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license**AN EXAMINATION OF MENTAL HEALTH AMONG  
STUDENTS AT THE UNIVERSITY OF  
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2000, South Africa\*Correspondence E-Mail: [tshidi.lelaka@wits.ac.za](mailto:tshidi.lelaka@wits.ac.za)DOI: <https://doi.org/10.30598/baileofisipvol3iss3pp678-689>**ABSTRACT**

*Mental health among university students is a significant and growing concern, as students are often exposed to academic pressure, financial strain, social adjustments, and personal challenges during their studies. These stressors increase students' vulnerability to mental health conditions such as stress, anxiety, depression, and burnout, which may negatively affect academic performance, social functioning, and overall well-being. Although many universities provide mental health support services, these services are frequently underutilized due to factors such as stigma, limited mental health awareness, cultural and religious beliefs, fear of judgment, and concerns regarding confidentiality. This study employed a qualitative research approach guided by a phenomenological research design to gain in-depth insights into students lived experiences of mental health and mental healthcare utilization. Data were collected through face-to-face semi-structured interviews, with participants selected using purposive and snowball sampling techniques. The data were analysed thematically. The findings revealed five key themes: students' understanding of mental health, perceived causes of mental health challenges, the impact of mental health on students' academic and personal lives, doubts regarding access to mental healthcare services, and suggested strategies to improve mental health service utilization. The study concludes that promoting mental health literacy, reducing stigma, and ensuring accessible, compassionate, and student-centered support services are essential for improving mental health outcomes. Furthermore, strengthening institutional policies and support structures is critical in fostering an inclusive university environment that prioritizes student well-being and supports academic success.*

**Keywords:** Academic Stress, Anxiety, Depression, Mental Health Literacy, University Students

**INTRODUCTION**

World Health Organization (WHO) (2022) describes mental health as the capability of individuals to realize their own potential, managing the demands of everyday life, producing useful work, and giving back to their community. On the other hand, Galderisi (2024) defines mental health as each person's capacity to experience emotions, think, and act in ways that enhance enjoyment of life and resilience in facing challenges. It can affect the daily functioning of individuals. Additionally, mental health also encompasses the importance of cultural respect, equality, social justice, connection, and personal dignity. It is defined by an intense sense of emotional and spiritual well-being. (Galderisi, Heinz, Kastrup, Beezhold & Sartorius, 2015). WHO

has reported an increase of the cases of mental health disorders to one billion, with depression and anxiety accounting for 280 million and 301 million, respectively (Cuijpers et al., 2023). Gender has a notable substantial impact on the prevalence of mental disorders, with depression and anxiety being more common in women, while attention-deficit hyperactivity disorder (ADHD) and conduct disorder are more prevalent in men (Moitra et al., 2023). Despite these alarming statistical reports, accessing the mental health services, especially for the low- and middle-income countries remains a great challenge due to lack of funds.

In Sub-Saharan Africa, the prevalence of mental health disorders is evident, with common conditions such as major depressive disorder (MDD) affecting 4.5% of the population, generalized anxiety disorder (GAD) at 3.5%, post-traumatic stress disorder (PTSD) at 8%, and substance use disorders (SUD) at 1.3% (Dickens Akena et al., 2023). Despite the continuously spiking numbers of these mental health disorders, there still exists a huge gap when it comes to access to mental healthcare services in Sub-Saharan Africa. This gap is primarily due to a shortage of mental health professionals, frequent medication stock-outs, and insufficient funding allocated to mental health services (Dickens Akena et al., 2023). For example, in 2020, Africa allocated less than one dollar per person to mental health, whereas Europe spent \$46.49 per capita (Mostert et al., 2024). This significant disparity in investment contributes to the higher suicide rates observed on the continent. Additionally, the limited availability of mental health services, with an average of 0.1 psychiatrists per 100,000 population, similarly raises concern considering the rising number of mental health disorders within the African continent (Mostert et al., 2024).

