Commentary

Therapy Helps, but the Root Cause of South Africa's Mental Health Crisis is Structural

Edmund Terem Ugar

University of Johannesburg, Johannesburg, South Africa

In August 2022, the World Health Organisation (WHO) reported that Africa has one of the highest suicide rates globally. While the worldwide average stands at 9 per 100,000 people, Africa records 11 per 100,000. Among African men, the rate rises to 18 per 100,000, far above the global male average of 12.2 (WHO, 2022). Similarly, the 2023 World Happiness Report (WHR) revealed that of the world's 24 least happy countries, 17 are African (WHR 2023). The above happiness statistics can be understood from the socioeconomic statuses of many African countries, which are considered the poorest continent. Bringing this closer to home, South Africa ranks among the top ten countries with the highest suicide rates. In 2019 alone, 13,774 suicide deaths were recorded, 10,861 of them men (cf. Ugar & Klaas, 2025). By 2021, there had been a rise to 18 per 100,000, well above the global male average of 12.2 per 100,000, underscoring the urgency of addressing the root causes of these trends (Ugar & Klaas, 2025). This increase could be explained using the rationale that I provide below.

In a country where mental health challenges are both widespread and escalating, sustained dialogue is critical. This commentary makes a modest argument: while therapy is valuable, it cannot serve as the primary or sustainable solution to South Africa's mental health crisis. Instead, interventions must focus on socio-economic welfare that restores dignity by equipping citizens with the capabilities to live meaningful and dignified lives. Therapy should be seen as support rather than a remedy for problems rooted in structural deprivation (cf. Ugar & Klaas, 2025). Two hypothetical scenarios help illustrate this position.

Case One: Malusi and the Weight of Economic Insecurity

Consider Malusi, a 29-year-old migrant from eThekwini to Egoli, searching for better opportunities. Neighbours found him withdrawn, anxious, and severely depressed, having stayed indoors for weeks. They encouraged him to seek therapy. Yet his story reveals a deeper problem. Malusi was retrenched at the start of the COVID-19 pandemic and has been unemployed for four years. He holds a degree in Electrical Engineering from the University of KwaZulu-Natal and grew up in a generation promised that education would guarantee success. Instead, despite his qualifications, he faces unemployment, eviction, and an inability to support his family, surviving only through a small vegetable business.

Should therapy be the first response to Malusi's mental crisis, when the root of his despair is economic? Moreover, since therapy itself comes at a cost, how could Malusi possibly afford regular sessions? His plight reveals a fundamental misalignment between the solutions offered and the structural drivers of distress. Becky Inkster and Akeem Sule (2023), neurologists and digital mental health advisors from Cambridge University, illustrate the connections between financial stress and mental health by analysing hip-hop lyrics. They show how artists, particularly men in the US and UK, narrate the psychological toll of poverty, economic pressure, and hopelessness, often culminating in depression and suicide. Their findings resonate with the South African context, where economic insecurity translates directly into heightened anxiety, hopelessness, and suicide risk.

This is not an isolated observation. South Africa's unemployment rate currently stands at 32.9 per cent, while youth unemployment (ages 15–34) has risen from 36.9 per cent in 2015 to 41.6 per cent in 2025 (Stats SA, 2025). Inflation further strains households already stretched beyond capacity. In a society where men are often expected to provide for families, economic paralysis leaves many feeling broken and emasculated. Therapy cannot resolve the despair stemming from an inability to meet these basic needs, which Maslow, in the Maslow Hierarchy of Needs, termed the lower-order needs of survival.

A 2022 University of the Witwatersrand study on urban migrants supports this view. It found that while poverty is acute in rural areas, urban youth are more prone to depression, partly due to heightened social and economic pressures (Wits 2022). Migrants, like Malusi, often move to cities with hopes of economic upliftment, only to face limited opportunities and growing obligations from families back home. When these expectations collapse, mental crises follow. Therapy may provide temporary relief, but it cannot substitute for economic security.

Case Two: Nqobile and the Threat of Violence

Now consider Nqobile, a 23-year-old student living in Johannesburg's Westdene area. Two days before she became deeply anxious and withdrawn, she received news that her close friend had been raped and murdered; her body was later found in a severe condition, owing to a possible extreme violence that she could have suffered. For Nqobile, this was not the first of such stories, but its proximity to her life intensified her fear. Feeling unsafe, she confined herself to her apartment for weeks. Family and friends advised her to seek therapy.

De-centre: Journal of Interdisciplinary Studies (DJIS) 1(1) 2025
ISSN: 3105-3300

Published: 2 September 2025

Here, I partly agree. Therapy can help Nqobile process her trauma. Yet it cannot resolve the underlying problem: endemic violence against women and the failure of the state to provide adequate protection. If femicide and sexual violence remain rampant, women like Nqobile will continue to live in fear, no matter how many therapy sessions they attend.

