I was just rebellious, and I never wanted to be at home. But now, as an adult, my mom's been through so freaking much, like having to deal with not working because her son's disabled, you want your children to have food, but you don't have money, so you're depending on a man, who's cheating and he's an alcoholic. I fully understand her anger now; but it was just like so she was almost violent towards my dad because she was so angry, and she needed money, because we needed food. And I remember her throwing him with things, and he, at some point, because of all the smoking, his left leg got amputated, and he got a prosthetic, and he had crutches, and I remember her throwing him so much with things, one day, like brass - brass is like an old school.. I think old people only have it, it's like this, it looks gold-ish, but it's not gold, it's brass, and it's ornaments that people have - so my mom had a lot of those, and she just threw my dad one day, and I remember him just being like.. because he was a calm man, he's super calm, and he'll like take it all, but I think it got to such a point that he got hold of her, and he was choking her with the crutch; and my brother's sitting there in a wheelchair. I think my baby brother was either inside or he was sleeping, but I remember him not being in the space. And this, for me, yoh, it is super personal. So ja, it's probably the day I feel the most guilt about, because he was in a wheelchair, she's being choked, I must be, at this age, I must be like nine or ten, and I remember just running; and I left my brother in a wheelchair, sitting there to watch his mother get choked and I ran. And it's the day I feel, to this day, the most guilt about. I think it's the worst thing I've ever done (Participant K, Female, 28, PhD Medical Anthropology).

I was sexually assaulted. My father was an alcoholic; he died. I don't think him dying was trauma for me though; I was quite at peace with it; but he died after I was diagnosed in 2015. (interruption) My mom definitely has OCD, and she was diagnosed with depression; so she's the type of person who, everything has a place, and if you put it out of place, my mom just freaks out, like intensely so (Participant K, Female, 28, PhD Medical Anthropology).

Most participants came from tumultuous backgrounds. These tumultuous childhoods included physical, sexual, verbal and emotional abuse. From the narratives above, it can be deduced that the tumultuous upbringings of participants included a lack of supportive relationships, various forms of abuse and mistrust within the family structure. This affects an individual's psychological state and can impact an individual long after into their adulthood. Participants K and J grew up in households with emotional, physical and sexual abuse. Participant H was sexually assaulted but outside her family and when she told her dad, he did not offer any support

and told her she was lying. Mall et al. (2018) looked at the relationship between childhood adversity, recent stressors, and depression in students attending a South African university during the previous year. Mall et al. (2018) found that emotional abuse or neglect during childhood were one of the strongest predictors of depression in adulthood. Marais (2013) also stated that the abused often become abusers themselves, this generational poverty prevalent in one of the narratives above. Participants carry this trauma with them and still have broken relationships with some family members, this affects their trust and support structures negatively.

4.3.3.2 Vulnerability

Participants were asked how their mental struggles started and what factors participants thought caused it. Most participants were aware of family members with mental illness or challenges.

Ja. I mean, like I have an aunt who... I think it was actually my first year, here, ja, she got like badly depressed and stuff, and ja so she started also like medication and stuff. I mean, like my parents... I heard my mom talk about it like... I mean, she was not like.. it was just like being there for her (Participant F, Male, 22, Third-Year Medicine).

Although not diagnosed, I know from my dad's side, especially, I think my dad seems to be a bit of an anxiety kind... he could be diagnosed with it. His mother, and then even on my mom's side, my mother's mother could be a bit of anxiety [...] herself. But I do think, as well, that like socioeconomics, especially from my dad's side, just like that also puts a lot of pressure to create anxiety, and then I think that's what's triggered it on there. And then I think it's the whole mindset of my parents and being raised to their almost entrenched anxiety, and then my mother almost has neuroticism about poverty and whatever, that has like almost come with a scarcity mindset, that in my upbringing, has made me experience the same thing, so like I can never do this, or go there, or whatever, so I always sit really on the edge. So I felt like I had to get A grade, because I wouldn't be able to do well in my future (Participant G, Male, 27, Final year Finance and Accounting).

I never directly told anyone that I was suicidal, but I did ask my aunt for help, my mom's sister, she went to a doctor and she found out that she was clinically bipolar, and also my mom's mother suffered from depression and she retired early. My dad doesn't really like... mental health is not a conversation that I have with him, but I'm pretty sure... and I'm no psychologist, or whatever, but I'm pretty sure my dad's a narcissist (Participant H, Female, 21, Final year English and Film).

You know, my mother's side, she never had it easy, her mother was institutionalised twice, more than twice, more than two times, I think she had schizophrenia. And then my aunty, my mother's sister was also institutionalised, so she was depressed and she had...I don't know what other disorders she had. But so there's a heavy line of that in my family. But my mother, my grandmother specifically, my maternal grandmother, she suffered a lot from schizophrenia, she'd be running through the streets naked, she tried to burn down her house, with all of the children in it. My mother was the oldest, so she had to take care so she became the mother to her siblings (Participant J, Female, 25, Final year Medicine).

