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Examining the needs and strategies to support chronically ill university students

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Abstract:

This study aimed to identify the needs of students with chronic illnesses and assess the extent to which humanitarian support can be provided to 28 students at the University of Sharjah. The adopted methodology explored the importance of humanitarian support for students with chronic illnesses, focusing on the essence of human experiences. The study instrument was an in-depth interview form.

The study reached several findings, the most important of which was the challenges these students face due to the impact of their health conditions. It highlighted the importance of providing appropriate healthcare facilities and activating coordination mechanisms between various entities at the university, emphasizing the need for everyone to interact within a humane, cooperative framework that allows for appropriate conditions. This is especially true given

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the lack of emotional support and high level of fear of stigma among students with chronic illnesses, compared to the substantial role that peer university can play. In addition to the importance of raising awareness of chronic diseases and their dangers in the university community, the study emphasizes the importance of a center for humanitarian support and self-development that covers all the needs of students with chronic diseases through an administrative, academic, and student service network.

Keywords: Chronic Diseases, Students, Ethics, Challenges, Needs

Introduction

Chronic disease is defined as "a long-term disease that is generally developing slowly"; its effects are long-term and reflect not only on the individual but also on their social networks (Pais & Menezes, 2019). It is described as a medical condition with significant implications for human life in the long run or even for life, accompanied by a series of emotional, social, and lifestyle challenges (Cerqueira et al., 2022).

Chronic diseases affect about 60% of all deaths worldwide but are neglected on the public health agenda in most countries and regions, especially in low- and middle-income countries (Halpin et al., 2010). In 2008, the World Health Organization (WHO) reported that "non-communicable diseases, particularly cardiovascular diseases, cancers, chronic respiratory diseases and diabetes, today pose a major threat to human health and development. They are one of the world's largest killers, with an estimated 35 million deaths each year, accounting for 60% of all deaths worldwide and 80% in low- and middle-income countries" (WHO, 2008).

Moreover, data have consistently shown a rapid increase in the global burden, placing chronic diseases close to the top of the global risk landscape in terms of their probability and severity (Wef, 2010). The burden of chronic diseases is increasing worldwide, including in the Arab Gulf States, where they have increased significantly over the past five decades owing to rapid economic growth and urbanization. In the United Arab Emirates (UAE), chronic diseases are the main cause of death and economic burden, which reflects the need to discover the types of targeted interventions in this country.

Studies on chronic diseases and their impact on the quality of life of university students have indicated that students with chronic diseases require special care and that these diseases and their impact on students' lives must be appropriately managed; thus, services must be provided in addition to the health care available at health clinics in universities. This intersects with the proposal of the current study as identifying the needs of these students and providing them with humanitarian support is necessary (Gazibara et al., 2018).

A cross-sectional study was conducted among students of the United Arab Emirates University over the age of 18, with a self-reported prevalence rate of 23.0%, and obesity, diabetes, and asthma/allergies were the most common (12.5%, 4.2%, and 3.2%, respectively). Among the students, 34.8% were either overweight or obese. The prevalence of chronic diseases was generally similar between men and women (27.5% vs. 21.8%); however, it was significantly higher among graduate students, older students, married individuals, and those with a family history of diabetes (Bashir et al., 2022). (Bashir et al., 2022).

Both coping and social support have independent relationships in influencing the well-being of patients with chronic illnesses (Schreurs & Rider , 1997). Students with chronic illnesses demonstrate less pronounced adaptive potential, and overall scores on academic adjustment, subjective well-being, and basic psychological needs are significantly lower than those of healthy students. The findings emphasize the importance of university-based knowledge of these illnesses in facilitating student adjustment, particularly in various academic and even recreational settings (Paul, 2004).

University students are generally believed to be in good health. However, about 30% of students are estimated to suffer from chronic diseases and/or special care needs (Lemly et al., 2014). The academic adaptation of students

with chronic diseases is also burdened by several problems, including their attitude to their physical state, state of health, and the need for constant surveillance of a number of their standards (Shamionov et al., 2020). When students with chronic diseases were examined, clear signs of psychosocial maladjustment were observed in 77% of cases. These students tend to be depressed, worried, ashamed, self-restrained, with low activity, with low self-esteem, and marked disharmony in personal relations. Additionally, male students are at greater risk of academic maladjustment (Houman & Stapley, 2013). A recent study also revealed that students who had recently been diagnosed with chronic diseases and those whose school participation had been affected by chronic diseases showed further negative indicators. They reported that chronic diseases had a greater impact on their school participation, including attendance, engagement, and academic performance. Many felt that their health posed a barrier to participation and academic success, and they also reported having poorer relationships with their peers (Cerqueira et al., 2022).

