Access to and effectiveness of support services for students in extended curriculum programmes at a South African university
Toegang tot en doeltreffendheid van studente studenteundienste in verlengde kurrikulumprogramme by 'n Suid-Afrikaanse universiteit

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ABSTRACT
In South Africa, many students enter university without the skills required for success in higher education. Extended curriculum programmes (ECP) were developed to provide students who showed potential but were underprepared with the necessary foundations to achieve success in higher education. Student support services are essential to student success. This has been apparent especially in universities enrolling academically underprepared students. This study, conducted by the Office of the Academic Advisor at the Faculty of Medicine and Health Sciences at Stellenbosch University, aimed to explore the effectiveness of and participation in support services available to students in the ECP. The last cohort of ECP students was accepted at the faculty in 2018 for the MBChB, BSc Physiotherapy, and BSc Speech-Language and Hearing Therapy degrees. On successful completion of the ECP, students join the second year of their respective mainstream programme and are tracked throughout their academic career with dedicated support services offered to them. As students transition from the ECP, they need to utilise their own agency to access the support services available. A quantitative survey including qualitative responses was used for data collection and was explored using thematic analysis. Specifically, the study explored students’ awareness and utilisation of, and their expressed interest in, the available support services. It was important to investigate the support needs of ECP students as an increasing need for support services had been identified during the COVID-19 pandemic. Furthermore, minimal data were evident on support needs of senior ECP students and especially on this population in health sciences. The research gave greater insight into students’ support needs. The findings indicated that students were familiar with and had accessed support services to an extent that they were able to share firsthand experiences of accessing support at the university.

KEYWORDS
Academic development, at-risk students, extended curriculum programmes, health sciences, higher education, medical students, student affairs, student support services

OPSOMMING
In Suid-Afrika gaan vele studente universiteit toe sonder die vaardighede vir sukses in hoër onderwys. Verlengde kurrikulumprogramme (VKP) is ontwikkel om aan studente wat potensiaal toon maar onvoldoende voorbereid is, die nodige grondslag te bied om sukses in hoër onderwys
Introduction

In South Africa, many students enter higher education without the necessary prerequisite skills, role models, support structures and cultural capital, which are important for success (Council on Higher Education [CHE], 2013). These students may not engage in self-help-seeking behaviours and may be less likely to seek assistance when required (Raviv et al., 2009).

Higher education has seen the introduction of large-scale student support programmes, bridging and foundational programmes, counselling and career guidance, more explicit and transparent expectations and criteria for assessment and different pedagogies due to increased student numbers, including ‘non-traditional students’ such as students from disadvantaged communities and first-generation students (Webbstock, 2016). Low student throughput is a common issue faced in higher education, with estimations indicating that 50% of students who enter higher education complete their qualification, with 30% of graduates completing their degree in minimum time (CHE, 2016). Low graduate production fails to meet South Africa’s developmental and social cohesion needs. To address the low throughput and high dropout rates, sustained student support, flexible curricula, and innovative pedagogical approaches have been implemented (McKenna, 2016). Student support services within tertiary institutions are acknowledged as essential mechanisms to support students who are at risk. Due to various factors, the chances of them dropping out of their respective programmes and the higher education context altogether are higher. According to Lobo (2012), the main reasons students drop out include course unsuitability, academic difficulties and student preparedness, mismatch of student expectations and experiences, finances,
social and academic support from the university community and health and familial responsibilities. A lack of support from staff and fellow students and the amount of contact time students have with academic staff have been shown to influence students’ decisions to drop out (Yorke, 2000a, 2000b; Lee et al., 2012).

Bridges (2008) states that student support services, especially those offered at universities enrolling academically underprepared students, are essential to student success. The support services aim to facilitate students’ transition into higher education institutions and enhance retention of students (Munyaradzi & Addae, 2019). A 2017 study by Koen et al. found that investment in the well-being of students would strengthen the well-being behaviour of the organisation. In the current article, the organisation refers to the context of the Faculty of Medicine and Health Sciences (FMHS). The theoretical framework used in this study is Bronfenbrenner’s bio-ecological model. This model of development is relevant here in that it emphasises the interaction between an individual’s development and the systems within the social context (Landsberg et al., 2011). Individuals enter the faculty with existing capabilities that have been influenced by their family and friends, school, community and environment. Therefore, this is indicative of these students trying to obtain a sense of belonging within the faculty, community and university society.

The extended curriculum programme at the Faculty of Medicine and Health Sciences

Extended curriculum programmes (ECP) were developed to provide students who showed potential but were underprepared in terms of the necessary foundations to achieve access and success in higher education. ECPs extend a diploma programme or undergraduate degree by a year, enabling students to gain the necessary foundational skills for success in their qualification, such as academic literacy and learning skills, including writing competencies and information literacy (CHE, 2013).