The WHO has urged African governments and the private sector to prioritise mental health and increase funding and necessary investments (Mostert et al., 2024). Despite these calls, South Africa continues to face significant mental health challenges. According to Sapien Labs' Mental State of the World Report, South Africa ranks near the bottom globally in terms of mental well-being, placing second-to-last on the Mental Health Quotient out of 64 countries. It also has the highest percentage of individuals experiencing significant stress or distress within this group (Morar et al., 2024). A large-scale national survey involving 28,268 students across 17 South African universities indicated that, within a 30-day period, 16.3% of students experienced mood disorders, 37.1% faced anxiety disorders, and 24.4% had suicidal thoughts (Bantjes et al., 2023). If not addressed, these mental health disorders can impair functioning, leading to academic failure and an increased risk of suicide. Despite the availability of evidence-based treatments, previous studies indicate that only a small proportion of students with mental illnesses receive essential care.

Mental health challenges in South Africa are not limited to students. Lochner (2021) stresses that one-third of mothers living in Cape Town's low-income and informal settlements suffer from postnatal depression. Similarly, half of all pregnant women in KwaZulu-Natal show signs of depression (Lochner, 2021). In South Africa, human resource challenges have a significant impact on the delivery of mental health services (Morar et al., 2024). The country's public sector employs an average of only 0.31 psychiatrists per 100,000 people, with a notable disparity in

availability between rural and urban areas (Sorsdahl et al., 2023). This unbalanced ratio between mental health professionals and service users leads to an increased number of undiagnosed individuals with mental health issues. Furthermore, mental health professionals are disproportionately concentrated in urban areas, leaving rural areas with minimal to no access to mental health services. Moreover, primary, and community-based mental health systems face financial constraints due to underfunding, which limits their ability to deliver proper mental healthcare services (Shisana et al., 2024). Additionally, due to the limited number of staff, mental health professionals in South Africa are often faced with high workloads, which leads to burnout and a reduced quality of care and services. Therefore, this study seeks to examine mental health among students at the University of the Witwatersrand.

This study was guided by the social learning theory. Albert Bandura's social learning theory posits that individuals learn through observation, imitation, and modelling (Mukhalalati et al., 2022). It highlights the influence of social interactions and the environment in shaping behaviour and attitudes (Lyons & Berge, 2012). In this study, social learning theory is especially useful for understanding how students' attitudes and behaviours toward mental health services are shaped by observing their peers, faculty members, and other influential figures. For example, if students witness their peers avoiding or criticizing mental health services, they may adopt similar behaviours of avoidance. Social learning theory also emphasizes the role of reinforcement in shaping behaviour. In this context, students may encounter negative reinforcement, such as social stigma or fear of being judged, which discourages them from seeking mental health services. On the other hand, the absence of positive reinforcement, such as seeing peers praised for seeking help, can also contribute to the underutilization of services. Negative social influences, such as stigma, can delay treatment and exacerbate mental health issues, while positive social influences can encourage help-seeking behaviour and improve mental health outcomes (Shisana et al., 2024). Guided by social learning theory, this study examines how social and environmental factors influence mental health among students at the University of the Witwatersrand. The theoretical framework emphasizes how students' experiences and decisions are shaped by interconnected systems and social interactions within the university context.

## RESEARCH METHOD

This study adopted a qualitative research approach to examine mental health among students at the University of the Witwatersrand. A phenomenological research design was employed to gain in-depth insights into students' lived experiences. The study was conducted at the University of the Witwatersrand in Johannesburg, South Africa. The population comprised registered students at the university, with a purposively selected sample of six full-time students from various degree programmes within the Faculty of Humanities. Participants were in their second year of study or above and aged 18 years or older. Purposeful and snowball sampling techniques were used to recruit participants who could provide rich and relevant data.

Data were collected through semi-structured interviews, allowing participants to share detailed personal experiences while ensuring consistency across interviews. Interviews were audio-recorded, anonymised, and transcribed for analysis. Thematic analysis was used to analyse the data, following a six-phase framework to identify patterns and key themes across participant responses. To ensure rigour, the study applied the four criteria of trustworthiness: credibility, transferability, dependability, and confirmability. Ethical approval was obtained from the University of the Witwatersrand, and all ethical principles, including informed consent, confidentiality, and participant well-being, were strictly upheld throughout the research process.