Students do not tend to define themselves as chronically ill as they do not view their chronic illness as a disability (Royster & Marshall, 2008). Nevertheless, chronic disease has a substantial impact on the patients' psychological, social, and physical performance (Alonso et al., 2004; Keles et al., 2007; Taylor, 2006). Chronic patients usually face low levels of autonomy, low quality of personal relations, a sense of misunderstanding by others, a sense of isolation and disability, as well as a feeling of burden on others (Herts et al., 2014).

The fact that many students, despite showing distinctive academic abilities, have a long academic history of non-completion, withdrawal, and grade repetition is a matter of concern because the higher education structure has failed to provide an accessible environment for students with

chronic diseases. Therefore, the health status of students must be of concern to health professionals as well as academics, where higher education plays an important role in society. This will increase the well-being of people and promote development and economic growth as chronically ill students face greater difficulties in pursuing and completing higher education (Toller & Farrimond, 2021).

The challenges faced by students with chronic diseases in the university environment are particular as the need for knowledge and adaptation on the university's part has become particularly pressing owing to the increasing prevalence of chronic diseases (Barber & Williams, 2021; Ramón-Arbués et al., 2022). Students with chronic illnesses face severe functional weakness, a lack of services, stigmatization, and/or unfair sentencing by teachers (Jung, 2002; Shiu, 2001). They also find succeeding in scientific study programs difficult owing to the disturbances caused by unexpected setbacks and symptoms. College disease offices do not always help because their support is inadequate, and students with chronic diseases often do not self-define as having a disease (Royster & Marshall, 2008).

This issue affecting students brings new challenges to universities. At the international level, laws and legislation provide for the integration of persons with disabilities in all spheres of life (European Commission, 2010; Shaw, 2006). However, students with invisible disabilities (such as some chronic diseases) may face more difficulty traveling to college compared to their peers with physical disabilities as they often do not reveal their situation and their needs remain unmet. They must usually deal with symptoms of varying severity throughout the school year, which makes the impact on their studies unexpected (Mullins & Preyde, 2013).

In the university context, the needs and wishes of chronically ill students tend to differ from the institutional resources and privileges that can be routinely provided. Support for the health education needs of chronically ill students plays a substantial role in the success of these students in college (Royster & Marshall, 2008), and when faculty members are sensitive to students' needs, it may have a positive impact. However, negative reactions from faculty members and peers, which often appear to be the result of a lack of experience rather than hatred, create a reluctance to detect disabilities for fear of stigmatization (Martin, 2010; Stage & Milne, 1996).

The psychological and social adaptation process in college for women with chronic diseases also includes many factors such as stigma management, disclosure, coping strategies, social support, and identity reconstruction. Students with chronic diseases also need adapted and arranged accommodation (Jung, 2003).

Within this scientific framework, this study is concerned with human escorts for students with chronic diseases at the University of Sharjah. It aims to understand the depth of the challenges and needs that these students may face and to analyze comprehensively the procedures and services available to them. It also seeks to identify areas that can be improved, make practical recommendations to strengthen the experience of students with chronic diseases at the University of Sharjah, and support their academic and personal success.

Theoretical Introduction

The theoretical triangulation methodology was adopted to gain a deeper understanding of the challenges and needs of students with chronic health conditions in a human environment such as the University of Sharjah and of the use of the theory of social support, which indicates the social resources on which an individual can rely when dealing with problems of life and stress (Kort-Butler, 2018). The theory of social support emphasizes the importance of social networks, relationships, and community support in providing resources and emotional assistance to individuals. In this context, given that social support is the basis of human companionship, this theory can be used to study how social support networks affect the well-being of chronically ill students at the university and the role of a social worker in achieving this well-being, as well as the reality of the support received by students at the university.

Therefore, social support is a crucial element in coping with stress. Close relationships can increase self-esteem and may act as a buffer against the fear of disease, while disrupting these relationships can lead to awareness of and fear of death. Social support becomes even more important when people feel that they are approaching death and maladjustment to university life. Perceived positive support from family is strongly associated with high capacity to adapt and integrate (Khawar et al., 2013).

A vital dimension is associated with social support, namely an individual's perception of the extent to which support is provided to them; this can have a positive impact on both psychological and biological aspects (Khamisa, 2007, p. 1).

The availability of social support among individuals facing chronic diseases necessarily strengthens their intrinsic motivation to confront the threat of death and mitigates the severity of their fear of it, especially since sources of social support constitute the primary source of assistance when an individual faces a problem that challenges their energies and capabilities. Therefore, the current research aims to determine the importance of human–human support for university students with chronic diseases and its importance in integration, adaptation, and academic achievement, especially since no relevant studies have been conducted on this matter in the context of the University of Sharjah with the increasing number of affected students (Sirin et al., 2013).