The last cohort of ECP students accepted into the Faculty of Medicine and Health Sciences (FMHS) at Stellenbosch University (SU) was in 2018, with current students considered to be senior students in their third year up to their sixth and final year of study. Some of these students were accepted for undergraduate programmes such as MBChB, BSc Physiotherapy, and BSc Speech-Language and Hearing Therapy degrees (Stellenbosch University, 2016). An additional year of study was added to a mainstream degree. Students thus completed their first year over two years following a revised curriculum for the MBChB programme, and first-year modules completed over two years for the BSc Speech-Language and Hearing Therapy programme and BSc Physiotherapy programme with additional foundation courses for the BSc Physiotherapy programme. The ECP provides students with additional academic support to lay a strong academic foundation. On successful completion of the ECP, students join the second year of their respective mainstream programme. The current ECP senior students are the last group of students in the ECP as the programme has been phased out.
Student support services and needs of students
Student support services address students’ academic, emotional and social needs and are required for students’ individual well-being and academic success (Tamulienė, 2014). Tamulienė (2014) further classifies support services into academic support, which aims to fulfill social and emotional needs that are directly linked to students’ learning processes, such as the provision of academic information and counselling services, and non-academic support, which addresses students’ social and emotional needs that have an indirect impact on their academic performance and includes financial support and psychological counselling services. Miller et al. (2011) found that first-generation students from low-income households were academically underprepared and required financial support. These students also dealt with psychosocial issues such as lack of support at home, lack of motivation, disciplinary issues, a need for basic study skills and time management, lack of transportation to campus and lack of regular access to the internet when not on campus. COVID-19 and the subsequent lockdown have also impacted many students and highlighted the inequalities many students still face, including access to resources such as the internet (Ross, 2021). Students at the FMHS at SU experience demanding study schedules linked to long hours of studying as well as attendance within the clinical domains. The added pressure of becoming a qualified health professional and developing their identity exerts immense stress on their character development. This is supported by the needs assessment conducted by Koen et al. (2017), whose findings indicated that these students were stressed, unable to manage their workloads and suffered from sleep deprivation.

Furthermore, many students also struggle with mental illnesses, with a rising prevalence of mental health disorders having been identified (Bantjes et al., 2016), especially among medical (Hope & Henderson, 2014) and health professions students (Macauley et al., 2018). ECP students in FMHS enter with significant academic and psychosocial issues related to the post-apartheid period and may be at risk of developing mental health challenges as indicated. Hence, student support services are paramount within the academic and clinical context of the required training programme.

Student support services available to ECP students within FMHS
Once students were promoted from the ECP, they were tracked throughout their academic careers and offered dedicated support services. The services, which were available free-of-charge to ECP students within FMHS, included university-wide student support services made available by the Centre for Student Counselling and Development (CSCD) and a dedicated registered psychologist and counsellor for these students specifically. Voluntary services included various work sessions on themes such as stress- and time management skills, individual counselling and therapy sessions and individual or group academic skills development sessions. As students transitioned out of the ECP, they needed to utilise their own agency in accessing the support services available to them. A support booklet was sent out to students advertising the available services at the CSCD as well as the processes for engagement with a specific service.
In 2020, FMHS appointed an academic advisor to address the specific needs of medicine and health sciences students and render academic support interventions. The Office of the Academic Advisor coordinates and renders support to senior ECP students as the ECP programme in the faculty was phased out in 2019. A faculty-specific student support booklet is provided to students, which details the steps needed to address academic, psychological, emotional, social, health, administrative and security needs. This includes contact details of people/services available to students at the FMHS. Students are, therefore, provided with abundant information regarding the resources available to them. This study, therefore, sought to explore the extent to which students in the ECP at the Stellenbosch University FMHS accessed the support services available to them and to assess which aspects of the support services, if any, could be improved to increase engagement with, participation in and effectiveness of the support services.

Method

Design and setting
We used a cross-sectional, quantitative research design with qualitative responses to describe the effectiveness of and participation in support services available to senior students in the ECP at the Faculty of Medicine and Health Sciences at a South African university.

Sample and recruitment
We used purposive sampling to recruit students who were in the senior ECP at the Faculty of Medicine and Health Science at Stellenbosch University. These students needed to be registered students who were in their second to final year of study and were 18 years of age or older. They also had to have access to their university email addresses as the survey was shared using the institution’s email address. The study did not include students who were in the ECP but were not registered for the academic year as they had been academically excluded. In 2022, the faculty had 117 ECP students enrolled in the MBChB, BSc Physiotherapy and BSc Speech-Language and Hearing programmes.