The statistics are stark. In 2017, South Africa recorded 2,407 femicide cases, of which 1,033 involved intimate partners (Abrahams et al., 2022). In the 2022/2023 fiscal year, 53,498 sexual offences were reported, including 42,780 rape cases (South African Police Service 2023; Oosthuizen et al., 2024; Statista, 2025). This crisis is not new. As Loots and Dunseith (2008) and Vetten et al. (2008) argued, the criminal justice system has long been overwhelmed by sexual violence. Yet only 50.5 per cent of reported rape cases result in arrests. Of those, 42.8 per cent are charged in court, 17.3 per cent go to trial, 6.2 per cent end in conviction, and a mere 4.1 per cent lead to imprisonment.

For women like Nqobile, these figures deepen the sense of insecurity and despair. Therapy, though useful for coping, cannot substitute for an effective security system or systemic reform. The state must provide safety through a functioning justice system and responsive policing, not outsource the problem to mental health professionals ill-equipped to address structural violence.

Towards a Capability-Centred Response

Both Malusi and Nqobile's cases demonstrate that therapy alone cannot restore dignity when the root causes of distress are structural injustices. Philosopher Martha Nussbaum's (2002) capability theory is instructive here. She argues that justice requires providing individuals with sufficient "capabilities" to live dignified lives. Applying this framework, Malusi requires economic opportunities to utilise his skills, be economically buoyant, and support his family. Nqobile requires safety and protection against violence from the state and the community. Without these basic capabilities, therapy remains a palliative rather than a sustainable solution.

South Africa's mental health crisis cannot be divorced from its socio-economic realities: high unemployment, systemic inequality, and pervasive gender-based violence. Addressing these requires interventions at the level of economic policy, labour markets, education systems, and criminal justice reform. Therapy should serve as an important complement, but not as the centrepiece of intervention.

Conclusion

Mental health challenges in South Africa are intensifying, reflected in high suicide rates, widespread depression, and rising anxiety. Yet too often, therapy is presented as a one-size-fits-all solution, masking the socio-economic and structural roots of despair. The hypothetical cases of Malusi and Nqobile demonstrate that poverty, unemployment, and violence drive much of the crisis.

A sustainable response must therefore focus on restoring dignity through socio-economic welfare and structural reform. As Nussbaum's capability approach suggests, justice, which affords us with dignity, lies in providing people with the opportunities to live secure, meaningful, and flourishing lives. Therapy should remain part of the toolkit, but only as support. True solutions lie in creating the economic and social conditions that allow South Africans not merely to survive, but to thrive.

References

Abrahams, N., Mhlongo, S., Dekel, B., Chirwa, E., Ketelo, A., Lombard, C., Mathews, S., Labuschagne, G., Martin, L. J., Manganyi, T., Gounden, T., Majola, T., Mabhida, M., Variava, T., Ramsoomar, L., Shai, N., Matzopoulos, R., Prinsloo, M., Vellema, J., Ntsele, S., Saayman, G. and Jewkes, R., 2022. Decrease in Femicide in South Africa: Three National Studies Across 18 Years, Research brief: South African Medical Research Council [Online]. Available: https://www.samrc.ac.za/sites/default/files/attachments/202209/DecreaseFemicideSouthAfricaResearchBrief.pdf

Inkster, B. and Sule, A., 2023. Money, mental health, and hip-hop. Seattle: Kindle Direct

Nussbaum, M., 2002. Capabilities as fundamental entitlements: Sen and social justice. Feminist economics, 9(2-3):33-59. https://doi.org/10.1080/1354570022000077926

Oosthuizen, M., Martin, L., and de Villiers, D., 2024. Towards a gender-based violence index for South Africa: An overview and proposed way forward. Cape Town: University of Cape Town.

Statista, 2025. Number of sexual offenses in South Africa in 2022/2023, by crime. [Online]. https://www.statista.com/statistics/1362370/number-of-sexual-offenses-in-south-africa-by-crime/

Stats SA., 2025. South Africa's Youth in the Labour Market: A Decade in Review. [Online]. South Africa's Youth in the Labour Market: A Decade in Review | Statistics South Africa

Ugar, E. and Klaas, Z., 2025. Why therapy alone won't resolve men's mental health problems caused by socio-economic stressors. M&G: https://mg.co.za/thought-leader/opinion/2025-07-17-therapy-alone-wont-resolve-mens-mental-health-problems-caused-by-socio-economic-stressors/

University of Witwatersrand, 2022. Mental health in SA is at shocking levels but people are not seeking help. [Online]. 2022-11 - Mental health in SA is at shocking levels but people are not seeking help - Wits University

Vetten, L., Jewkes, R., Sigsworth, R., Christofides, N., Loots, L. and Dunseith, O., 2008. Tracking justice: The attrition of rape cases through the criminal justice system in Gauteng. [Online]. Available: http://www.csvr.org.za/docs/tracking_justice.pdf

WHO, 2022. Suicide in Africa: A neglected reality. [Online]. iAHO_Suicide_Regional_Fact_sheet_August2022.pdf

WHR, 2023. World Happiness Report. [Online]. World Happiness Report 2023 | The World Happiness Report

About the Author

Edmund Terem Ugar is a philosopher with a speciality in the ethics, policy and regulations of artificial intelligence (AI), philosophy of medicine and public health, and social and political philosophy (from the relational and liberal traditions). He teaches Philosophy of Technology/Ethics of AI at the University of Johannesburg and Philosophy at Northwest University, South Africa.