Study Problem

Institutions seek to attract and support university students because they possess the qualifications and capabilities that enable them to provide solutions to numerous problems. Furthermore, their ideas, if utilized, will generate material and moral returns for the universities and the economy (Al-Zahraa, 2018). The study's problem is defined by identifying the needs of students with chronic diseases and the importance of human support. This is achieved by analyzing the impact of these chronic diseases on their academic performance and university status. Accordingly, the study is based on several questions as follows:

- What are the health, social, psychological, and educational needs of students with chronic illnesses at the university?
- What is the extent of support that students with chronic illnesses receive from the university administration and clinic?
- What are the most important recommendations for improving support for students with chronic illnesses at the university?

Methodology

Study Approach

The phenomenological approach was adopted because, according to the research group, it is the appropriate approach to study objectives that examine the importance of human companionship for students with chronic diseases. This approach focuses on exploring the essence of human experiences and understanding the meaning that people attribute to such experiences. It also seeks to capture the basic structures and aspects of these experiments without imposing theories or ex-ante interpretations, which aim to understand people's experience of reality (Braun & Clarke, 2006; Nelson, 2011).

Participants and Sampling Technique

The study sample comprised 28 individuals (students at the University of Sharjah) with chronic diseases. The purposive sample satisfied the requirements of "the students' enrollment in the University of Sharjah, the presence of a chronic disease, and acceptance to be interviewed." The interview form was distributed to students who met the above conditions, and those who did not meet these conditions were excluded.

The study participants were 16 women and 12 men (57.14% and 42.85%, respectively). As for marital status, 22 (78.57%) participants were single, 5 (17.85%) married, and 1 (3.57%) divorced. The respondents were fully informed of the purpose and importance of the study, and ethical approval was obtained from the University of Sharjah to conduct the study within its spatial limits. Those suffering from chronic diseases, whose ages ranged from 19 to 41 years (M = 24.25, SD = 5.82, and the duration of the disease ranged from 1 to 21 years). year (M = 9.57, SD = 6.11, with an average income between moderate and poor. As for the chronic diseases suffered

by the students participating in the study, they were: asthma, psoriasis, migraines, high blood pressure, and obesity. Thalassemia, diabetes, thyroid disease, epilepsy, seborrheic eczema, anemia, alopecia, heart disease, and immunodeficiency disease table no 1 shown the result.

Table 1. Sample characteristics

		N	%
Gender	Mele	12	42.8
	Female	16	57.2
Age	23–19	12	42
	24+	18	64
Social situation	Married	5	17.8
	single	22	78.5
	divorced	1	3.5
If you are married Number of children	2–1	3	60
	3+	2	40
	2	4	14
	3	10	35.7
	4+	13	46
Level of academic achievement	Middle	20	71
	Low	8	28
Income level	Middle	17	60
	Low	10	35.7

The type of chronic disease you suffer from	Skin diseases	5	17.8
	Respiratory system diseases	5	17.8
	Blood pressure, diabetes, and heart	7	25
	Migraines	4	14
	Blood diseases	3	10
	Thyroid diseases	3	10
	HIV	1	3
Duration of the disease	4–1	5	17.8
	8–5	9	32
	9+	14	50

Study Tool

A data form entitled "The importance of humanitarian escorts for university students with chronic diseases" was adopted, which included three themes: personal data, research status at the school, and human companionship. For its design, the research group relied on several procedures as follows.

Targeting

Before the form was created, the specific goals and aspects of the students with chronic diseases to be known were clearly defined by taking

into account the nature and consequences of the disease. The researchers in this study proceeded to design the form based on the following two questions: how far does the health status of a student with chronic illness affect their course of study and how important is the human escort in supporting and helping them make their course successful?

Development of Questions

We established questions that directly addressed the objectives and ensured their clarity and conciseness by focusing on the specific aspects of the human escort to which you are interested, as presented to psychologists to assess their accuracy in measuring the concept in which they are measured (by calculating the stability of the agreement between the estimated Inter-rater liability by calculating the Kappa coefficient). An agreement was reached among residents based on the criteria for judging the results of the Kappa coefficient, estimated at 0.83. The questions varied between closed-ended (yes/no, multiple choice) and open-ended (which allowed qualitative answers). This is due to the specificity of the topic and the importance of hearing the students' voices and opinions on many issues. This is what the open questions focused on, while the closed questions focused only on demographic characteristics and the type of illness and its duration.

Topic Analysis and Encoding

This study employed thematic analysis, following its traditional steps: identifying the data, generating initial codes, organizing these codes into potential themes, reviewing the themes, and finally defining and naming them (Braun & Clarke, 2013).

