Factors supporting the wellbeing of students with disabilities at a university

by

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DEDICATION

I dedicate this thesis to my late daughter, Rezana, who encompassed the positive spirit of wellbeing and resilience, and who was my inspiration for my chosen career path at this late stage in my life. Rezana contracted a Medulla Blastoma and lost her faculties of speech, taste, mobility, and partial vision and hearing in her second year as an engineering student at university. She succeeded in achieving her aim and triumphing by continuing her journey at university after a two-year convalescence period and achieving a distinction in her practical in the process.

I also dedicate this work to all the students with disabilities who strive to reach their potential and succeed against all odds.

"Seek knowledge from the cradle to the grave"

ACKNOWLEDGEMENTS

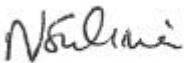*Appreciation and gratitude are essential qualities.*

I would not have achieved this significant milestone in my life without the support of significant others who guided me in this venture.

> - My Creator, thank you for all the blessings, for opening the doors of opportunity and potential, and for the loving, supportive people in my life.

> - My supervisor, Professor Irma Eloff, for her kind demeanour, invaluable scholarly advice, guidance, and ongoing support throughout the process. I feel blessed and privileged to have been under your supervision.

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> - The participants for their time and valuable contributions and without whom this study would not have been possible.

> - My editor, Melissa Labuschagne, for refining my work, and for her time and patience.

DECLARATION OF ORIGINALITY

I, Naciema Suliman, student number 20611821, declare that this mini-dissertation titled "Factors supporting the wellbeing of students with disabilities at a university," submitted in accordance with the Magister Educationis (Educational Psychology) degree at the University of Pretoria, is my own original work and has not been previously submitted to any other institution of higher learning. All sources cited or quoted in this mini-dissertation are indicated and acknowledged with a comprehensive list of references.

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6 July 2022

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ETHICAL STATEMENT

The author, whose name appears on the title page of this dissertation, has obtained the applicable research approval for the research described in this work. The author declares that she has observed the ethical requirements in terms of the University of Pretoria's Code of Ethics for researchers, and the guidelines for responsible research.

6 July 2022

LANGUAGE EDITING CERTIFICATE

Exclamation Translations

To whom it may concern

The dissertation entitled, "Factors supporting the wellbeing of students with disabilities at university" has been edited and proofread, with reference control and technical formatting also carried out as of 07 July 2022.

As a language practitioner, I have a Basic degree in Languages, an Honours degree in French and a Master's degree in Assessment and Quality Assurance. I have been translating, editing, proofreading, carrying out reference control, and technically formatting documents for the past 12 years. Furthermore, I am a member of the Professional Editors' Guild (PEG).

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ABSTRACT

The field of wellbeing research with university students has grown exponentially in recent years. Within this field, studies on the wellbeing of students *with disabilities* have, however, been limited. The purpose of this study was to explore students with disabilities' perceptions of factors that support their wellbeing at university. Guided by a qualitative approach and an interpretive phenomenological research design, a deeper understanding of wellbeing was enabled by considering the perceptions of students with disabilities (n=6) at a large urban university regarding the factors supporting their wellbeing at university. Theoretically, the study was guided by the PERMA Model, the PERMA Plus model, as well as Systems Theory. The data were collected by means of an online focus group discussion. The focus group discussion was transcribed, and a qualitative thematic analysis was conducted. The theme analysis revealed that the wellbeing of the students with disabilities was supported through negotiating disability, negotiating online learning, and amplifying self-care and nurturing.

Keywords: Wellbeing, disabilities, university students, support, PERMA.

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CHAPTER 1 INTRODUCTION TO THE STUDY

1.1 INTRODUCTION AND RATIONALE

This study forms part of a broader study seeking to identify factors that affect the wellbeing of students at a large residential university in South Africa. The pursuit of wellbeing and happiness is a central aspect of human existence. According to Aristotle, the overarching goal of all human actions is eudaimonia, which translates into wellbeing (as cited in Dodge et al., 2012). The goal of positive psychology, with which this study is aligned, is to understand wellbeing and build a conducive environment that explores and evaluates ways to achieve it (Ryff, 1989), and to flourish (Seligman, 2013). The broader study is a three-phase project of which this study forms part of the second phase. Using brief interviews, the first phase investigated factors that support the wellbeing of undergraduate students at a prominent South African university. The second phase comprises a more in-depth investigation of the reasons why certain factors support student wellbeing. This is done through focus groups with students from various faculties at this university. The third phase aims to explore low-cost interventions that would have a high impact on supporting student wellbeing. Students from various social and cultural backgrounds, as well as those with various experiences and levels of education, bring with them a variety of demands and academic potential. The university's challenge is thus to identify, adapt, support, and cater to this diverse population of students to enable them to function at their optimal level (Catling et al., 2013; McKenzie & Schweitzer, 2001).

This study is focused on the wellbeing of students with disabilities in particular. These students form part of a vulnerable sector of our society, and as such, the university in question has a special disability unit to increase and promote their integration into the university, and to assist with academic and accommodation needs.

It is vital to identify the factors that promote wellbeing in a university setting as these impact social and academic success. University students are faced with multiple challenges, such as a transition to an unfamiliar environment, it being their first time being away from home, heavy workloads, different methods of teaching, and a variety of other personal factors that may challenge their subjective feelings of wellbeing. The transition may also entail adjustment challenges experienced by both undergraduate and postgraduate students as they are in a state of constant transition to and from various higher education experiences. These

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factors affect many students, yet they may have varying effects on their well-being at the individual level. The methods used, and time taken during the transition experience will vary for each student depending on their existing coping skills, which directly impacts their subjective wellbeing (Francis et al., 2020; Kantanis, 2002). As such, students with disabilities may experience additional difficulties and stresses resulting from their disability.

In the past, psychology focused more on unhappiness and suffering than the causes and outcomes of positive performance and wellbeing (Ryff, 2017). According to Magyar-Moe (2009), the negative effects of persistent deficit narratives and methods may have contributed to the surge in positive psychological research. However, while there has been a growth in South African literature exploring the wellbeing of tertiary students *with disabilities* specifically (Dunn & Wehmeyer, 2021; Engelbrecht, 2006; Wehmeyer, 2013), there is still a paucity of research on this topic. This study, therefore, sought to explore the perceptions of university students *with disabilities* regarding the factors that support their wellbeing to enhance and positively impact their learning experience.

1.2 LITERATURE REVIEW

Positive psychological interventions produced by theorists aim to improve wellbeing, positive emotions, and optimal functioning, as opposed to traditional psychotherapy's goal of reducing suffering (Carr, 2013). Evidence suggests that positive constructions such as wellbeing, life satisfaction, optimism, happiness, and other positive conceptions contribute to desired outcomes such as increased educational and vocational success, stronger friendships, and improved physical health (Diener & Chan, 2011; Huppert, 2009). Greater wellbeing enhances learning, and develops greater life satisfaction, attention, and creative thinking. Universities are critical to increasing people's quality of life because of their importance in economic and social decision-making, their ability to expand employment options, and their commitment to the fight against social exclusion (Moriña et al., 2020). Students enrol at university to achieve their goal of learning and self-improvement (Seligman, 2013); nonetheless, this could be an anxious time for many students (Cooke et al., 2006). According to Healey et al. (2006), there has been a rise in international support for the inclusion of students with disabilities in universities, which has been facilitated in part by disability-friendly legislation. Disability has been identified as one of the primary pillars of South Africa's National Transformation Plan where improvement has lagged behind that of other areas. In South African policy documents (NCSNET; White Paper 6: Special Needs Education; White Paper on the Rights of Persons

with Disabilities, 2015), disability is predominantly viewed from a social model perspective. However, this model fails to understand other factors besides the social, such as individual, environmental, economic, and political factors (Mutanga & Walker, 2017), which impact the wellbeing of individuals with disabilities.

Individuals with disabilities may be marginalised in some societies (Jolley et al., 2018). As Goering (2015) states, "Many people feel that their main disadvantage does not stem from their bodies, but rather from their unwelcome reception in the world, how physical structures, institutional norms, and social attitudes exclude and/or denigrate them" (p. 134). This may lead to self-inflicted stigma that manifests in negative behaviours and social responses, which result in feelings of rejection and a consequent decrease in wellbeing (Corrigan & Kleinlein, 2005). The absence of support systems, financial challenges, unfavourable social viewpoints, and isolation are all factors that contribute to low enrolment and high dropout rates (Mantsha, 2016; Mpofu & Wilson, 2004; Mutanga, 2015; Tansey et al., 2018). In studies by Tugli (2013) and Mutanga and Walker (2015), the students highlighted challenges related to facilities, student support structures, and material and physical access.

According to Mutanga and Walker (2015), students with disabilities appreciate the university environment, and value being treated with respect. They consider higher education as a means of equipping themselves to face social, political, and economic challenges. Matshedisho (2010) finds that 25% of students with disabilities value the services of a disability unit and feel welcomed and supported during the transition to university. Disability units at universities offer support in various ways, such as extra time, study material in braille, sign language interpreters, and special computers, amongst others. (Matshedisho, 2010; Naidoo, 2010). Many findings infer that positive relationships between faculty staff and students with disabilities engender a sense of belonging at university (Kezar & Maxey, 2014), foster learning and wellbeing (Lipka et al., 2019), and establish corresponding outcomes. This is done by stressing empathy, kindness, and friendliness, which are all traits valued by students with disabilities. According to Ndlovu and Walton (2016), students with disabilities continue to face a number of challenges, which will be expanded on below.

Due to the apartheid era, most studies on non-traditional students in South Africa have focused on matters pertaining to gender and race (Howell, 2006). As most studies focus on challenges, limited studies examine students with disabilities' perceptions of factors that improve their well-being. The majority of current research on the well-being of youth with

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disabilities relies significantly on 'objective' barometers and reports from credible sources (White-Koning et al., 2005). This is therefore not necessarily a comprehensive or, some might argue, fully authentic representation of the population of students with disabilities. It follows that interviews could be held with students with disabilities to ascertain the factors that contribute to their wellbeing, comprehension, and engagement (Moriña et al., 2015).

1.3 PURPOSE OF THE STUDY

The purpose of the study is to explore students with disabilities' perceptions of factors that support their wellbeing at university. Few individuals with disabilities participate in higher education, and when they do, they face many challenges that could affect their wellbeing and their learning. Students with disabilities may perceive different factors as impacting their wellbeing, some at the hands of students without disabilities (Crous, 2004). According to Adams (2002), disability challenges cannot remain hidden within a student service area, but must be included in the mainstream learning and teaching debate. Legislation enforces the responsibility of providing a learning environment in which students with disabilities are not disadvantaged at universities and colleges (Healey et al., 2006). Promoting wellbeing is essential as it results in thriving, which encompasses positive emotions and improved motivation, concentration, energy, and academic results, thus contributing to a better overall experience for students.

1.4 RESEARCH QUESTIONS

Disability can be a valuable asset in a university setting that rejects the deficit lens. For this to occur, universities must recognise that all students are important and capable of learning when the right conditions and attitudes are in place (Moriña et al., 2020). Students with disabilities facilitate universities' overall improvement, as their inclusion in the university environment necessitates the practice of conversation, perceptiveness, as well as multifaceted perspectives on learning support at university level. It is thus vital to provide access, and engage in support practices that are sensitive to disability. To explore this topic further, I asked the following questions in this study:

Primary research question:

What factors support the wellbeing of students with disabilities at university?

Secondary research questions

    1. What factors do students with disabilities perceive as improving their wellbeing?

    2. What factors do students with disabilities perceive as restraining/impeding their wellbeing?

1.5 WORKING ASSUMPTIONS

The wellbeing of students with disabilities may fluctuate according to their perception of the physical environment, financial circumstances, social interactions, and levels of support. The study assumes that various factors support the wellbeing of students with disabilities at university. However, it is also accepted that the ways in which the wellbeing of university students with disabilities are supported are nuanced and complex. It is thus vital to ascertain how the wellbeing of university students with disabilities is supported, and is visibly discernible as enhancing their opportunities to access quality education at tertiary level.

1.6 CONCEPT CLARIFICATION

The key concepts central to this study are: wellbeing; disabilities; and university students. The concept of wellbeing relates to "optimal psychological functioning and experience" (Ryan & Deci, 2001, p. 142). Wellbeing is seen as central to higher education, therefore universities should emphasise contributory factors that enhance the wellbeing of students (Harward, 2016). Students with disabilities constitute a unique section of the student population who, without appropriate support structures at university, experience many academic and social challenges that impact their wellbeing. According to Seligman (2013), wellbeing is the focus and goal of positive psychology. Wellbeing is more than just happiness, and is seen as a construct comprising five different elements known as PERMA (Positive emotion, Engagement, Relationships, Meaning, and Accomplishment), which all contribute to wellbeing (Seligman, 2013). An individual with a positive affect and cognition is more likely to have a balanced, healthy state of wellbeing (Troccoli, 2017). Wellbeing researchers often distinguish between two approaches, the hedonic tradition, and the eudaimonic tradition. The former investigates wellbeing as feelings, and emphasises constructs such as positive affect, happiness, low negative affect, and satisfaction with life (Kahneman et al., 1999; Lyubomirsky & Lepper, 1999). Alternatively, the eudaimonic tradition emphasises healthy psychological functioning and human growth (Ryff, 1989;

Waterman, 1993). As a result, wellbeing is viewed as a multifaceted phenomenon that encompasses characteristics of both the hedonic and eudaimonic notions of happiness (Ryan & Deci, 2001). Psychological wellbeing is seen as a dynamic process (Kashdan et al., 2008) whose manifestations are influenced by contextual and cultural factors. There are many different theories and models of wellbeing, some of which overlap. For this study, I will use Seligman's (2013) PERMA Theory and the Systems Theory Concept of Disability (Michailakis, 2003).

Disability is a word that holds different meanings for different people. The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) states that "persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments and/or chronic conditions which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others" (Chataika et al., 2012, p. 14). South Africa is a signatory of the UNCRPD, supporting inclusion and following a social model in its legislation. "Disability is an evolving concept and disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others" (UNCRPD, 2022, p. 1). The experience of disability is unique to each person, but there are common impacting factors. Disability arises from the interaction of a person with health conditions and their environment. If the environment changes, then the experience of disability will change. In this study, the concept 'university students' refers to students who have completed secondary education and are studying towards a tertiary qualification (bachelor's degree, honours degree, and other relevant university programmes).

1.7 CONCEPTUAL FRAMEWORK

A concept is an idea attained from a specified model, while a theory is a set of concepts defining an occurrence (Silverman, 2009), thus enabling us to improve our understanding of phenomena. According to theorists, multi-dimensional models are required to effectively portray the complexity of optimal psychological functioning (Forgeard et al., 2011; Kern et al., 2014). Seligman's multi-dimensional Theory of Wellbeing (PERMA) enables us to understand the elements that comprise the concept of wellbeing, and methods that maximise each element to achieve this. The goal of this theory is to increase the understanding of wellbeing, and build knowledge on thriving. As stated earlier, Seligman hypothesises that wellbeing comprises five measurable elements, which are Positive emotions (P), Engagement

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(E), Relationships (R), Meaning (M), and Accomplishment (A) (PERMA). The theory combines hedonic and eudaimonic concepts, and comprises more than the absence of negative emotions (Seligman, 2013). In this study, this theory served to enable an enhanced understanding of factors that enable thriving and academic achievement for university students with disabilities. Positive emotions (P) such as joy and excitement are important for students as these engender a positive outlook on life. Engagement (E) has been found to increase academic performance in college students (Engeser et al., 2005, as cited in Tansey et al., 2017). According to Berscheid and Reis (1998), social Relationships (R) are fundamental to life, and engender integration and feelings of being supported by the staff, friends, and lecturers. Meaning (M) is identified as a meaningful life and feeling worthy (Steger, 2012). Accomplishment (A) involves achieving a goal, and feeling competent (Seligman, 2013). Seligman's PERMA Plus Theory was also utilised as a framework to guide this study as it entails the addition of physical activity, nutrition, sleep, and optimism.

Another theory that also informed this study was the Systems Theory Concept of Disability. Here, the identification of individuals as a person with disabilities takes place in relation to a specific system, allowing for different perspectives and interpretations of disability to emerge (Michailakis, 2003). This system links to the PERMA Theory as it also comprises components or systems where interrelations between them are important in contributing to wellbeing. The comprehensive integration of these frameworks will be discussed in Chapter 2 of this study.

1.8 PARADIGMATIC PERSPECTIVES

1.8.1 Epistemology

An epistemology is "a philosophical belief system about how research proceeds and what counts as knowledge" (Leavy, 2017, p. 6). Paradigms are the philosophical assumptions behind qualitative research, and personal convictions that guide activity (Denzin & Lincoln, 2000; Guba, 1990). This paradigm's key assumptions are that reality is socially and historically produced, subjective (Creswell & Creswell, 2018), and cannot be generalised to a single common reality because it is formed by individual consciousness. Knowledge is discovered and verified through direct observations or measurements, or through the meanings attached to the phenomenon being studied. I used an interpretivist/constructivist paradigm in this study. The key assumptions of this paradigm are that reality is socially and

historically constructed, subjective (Creswell & Creswell, 2018), and cannot be generalised to one common reality as it is formed by individual consciousness (Wagner et al., 2012). This aligns with the goals of this study as it is subjective, constructive, and entails varied perceptions of the factors through the lenses of different students as they assign meanings based on their values, beliefs, and experiences. The students who participated in this study formed part of a vulnerable, as well as a pioneering group due to them being one of the first generations included in tertiary education. Thus, the advantage of using this approach is that these students, and others like them, are given a voice.

1.8.2 Methodological approach

According to Denzin and Lincoln (2000), qualitative research is naturalistic and interprets events by identifying the meanings ascribed by people. Qualitative research is also used as an approach to explore and understand the interpretations people ascribe to human or social problems (Creswell, 2016). People's subjective experiences, meaning-making processes, learning, depth of insight, knowledge, and rich descriptions of facts are all prioritised in qualitative research (Leavy, 2017). This was applicable to this study as it was an exploratory, open-ended study focused on a small group of students with disabilities, specifically looking at the phenomenon of wellbeing. This group forms part of a vulnerable sector that needs to be heard for us to understand what factors improve their wellbeing while managing their unique disabilities (Creswell & Creswell Báez, 2021). Disabilities are also socially constructed, and this leads to different experiences of the individual depending on their unique outlook, experiences, beliefs, and culture. These differing perceptions thus generated new themes and assisted in creating an understanding of the experience of disability because of the multiple perspectives and co-construction (Pugach, 2001). However, it should be noted that the findings of this study are not generalisable due to the small sample size. Moreover, the possibility of personal bias affecting the analysis was also taken into consideration and mitigated to the best of my ability.

1.9 RESEARCH METHODOLOGY

1.9.1 Role of the researcher

As a researcher, this study was important to me as my daughter became a member of this marginalised group of undergraduate students due to her battle with cancer. I thus conducted this study as a student in educational psychology, and as a mother of an adult child with

disabilities. While my personal experience may deepen the qualitative insights of the study, additional measures, such as member checking, were applied in the research process to ensure trustworthiness.

1.9.2 Research design

Phenomenology was developed by Schutz, Husserl, Heidegger, and Merleau-Ponty (as cited in Leavy, 2017). Phenomenology is a graphic qualitative study of human encounters that investigates what is experienced and how it is experienced (Wertz, 2011). According to Husserl (as cited in Moran, 2000), the manner of portraying a consciousness of the experience must be considered. I therefore used hermeneutic or interpretive phenomenology as this is built on the viewpoint that understanding individuals cannot transpire without considering their circumstances. These include the cultural and social context in which they live, which need to be interpreted from their perspective (Bryman, 2001). The focus of this study was on exploring factors that support the wellbeing of students with disabilities at a prominent university in South Africa. The design corresponded with the broader wellbeing study being conducted in phases at this institution. This research explored students' subjective experiences of this phenomenon in the context of their lifeworld. Thereafter, I derived meanings from their experiences, which leads to improved understanding of the phenomenon (Silverman, 2020). Within the broader wellbeing project, focus groups were conducted with various groups of students (all faculties, international students, students in university residences, and students in private residences). This study included university students with disabilities.

1.9.3 Sampling

Sampling is the process of identifying a representative group from a population for research purposes. In this study, I used a homogenous non-probability sampling technique. This technique does not give all of the participants or units in the population equal chances of being included, incorporates non-random methods of choosing participants, and relies on the judgment of the researcher (Alvi, 2016; Marshall, 1996). I also used a purposive sampling technique, which is where the participants are selected based on the characteristics of the population, the resources available, the questions posed, the limitations encountered, and the purpose of the study with the expectation that each participant will provide unique and rich information of value to the study (Patton, 2014). The sample of this study comprised

students with disabilities at a prominent university in South Africa. This was carried out through invitations emailed to students who were registered with the disability unit at this institution. Those who agreed to participate in this research did so through a focus group that was conducted online.

1.9.4 Data collection

The study sought to gain rich and descriptive data to understand social reality and gain a deeper grasp of the phenomenon, which was explored from the perspective of the participants (Athanasou et al., 2012). Focus groups are small, structured groups with selected participants and a moderator. These groups explore and discuss specific phenomena or areas of interest in a non-threatening environment. They vary in terms of size, purpose, composition, and procedures. They are focused as they involve a collective discussion or activity around a specific item, and are interactive because of the interaction and dynamics evolving between the participants and the moderator (Krueger & Casey, 2015; Litoselliti, 2003). A focus group interview is sometimes referred to as a group interview, but differs as the researcher facilitates interaction and discussions in the group through dialogue instead of using only questioning (Morgan, 2009; Moser & Korstjens, 2018; Rabiee, 2004). Focus groups allow for more interaction, creating a social construction of meaning (Holstein & Gubrium, 1995). It is flexible, and captures authentic data from participants (Silverman, 2020). Group dynamics, interaction, and non-verbal communication are beneficial as new perspectives that add value to the study can be explored, which may not have developed in individual interviews (Parker & Tritter, 2006). I thus worked with several people concurrently instead of individually, which allowed me the ability to capture deeper information in a more economical manner than individual interviews (Moser & Korstjens, 2018).

I aimed for a focus group of five to eight people to allow the participants to focus on the central phenomenon of this study, which is wellbeing (Silverman, 2020). This transpired online due to the COVID-19 pandemic. A focus group that comprises individuals with certain characteristics of the overall population (students with disabilities) can contribute to gaining a greater understanding and different perspectives of the topic, and gives them a voice as a marginalised group. I used a semi-structured method whereby I initiated the discussion by outlining the group rules, facts, and open-ended pre-determined questions around the phenomenon of wellbeing. This allowed the participants to freely share their perceptions and interact with each other by brainstorming, commenting, and responding in the group with

minimal participation or intervention from me. This group interaction encouraged the participants to make connections to various concepts through the discussions, thereby providing a more comprehensive understanding and meaning of the topic. In this way, I cultivated large amounts of data in a relatively short period based on the collaboration and synergy between the participants (Green et al., 2003 as cited in Rabiee, 2004). A potential challenge that was foreseen was finding a group that is representative of the broader population and being aware of group dynamics that might result in some people in the focus group dominating the discussion. I therefore worked to build an empathic, trustworthy rapport initially, and employed gentle probing as a means of drawing them out to gain their unique perspectives (Denzin & Lincoln, 2002).

The data were collected through an audiotape recording of the focus group interview, with observations, and documentation of the discussion to facilitate analyses. The audio-recordings were transcribed in electronic format. My observations included the participants' gestures, facial expressions, and group interactions. Audiotape recordings included listening for voice inflections, tone, emotions, and nuances (Yin, 2016). Facilitating was done without bias. I have used and will continue to use a password to protect my work and make electronic copies to prevent their loss.