I mean, my psychologist and I have been speaking about this for three years, what really did start, you know. I think it's a whole collection of things, I think it's you know, the dopamine, the serotonin levels; I think it's a series of traumas; I think it's also genetics; I think a part of me – this is going to maybe sound silly – but a part of me almost thinks some coloured people just grow up in a system where you can't experience your sufferin, in a way; like I couldn't almost grapple with what was happening in my life when I was younger, like all the traumas or whatever was happening. And then when I was able - and this was only like the age of twenty-five - when I was able to start living not from hand-to-mouth; it almost gave me the space to think about things in a different way (Participant K, Female, 28, PhD Medical Anthropology)

Most participants knew of family members and previous generations that had struggled with mental illness. The rest of the participants did not know of family members that had medically been diagnosed with a mental illness but believed that there were family members who were affected, but never formally sought professional help due to the stigma attached. The narrative above shows that there was a history of mental illness within the participant's family. Participants F, G, H and J each identified a parent with mental health issues. Participant K says that as a person of colour they grew up in a system where she and the generations before her continuously experience trauma due to socio-economic issues. This links to the Stress Vulnerability Model (Gamble and Brennan, 2005). The model states that the cause of mental illness is most likely a combination of genetics and exposure to stress (Gamble and Brennan, 2005). All participants experienced a combination of these two factors, leading and contributing to their mental struggles.

4.3.4. Effects of mental distress on academic performance

4.3.4.1 Struggling to concentrate

Participants were asked how their mental health challenges affected their academic performance. This question was asked to understand the complexity of all these factors and how they affect one another. Most participants felt that their mental health challenges affected their concentration and motivation levels.

I was meant to complete my degree last year, but I had some psychological issues, which led me to seek help, mental help; so I went to student wellness, and we're sorting all that out. I ended up not writing my exams last year, so I had to redo my final year this year (Participant N, Female, 24, Fifth year Psychology).

But I had like severe mental health struggles last year, and so I didn't perform academically at all; and I was actually financially excluded, and then like I presented like that, to fight my way back in university; and now, I'm back on NSFAS, they like gave me an exemption (Participant C, Male, 20, Second Year studying English, History and Politics).

What led to me being depressed, was the fact that I felt like I was not completing my degree, you know, I think at that time, I was feeding myself with a lot of thoughts that I'm a failure, maybe I'm not supposed to be an engineer.. because I was struggling with one stupid course, which is technical drawing. I couldn't draw. A lot of people pass it, because they went to technical high school, and all that, and it's something that [...] you passed, over years, and I was supposed to master that, within a semester, which is like three months. So the fact that I'm from a high school in Khayelitsha which did not have technical drawing, was not taken into consideration, that I had managed to study electrical field, with a lack of solid background, and [...] run, and I couldn't draw. So it really was like messing with my mind that something so stupid and simple, so and I thought like, I needed that degree more than anyone else. [...] needs this degree, I need this degree so that I end the generational poverty struggle, and a lot depends on this degree. So now I was putting a lot of pressure on myself, and saying, I need to pass this course. I have done that course like more than four times (Participant A, Female, 29, Masters in Mechanical Engineering).

Like I mean, I first got 14% in my first test for accounting, which was in March. Like I felt a lot of things, I felt depressed, I felt like.. like you feel a lot of things, as a student, this

thing it has never happened, or something like that, feel burnt out, so it was that (Participant D, Male, 27, Second degree- First Year Analytics).

Okay, so it's a very complicated thing because I've been here for such a long time, because of changing degrees, having anxiety and depression in almost ten years. I have one course to evaluate at the end of this year. So fees have been paid for by my parents, by scholarships, which had come from mainly UCT and the private sector, like Old Mutual, and then some even from government entities (Participant G, Male, 27, Final year Finance and accounting).

Most participants felt that their mental health challenges affected their concentration and motivation levels such as Participant D who felt depressed, burnt out and was not doing well academically unlike when they were in high school. This led to the participants failing tests as well as having to take time off and extend their degree time. All five participants spoke about having to redo a course, exam or academic year. Participants also pointed out that not managing their academic work further contributed to their stress and anxiety. From the narrative above we can see that mental health challenges affect students' ability to perform academically, and vice versa. The participants feel the pressure to perform as they are often the first in their families to have the opportunity to attend university. They also don't have the financial means to repeat subjects as easily, such as Participant C, who did not perform academically and was financially excluded. This links to Bokana's findings (2010) that students from marginalized backgrounds face unique social and economic challenges and because of this, are more likely to drop out.

4.3.5. How students cope with the mental health challenges and stress

4.3.5.1 Stigma surrounding mental issues

Participants were asked about their experiences telling friends and family about their mental struggles. They were asked about the general perception of mental illness in society, at UCT and within their individual cultures. All participants believed there is still a stigma surrounding mental issues.

I think people from my race in particular, they don't know how to deal with someone who suffers from mental illness, because it's not something that's spoken about at all, because I

don't know if anyone in my family has suffered from mental health, but there probably is, and I wouldn't know, because we don't know how to discuss it, we don't share it, so we don't know how to deal with it, so I think that's a big, big problem (Participant B, Female, 19, Second Year Politics and Sociology).