Ethical Approval

The Ethics Committee approved the study from Sharjah University (OMU) (Ref Number REC-23-06-19-01-F). Therefore, the study information page was provided along with the questionnaire, explaining the expectations and research procedure.

Results

Q1- Answer to the first question assessing students' needs by understanding the social-psychological and educational health needs of students with chronic diseases at the university, which includes knowing whether they need additional support in the academic, psychological, or social areas.

1- Students' views about the university's knowledge of their health status on chronic diseases

The University of Sharjah students participating in this study expressed the importance of the university's interest in their health status and its follow-up. The expressive phrases were as follows:

The university does not know about my health status, and I receive personal support from my family.

They do not know, and no one is interested in asking me about the health situation within the university.

No administrative procedure by the university allows us to disclose chronic diseases.

However, some students thought that others knowing their chronic diseases and health issues could pose dangers to them, as expressed below:

They may not see that this disease exposes me to dangers or obstacles in studying.....just present the case to the course doctors, and some accept, and others refuse.

If students do not receive adequate support and health care, this may negatively affect their academic performance as poor health conditions may lead to frequent absences from lessons and thus difficulty in achieving academic excellence:

My academic average is low because of my absences during the crisis in the event of high blood pressure or asthma.

I miss lectures because of my health..... I am afraid of any crisis occurring, and I cannot find anyone to help me.

The treatments I was undergoing at the time of the exam were once every week and every month, depending on the purpose, and a large number of professors did not accept this excuse, and therefore, I repeated the subject entirely in the next semester.

Most of the study subjects with chronic diseases recorded poor or average academic performance owing to the effect of chronic disease on their academic achievements as well as to the absence of human support and its foundations at the university, which can make the student feel included and improve their academic performance.

Additionally, the students' feeling that the university does not care about their health and therefore academic status has caused them to not commit to studying and to think about abandoning their academic paths, as expressed by the participants:

Sometimes I think about leaving the university because of my health condition...

Because of asthma attacks, I think about quitting school because sometimes I do not get enough help and attention at the university...

Because of a drop in my blood sugar... Sometimes I think about quitting my studies... My family, of course, refuses... But the drop in diabetes may lead to death.... I cannot find anyone to help me and take care of me at the university...

The treatments I was undergoing at the time of the exam were once every week and every month, depending on the purpose, and a large number of professors did not accept this excuse, and therefore, I repeated the subject entirely in the next semester.

2- Psychological and social needs of students with chronic diseases at the University of Sharjah

The psychological and social health of students with chronic diseases who do not receive psychosocial support may be critical and pose special challenges. These students face additional stressors because of managing their health conditions and may need additional support as they face substantial psychological and emotional challenges. These challenges can include anxiety, depression, and feelings of isolation due to health pressure and the daily challenges of having to manage their health issues constantly. Students with chronic diseases may feel that they have difficulty participating in social activities and interacting with colleagues. Additionally, this may result from not receiving adequate social support and feeling isolated and socially disconnected, which can negatively affect mental health.

When the questionnaire asked whether human support raises self-confidence, reduces feelings of tension and anxiety about the health condition, and makes one feel reassured, most of the answers (85.2%) mentioned mental health. This indicates the importance and value of

human support for the social and psychological aspects, which students with chronic diseases miss at university. This indicates the importance of social support and human interaction in improving the quality of life of these students and enhancing their psychological well-being. One of the respondents confirmed this:

I hope that there will be greater support from the university for students with chronic diseases to help reduce the psychological and social burden.

2.1- Emotional support

Students expressed their need for emotional support, especially during difficult times when their health conditions worsened, stressing their appreciation for peer support groups and the absence of social and psychological counseling services at the university. Moreover, they emphasized that their feeling of neglecting their mental health constitutes a serious problem and must be dealt with seriously as it could negatively affect their university experience and academic performance. One of the respondents stated,

I feel sad and depressed when my condition gets worse at university... I don't know what to do... and there is no social worker who cares about the students and their psychological state...

A second respondent added,

I hope that there will be greater support from the university for students who suffer from chronic diseases to help reduce the psychological and social burden. I also feel the need for community support from the university because I am part of this community and want to benefit from educational opportunities.

The university is a place not only for education but also for personal and social development. Focusing on social and psychological health and well-being contributes to enriching the students' experience and enhancing their comprehensive development. Therefore, the absence of social responsibility in universities can negatively affect the university's reputation and its relationship with students and society. The university has a social and moral role to provide health support to students.