1.9.5 Data analyses and interpretation

Data analysis is the procedure of clarifying the data collected. This involves combining interpretations of people's discussions and what the researcher has perceived and read. It comprises negotiating between data and abstractions, logical reasoning and illustrations, and understandings (Merriam & Tisdell, 2016). I used qualitative thematic analyses to analyse the data by identifying themes or patterns in the data, which were coded. A constant comparative method was used to compare new codes with previous ones, and identifying themes and meanings (Merriam & Tisdell, 2016). I commenced data analysis while still collecting data in order to know where to probe for more or missing information. During data analysis, I organised the data into relevant codes, which entailed reading, transcribing, and identifying sections of data relevant to the study. This further required note-taking, category construction, and forming themes (Creswell & Creswell, 2018). I summarised the relevant themes that were discussed and noted body language, tone, and opinion differences. When I started the process, I used inductive reasoning, but as the analysis progressed, I used deductive reasoning to make sense of the data. This process facilitated a deeper

understanding of the meanings of the participants' words, and the phenomenon under study (Silverman, 2020). The advantage of this approach is that it provides a contextual interpretive account of social practices and wellbeing directly through quotations from the focus group (Wilkinson, 2011). The limitations thereof included staying focused and not digressing from the purpose of the study (Bloor, 2001; Cyr, 2019).

1.10 ETHICAL CONSIDERATIONS

The participants in this study were students with disabilities. Ethical research pertains to doing good and avoiding harm, and is pertinent throughout the different stages of the study. The protection of the participants in any research is vital. The ethical considerations relevant to this study related to the disabilities of the study's participants, e.g., wheelchair accessibility and/or access to assistive devices were needed to ensure equitable participation. Firstly, I sought ethical clearance from the Ethics Committee of the Faculty of Education at the University of Pretoria (see Appendix 4). The participants were also informed of the purpose of the study, and that it forms part of a broader study (Creswell & Creswell, 2018). They were provided with consent forms regarding informed voluntary participation. They were furthermore provided assurances of confidentiality, anonymity, protection from harm, the right to withdraw. They also received full disclosure regarding the risks and benefits of participation, the names of relevant people, including mine, and access to the results according to ethical and legal guidelines (Athanasou et al., 2012; Creswell & Creswell, 2018). In accordance with APA guidelines, I strove to recognise and be empathetic towards the status, position, and specific needs of my participants, bearing in mind that these were students with disabilities who formed part of a vulnerable population. As such, I prepared information in case further referrals to student support services were needed if emotional responses were elicited in the focus group discussions. There should be a relationship of trust between the participants and the researcher (Athanasou et al., 2012). According to Ramos (1989, as cited in Orb et al., 2001), ethical problems that may affect qualitative studies include the relationship between the participants and the researcher, the researcher's subjective interpretations of data, and the design itself. Ethical responsibility in research is an ongoing process and its principles are vital in guiding, meeting, and protecting the rights of the participants.

1.11 CONCLUSION

The aim of this chapter was to introduce this study. I provided the rationale, discussed the purpose of the study, outlined the research questions, and specified the working assumptions with which I approached the study. The important concepts were then clarified, and an overview of the selected theoretical, epistemological, and methodological approaches, as well as the research design and methods, were presented. Finally, I provided a brief overview of the quality criteria and ethical considerations observed throughout this study. In the next chapter, I discuss the existing literature in the field of this study. I also explain the theoretical framework selected to guide this study.

The existing literature on disability is discussed in Chapter 2. The research methodology is discussed in Chapter 3, which includes the sampling process, data collection method, and data analysis procedures. The outcomes of the focus group interview with students with impairments currently enrolled a South African university are presented in Chapter 4. Chapter 5 provides a summary of the findings of this study, and offers suggestions for future research on comparable or related themes.

CHAPTER 2 LITERATURE REVIEW

2.1 INTRODUCTION

This research focuses on wellbeing, as well as positive psychology, which will be explored in this chapter. Wellbeing is an ongoing area of research, and is defined in various ways (Seligman, 2013). Psychology not only comprises the study of pathology, deficiencies, and psychological damage, but also the positive aspects of the human psyche. This includes the study of strength and integrity. Positive psychology investigates the characteristics that make life worthwhile, as well as the human strengths that equip individuals to tackle problems, and appreciate others and the importance of everyday events (Dunn & Dougherty, 2005). Prevention researchers have determined that certain human strengths act as screens against mental illness. These strengths include optimism, interpersonal skills, courage, future mindedness, hope, honesty, perseverance, faith, work ethic, and the capacity for flow and insight, to name several (Seligman & Csikszentmihalyi, 2000). Apart from 'fixing' what is broken, this psychological treatment also includes amplifying strengths and nurturing good traits (Seligman, 2005). The objective of positive psychology is to understand the factors contributing to wellbeing, and to construct a conducive environment by exploring and evaluating ways to achieve wellbeing (Ryff, 1989) and thriving (Seligman, 2013). The author suggests that we can develop unparalleled levels of happiness by cultivating existing strengths (Seligman, 2002). Positive psychology emphasises advocating for thriving, happiness, a fulfilling life, and improving the context for people with disabilities. Positive aspects of peoples' lives include their strengths and assets being accentuated, while adverse attributes include functional symptoms or limitations that are minimised or integrated (Dunn & Dougherty, 2005). Improving educational opportunities and achievements is key to enhancing positive outcomes for any young person; thus higher education is seen as pivotal to a better future (Chataika et al., 2012).

Accessibility to tertiary learning has been a principal factor in the rise of democratic governments in Africa (Eloff & Graham, 2020). Chataika et al. (2012), Lyner-Cleophas et al. (2014), and international bodies have emphasised the necessity for universities to shift towards inclusivity as it impacts positively on the entire student body, in addition to benefitting non-traditional learners and students with disabilities (MacLeod et al., 2018). Universities in South Africa have been essential in focusing on societal inequality, the

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aftermath of apartheid, and striving for the wellbeing of wider communities through providing opportunities for the youth (Eloff & Graham, 2020).

In this regard, students with disabilities constitute a unique section of the student body. Students with physical and sensory disabilities or impairments may equip universities with varied perspectives and worldviews that have the potential to enrich academic thought and practices for all students. However, students with disabilities may, themselves, encounter academic and social challenges during the university transition. This may be the case in particular if appropriate support is not readily available, or support is available, but may not have been effectively implemented or accessed. Ideally, students with disabilities should feel safe identifying themselves as needing additional support. Thus, universities need to be resourced in ways that recognise the full range of disabilities, and disability services must provide all students with equitable experiences using evidence-based approaches. Universities, however, may fall short of such ideal circumstances for various reasons. According to Swart et al. (2004), inclusive education is complex, multidimensional, and fundamentally extends beyond the community and into society. Inclusive measures across different countries have been added to support students with disabilities (Murray & Sotardi, 2020). This may include specialised disability units, buildings and grounds that are without barriers and easily accessible, appropriate curricula, teaching techniques, support systems, and various communication modes and methods modified to address the various requirements of all learners (Swart et al., 2004).

This study was well aligned with the theoretical assumptions within positive psychology as it sought to identify and highlight positive factors that increase the wellbeing of students with disabilities. The purpose of the study was to explore students with disabilities' perceptions of factors that support their wellbeing at university. Studies on student wellbeing often investigate the factors that are detrimental to student wellbeing (Bewick et al., 2010; Cooke et al., 2006). However, there is a scarcity of literature that explores the factors that *support* wellbeing, and is set in an African context. Moreover, studies that enable and highlight the personal perspectives of students are still limited.

2.2 STUDENT WELLBEING AT UNIVERSITY

As stated, wellbeing is defined and conceptualised in many ways. According to Adler and Seligman (2016, p. 7), "Wellbeing is understood not simply as positive emotions, but as

thriving across multiple domains of life." The World Health Organisation (WHO) defines wellbeing, as a vital aspect of a person's health, "as not only the absence of disease or infirmity, but comprising a state of complete physical, mental and social wellbeing (World Health Organisation, 2014). Wellbeing is a complex concept that incorporates hedonic - feeling happy, and eudaimonic wellbeing - well-functioning (Huppert, 2014). Existing models offer different wellbeing domains, but this study will specifically focus on Seligman's (2011) PERMA Theory, which comprises five domains of life. These domains are: positive emotion; engagement or flow; positive relationships; meaning or purpose; and achievement, which is tracked by people as individual goals in terms of their wellbeing.

According to Seligman (2018), wellbeing and human thriving, or flourishing, are the central theme of positive psychology. The goal of wellbeing is to increase thriving, as such, the criterion for measuring wellbeing is thriving (Seligman, 2018). Thriving in life incorporates both good feelings and effective functioning. Thriving develops through positive functioning across multiple bio-psychosocial domains, where positive function incorporates the presence of strengths and wellness, and not the mere absence of psychological or behavioural problems (Csikszentmihalyi & Seligman, 2000). Positive characteristics, attitudes, and behaviours are assets that promote, and need to be nurtured to produce thriving throughout life.

Wellbeing is thus better defined as a multifaceted concept that can be appraised through the measurement of a variety of subjective and objective constructs (Forgeard et al., 2011). Students with disabilities require acceptance in society, while at the same time facing impediments and obstacles in their lives. This may outwardly reflect inner tension and disappointment with themselves, thus hindering social engagements with other students. Enhancement of psychological wellbeing could catalyse individual potential, promoting better integration of the person (Levy & Sabbagh, 2008). Accordingly, academic performance will improve drastically if self-esteem improves, which can be achieved with the support of other key players at school. In this sense, the definition offered by Keeling and McQuarrie (2014) provides a nuanced understanding of wellbeing as they view psychological wellbeing as an individual's subjective assessment of their emotional stress, sadness, anxiety, somatic symptoms, insomnia, social skills, and ability to cope with adversity.

In the positive psychology field, positive education presents an advanced educational model that accentuates personalised motivation, personal attributes, and positive emotions that support studying (Seligman et al., 2009). Positive learning centres on nurturing wellbeing in

students, teachers, and administrators aligned with the academic attainment of competencies. It further acknowledges that wellbeing comprises inherent as well as instrumental value (Adler, 2016). Positive education was viewed as crucial in this study as it encourages thriving and wellbeing in students with disabilities through its focus on strengths and specific skills. This enables students to enhance personal resilience, build positive emotions, promote mindfulness, strengthen their relationships, and boost a healthy lifestyle.

Research by Durlak et al. (2011) and Hoyt et al. (2012) proposes that wellbeing in youth promotes academic attainment, enhanced physical health during adolescence and adulthood, and reduced risky behaviours. The calibre of teacher-student alliances impacts learning outcomes in students (Cornelius-White, 2007; Hattie, 2009) as positive relations between teachers and students result in improved grades, positive outlooks on school, enhanced engagement in learning, and lower probability of repeating grades and dropping out (Hamre & Pianta, 2001). Wellbeing fosters social cohesion, creativity, and civic citizenship, and is seen as a protective feature counteracting the depression experienced by youth (Seligman et al., 2009). Studies on subjective wellbeing have revealed the impact of negative emotions on restricted attention and the effect of positive affect on broader attention, as well as enhanced creative and holistic thinking (Fredrickson & Branigan, 2005). Awareness of managing students' emotional and mental wellbeing is critical in the comprehension and execution of inclusive education (Appalsamy, 2018). Student wellbeing underpins every aspect of the student's life, thus encompassing academia, as well as the students' overall wellbeing and quality of life. It is thus extremely pertinent for students with disabilities to experience wellbeing.

2.2.1 Factors improving wellbeing

The initial year of higher education is significant as a time of transition for numerous students as it can influence their perspectives on learning at university and beyond in the remaining tertiary years (Hillman, 2005). Currently, the need for lifelong learning is underscored. The transition to university is usually a time of excitement, opportunity, adventure, and exploration for many students as they traverse new terrain, enhance self-awareness, explore and identify personal and professional goals, and join social groups (Francis et al., 2020). Student characteristics may impact their adaptation to tertiary education. These characteristics include disabilities, gender, age; background facets like school sector, parental education, ethnicity; and environmental affairs such as employment

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status, home situation, and field of study (McInnis & James, 1995, as cited in Hillman, 2005). Undergraduate studies are thus a time of acute academic pressure, a period of individuation in students where they make significant life decisions, and an avenue towards independence that is opened during which new relationships are formed (Eloff & Graham, 2020). According to research, these early encounters with tertiary education are crucial in affirming values, attitudes, and techniques for learning that will prevail throughout and beyond the undergraduate years (McInnis & James, 1995, as cited in Hillman, 2005).

According to Eloff and Graham (2020), the wellbeing and mental health of undergraduate students may decline between the year of inception and their final year, and therefore the social and psychological wellbeing of these students could require increased assistance at institutional level. Their research advocates that the broad downswing in the wellbeing and mental health of undergraduate students could be stalled by addressing the distinct criteria of wellbeing that require assistance. In addition, these authors recommend that students should play an active role in dialogues about enhancing student wellbeing, and that institutions should bolster the implied continuance of support that is accessible to students (Eloff & Graham, 2020).

2.2.2 Factors impeding wellbeing

A study by Weber (2020) draws attention to the oppression and stigmatisation faced by people with disabilities, both externally and internally, often due to their limited social knowledge. In South Africa, significant investments have been made into inclusive and special needs education, and disability studies in general (NCSNET/NCESS, Education White Paper 6, 2001; National Plan of Action for Children, 1996). The application of inclusive education in schools necessitates the collective engagement of all team members, including teachers, learners, parents, managers, and community members. All parties must be willing to learn and implement accommodations to benefit every student, including those with disabilities (Swart et al., 2004). While there are policy frameworks largely in place to include and support students with disabilities, education on disabilities is ample, but it is complicated in the general populace, and there is limited availability of research on the implementation of disability-friendly education at tertiary level (Weber, 2020). Following the seminal World Report on Disability (WHO and the World Bank 2011), disability is not rare and is correlated with a reduction in educational achievements, employment rates, and restricted access to health services (Mitra, 2018). Despite the fact that disability is recognised

as a constitutional right in legislation and policy, disability concerns appear to be treated arbitrarily in education, resulting in access constraints in education and support for students with disabilities due to a considerable gap between theory and practice (Chataika et al., 2012).

Evidence from international literature indicates that students with disabilities are confronted with continuous barriers in tertiary education, despite interventions and policies (Vickerman & Blundell, 2010). These challenges may include a lack of awareness or understanding of their impairment, no formal diagnosis from a qualified practitioner that may result/impact in academic difficulties during the transition to university, and the difference in learning environments at university from previous levels of education. Further, the challenges that students with disabilities face at university involve both personal and institutional factors, including students' lack of preparedness for the demands of university, and the faculty's lack of preparedness to meet these students' needs (Barnard-Brak et al., 2010). Matshedisho (2010) and Haywood (2014) also reported on students with disabilities' insights on the deportment of lecturers. These students expressed that in certain cases, their perceptions of some lecturers' failure to make the requisite accommodations was generated by a lack of disability awareness. Students felt unwelcome at their universities on occasions when disability units did not engage in supplying services (Mutanga, 2017). Therefore, students and institutions require additional information about elements that could encourage students to engage these important resources that contribute to academic success.

According to Grimes et al. (2017), university students with disabilities are perceived as being underrepresented in tertiary education. The actual size of the group of students with disabilities at university is suggested to differ from the charted one due to students not divulging their disability status for various reasons, including fear of prejudice, stigma, previous negative encounters, and knowledge gaps regarding accessible institutional accommodations and support (Murray & Sotardi, 2020). Twenty-five per cent of students stated that they had not revealed their disability status on their university application due to the perception that they may be denied a position in their chosen course option. According to Jacoby and Austin (2007), the experience of disability can increase their impression of being stigmatised and devalued, resulting in concerns about disclosure lest it cause negativity and a lack of access (Vickerman & Blundell, 2010). According to Vickerman and Blundell (2010), Higher Education Institutions (HEIs) should attend to five crucial points: pre-induction

support; staff promoting a barrier-free curriculum; empowerment; consultation with students on their views; and the development of support services for students where personal development planning is involved. According to The Foundation of Tertiary Institutions of the Northern Metropolis (Bell, 2011), functional independent disability units would make it easier for students with disabilities to participate as it would enhance communication between the various faculties and departments (Lyner-Cleophas et al., 2014).

According to Grimes et al. (2017), students do not regard their challenges as a disability, culminating in a hidden population of students who could be better supported by their university. Students may view their impairments as a disability and consequently exclude themselves from disability services, thus depriving themselves of the available support that could assist them. Conversely, students may be uncomfortable exploring formal disability support or available accommodations, or they may even believe that the support offered will not benefit them (Murray & Sotardi, 2020). Cunnah (2015) expresses that these experiences of exclusion at university can extend into employment settings for some students with disabilities.

Students with disabilities often feel overwhelmed by the novel experience of independence at university (Roux et al., 2015), resulting in diminished outcomes (Costello & Stone, 2012; Dallas et al., 2015; Gelbar et al., 2015; Hong, 2015). Academic performance for this group, in comparison to their peers without disabilities, is diminished regarding achievement rates (Grimes et al., 2017), as well as graduation rates. There is also a documented lag in completing degrees, if they persevere until graduation (Hong, 2015; Lombardi et al., 2012). It is therefore crucial that universities support and promote student wellbeing, and implement strategies and systems for rapid response to avert these transitional coping difficulties from advancing into additional mental health problems (DiGregorio et al., 2000).

Students are confronted with substantial problems acquiring suitable accommodations being made for their disability (Grimes et al., 2017). Previously in schools, students with disabilities might have had accommodations made for them. In tertiary education, students do not have access to these accommodations immediately because prior identification as students with disabilities is needed before allocation is granted (Barnard-Brak et al., 2010). Research by Garrison-Wade (2012) and Lightner et al. (2012) has demonstrated the importance of accommodations in the academic success of students with disabilities. Many students with disabilities do not utilise this accommodation to which they are entitled, despite

its positive impact on their academic success (Marshak et al., 2010; May & Stone, 2010). There is thus a demand for literature that attempts to understand why these students do not solicit the accommodations to which they are entitled, as this has been established as a question of critical importance (Marshak et al., 2010). McKinney and Swartz (2020) maintain that while accommodations for students with disabilities in tertiary education include the allocation of extended time for assignments and special examination venues, they are not always provided or allocated to the students. Moreover, they posit that the comprehension and provision of suitable accommodations for students with learning and psycho-social disabilities in tertiary institutions are deficient (Weber, 2020).

Students with disabilities may experience limited preparation in academic skills in tertiary education, and also contend with challenges that include surmounting structural and attitudinal barriers on campus (Tansey et al., 2018). A study by Mantsha (2016, 2019) from the Disability Unit at UNIVEN established that physical and attitudinal barriers at the UNIVEN campus were widespread and played a negative role in the experiences of students with disabilities. Accessibility posed a huge stumbling block, and the physical barriers that they identified included inaccessible classrooms, laboratories and buildings, unfavourable exam conditions and technology, as well as extra time required in exams. The attitudinal barriers identified included negative judgements after the disclosure of their impairments, and stigma, which impacts the social support available to the students. This was further impacted by insufficient support and funding. According to Mantsha (2016), individuals with disabilities are further marginalised as it was found that career/counselling services at UNIVEN were not specialised, and excluded students with disabilities. Additionally, in other research, Weber (2020) explains that only one-fifth of persons with severe disabilities between the ages of 20-24 gain access to universities in South Africa (Weber, 2020).

Feelings of inferiority and being silenced are an increasing cause for difficulty in asking for assistance without appearing weak or yielding independence, resulting in internalised oppression. In addition to having to deal with oppression from society, and restricted services, the internalised oppression that people with disabilities often experience exacerbates their feelings of marginalisation and social exclusion (Weber, 2020). Students also have to actively handle their identity concerning their 'extra visibility'. Students with disabilities may convert to being 'invisible' if and when their needs are unfulfilled as they feel that their environment prevents them from fully participating, and they thus 'disappear from view'.

Contrastingly, if and when these students have to make a special effort to make their needs known, they become 'extra visible' in a potentially negative way (Goode, 2007).

The length of time that students with disabilities often have to wait for adequate accommodations to be established, or for the support to which they are entitled, immensely impacts the capacity of some students to study effectively. This slow bureaucratic support process includes brailing, note-takers, computer software, laptops, and mobility-related support (Goode, 2007). If the expected support is not arranged or if students do not feel fully integrated initially, this can have an enormous knock-on effect. A frequent issue in the context of commencing their studies at university is the significance of students preparing beforehand. This is vital for these students, not only practically, but regarding feelings of having command of their lives, which consequently impacts their wellbeing (Goode, 2007).

University students with disabilities have delineated various obstacles that may lead to negative personal consequences. These include difficulties in peer relationships, establishment and maintenance, executive functioning challenges such as the implementation of schedules, employing time management skills, studying, concentrating (Dryer et al., 2016), and not disclosing their disabilities or requesting the support needed to achieve success (Roux et al., 2015).

2.3 WELLBEING OF STUDENTS WITH DISABILITIES

The challenges faced by students with disabilities are dynamic as the concept of disability, its meaning, and the way in which it affects students is constantly evolving. There are additional differing needs from different populations of students with disabilities. It is vital to engender an awareness of disability-related services, and to encourage students with disabilities to avail themselves of the services provided as a crucial step to promoting their wellbeing. However, the catalyst to this is disclosure (Stampoltzis & Polychronopoulou, 2009). Students with disabilities have great regard for social networks and social relations, both during the period of adjustment, as well as during their time at university.

According to Eloff and Ebersohn (2004, p. 241), "Change begins with the individual educator's attitude and the relationships in classroom." It should be recognised that learners should be unchanged while the system, practices and attitudes should be rethought and restructured to support individual differences (Swart & Pettipher, 2007). All practitioners should attend in-service training workshops to boost a change in attitude, accommodate all

learners, and to prevail over obstacles to learning (Eloff & Ebersöhn, 2004). Moreover, Roux and Burnett (2010) infer that students with disabilities in tertiary education should be motivated to engage in decision making to attain the specific requirements for their degree (Mutanga, 2017).

2.4 THE WELLBEING OF STUDENTS WITH DISABILITIES AT UNIVERSITY

In South Africa, the Higher Education Act of 1997 (DHET, 1997) highlights the necessity of getting universities to commit to being available to wider communities than previously. This will ensure that universities become central in the advancement of knowledge and competency for students with disabilities by positioning them as equals to their counterparts without disabilities (Weber, 2020). Universities have partnered to address inequalities in society, reduce the devastation of racism, and pursue the wellbeing of wider communities, families, and individuals through the provision of gateways for talented youth. Various researchers have proposed the significance of exploring and supporting the wellbeing and mental health of university students (Auerbach et al., 2018; Eloff & Graham, 2020; Ryff, 2016). The manner in which universities support the wellbeing of undergraduate students with disabilities needs to be made visible to enhance these students' opportunities to access quality education. The attendance of students with disabilities enhances the development of a greater university as it necessitates developing attitudes, transforming practices, and engaging in actions that are receptive to disability. The university is considered as a vehicle to enhance the quality of life of its students, thus opening a window of opportunity and an experience of empowerment for students with disabilities (Helena Martins et al., 2018). Exploring students' perceptions and experiences of disability could enable more effective messages and support regarding what disability means at an individual level. This understanding and awareness could, in turn, inform policy and practice at the institutional and sector level. However, this can only be initiated if students disclose their disability and their needs arising from it to the university.

