Check for updates

AUTHORS:
Jennifer Nyawira Githaiga[1]
Christopher J. Colvin[1,2,3]
Alison Swartz[1,4]
Natalie Leon[5]

AFFILIATIONS:
[1]Division of Social and Behavioural Sciences, School of Public Health, University of Cape Town, Cape Town, South Africa
[2]Department of Anthropology, University of Virginia, Charlottesville, Virginia, USA
[3]Global Studies Program, University of Virginia, Charlottesville, Virginia, USA
[4]Department of Population Health and Policy, St George's School of Health and Medical Sciences, City St George's University of London, London, UK
[5]Health Systems Research Unit, South African Medical Research Council, Cape Town, South Africa

CORRESPONDENCE TO:
Jennifer Githaiga

EMAIL:
jennifer.githaiga@uct.ac.za

HOW TO CITE:
Githaiga JN, Colvin CJ, Swartz A, Leon N. Bridging the gap: A cohort-based approach to doctoral education in South Africa. S Afr J Sci. 2026;122(7/8), Art. #21930. https://doi.org/10.17159/sajs.2026/21930

ARTICLE INCLUDES:
☐ Peer review
☐ Supplementary material

KEYWORDS:
supervision, PhD students, research, cohort, self-efficacy

FUNDING:
Fogarty International Center, US National Institute of Mental Health (D43 TW011308)

PUBLISHED:
29 July 2026

© 2026. The Author(s). Published under a Creative Commons Attribution Licence.

Bridging the gap: A cohort-based approach to doctoral education in South Africa

Significance:

There is a call for more institutional, disciplinary and pedagogical responsiveness in doctoral education in South Africa to produce the critical thinkers we need. We reflect on our experience of the 5-year BRIDGES PhD training programme that used a cohort and peer support approach with paired supervision, mentorship, academic and professional development opportunities, and community and academic partnerships. The BRIDGES programme components are worth exploring for strengthening the responsiveness of PhD training in South Africa, and would require experienced faculty and leadership, sustainable collaborations, strong PhD candidates, sufficient scholarship funding, and active facilitation of enriching academic programming and peer support opportunities.

Introduction

The proliferation of doctoral education and the need to restructure doctoral programmes has featured in the higher education literature internationally[1-5], regionally in Africa[6-9] and locally within South Africa[10-16]. Such proliferation may be attributed to various factors – a pertinent one being transition from the traditional focus on doctoral education as a prestigious enterprise contributing novel, discipline-specific knowledge via research to market-driven, neoliberal models of doctoral education.[1,2] Neoliberal models emphasise (1) building skills and competencies to improve employability beyond the academy, (2) introducing profit-driven doctoral programmes and (3) conceptualisation of doctoral education as a facilitator of national economic growth.[10,11] Debates around restructuring highlight the need to reformulate current doctoral programmes in recognition that the current models may be inadequate for preparing graduates for the professional work environment.

In response to South Africa's 2022 Doctoral Degrees National Report of the Council on Higher Education[17], a recent paper by Burton et al.[10] titled 'Are South African doctoral qualifications educating the thinkers we need?' identified several challenges facing doctoral programmes in South Africa. First, there is a lack of clarity around the purpose of doctoral studies as mentioned above. Second, there is an over-reliance on the traditional single supervisor–student model of supervision. Third, there is a dearth of adequately trained PhD supervisors. Finally, there is an over-emphasis on tangible outputs, such as publications, at the expense of growth in critical thinking commensurate with doctoral-level training.[10] The attrition rate among doctoral students is also concerning. For instance, one in five PhD students registered in 2014 at two large South African universities dropped out within a 5-year period.[17]

Reflecting on experiences in a public health doctoral programme in a South African university, Schneider et al.[13] call for more responsive doctoral education. Responsiveness entails institutional/cultural, disciplinary and pedagogical responsiveness. Institutional/cultural responsiveness refers to a sense of a connectedness between knowledge and the lived social realities of PhD researchers. Disciplinary responsiveness speaks to embracing dynamism relevant to different needs of doctoral programmes, while pedagogical responsiveness addresses facilitating teaching–learning spaces for critical thinking and independence.[13]