2.2- Fear of stigma

Some students discussed their experiences with stigma and the fear of exposure to it, which reflects the importance of educational programs and awareness campaigns to reduce the stigma associated with chronic diseases on university campuses within humanitarian accompaniment schedules. This situation was reflected in the respondents' answers:

Weak immunity causes me embarrassment and prevents me from interacting with students.

.... I feel embarrassed when I am referred to as a patient....

Some colleagues avoid me because of my illness....

My illness is normal and not a disability, but some people see it as a disability...

2.3- The need for regular meetings and activities

Students highlighted the importance of peer support networks and emphasized the need for regular meetings and activities to foster a sense of community among students facing similar challenges. Participants emphasized this:

It seems like my university colleagues are completely clueless, so I miss their support and understanding.

I wish greater efforts were made to encourage social interaction and build support networks for students with chronic illnesses.

3- The educational situation of students with chronic diseases at the University of Sharjah

The respondents highlighted the problem of faculty members' understanding and the importance of flexibility in dealing with students with chronic diseases. However, some students expressed their appreciation for faculty members who were understanding and flexible in meeting their needs, such as by extending deadlines for submitting work or allowing absences from classes owing to medical appointments or a health crisis that occurred in the classroom.

When I get a cough, I leave the lecture, and when I ask the professors, I tell them that I have asthma. They will let me go, and that's it.

A second participant agreed:

During exams, I sometimes get tired, and I feel that professors are not paying attention to something. I feel a headache or dizziness coming, and I often take the test and go out or rest for a while at the table until it's gone... and the university does not know. None of the professors will excuse me when I ask for it..

Q2- How well do students with chronic illnesses receive support from the university administration and clinic?

Access to the university's many academic facilities

With regard to the students' academic needs, those with mobility

challenges highlighted the importance of accessible transportation services within the university campus owing to the long distances between university branches and colleges and suggested improvements in this area. Additionally, they saw a lack of facilities designated for them to feel comfortable. Owing to their health conditions, most respondents felt that the university prioritized the appearance and aesthetics of the buildings and neglected the students' needs. One of the respondents stated,

When entering the girls' section at the university, I face the obstacle of security as my health condition does not allow me to be exposed to the sun, but they force us to park outside the university, and no parking lots are available for people with medical needs. I get tired of searching for a location, and my health condition does not allow me to do so, especially in the heat.

Why is there no special treatment for those with health conditions, especially chronic diseases? Why the long distance between university branches?

The lack of parking makes the heat more irritating for the skin.

A second respondent stated,

Not having elevators and having to walk is tiring, especially when lectures are far away and in different buildings.

Many patients identified physical movement between university branches and the university clinic as a factor in their ability to avoid services that the clinic may provide. This, of course, would not be surprising because these chronic conditions include a range of diseases and symptoms, and depending on their severity, they can be tiring, annoying, and disabling for patients.

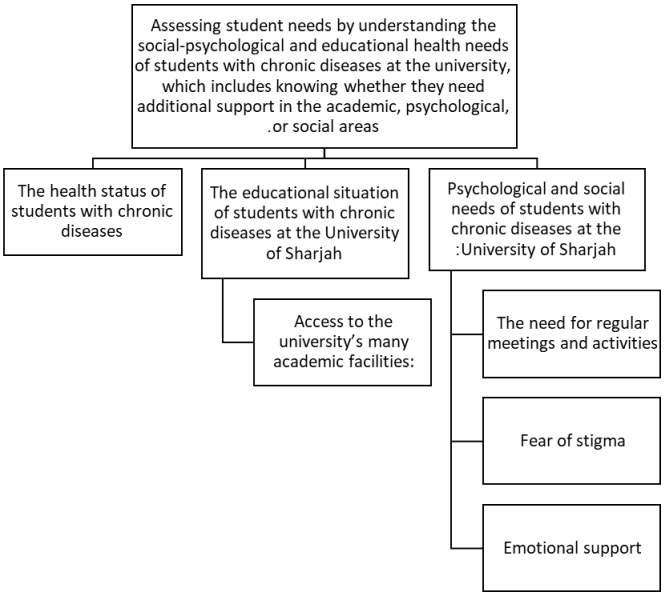


Figure 1: Assessing students' needs by understanding the social-psychological and educational health needs of students with chronic diseases at the university.

Assessing the effectiveness of the support and humanitarian accompaniment that students with chronic diseases receive from the administration and university clinic can also include assessing whether potential improvements can be implemented.

1- The reality of humanitarian accompaniment at the University of Sharjah

Based on the phenomenological approach and topic analysis method, the data were analyzed, and topics that describe and define the phenomenon in a way that allows us to understand students' experiences with chronic illness and the nature of humanitarian accompaniment and its reality at the University of Sharjah were selected. Humanitarian accompaniment at the University of Sharjah was measured through a closed question that

described part of its reality, namely, whether students received health support from the University of Sharjah or not.