According to the Resilience Theory (Masten, 2014), accommodations are a positive resource for students with disabilities that could contribute to academic wellbeing (Troccoli, 2017). Universities strive to fulfil the requirements of students diagnosed with disabilities by making accommodations. These include offering extra time, reader/writer support, individual testing rooms, and special computer rooms, among others. Unfortunately, these strategies do not always provide learners with the distinct targeted support that is found to be most

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beneficial (Lovett et al., 2015; Weis et al., 2016). According to Lopez-Gavira et al. (2021), flexibility and an inclusive curriculum are principal elements within the university setting. Combined endeavours among stakeholders (students with disabilities, administration, and academic and supporting staff) are vital in the creation of a supportive education system, and the inclusion of students with disabilities in higher education (Mutanga & Walker, 2017).

Insights from students with disabilities reveal that early perceptions of disability can be influenced by adults, including parents, educators, general practitioners, and significant social norms (Swart et al., 2004). This is further influenced by interactions and experiences with peers and professors, thus impacting their self-concept and utilisation of support structures at university (Murray & Sotardi, 2020). According to Chataika (2010), the successes of students with disabilities in higher education are determined by two factors: a positive attitude and self-advocacy skills. Students with disabilities value social networks and social relations profoundly throughout the transition and university period. As such, there are a variety of support structures accessible to students with disabilities in higher education, including support offered through lecturers and disability units.

2.4.1 Disability units

Disability units are special units formed at universities specifically for the provision of the services needed by students with disabilities. These services include the provision of accommodations, extra time during assessments, the availability of sign language interpreters, and study materials in accessible formats like Braille or large print (Bell, 2011; Matshedisho 2010; Naidoo 2010). Matshedisho (2010) reports that 25% of the students with disabilities in his study felt welcomed and comfortable at the university in their transition period due to the support offered by the Disability Unit. Students often felt unwelcome at their universities on occasions when disability units were not instrumental in the provision of services. According to research findings, students with disabilities value the services they obtain from disability units.

Despite financial challenges, some disability units at historically Black universities contribute positively to the lives of their students (Engelbrecht et al., 2002; Howell, 2006). In a study with blind and visually impaired students on information-seeking behaviour at the University of KwaZulu-Natal, Seyama et al. (2014) disclosed that the students viewed the Disability Unit staff as an essential component of information access (Mutanga, 2017). The significance

of disability units in the lives of students with disabilities cannot be challenged. Such units are required at university because foresight is required to refrain from typecasting students with disabilities. This results in estrangement from the balance of the student population, while maintaining the cultural perspective of people with disabilities as second-class citizens requiring assistance from a Disability Unit to fit into an unvarying tertiary education system. As such, disability units should not be viewed as the exclusive manner of response to the requirements of students with disabilities. Due to the position of disability units concerning the needs of students, as shown by the literature, it is vital to critically query the role of disability units against the principles of social justice. This includes these units' ability to generate possibilities for full participation and success for all students in higher education to enable them to attain their objectives and fulfil their ambitions (Mutanga, 2017). in light of the findings that disclosure of disability can be challenging, it is recommended that "Disability Unit " be changed to "Special Services Unit" as this would assist in removing the stigma attached to "disability."

2.4.2 The role of lecturers

Inclusive education refers to assessments and the syllabus created to engage students in significant, meaningful learning that is accessible to everyone (Hecht et al., 2015), in addition to ensuring that students consider themselves to be cherished university members (Lourens & Swartz, 2020). This engagement engenders a feeling of belonging, which is critical in averting dropping out. According to Thomas (2016), students with disabilities who felt that they had a negative relationship with academic staff members were more inclined to quit university. Consequently, the more intense the belonging, the bigger the possibility of the learners remaining at university until degree completion (Hagenauer & Volet, 2014). Evidence has shown that the inclusion of relevant and practical content for the future, continuous assessment and feedback, active participation, positive peer interactions, and personal tutoring have been found to minimise the probability of dropping out significantly (Thomas, 2016), thereby enhancing wellbeing. Lipka et al. (2019) arrived at comparable conclusions, determining that care, empathy, and accessibility are cherished by students with disabilities. Students had mixed reactions to the attitudes of academic staff, with both positive attitudes and bad experiences reported. Certain students were coping through a support network comprising friends, family, and coaches. In light of this, faculty members' experience of disability and disability training could positively impact this perspective (Moriña et al., 2020).

2.5 SOUTH AFRICAN POLICIES ON WELLBEING

The advent of democracy in 1994 introduced a new development-focused approach to the allocation of social services to all vulnerable groups in society, inclusive of people with disabilities. UNESCO has consistently emphasised the importance of initiatives in addressing the challenges and opportunities of inclusive education (Alam & Tiwari, 2020). This has propelled universities worldwide to contemplate diversity and transformation as proposed by various policy documents and authors (Department of Higher Education and Training, 2012; Higher Education, 1997; Jameel, 2011; Mutanga, 2017; Tilak, 2015). As mentioned previously, the Higher Education Act of 1997 (DHET, 101/1997) was put into place to make tertiary education available to all students, including those with disabilities. This is encouraged through placing students with disabilities on par with their counterparts who do not have disabilities.

2.6 THE IMPACT OF THE COVID-19 PANDEMIC

COVID-19 constitutes a substantial hazard to people's health, lives, and economy in many countries. It has also resulted in disruptions to daily life, activity participation, employment, social interactions, and escalating anxiety, fear, and negativity (Bavel et al., 2020; Berger et al., 2020). COVID-19 has created notable challenges for tertiary education institutions, and extensive disturbances in learning and teaching (Dodd et al., 2021). In a global health pandemic setting such as COVID-19, the provision of sufficient resources and care for people with disabilities and chronic conditions is vital as the hazards of COVID-19 can have varied impacts on them (Berger et al., 2020). Their disabilities may make them sensitive to the development of increased intense complications from COVID-19 (World Health Organization, 2020), which can increase perceived stress, and mitigate their health and wellbeing. The comprehension of the perceived impact of a pandemic can explain the growth of more satisfactory support and care, psychoeducation, interventions, and services for people with disabilities and chronic conditions.

One significant impact of COVID-19 has been the shift to online learning. The school shutdown has negatively affected students with disabilities, putting them in jeopardy of exclusion from education. According to Alam and Tiwari (2020), there is a lack of assistive devices online for distance learning programmes, which are required for participation and accommodation based on their specific learning needs. Insufficient support and internet

access, accessible software and hardware learning presumably widen the gap for students with disabilities (United Nations, 2020). Extended school closures and the disengagement of students with disabilities from the learning process could result in an increased risk of dropout for people with disabilities, particularly those from lower-income households (Samaila et al., 2020). Hence, an online approach is not always ideal for creating an inclusive learning environment (Alam & Tiwari, 2020).

In certain respects, however, this shift to online learning due to a pandemic could be beneficial to some students with disabilities. For example, going online might reduce the necessity for disclosure, increase flexibility if instructors are being especially accommodating under the circumstances, or reduce barriers for students with mobility-related impairments (Umucu & Lee, 2020). In summary, COVID-19 has generated notable challenges for tertiary institutions and significant disruptions in learning and teaching, impacting students' wellbeing.

2.7 THEORETICAL FRAMEWORK FOR THIS STUDY

2.7.1 The PERMA Model

According to Kern et al. (2015), schools are exemplary establishments that provide positive opportunities to students living with disabilities. As such, universities are in a position to mould students, not just academically, but further than, in a manner that encompasses the advancement of wellbeing and character. Kern et al. (2015) argue that the incorporation of positive psychology into education can decrease depression among students living with disabilities, and help enhance the students' wellbeing and opportunities to thrive through an application of the five elements of wellbeing

Traditional psychotherapy was aimed at alleviating distress, whereas positive psychological interventions developed by theorists aim to enhance wellbeing, positive emotions, and optimal functioning (Carr, 2013). Seligman is regarded as the founder of the positive psychology movement, which focuses on achieving and enhancing wellbeing in individuals. Positive psychology seeks insight as to what works, and leads to feelings of happiness and thriving within individuals' lives. Seligman thus introduced the Theory of Wellbeing (PERMA), which aims to stimulate wellbeing and thriving. Here, he defines wellbeing as a construct comprising five elements, where each element does not define what wellbeing is, but rather, each one contributes to wellbeing. These elements are: Positive emotion,

Engagement, Relationships, Meaning, and Accomplishment (Seligman, 2013). The theory combines hedonic and eudaimonic concepts, and comprises more than the absence of negative emotions (Seligman, 2013). This theory thus enables an understanding of the elements that comprise the concept of wellbeing, as well as the techniques for amplifying each element to accomplish it. According to this theory, each element comprises three properties: it contributes to wellbeing, people track it for itself, and each one is distinguished and measured autonomously.

Positive emotion: This was the first element in the Authentic Happiness Theory and the PERMA Model. It is the hedonic element of wellbeing, and is a major component of wellbeing as a science (Nebrida & Dullas, 2018). This is important as positive emotions boost performance and physical health, enhance relationships, and generate optimism and positive expectations for the future (Seligman, 2013). According to Diener (2000), the experience of positive emotions is a central objective of individuals across the globe. It correlates with successful behaviour and health, and serves as a marker for thriving (Khaw & Kern, 2014). According to Noble and McGrath (2008), schools assist students to experience positive feelings, including belonging to their school, safety from bullying and violence, satisfaction and pride through the experience of celebrating success, excitement and enjoyment through participating in fun activities or games, and optimism about their success and school. Feelings of positive affect in college students with disabilities were significantly associated with overall life satisfaction (Smedema, 2015), which leads to a deeper approach to learning (Trigwell et al., 2012), culminating in better academic outcomes (Tansey et al., 2018). Positive emotions enhance positive perspectives in the university environment, and promote feelings of equality with other students without disabilities. They also motivate participation in activities without negative feelings of discrimination or rejection (Zuma, 2019). This element fulfils Seligman's three requirements – it contributes to wellbeing, pleasurable experience is often pursued for its own ends, and it can be measured separately from the other elements.

Engagement: Engagement refers to the affinity for an activity, including emotions of being engrossed and riveted by activities (Seligman, 2011). Flow is the state in which high skill and high challenge interact, and a person feels completely engaged (Seligman, 2010). Engagement has been established as a dominant sphere in enhancing life satisfaction and positive affect, as well as increasing educational attainments in university scholars (Engeser

et al., 2005, as cited in Tansey et al., 2018). Students with disabilities emphasise that they socially participate through engagement in social activities that the university offers, like doing art, singing, and sports, thereby enhancing engagement with the university, their own physical and mental health, subjective wellbeing, self-rated health, and life satisfaction (Kimura et al., 2013). Student involvement is an acknowledged attribute of high-performance schools and has a positive effect on engagement and learning. Wilson (2017) has established that students with disabilities engage in good interaction with their peers through participating in social activities (Zuma, 2019). Nonetheless, it should be noted that university students with disabilities exhibit markedly less school engagement than their peers without disabilities (Tansey et al., 2018).

Relationships: Close relationships are regarded as symbolising a basic human need. Positive relationships are acknowledged as the feeling of being cared about by others, socially integrated, and supported (Seligman, 2013). According to Berscheid and Reis (1998), social relationships are fundamental to life, and engender integration and feelings of support from staff, friends, and lecturers. In a university setting, building strong, positive relationships with peers and lecturers helps students living with disabilities to experience support, and feel connected to the university environment. McFerran (2010) identified music to be a useful method for building relationships among students, specifically those living with disabilities. This is important as social support has been found to forecast life satisfaction in university students with disabilities (Smedema, 2015). Additionally, perceived family social support is a compelling factor in the magnitude and stability of GPA in university students over a period of time (Cheng et al., 2012).

Meaning: Meaning suggests the perception that your life is worthy and meaningful. This also denotes a feeling of connection to a bigger entity (Seligman, 2011). A sense of meaning can be described as participation in a task or activity that affects others as well as yourself. It provides a sensation of fulfilment and is positively linked to life satisfaction and positive affect (Steger & Frazier, 2005), and educational attainment in university students (DeWitz et al., 2009). Possessing a positive sense of life meaning is correlated with enhanced wellbeing, whereas possessing no sense of meaning in life is associated with psychopathology. Recent research has underscored the significance of 'student voice' in conveying a sense of meaning and connectedness to the syllabus. Providing services and fostering meaningful relationships with others contribute to enhanced meaning in individuals with disabilities (Arvig, 2006). A

sense of meaning can also be successfully attained in these students through inspiring greatness within themselves, inspiring them to lead meaningful lives, helping them to value themselves and find social support, motivating them to participate in school activities, and providing positive feedback on their deeds.

Accomplishment: Accomplishment involves working towards and achieving a goal, as well as feeling competent (Seligman, 2013). It includes self-motivation to conclude what we undertake to achieve and to fulfil our life goals. Accomplishment promotes our wellbeing when we can reflect on our lives with a sense of achievement and say, "I did it, and I did it well" (Seligman, 2012, p. 2). It entails having a persevering attitude, and the desire to achieve something as opposed to one's real achievements. Perseverance has been established to precede academic achievement, and is correlated with many positive outcomes, incorporating health, quality of life, and wellbeing in adults with various impairment levels (Tansey et al., 2018). Accomplishment, also known as attainment, mastery, or proficiency, is regarded as having the ability to do something successfully or efficiently, the self-motivation to work towards and reached your goals, and attain mastery over an endeavour. For students living with disabilities, a sense of accomplishment gives them the strength to fight any circumstance coming their way, and it enhances the passion to believe in attaining their dreams.

2.7.2 PERMA Plus Theory

This is an extension of the PERMA Theory that includes additional principal factors of wellbeing. These comprise optimism, nutrition, physical activity, and sleep (Carver et al., 2010). These additional elements allude to elements firmly corresponding to psychological wellbeing and resilience outside of Seligman's Wellbeing Model (Iasiello et al., 2017).

Optimism: Optimism is a positive emotion that is crucial to enhancing wellbeing and resilience. It is the conviction that life will comprise more positive than negative outcomes. Optimistic individuals are prone to be resilient in stressful life events, have better post-operative outcomes, longer lives, reduced depression levels, and the ability to adapt better to college life, thus enhancing wellbeing (Carver et al., 2010).

Physical activity: Numerous studies and strategies link physical activity to wellbeing. The physical benefits of being active diminish manifestations of anxiety, depression, and loneliness; and enhance mental focus and clarity. People with mental illness are more

susceptible to physical inactivity and negative emotions, which enhance the prospect of poor health habits and physical disease (Hyde et al., 2013).

Nutrition: Poor nutrition results in physical health problems such as diabetes, obesity, heart disease, and even cancer. There is notable research indicating a relationship between diet and mental health (Stranges et al., 2014). Moreover, high levels of wellbeing were disclosed by individuals who consumed more fruits and vegetables (Stranges et al., 2014). A review of research on children and adolescents found that a poor diet that incorporates high levels of saturated fat, refined carbohydrates, and processed foods was associated with poorer mental health (O'Neil et al., 2014).

Sleep: According to neuroimaging and neurochemistry research, good sleep hygiene fosters mental and emotional resilience, while sleep deprivation results in negative thinking and emotional vulnerability (Harvard Medical School, 2022). Sleep problems are prone to affect people with psychiatric disorders, and may increase the risk of developing mental illness, including depression. Cognitive behavioural techniques and relaxation techniques to decrease anxiety and stress can be effective ways to improve sleep and overall wellbeing.

2.7.3 Systems Theory Concept of Disability

The literature reveals that "disability results from the interaction between people with impairments and attitudinal and environmental barriers that hinder their full and active participation in society on an equal basis with others" (World Health Organization, 2011, p. 4). Disability refers to adverse restrictions experienced by individuals in their endeavour to function in society (Rapley, 2004), often resulting in people with disabilities being overlooked or ignored. This study pertains to people with disabilities rather than 'disabled people', as a disability is what someone has, and not who someone is. An American disability rights organisation, the Arc, maintains that referring to people with disabilities in preference to disabled people diminishes their disability, thereby focusing firstly on their humanity and then their disability (Weber, 2020). It defines people with disabilities by their strengths and abilities, and not by their disability (Smith, 2016), thus enabling people with disabilities to regard themselves as a person first, and their disability as being a secondary part of themselves.

The conventional view of disability, the medical model, often targets the individual, underscoring failings or incapacities, impairments, or a defect. This emphasis generates

barriers to participation on equal terms, considering an individual who seems to have a deficit of certain capacities as unable to attain autonomy. Social System Theory renounces the belief that our concepts are representations of reality, meaning that the categories and concepts we utilise are distinctions that are system specific. The phenomenon under study was observed through these distinctions. This implies that observations are not absolute, but relative to the observer's perspective (Michailakis, 2003). In this study on the wellbeing of students with disabilities at university, the identity of the individual will consistently be regarded as more comprehensive than the specific disability.

2.8 CONCLUSION

Improving the academic contexts of students with impairments presents a moral obligation to all stakeholders concerned. Professor Kader Asmal (Department of Education 2001, p. 4), a previous Minister of Education, expressed this sentiment, "Let us work together to nurture our people with disabilities so that they also experience the full excitement and joy of learning, and to provide them, and our nation, with a solid foundation for lifelong learning and development."

Despite global awareness of disabilities and the inherent impairments thereof, their effect on learning, as well as the conceptualisation and implementation of inclusive practices within, education has not always been intuitive (Murray & Sotardi, 2020). Studies have often focused on 'negative' factors (Carter & Spencer, 2006; Mitter et al., 2019; Spendelow, 2011; Toutain, 2019). In addition to presenting a more balanced view of student wellbeing, there is also a need to hear the voices of the students with disabilities themselves more frequently to enable optimal resolutions that support wellbeing. It is vital to support students with disabilities, and identify factors that can result in positive outcomes. The concept of wellbeing, as seen through the PERMA Model and PERMA Plus Model (Seligman, 2011), as well as the Systems Theory Concept of Disability (Michailakis, 2003), is multidimensional. In this case, wellbeing is thus seen as a tool to produce a nuanced understanding of students with disabilities, the facilitation of the transition to university, and the enablement of degree completion. These concepts and the five elements of PERMA, as well as the five elements of PERMA Plus, can be utilised as a foundation to build and enable interventions to assist students with disabilities. This could enhance these students' ability to achieve positive academic and psychosocial outcomes at university.

CHAPTER 3 RESEARCH DESIGN AND METHODOLOGY

3.1 INTRODUCTION

In the preceding chapter, I focused on the literature pertaining to the concept of wellbeing in students with disabilities. In this chapter, the research methodology and design that I adopted in this study are discussed in this chapter. The research design links the empirical data collected to the preliminary research questions in a study, and closes with a conclusion (Yin, 2016). Moreover, research methodology serves as a bridge joining our philosophical standpoint on ontology and epistemology, and the methods utilised in a study.

I will focus on the process that I used in my data collection that enabled me to reach the conclusions presented in this study. This will incorporate the methodology regarding the process of my selection of an appropriate research design, as well as my choice of research site and participants. I will also catalogue the steps and process of data generation, documentation, data analysis, and document my approach towards upholding quality criteria and following ethical guidelines. I will also elucidate the paradigmatic stances I adopted during this study and reflect on my role as a qualitative researcher.

3.2 PARADIGMATIC PERSPECTIVES

3.2.1 Epistemology

 The theory of knowledge is known as epistemology, and entails the methods and sources used to gather knowledge (Krauss, 2005). While ontology embodies understanding what is and what we can acquire knowledge about, epistemology tries to understand what it means to know and the process of how knowledge is created (Gray, 2021).

A paradigm is seen as a worldview that acts as a perspective directing the actions of the individual, and also as a framework that regulates the methods used to study and interpret knowledge and the goal and motivation of the research (Rehman & Alharthi, 2016). The key paradigms are interpretivism, positivism, and Critical Theory (Mantsha, 2016). These paradigmatic perspectives provide a frame of reference or a lens through which people view and interpret information, as well as the world around them (Hitge, 2015). Each paradigm is established on its own ontological and epistemological beliefs, and has different assumptions of reality and knowledge which support its particular research approach. These paradigms are

beliefs that, in turn, inform our use of theory in qualitative research, which then informs our research designs or methodologies in qualitative research (Creswell, 2016).

According to phenomenology, the individual perceptions and subjective interpretations of people concerning their world furnish the premise for understanding social reality (Mack, 2010). Knowledge is discovered and verified through direct observations or measurements, or through the meanings attached to the phenomena studied. Thus, responses in one phase will inform responses in the following phases. My worldview as a researcher was thus guided by methodological, ontological and epistemological considerations (Creswell, 2016).

Positivism is a study method based on the ontological notion of objective reality and meanings that are regarded to be separate from individuals. According to interpretivism, knowledge and meaning are acts of interpretation, hence there is no objective knowledge that is not dependent on thinking, reasoning humans (Mantsha, 2016). Interpretivism is also termed anti-positivist, and is sometimes also referred to as constructivism owing to its focus on the human capacity to construct meaning of experience of phenomena. Interpretivism, unlike positivism, does not believe in one exact truth (McMillan & Schumacher, 2014), and rather focuses on multiple understandings of how individuals explain their behaviour (Thompson, 2017). An interpretive stance contributes a frame of reference for all aspects of a qualitative research project (Creswell, 2014).

I chose an interpretivist/constructivist paradigm in this study as it is grounded on the premise that reality is socially constructed in a variety of ways (McMillan & Schumacher, 2014). It therefore cannot be generalised to one common reality as it is formed by individual consciousness (Wagner et al., 2012). Interpretivism is impacted by hermeneutics (Maree, 2016), which is the study of meaning and interpretation (Mack, 2010), as well as phenomenology, which maintains that the cornerstone for comprehending social phenomena is people's subjective interpretations and views of the world (Nieuwenhuis, 2016). The objective of interpretive research is to focus primarily on the participants' views of the situation for them to understand the meaning that others bring to the world (Creswell & Poth, 2016). Interpretive scholars concentrate on unique contexts in which people live and work in order to better comprehend the world through the subjective experiences of individuals (Yin, 2016). According to Maree (2012), an interpretive paradigm is suitable when conducting qualitative research regarding social challenges or perceptions of individuals in a community as the researcher gains "insights into the experiences and perceptions of the participants" (p.

35). Researchers rely on the perceptions of the participants, which are elicited through open-end questions, and by attending to their interactions and discussions, as well as the meanings they attribute to certain situations or events (Creswell, 2014). Events are viewed as distinguishable occurrences that cannot be generalised, and which incorporate numerous viewpoints and experiences of one event. Interpretivism believes that an understanding of people's direct experiences enables an enhanced comprehension of social reality (Mack, 2010).

I found the interpretive approach most appropriate as it correlates to the objective of this study, which was to obtain enhanced insight into the participants' perceptions, needs and experiences of factors supporting their wellbeing at university based on their interpretations of events. I also believe that a phenomenon is best explained by the individuals involved in it. This aligns with the study as it is subjective, constructive, and entails varied perceptions of the factors through the lenses of different students as they assigned meanings based on their values, beliefs, and experiences. The central assumption of interpretivism is that research can only be objectively viewed from the inside, through people's first-hand experience. The advantage of using this approach is that the participants, who form part of a vulnerable as well as a pioneering group, being one of the first generations being included in tertiary education groups, are given a voice. Interpretivism thus focuses on discovering perceived meaning as ascribed by the participants (O'Neil & Koekemoer, 2016). This paradigm thus enabled me to obtain rich, experiential data, and gain in-depth knowledge of a situation within its context regarding the factors that support the wellbeing of students with disabilities at university (Blanche et al., 2006).