Several scholars have recommended contextually relevant models focused on holistic, contextually relevant doctoral training in South Africa.[14-16] A notable example is cohort-based doctoral programmes to supplement the traditional single supervisor–student (apprenticeship) model.[14,15] The genesis of the cohort-based doctoral programme model in South Africa emerged in the 1990s, spearheaded by scholars from a university in KwaZulu-Natal.[14,15] The cohort-based model addressed two pertinent issues: the push for doctoral education versus the limited capacity of experienced doctoral supervisors at the time.[14,15] The programme comprised a group/cohort of 12–18 doctoral students working under a cohort of three or four doctoral supervisors, many of whom were recent doctoral graduates at the time, jointly engaged in intense training seminars rolled out over six weekends in the course of one year, targeting proposal development, fieldwork and writing phases of the doctorate.[14,15]

The BRIDGES structured cohort approach

We support the idea of enhancing responsiveness of doctoral training through strengthening theoretical, critical thinking and professional skills in South Africa, and offer reflections on another cohort-based approach that could add value. In this Perspective piece, we reflect on our experiences of a structured, cohort-based approach in a 5-year doctoral and postdoctoral capacity strengthening programme at the University of Cape Town (UCT). We suggest that this approach may address some of the institutional, disciplinary and pedagogical concerns raised above. The 'Building Research in Inter-Disciplinary Gender and HIV through the Social Sciences' (BRIDGES) Programme was developed through a 5-year US National Institutes of Health (NIH) D43 grant [2019-2024] housed at the UCT School of Public Health, Division of Social and Behavioural Sciences, in collaboration with the School of Public Health at Brown University in Rhode Island, USA. The grant supported advanced graduate training of PhD and postdoctoral fellows in the research area of gender and HIV. The overall objective of the BRIDGES training programme was to strengthen UCT's capacity to serve as a global leader in gender and HIV social science research by developing the next generation of interdisciplinary social science researchers in gender and HIV. This theme is aligned with both local needs and the HIV research priorities of the NIH across two thematic areas: reducing HIV incidence in adolescent girls and young women and improving the performance of men in the HIV cascade of care.

The PhD fellows in this cohort successfully completed their studies in the allotted period, with no dropouts, and the BRIDGES model offers lessons for strengthening PhD training in South Africa. The BRIDGES Programme is atypical

in the sense that it was a dedicated funded programme for strengthening PhD training through a range of innovative pedagogical and organisational strengthening mechanisms. Even so, it was integrated with existing PhD training infrastructure at UCT and demonstrates potentially feasible elements for strengthening responsiveness of doctoral programmes at UCT and elsewhere in South Africa.

Fellows were recruited into the BRIDGES Programme through a rigorous process that entailed putting out a call for applications with specified eligibility criteria, reviewing the applications and interviewing potential applicants, culminating in selection of a small core cohort of four doctoral and two postdoctoral fellows. All BRIDGES fellows were funded for their academic programme, similar to scholarships provided by the South African National Research Foundation. In addition to funding annual tuition fees, supplementary funding was provided for fieldwork and attending conferences and courses. BRIDGES Programme activities revolved around three specific aims. First, to train a new cohort of PhD and postdoctoral fellows with a specific focus on gender and HIV. Second, to fill critical gaps in the PhD and postdoctoral curriculum by offering several new courses, where none existed at the time. Third, to host an annual BRIDGES Symposium that would allow PhD and postdoctoral fellows access to a wide range of training, networking and professional development opportunities by leveraging extensive local, national and international research networks.

Monitoring and evaluation mechanisms, which were built into the BRIDGES Programme, were helpful in keeping abreast of ongoing processes and adjustments. These included monitoring of individual fellows' progress via annual individual development plans and a signed memorandum of understanding reviewed twice per year. Further, regular monitoring and evaluation of BRIDGES programme activities was done through biweekly meetings with key programme faculty; quarterly meetings were held with co-investigators and annual meetings with the BRIDGES technical advisory committee.

The four distinctive features of the BRIDGES structured cohort approach that we describe here are (1) a continuum of services aligned with dynamic academic and professional development needs, (2) distinct supervisor–mentor roles and cascading supervision, (3) allied partnerships with various stakeholders and (4) cohort-based support mechanisms (Figure 1). These distinctive features were crucial in leveraging the impact of the cohort model.

All the PhD fellows completed their programmes and graduated within the period of the grant; the cohort gained teaching and supervision experience, participated in local and international conferences or webinars, and some submitted articles for publication during their training.

In this Perspective, we focus on four elements of the BRIDGES development of the PhD fellows, although the postdoctoral fellows formed an important part of the supportive peer community.