Of the respondents, 70.4% indicated that they did not receive any health support from the university, while 29.6% stated that they did. We can interpret these percentages as 70.4% of students believing that they do not receive health support from the University of Sharjah, and this indicates a lack of dedicated programs in services related to chronic diseases, in addition to the absence of awareness among students and their knowledge of the health services available at the university or how to receive them.

2- The quality of the humanitarian accompaniment that students with chronic diseases receive from the administration

Students with chronic diseases expressed the absence of humanitarian accompaniment and the need for it and access to its services and its importance within the university. This is evidence of its absence at the University of Sharjah as the students expressed that the university did not ask about their health condition when registering them or announce any interest in or accompaniment for them during their university journey. Some respondents stated,

We are cared for just as people with disabilities are cared for.

Yes, I feel we should be treated as having special needs, and we have all needs.

Because I always have urgent needs and want quick intervention and daily facilities and vitamins.

3- The quality of humanitarian accompaniment that students with chronic diseases receive from clinics

Participants also mentioned challenges in accessing on-campus health care services, such as walking long distances to reach a clinic, and limited availability of specialized care.

"Limited on-campus health care facilities" refers to a situation where a university or educational institution has limited access to health care services on campus. This restriction can include various aspects of student health care support.

As for the scope of services, the campus health care center may provide only basic medical services, such as first aid and care for minor illnesses, but it may lack the ability to deal with more complex medical cases or emergencies. Some of the respondents explained:

The clinic at the university may not provide all the services or help complex cases like mine...such as my heart disease.

...I got tired and dizzy and was taken to the clinic, and my blood sugar was measured. It was low, and they gave me sugars.

Limited facilities may not have the capacity to provide the specialized medical care required for certain chronic diseases or health conditions. This may result in students with specific health care needs needing to seek care off-campus. The participants confirmed this:

I receive health support and attention from outside the university.

I monitor my health condition outside the university..... at Al-Qasimi Hospital, which provides medicines and delivers them to my house; Al-Qarain Clinic, the military clinic; Latifa Hospital...

Owing to the limited health care at the university... I think follow-up outside is better.

The university does not know about my health condition, and I receive external support from the hospital.

Another aspect is the lack of physical access to the health care center for students with chronic diseases or mobility challenges, as the respondents confirmed:

There is no clinic in any of the buildings.

Many students emphasized the importance of effective coordination between college administration and health care providers to ensure smooth access to humanitarian accompaniment services on campus. Some respondents stated,

Yes, I remember my colleague being exhausted and suffering from stress and dizziness, so I provided her with support by going to the clinic, just like a pendulum.

With only cash payment for medicine, they do not give us any paper for the university professor in case it is required.

Q3 What are the most important recommendations for improving support for students with chronic illnesses at the university?

Based on the results and analysis, this study aims to provide concrete recommendations to improve support for students with chronic diseases at the university. This could include submitting proposals on how to enhance humanitarian accompaniment at the University of Sharjah.

Communication and awareness

The lack of communication and awareness in humanitarian accompaniment at the university for students with chronic diseases constitutes a serious problem and can negatively affect their university experience and health. Students highlighted the necessity to develop awareness programs tailored to them that shed light on health and personal well-being. They stressed the importance of raising awareness about the challenges and called for a more comprehensive and supportive university environment by denouncing the necessity of providing humanitarian accompaniment at the university. One of the respondents stated,

Students must be educated about genetic diseases, especially thalassemia... and spreading a culture of chronic diseases is necessary.

Students' previous experiences in relation to university services have formed a generally negative view. Thus, work must be done to improve these experiences and make them more positive in the future by improving physical, psychological, and even social health services, in addition to the lack of confidence in the university and health care institutions that may play a role. A major role in enhancing self-confidence among this group is through transparency, listening to students' needs, and seriously dealing with their concerns by organizing awareness workshops and lectures about chronic diseases on a regular basis, directed to professors and students as a whole (afflicted and unaffected). Creating awareness materials available on websites is also possible. Various social networking sites are related to chronic disease management and self-care in the form of publications or electronic resources, in addition to organizing social events and promotional activities that encourage communication and building supportive social networks. This leads to the possibility of establishing an integrated support center for students with chronic diseases that ensures the provision of

health, psychological, and social services.

2- Activating communication channels

The students stressed the need to improve communication channels so that administrative and academic teams can identify students with chronic diseases and justify their absence when sudden health crises occur, especially since the lack of effective communication with students to understand their needs and concerns may make them feel neglected. One of the respondents stated,

The university is a place not only for study but also for integration, communication, and interaction between students, professors, and employees and for building relationships, which is what I lost because of my health condition.