3.3 RESEARCH METHODOLOGY

Qualitative research methods are used to investigate people and their social environments (Richards, 2020). Qualitative researchers assume that people create their own realities and perceive the world in their own ways (Salmons, 2016), whereas a quantitative approach focuses on trends and explanations of variables (Creswell & Creswell, 2018). A qualitative approach was deemed the most suitable choice as this study has a central concern, a central phenomenon that is explored, which is the students' perceptions of factors that support their wellbeing at university. The primary goal of qualitative research is to investigate how meaning is created, with the main purpose of such research being to discover and analyse these meanings. Qualitative methodology grants the opportunity for rich data collection due

to multiple points of view of the phenomenon (Creswell & Creswell, 2018). Qualitative research commences with assumptions or a theoretical lens, and concentrates on the investigation of research matters that centre on the meanings attributed to social or human problems by individuals or groups. The collection of data in a natural context, inductive data analysis, and the formation of themes or patterns are all part of this strategy. The final written report thus includes a description and clarification of the problem, participant voices, the researcher's reflexivity, and it either enriches the literature, or highlights or symbolizes a call to action. The researcher is also the primary data collector. When we want to empower people by sharing their stories and hearing their voices, we do qualitative research (Creswell & Poth, 2016). Qualitative research is thus an approach that seeks to investigate and understand people's interpretations of social or human problems. It emphasises people's building of meaning, personal experiences, and accumulates a wealth of knowledge and understanding through an inductive reasoning process that results in rich data depictions (Leavy, 2017).

Qualitative research involves researchers interpreting what they see, hear, and comprehend. The researcher's interpretations are inextricably linked to their backgrounds, histories, contexts, and prior knowledge (Creswell & Poth, 2016). Qualitative research aims to allow the researcher entrance to the individual's perceptions, which incorporate their unique experience of events, construction of meaning, and a comprehension of the meanings that individuals assign to various social concepts. The research process is emergent in qualitative research, which implies that the first research scheme and the stages of the procedure may alter after the researcher starts engaging with the data, and drawing on numerous data sources (Creswell, 2014). When conducting research, the insider viewpoint is a useful tool for discovering hidden feelings about the issue, as well as personal life experiences in the researcher's thoughts, which may add to current debates and discussions (Obasi, 2014).

I undertook a qualitative study at the university where my aim in utilising qualitative methods was to supplement my understanding of factors that support wellbeing in students with disabilities at university. This group forms part of a vulnerable sector that needs to be heard for us to understand what factors improve their wellbeing while managing their unique disabilities (Creswell, 2016). My initial plan changed with the advent of COVID-19 and social distancing as I had an online focus group instead of a face-to-face one as was originally planned. There were many advantages to me using qualitative research in this study. This

approach enabled me to gain an in-depth understanding of the phenomenon without attempting to manipulate it (Blanche et al., 2006). It also broadened my understanding of the research topic by looking at the participants' experiences and perspectives. These insights then generated new themes and increased my understanding of the experience of disability because of the multiple perspectives and co-construction that I became privy to (Pugach, 2001). The advantage of this approach is that disabilities are also socially constructed, and it thus gave me an insight into the various encounters and interpretations of the participants depending on their unique outlook, experiences, beliefs, and culture. I therefore developed a complex detailed picture of the research problem by identifying the various factors and their interactions, and allowing for multiple perspectives, thereby gaining a holistic picture (Creswell & Creswell, 2018).

I am aware of the various limitations of qualitative research. It could be seen as exploratory because the statements cannot be substantiated, and may also be viewed as biased since the researcher is the primary data collection tool (Denzin & Lincoln, 2017). The fundamental disadvantage of qualitative methods is that their results cannot be extrapolated to larger populations with the same level of accuracy as quantitative analysis. This is because the research findings are not examined to see if they are statistically significant or the result of chance (Almeida et al., 2017). I modelled reflexivity, or self-awareness, in my thinking about qualitative research to counter any bias, focusing on exacting and comprehensive qualitative data collection and exploration. My ultimate written report thus includes the participants' voices, my introspection in my research role, and an explanation and analysis of the issue. This contributes to expanding the literature, as well as extending an invitation to others to take action.

3.4 RESEARCH DESIGN AND APPROACH

A research design is similar to a blueprint or map used to find solutions to challenges in research (Denzin & Lincoln, 2017). The goal of a research design, according to Edmonds and Kennedy (2013), is to produce a conceptual framework to enable the researcher to employ scientific principles of inquiry when addressing the research questions. Various designs are utilised that are contingent on the purpose and type of study and research questions. Each design comprises its own techniques and views. Additionally, a qualitative research design is determined by the researcher's decisions and activities, rather than by established rules or step-by-step directions (Creswell & Creswell, 2018).

The process in qualitative research starts with the researcher's specific beliefs leading up to and before opting to do a qualitative study. Phenomenology is a graphic qualitative study of human encounters that investigates what is experienced and how it is experienced. Phenomenology is a type of qualitative research that centres on the lived experiences of the individual in their world (Neubauer et al., 2019). It aims to comprehend the phenomenon's spirit and inherent characteristics (Merriam & Tisdell, 2016). A phenomenological paradigm furthermore aims to find an insider perspective from context-specific experience (Cohen et al., 2007). It documents the significance of numerous people's real-life experiences regarding a conception or occurrence, viewing it as a meaning-making inquiry. In phenomenology, all judgements about what is real are suspended until a more certain base is found because the reality of an object is only recognised within the context of the individual qualities' significance based on their experience (Creswell, 2014).

I chose phenomenology as the meta-theoretical approach in this study as the objective was to gain insight into the participants' actual experience and meaning-making, while striving to understand a social phenomenon, occurrence or concept (factors that support wellbeing). The participants in this interpretive project represent a marginalised group. Phenomenology enabled me to understand my participants shared experiences of the factors supporting wellbeing, and an enhanced grasp of the attributes of this phenomenon. I gathered data from students with disabilities at a university who had experienced wellbeing and created a comprehensive description of the heart of the interaction for all of them. This description included 'what' they saw and 'how' they saw it (Creswell, 2014). I used hermeneutic or interpretive phenomenology as this is built on the viewpoint that the understanding of individuals cannot transpire without considering their circumstances. This includes the culture and social context in which they live, which need to be interpreted from their viewpoint. In this study, I described the phenomenon of wellbeing while at the same time preserving a solid link to the central concept, factors supporting wellbeing in students with disabilities, and integrating the various parts of the writing. Phenomenology is viewed as both a description as well as a process of interpretation wherein the researcher interprets the meaning of the participants' experiences (Creswell, 2014). The focus of this study was on investigating factors that support the wellbeing of students with disabilities at university. The design thus allowed me as the researcher to explore the subjective experiences of this phenomenon by the student participants in their lifeworld and context. It further assisted me

to derive meaning from their experiences, leading to an improved understanding of the phenomenon (Forgeard et al., 2011).

3.4.1 Sampling

A 'sample' is a portion of the population intended to be representative and characteristic of the larger population, and must be directly linked to the objective of the research (Gravetter & Forzano, 2009). I used a homogeneous non-probability sample in this study as it allowed me as the researcher to apply the sample's findings to the entire populace (Acharya et al., 2013). A non-probability sample technique was used because the samples were collected in a procedure where the units or participants in the population were not necessarily given equal chances of being included. I understand the drawbacks of non-probability sampling owing to the subjective manner of the sample selection, but it was useful and purposeful due to my limited resources, time and workforce within a study of limited scope (Etikan et al., 2016).

I emailed invitations to random students with disabilities who, at the time of this study, were registered with a Disability Unit at a prominent university in South Africa. I used a purposive sampling technique/judgment sampling as I made purposeful choices in selecting each participant due to them fitting the criteria required to take part in this study. These inclusion criteria were that they had to be a registered student at the university in question, and they had to be a student with a disability. Purposive sampling was used to choose persons with specific characteristics who would provide information of optimum benefit to the research (Etikan et al., 2016). As a result, based on their common experiences relating to the research questions and objectives, I recruited and asked students to participate. I chose my participants with the expectation that each participant would fulfil a purpose by providing rich and distinctive information of value to the study. This enabled me to enhance my depth of understanding of the factors that supported their wellbeing. I obtained the email address of one of the students who consented and had previously participated in studies with the assistance of my supervisor and a member of the Disability Unit. This student then supplied me with the email addresses of his friends and peers whom he thought would be interested in participating, and two other students did the same. The sample of six volunteer participants consented to participate in an online focus group. I thus recruited and invited the students to participate based on their shared experiences of wellbeing. I chose the participants with the expectation that each one would provide rich and distinctive information of value to this

study, enabling a better understanding of the factors that supported their wellbeing. The online focus group format optimised participation.

3.5 DATA COLLECTION AND DOCUMENTATION

Data collection is the primary and most important step in any research. The objective is to collect information-rich and reliable data for analysis that leads to answers to the research questions. I used a focus group interview as my primary source of data collection since I regard my ability to facilitate group discussions as a personal strength. I was also of the view that it would provide a diversity of viewpoints. The participants had to provide in-depth data that may not have been attainable from individual interviews (Nieuwenhuis, 2016, as cited in Maree, 2016). During data collection, I held the participants in high esteem and actively sought to ensure that they were not marginalised through any methodological choices in this study.

3.5.1 Focus group interview

The use of focus groups is a data collection technique utilising a group of individuals who are chosen based on shared characteristic/s correlated to the particular phenomenon under investigation. Focus groups are regarded as a form of interviewing, as well as a qualitative method (Greeff, 2005). A good focus group includes the following properties: carefully selected participants interacting in a relaxed setting, directed by an experienced moderator, followed by methodical analysis and reporting. A focus group, when done correctly, produces an accepting atmosphere that facilitates members to thoughtfully answer questions in their own words, and add significance to their responses (Mantsha, 2016). In this study, this group interaction encouraged the participants to find connections to diverse themes through discussions that might not have occurred during individual interviews (Silverman, 2020). These multiple viewpoints thereby provided a more comprehensive understanding and added meaning to the phenomenon of the wellbeing of students with disabilities at university.

A drawback with focus groups is, however, that some participants may be hesitant to contribute. However, in this study, all of the participants contributed actively to the discussion. Judgement and care are salient, therefore I used an audio recorder to ensure that no data was lost in the process (Stewart & Shamdasani, 2014). Listening to the audiotape recordings included listening for voice inflexions, tone, emotions, and so forth (Yin, 2016).

As the moderator of the discussion, I performed a focus group interview with six university students with disabilities in one ninety-minute session, and I recorded the session with their permission. The interview was semi-structured in that I had prepared questions beforehand (see Appendix 3), but it was flexible as we explored the perceptions of the participants concerning the research topic. The participants willingly participated in the study and interacted well within the group. The participants engaged and were responsive to the open-ended questions. The audio recordings made were used for this study only, and will not be made available to any other person or organisations that are not involved in this study, with the exception of my supervisor. I transcribed the data verbatim and then used the transcripts to conduct a thematic analysis of the results. I used a password to protect my work, and made electronic copies to prevent their loss (Vaismoradi et al., 2016).

3.6 RESEARCH PROCESS

I approached the Ethics Committee of the Faculty of Education for approval of this project before commencing the research. After approval was granted, I sent out invitations with consent letters to students with disabilities who were registered at the university from which the sample was taken. Their participation was completely voluntary, and the ethics procedures of the study were explained to them in the consent letter. As indicated, I arranged an online focus group under the timeframe allocated to the study. The focus group occurred in the third quarter (2nd semester) of the year.

Focus groups create the opportunity for participants who share a similar background/characteristic, which in this case was a disability, to deliberate meaningfully about the relevant phenomenon under study. In this instance, this phenomenon was the factors that support wellbeing for students with disabilities at university. The skill of grasping the participants' viewpoints by heeding the conversations attentively make a focus group especially suitable for hearing from marginalised groups whose voices may be muffled within the larger society (Maree, 2007). I chose a six-person focus group as I wanted to focus on the specific topic of wellbeing in their experiences at university. I aimed to gain rich, descriptive data to gain a deeper understanding of the factors that influenced their wellbeing at the university.

I used a semi-structured focus group interview method whereby I initiated the discussion with group rules and facts around the phenomenon of wellbeing, serving as a facilitator who

guided the discussion with open-ended questions. My role as facilitator enabled me to assist the less dominant participants to voice their perspectives, gaining authentic rich data to explore, and adding value to the study. I centred on the questions, discussion and responses between the participants and myself. I also posed open-ended questions to the participants in order to steer the conversation in a direction that would generate data to answer the research questions, then I focused on their responses to guide the ensuing discussion. A facilitator needs to guide the focus group through relevant questions connected to the research topic to yield relevant data for interpretation purposes (Beukenhorst & Kerssemakers, 2012). In this study, the discussion focused on factors that supported their wellbeing at university. I employed gentle probing as a means of drawing out the participants to gain their unique perspectives. In focus group discussions, participants may feel free to say what they think, think aloud, debate counter-argue with others, and change their opinions as the discussion progresses, as in everyday life (Lauri, 2019). This is an advantage of focus groups as they encourage meaning-making, elicit new thoughts and ideas, and allow the participants to build on these ideas (Nieuwenhuis, 2016), as was found in this study.

The data were collected online through a voice recording of the focus group interview, observations, and documentation of the discussion to facilitate analysis. This allowed me to focus on the interview's conversation and dynamics. My observations included listening for voice inflexions, tone, and emotions in the group interactions. Facilitating was done without bias by bracketing my assumptions. I also perused the data thoroughly so that the data informed me about the ways in which the phenomenon was presenting, instead of following my preconceptions (Mack, 2010). The recordings were then transcribed verbatim for analysis.

3.6.1 Site of study

Because of the restrictions due to the COVID-19 pandemic at the time of the study, the study was conducted online. The session was scheduled on Zoom, which is a free platform that was accessible to all the participants. It occurred at a scheduled date and time convenient for everyone, and had a duration of 90 minutes. Everyone logged on and attended the session from their private domains with their audio on but with the video setting off. This entailed that the participants were separated and each in their private domain, and they were able to hear and respond to each other, but not see each other due to personal physical disabilities.

3.6.2 Participants

There were six participants in the focus group. At the time of the study, all of the students were enrolled at a prominent university in South Africa. There were two males and four females. Three of the participants were from Gauteng, two were from Mpumalanga, and one was from Limpopo. Three students were undergraduate students, while two were Master's degree students, and one was an Honour's degree student.

3.7 DATA ANALYSIS AND INTERPRETATION

Data analysis is the procedure of preparing the data, analysing and understanding it, and then organising and summarising it. Interpretation is the procedure of constructing meaning based on the collected data (Merriam & Tisdell, 2016). I carried out an analysis of the information gathered in the focus group by using qualitative thematic content analysis. According to Terry et al. (2017), the technique of thematic analysis is used for the recognition, analysis, and reporting of patterns of meaning and themes that emerge from the data. I prepared the data by transcribing the focus group interview. I made copies of these and started my systematic analysis by immersing myself in the data to get a feel for it. This procedure enabled me to progress to the in-depth analysis of the data. According to Creswell and Poth (2018), data analysis entails preparing and analysing the data, understanding, representing and then constructing meaning from the data. This immersion thus enabled me to get to the heart of the data, develop my initial ideas, and prioritise which data would be optimum in enabling me to address the purpose of the research and answer the research questions. These questions pertained to factors supporting the wellbeing of students with disabilities at university. I aimed to achieve an in-depth account of the perceptions of the participants on these factors.

Thematic content analysis was considered suitable for this study as it allows the identification, analysis, and reporting of themes (Castleberry & Nolen, 2018). A theme includes vital specific patterns found in the data (Maguire & Delahunt, 2017). In this study, this was a recursive process as I found that analysis led to interpretation, then to analysis, and so forth. The phases that I included incorporated preparation and organisation of the data, initial immersion, coding, categorising, theming, as well as interpretation of the data (Leavy, 2017). This entailed reading, transcribing, and identifying sections of data relevant to the

study. Thereafter, I coded, took notes, constructed categories, and formed themes (Creswell & Creswell, 2018).

I analysed the data by identifying themes or patterns in the data, then coding it. This is a procedure of clarifying the data and thus making meaning from it. The total data analysis procedure began with identifying pieces of data that were responsive to the research objectives. This required a transition from concrete data to abstract conceptions. My analysis method was inductive at first as I looked at bits and pieces of data, and derived tentative categories from them. Initially, I also moved between description and interpretation, and between inductive and deductive reasoning (Merriam & Tisdell, 2016). I also highlighted phrases and paragraphs related to potential themes. Then, in order to uncover significance and answer the research questions on wellbeing, I categorised the findings into categories or themes that cut across the data. As I progressed, I used more deductive strategies in my search for evidence in supporting my final categories or themes (Creswell & Creswell, 2018). The criteria that I implemented to identify categories or themes entailed that the categories be exhaustive, mutually exclusive, sensitising, conceptually congruent, as sensitive to the data as possible, as well as responsive to the purpose of the research. I revised and defined themes and sub-themes by tabulating them, thus enabling interpretation and meaning-making through this emergent process. This process enabled a deeper understanding of the meanings of the discursive data of the participants and the phenomenon of wellbeing in the participants (Silverman, 2020). The advantage of this approach is that it provided a contextual interpretative account of practices and wellbeing directly through quotations from the focus group. The limitations, however, within this rich data-base were trying to stay focused, and not diverting from the purpose of the study (Silverman, 2020).

3.8 QUALITY CRITERIA

I strove to obtain rigour in this study by adhering to the quality criteria that corresponded to qualitative research as the criteria differ in qualitative and quantitative research. The main criterion in qualitative research is ensuring trustworthiness. Trustworthiness assists the researcher to confirm that it is a worthy and justified study, conducted methodically and legitimately to produce credible and meaningful results (Nowell et al., 2017). According to Tracy (2010), a worthy topic, rich rigour, sincerity, credibility, resonance, major contribution, ethics, and meaningful coherence characterise high quality qualitative methodological research. Guba and Lincoln (2005) created strict quality criteria in qualitative research to

enhance trustworthiness. These five quality criteria, which I used in this study to obtain rigour, are credibility, dependability, transferability, confirmability and authenticity (Creswell & Poth, 2016). I will discuss these criteria individually in the following subsections.

3.8.1 Credibility

Credibility alludes to how well the data and research processes address the research problem, and if the findings would be accepted by other researchers after a critical review (Noble & Smith, 2015). According to Denzin and Lincoln (2017), the credibility of the research findings is determined by whether they offer a credible conceptual interpretation of the data derived from the participants' original data. Hitge (2015) explains that a crucial aim of qualitative research is to ensure that the findings reflect the true reality of the participants' lives.

To establish credibility, I aligned the research questions with the appropriate methods, which incorporated my research design (phenomenological), my research methods, and the theoretical underpinning of this study (Nieuwenhuis, 2016). To increase the study's credibility, I justified the study's focus, setting, participant selection, and data collection method. To ensure authenticity, the data were meticulously transcribed verbatim to ensure that all of the discussions and remarks from the focus group session were fully and accurately recorded. Furthermore, the participants' reflections and wellbeing experiences are quoted verbatim in the findings section in Chapter 4 to enhance the description of their experiences, and the credibility of the data. Furthermore, throughout the focus group interview, credibility was strengthened by using clarifying and summarising, as well as reading and re-reading the transcripts. I also employed member checking by allowing the participants to review a summary of the themes identified in this study. The participants agreed that the themes were a true reflection of what they experienced and had discussed during the data collection process. I created a detailed audit trail where I developed codes and categories, re-examined the data, and checked interpretations against the data to gain the intended depth of insight and to develop themes. I was transparent in the process of coding and thus incorporated a trail of evidence, which is evident in the emerging themes and categories as the integrated findings developed after the research method and questions were aligned with a well-defined research design (Nieuwenhuis, 2016).

3.8.2 Transferability

The degree to which a detailed understanding of challenges may be transferred to other contexts or groups in terms of context, culture, participant selection and characteristics, data collection, and analysis is referred to as transferability (Bengtsson, 2016). According to Cope (2014), a study will meet this criterion if other individuals who are not involved in the study find the results meaningful, and readers can associate the results with their own experiences. In this study, the participants' wellbeing experiences are documented in detail in Chapter 4 using verbatim quotations to ensure that adequate detail is accessible for the purpose of transferability. The participants' ability to contribute to this specific research was a crucial inclusion criterion for this study, which is another way to ensure transferability (Nicholls, 2009). I aimed to preserve rigor by providing transparent explanations of the research method, including participant selection, context, and characteristics, as well as the data collecting and analytic processes to enable rich descriptions (Bengtsson, 2016). According to Noble and Smith (2015), qualitative research cannot be generalised easily. Thus, a limitation to this study is that the findings cannot be generalised, but this does not mean that it is not transferable. I strove to address this by seeking out the results of other wellbeing studies conducted with students with disabilities, and comparing the findings from those studies with those of this study (Schneider, 2016).

3.8.3 Confirmability

Confirmability suggests that the research data, sources, and research findings are exclusively from the data items, with researcher bias being restricted (Nieuwenhuis, 2016). The conclusions of this study possess confirmability since I include enough participant quotes in Chapter 4, demonstrating that the findings are believable because they are based on data rather than based on the researcher's assumptions. The research report's extensive descriptive data also helps potential readers to assess if the findings can be applied to other situations. Participants from diverse registration groups, ages, and genders who met the criteria were included in the study to achieve this. This study placed a high value on reflexivity, which contributed to the results being confirmable. Furthermore, I was always aware of my prejudices, assumptions, and ideas, and I tried to avoid them as much as possible so that the evidence could speak for itself (Hitge, 2015), while employing a research journal to provide an audit trail. The findings of this study can be trusted based on the reasons discussed in this section.

3.8.4 Authenticity

Authenticity is the capacity and degree to which the researcher truly articulates the feelings and emotions attached to the participants' experiences (Polit & Beck, 2014). It also refers to how the conduct and appraisal of the research are considered genuine and credible, thus defining the subject and objectively adding to existing knowledge (Mertens, 2014). I ascertained that this study would be authentic and neutral by reflecting the perceptions of the participants through actual verbatim quotations combined with thick and detailed descriptions of their viewpoints in Chapter 4, which created a basis for meaning. Thereafter, I finally concluded with a carefully constructed and objective report (Elo & Kyngäs, 2008). I also employed member checking to validate the identified themes with the participants.

The above criteria are the foundations of trustworthiness in qualitative research. However, additional facets, such as ethics, are present and may affect the integrity and usefulness of a study (Connelly, 2016), which will thus be discussed below.

3.9 ETHICAL CONSIDERATIONS

Ethics refers to the norms and standards that are used to differentiate between admissible and inadmissible behaviour (Hoffman, 2013). Ethical principles serve as norms and a foundation for each researcher to examine their actions, and they should be ingrained in the researcher's mentality (De Vos at al., 2011). Researchers' ethical practices recognise the relevance of their lens' subjectivity, acknowledge their powerful position in the research, and admit that the participants and the researcher, in co-constructing data, are the genuine owners of the data obtained. The concepts of ethical responsibility in research are critical in directing, meeting, and preserving the rights of participants (Creswell & Creswell, 2018).

During this study, I strove to adopt an ethical viewpoint and ethical protocols that incorporated deliberating about ethical matters, and determining the best method to honour and protect the participants in this study while preserving the criteria for committed scholarship (Josselson, 2007). I endeavoured to adhere to ethical protocols and considerations, and continuously considered them in the planning of all aspects of this study. Prior to commencing this research project, I submitted my research ideas to the Ethics Committee of the Faculty of Education at the University of Pretoria in order to obtain ethical approval.