Activities to support academic and professional development needs

Academic development activities included interventions at key stages that are often bottlenecks in the PhD process. At a pedagogical level, this entailed in-house course offerings such as semester-long PhD proposal development during the first year, courses for data collection and courses for advanced qualitative data analysis after fellows completed data collection. Following the PhD proposal development course, fellows successfully defended their proposals to members of the School of Public Health within their first year of registration. Further, six short courses (Responsible Conduct of Research, Grant Writing, Research Field Methods, Social and Behavioural Theories, Gender Theory, and NVivo Data Management) were offered to strengthen capacity for theoretical and critical thinking and robust methodology. The courses were aligned to the programme objectives and conducted using a hybrid format (in-person and online). The hybrid model ensured continuity during COVID-19 when all learning activities were online and allowed for remote engagement with our overseas partners. Structured academic courses for academic and professional capacity strengthening are generally not part of the formal traditional doctoral training model in South Africa. We suggest that these formal BRIDGES courses were an important vehicle for facilitating the learning and critical thinking skills needed in PhD training.

In addition to semester-long and short courses, other pedagogical activities included regular writing retreats and participation in networking forums including conferences, NIH network meetings and BRIDGES annual symposia. These forums served as opportunities for fellows to define and clarify their research questions earlier in the process and to present and refine emerging ideas in different stages of their research journeys. As part of their academic and professional development, fellows also made use of opportunities to co-teach with faculty on these and other courses.

The annual BRIDGES symposium, a week-long residential retreat, was considered a highlight of the programme. The aim of the symposium was to evaluate the past year of the programme, to provide further academic and professional development opportunities, and to build and consolidate professional and social networks. The symposium was attended by not only BRIDGES fellows and faculty, but also 'friends' of BRIDGES (a broader set of professionals and a few PhD students from other universities or faculties). It was also attended by members of a Cape Town health activist organisation, the Movement for Change

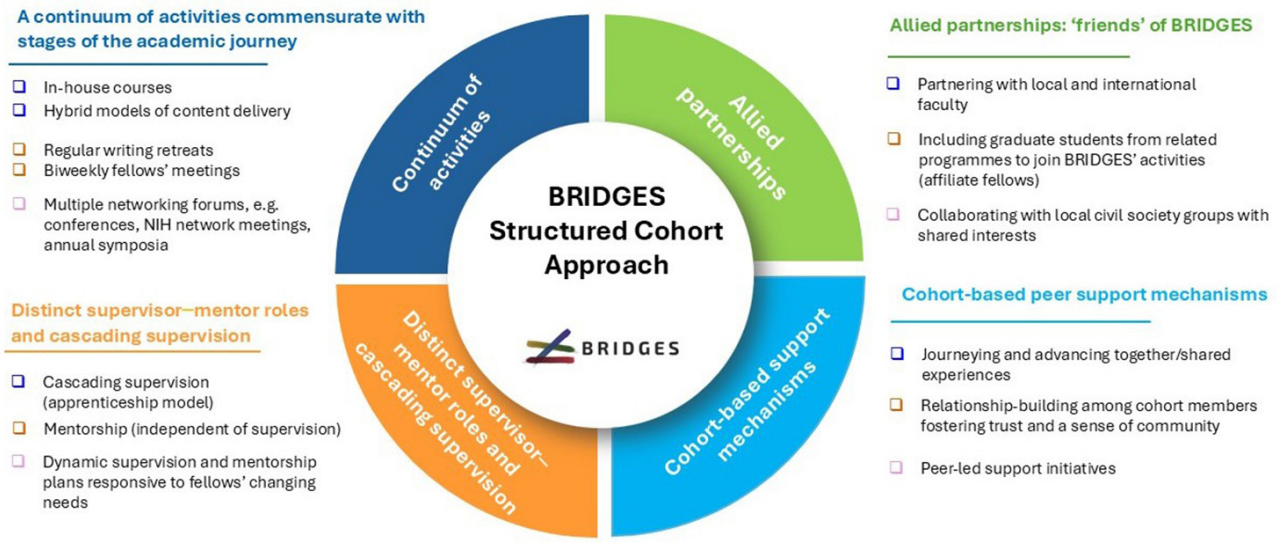


Figure 1: Distinctive features of the BRIDGES holistic structured cohort approach.

and Social Justice (MCSJ), a collaborating partner of BRIDGES that facilitated community–researcher engagements. The symposium theme and activities were usually aligned to support and consolidate work at different stages across the continuum of the PhD journey.