## RESULTS AND DISCUSSION

### Overview of the Results and Thematic Analysis

The study included participants aged 18 and older, with a specified range extending beyond 50 years. However, all participants in the study were between 18 and 29 years old. Participants belong to various tribes and speaking the following languages: two (2) were Venda, two (2) were Xhosa, one (1) was Zulu whilst the other one (1) was Southern Sotho. Participants were from the following study levels: two (2) at second year level of study, two (2) at third year level of study, and the last two (2) were seniors, at fourth year level of study. They come from the following fields of study: One (1) has enrolled for Bachelor of Digital Arts (BA), one (1) enrolled for Bachelor of Education, one (1) enrolled Bachelor of Law/BA Law, one (1) enrolled for social work degree, and the remaining two (2) were enrolled for Bachelor of Arts in Psychology/BA Psychology.

A total of six students took part in the study, and through data analysis, the following themes were identified: understanding mental health, causes of mental health issues, the impact of mental health on students, doubts regarding accessing mental healthcare services, and suggested ways to improve mental health service utilization.

### **Theme 1: Limited understanding mental health**

Mental health is reported to be important from childhood to adulthood. We all have a mental health and need to take care of such. However, the word mental health means difference things to different students while some do not believe in the importance of mental health. There was some limited understanding regarding mental health, and this is supported by the below quote:

*"I could say it is a complex concept... It could be mental ill health. It could be mental health where there's wellness involved."*

*"Some participants are under the impression that mental health does not exist."*

*"A lot of them feel like it doesn't exist...in their head, it's just like, everyone has stress, so what's wrong with you? So, they don't believe it's something that exists."*

*"Mental health has not been a concept that is dealt with. There is not deep delve on mental health. Growing up, you, you are just told that. No, you cannot be feeling this way. You*

*are just making excuses. There is no time for bad days. There are no such things as mood swings. There are no such things as depression. You are just ill mannered. I can say those are like traditional views of mine."*

This finding relates to the findings of other authors on the significant barrier to the utilisation of mental health services due to the lack of knowledge or limited awareness about mental health. Fusar-Poli et al. (2022) highlight that mental health literacy remains a challenge at a global scale, more particularly in low- and middle-income countries. The study found that individuals with low mental health literacy often fail to recognize symptoms of common conditions like depression or anxiety, leading to prolonged suffering without intervention. In South Africa, Hugo et al. (2022) found that ignorance about mental health services and their effectiveness leads to low help-seeking behaviour. Many individuals, especially in rural areas, are unaware of the available mental health services or are unsure of how to access them. This limited knowledge prevents early intervention, leaving conditions untreated and allowing symptoms to worsen over time.

### **Theme 2: Causes of mental health**

It is evident that mental health issues do not arise in isolation nor from a single cause; rather, they result from a combination of interrelated factors that negatively affect students' lives. These factors include cultural influences and the ways in which they shape social media engagement, the adoption of unhealthy habits, exposure to negative comments from others, and experiences of anxiety. Additional challenges such as unemployment, low self-esteem, and persistent social comparison further contribute to students' mental health difficulties. These issues are illustrated in the following excerpts:

*"I do believe that the kind of the things that we do, like the culture, which will only contribute to mental health a lot. And that a lot of the things, I mean mental illness, mental health a lot, and the culture can influence us badly, influence it even positively."*

*"... people spend a lot of time on social media, and unhealthy eating habits, and unstable work that causes anxiety, and anything like especially when you're like in an arts degree, like there's so much anxiety surrounding not getting a job or whatever."*

*"...every time I am on social media, there is a lot of people doing a lot of things, and I find myself comparing myself sometimes. And I think that comparison, when it's not dealt in properly, when it's not done in a way that, oh, I'm comparing myself and I'm going to do better, it's more like, oh, I'm comparing myself, I'm totally useless or something, my life is not looking like that. Then it puts you in a mental state, and then you look at everything from that perspective, and that comparison puts you in that state, and I feel like that causes a lot of depression."*

The above is supported by different authors that indeed mental health issues do not have a single cause, it is a result of interplay of various systems in a person's life as per the systems theory (Lai & Lin, 2017). According to Williams (2022) epigenetics play a role in influencing the way that a person responds to environmental factors and may affect the