There should be a relationship of trust between the participants and the researcher (Athanasou et al., 2012). The participants in this study were university students with disabilities. According to Ramos (1989, as cited in Orb et al., 2001), ethical problems that may affect qualitative studies, which I was cognisant of, are the relationship between the participants and the researcher, the researcher's subjective interpretations of the data, and the design itself. I thus included the following ethical values, which I will expand on below: informed consent, voluntary participation, confidentiality and privacy, beneficence and non-maleficence, anonymity, and respect and caring.

3.9.1 Informed consent and voluntary participation

Informed consent denotes that the selected participants are provided with all the requisite information allowing them to make an educated decision before participating in research. Voluntary informed consent means that the participants agree to participate without feeling coerced. In terms of informed consent, I used the principles of autonomy and respect for the dignity of the individual. The protection of individual confidentiality, as well as the confidentiality of the institution, is a vital practical expression of this principle (Blanche et al., 2006).

I sent the participants an email inviting them to take part in the study. The participants were told that the study was part of a larger investigation (Eloff, 2021a, 2021b; Eloff & Graham, 2020; Eloff et al., 2021), and were given thorough information about the study's purpose and process. This included my contact details and those of the relevant lecturer in charge of the broader study to clarify any aspects of the study if needed. I advised them that they had the right to refuse to participate in the study at any point during the procedure. I also assured them of confidentiality, privacy, and anonymity as their actual names would not be used in the data collection or reporting. Participation was thus voluntary and the participants were allowed to clarify any concerns before consenting to participate. The consent form (Appendix 1) was included in the email and included information on voluntary participation, the right to withdraw at any time, assurances of confidentiality, anonymity, protection from harm, risks and benefits, the names of relevant people including mine, and access to the findings. This complies with South African ethical and legal norms, including the Protection of Personal Information Act (2013) and the Ethics Committee of the University of Pretoria's ethical principles (Athanasou et al., 2012). The signed form was returned before the focus group occurred. At the commencement of the focus group, consent was ascertained from the

participants for the recording of the session to ensure an authentic verbatim transcription for analysis purposes.

3.9.2 Right to privacy, anonymity, and confidentiality

Anonymity refers to the character of an individual that needs to be protected, whereas confidentiality refers to the data collected from the research participants (Du Toit & Mouton, 2013). The ethical principle of privacy integrates the principle of anonymity and confidentiality. According to the Health Professions Act 56 of 1974 (Department of Health, 2011), as well as the Ethics Guidelines of the University of Pretoria, I am obliged to keep the information obtained in this research confidential, and may not reveal the information without the written informed consent of the participants. This thus entails not disclosing any identifying information, protecting the participants' privacy and anonymity.

Confidentiality was addressed with the participants during my research planning as I was aware of their vulnerable status as students with disabilities, and the need to protect their identities and protect them from negative consequences. I thus assigned participant numbers 1-6 to the participants in the transcription to ensure anonymity. I further did not disclose my findings in any manner that would reveal the identity of the participants (McMillan & Schumacher, 2014). I adhered to the ethical principle of privacy by managing the obtained information with sensitivity and confidentiality (Leedy & Ormrod, 2013). The principle of confidentiality was further extended to member associations and research organisations who have gained access to the information (Steenkamp, 2021) as the data sources have been handled confidentially and will be securely stored for a period of 15 years in the archives of the Department of Educational Psychology at the University of Pretoria (Maree, 2016).

3.9.3 Respect and caring

The principle of respect for others is generally accepted in society as an obligation that we have towards each other (Steenkamp, 2021). In qualitative research ethics, the researcher should display caring and fairness, as well as morality in thought, actions and personal principles (McMillan & Schumacher, 2014). Research encompasses many aspects and techniques, however, throughout the process, respect is a fundamental ethical guideline. The principle of respect for humans prevents participants from being exploited since they are valued as individuals rather than as a source of fresh knowledge (Greaney et al., 2012).

I have strived to show respect, care and empathy for the participants in my research process, in the focus group discussion, as well as in my written findings (Josselson, 2007). I did this by treating everyone fairly and equally, and I demonstrated respect for the participants' rights, dignity, and diversity by being aware of my social responsibility to serve the public good by reflecting the principle of beneficence (Franzosi, 2004). I demonstrated respect by listening and accepting the participants' perspectives, and valuing their contributions. I showed caring by acknowledging and emphasising the participants' rights and welfare throughout the study. This was also established by acknowledging their right to having an audio recording only due to the fact that some of the participants had visual disabilities.

3.9.4 Beneficence and non-maleficence

Non-maleficence substitutes the autonomy principle. It expects the researcher to ensure that the research participants do not experience any harm directly or indirectly as an outcome of the research. Participants need to be protected from physical, psychological, and emotional harm (Strydom, 2005). I engaged the principle of non-maleficence, implying that my research was not harmful to the participants in this study. I ensured that the participants' identities remained confidential and that the information from the interviews was safe and confidential, and will not be used for other purposes than for this project.

Beneficence compels the researcher to endeavour to enhance the advantages extended by the research to the participants. The benefits must be direct, such as easier access to health facilities, enhanced skills and improved knowledge of the topic in question, for example (Allen, 2017; Pieper & Thomson, 2016). In this study, the participants their experiences and, through their interaction, gained new knowledge and created new meanings regarding the factors that support their wellbeing.

Justice requires that participants be treated with equity and fairness during all stages of the research. This also applies to the fair selection of participants by the researcher. Justice also requires that the researcher be responsible for the provision of support and care to participants who may become distressed or harmed by a study. Justice was shown to the participants in this research project as they were treated with fairness because everyone had equal opportunities to voice their perceptions and opportunities, and participation was voluntary. I recognised and was empathetic to the status, position, and specific needs of the participants while considering that they were students with disabilities who form part of a vulnerable

population. I had information ready if further referrals to student support services were needed in the case of emotional responses being elicited from the focus group discussions.

3.10 MY ROLE AS A RESEARCHER

In my capacity as a qualitative researcher, I acknowledged the necessity of self-awareness and reflexivity in my role while proceeding with the collection, analysis, and interpretation of the data. I was also cognisant of the preconceptions that I brought to the study (Korstjens & Moser, 2018). As a researcher, I fulfilled many roles simultaneously. I am a psychologist in training, and during this period was a data capturer, data analyst, postgraduate student, transcriber, literature reviewer, reflective researcher, moderator and facilitator in the focus group, as well as an observer here and throughout the process. I needed to employ effective facilitation skills and an awareness of group dynamics to ensure effective group interaction, and to sustain focus on the topic.

Before commencing my studies, I had a daughter who became disabled through her battle with cancer while she was studying. She resumed her studies after two years of convalescence and rehabilitation, thereafter becoming a student with disabilities at university, thus causing her to be part of this marginalised group of students. This provided further incentive for me, as a mother first, and then as a researcher second to be instrumental in giving this group of students a voice to share their experiences and delve into factors that would support their wellbeing. This background enabled deeper insights into the difficulties and support structures experienced by the participants. I also used reflective conversations to ensure trustworthiness in the study.

3.11 CONCLUSION

In this chapter, I explained the research strategy and methods, as well as the foundations for my methodological choices. I also detailed the strategies that I employed in the data collection, as well as the methods I used to analyse the data. I further included a description of the quality criteria that were used and the ethical considerations that I employed in conducting this research. In the following chapter, I will present a thematic analysis of the collected data, focusing on the themes and sub-themes that arose from the analysis thereof.

CHAPTER 4 FINDINGS OF THE STUDY

4.1 INTRODUCTION

In this chapter, I will present the results of the research based on the themes and sub-themes that emerged from the thematic analysis (see Chapter 3, Section 6) of the data that was generated from the focus group discussion. I outline these themes, sub-themes and categories. These themes are supported by statements made by the participants in the focus group discussion. I will also relate the findings to the background of current literature in this field. Even though the study focused on factors that support wellbeing, in-depth conversations on this predominantly elicited a discussion on barriers to wellbeing and factors that *do not* support the wellbeing of the students with disabilities in this study. The findings thus include the participants' perceptions of both factors that support their wellbeing, as well as those that they perceived as restraining or impeding their wellbeing. I therefore included both in the themes created. All quotes are written in italics to indicate that these are the direct words of the participants.

4.2 PARTICIPANTS

The research was carried out at a prominent, public, metropolitan university in South Africa. The university was established in 1908 and comprises seven campuses. It has grown to serve approximately 50,000 students of which many of these students are undergraduates (Eloff et al., 2021). The participants in this study where those with disabilities who formed part of a minority group at the university. These students were involved in various aspects of identity exploration and development at the university. Directing their affinity to the construct of disability is simply one aspect of a much larger process as their disability is regarded as the only aspect of their identity in this study.

Table 4.1: Participants' biographical data

Participants	Disabilities	Gender	Level of study
Participant 1	Visually impaired.	Female	Honours
Participant 2	Blind.	Female	2nd-year undergraduate

Participants	Disabilities	Gender	Level of study
Participant 3	Physical disability – wheelchair.	Female	Masters
Participant 4	Muscular dystrophy – wheelchair.	Female	Honours
Participant 5	Partially sighted with albinism.	Male	Final year undergraduate
Participant 6	Blind.	Male	Masters

4.3 RESEARCH FINDINGS AND KEY THEMES

The results that I identified in my thematic analysis are discussed in this chapter. I identified three main themes and sub-themes in my analysis, and I present the findings utilising verbatim quotes to support these. In some instances, I have utilised direct quotes to illustrate more than one theme in order to provide nuanced understandings of the phenomenon. The topics and sub-themes of this study are summarised in Table 4.2. In conclusion, I discuss the findings of the study by correlating the results to current literature.

Table 4.2: Overview of themes and sub-themes

Themes	Subthemes
Theme1: Negotiating disability.	1.1 Disclosure.
	1.2 Disability unit.
	1.3 Accessibility.
Theme 2: Negotiating online learning.	2.1 Technology.
	2.2 Lecturer support

Themes	Subthemes
	2.3 Disability literacy.
Theme 3:	3.1 Leisure activities.
Amplifying self-care and nurturing.	3.2 Nurturing relationships.
	3.3 Diminished sports activities.

The following is a discussion of the themes found in this study. The participants were asked to give their perspectives on the numerous elements that contributed to their wellbeing, and the data analysis revealed the following themes.

4.3.1 Theme 1: negotiating disability

Negotiating disability is a continuous process of executing and negotiating disability awareness and perceptibility in a myriad of contexts and settings. The consequences and implications, risks and benefits vary depending on these settings, context, and also disability awareness, all of which impact the wellbeing of students with disabilities (Kerschbaum et al, 2017).

4.3.1.1 Disclosure

Disability disclosure is experienced and dealt with differently by individual students, and it impacts students' identity and vulnerability. Societal attitudes towards disability are affected by social and cultural orientations. Students at the university in this study had the option of disclosing a disability either upon entrance or afterwards, depending on whether or not they discovered a condition for the first time, or became aware of impairment in their time at university. At the time of the study, all of the participants were members of the university's Disabilities Unit. Pre-COVID, there was additional support available, but with the advent of COVID-19 and online learning, vulnerability has increased, and these are some of the ways in which it presents:

> ➢ *I've had to disclose my disability instead of someone just seeing that I'm disabled, which has often been awkward (P2, L258-259).*

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> *[N]ot everyone with a disability is as confident about it, you know, they are still trying to figure out it themselves (P1, L488-490).*

This was echoed by Participant 6 as the participants expressed their difficulty in revealing their disability status themselves.

> *[I]f you're not physically in class, and you're not physically with your lecturer, you can't explain your disability as well... (P6, L330-331).*

Students were affected negatively when a lecturer disclosed their disability for them. In these instances, students felt that the lecturers were indiscreet and tactless. They also felt that they were being placed in the spotlight. This resulted in these students having negative feelings. The following excerpts illustrate this:

> *And if I haven't done it, and a lecturer has done it on my behalf, it's even worse (P2, L259-260).*

The students felt that it was unnecessary to announce their disability, even when it was uncalled for. In this regard, they wanted to avoid unnecessary opportunities for potential social stigma and labelling:

> *...because I think most lectures won't know exactly how to approach it, and then they will announce the disability to the rest of the class. And I feel like that's unnecessary at times (P3, L480-482).*
> *...the lecturer literally just like, announces to the whole class like, hey, look, here's Peter, he's blind. What? (Everyone laughs) I think the average person doesn't like being put on the spot like that (P6, L495-497).*

The students disclosed their disability to the Disability Unit as their first contact point for support, and to minimise the impact of their disability on their studies. The following sub-theme focuses on their perceptions of the Disability Unit.

4.3.1.2 The Disability Unit

The Disability Unit at the study site provides specialised assistance to students with disabilities and plays a critical role in assisting students with disabilities in their participation in, and smooth integration into their university years. Disability units at universities typically facilitate students with disabilities' access to, and integration into mainstream education (Bell,

2011). The students in this study expressed their appreciation of the Disability Unit and welcomed the support and accommodations received, as well as the assistive devices at their disposal:

> *I also find the disability unit to be very helpful. Especially according to my needs, um. I feel like they have been very accommodative (P2, L 950-951).*
> *… how to give me extra time, things like that. So, it was necessary for me to go to the disability unit (P1, L397-398).*
> *… they do have things like that. They have a braille printer if you do need that, although we don't use that very often actually. But it is there, and they have you know, computers they have screen readers and magnifying software (P6, L966-968).*

They added that they could express their challenges and find solutions at the Disability Unit:

> *[W]here you can go and talk about your challenges or where you can go and seek help (P3, L126-127).*

The Disability Unit was perceived as indispensable and a major role player in attaining their degree:

> *I don't think I would have, no actually, I'm fairly sure I wouldn't have been able, to do my degree without their help (P6, L947-948).*

Support from both the lecturers and the Disability Unit as a team also enhanced their academic performance:

> *… if you have support, for instance, from the disability unit and from the lecturers as well, it becomes easier to adapt and to study well (P3, L123-124).*

However, the data also suggests a lack of communication between the lecturers and the Disability Unit in some instances. The Disability Unit was seen by the students as a vital communication channel, as well as a buffer between the students and the lecturers, but the students were of the opinion that these communication channels should be a shared responsibility, where lecturers also take some of the tasks upon themselves:

> *… yeah, just have a one on one and also trying to get into contact with the disability unit, because they are there for a reason (P1, L490-491).*

> ➤ *... lecturers should know that the disability unit is not just a student thing. Like, it's not just up to us to take advantage of the, like, um advantages that the Disability Unit gives us, but it's also up to them to communicate with the unit to see how they can help. And for lectures to assume that it's all on us because, you know, it's, it's an "us" problem not a" them" problem, quote, unquote, you know, I feel like it's almost irresponsible. And it makes them look worse, honestly. But yeah, I just think, yeah, it shouldn't be seen as optional for them (P2, L935-942).*

The negative aspect of the Disability Unit was highlighted as the ratio of students to staff, which was negatively experienced during busy times such as tests and exams:

> ➤ *I'd say helpful, but definitely understaffed (P2, L953).*
> ➤ *I think that people are they are sometimes a bit overworked, in certain situations, like when you know, for example, during exams, or like, if there are a lot of tests going on (P6, L956-958).*

The Disability Unit has to cater to seven campuses, which caused great inconvenience in this case as the students had to navigate between the campuses and the Disability Unit. This caused accessibility issues and disruptions as the additional travelling time was not negotiated for in the timetable.

> ➤ *I was actually trying to get them to you know, build or whatever a new disability unit on another campus so that you don't have to go from one campus to another because that was really inconvenient (P 1, L388-390).*
> ➤ *…know some of my friends who did study on Main Campus, their lecturers actually organized that they don't have to always write at the disability unit (P1, L395-396).*

4.3.1.3 Accessibility

Accessibility is vital, especially for students with disabilities as it entails that their needs are considered, and that the infrastructure facilities, services, and products are built or modified so that they can be utilised by everyone. The infrastructure at the university must allow for ease of access and mobility on the university grounds as accessibility constitutes a major challenge for this group of students, as confirmed by the data. There was both positive and negative feedback as they appreciated the campus as a place of learning, but felt that it was

lacking accessibility in certain areas, which they viewed as vital to enabling equal academic opportunities for them as a minority group.

They started off by appreciating the campus as a designated space where the purpose is to study:

> *Because if you go into campus in your there, like, in that space where you're supposed to, you know, you're supposed to work now (P6, L310-311).*

However, the students also voiced their difficulties in moving around on the campus grounds because of architectural barriers:

> *It was difficult for him to access the stairs, obviously, with his physical disability, and there are no ramps for wheelchairs. So, yeah, they're not very accommodative for any type of disability actually (P1, L419-422).*

This was especially traumatic when construction was underway as they were unaware due to the fact that they could not see the construction, which resulted in safety hazards:

> *... if you can't see anything, you kind of just learn a route that you kind of memorise. And that's the way you know how to get somewhere. So then one day, there'll randomly just be a construction there. And if you don't really know an alternative way to get there, then it's an issue. Also, sometimes they were not very good with their safety precautions. I mean, I've had where I like kind of fell into a hole where they would literally just like put a cone next to it. And obviously, I can't see the cone, so I just walked past it into the hole (P6, L721-728).*

It was also problematic to attend classes and be punctual when they could not access them due to maintenance issues and people filling and blocking the access paths:

> *...there's also a lift. So, people always use that just for some reason. So, it breaks very often. And when that happens, it's literally impossible for someone in a wheelchair to, you know, attend any of those classes (P6, L756-759).*
> *You measure the time that you take to get to class, but then you have to wait a few minutes. Because these people don't need the lift, but they flood the lifts, they block the corridors, and, and... (P4, L357-359).*

Accessibility or the lack of it to events and sports also created barriers that appeared to be accepted as the norm:

> ➢ *I don't actively participate in, like sports, and or go to like, the university gym, or like anything like that. It's like accessibility is just like, a straightforward issue all the time (P2, L1003-1005).*

Accessibility to accommodations is another important factor that was found, and which was mentioned in the earlier sub-theme of the Disability Unit, as well as the following sub-theme on technology.

4.3.2 Theme 2: negotiating online learning

Negotiating online learning has created many advantages and challenges for students with disabilities. This has especially been the case as they have had to contend with additional challenges that have impacted them in various ways.

4.3.2.1 Technology

Students' lives are significantly influenced by technology, especially impacting students with disabilities as it opens many doors of opportunity. Most importantly, it allowed learning to continue online during COVI-19 times. Technological advances have enabled a variety of software and assistive devices, which have made possible and enhanced the accommodations and learning experience for students with disabilities:

> ➢ *…as a blind student, like, who uses, you know, speech software, it's easy for me to pay attention to two things from two different like, sides of my auditory field (P2, L198-200).*
>
> ➢ *…like physical things up that we can't really see or read… put that online, literally just put it on our websites, then we would be able to read it (P6, L911-913).*
>
> ➢ *…they have a braille printer if you do need that (P6, L966).*
>
> ➢ *…computers, they have screen readers and magnifying software and they have yeah, what do you call those magnifying things that you'd put a paper under it (P6, L968-969).*
>
> ➢ *…it changes the font, and you can also change the colour of the background so if you're like light-sensitive or something (P1, L970-971).*

The participants were thrilled with online learning technology as it enabled them to access classes at the tap of a button without them having to travel to campus and deal with accessibility challenges. Commuting between classes and campuses presented a major challenge for these students, and they expressed their satisfaction at the marvel of technology that circumvented this:

> ➢ *So before, sometimes like, there would be a meeting that would be somewhere that I don't really know the way to get to that area exactly. And, yeah, so I ended up not going. So now it's easy to just like, click on the zoom link, and then they didn't have to physically be able to get to that place. So, that's an advantage (P6, L266-269).*

> ➢ *We don't have to deal with people flooding the elevators, because that was a major thing, especially for physical disabilities, (P4, L356-357).*

This participant reiterated his delight and relief in not commuting.

> ➢ *So definitely just being able to, you know, join anything without actually having to travel there is definitely an upside (P6, L373-374).*

The advantage of not travelling to the Disability Unit at another campus to write exams was a relief as it presented a major challenge to adhere to the lecture schedule when the added commuting between campuses was not accounted for in the lecture schedules:

> ➢ *Whenever I had to write a test or an exam, I had to take the bus from my campus to the main campus. And then I would sometimes miss some of my classes because the bus schedule is different from my classes. I think that is why online is better because everything is in one place. You don't have to rush and miss classes and stuff like that (P1, L379-385).*

Another major advantage found in the data was that the technology created an ease of access, as well as the flexibility of online learning:

> ➢ *You are able to access your learning material on your laptop and you are able to listen to your lectures while doing whatever you want, you're doing. And you can listen, I just say that the lecture, the lectures are all recorded. So, you can like, go back, if you didn't understand. Because of while we were on campus, we couldn't do that. So, I kind of enjoy the versatility of online (P5, L231-235).*

> ➢ *When they have, like physical things up that we can't really see or read. If they could just like put that online, like, literally just put it on our websites, then we would be able to read it (P6, L 911-913).*

This also resulted in more time for rest and leisure, which was deemed essential to enhancing wellbeing. This is also in line with the PERMA Plus theory, which emphasises these aspects.

> ➢ *Being able to sleep until just before your class. That's also nice (P2, L363).*

Another positive is not needing to worry about the needs of the guide dog for those with sight-related disabilities.

> ➢ *People's, like, lack of knowledge/ lack of consideration for me and my guide dog. I have an entire extra being coming with me (P2, L 439-440).*
>
> ➢ *And I didn't pack food for her, or I did pack food, but where am I going to feed her or I know where to feed her, but where am I going to take her out if she needs to, you know, go outside like or, or are they going to let me in with her. So being at home, it's a lot easier because I don't have that added responsibility (P2, L432-437).*

Alternatively, the participants also voiced the barriers that they were experiencing with this new approach to learning. A top concern was connectivity due to factors like loadshedding and electricity-related challenges that are persistent in the South African context.

> ➢ *Connectivity... downside for me, it is perhaps, connectivity, you know, sometimes the Wi-Fi won't work. And then you can't access your classes quick enough and then you will come in late, and then you miss what they said, or something like that, or load shedding, you know, um… where your class is scheduled at a certain time. And then your load shedding is also scheduled at that time (P1, L325-328).*

They also indicated that additional impact of online classes limited interface and contact with the lecturer:

> ➢ *[T]hey don't have the knowledge, umm, how to assist your specific umm, disability. So, and then when you're doing it virtually, it's difficult to explain that to them (P3, 333-334).*

The university prioritised ways to enhance accessibility of learning for all students at the onset of online learning, but due to sheer student numbers and the remoteness of some students, additional challenges presented:

> *It took time for the university to tell us about the data, we had to find things ourselves, which was very difficult for most of us (P4, L345-346).*

Another barrier that was mentioned was that sometimes their assistive devices, despite their numerous advantages, were not always as effective with the online medium.

> *[I]f I'm sitting in a class, I can listen to a lecturer, and like, type on my laptop, and I don't necessarily have to have my speech going. But if I do need to have it going, I kind of pay attention to my speech with one ear and my lecture with my other ear. But now being online, I kind of have to pay attention to both from the same place. And for me, it's meant that I can't take notes as well as I could before (P2, L198-205).*

> *I personally have a very low attention span. So going back and listening to a lecture, I've really had to suffer and sit through, umm… is not my idea of a good time. It's the reason I didn't record my lectures to begin with (P2, L220-222).*

4.3.2.2 Lecturer support

The attitude of the lecturers at the university impacted the students' learning experience. The participating students experienced a wide range of sensitivity towards their disability amongst their lecturers. Support featured prominently and accordingly as, in the experience of the participants, some lecturers provided thoughtful support, while others exhibited a reluctance to assist them:

> *[S]ome are really nice, some just ignore you or refuse to help, or don't really want you to take their subjects and try to convince you to drop it and others, more, you know, go above and beyond what they need to do, and go out of their way to help you. So, it's yeah, it varies a lot (P6, L455-458).*

> *[W]hen I entered the humanities department, that's when I received a lot of support, social support, academic support (P3, L553-554).*

The students in this study were of the view that the faculty as a whole, and administration in particular, were sometimes not understanding of the level of accommodations they needed.