In my community, it's very stigmatised. Ja, nobody believes... like everybody has mental health problems, to be honest, and nobody recognises it, nobody wants to get help, everyone thinks they're fine, and people are very arrogant about it. Like among the Indian community, not the Muslim community, but like the Indian, the broader Indian community, alcoholism is huge, right, and that's a disease, and no one will ever recognise it, for instance, that's the first thing. Second thing is anger issues that stem from mental health problems; I mean, I'm not a psychiatrist, I can't diagnose, but it's very clear that people.. like domestic violence and things like that exist, because of mental health, and nobody will ever recognise that. There's just huge stigmas to it, so people refuse to get help, because they don't see these things as legitimate, they don't see these things as illnesses, they see it as like concepts that are in your mind, that you adopt or you don't adopt, and if you don't adopt it, you don't have it, ja (Participant C, Male, 20, Second Year studying English, History and Politics).

But I think it's likely to apply to every black family. Well not every one, but a lot of the black families. We tend to pretend mental illness doesn't even exist. Mental illness like depression, like bipolar, those kind of mental illnesses, especially people from rural areas, they don't exist. You have issues, you don't want to deal with them. You have a situation at home, you're poor; like the rest of us, deal with it; that kind of thing, you know. They refuse to see beyond that. The only things that they do acknowledge, would be cases where people hallucinate, like your schizophrenia, or your like serious, serious mental issues where a person can't cope. Like where a person lives on the street and they don't bath, they hear voices, and all that stuff. That is more real to them, but then again, especially in rural areas, again, they may say, oh, some family bewitched that person and whatnot; to them it's not a health condition, it's not a health issue (Participant L, Female, 25, Masters Pharmaceutical studies).

Ja. Survival is such a thing. And now I'm lying in bed and I have a job, I have a full-time job, and I'm not going to work. Why aren't you going to work? You're going to lose your job, you're so lazy. Ja, I think that's a big part of the stigma. It's a massive part of why I won't say anything (Participant K, Female, 28, PhD Medical Anthropology).

All participants believed there was a stigma attached to mental illness. It is clear that there has already been more awareness surrounding mental illness but that there are still many barriers that need to be addressed. The stigma stems from a lack of information, as well as the perceptions of mental illness in certain cultural spaces (Green, 2016). Participants B, C and L state that in their cultures and/or race, which included Indian, Coloured and Black, mental illness is not seen as real. The lack of information can also allow an individual to go undiagnosed and unable to deal with their mental struggles. Participant K said that she thinks in survival mode and feels grateful for the opportunity she has, she does not want people to think she is lazy or makes excuses. Stigma did not prevent many students from seeking and getting the help they needed, but they did prefer to not share this with family because they did not want them to worry or think that they were ungrateful.

4.3.6. Solution students believe should be implemented in order to address social exclusion and mental illness within universities

4.3.6.1 Student Wellness services

Students were asked what treatment options they used and how they felt they could possibly be improved. This was asked to obtain greater insight into what solutions they felt could be implemented to address social exclusion and mental illness within universities. Most participants did seek professional help.

And 2016 - so first day at UCT it was great – 2016, and then mother passed on. Mhm. And then the ground beneath my feet shattered, and everything came up, and I didn't know what it was; it was a whole year where it was like living with a stranger. What was going on? [...] with somebody, and not being able to do the things I say I want to do. Yoh, so I went to student wellness. I spent some time reading some stuff, got familiar with some terms. I didn't want... I was very aware of how you fall in between the cracks because having known from the beginning that there was something wrong with me and then not being able to articulate it when I go ask for help, I [...] falling through the cracks. Also, I'm a black girl. So that is very aware that...so when I went into student wellness, I'd done some research; so I walk in, and I say, I think I have an anxiety disorder; and that's the first thing I said. And then we went through all the tests, the psychiatrist [...] psychologist; we went through the tests, and everything and confirmed I have an anxiety disorder. So [...] had to start treatment. They put me straight on medication, I'd gone totally [...], I could not

function. They put me straight onto medication, I was on medication for twelve months, and psychotherapy. So I was meant to graduate in 2018, so got diagnosed 2017, end of the year, and came back to UCT 2018. I spent 2016, trying to deal with it myself, like trying to figure out what was going on, also calling home and telling people at home, but my mother had passed on so it was just the three of us. So my siblings, nobody knew how to deal with the situation, nobody had the language either, to talk about these things. Very traditional, very old school family. My aunt is a traditional healer, so that was the one thing that's what she was offering the whole time. But so in contrast with where I was headed, because I was UCT and she's in Eastern Cape and for traditional healing you have to be home, you have to go to the homestead. You do all of those things at the homestead with your ancestors and everybody that knows you. So that was in contradiction with what I was trying to do, so I rejected that completely; I'm not going down that road, I have to take a different road. So that isolated me from my family, they didn't know what to do (Participant M, Female, 25, Third-year Film, Literature and Media Studies).

Ja, anxiety and depression, it's not really discussed in the coloured community;. or adults just decide, you're just going through a phase and whatever else. But I did seek help with the student wellness centre, after my mom passed away in June of 2016, because I just didn't want to attend class. I didn't want to come into university every day, and ja, they told me that they were booked up until the end of the year, I think; so I couldn't get help from them, and I just.. I don't know how I got through that, because I had no help, ja (Participant H, Female, 21, Final year English and Film).

I never had problems getting the help that I needed, but you know the help is there, but if it's not offered, if you don't speak to me in my language, then you're not speaking to me (Participant M, Female, 25, Third-year Film, Literature and Media Studies).