Measures
Demographic information relating to students’ age, gender, year of study and academic programme (e.g. MBChB) was collected. On the university’s survey platform, the researchers developed a survey questionnaire based on literature, a previous informal survey sent to the ECP students, and surveys used in previous research exploring similar objectives and the researchers’ professional experience with students. The questionnaire, consisting of multiple-choice and open-ended questions, was only available in English, as most students indicated this as their language of correspondence, and took approximately 5–10 minutes to complete.

Data collection
An email of invitation including a brief description of the study was sent to all the ECP students at the FMHS using their university email addresses, recognised by their student
numbers. The email included a link to the online survey and the consent form. Informed consent was obtained using a tick box within the survey introduction. An initial invitation email was sent out, followed by several reminders to the ECP students, with one week between the initial and follow-up emails over a period of two months. Responses were confidential but complete anonymity could not be ensured.

Data were collected between July and September 2022 using the online survey. ECP students were asked to comment on the support services they engaged with, their level of engagement with support services, hesitancy in engaging with support services and improvements for increased effectiveness of and engagement with support services. Students were encouraged to participate in the survey by the prospect of winning one of six vouchers upon random selection. Students interested in participating had to provide an email address, which was automatically delinked from their responses.

**Ethical considerations**

This study was approved by Stellenbosch University’s Division for Institutional Research and Planning and Health Research Ethics Committee (HREC) (Reference number: N22/02/013). All participants provided written informed consent prior to participation indicated via tick box.

**Data analysis**

Descriptive statistics performed in Excel were used to report findings related to the demographic information collected and the results of the multiple-choice questions in the survey. The qualitative responses were inductively thematically analysed following an iterative six-step process outlined by Braun and Clark (2012) using Atlas.ti v9 (Friese, 2021). Both authors conducted the initial analysis independently, and the coding framework was compared before the final coding book was created. Themes representative of the students’ opinions and understandings of the effectiveness of support services offered to them were then identified from the final codebook.

**Findings**

The findings are presented in tables, figures and descriptive thematic analysis from the sample of senior ECP students at Stellenbosch University’s FMHS. Study participants were 22 students from the MBChB, BSc Physiotherapy, and BSc Speech-Language and Hearing Therapy degrees, representing a 18.8% response rate.

Below are two tables through which themes and demographic information are summarised, while two figures display access and participation in support services and descriptive analyses of the themes identified.

Table 1 displays a list of themes and sub-themes identified by this sample of ECP senior students. Three themes and seven sub-themes describe the effectiveness of and participation in support services available to ECP students at the Faculty of Medicine and Health Sciences.
Table 1: Themes and sub-themes identified

<table>
<thead>
<tr>
<th>Themes</th>
<th>Sub-themes</th>
</tr>
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<tbody>
<tr>
<td>Appreciation of support</td>
<td>Helpfulness</td>
</tr>
<tr>
<td></td>
<td>Accessible</td>
</tr>
<tr>
<td>Improvement of support</td>
<td>Waiting time</td>
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<tr>
<td></td>
<td>Affordability</td>
</tr>
<tr>
<td></td>
<td>Necessity of emotional support</td>
</tr>
<tr>
<td>Stigma around support</td>
<td>Awareness</td>
</tr>
<tr>
<td></td>
<td>Negative experiences</td>
</tr>
</tbody>
</table>

The demographic characteristics of 18.8% of the participants are summarised in Table 2 and proportionally represent the ECP population at the time of the survey. The majority of participants who participated in the survey were females at 82% and 27% were aged 24 years. 90% of this sample were studying MBCHB and in their final year of studies.

Table 2: Demographic information of participants

<table>
<thead>
<tr>
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<tbody>
<tr>
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<td>18</td>
</tr>
<tr>
<td>Female</td>
<td>18</td>
<td>82</td>
</tr>
<tr>
<td>Age</td>
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<tr>
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<td>23 years</td>
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<td>5</td>
</tr>
<tr>
<td>27 years</td>
<td>3</td>
<td>14</td>
</tr>
<tr>
<td>Programme year</td>
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<td></td>
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<tr>
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<tr>
<td>Year III</td>
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<td>0</td>
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<tr>
<td>Year IV</td>
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<td>27</td>
</tr>
<tr>
<td>Year V</td>
<td>5</td>
<td>23</td>
</tr>
<tr>
<td>Year VI</td>
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<td>45</td>
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<td>BSc Physio</td>
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<td>5</td>
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<tr>
<td>BSc Speech</td>
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<td>5</td>
</tr>
</tbody>
</table>

In Figures 1 and 2 below, most students indicated that they were aware of both the support services offered by the faculty and the CSCD. More than half of the students indicated that they had used at least one of the support services offered to them. Those who had previously used support services were asked what they considered to be the most important support services. They indicated that the bursary office/financial aid was
the most important, followed by health (medical) services. The services offered by the academic advisor and the CSCD were considered of equal importance, and tutoring was the least important support service on offer.