The students expressed dismay at the ignorance shown regarding the existence of the Disability Unit at the university.

> ➢ *... and you have to be supported to be able to do well, especially if you have a disability and not all lectures understand how to accommodate all disabilities (P1, L94-95).*

> ➢ *And also, reaching out to lecturers feels harder, for some reason (P2, L261-262).*

> ➢ *They're not even understanding when it comes to, for instance, assistive devices (P3, L 564-565).*

> ➢ *But like my lecturers, they just never understood, like, you know, how to accommodate me (P1, L396).*

> ➢ *Like some of them didn't even know there was a Disability Unit, and they didn't even like know how to get my paper to the Disability Unit, like simple, easy stuff like that? They were not clued up at all (P1, L401-403).*

The data indicates that the students had to be proactive and solution focused since they experienced that some lecturers were not keen to give them an appointment, to accommodate them or to provide assistance in resolving problems.

> ➢ *...some lecturers are blatantly ignoring, some don't even care (P5, L502).*

> ➢ *I had lecturers last year, I have a lecturer this year, who are, who remain blissfully unaware, even after you approach them with solutions to academic issues (P2, L522-523).*

> ➢ *[I]t's really hard to get a lecturer to kind of figure out, umm, like to figure out with a lecturer how to kind of accommodate you. And they always expect you to have the answers (P2, L526-528).*

This resulted in difficulties in reaching out to the lecturers for support, except as a last resort:

> ➢ *I will do everything that I can before going to a lecture[r] and saying that I'm struggling, because at this point, I know that they're unlikely to listen to me unless I tell them what to do (P2, L529-531).*

> ➢ *If you're not physically in class, and you're not physically with your lecturer, you can't ... express exactly what you need from them (P3, 330-332).*

Unsupportive relationships with these lecturers also impacted them negatively, and lowered their self-esteem.

> *[I]f you're not supported academically, well, then obviously you feel some emotions and you'll feel like you can't do it, you're doubting yourself. So, I think emotional wellbeing is also important (P1, L99-101).*

The students experienced varying levels of disability literacy amongst their lecturers, as found in the following sub-theme. The students explained that some lecturers seemed to have limited knowledge of the services available at the university to support students with disabilities. Communication with the Disability Unit and disability awareness were perceived as key to resolving the issue:

> *So, the lecturer can also get into contact with the Disability Unit, talk to those people for also a better understanding (P1, L491-493).*
> *Yeah, I feel that communication is the key, you know, if you don't communicate, you won't understand the needs and how to accommodate those needs (P3, L924-925).*

Other participants felt that a short course or a workshop could help bridge the gap, and may create more disability awareness amongst lecturers:

> *I feel like maybe some a course like that should be included in the curriculum before they graduate, something that will make them aware of who they're going to interact with, or who they're going to lecture because this is not only lecturers, teachers in high school, they assume and they are ignorant like everyone in the education not everyone, but like most teachers, lecturers, they're just they don't know what to do when approaching someone with a disability (P5, L512-517).*
> *I feel like that is also a great idea to um, implement workshops to educate lecturers more on how to accommodate students with disabilities, but I think it can also be helpful to other students as well. So that the students in the class understand the disabled students as well (P3, L928-930).*

A few students stated that some lecturers were either unaware of the nature of their disability, the function of the Disability Unit, or the impact of making accommodations on these students' academic potential. This was highlighted in the following data:

> *I actually went to the lecturer, and I said, "I missed this class because I had to take the bus to write my test for another module at the Disability Unit, and the lecturer didn't like, want to help me in that regard. She was just like, she didn't*

> *understand why I had to go to the Disability Unit. She was like, why I just think it comes down to not all lecturers is sensitive to you know, the situations or they just don't understand or, yeah. I think they just need to better that (P1, L574-578).*

> ➢ *[N]ot all lecturers are sensitive to you know, the situations, or they just don't understand or yeah. I think they just need to better that (P3, L589-590).*

4.3.2.3 Disability literacy

Disability literacy entails an awareness of disability etiquette and knowledge of interacting, communicating, and referring to individuals with disabilities. In education, it entails appreciating the most effective way for each student with disabilities to perform, rather than emulating their non-disabled classmates. When students are introduced to a keyboard and recorded texts, they can write and learn more effectively. An optimal approach to disability literacy thus encompasses flexible support structures; assistive, adaptive, and alternative technologies, formats and approaches; and multimodal literacies that enable a student with a disability to function in disability-related ways (Hehir, 2002). Consequently, rather than being a barrier to learning, literacy becomes a learning instrument with a customised approach to learning (Collins & Ferri, 2016).

In the students' experience, disability literacy was experienced in a variety of ways at university through the university's policy, lack of access, ignorance, the attitudes of staff and students, and structural barriers. As stated earlier, the students experienced varying levels of disability literacy amongst their lecturers, as well as limited knowledge of the services available at the university. They did not feel supported by some lecturers because of the lack of disability awareness displayed in accommodating them, as well as these lecturers' insensitive attitude towards these students. This was confirmed by many in the group interview:

> ➢ *I wish that lecturers would be aware of, umm, what's the word, like, kind of like replacements, like replacements, accommodations, that kind of thing (P2, L532-533).*

> ➢ *[M]ost lecturers won't know exactly how to approach it, and then they will announce the disability to the rest of the class (P1, L480-482).*

According to the students' accounts, some instructors and students were unaware of what a disability was, never mind how to accommodate them.

➢ *Because I feel like they are not always… uh… informed well, or they don't have the knowledge, umm, how to assist your specific… umm… disability (P1 L332-333).*

➢ *[Y]ou can just like ask the person or do some research about it, umm, to better support the learner (P1, L477-478).*

➢ *I think some students also don't understand the needs of their classmates (P1, L931).*

Some of the students did not feel comfortable expressing themselves regarding their disability, resulting in feelings of exclusion.

➢ *…another big thing is like umm, the kind of feeling able to express yourself in terms of your disability and not feeling like that like, like, that's um... a taboo thing to talk about, um…You know, look like your life experiences are still valid, because that's the only thing you know, and that's how you kind of, that's how you go through your life (P 2, L132-135).*

They reported this as increasing their academic challenges, and reducing their wellbeing. Moreover, these barriers often presented in terms of physical infrastructure.

➢ *[H]e also had a physical disability, and then this campus doesn't really consist of a lot of lifts, or, like, they just have lots of stairs. So, with him, it was difficult for him to access the stairs, obviously, with his physical disability, and there is no ramps for wheelchairs (P1, L418-421).*

Different methods of support were suggested by the participants in this study. Workshops and the participation of students with disabilities in university policy-making were among the activities suggested. This would allow students to express themselves while also potentially reducing the impact of their disability on their tertiary education.

➢ *…provide some form of workshops that does lead to, to educate people that are not directly involved with a specific disability, such as lecturers in terms of what is it that they can do? What is the kind of support they can provide us to like, to educate them about disability and how they can help us as well (P3, L889-892).*

➢ *…trying a bit more to like, you know, include us in certain things (P6, 896-897).*

➢ *…consideration especially in policymaking and then motivating the employees or like giving them some sort of, like, a test or like a tutorial or like, give a workshop*

> *on how to, especially lecturers on how to work with students having disabilities, and yeah, policymaking as well as should be. People with disabilities should be incorporated in the policies of the university (P5, L902-906).*

- ➢ *...be more flexible when it comes to students with disabilities because they have all these policies in place. That is sometimes inconvenient as well (P4, L980-981).*

- ➢ *...but my wellbeing isn't less important just because I'm a minority. Like it isn't. Yeah. It shouldn't be acknowledged less because there are less of us (P2, L1031-1033).*

- ➢ *if you ask for something, and then they're like, well, you know, basically what she said like... you know, we're a minority, I can't like, you know, do that just for us (P6, L1035-1037).*

- ➢ *...accommodating persons with disabilities should not be a speciality. So, it shouldn't just be with Disability Units that is supposed to be that. But the fact that the university deals with people, they should expect all kinds of people, there and they should be ready to accommodate them (P3, L1043-1047).*

4.4 THEME 3: AMPLIFYING SELF-CARE AND NURTURING

Self-care and nurturing are vital to enhancing wellbeing, and also impact academic achievement. Students take responsibility for their wellbeing when they consciously engage in leisure activities, invest in sound relationships, and manage their stress levels proactively (Eloff, 2019).

4.4.1.1 Leisure activities

For students at university, it is important to schedule time for leisure activities to relieve stress and prevent burnout. The participants in this study shared various activities that assisted them personally in this regard, thereby enhancing their wellbeing. Relaxing and focusing on me-time, thus taking ownership of their wellbeing, featured prominently.

- ➢ *...chill with your friends, or you know, go out to... to have a drink or go eat something, go do something just like to catch up (P6, L838-840).*
- ➢ *And also creating time for myself, making sure that I do my schoolwork, but also take time to rest (P4, L784-785).*
- ➢ *Watch series (P4, L841).*
- ➢ *Yeah, oh, yeah, watch series (P6, L842).*

> *... I'm just like watching series so I feel like that really helps me to um, relax ... and I think socializing is also a very important one for me. I feel like going out to a restaurant have a nice meal. And to celebrate... and do something nice or shopping or whatever (P1, L847-852).*

> *I think everyone watches Netflix or YouTube or something (P6, L856).*

Sleeping was highly valued as a self-care activity in the busy lives of the students. This correlates with the PERMA Plus Theory, which includes optimism, physical activity, nutrition, and sleep as factors of wellbeing.

> *Being able to sleep until just before your class. That's also nice (P2, L363).*

> *Sleeping is a hobby as a student (P1, L 824).*

Hobbies were also noted to enable relaxation and wellbeing. This was enhanced by the university's scheduled recreational activities, which were open to all the students. Many of these activities, however, were cancelled due to COVID-19 lockdown regulations and the national state of emergency.

> *I am very musical. So, I last year, and this year was going to be a part of UP acapella (P2, L898-830).*

> *I do things with music for myself. I also read a lot. So, for me, it's kind of just like escaping from all the demands of my real life. And getting involved in something that actively makes me happy (P2, L832-835).*

4.4.1.2 Nurturing relationships

Relationships form an integral part of wellbeing as humans are social creatures, and it forms part of the PERMA Theory that informs the concept of wellbeing. The data from this study confirms that relationships are vital to students with disabilities as they enhance their wellbeing and engender positive feelings of support.

> *...and you have to be supported to be able to do well, especially if you have a disability (P1, L94-95).*

> *...just how people accommodate you and how you feel supported, I guess (P2, L66-67).*

> *If I have the necessary support that I need to get through the day, then um...I guess that contributes positively to my wellbeing (P4, L113-115).*

> *...wellbeing, basically for me, means how you feel compared to the rest of your community. So, yeah, being socially, emotionally, and um... in other ways, as well (P5, 151-153).*

Positive relationships also impacted their self-concept as they shows an acceptance of, and knowledge about personal strengths and limitations.

> *[T]hink I, um, I got the support from my teachers in the schools. I had like a lot of friends who understood me so I never felt, can I say, I always felt confident with my disability if I can say so (P1, L596-599).*

The data shows that the participants in this study took responsibility for their own wellbeing by being proactive. This is expressed differently in each person, and is vital in nurturing relationships. Nevertheless, the student agency, in terms of supporting their personal wellbeing, is evident:

> *[I]f I do need support from someone like a family member, or a friend, I will just tell them, "Listen, this is what I need. This is the type of support that I need." And then yeah, then they will try to help me wherever they can. I think that for me, personally, is how I can contribute to my own wellbeing (P1, 771-775).*

> *[S]peak up for yourself, if you do stand up for yourself, then you don't really get affected much (P3, L 795-796).*

> *I think, just to be organised, and, umm, you know, implement well, time management skills, umm... so that I don't feel overwhelmed and stressed all the time (P1, L768-771).*

> *[I]t's been surrounded by positive people, and also creating time for myself, making sure that I do my schoolwork, but also take time to rest (P3, L784-785).*

> *But if you speak up for yourself, if you do stand up for yourself, then you don't really get affected much (P3, L795-796).*

> *...taking, like, the initiative to kind of make that better for myself, because if I don't do it, no one's gonna do it for me (P2, L807-808).*

> *...actually, try and fight for what you need and, you know, try to push for it and otherwise you, you might not really end up getting anywhere (P6, 815-816).*

> *...any achievement or accomplishment is very important because it will not only motivate you, but it will also inspire people around you (P1, L631-632).*

> ➤ *…achieved things and accomplished things, gives me a sense of, like, I'm doing well, and I'm doing enough (P2, L647-648).*

Social connections, as well as having friends and acquaintances with similar challenges were specifically voiced as being important, and contributing to experiencing feelings of validation.

> ➤ *...is having, you know, I guess some kind of social connections like, not, you know, being able to make friends or something. You know, not being alone, basically, I think that also contributes to wellbeing at university* (P6, L143-145).
> ➤ *[S]ometimes they just actually just get it from each other, because then I don't know, like you talk to other people, and they'll have similar issues or issues of their own. And I don't know, it kind of helps to know that. It's not just you (P 6, L612-614).*
> ➤ *I feel like from other people who also have disabilities… (P6, L618).*

Relationships were negatively impacted by the advent of COVID-19, especially for new students as they did not get the opportunity to physically meet their peers. This sense of isolation was amplified in those students with visual impairments in this study. This indicates that, in this specific case, the social isolation hindered their wellbeing due to a lack of interaction with people, and an inability to reap the positive benefits thereof.

> ➤ *...like socially, I'm just not, anywhere right now. I don't feel like I'm getting any kind of social gratification. Umm, I don't know people, you know. And I feel like that's also hard. When you can't like, see someone on a group or like someone's WhatsApp status and just reach out to them I don't know, for me, that's hard, (P2, L207-210).*
> ➤ *Like if you didn't make friends before COVID, and you're as early into your university career as I am. You don't really have options right now. Getting to know people, like new people, especially right now is virtually impossible (P2, L291-294).*
> ➤ *I guess the downside, basically, is what other people have said. As well as not being able to interact with people as much as you normally would (P6, L269-271).*
> ➤ *...terrible because I cannot interact with other people and not collaborate with my classmates and so forth (P5, L236-237).*

Another challenge mentioned was the people around these students commuting to work, while they were working virtually, leading to loneliness and a lack of routine, which has a negative effect on wellbeing.

> ➢ *I'm also surrounded by people who are busy going to work, and I'm all by myself most of the time (P1, L298-300).*
> ➢ *Our sleeping patterns got messed up, and also, social life (P4, L348).*
> ➢ *When you can't like, see someone on a group or like someone's WhatsApp status and just reach out to them. I don't know, for me, that's hard (P2, L209-210).*

4.4.1.3 Diminished sports activities

Functional training, physical conditioning, and strength development are all available to students through sports activities and training services. However, students with disabilities have limited use of the leisure and fitness resources and programmes offered. Through adaptive workouts, students with significant physical disabilities can increase their functional capacity, relieve stress, and improve their tolerance of the demands of university life by participating in various sporting activities (Mantsha, 2016). The COVID-19 pandemic impacted everyone, particularly the vulnerable and at risk, including those with disabilities. Access to a wide range of fitness facilities, including swimming pools, gyms, and play areas was halted as a result of these limitations. Reduced physical activity opportunities and provisions are likely to have a significant impact on physical activity and mental health as there is a strong link between the two (Theis et al., 2021).

Sport is indicated as a great stress reliever:

> ➢ *It would help you to relieve that stress. And, you know, I used to love it. And it just made me relax more (P1, L872-873)*

Sports were not pursued by the students due to accessibility factors, and not because of personal dislike of sports, as expressed in the excerpts below.

> ➢ *I used to do like lots of like, sport and cultural things, but yeah not anymore… like acrobats or gym or something like that (P1, L861-862).*
> ➢ *[T]he only reason I think I don't actively participate in, like sports, and or go to like, the university's gym, or like anything like that, is like accessibility is just like, a straightforward issue all the time. There aren't many sports that are made*

accessible, especially for visually impaired people, and if there are, they can, you know, it's like hard to get there (P2, L 1002-1005).

The feeling was expressed that sports were not viable because of the limitations for students with disabilities, which were aggravated by COVID-19:

➢ *[I]f you really think about it, what actual sports are there that we can actually do? (P6, L1015=1016).*

➢ *There's not that many of us, I guess, like, you know, having to have like attention on like separate sports just for the few of us. I guess they aren't worth it for them. (P6,L 1013-1015).*

➢ *[I]t doesn't even necessarily that they're not accommodating you, just that just by the nature of like how the sport works. We can't really do that, you know, compete on with people who can see (P6, L1023-1025).*

➢ *[I]t's just an ongoing issue, or like, going to the gym on my own is hard (P2, L1008).*

4.5 UNIQUE THEMES

This section presents data segments that did not present in multiple ways in the data set, but which still render unique views on the wellbeing of students with disabilities in a tertiary environment. It relates to experiences of isolation, experiences within a home environment, financial concerns, and the role of spirituality.

One student indicated:

➢ *I do like online learning, but I've also realised that it has got some form of an impact when it comes to mental wellbeing because, for instance, I'm unemployed, even though I'm trying to get a job, it's very difficult (P3, L296-298).*

Distractions at home also impacted the students' learning and wellbeing. Additionally, they mentioned that being at home rather than on campus could engender perceptions of being idle and having spare time.

➢ *Another downside is just, you know, being stuck at your home with everyone else is, there's a lot more distraction than there normally would be. Most people work from home now and so on. So, there's constantly like people coming in asking you to do something quickly or wanting to know something (P6, L312-314).*

> *[I]f financially, you're not fine, and you do not have the necessary financial resources, it is difficult to cope in such an environment. So, for instance, you do not have money, to have enough food or to have to come with lunch, such things needed to be impacted because it forces a student… because I'm talking from experience, sometimes you'll have to attend classes without having enough food, so it's very difficult (P3, L163-168).*

Another student also mentioned the role of spirituality in wellbeing. In this regard, spirituality contributes to survival in difficult times (Mutanga, 2015), and impacts the overall wellbeing of the person.

> *[I]t's important. Because if I'm not known, spiritually, definitely, it's going to affect my overall wellbeing because I feel like all different parts of like, all the components of wellbeing must be balanced in order for one too, to, to be well (P3, L877-880).*

4.6 LITERATURE CONTROL

In this section, I relate the identified themes and sub-themes and link them to existing literature. I further indicate prominent parallels and discrepancies between prior studies and the findings, as discussed in the previous section.

4.6.1 Negotiating disability

Higher education brings both challenges and opportunities for those with disabilities. Students with disabilities experience a variety of constraints in negotiating their disability within the tertiary environment. According to the World Health Organization (2011), many persons with disabilities require assistance and support, such as specific services or caregivers, in order to fully participate in society. However, when all stakeholders are involved and working together, complete inclusion to the benefit of the achievement of students with disabilities is feasible (Mutanga & Walker, 2017). This was noted in the students' perceptions in this study where they indicated experiencing challenges in negotiating their disability in terms of varying levels of awareness from other students and lecturers, challenging dynamics regarding the disclosure of disability, the perceived lack of communication between the lecturers and the Disability Unit, and the physical accessibility of facilities in some instances.

4.6.1.1 Disclosure

The disclosure of a disability "is a complex and continuing process that necessitates considerations about who should know, why they should know, how to inform, what to disclose, and when to inform" (Valle et al., 2004, p. 4). At tertiary level, students with disabilities must disclose their condition in order to receive the necessary support and accommodations. This entails that these students must identify themselves as a student with a disability and request accommodations from their professors unlike primary and secondary education where services are provided without the student's self-disclosure (Madaus & Shaw, 2004). When feasible, students with disabilities prefer not to reveal their disability status, and downplay their disability, which obscures other disability-related information, including accommodations-seeking strategies (Barnard-Brak et al., 2010). This is consistent with the current findings as it was discovered that disclosure was challenging for the participants in this study, thus confirming the findings of previous studies (Goode, 2007; Grimes et al., 2017; Mantsha, 2016). According to De Cesarei (2015) self-advocacy skills were correlated to high disclosure rates as well as requests for accommodations. According to Obiozor et al. (2010), one of the main reasons people do not disclose their disability is to avoid being labelled and socially stigmatised. The experience of disability can increase these students' impression of being stigmatised and devalued, resulting in concerns about disclosure lest it cause negativity and a lack of access (Vickerman & Blundell, 2010). The findings in this study correspond with those in the literature as the students participating in this study experienced negative feelings regarding disclosing or having their disabilities disclosed. According to Vickerman and Blundell (2010), students do not declare their status on their university application because they are afraid of not being accepted into the programme of their choice. This was confirmed by other studies, but was not prevalent in this study.

4.6.1.2 Disability units

The Disability Unit at the university where this study was conducted aspires to equitable access and participation of students with disabilities in the academic environment by offering support. Students with disabilities typically get assistance and adjustments from disability units in order to facilitate, support, and maximise their academic potential. Accommodations are an important factor in supporting students' academic success (Kim & Lee, 2016). Adaptive equipment/technology, the provision of materials in alternative print (e.g. Braille, large print, and tape-disk), peer tutoring, taking the test and examinations in a separate room,

having a scribe for the test or having the test read out loud - mostly for students with visual impairment (blind and partially sighted), extended time, and permission to tape-record lectures are only a few of the accommodations available (Mantsha, 2016; Mutanga, 2015). According to the findings of this study, the Disability Unit was seen as indispensable, and the students welcomed the support and accommodations received from the Disability Unit. These findings are echoed by many studies such as those of Matshedisho (2010), Bell (2011), and Seyama et al. (2014), which have also indicated that students felt unwelcome at the university in the absence of support from the Disability Unit, and attributed their adjustment to their Disability Unit. According to Matshedisho (2010), due to the support provided by the Disability Unit, 25% of the students with disabilities in his study felt relaxed and accepted during their transition phase at the university. He also mentioned that the units enable students with disabilities to express their concerns to teachers. These units also advocate for these students, and assist them with daily issues on campus. This proved a challenge in this study due to the advent of COVID-19.

According to the participants in this study, challenges may become prominent at examination and assessment times due to understaffing and financial constraints, which negatively affect operations and support provisions at the Disability Unit. This has been substantiated by findings in other studies (Bell, 2011; Mutanga, 2015; Naidoo, 2010; Tugli et al., 2013), which verified that financial restrictions and a lack of resources lead to understaffing. This especially has an impact on the functioning of disability units, particularly at historically Black colleges and universities. Bell (2011) and Naidoo (2010) concluded that as a result of their lack of autonomy and their affiliation with multiple departments, disability units are limited in the services that they may provide. According to Greyling (2008), disability units are vital in addressing institutional barriers and furnishing individual support, but they should not be viewed as the main source of assistance for students with disabilities. This is supported by the perceptions in this study highlighting effective communication between the various stakeholders.

4.6.1.3 Accessibility

Equal access to higher education is a fundamental right for all students (Moriña, 2017). Depending on the type of disability, students with disabilities have different needs than the general population. Accessibility incorporates equal access to all domains of higher education, including learning and teaching. This incorporates infrastructure, concessions, and

accessible learning environments. These environments should also incorporate adaptable teaching styles and methods, suitable pace and delivery by lecturers to ensure equal opportunities, and that learning be made accessible to all students (Mutanga, 2015).