I was seeing the UCT psychologist; but it was very difficult, I think, to feel that they understood where I'm coming from. Because, with all due respect, she was a white woman, so just speaking, you're looking for cues of does this person understand the complications behind me? And I felt that she was sincere, but she just found it difficult to understand (Participant P, Male, 24, Masters in Mathematical Science).

At the beginning I saw a counsellor for a bit, because I didn't have enough money for it, and I didn't have medical aid, because I couldn't afford medical aid, even with my job; like I'm supporting my mom and trying to pay my fees and stuff. I was paying rent at some point and food and petrol; ja, I couldn't afford it. So then after the suicidal attempt, my

friends were like, you have to see a psychologist, and then I tried it once a month. My psychologist like... you need to come more, obviously. And then I sacrificed petrol, so I wouldn't go anywhere on weekends, I sacrificed. I'd eat differently, like I'd eat more food that could last, I suppose, longer; or was cheaper; just so that I could... (Participant K, Female, 28, PhD Medical Anthropology).

Most participants sought professional help from Student Wellness. Participant K said that after a suicide attempt she looked for an external psychologist and sacrificed other expenses in order to afford it. Students could not always get an appointment within a decent time frame and felt that they could not get a psychologist with whom they resonated. Student wellness services need to have the capacity to meet the demand, as well as having diverse psychologists so that each student that seeks help can have a psychologist that they feel can really understand them. Participants M and P state that they would prefer a psychologist they could relate to in terms of race and language. This is reflected in Shefer, Strebel and Ngabaza's (2018) findings which highlighted that black students struggled to find belonging and inclusion in South African institutes of higher learning, remnants of an oppressive and discriminatory history. Cornell and Kessi (2017) recommend that staff need to be inclusive of those that have diverse experiences reflective of marginalised students.

4.3.6.2 University environment

Participants were asked about their experiences of the university environment and social exclusion. Participants were asked to share their experiences of the university environment in order to engage whether or not this influenced their feelings of being included or excluded, and how this could be addressed. Most participants experienced feelings of exclusion based on factors regarding their socio-economic background.

I think another difficulty that the university has, like I can mention one particular lecturer, a conservative white man, he, during fees must fall was just out of his depth with what was going on, like when the Jammies weren't on the road, he just went ahead lecturing like nothing had happened. Like dude, if I stay in Rochester House, you are expecting me to walk it's like, I'm out of the classroom at that time, like not going to happen; your lecture is only going to end up with white students because us, as black students, we are not coming here and we dare you to lecture white students only. It was only when I think he was about to start lecturing then he saw just white students there,

and some white students, and they were like, dude, this will create a mess for you, and for all of us, let's just stop. So you have those authority people in spaces of influence, at some point that guy was an HOD. So we have some pockets of resistance and the problem now is, those people are made as though they're the image of all white people in authority in the university, but they are not; like in chemistry, there's the one I think he's the Deputy HOD there now, Faculty of Science. Prof Gammon, he was really sincere, understanding, discussing all these contradictions of what's going on. Explains to me some of the difficulties in hiring in the chemistry faculty; he had one black guy who was at [...], I think, [...] okay the, perfect candidate professor; as soon as they were about to bring him here, Unilever doubled what UCT was offering him (Participant P, Male, 24, Masters in Mathematical Science).

I feel in terms of race inclusivity, I think UCT is really trying to move that way, I think with the new VC, Phakeng, I think she's much more engaging with the students, which is wonderful. I think it's got a way to go, but it's trying to go (Participant K, Female, 28, PhD Medical Anthropology).

Participants experienced feelings of exclusion based on race and socio-economic class in the university environment. Participant P explained his experience during the Fees Must Fall movement, when a university lecturer insisted on teaching even though students could not afford other transport options while the jammie busses were shut down. However, participants felt that there has been progress in terms of inclusivity as expressed in Participant K's narrative. There has been impressive growth and transformation of the South African student population (IEASA, 2009), but as Bokana (2010) states, there are still racial, social and economic divides in educational institutions. Cornell and Kessi (2017) found that black students experience feelings of inferiority due to statues and symbols from colonial times which remain on campus. These racial issues that persisted post-1994 resulted in movements such as Rhodes Must Fall and the call for decolonisation of the curriculum and physical environment (Cornell and Kessi, 2017). The recommendations conclude that solutions such as increasing the number of black academic staff could create more diverse teaching experiences and be more reflective of black students (Cornell and Kessi, 2017).

CHAPTER FIVE: CONCLUSIONS AND RECOMMENDATIONS

5.1. INTRODUCTION

This final chapter will conclude the major findings of the study and make recommendations to be implemented for future studies. We will see how the different findings are connected and relate to each other, including an individual's socio-economic background and mental health challenges. The conclusions will also link the findings to the objectives set out at the beginning of the study.