Figure 1: Most important support services

Students were asked to indicate the support service categories used, and they indicated that support services related to administrative, academic, and psychological/emotional or support needs were the most frequently used.

Figure 2: Support service categories used

Administrative needs were expressed most frequently used, followed by academic needs, then psychological/emotional needs, health needs and lastly security needs.

In the analysis of open-ended questions, three main themes could be identified that provide insight into the detail of support services that the students participated in and found effective. The three themes were: (1) Appreciation of support; (2) Improvement of support; and (3) Stigma around support.
Theme 1: Appreciation of support
Most students indicated that they appreciated the support services available to them, emphasising that these support services were helpful. They indicated that they, who were less privileged, could access psychological and medical services at an affordable rate.

I am grateful for the services because I know I would not have access to it otherwise. (Participant Q)

At first I was hesitant but was so grateful for these services as it saved me so many times when I really had nowhere else to go. (Participant G)

I have seen a great improvement in my study patterns and overall confidence since starting to attend the academic advisor multiple times during this year, and she has helped me find solutions to problems and ask questions that needs answering, often highlighting the important tasks and filtering out all the small factors I tend to fixate on. (Participant C)

Students felt that support services impacted their academic performance positively. They described the staff as friendly and eager to help. Support services were found to be useful, and their experiences using them were positive. Hence, support services staff were also able to answer students’ questions, and students benefitted from applicable solutions. Furthermore, students were referred to other specialised support services within the campus environment where needed.

Students added the importance of accessibility to support by indicating a specialised need for acute services. They were grateful for web links to support services and constant email reminders of support services available.

Theme 2: Improvement of support
Although most students in the study indicated that they were aware of the support services available, some also indicated that the awareness had come in the later years of their studies. This suggested that these students may have wished they had been made aware of these services in their earlier years of study. This could be an indicator towards improvement of support.

I don’t think at the time I knew about it. Often many students are unaware of the services offered and only come to know about it when it is too late. (Participant A)

Many students only become aware of the support services when it is too late. (Participant D)

A criticism many students had, therefore, was that not enough was being done to make students aware of the services available to them; hence, improvement of support services was indicated. For students who used the support services, a big issue they experienced was lengthy waiting times, especially for services provided by the CSCD.
I think the waiting lists for counselling are far too long but also understand [that] there is a greater demand than there [are] resources. (Participant M)

The only thing that was not great is the waiting time. (Participant B)

One student’s response indicated the availability of support had increased over the years. However, they suggested that having more support staff would be beneficial as the demand for these support services had grown over the years, especially after the COVID-19 pandemic. A need indicated for psychological services was emphasised, with one student recommending having one psychologist assigned to each residence on campus. One student’s response highlighted that psychological services were needed when course demands or pressures were overwhelming. Another response suggested a preference to see the same psychologist every time they went for an appointment as their psychologist changed monthly. Most responses emphasised the need for emotional support linked to the provision of psychological services.

Theme 3: Stigma around support

The additional exposure to the clinical environment as part of the relevant training in their programme puts additional stress on students. Hence, training conditions contribute to the lack of seeking support, as it is associated with stigma. Students also referred to the stigma surrounding support on campus. One student indicated:

I have been here for many years, and I do think the stigma around needing assistance has changed, it has been reduced. (Participant F)

Some students described the fears that they experienced when needing to make use of support services:

I used to feel really embarrassed to use support services especially accessing the Pantry Project. I felt ashamed for not having and feared that other students would see me. (Participant L)

[I] feared that the service provider would not understand my issues based on my culture. (Participant A)

But there have been occasions where I felt judged or made to feel like I did not need it. (Participant E)

I was neglectful and avoidant when I started using support services. I had the idea that taking part in these services would take away my power. Would take away my say and give it to a third party. In the case of mental illness, I guess that is still true, but then again, perhaps that’s a good thing, within reason. (Participant N)

The fear of losing your voice is what scares most people away[..] [T]he fear of being told you ‘crazy’. (Participant Q)

The hospital environment was described as stressful, and students often did not get the necessary time to debrief after traumatic experiences. Further responses included the
high demands of students’ coursework; somatic stress symptom experiences; struggles to manage stress and find positive outlets, to navigate their social and family lives and academia; social anxiety; the need for time and stress management skills and concerns about their career prospects once they had finished their studies. Some students also indicated the need for financial aid services.

