



CM ADVOCATES LLP



NOT JUST THE TATTERED CLOTHES: *Rethinking Mental Health*

For many of us, it is still the same picture we have carried for years: someone wandering the streets, dishevelled, dressed in tattered clothes, talking to themselves and disconnected from reality.

It is perhaps one of the greatest misconceptions of our time.

Over the past few months, I have had the privilege of attending several trainings and discussions on mental health. Like many people, I initially approached these conversations from the perspective of awareness. But, as is often my habit, awareness was not enough. I wanted to understand what mental health really means beyond the slogans, hashtags and awareness months.

The deeper I looked, the more I realised that mental health is something every single one of us possesses and, at some point in our lives, every one of us will need to protect.

Mental health is about our emotional, psychological and social wellbeing. It influences how we think, how we make decisions, how we handle pressure, how we build relationships, how we parent, how we lead organisations, how we serve our clients, and ultimately, how we participate in our communities.

In other words, mental health is not simply about mental illness.

It is entirely possible to be the most accomplished professional in the room while silently battling burnout. To be the smiling parent carrying overwhelming anxiety. To be the university student struggling with depression. To be the entrepreneur who has built a thriving business but is quietly collapsing under financial pressure.

The absence of visible illness is not always the presence of mental wellbeing.

As a lawyer, my curiosity naturally led me to ask a different question.

What does the law have to do with mental health?

The answer surprised me.

Mental health quietly runs through many areas of legal practice, often without us recognising it.

Family courts determine guardianship where an individual can no longer manage their own affairs because of mental incapacity. Employment disputes increasingly involve workplace stress, burnout, psychosocial safety and reasonable accommodation. Questions of informed consent arise in healthcare. Criminal courts grapple with issues of criminal responsibility and fitness to plead. Succession disputes may turn on testamentary capacity. Child protection cases frequently involve trauma and the psychological wellbeing of both children and caregivers.

Behind each of these cases lies a fundamental legal question: how do we protect vulnerable persons while preserving their dignity, autonomy and human rights?

Kenya's legal framework has increasingly embraced a rights-based approach to answering that question.

The Constitution of Kenya recognises every person's inherent dignity, guarantees equality and freedom from discrimination, protects the right to the highest attainable standard of health, and safeguards the rights of persons with disabilities. The Mental Health Act has progressively shifted our legal system away from viewing mental illness as something to be hidden or institutionalised towards recognising recovery, rehabilitation and community inclusion.

That phrase community inclusion has particularly stayed with me.

Recovery does not happen in isolation.

It happens when workplaces create psychologically safe environments. When schools recognise that emotional wellbeing is part of learning. When counties invest in accessible community mental health services. When employers understand that seeking help should never be viewed as weakness. When families replace stigma with compassion.

When communities see persons living with mental health conditions not as problems to be managed, but as citizens with rights, talents and aspirations.

Good governance therefore has a direct bearing on mental health.

County governments decide whether mental health services are adequately funded. Employers determine whether workplace policies support employee wellbeing. Public institutions shape whether access to justice, healthcare and social protection is responsive to people experiencing psychosocial challenges.

The law provides the framework, but governance determines whether those rights become reality.

One aspect that deserves far greater attention is gender.

Mental health is not gender neutral.

Women and girls disproportionately shoulder unpaid care responsibilities, experience higher levels of gender-based violence, and often bear the invisible emotional labour within families and communities. Men and boys, meanwhile, continue to face societal expectations that discourage vulnerability and emotional expression, contributing to delayed help-seeking, substance abuse and disproportionately high suicide rates. Children, older persons and persons living with psychosocial disabilities each face unique challenges that require tailored legal and policy responses.

A truly inclusive mental health system must therefore be gender-responsive, age-responsive and disability-inclusive.

The more I learn, the more convinced I become that mental health should not be discussed only in hospitals or psychology classrooms. It belongs equally in boardrooms, county assemblies, courtrooms, schools, marketplaces, workplaces and Parliament. It is a governance issue. It is a development issue. Above all, it is a human rights issue.

I am therefore looking forward to joining fellow panellists for a discussion on Mental Health and Community Inclusion at the Ustawi Mental Health Advocates Graduation Event today where I will be sharing legal and governance perspectives on how our laws, institutions and public policies can better promote dignity, inclusion and mental wellbeing for all. Here's a polished version with a clear invitation for legal support:

At CM Advocates LLP's **Healthcare, Life Sciences & Pharmaceuticals (HLSP) Practice**, we believe that healthcare extends beyond medicine, it encompasses governance, human rights, mental wellbeing, patient rights, disability inclusion and access to justice.

Advancing mental health requires collaboration between legal professionals, healthcare providers,

policymakers, employers, county governments, civil society and communities. Together, we can develop legal and governance solutions that protect rights, strengthen healthcare systems and foster inclusive communities where everyone can thrive.

If your organisation requires legal advice or support on mental health, healthcare regulation, workplace wellbeing, patient rights, disability inclusion or broader healthcare governance matters, we would be pleased to assist.

Please reach out to our **Healthcare, Life Sciences & Pharmaceuticals (HLSP) Practice** at: hlsppractice@cmadvocates.com.

Together, we can help build a healthier, more inclusive and rights-based society.

Contributor:

Stella Orengo

Senior Associate

sorengo@cmadvocates.com

CM Advocates LLP – Contact Details

Head Office Nairobi

I&M Bank House, 7th Floor, 2nd Ngong Avenue

T: +254 20 2210978 or +254 716 209673

P.O. Box 22588 – 00505, Nairobi Kenya

E: law@cmadvocates.com

Mombasa Office

Links Plaza, 3rd Floor, Links Road, Nyali

T: +254 041 447 0758 / +254 41 447 0548

P.O. Box 90056 – 80100, Mombasa Kenya

E: mombasaoffice@cmadvocates.com

Regional Presence

Uganda | Tanzania | Rwanda | Zambia | Ethiopia | South Sudan

www.cmadvocates.com