We suggest that these experiential learning and professional networking opportunities are examples of pedagogical responsiveness aligned with the PhD learning journey.

Distinct supervisor–mentor roles and cascading supervision

In the BRIDGES' model, supervision and mentorship were kept distinct in terms of roles, purpose and personnel. Each fellow worked under the guidance of two supervisors whose main focus was on their academic journey, as per the standard supervision model in South Africa. In addition to the traditional one-to-one supervision model, BRIDGES used a cascading, paired supervision model, where experienced supervisors were teamed with less experienced colleagues. While having two or more supervisors is not uncommon in South Africa, in the BRIDGES model, the pairing of less and more experienced supervisors was explicit to create a pipeline for new PhD supervisors, as part of strengthening institutional capacity. As part of their professional development, some BRIDGES' fellows also gained supervision skills through co-supervision of master's students. One fellow had the privilege of graduating in the same ceremony with the master's student whom she co-supervised.

Separate from the supervision team, each fellow also had at least one mentor from the BRIDGES team, or from a broader pool of academics, including from our project partner, Brown University in the USA. The goal of the mentorship was professional and personal support throughout their PhD journey. The mentorship model was dynamic, with fellows choosing their own mentors and having the freedom to change mentors and/or bring in additional mentors based on their changing needs over time. Most fellows chose to have regular monthly meetings with their mentors. Fellows commented on the added and distinct value of mentors in building their personal, academic and professional confidence, including feeling nurtured through tough times and feeling encouraged to take up new professional challenges, for example, seeking out teaching opportunities or collaborations with established researchers. We suggest that the interpersonal support and professional links provided through our mentorship model may have provided connectedness with lived social realities of PhD researchers, while simultaneously enhancing confidence and providing opportunities for professional development.

Allied partnerships: 'Friends of BRIDGES'

The BRIDGES cohort approach stretched beyond the small group of PhD and postdoctoral fellows to enhance capacity of a broader group of researchers across institutions. This entailed working in close partnership with various stakeholders to nurture mutual collaborations. Many BRIDGES activities, including courses, biweekly fellows' meetings, writing retreats and the annual symposia, were open to a broader group of doctoral and postdoctoral students at UCT and other universities in South Africa. This included fellows from underrepresented groups and historically disadvantaged institutions when research interests aligned with BRIDGES' focus areas. For instance, a group of early-career social scientists from under-represented groups and historically disadvantaged institutions outside of UCT participated in a 4-month intensive one-on-one grant writing mentorship to develop an NIH (R21-type) grant proposal on an HIV-related topic of their choice.

Mutual collaborations also involved partnering with our international colleagues at Brown University and local faculty who were actively involved in various aspects of the programme, including co-facilitating courses and mentorship. For instance, colleagues at Brown University hosted the fellows for their 3-week 'mini sabbatical'. This provided opportunities for dedicated writing at the final stages of the PhD and feedback from our Brown University faculty members, as well as opportunities to present their work to an international audience at Brown University forums.

Beyond the academic activities of BRIDGES, we worked closely with MCSJ, a community health activism group. MCSJ was instrumental in fostering cultural responsiveness by facilitating community-engaged research opportunities for some of the fellows. The MCSJ team members participated in several activities, offering hands-on perspectives on the nuances of conducting community-engaged research. This included joint planning for a community-based research feedback meeting, referred to as a Research Indaba, hosted in March 2025, in Gugulethu, a sub-economic township of Cape Town. The theme of the March 2025 Indaba was promoting men's health, building on the success of two previous Indabas in Gugulethu. The Indabas aimed to facilitate closer collaboration between researchers, community organisations and civil society, with a view to promote more accountable and responsive research.[18]

We suggest that forming allied partnerships with our wider network of fellows, faculty and the community group, was a mechanism for strengthening institutional and cultural responsiveness, which enhanced the academic, professional and social/community connectedness of the fellows.

Cohort-based peer support mechanisms

Doing a PhD in the South African context can be a lonely experience, as candidates enrol and work as individuals with their supervisor, without opportunities to engage with other PhD students. Being part of a cohort of PhD students admitted together, with structured support, meant that the fellows proceeded through the same stages of the PhD journey at about the same pace. They also experienced similar opportunities and challenges at about the same time, which meant they were able to support each other through both good and tough times.