According to the participants in this study, the physical infrastructure sometimes created barriers and impacted negatively on their wellbeing. Mantsha (2016) and Koca-Ateby et al (2011) have also highlighted the physical barriers in their studies, citing inaccessibility of various buildings, unrepaired lifts or absence of lifts as detrimental. Engelbrecht and de Beer (2014) and Buthelezi (2014) also confirmed accessibility constraints in their findings. In a study conducted at the University of Venda, 28 pupils indicated that their physical surroundings were a significant hindrance to their learning, and more than half found that it resulted in feelings of insecurity or discomfort (Mutanga, 2017). Tugli et al. (2013) suggest that universities need to improve access and support services to enable equal participation in social and academic life. Matshedisho (2010) and Haywood (2014) also reported on students with disabilities' perceptions that the receiving of the requisite accommodations was impacted by the absence of disability awareness in lecturers. Matshedisho (2010) also found that information on notice boards were not accessible to everyone. These findings were supported by the perceptions of the students in this study.

4.6.2 Negotiating online learning

Universities can be narratively rich environments, providing instructional opportunities to comprehend and interrupt potentially dangerous disability narratives, as well as amplifying 'better' disability narratives (Williams et al., 2021). Negotiating online learning is critical for all students, especially those with disabilities, to achieve academic achievement. In this study, this encompassed the support and challenges encountered by the participating students with disabilities in terms of technology and accommodations, lecturers, and disability literacy. Students' self-perceptions and perceptions of how others view them play a critical role in their interactions with both institutional processes and structures. This has significant implications for accessing support through personal disclosure, as well as teaching and learning experiences (Bell et al., 2016). Students should be play an active role in dialogues about enhancing student wellbeing, and bolster the implied continuance of support being made accessible to students (Eloff & Graham, 2020).

4.6.2.1 Technology

Technology is an integral part of our lives that can help students with disabilities achieve scholastic, psychological, and social goals (McNicholl et al., 2021). It is a method of levelling the playing field for these students by facilitating communication, enhancing learning opportunities, as well as integrating students into inclusive settings (Fain, 2019). These are highlighted in many studies (Alant et al., 2006; Newman, 2008), and also confirmed in the data in this study. In the United Nations Convention on the Rights of Persons with Disabilities, assistive technology is recognised as a human right (UNCRPD, 2022). The Individuals with Disabilities Education Act (2004) defines Assistive Technology (AT) as any product or equipment that augments, maintains, or enhances the functional abilities of people with disabilities, regardless of whether it is modified, customised, or purchased commercially off the shelf. Examples of these products include screen readers for the blind or people with reading disabilities, time accommodations, computer mouses and alternative keyboards for people with mobility issues, and assistive software for students with learning disabilities (Burgstahler, 2015). The System for Augmenting Language (SAL) is a system that supplements verbal interaction with graphic symbols and voice output. This is a vital technological tool for Augmentative and Alternative Communication (AAC) users that enhances existing communication efforts through strategies in lieu of natural speech (Alant et al., 2006). For the visually impaired, assistive technology is commonly used for aloud screen reading and voice to text transcription to type essays. According to research, 80% of students who use such accommodations do so because it is advantageous to their academic wellbeing, and crucial to their college performance (Newman et al., 2011). In this study, these technological advantages were also emphasised as significant contributors to the wellbeing of students with disabilities.

Universities began shutting down in-person classrooms in early March 2020, switching instruction and all operational processes to a remote format with the arrival of COVID-19. Students with disabilities may have faced additional challenges as a result of the rapid transition to fully online instruction (Meleo-Erwin et al., 2021). This online learning entailed both positive and negative perceptions as it impacted these students in various ways. Technology promotes online learning advantages that contribute to students with disabilities' wellbeing, including easy accessibility, no commuting, and no structural barriers. However, it also erected barriers to some individuals with disabilities such as Wi-Fi and connectivity

issues, limited training, device limitations, difficulty in reconciling several sources of conflicting information, managing the timeframe in the online examinations, and insufficient support to allow for optimal functioning in some instances. The students also commented on the impact of loadshedding. According to a nuanced assessment of the data, access to Wi-Fi may itself support the wellbeing of students with disabilities. Accordingly, students might be accessing resources that are an indirect contributor to their wellbeing, rather than resources that directly provide psychological support (Eloff, 2021b).

4.6.2.2 Lecturers

Lecturers fulfil a major role in the performance of students at university, especially students with disabilities. Support from lecturers is prioritised in many studies (Mantsha, 2016; Moriña, 2019; Moriña et al., 2020), and incorporates academic, emotional and moral support (Eloff et al., 2021). This is corroborated by the perceptions of the students in this study as they also prioritised support from lecturers as vital to their wellbeing. The provision of optimal student support in a university setting is challenging for both lecturers and students as support from the students' perspective encompasses lecturer support, competence, benevolence, availability, interaction, and the lecturers' attitude towards their work (Eloff et al., 2021).

Research has shown a clear link between staff attitudes and the performance of students with disabilities (Cameron & Nunkoosing, 2012; Moriña et al., 2015). Faculty members appear disturbed by the necessity to accommodate or lack expertise of how to handle such circumstances (Hill, 1996; Lehmann et al., 2000). This was confirmed in this study. Many students expressed concern about their faculty's unfavourable attitudes towards pupils who did not fit the mould. However, an equal proportion of students remarked on professors' positive dispositions and willingness to go out of their way to help all students in their quest for knowledge (Hill, 1996). Faculty and staff, according to Rao (2004), believe they need to learn more about students with disabilities and be schooled to better grasp the procedures for dealing with accommodations and addressing the needs of students with disabilities (Troccoli, 2017). This is supported by the recommendations made by the students in this study to improve communication and interaction between the faculty and students.

According to Crous (2004), 67% of students with disabilities find that their lecturers have a weak understanding of disabilities. In Crous' study, where lecturers appeared unhelpful, the

students generally attributed it to a lack of understanding of disability rather than a refusal to assist them. These perceptions were shared by the students in this study. Mayat and Amosun (2011) and Van Jaarsveldt and Ndeya-Ndereya's (2015) findings also highlight support and understanding challenges with lecturers, as well as mixed reactions where some lecturers were sensitive and responsive and others were perceived as ignorant rather than. This was confirmed by Mutanga (2015), who finds that lecturers' actions are not always deliberate, but mostly occur due to ignorance.

4.6.2.3 Disability literacy

Disability literacy is vital to ensuring equal opportunities in inclusive education as it necessitates disability awareness. Disability literacy further incorporates many aspects including respect and etiquette, accessibility, appropriate signage, and communication methods. An inclusive culture necessitates attitudes and values that respect students as individuals with different learning needs, and who come from varied contexts (McKay & Devlin, 2016). Universities are critical in enhancing people's quality of life but, in spite of their various efforts, studies it has been revealed that that there is still a shortfall with regard to students with disabilities (Moriña et al., 2020).

The findings of this study, as well as the experiences of these students with disabilities, suggest that disability awareness and understanding of disability needs could be enhanced to overcome the barriers to learning, increase disability literacy, and ultimately support the wellbeing of these students. This is confirmed by previous studies (Monagle, 2015; Moriña & Morgado, 2018; Vickerman & Blundell, 2010). There also seems to be a need to create awareness regarding disability in curricula so that university graduates can challenge the barriers that exclude students with disabilities from mainstream activities (Ohajunwa, 2014). According to Cook et al. (2009), without a basic understanding of a student's disability, faculty members may deduce that students with disabilities are striving to take advantage of the system or even 'cheat'. Roux and Burnett (2010) conclude that students with disabilities in higher education should be encouraged to participate in decision-making in order to meet their unique requirements (Mutanga, 2017). This was seconded in the data in this study as the students felt that they should be included in policy making at the university.

For the construction of a supportive system of education and the inclusion of students with disabilities in higher education, collaboration between stakeholders (students with

disabilities, administration, academic staff, and supporting staff) is critical (Mutanga & Walker, 2015). In the findings of this study, communication and workshops among the stakeholders were also seen as a significant and constructive way forward by the students.

According to the South African White Paper on Post-School Education and Training (Department of Higher Education and Training, 2013), despite national efforts to include people with disabilities in policies, higher education continues to manage disability support in a vague manner, separating it from existing transformation and diversity programmes. This policy emphasises the necessity of integrating support personnel, managers, and lecturers in the disability inclusion process, implying a systemic approach to disability inclusion.

4.6.3 Amplifying self-care and nurturing

Nurturing emotional relationships is a crucial primary foundation for both intellectual and social growth. Chataika (2010) investigated the perspectives of students with disabilities in Zimbabwean higher education. She asserts that they continue to confront psychological, institutional, and physical obstacles. Her study also revealed that students can develop coping mechanisms to assist them in achieving their educational objectives. The most crucial criteria in predicting the performance of students with disabilities in higher education were a positive attitude and self-advocacy skills. Similarly, self-determination, or self-belief, was also viewed as a means to succeed. Insights from students with disabilities reveal that early perceptions of disability can be influenced by adults, including parents, educators, general practitioners, and significant social norms (Swart et al., 2004). The data in this study confirms these findings in terms of where the students were proactive in enhancing their wellbeing. It also revealed that they value supportive relationships, social networks, and social relations. The students in this study perceived support as vital to their wellbeing and academic success. Family, social support, and faculty members are considered to be protective elements that aid educational and social inclusion, and facilitate academic experiences (O'Brien et al., 2019; Strnadová et al., 2015, as cited in Moriña et al., 2020).

4.7 CONCLUSION

In Chapter 4, I presented the research findings based on the three main themes that I identified. I assigned themes along with sub-themes and categories that emerged. In discussing the results, I included extracts from the data to support these themes. Furthermore, I contextualised the results against existing literature, emphasising similarities between the

results I gathered, and those reflected in the existing literature. I conclude this study in Chapter 5 by addressing the research questions that I formulated in Chapter 1. I additionally consider the study's potential value, and reflect on its limitations. Finally, I make suggestions for additional training, practice, and research.

CHAPTER 5 CONCLUSIONS AND RECOMMENDATIONS

5.1 INTRODUCTION

In this chapter, I first address the primary research question, followed by a reflection on the secondary research questions that led the study, as described in Chapter 1. I focus on the theories and implications of the study next. Then, in terms of the research design and findings, I discuss the study's potential contributions and limitations. I conclude with recommendations for possible future research.

5.2 OVERVIEW OF THE PRECEDING CHAPTERS

The goal of this study was to investigate university students with disabilities' perceptions of factors that support their wellbeing. The study aimed to provide insight into the factors that support their wellbeing, and what restrains their wellbeing at university. This would also inform us of their perception of the role of the university and various stakeholders in supporting their wellbeing.

In Chapter 1, I described the study's background, defined key concepts, and provided an overview of the rationale for undertaking this study. I explained the study's purpose, and provided the primary research question, as well as two secondary research questions that I formulated to guide the study. I incorporated a brief introduction of the research methodology that directed this study, as well as a short overview of my function as a researcher. I lastly concluded with an outline of the quality criteria and ethical considerations observed in this study.

In Chapter 2, I explored and discussed literature relevant to the wellbeing of students with disabilities at university. This included the support services and structures, as well as the barriers that these students had experiencing at university. I concluded the chapter with a discussion of Seligman's PERMA Theory, and the Systems Theory Concept of Disability as the study's theoretical framework.

In Chapter 3, I described the paradigmatic perspectives and research methodology that I used in this study. I outlined the research design, and described and justified the methods employed in the sampling, data collection, analysis, and interpretation in this study. I

included a discussion of the quality criteria and ethical considerations that I adhered to throughout the study, and concluded with a reflection on my role as a researcher.

In Chapter 4, I presented the data and outcomes of the relevant study. The findings were categorised in terms of the themes and sub-themes that arose following the thematic data analysis process. I included direct quotations from the participants to support the emerging themes, and subsequently discussed these in light of the relevant literature.

5.3 FINDINGS AND CONCLUSIONS

In seeking to answer the primary research question, I will first summarise the key findings (themes) from the study. In the subsequent sections, I will then provide a summary as it pertains to each of the secondary research questions. The components of the PERMA Plus framework will be indicated (bracketed) where relevant.

5.3.1 Primary research question

What factors support the wellbeing of university students with disabilities?

The findings suggest that, in this study, the wellbeing of the university students with disabilities was supported through the following factors: negotiating disability; negotiating online learning; and amplifying self-care and nurturing. This is the heart of the current study, as these factors were recurring themes in the students' perceptions of their own wellbeing, as it impacted students in diverse ways and situations.

According to the findings, support from the university, friends, and family featured prominently in supporting their wellbeing. Social support is vital for everyone, and in this instance, especially for students with disabilities. Environmental support is provided by the university; this includes university policies, infrastructure, lecturers, the Disability Unit, accommodations, and peers. These factors were highlighted in these findings, as well as in those of previous studies (Dyer, 2018; Matshedisho, 2010; Mutanga, 2017; Tugli, 2013; Tugli et al., 2013).

Negotiating disability is a continuous process that students with disabilities face at university. As such, the students perceived this as manifesting in various ways. Disclosure to the Disability Unit unlocked support in a myriad of ways that were beneficial academically as well as socially. The Disability Unit was recognised as the focal support base and a

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prominent source of wellbeing as it introduced varied supportive technological equipment, structures and accommodations. These were crucial in engendering optimal functioning for these students, as well as providing security, as well as academic, emotional and psychological support. This support further included accessible learning materials, while accessibility also manifested in accessible environments - ramps, lifts, walkways, libraries, and lecture rooms. These were vital in supporting wellbeing as they enhanced feelings of security, belonging, and self-determination, and provided students with the opportunity to focus on academics.

Negotiating online learning was another vital support structure as it entailed technology, lecturers, and disability literacy. These are essential tools in enhancing learning as they encompass and enable the learning experience. Technology is adaptable and versatile, therefore assistive technology enables a customised and comfortable learning experience for all students with disabilities. It can be said that assistive technology helps in embracing diversity, and is essential for inclusive education. Lecturers enhance the learning experience as their support, guidance, and encouragement engenders positive feelings, which enhance wellbeing. In a similar vein, disability literacy serves as an acknowledgement and acceptance of these students as it entails knowledge and comprehension of the impact of their disabilities, and the implementation of practical solutions. This thus encompasses varied aspects, including attitudes, infrastructure, attitudes, communication, and accommodations, among others, which enhance these students' quality of life. The participants in this study experienced variance in disability literacy amongst lecturers, as well as inconsistency in the accessibility of infrastructure across all campuses.

Self-care is a requirement for healthy living. Amplifying self-care and nurturing is a priority to function optimally and enhance wellbeing – which was the case for the participants in this study. Having a disability is a distinctive and nuanced experience where active participation in self-care enhances the quality of physical, emotional, and mental health. Thus, discovering meaningful avenues for recreation and leisure is key to the best life outcomes for students with disabilities. Furthermore, leisure activities assist in relieving stress and provide experiences of happiness.

Nurturing relationships is a significant factor in the academic success of students with disabilities at university. Research indicates that students who have a strong support system with their peers and faculty are more likely to be successful and have a more positive social

and academic adjustment in college (Dyer, 2018). Self-advocacy is recognised as essential for meeting one's own needs (Getzel & Thoma, 2008). Positive relationships with compassionate and understanding lecturers, staff, family, and friends supported the wellbeing of the students in this study. These engendered positive feelings such as acceptance, belonging, security, and self-esteem. Additionally, a strong self-concept and self-determination supported their wellbeing as it enabled them to be proactive and deflect negative encounters.

Sports activities have a formative, educational, and inclusive value for everyone, irrespective of gender, age, and presence or absence of any disabilities (Di Palma et al., 2018). It has been shown that practising sports activities has positive effects on developing physical, motor, and functional efficacy of all body parts (Al-Hadabi et al., 2021). The benefits associated with sports are unquestionable since sports practice cultivates physical wellbeing, psychological and emotional control, the development of personality, as well as the development of social relationships (Ascione et al., 2018). The data of this study showed that sports assisted in relieving stress, engendered positive feelings, and enhanced wellbeing in the participating students.

5.3.2 Secondary research question 1

What factors do students with disabilities perceive as improving their wellbeing?

The students with disabilities who participated in this study actively shared their perceptions and experiences. 'Support', in general, featured prominently in the students' perceptions of factors that improve their wellbeing ('positive emotion'). This is a broad term that encompasses support from the university itself - policies, structures, lecturers, the Disability Unit, accommodations, fellow students, friends, and family. Certain factors, such as policies, accommodations, lecturers, structures, fellow students, and attitudes were dually perceived as both positive and negative. This resulted from a variance in disability literacy, funding, and/or policies. The university itself was seen as positive in view of it being a designated place of learning ('meaning'),and was perceived as a steppingstone to academic wellbeing ('achievement'). The Disability Unit was viewed as indispensable and helpful, and was further perceived as a place where these students could discuss their challenges. The students also viewed this unit as a communication channel between themselves and their lecturers ('engagement'). Accommodations received from the unit also served as vital aids to assist them in functioning optimally in the university environment ('achievement'). Technological

tools were also seen as vital, and the students appreciated ('positive emotion') the benefits derived from these as they enhanced the students' functioning and capabilities ('achievement').

Disability literacy improved the students' wellbeing as they felt accepted and comfortable ('positive emotion') in expressing themselves in terms of their disability, thus enhancing their confidence. Social and personal connections ('relationships') improved their wellbeing as these engendered feelings of acceptance ('positive emotions'). Relationships ('relationships') were vital as some lecturers were viewed as a source of support for the students, which was seen as social and academic support. Friends and family ('relationships') also featured prominently, and engendered feelings of acceptance ('positive emotions'), while having friends with similar challenges supported and enhanced their wellbeing. Achievements and accomplishments, including academic, social, personal or sporting achievements ('achievement') were a source of motivation and inspiration for them, as well as the people around them. Prioritising themselves and their needs through time-outs and leisure activities ('engagement'), and having a positive self-concept enhanced wellbeing.

Online learning was perceived as both positive and negative. It was predominantly perceived as advantageous ('engagement'), with the students indicating that it supported wellbeing in certain respects. Accessibility problems were, for instance, resolved due to the absence of commuting and its incumbent stressors. Even though it reduced direct social connections ('relationships'), it created flexibility and more free time.

5.3.3 Secondary research question 2

What factors do students with disabilities perceive as restraining/impeding their wellbeing?

There were several factors that the students viewed as impeding their wellbeing. The adjustment to university life featured prominently. This involved the university as a new environment, followed by online learning, which occurred unexpectedly due to the COVID-19 pandemic, and was an additional adjustment that impacted the students. The location of the Disability Unit was also viewed as detrimental to their wellbeing as it was located on only one campus at a multi-campus university. This geographic challenge resulted in logistical challenges when examinations had to be written and travel times were not accounted for in the timetables of students who had to travel. In the view of the students, understaffing at the

Disability Unit also created many challenges with the provision of services and accommodations.

A lack of disability literacy in others was seen as a major impediment to their wellbeing. Low disability literacy levels (though not assessed specifically as elements in this study), in the participants' experiences in this study, included attitudes, inaccessible infrastructure in some places, and varying institutional support. The students perceived that disability disclosure impacted their wellbeing negatively, irrespective of whether they had disclosed it themselves or it was disclosed by their lecturers. Online learning was experienced negatively in this respect in that in certain respects, it was more difficult to ascertain a disability online in comparison to physical interaction. This necessitated disability disclosures, which had a detrimental impact on these students. Online learning generated connectivity challenges due to power outages and loadshedding. It also negatively impacted communication as they perceived it as challenging to connect with lecturers through an online medium; the effectiveness of some assistive devices was compressed; their social life decreased, leading to isolation. Some lecturers seem to have impacted their wellbeing negatively as the students perceived these lecturers as unsupportive of their needs. They also lamented the seeming lack of communication between the various departments, lecturers, and the Disability Unit. According to the students, there was a general lack of disability awareness and knowledge on ways in which to support students with disabilities, which caused negative feelings among the students. Accessibility was a challenge in some places because of architectural barriers and inconsistent maintenance. The participants were also of the view that accommodations were not implemented, or at least effectively so, due to staff shortages at crucial times such as examination and test times. Exclusion from sporting activities and inaccessible sports venues also impeded wellbeing. Another significant challenge restraining wellbeing for some students was financial deficiencies for basic needs.

5.4 PERMA PLUS, SYSTEMS THEORY, AND THE FINDINGS OF THIS STUDY

The ICF (World Health Organization, 2011) defines disability as the result of interactions between human variables, health conditions (impairments), and environmental variables, rather than as a disease or disorder (Dunn & Wehmeyer, 2021). Professionals have accordingly shifted their focus away from diagnosing impairments and restrictions, and moved toward assessing functional strengths, support needs, and resources to improve human performance (Wehmeyer, 2013). The focus was placed on increasing personal ability,

providing support, and changing surroundings and contexts to promote involvement, and enable people to function well in everyday situations (Thompson et al., 2017). The current study was conducted within this context.

I utilised Seligman's (2011) Wellbeing Theory – the PERMA Model and the PERMA Plus Model, as well as Michailakis' (2003) Systems Theory Concept of Disability as frameworks for this study. The PERMA Model conceptualises wellbeing, and presents a base from which to design interventions to help individuals and systems to achieve optimal academic and psychosocial outcomes (Tansey et al., 2018). The five core constructs of the PERMA framework are: Positive Emotion; Engagement; Relationships; Meaning; and Accomplishment. PERMA Plus, includes: optimism; physical activity; nutrition; and sleep. These constructs have been earmarked in the framework as supporting wellbeing. These constructs are interrelated in their promotion of the totality of wellbeing or happiness of an individual, and cannot function independently (Seligman, 2013).

The Systems Theory Concept of Disability is pertinent and links with the positive psychological approach to wellbeing. The focus here is on the identity of the person, and not on their disability; this therefore implicitly supports wellbeing in students with disabilities. This presents a departure from the medical model in which disability is considered as an individual weakness, to the social model. In the social model, disability is caused as a result of societal and economic factors, and disability is viewed as an individual deficiency (Michailakis, 2003), as well as physical, organisational and attitudinal barriers, as supported by these findings. The two theories that were utilised thus complemented each other as they were built on wellbeing concepts, with a strength-based approach and a systemic frame of reference. In the findings of this study, the core elements of the theory were highlighted through the various themes in the participants' responses, which were seen as supporting wellbeing in various ways. These will be discussed further below.

Positive emotions were pertinent in boosting the wellbeing of these students with disabilities, reducing the stress of contending with the various barriers and challenges encountered at university. Positive emotions also featured prominently in engagement and relationships. Being surrounded by positive people was perceived as vital to support their wellbeing, and engendered a sense of belonging. When the students were engaged in activities, it also induced positive feelings academically and socially. Additionally, meaning and accomplishment provided them with fulfilment and achievement, and accomplishment was

viewed as a source of validation, inspiration, and motivation for others. According to the findings of this study, attaining goals provided a sense of achievement, accomplishment, and motivation. Alternatively, the COVID-19 pandemic impacted participants negatively, resulting in isolation and negative emotions.

The study found qualitative support for the PERMA Plus Model, as evident in the occurrences of all constructs in the data set. The findings demonstrate the interaction and affiliation between the various PERMA constructs, and their relevance in optimising the wellbeing of students with disabilities at university.

5.5 IMPLICATIONS OF THIS STUDY

In seeking to address the implications of the study, I will summarise each section under implications for practice, theory, and further research.