5.2. SUMMARY OF MAJOR FINDINGS

5.2.1. To determine the students' experiences of familial socio-economic hardship before coming to university

The findings demonstrated that South Africa has high levels of poverty and inequality, and this was reflected in the participants' backgrounds. The participants' respective backgrounds were ones of financial uncertainty, thus creating a sense of instability and stress. There were high levels of uncertainty within each household as employment of the breadwinners was not always guaranteed, neither with piecemeal jobs nor low-income jobs. This lack of access to quality education and a high unemployment rate contributes to the 'cycle of poverty' in South Africa. Many family members, including extended family depend on a single income. Participants also had to assume adult responsibilities early on due to many of them growing up in single-parent households due to the passing of one parent or, one parent leaving after a few years. This added a lot of stress to the participants, as they experienced a lack of material and non-material resources on a daily basis.

5.2.2. To understand how the experiences of familial socio-economic hardship affect the student's transition from school to university

The findings determined that the majority of participants knew they would go to university, however they were not certain where the funding would come from. Most participants were on NSFAS and acknowledged the impressive growth and transformation of the South African

student population. However, all participants highlighted that they still faced unique social and economic challenges as they come from marginalised backgrounds. Without the necessary material and non-material resources, it is more difficult for a student to cope with university work and other daily stresses. Many students needed to ensure their academic performance was sufficient and their funding secured, all this while often being far away from familiar family and friends. The findings also determined that the concept of black tax remained relevant and that the legacy of apartheid still effected many young South Africans of colour. A student who is responsible to provide for other family members has extra pressure to succeed and this increases the stress a student experiences at university.

5.2.3. To ascertain if the persisting experiences of familial socio-economic hardship and stress affect student's mental health

The findings determined that the tumultuous upbringings of participants included a lack of supportive relationships, various forms of abuse and also mistrust within the family structure. This affects an individual's psychological state and can impact an individual long after the experience, into their adulthood. In addition, the findings showed that there was a history of mental illness within the participant's family and the cause of mental health challenges was most likely a result of a combination of genetics (inborn and acquired) and exposure to stressful life events. All participants experienced a combination of these two factors, leading and contributing to their mental health challenges. Without the material and non-material resources needed while adjusting to university life, a student will have difficulty coping with stress and mental health challenges.

5.2.4. To understand how the students' experiences of mental distress affect their academic performance

The findings determined that mental health challenges affect students' ability to perform academically, and vice versa. The participants felt the pressure to perform as they were often the first in their families to have had the opportunity to attend university. They also didn't have the financial means to necessarily afford all their living costs to assist their studies such as nutritious food, a laptop and data, as well as the option to repeat subjects as easily. Students from

marginalized backgrounds who faced mental health challenges had unique social and economic challenges that made it more difficult to access the resources they needed to cope and thus their academic performance was affected. Due to the symptoms of mental distress, many students struggled to go to class, concentrate and feel motivated to study.

5.2.5. To determine how students cope with mental health challenges and stress

The findings determined that there are still many barriers needing to be addressed regarding awareness surrounding mental illness. The stigma stems from a lack of information, as well as the perceptions of mental illness in certain cultural spaces such as communities of colour. The lack of information can also lead to an individual remaining undiagnosed for a long time and unable to deal with their mental struggles. Many students choose not to share their mental health challenges with family for several reasons, for example, they may fear that it will add stress, or they may feel guilty as family members may judge them as having no reason to be 'sad,' but to rather to show gratitude for the opportunity to study at university. Although the stigma was still very prevalent, this did not prevent students from seeking and getting the help they needed at university from Student Wellness services.

5.2.6. To determine which solutions students believe should be implemented in order to address social exclusion and mental illness within universities

The findings discovered that students could not always get an appointment within a decent time frame at Student Wellness, and they felt that they could not get a psychologist with whom they resonated. Student Wellness Services needs to have the capacity to meet the demand, as well as having a greater diversity of psychologists to meet the range of students. Participants felt that there had been progress in terms of inclusivity, yet had still experienced feelings of exclusion based on race and socio-economic class in the university environment. The legacy of apartheid is still present in terms of the socio-economic effects which are closely linked to South Africa's history of racial segregation and oppression. The findings suggest that university staff, Student Wellness staff and the physical environment need to be inclusive of experiences reflective of black students.

5.3. RECOMMENDATIONS

This study aims to contribute to creating understanding behind the complexities and multiplicity of student life in the South African context. We still see the effects and legacy of apartheid, as students from marginalised backgrounds struggle with various social and economic issues. Students from marginalized backgrounds lack access to the resources they need in order to cope and manage their stress and mental health challenges. The study can be used to get a grassroots perspective on mental health challenges in university students and how background, and access to resources influences how students can cope with the challenges they face. In terms of addressing a lack of support structures and access to resources for students from marginalised backgrounds, it is recommended that students be involved at a grassroots level and that they play active roles in suggesting practical solutions.

It is also recommended that the university environment including staff and leadership structures are aware and receive training in terms of the inequalities that continue to manifest at university level, as well as staff that have experiences reflective of students of colour. It is also recommended that Student Wellness increase capacity so that response rate is quicker, this being vital for someone urgently requiring professional help. It already takes a lot for most people to seek help, so the response should be taken seriously and personalized, and of course, remain professional throughout. The study will hopefully create further understanding and interest, as well as the need to better address the inequalities which manifest throughout university life.

On a national scale, The National Youth Policy for 2015–2020 (NYP 2020, 2015) does emphasise the importance of the diversity of the youth, as well as addressing poverty and inequality. However, the document uses a top-down approach and it is recommended that the document rather take a grassroots approach. The NYP 2020 could have achieved this by directly involving the youth when creating the document. It is recommended that the youth be involved in amending this document as the plan is intended for the youth, and it is important that the youth's insights are valued and that they participate in the plan.