Fellows were allocated a dedicated, shared office space, which meant they could be together to work and to socialise. Through regular structured fellows' meetings, they shared their progress with each other and got peer feedback on their work. Fellows often commented on how valuable they found the peer support, and some developed deep personal friendships in the process. This evolved into a self-initiated, fellows-led peer mentorship component, where they set up meetings independent of their supervisors and programme staff to discuss their challenges and get support in a peer-to-peer environment.

During COVID, these cohort-based support mechanisms proved to be particularly important. In a published paper co-authored by the fellows[19], they shared the lessons they learnt during COVID, describing the stressors they experienced, how they coped, including ways they adapted their fieldwork, and the key role of peer support. The shared experience of their mini-sabbatical at Brown University, where they helped each other prepare for sharing their work on an international stage, was noted as a time that cemented their peer support and friendships.

Cohort-based peer support opportunities are scarce in the traditional approach to doctoral training in South Africa. We suggest that in the BRIDGES models, structured and self-initiated opportunities for relationship building among cohort members resulted in a sense of community that promoted connectedness at academic, personal, social and professional levels.

Conclusion

Through a structured cohort-based programme that simultaneously enrolled a selected group of PhD candidates, the BRIDGES programme aimed to strengthen and align academic, pedagogical, personal and professional needs across their PhD journey. The cohort approach described here lends itself to the possibility of multi-layered teaching and learning opportunities, including academic training in research methods and strengthening skills in theoretical and critical thinking. Combining mentorship with the co-supervision approach provided doctoral fellows with more avenues for personal and professional development. Allied partnerships built professional networks, including opportunities for more responsive and enriching researcher–community engagement. Peer support mechanisms provided a sense of community, opening another avenue for supportive personal and academic development, and guarding against a lonely and insular training experience. Finally, continuous monitoring and evaluation of both individual student and programme progress allowed for critical reflections to improve programme responsiveness.

Selecting suitable PhD candidates as part of a cohort and providing more formal and informal pedagogical opportunities, may have the advantage of building supportive academic, personal, social and professional

development opportunities, aligned with their PhD journey (e.g. proposal writing, data collection and analysis methods, thesis writing, dissemination and professional networking). The BRIDGES programme was funded to offer additional pedagogical courses, group support activities and professional development opportunities and may not be fully feasible in every department. Having suitable faculty to supervise students and to offer additional theory and methodological courses contributed to the success of the BRIDGES programme. Expanding standard PhD programmes to provide these additional offerings would likely require building on the current academic infrastructure of the university, with additional financial and human resource investments at the start. This initial investment would build the platform that would then benefit future cohorts of students. The cost is primarily in added person time and added meeting time costs can be kept modest.

To conclude, the cohort and peer support approach, the paired supervision, mentorship, academic and professional development opportunities, allied partnerships and community engagement are mechanisms of the BRIDGES programme worth exploring for strengthening the responsiveness of PhD training in South Africa. This approach requires experienced faculty and leadership, strong partnership collaborations, selecting strong PhD candidates, scholarship funding and active facilitation of enriching academic programming and peer support opportunities. Beyond our nuanced description of our specific cohort-based doctoral programme, our case study builds on previous literature by showcasing the potential value of incorporating cohort-based models to the standard PhD training programmes in South African universities as a means of 'bridging the gap' in doctoral education. While specific approaches will necessarily differ across institutional contexts, as demonstrated in the different cohort-based doctoral programmes featured in this paper, this should not call into question the potential significant value and benefit of cohort-based doctoral programmes in enhancing the quality of training and experiences of doctoral students in South Africa.

Funding

This work was part of the BRIDGES programme, supported by a grant from the Fogarty International Center and US National Institute of Mental Health (NIMH) (D43 TW011308). The content of this paper is solely the responsibility of the authors and does not necessarily represent the official views of the US National Institutes of Health.

Declarations

Leslie Swartz, *SAJS* Editor-in-Chief, is the father of A.S. and had no role in the evaluation or decision-making process of this manuscript; all editorial decisions were made by Chrissie Boughey, *SAJS* Associate Editor. We declare no other competing interests. We have no AI or LLM use to declare. All authors read and approved the final manuscript.