A second respondent added,

There are no documents or statements that enable us to inform about our health condition.

In their answers to the form, 96.3% of students expressed no control over their health condition by the administration, and 74.1% confirmed that their academic advisor had no knowledge of their health condition. This indicates a lack of communication and follow-up between the administration, professors, and students.

The absence of encouragement for students to openly share their experiences, concerns, and needs with the university and the failure to provide mechanisms for submitting feedback and complaints and evaluating the effectiveness of the measures taken and continuous improvement put the students and university in a state of disunity. Students feel that they are disconnected from university life and that they have lost a large part of their

academic identity as students, as stated by one respondent:

Because of my health, I feel as if I have been excluded from university life...and this increases my stress and negatively affects my psychological well-being.

3- Providing special spaces for students with chronic diseases

We asked the respondents a multiple-choice question: "In your opinion, if the university provides you with special programs for humanitarian accompaniment based on the principle of multidisciplinarity (doctor, social worker, psychologist, university professor, administrator), who is/are the element/elements within this group that are most important in accompanying you?" Of the respondents, 48.1% chose "all"; 29.6% chose the "doctor" as chronic diseases are understood and cared for by the doctor in particular, which is the basis of health care in all its aspects; finally, 18.5% of students chose the "professor," who has a primary role in the university and is the basis of the accompaniment process.

The university's organization of timetables for psychological, social, and medical accompaniment for people with chronic diseases has become an important matter, as confirmed by 96.3% of respondents, with the necessity of having a center for humanitarian accompaniment for people with chronic diseases, similar to the Center for People with Chronic Diseases at the same university. Additionally, students with chronic diseases want to establish health plans that include specific settings tailored to meet their unique health needs, which enhances their academic experience. The reactions were as follows:

We want special places to relax in the corridors, may God reward them, all of them have become air-conditioned, but we do not want to walk all these distances.... There are no chairs and not even a place to get water

from them. There are some in buildings, but overland distances are long...

Sometimes it is in commercial malls for diabetes screening, why not in universities as well....

It is preferable to have a space designated for chronic diseases because the university is large and spacious and sometimes walking is very tiring.

We need special places and facilities that meet most of the needs and requests of people with chronic diseases such as diabetes....

Providing a clinic in various colleges, providing oxygen in the colleges and not just in the clinic because it is far away...

Because we always have urgent needs and want to intervene quickly and provide daily facilities and vitamins.

Chronic diseases require sustainable care and management, and the university must be aware that some students are living with these diseases and that providing the necessary infrastructure and services is necessary.

4- Training students, faculty, and staff

Participants called for the need to train their fellow students, faculty, and staff on the best ways to support students with chronic diseases and how to effectively implement health plans, to introduce them to the best ways to support and assist them and provide them with the knowledge and skills necessary to understand the needs and challenges of these students and how to effectively provide support. Reflecting on this matter, one of them stated,

Sudden convulsions caused me to fall, and the students' reaction was confusion and lack of experience. I tell the course students that if anything happens, they should tell me to contact the family.

Conclusion

The current study confirms the results demonstrated by previous studies regarding the importance of accompaniment and support for students with chronic diseases as the results show the students' need for this type of accompaniment and support based on their opinions and voices (Alonso et al., 2004; Casti et al., 2000; Keles et al., 2007; Paul, 2004. Shamionov et al., 2020; Taylor, 2006).

The thematic analysis of the research topic provided insight into the experiences and needs of students with chronic illness at the University of Sharjah who do not receive humanitarian accompaniment at the university. This is because the themes identified above can assist in developing support programs and policies designed as human-accompaniment programs specifically to enhance the well-being and academic success of these students.

Based on the results of the study, the most important and recurring challenges to accessing health services provided by the University of Sharjah focused on the university clinic and the difficulty of accessing it owing to the distance between the university institutions (colleges) and its branches, especially in relation to physical health limitations resulting from chronic disease such as physical weakness or slow movement, physical illness, chronic fatigue, pain, or heat, which may prevent access to the required care and lead to giving up university clinic services owing to distance. This directly coincides with the theory of social support and its multiple dimensions as having individuals who are prepared and specialized in providing human support to these students is necessary.

Moreover, chronic diseases represent an important health challenge faced by many students in universities and one of the basic features of

support through humanitarian accompaniment. Some statistics obtained in this study and the results of the objective analysis suggest that one of the most important possible reasons for the absence of accompaniment is humanity, which can be traced back to a lack of awareness and guidance. Universities and educational institutions may not be sufficiently aware of the needs of this group and the importance of providing humanitarian accompaniment.