likelihood of that person developing mental disorders and this could relate to diverse cultures, engaging in social media and comparing the self with others. For example, prolonged stress can alter genes related to stress response, increasing the risk of anxiety and depression (Stoewen, 2022). Additionally, for some first-year students, the university environment can be filled with new experiences, often becoming overwhelming and presenting unexpected challenges, resulting in engaging social media with no limits. These students might not possess the psychological resilience to manage such conditions and being resilient (Siddique, et al.). Consequently, these stressors can lead to various mental health issues, with the most common being depression, anxiety, intense stress, and suicidal ideation (Vidourek, King, Nabors & Merianos, 2014). In cohort study, South African students have been deemed to be at an elevated risk of experiencing depression (Francis, 2023). This covers an estimated 24,2% of students experiencing mild depression, 12,4 experiencing moderate to severe depression and a global average of 21% of students to be suffering from major depressive disorder (Francis, 2023). In University of the Witwatersrand specifically, the factors leading to students experiencing depressions are sociodemographic factors such as age, race, area of residence, type and conditions of the environment, level of education, year of study, religious beliefs, and other factors such as financial difficulties, academic performance, exam-related stress, and changes in social roles and relationships (Croock et al, 2023).

### ***Theme 3: Impact of mental health on students***

Participants highlighted significant consequences of not accessing mental health services, including a worsening of mental health symptoms, academic struggles, and social isolation. The absence of adequate mental health support contributes to feelings of distress, loneliness, and in some cases, hopelessness. Furthermore, the participants noted that mental health challenges often accumulate and negatively impact various areas of life, particularly academic performance, social relationships, and overall well-being. The narratives suggest that untreated mental health issues can lead to severe consequences such as academic exclusion, self-isolation, and even substance abuse as individuals struggle to cope with stressors. The following quotes support the reported concerns below:

“You continue to struggle, and that can get you behind on work, you are at risk of, like, failing. You can detach yourself from people, your family, your friends.”

“You won't be as social...you'll be wanting to, like, stay by yourself a lot of the time.”

"It takes quite a severe turn...it accumulates and then it affects your academics then you start getting excluded or marks are low."

“I think it does affect them socially because you end up being isolated and being alone. And you feel like you're going through a lot because you are alone.”

“...it brings a sense of hopelessness. And that is why we get most individuals that end up just dropping out because of the pressure... I can say the effects are much visible than people may see may think. In one instance a classmate has even resorted to coming to class while drunk

because it was just too much for him.”

“Not accessing the available mental health counselling resources has an enormous impact... For some they move into a state of constant distress, anxiety, and worry...”

The impact of inaccessible mental health services on academic and social outcomes is widely documented in the literature. According to Kovess-Masfety et al. (2016), untreated mental health issues can lead to poor academic performance, social withdrawal, and heightened dropout rates among university students. Studies show that the lack of mental health resources can exacerbate feelings of isolation and distress, often resulting in detrimental behaviours like substance use as coping mechanisms (Oswalt et al., 2020). Additionally, a study by Guo et al. (2022) demonstrates that poor mental health contributes to increased rates of violence and social dysfunction, underscoring the need for accessible mental health services to address these broad social impacts.

When it comes to academics, Grotan, Sund & Bjerkeset (2019) posits that mental health issues in universities may lead to poor performances. This is because students that are experiencing poor mental health tend to struggle with forming positive relationships with their educators, thus making it difficult for them to consult when they need academic assistance from their educators. Literature widely reveals that students who struggle with their mental health or who have mental health disabilities, whether they receive treatment, have poorer grade point averages (GPAs) and greater dropout rates than their peers. Furthermore, students with mental health concerns are more likely to acquire lifelong mental disorders because these challenges can impede the timely acquisition of critical life skills required for success (Zada et al., 2021). Furthermore, poor mental health leads to less motivation of students to do their schoolwork and may lead to difficulties with concentrating and following the school rules (Agnafors, Barmark & Sydsjo, 2020).

#### ***Theme 4: Doubts for consultations to access mental healthcare services***

When faces with challenges that can affect or threaten one’s mental health. It is important to consult and get the appropriate support. However, some students reported doubts and concern for not consulting to access mental health services. This is because they have different perceptions, beliefs, and cultures towards mental health.

"South Africa is such a cultural environment. Most people believe in culture... You just must accept life as it is. Because culturally, we believe that things happen for a reason."

In South Africa, many people link mental health issues to supernatural causes, such as witchcraft or spiritual punishment, rather than treating them as medical conditions (Moagi et al., 2022). This misunderstanding is firmly ingrained in cultural ideas and traditional behaviours, resulting in discrimination and social isolation of those with mental illnesses.

Some participants confirmed that mental health is not well openly discussed and this could be due to several reasons such as stigma. This is supported by the below quote:

“It has a stigma around it; we do not really talk about it that much. We all want to be

okay... the world expects you to be okay.”