References

1. Cardoso S, Santos S, Diogo S, Soares D, Carvalho T. The transformation of doctoral education: A systematic literature review. High Educ. 2022; 84(4):885–908. https://doi.org/10.1007/s10734-021-00805-5
2. Carter S, Smith K, Harrison N. Working in the borderlands: Critical perspectives on doctoral education. Teach High Educ. 2021;26(3):283–292. https://doi.org/10.1080/13562517.2021.1911098
3. McKenna S, van Schalkwyk S. A scoping review of the changing landscape of doctoral education. Comp J Comp Int Educ. 2024;54(6):984–1001. https://doi.org/10.1080/03057925.2023.2168121
4. Sarrico CS. The expansion of doctoral education and the changing nature and purpose of the doctorate. High Educ. 2022;84(6):1299–1315. https://doi.org/10.1007/s10734-022-00946-1
5. Skopek J, Triventi M, Blossfeld H-P. How do institutional factors shape PhD completion rates? An analysis of long-term changes in a European doctoral program. Stud High Educ. 2022;47(2):318–337. https://doi.org/10.1080/03075079.2020.1744125
6. Jowi JO. Doctoral training in African universities: Recent trends, developments and issues. J Br Acad. 2021;9(1):159–181. https://doi.org/10.5871/jba/009s1.159
7. Manabe YC, Nambooze H, Okello ES, Kamya MR, Katabira ET, Ssinabulya I, et al. Group mentorship model to enhance the efficiency and productivity of PhD research training in sub-Saharan Africa. Ann Glob Health. 2018;84(1): 170–175. https://doi.org/10.29024/aogh.25
8. Ndejjo R, Ssemugabo C, Osuret J, Zziwa EB, Fonn S, Alfvén T, et al. Positioning Africa's public health doctoral students to lead societal transformation and development. BMJ Glob Health. 2022;7(2), e007996. https://doi.org/10.1136/bmjgh-2021-007996
9. Golding J, Naicker S, Shimwooshili-Shaimemanya C, Kapenda H, Mavuru L, Pieniążek MA. Doctoral supervision: A bibliography of African perspectives. Johannesburg: University of Johannesburg; 2025.
10. Burton S, Faller F, Kaniki A, Leitch A, Ntshoe I. Are South African doctoral qualifications educating the thinkers we need? S Afr J Sci. 2022;118(11/12), Art. #14314. https://doi.org/10.17159/sajs.2022/14314
11. Herman C. Expanding doctoral education in South Africa: Pipeline or pipedream? High Educ Res Dev. 2011;30(4):505–517. https://doi.org/10.1080/07294360.2010.527928
12. Ntshoe I, Faller F, Burton S, Kaniki A, Leitch A. Shifting purposes of South African doctoral studies. S Afr J High Educ. 2024;38(3):287–305.
13. Schneider H, Amde W, Carolissen C, Van Wyk B, Lehmann U. Responsive public health doctoral education: Experiences and reflections from a School of Public Health in South Africa. BMJ Glob Health. 2024;9(7), e015095. https://doi.org/10.1136/bmjgh-2024-015095
14. De Lange N, Pillay G, Chikoko V. Doctoral learning: A case for a cohort model of supervision and support. S Afr J Educ. 2011;31(1):15–30. https://doi.org/10.15700/saje.v31n1a413
15. Samuel M, Vithal R. Emergent frameworks of research teaching and learning in a cohort-based doctoral programme. Perspect Educ. 2011;29(1):76–87. https://doi.org/10.38140/pie.v29i3.1697
16. Motshoane P, McKenna S. More than agency: The multiple mechanisms affecting postgraduate education. In: Bitzer E, Albertyn R, Frick L, Grant B, Kelly F, editors. Pushing boundaries in postgraduate supervision. Stellenbosch: SUN MeDIA; 2014. p. 199–214.
17. Leitch A, Burton S, Ntshoe I, Kaniki A, Ralebipi-Simela R. National review of South African doctoral qualifications 2020-2021: Doctoral degrees national report. Pretoria: Council on Higher Education; 2022.
18. Kannemeyer N. MCSJ-UCT Gugulethu research indaba on men's health: Evaluation report. Cape Town: University of Cape Town; 2025.
19. Githaiga JN, Späth C, Sicwebu N, Perera S, Tolla T, Leon N. Critical reflections on conducting qualitative health research during COVID-19: The lived experiences of a cohort of postgraduate students in a South African university. Int J Qual Methods. 2023;22, e16094069221148406. https://doi.org/10.1177/16094069221148406