The National Mental Health Policy Framework for South Africa and strategic plan 2014-2020 (2012) omits the role and responsibilities of higher learning institutions, highly problematic given students are vulnerable to stress and mental health struggles. The government needs to work with higher learning institutions to ensure that enough effective student wellness resources and services are available for all students. Currently it only looks at schools and NGOs, and there are missed synergies here. For example, The Woodstock Hub, an affordable and accessible counselling service, could collaborate with Student Wellness at Cape Town universities. The National Mental Health Policy Framework for South Africa and strategic plan 2014-2020 (2012) should expand to include and integrate institutes of higher learning in order for sustainable change to be achieved while addressing mental health challenges in South Africa. Students in general, especially those from marginalised groups, are vulnerable and it is essential that they have access to quality mental health solutions and services.

5.4 CONCLUSION

It is concluded that an individual's family background and financial circumstances may have a long-term effect on their psychological state. In addition to this, an individual's socio-economic status also affects their access to resources and tools to deal with the challenges they may face in university life. An individual's mental state in turn, also affects their ability to handle the challenges they face. The findings also reveal that since inception, NSFAS has played an important part in the transformation of the student population and addressing the inequality in South Africa. However, students from disadvantaged backgrounds continue to face unique socio-economic challenges at university and require support structures. Considering all the findings it was concluded that university life is multi-faceted, as social and economic factors are interlinked and highly correlated. Based on the findings of this study, it was concluded that universities need to involve students in finding practical, long-term solutions to the mental illness crisis on campuses. It was also concluded that the university environment and staff should be inclusive and also reflect the experiences of university students of colour. In addition, it is recommended that the government include higher learning institutes in their national policy regarding mental health in South Africa, as well as including the youth when developing policy documents and programmes. The youth and their experiences and insights are extremely valuable and are needed to create solutions that are effective, sustainable and have buy-in from

the targeted population group. The study will hopefully create further understanding and interest, as well as the need to better address many of the stated inequalities which manifest throughout university life.

University of Cape Town

REFERENCES

- Adato, M., Carter, M. R., and May, J. 2006. Exploring poverty traps and social exclusion in South Africa using qualitative and quantitative data. *The Journal of Development Studies*. 42(2): 226-247.
- Babbie, E. and Mouton, J. 2001. *The practice of social research (South African edition)*. Oxford: Oxford University Press.
- Baker, A. 2019. What South Africa Can Teach Us as Worldwide Inequality Grows. *Time*. 2 May. Available: <https://time.com/longform/south-africa-unequal-country/> [2020, 10 February].
- Bantjes, J.R., Phil, D., Kagee, A., McGowan, T., and Steel, H. 2016. Symptoms of posttraumatic stress, depression, and anxiety as predictors of suicidal ideation among South African university students. *The Journal of American College Health*. 64(6): 429-437.
- Bokana, K.G., 2010. The Attrition Crisis in South African Universities. How to Keep Students on the Graduation Path. *The Journal of Interdisciplinary Economics*. 22: 1-18.
- Bawa, A.C. 2019. South Africa's Higher Education System in Crisis ... in a State in Crisis. *Social Research: An International Quarterly*. 86(1): 253-277.
- Bowman, B., and Payne, J., 2011. A profile of students receiving counselling services at a university in post-apartheid South Africa. *Journal of Child and Adolescent Mental Health*. 23 (2): 143-153.
- Cornell, J., and Kessi, S. 2017. Black students' experiences of transformation at a previously "white only" South African university: a photovoice study. *Ethnic and Racial Studies*. 40 (11): 1882-1899.
- Creswell, J.W. 2014. *Research Design: Qualitative, Quantitative and Mixed Methods Approaches*. Thousand Oaks: SAGE Publications.

Department: Health. 2012. *The National Mental Health Policy Framework for South Africa and strategic plan 2014-2020*. Pretoria: Department of Health.

Department: The Presidency. 2015. *The National Youth Policy 2015-2020*. Pretoria: Department of the Presidency.

De Vos, A.S. 2005. *Research at Grass Roots: For the Social Sciences and Human Services Professions (3rd edition)*. Pretoria: Van Schaik.

Gamble, C., and Brennan, G. 2005. *Working with Serious Mental Illness: A manual for clinical practice*. Amsterdam: Elsevier.

Gibbs, A., Govender, K., and Jewkes, R. 2018. An exploratory analysis of factors associated with depression in a vulnerable group of young people living in informal settlements in South Africa. *Global Public Health*. 13(7): 788-803.

Green, D. 2016. *23 South Africans commit suicide each day* [Video file]. Available: <https://www.news24.com/Video/Health/watch-23-south-africans-commit-suicide-each-day-20160104> [2018, August 25].

Gumede, V. 2015. *Political Economy of Post-apartheid South Africa*. Dakar: CODESRIA.

Hillamn, K. 2018. *What Is the Diathesis Stress Model?*. Available: <https://www.healthguidance.org/entry/18016/1/what-is-the-diathesis-stress-model.html> [2018, August 27].