The lack of resources allocated to humanitarian support may be another factor in the absence of humanitarian accompaniment at the university, especially in relation to the lack of sufficient dedication to this type of support. We also cannot neglect the cultural and social challenges that may make students avoid seeking assistance or humanitarian accompaniment owing to fear of discrimination, or disapproval or stigma or discrimination and ostracism owing to chronic illness, which intersects with the study by Gazibara et al. (2018).

We also confirm that the absence of humanitarian accompaniment may have a negative impact on the academic performance of students at the University of Sharjah. This is due to the impact of students' mental health on campus. The nature of chronic illness that accompanies an individual throughout their life may cause them clinical frustration (psychological disorders), in addition to weakness. Achievement performance, as we recorded among all respondents in the study, will affect their psychological health, and the absence of human support may lead to a decline in their academic performance as they feel difficulty in managing chronic diseases and paying attention to the requirements and duties of study (e.g., lectures, presentation work), especially if some of the human resources staff at the university may not take into account health conditions.

In addition to the above, the participants' health status affects integration and social interaction as the absence of humanitarian accompaniment leads to a state of social isolation for them, which affects the opportunities for interaction and learning from colleagues. The lack of awareness on the part of their colleagues and their weak culture about their chronic diseases may also affect their social interaction and lead to isolation.

Providing humanitarian accompaniment to students with chronic diseases at the University of Sharjah is considered essential to enhance their well-being and academic performance. Identifying potential obstacles and providing the necessary support and supervision to ensure that their needs are fully met has become vital, especially since all possible comprehensive assistance is provided in emergencies and crises within a multi-faceted framework where health, psychological, social and medical support work together to meet the challenges of this group. Therefore, we present a vision for humanitarian accompaniment at the University of Sharjah that includes establishing a humanitarian accompaniment center for data development that provides humanitarian services. For students with chronic diseases, this vision comprises medical counseling and chronic disease management, including regular monitoring of chronic conditions, which is crucial to preventing complications and side effects, and providing healthcare professionals trained to monitor and manage the health of individuals with diseases such as diabetes or high blood pressure within the framework of coordinated internal and external medical accompaniment (outside the university borders).

The issue of awareness and education comes through directing efforts to increase awareness among students about chronic diseases and how to manage them, through workshops, lectures, and awareness materials. Perhaps the most important thing is also to limit the number of people with

chronic diseases to provide them with sufficient specialized personal support necessary for them at the appropriate time, and to include associations. Students within the proposed project seem particularly important as student associations can play a critical role in improving the care of students with chronic diseases by enhancing awareness to improve health services and provide a successful academic life.

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أهمية المرافقة الإنسانية للطلبة المصابين بأمراض مزمنة "دراسة تطبيقية بجامعة الشارقة"

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ملخص البحث:

هدفت هذه الدراسة إلى التعرف على احتياجات الطلاب من أصحاب الأمراض المزمنة ومدى إمكانية توفير مرافقة إنسانية لهذه الفئة الطلابية في جامعة الشارقة و دلك من خلال لمنهج الذي يبحث في أهمية المرافقة الإنسانية للطلاب المصابين بأمراض مزمنة. و يركز على استكشاف جوهر التجارب الإنسانية وتمثلت أداة الدراسة باستمارة المقابلة المعمقة مع عينة من طلاب جامعة الشارقة وعددهم من 28 طالبا

وخلُصت الدراسة لعدد من النتائج أهمها الصعوبات التي يواجهها هؤلاء الطلبة بفعل تأثير وضعهم الصحي و بالتالي التنويه إلىهمية توفير مرافق صحية مناسبة وتفعيل آليات التنسيق بين الجهات المختلفة في الجامعة مع التأكيد على ضرورة تفاعل الجميع إدارة و أساتدة و موظفين في إطار تعاوني إنساني يسمح بتوفير الظروف المناسبة لا سيما و أن من أهم نتائج البحث غياب الدعم العاطفي و ارتفاع نسبة الخوف من الوصم لدى الطلبة المصابين بالأمراض المزمنة في مقابل الدور البالغ الذي يمكن أن تلعبه جامعة الأقران ؛ أضف لذلك أهمية التوعية بالأمراض المزمنة و خطورتها في الوسط الجامعي لتصل الدراسة إلى التأكيد على أهمية وجود مركز للمرافقة الإنسانية و تنمية الدات يغطي كل إحتياجات الطلبة المصابون بأمراض مزمنة من خلال شبكة خدماتية إدارية و أكاديمية و طلابية

الكلمات الدالة: الأمراض المزمنة ، الطلاب، الأخلاقيات ، التحديات، الاحتياجات

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