5.5.1 Implications for practice

Inclusive education is an educational approach that contributed to democracy in South Africa, and was not simply another option for education (Engelbrecht et al., 2002). This extended into tertiary education, and the implications for practice are thus significant.

In the early years of democracy, inclusive education was addressed by the report of the National Commission on Special Needs in Education and Training (NCSNET) and the National Committee on Education Support Services (NCESS) in 1997 (Department of Education, 1997). This was followed by the White Paper 6: Special Needs Education, Building an Inclusive Education and Training System (2001). This was based on the Constitution's ideal of freedom and equality, and is viewed as a single system of education committed to ensuring that all individuals are capable of becoming competent citizens in a changing and diverse society. This provided a foundation for systemic change in South Africa's development of inclusive education (Engelbrecht, 2006). This policy was supplemented by numerous other policies highlighting inclusion, such as the White Paper on the Right of Persons with Disabilities (2015) which stated that disability rights awareness training should be incorporated into all educational and training programmes. The policies all prioritise inclusion and the rights of individuals with disabilities, but their practical implementation is still inadequate. The Screening, Identification, Assessment, and Support (SIAS) policy framework evaluates, enables, and supports learners at various levels in

schools and classrooms to maximise their engagement in the learning process. SIAS also supports the execution of Education White Paper 6's core themes. It, however, lacks specificity for students in tertiary environments.

The transition to post-secondary education is a time of transition and adjustment, which creates additional challenges for students with disabilities. Universities, especially disability units, are vital support structures for students with disabilities to enhance their wellbeing. According to the Transformation Managers' Forum (TMF), a partnership with HEDSA was initiated to make university spaces welcoming, progressively accessible, and inclusive institutions. HEDSA suggested that the Strategic Policy Framework on Disability should be prioritised, and disability units should be prioritised by funding to improve service delivery to students with disabilities (Universities South Africa, 2022). It is vital to address the source of the challenges, as outlined above, by prioritising the Strategic Policy framework on disability in practice, which would alleviate challenges and support wellbeing in students with disabilities. The challenge here is to increase learner diversity while providing equitable access to all students, as well as ensuring that all students have a good quality of life (Eloff et al., 2002).

On the basis of the current study, the following suggestions are thus made for **practice** to support the wellbeing of students with disabilities at university:

- Ensure accessible infrastructure across all university campuses.

- Increase disability literacy in staff and students at university; workshops and online courses may be considered.

- Optimise communication between the Disability Unit and all academic departments at the university. A platform for students with disabilities and staff to express their challenges and support could also be introduced.

- Provide opportunities for accommodations for students with disabilities during tests and examinations; including options to take tests and examinations on all campuses.

- Utilise the expertise of educational psychologists in supporting students with disabilities at university.

5.5.2 Implications for theory

The PERMA, PERMA Plus and the Systems Theory Concept of Disability provided the frameworks to investigate the wellbeing of students with disabilities in this study. Prior studies have shown that increased levels of each of the PERMA protect wellbeing against negativity (Garland et al., 2010), reduces depression (Seligman et al., 2005), improves life satisfaction (Kashdan et al., 2009), improves resilience (Tugade & Fredrickson, 2004), protects against physical illness (Pressman & Cohen, 2005), and reduces stress (Cohen & Wills, 1985, as cited in Iasiello et al., 2017).

Based on the findings of this study, the following recommendations for **theoretical development** are provided to increase the understanding of the wellbeing of students with disabilities at university:

- More research on the use of the PERMA framework in the African context.

- More research with the use of other wellbeing theories in diverse student populations.

- Theoretical exploration on the ways in which students with disabilities construct their identities in tertiary environments.

- More research into the Causal Agency Theory to better understand how people become self-determined. This will also aid in the creation of interventions and support for students with disabilities.

5.5.3 Implications for further research

The findings of this study indicate that the voices of students and disability staff may be important in assessing which specific factors they perceive as supporting their wellbeing. This will enable these to be amplified, and additional support can also be provided. At the same time, the critical role of students' agency in supporting their own wellbeing could also be developed. Regular focus groups and interviews should be conducted to assess conditions and enhance inclusion. This will achieve the practical implementation and aims of the NSCNET, NCESS and White Paper reports, which are to remove barriers and limitations, and support and achieve inclusion and wellbeing for students with disabilities at all educational levels.

Based on the findings of this study, the following suggestions are thus made for **further research** on the wellbeing of students with disabilities at university:

- Case studies on how students with disabilities navigate their disabilities within tertiary environments.

- Mixed-methods studies on how students with disabilities navigate online learning.

- Vignette studies on the role of self-care in students with disabilities.

- Interdisciplinary research on the ways in which accessibility can be enhanced for university students with disabilities.

- Mixed-methods research on how technology can support the wellbeing of students with disabilities.

- Systemic case studies on the function of disability units in supporting the wellbeing of students with disabilities.

- Studies on the role and impact of disability disclosure at university

- Interdisciplinary research on the ways in which sport can be made more accessible for students with disabilities at university.

- Research on the role of sports in enhancing wellbeing in students with disabilities.

- The findings of these and future studies could be utilised as assets that can be further mobilised for intervention development and the exploration of newly constructed interventions.

5.6 CHALLENGES AND POSSIBLE LIMITATIONS OF THIS STUDY

Firstly, one of the challenges was trying to locate available participants as the availability of students at the campus was nullified due to the COVID-19 pandemic. This was addressed through snowball sampling. The study aimed to explore the participants' experience of a specific phenomenon, and the fact that only one topic could be addressed fulfilled the purpose of the study. Due to the qualitative nature of the study and the small sample size, the study's limitations included the inability to generalise the findings to other students with disabilities. However, within this context, I gained a thorough understanding of the specific students' perceptions. A possible limitation could also be that some participants might have preferred individual interviews, while others felt more comfortable in a focus group. This was

addressed by actively including all of the participants in the discussion. Another limitation could be potential researcher/moderator bias. I addressed this by facilitating the inclusion of all the participants in the discussion, relying on their perceptions, and employing member checking of the identified themes. A limitation of the online medium, which was used to gather data in this study, could be that the body language and facial expressions of the participants are not visible. Nonetheless, this was viewed as a positive aspect in this study as this further protected the participants' anonymity. Consequently, this resulted in them being more open and comfortable, and allowed the researcher to better observe possible nuances and voice inflections.

5.7 CONCLUDING REFLECTIONS

The necessity for awareness of variety in all aspects of human life and society, including the media, has been a universal cry in the last decade. Factors such as race, gender, and age, as well as values, religious affiliations, and philosophies supply our planet with a vast diversity of people. Consequently, despite our propensity to categorise people into rigid structures, the intersectionality of human identity should never be jeopardised.

Students with disabilities contribute to the comprehensive enhancement of universities. This is the case as their inclusion in the university environment requires sensitivity, conversion in practices, and developing nuanced perspectives about learning support at tertiary level. Yet, the universal experiences of people with disabilities have often been experiences of discrimination and marginalisation (Wehmeyer, 2013). Acceptance, tolerance, and respect are all concepts that are required with diversity, which is defined as 'differing aspects of attributes.' However, people with disabilities continue to face stigma as a result of others' perceptions and understandings of disability, including those who pity or even fear people with disabilities. Discrimination and marginalisation are unavoidable outcomes, as are others' incapacity to perceive that persons with disabilities have skills, as well as an aptitude and potential to grow and experience wellbeing (Dunn & Wehmeyer, 2021). Students with disabilities experience wellbeing despite their challenges. This is optimised by inclusive and supportive environments, which have the ability to enhance wellbeing, and enable all students to achieve their potential in all spheres of their life. Wellbeing is viewed as a major factor in, and determinant of success impacting academic, social, emotional and psychological aspects of people's lives. In conclusion, it should be noted that it is entirely possible for wellbeing to

coexist with the experience of disability, allowing for thriving and optimal human development.

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STUDENT WELLBEING AT **

CONSENT FORM

(Phase 2)

We are conducting a study on student wellbeing at the University **, under the auspices of the Vice-Principal Academic.

Students from all faculties are involved.

Your responses will be anonymous.

Your responses during the focus group/s will be audiotaped and will be transcribed.

You have the right to withdraw from this study at any point, without any negative consequences.

The data collected from the study will be stored for a period of 15 years and may also be re-used in subsequent studies on student wellbeing in the future.

Please note that beyond the demographic information you volunteer, this is an anonymous survey. For this reason, please use existing platforms to support you with possible wellbeing - related concerns as this survey is for background purposes and does not constitute a reporting or supporting process.

We hope to use findings from this study to support student wellbeing at **.

_____

I hereby provide consent for the data collected to be used for the study of student wellbeing:

Name: _____

Signature: _____

Date: _____

If you have questions or queries regarding the study, you are welcome to contact

Naciema Suliman at naciema786@gmail.com

Prof Irma Eloff at irma.eloff@up.ac.za

QUESTIONNAIRE FOR STUDENT WELLBEING
Please fill or mark the appropriate space

BIOGRAPHICAL INFORMATION	FOR OFFICE USE ONLY

BIOGRAPHICAL INFORMATION

FOR OFFICE USE ONLY

1. **Respondent number**

V1

2. **Province** (the province that you call 'home')

Eastern Cape	
Free State	
Gauteng	
KwaZulu Natal	
Limpopo	
Mpumalanga	
North West	
Northern Cape	
Western Cape	

V2

3. **Citizenship**

1 SA citizen	
2 SADC country	
3 Other African country	
4 Non-African	

V3

4. **Gender**

1. Male		2. Female		3. Other	

V4

5. **Age:** _____years

V5

6. **Race:**

Black	
White	
Indian	
Coloured	
Other	

V6

7. **Degree or diploma programme:**

V7

8. **Home Language**

Afrikaans		Sesotho (Southern Sotho)	
English		Setswana (Tswana)	
IsiNdebele (Ndebele)		SiSwati (Swati)	
IsiXhosa (Xhosa)		Tshivenda (Venda)	
IsiZulu (Zulu)		Xitsonga (Tsonga)	
Northern Sotho (Sepedi)		Other	

V8

Focus group facilitator:_____ Campus: _____

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APPENDIX 3: FOCUS GROUP GUIDELINE DISCUSSION QUESTIONS

The following are guideline questions (depending on the flow), that I will be using for my focus group discussion: The questions are open-ended.

"**How does/do _____ contribute to your wellbeing?**"

A. Infrastructure at UP:

1. Surroundings i.e. gardens, seats, open spaces, buildings.

2. Availability of parking

3. Access to clinics and health care providers

4. Cafeterias, restaurants and student centre

5. Fitness centres (walking trails on campus and UP gym)

6. Internet (access to Wi-Fi)

7. Lecture halls, lecture rooms and labs

B. Learning facilities and support:

1. Course / programme content. (The relevance of the programmes and study material)

2. Online learning facilities (Blended learning, access and content of ClickUp)

3. Tutorials

4. Library services

5. Lecturers

C. Social support:

1. Who constitutes the social support that contributes to well-being?

2. What are the most important relationships in your life?

D. Psychological and emotional support:

1. Who constitutes the psychological and emotional support that contributes to well-being?

E. Academic support:

1. Who constitutes the academic support that contributes to well-being?

2. How does the FLY@UP programme contribute to well-being?

3. Who do you see as mentors that support you academically?

F. Achievement/accomplishment

1. What do you see as accomplishment as a student?

2. Wellbeing research with people around the globe shows the importance of 'accomplishment' and 'achievement' to our wellbeing. Why do you think this is important?

3. How important is accomplishment at UP (in your studies) to your well-being? (Why? Share some examples from your life.)

G. Own capabilities:

1. How do you contribute to your own wellbeing? (Explain)

2. How important do you think you are in determining your own well-being?

H. Recreational activities:

1. Students mentioned that activities such as sports or hobbies contribute to their well-being. How do these activities contribute to your well-being?

2. What activities do you take part in? Are they part of campus life, or do you do it outside varsity life?

I. Spirituality/religion:

1. How do you think your own spirituality contributes to wellbeing?

2. Are there religious or spiritual activities that are part of campus life that you attend, or is it mainly outside varsity life?

3. Do you have meaning in your life? Why/why not?

4. What do you think brings meaning to the life of a UP student?

J. Basic needs:

1. We know that for anyone to enjoy more sophisticated aspects of life, such as accomplishment, one would need to satisfy basic human needs. Which do you think needs attention if I say: food, hygiene, transport, and security? Why?

2. How do you think does "being part of life on campus" contribute to a student's well-being? (Being part of something, enculturated into university life both social and academic).

3. Do you think that if students are proud of UP it will contribute to their well-being? How?

K. General questions:

1. What do you think is the smallest thing that the university can do that will have the greatest positive impact on the wellbeing of students?

2. Are there factors (other than the ones mentioned already) that are missing that you would like to add as factors that contribute to student wellbeing at UP? What is the most important thing that you think the leaders of the university should know about your wellbeing?

UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA

Faculty of Education

RESEARCH ETHICS COMMITTEE

CLEARANCE CERTIFICATE	CLEARANCE NUMBER: **EDU124/20**
DEGREE AND PROJECT	MEd
	Factors supporting the wellbeing of students with disabilities at a university
INVESTIGATOR	Ms Naciema Suliman
DEPARTMENT	Educational Psychology
APPROVAL TO COMMENCE STUDY	23 August 2021
DATE OF CLEARANCE CERTIFICATE	01 July 2022
CHAIRPERSON OF ETHICS COMMITTEE:	Prof Funke Omidire
CC	Mr Simon Jiane
	Prof Irma Eloff

This Ethics Clearance Certificate should be read in conjunction with the Integrated Declaration Form (D08) which specifies details regarding:
- Compliance with approved research protocol,
- No significant changes,
- Informed consent/assent,
- Adverse experience or undue risk,
- Registered title, and
- Data storage requirements.

APPENDIX 5: SUMMARY OF THE FINDINGS PRESENTED TO THE PARTICIPANTS

Factors supporting the wellbeing of students with disabilities at university

Summary of Findings

These are the key themes that I have identified after a thematic analysis of the data generated from our focus group discussion. The themes are supported by statements made by you as the participants in the focus group discussion.

Theme 1: Negotiating disability

Negotiating disability is an ongoing process of performing and negotiating disability awareness and perceptibility in a myriad of context and settings. The consequences and implications, risks and benefits vary depending on these settings, context and also on disability awareness which impacts on the wellbeing of students with disabilities (Kerschbaum et al, 2017). Within this broad theme, the following sub-themes were identified:

1.1 Disclosure

1.2 Disability unit

1.3 Accessibility

Theme 2: Negotiating disability online

The online learning experience has changed the face of learning at universities and presented new challenges to students with disabilities which supported and detracted from their wellbeing in a myriad of ways. The following aspects were highlighted from your experiences in this regard.

2.1 Technology

2.2 Lecturers

2.3 Disability literacy

Theme 3: Amplifying self- care and nurturing

Emotional and social wellbeing is vital for everyone, especially for students, and self-care and nurturing is a priority to enable effective functioning and support wellbeing as it fosters learning and impacts on their academic achievements and learning experiences. The following key aspects were voiced:

3.1 Leisure activities

3.2 Nurturing relationships

3.3 Sports

This is a brief reflection on my journey. I will start off by reflecting on the birth of my topic. We, as educational psychology students, started off the process by ticking the appropriate box of topics indicating where our interests lie. I was debating between wellbeing and resilience and decided on wellbeing as I am a very positive person, believe in positive psychology, and thereby enhancing wellbeing. I was allocated Professor Eloff as my supervisor based on my chosen topic of wellbeing. At our first individual meeting/discussion Professor Eloff and I discussed options for my topic, and Professor Eloff shared the wellbeing project that she was conducting with me. During the discussion, we ascertained that my interests lay in students with disabilities as I had a daughter who had been diagnosed with cancer at the tender age of twenty in her second year as an engineering student at university. After operations, rehabilitation, and a substantial convalescence period attending various therapies to regain speech, mobility, and basic functions, she resumed her studies as a student with disabilities who required assistance and accommodations, thus forming part of this special group of students. This topic was thus close to my heart, and I was excited and felt that I had been fortunate in being granted this opportunity to explore this topic qualitatively, gain from this experience, and enhance awareness of the factors supporting the wellbeing of this minority group by giving these students a voice.

The first step was to have my topic approved by the Ethics Committee at the university before I could proceed with data collection. My initial topic was "Factors supporting the wellbeing of undergraduate students with disabilities at university." Initially, my aim was to have an actual physical focus group, but unfortunately, Covid happened, and I had to be flexible, thus altering my plan to an online group. Covid presented many challenges, another primary one being contacting participants and forming the group as there was no one physically on campus, and students were not responding to my emails. We decided to alter my topic to include both undergraduate and postgraduate students. Eventually, with my supervisor's assistance, I managed to get one participant which led to snowballing of other participants. Everyone was happy to sign the consent forms, and I was excited and hoped that everyone would be able to log on to zoom without any hiccups.

The day arrived and I was nervous before we started but felt comfortable with the group once we started. I felt relieved and happy that everyone participated well. Although the topic was on factors that supported their wellbeing, factors which impeded their wellbeing also came to

light. It was an amazing experience for me to be privy to their experiences through their eyes, and I shared in their highs and lows as my emotions swayed from joy to sadness, empathy and amazement at their resilience as they recounted their experiences to highlight points. It was a poignant journey for me as I empathised with many things through my daughter's eyes and discovered and learnt so much in the whole long process, not the least of which was persevering. All too soon, the allotted time was over, and I wished that I could have had more time with them, and that circumstances had allowed us to personally meet up.

Scientific writing, for me was interesting, challenging, and never-ending, as I always felt that I needed to augment my knowledge through extra reading. I was fortunate in having a wonderfully patient and supportive supervisor who guided me continuously and taught me the value and essentials of critical reading, analysis and interpretation which forms the basis of scientific writing. I loved reading relevant literature on the field, but struggled initially to identify/choose and extract relevant information from the expanse of articles, and remembering to reference them. The process helped me to work systematically and also enhanced my critical reading and thinking skills, and to search for the original source where possible.

Data analyses was confusing initially but became easier as I got into the flow. It entailed reading and re-reading the data as I identified codes initially, and then constructed appropriate themes and connected it to the relevant literature. It all fitted together under the guidance and constructive comments from my supervisor which was always necessary and welcome. I completed chapter four after confirming a brief summary of my themes with the participants of the focus group. I concluded chapter five by addressing and connecting my research questions to the study and relevant literature.

	Extract from thematic coding analysis		
Codes	**Extracts**	Refined themes	Themes with subthemes
Support	It's just how people accommodate you and how you feel supported, I guess (P2)	Self-care	**Theme1:** **Negotiating disability** 1.1 Disclosure 1.2 Disability unit 1.3 Accessibility
Lecturers, support, disability	You have to be supported to be able to do well especially if you have a disability and not all lectures understand how to accommodate all disabilities(P1)	Self-care-supportive relationships Lecturers-unsupportive relationship Disability literacy	**Theme2:** **Negotiating online learning** 2.1 Technology 2.2 Lecturers 2.3 Disability literacy
Lecturers	if you're not supported academically, well, then obviously you feel some emotions and you'll feel like you can't do it, you're doubting yourself. So, I think emotional wellbeing is also important. (P1)	Lecturers-un/supportive relationship	**Theme3:** **Amplifying self-care and nurturing.** 3.1 Leisure activities 3.2 Nurturing relationships 3.3 Diminished sports activities.
Support	If I have the necessary support that I need to get through the day, then um…I guess that contributes positively to my wellbeing(P4).	Self-care: positive relationships	
Support, disability	if you have support, for instance, from the disability unit and from	Disability unit support; Lecturer support	

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unit. lecturers	the lecturers as well, it becomes easier to adapt and to study well (P3)		
Support from disability unit	where you can go and talk about your challenges or where you can go and seek help (P3)	Disability unit support	
Disability	… another big thing is like umm, the kind of feeling able to express yourself in terms of your disability and not feeling like that like, like, that's um… a taboo thing to talk about, um…You know, look like your life experiences are still valid, because that's the only thing you know, **and** that's how you kind of, that's how you go through your life (P2)	Disability literacy	
Wellbeing	, I guess some kind of social connections like, you know, being able to make friends or something. You know, not being alone, basically, I think that also contributes to wellbeing at university.	Self-care: supportive relationships	

87 also the ability to manage stress. So generally, it emerges from your thoughts, your

88 actions, your experiences, most of which you have control over. So, it encompasses

89 your emotional, your physical, your social, your wellbeing at university, if you

90 working, and societal wellbeing. It incorporates a lot of things as well.

91 Okay, if you think about your wellbeing at university, what's the first factor that you

92 think of when I ask you, "what contributes to your wellbeing?"

93 Okay, can you all take turns to unmute, and just tell me what you think contributes to

94 your wellbeing, just the first thing that you think of.

95 P1: Does academic wellbeing count?

96 N: Ok, that's true because you're at university and you want to actually do well.

97 P1: Yes, and you have to be supported to be able to do well especially if you have a

98 disability and not all lectures understand how to accommodate all disabilities.

99 N: Okay, so for like, academic wellbeing is important, and input of the lectures as

100 well. They need to support you adequately. Okay.

101 P1: Yes. And I also think it also goes along with emotional wellbeing, because

102 ultimately, if you're not supported academically, well, then obviously you feel some

103 emotions and you'll feel like you can't do it, you're doubting yourself. So, I think

104 emotional wellbeing is also important.

105 N: Yeah, definitely. Because it impacts on your moods, and everything else as well.

106 N: Hi, P4. How are you?

107 P4: Hi. I'm okay, how are you?

108 N: I'm good. Thanks. Can you just introduce yourself? Just tell us what you're doing

109 at university and what your disability is?

110 P4: Um...My name is P4, I'm doing psychology honours and my disability is

111 muscular dystrophy

112 N: Oh okay. Sorry, um...P4, I was just asking everybody. We're talking about

113 wellbeing. And what is the first factor that you think of when I ask you what

114 contributes to your wellbeing at university?

115 P4: Um, for me, it's being able to adjust to the university environment. I believe that if
116 students with disabilities... say, okay, let me just speak for myself. If I have the
117 necessary support that I need to get through the day, then um... I guess that
118 contributes positively to my wellbeing.

119 N: Okay, that's true. So, it's the adjustment to university and support that you get to
120 help you.

121 P4: Yeah

122 N: Thank you.

123 Okay, who's going next?

124 P3: I can go next. Um, for me, what matters most is more like general support.
125 Because when you are living with a disability it's quite challenging to adapt to a
126 different environment. So, if you have support, for instance, from the disability unit
127 and from the lecturers as well, it becomes easier to adapt and to study well. But if
128 you do not have support, then it becomes challenging, even if you don't know. So, for
129 instance, where you can go and talk about your challenges or where you can go and
130 seek help. So, for me in general, I mean, wellbeing it's all about having general
131 support within the university.

132 N: Okay, Thank you, P3.

133 P2: I guess I'll go next, I um... I think, like, support has been said like over and over
134 again. And it's definitely the first thing I thought of um... But I think for me um...
135 another big thing is like umm, the kind of feeling able to express yourself in terms of
136 your disability and not feeling like that like, like, that's um... a taboo thing to talk
137 about, um... You know, look like your life experiences are still valid, because that's
138 the only thing you know, and that's how you kind of, that's how you go through your
139 life. And if you feel like you can learn by relating things to your personal situation. I
140 feel like you should be able to do that without feeling like it's wrong, I guess

141 N: Okay, thank you, P2. So, basically, the first thing is the support that everybody
142 needs.

143 Okay, who's next? P6?