Besides, it is important and expected that mental health care providers be helpful, professional, friendly, kind, compassion and sensitive. But some participants reported that some staff are not helpful in supporting students by presenting themselves with mental health challenges. This is supported by the following except:

"Students do complain with the staff, they're not very nice, they're not very helpful."

These finding relates to Kheswa (2022) who highlights that individuals with mental health issues in South African communities are frequently labelled as "crazy" or "possessed," which results in social isolation. Furthermore, a research study conducted at a Midwestern university revealed a notable amount of fear of stigma related to seeking help for mental health concerns, particularly among male students (Vidourek et al., 2014). Furthermore, Corrigan et al. (2021) indicate that self-stigmatization, where individuals internalize negative stereotypes about mental illness, presents an additional challenge.

#### ***Theme 5: Suggested ways to improving mental health service utilization***

Students suggested that improving mental health service utilization could involve more compassionate and empathetic attitudes from mental health professionals. They expressed that services with an environment of understanding might help individuals feel more comfortable seeking assistance. The participants also recommended including group counselling sessions where students could share experiences with peers, fostering a sense of community and mutual support. For some students, integrating spiritual practices, such as prayer and faith-based counselling, was suggested as a means of connecting with mental health resources in a way that aligns with their personal beliefs and values.

“Maybe if the people showed a little bit more compassion and understanding towards them...”

“Maybe if there were also options for group settings where people could talk to themselves...you realize, oh, you're not alone, and there is hope.”

"Maybe offering prayers, because I'm Christian, obviously, so I know that prayer works. Counselling services that include the word of God like that."

“I think they should expand their availability, and go to off-campus residences, and send students from off-campus residences through their management, yeah.”

Research supports the value of compassionate care and its positive effects on mental health outcomes. For instance, compassionate communication has been shown to improve client engagement in mental health services, fostering a therapeutic environment that encourages openness (Sengupta & Saxena, 2023). Group counselling settings have also been found beneficial in mental health support, as they promote a sense of community and help individuals realize that they are not alone in their experiences (Pappas, 2023). Additionally, spirituality and religion can play a positive role in mental health services, particularly for those who view faith as an essential part of their coping strategies. Integrating spiritual elements into counselling can provide

emotional comfort, reduce stigma, and enhance resilience (Brennan, 2021).

## **CONCLUSION**

This study examined mental health among students at the University of the Witwatersrand and identified a combination of factors influencing students' mental well-being. Five key themes emerged: students' understanding of mental health, perceived causes of mental health challenges, the impact of mental health on students' lives, concerns regarding access to mental healthcare services, and suggested strategies to improve the utilization of mental health services. These findings highlight the complexity of mental health experiences among university students and the need for comprehensive support systems. Mental health is essential for overall well-being, particularly for students who often face overwhelming academic demands and unexpected personal and social challenges. When adequate support is lacking, students may experience increased stress, anxiety, depression, and other mental health difficulties, which can negatively affect academic performance and quality of life. The study further revealed that limited mental health knowledge, as well as cultural, religious, and social beliefs, can discourage students from accessing available mental healthcare services. Based on these findings, the study recommends increased mental health awareness and education initiatives to improve students' understanding of mental health and promote early help-seeking behaviors. Universities should strengthen support structures by expanding mental health resources and ensuring services are accessible, efficient, and student centered. Efforts to destigmatize mental health are crucial, including fostering an environment where mental health concerns are openly discussed and normalized. Additionally, training healthcare staff to be friendly, compassionate, and culturally sensitive may significantly improve students' willingness to seek support. Collectively, these interventions can contribute to improved mental health outcomes and overall student success. The study presented with limitations which included active participation of participants when consulted. Post scheduling the appointment with participants, the researcher was struggling to get participants due to their busy schedules as some faced submission of assignments, preparing for tests including their upcoming various assessments. Furthermore, those who were available for the interviews changed their times and days while others changed their minds regarding participating with clear explanation while given and seemed uninterested.

## **ETHICAL STATEMENT AND DISCLOSURE**

This study received ethical clearance from the University of Witwatersrand, and the clearance number is Protocol Number SW24/06/01. All the ethical consideration were observed during the process of research. The authors observed no potential conflict of disclosure.

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