Regarding disseminating information, students felt that information relating to support services should not be shared only via email, but instead on relevant and relatively more accessible platforms such as WhatsApp or SMS. One student suggested that a brief talk be conducted at the beginning of the academic year to remind students of the support services available to them. Further suggestions were placing posters at the computer labs advertising the support services and having the class representative for each year group send image advertisements with details about the support services on social media groups. Students suggested these as they received many emails and “most students do not read their emails”.

Discussion
Students in the ECP at the FMHS found the support services on offer to be helpful and accessible. As many of the students were aware of the support services and how to access them, the implication is that these services are overall effective and accessible, positive and useful. This is supports the findings of Bridges (2008), who indicated that support services enhance student success, as well as Munyaradazi and Addae (2019) who stated that support services aim to facilitate students’ transition to higher education. Students make use of the different categories of services available to them, but more frequently use the bursary/financial aid office and the medical health services available at campus which offer more affordable as well as pro bono rates for those who cannot afford them. Support services that cater to students’ academic needs are also in demand, however, it was interesting to note that for most students psychological support services were considered less important.. These findings are consistent with that those of Bourdieu (1991) and Raviv et al. (2009), who describe students as not engaging with the necessary psychological support structures to facilitate success.

Like Kennelly et al. (2010) and McKauge et al. (2009), however, we noted that students often do not engage with support services, despite needing to do so. This is largely due to the lack of capacity owing to long waiting times as well as long turnaround times in accessing psychological services. Students are also aware of the potential stigma they may face when accessing these services which further prevents them from utilising these services. Furthermore, ECP students experience demanding and stressful study schedules as well as clinical training expectations, leading to a greater need for debriefing.

As observed by Miller et al. (2011), the FMHS ECP student responses proved that there was a need for those who could not afford support services to be able to access them based on their knowledge of the scarce accessibility of private or state care services external to the university. These students are exposed to immense psychosocial
and traumatic experiences in clinical settings, requiring regular debriefing sessions and constant communication of support available to them.

**Conclusion**
The purpose of the study was to explore the extent to which ECP senior students at Stellenbosch University FMHS accessed support services and if they found them to be effective. The study used a cross-sectional quantitative research design with qualitative responses within the applicable context of a bio-ecological model theoretical framework for the specific FMHS and clinical context.

The findings fell within the following three broad themes: (1) Appreciation of support; (2) Improvement of support and (3) Stigma around support. For theme 1, Appreciation of support, students found support services helpful and beneficial and therefore appreciated how staff were friendly and helpful. For theme 2, Improvement of support, students indicated that even though support services were available to them, they only accessed them in the later years of their studies and recommended ways to better communicate support services to them. They also emphasised that issues with specific support services, like the lengthy waiting times for the CSCD, should be improved. For theme 3, Stigma around support, students described the fears they experienced around needing to make use of support services as a result of experiencing immense stress within the clinical platform during their training.

The results of our study indicated that although students felt that these student support services were helpful, accessible and effective, they require constant communication on the available support services. Students often feel overwhelmed by the academic and clinical demands of their studies and require specific support services which can cater for this specific need. Hence, academic advisory services can address this gap for this specific student population requiring student support services as indicated in this research study.

**Limitations and recommendations**
As researchers, we acknowledge that there were limitations to this study. These included the fact that we had a limited sample size as only 22 (18.8%) ECP students participated in the study. However, it must be noted that the survey was open for approximately five months and reminder emails were sent bi-weekly and then weekly in the last of these months. An incentive in the form of a lucky draw to win a gift voucher was provided to encourage student participation in the study. We also note that our study cohort comprised students with unique academic and clinical schedules. These schedules include being on call and observing an operation in the theatre, which can vary from six to fourteen hours at a time. Finally, although the use of an online survey was the most convenient form of data collection, given that this project was initially conceptualised during the COVID-19 pandemic, it would have been good to have follow-up focus group discussions or individual interviews with students to explore further and describe their perceptions of the effectiveness of and engagement with support services.
Acknowledgements
The authors would like to acknowledge the contributions of our study participants.

Ethics statement
This study was approved by Stellenbosch University’s Division for Institutional Research and Planning and Health Research Ethics Committee (HREC) (Reference number: N22/02/013).

Potential conflict of interest
The authors declare no conflict of interest.

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