Jehoel-Gijsbers, G. and Vrooman, C. 2007. *Explaining Social Exclusion*. The Netherlands Institute for Social Research: The Hague.

Lehohla, P. 2014. *Poverty Trends in South Africa: An examination of absolute poverty between 2006 and 2011*. (Research Report 3/10/6). Pretoria, South Africa: Statistics South Africa.

Letseka, M., and Maile, S. 2008. High university drop-out rates. *HSRC Policy Brief*. 1–12.

Lincoln, Y.S., and Guba, E.G. 1985. *Naturalistic Inquiry*. Newbury Park, CA: Sage Publications.

Mall, S., Mortier, P., Taljaard, L., Roos, J., Stein, D.J., and Lochner, C. 2018. The relationship between childhood adversity, recent stressors, and depression in college students attending a South African university. *BMC Psychiatry*. 18(63): 1-11.

Marais, H. 2013. *South Africa pushed to the limit. The political economy of change*. Cape Town: UCT Press.

Mpofu, B. 2015. The Contours of Rich and Poor: Student Socioeconomic Stratification and Academic Progress at a University in South Africa. *Journal of Asian and African Studies*. 50(5): 571-589.

Pillay, A. L., Edwards, S. D., Sargent, C. and Dhlomo, R.M. 2001. Anxiety among university students in South Africa. *Psychological Reports*. 88: 1182-1186.

Rothmann, S., And Van Zyl, L.E. 2012. Flourishing of Students in a Tertiary Education Institution in South Africa. *Journal of Psychology in Africa*. (22)4: 593-599.

Sabi, S.C., Kolanisi, U., Siwela, M., and Naidoo, D. 2019. Students' vulnerability and perceptions of food insecurity at the university of KwaZulu-Natal. *South African Journal of Clinical Nutrition*. 1–8.

Shefer, T., Strelbel, A., and Ngabaza, S. 2018. Student accounts of space and safety at a South African university: implications for social identities and diversity. *South African Journal of Psychology*. 48(1): 61–72.

Smith, C. 2018. Some Cape Town commuters spend nearly half their income on transport - Mayco member. Fin24. 15 October. Available:

<https://www.fin24.com/Economy/cape-commuters-spend-nearly-half-their-income-on-transport-mayco-member-20181015-2> [2020, February 10].

South African Market Insights. 2018. *Education Statistics from the General Household Survey*. Available: <https://www.southafricanmi.com/education-statistics.html> [2018, August 27].

Tesch, R. 1990. *Qualitative Research: Analysis Types and Software Tools*. London: Falmer press.

The Final Report by The Institutional Reconciliation and Transformation Commission (IRTC) of the University of Cape Town. (Chairman: Dr M Mangena) Cape Town: The Institutional Reconciliation and Transformation Commission (IRTC) of the University of Cape Town

The Guide to Higher Education and Development in South Africa, 9th edition. 2009. International Education Association of South Africa (IEASA). Pretoria.

The South African Depression and Anxiety Group. 2017. *Depression in South Africa 2017*. Available: http://www.sadag.org/index.php?option=com_contentandview=articleandid=2984:depression-in-south-africa-2017andcatid=153andItemid=132 [2018, August 25].

The World Bank Group. 2016. *Overview of South Africa*. Available: <http://www.worldbank.org/en/country/southafrica/overview> [2017, March 05].

Ward, N. 2009. Social Exclusion, Social Identity and Social Work: Analysing Social Exclusion from a Material Discursive Perspective. *Social Work Education*. (28)3: 237-252.

Van Heeringen, H. 2012. *The Neurobiological Basis of Suicide*. Florida: Taylor and Francis.

Appendix A



CONSENT FORM

TITLE OF RESEARCH PROJECT:

Social Exclusion and Mental Health Challenges: Exploring the experiences of Mental Health Challenges among University Students from Marginalised Backgrounds

NAME OF PRINCIPAL RESEARCHER(S):

Natasha Smit

DEPARTMENT/RESEARCH GROUP:

Social Development Department, University of Cape Town

ADDRESS:

University of Cape Town
Private Bag
Rondebosch
7701

NAME OF PARTICIPANT:

.....

TELEPHONE:

.....

EMAIL:

.....

PARTICIPANT'S INVOLVEMENT:

- I agree to participate in this project.
- I have read this consent form and the Information Sheet and had the opportunity to ask questions about them.
- I agree to these results being used for education and research on condition my privacy is respected.
- I understand that I am under no obligation to take part in this project and that a decision not to participate.
- I understand I have the right to withdraw from this project at any stage.

Signature of Participant:

.....

Name of Participant:

.....

Signature of person who sought consent:

.....

Name of person who sought consent:

.....

Date:

.....

Appendix B

SEMI-STRUCTURED INTERVIEW GUIDE:

Social Exclusion and Mental Health Challenges:

Exploring the experiences of Mental Health Challenges among University Students from Marginalised Backgrounds

INTRODUCTION

My name is and I am conducting research on.....

Discussion on ethical considerations, voluntary participation, audio recording of the interview, anonymity and confidentiality.

Clarification that there are no “right” or “wrong” responses.

GENERAL BACKGROUND INFORMATION

What is your name?

How old are you?

What race do you identify with?

What gender do you identify with?

Where were you born?

HOUSEHOLD CHARACTERISTICS

Who do you live with at home?

How many people work in the household?

Who are the breadwinners (earn an income and support the family financially) in the household?

How far did your mother go in school?

Is your mother working?

If so, what kind of work does she do?

How far did your father go in school?

Is your father working?

If so, what kind of work does he do?

Are you able to pay your living costs (Textbooks, Transportation, Food) every month? How do you manage to pay for these expenses?

Are you on any form of a bursary, student loan and scholarship?

SECONDARY EDUCATIONAL BACKGROUND

Which school did you attend for High School?

Did you always know that you would further your education after high school? If you think back to your life, are there any specific challenges you dealt with when trying to further your education?

What has made it possible for you to continue with your education?

UNIVERSITY ENVIRONMENT

Which university or tertiary institute do you currently attend?

When was your first year at university?

What are you studying?

Why did you choose to study what you are studying?

How do you pay for your education?

Loan?

Financial Aid?

Scholarship?

Parents?

Savings?

Part-time work?

Do you stay in accommodation at or around the University?

If yes, how many people do you stay with?

Do you share a bathroom?

Is food provided or do you cook?

Where do you study and do your university work?

Which mode of transport do you use to get to campus?

What expectations did you have about university life when you first started? What do you like about the university environment?

What do you dislike about the university environment?

Do you feel safe at university?

If yes, what makes it safe?

If no, what makes it unsafe?

What are the problems you face at your university?

What infrastructure or support systems are available at university? What infrastructure or support systems are lacking at your university? Would you like to continue with your education further than your current degree? If no, why are you not interested in studying further?

If yes, why is it important for you to continue with your education?

WORK EXPERIENCE

Have you worked before (part time or full time)?

If yes, where have you worked?

What kind of work did you do?

What was your position?

How did you get the job?

Are you currently working a part time job?

RELATIONSHIPS

What kind of relationship do you have with your parents?

How often do you have contact with them?

What role did they play in your education throughout your life? What is the highest level of education your parents achieved?

Would you say you have good friends at university?

If yes,

How did you meet them?

Are you and your friends supportive of each other?

Do you feel comfortable opening up to your friends about any struggles you may have?

If no,

Why do you feel you have not made friends in varsity?

Are you part of a church community or other cultural organizations at university? Have you built any social networks at university?

INTROSPECTION

Are you satisfied with the way your life is going so far?

If yes, in what ways?

If no, why not?

Looking at your life now, what would you say are your main needs (money, food, shelter, respect, friends and success)?

What kind of things would make you feel better about yourself, in other words what are your dreams, goals and aspirations that would allow you to become happy and comfortable? (Probe)

How important are the achievement of these dreams, goals and aspirations for who you are?

What do you need to do to achieve these?

Which resources would help you to achieve your dreams and goals?

How would you best describe the person you are today?

Are there things you feel you could have done differently in your life?

If yes, what?

Looking back over the past 3 years, do you think you have changed?

If yes, in what ways have you changed?

What has led to these changes?

MENTAL ILLNESS

Would you say you are generally happy or sad?

What makes you happy?

What makes you sad (or stressed)?

Have you officially been diagnosed with a mental illness?

If yes, which mental illness?

How are you treating or coping with (psychologist, medication etc.) your mental illness? If you take medication or see a psychologist how do you manage to pay for it? How long have you been dealing with your mental illness?

What do you believe is the reason for your mental illness (hereditary, stressful life event etc)?

Who have you spoken to about your mental illness (friends, family, partner)? Are you ashamed or comfortable with your mental illness?

How do you think mental illness is portrayed or received in the general society? How do you think your mental illness effects other aspects of your life?

Are you aware of any psychological support services available on campus? What do you think tertiary education institutions can do to help students struggling with mental illnesses, emotional or psychological issues?

Do you think that the South African government should play any role in addressing mental illness issues among the youth?

What do you like or value about yourself?

What are your aspirations for the future?

What are your plans for the future?

Do you have hope for the future?

Do you want to move in the next two years?

If yes, where?

What are your feelings towards the South African social and economic climate as a young person?

ECONOMIC, STRUCTURAL AND SOCIO-CULTURAL RISK FACTORS

How often do you worry about your financial situation?

Are there payments of specific expenses that you worry about?

Can you afford extra clubs, societies or extra activities?

Have you ever applied for a loan?

If yes, did you have difficulty securing it?

How do you feel you are received or treated by public agencies (SARS, Police services, Public hospitals)?

Do you have long waiting periods for appointments?

What is your experience at commercial institutions such as banks or insurance companies?

Do you often have disturbances in the neighbourhood where you grew up? Do you feel unsafe in your neighbourhood?

Do you often have disturbances where you live now (if different to childhood home)? Do you feel unsafe there?

Have you experienced crime in the past 5 years?

If yes, how often have you experienced crime?

Do you feel accepted in society?

Do you feel comfortable with your race, gender and sexual orientation?

Do you often go out for amusement?

Do you have a social network?

Do you have someone you can talk to about intimate things?

Did your parents/ guardians instil values in you?

What kind of cultural norms and values did you grow up with?

CLOSING

Thank you for spending time with me.

Is there anything that you want to know before we wrap up? How has the interview been for you?