**South Sudan: The Overlooked Mental Health Crisis: Navigating Unforgettable Loss and the Struggle to Heal**

*In South Sudan, mental health issues are overshadowed by poverty, violence, and displacement. Neglected by the health system and confronted by deep-rooted stigma, many people face their mental health struggles in silence, enduring a daily battle that goes unseen and unheard.*

When she was just 12 years old, Mary Nyanhial Kiel had to escape her home in Paguir when armed groups attacked her village. “We were forced to flee, and many people were killed,” Mary, now 34, recalls. Her parents managed to escape with her and her siblings, but their ordeal was far from over. “A year later, during a cattle raid, my father and elder brother were killed while trying to guard our cattle. We were hiding in the bush—they tried to protect us.”

Some years later, Mary had to face the loss of a loved one once again. Mary’s husband, who had gone to Sudan to work as a cattle keeper to support his family, never came back, leaving her as the sole caregiver for her six children. “Now I am all they have,” she says. “I work at a tea shop, but it’s not enough. We only eat one meal a day and I can’t afford to send my kids to school.”

You don’t have to look far to find a similar story. Just a short distance from Mary’s home, Nyayong Puol Lam, 26, had also experienced an episode of loss some years back. She was forced to flee her village after seeing her brother and many people she knew killed.

During the 2016 conflict, her husband was killed, and just recently she buried her sister. “My sister was killed by her husband who was mentally ill. And now I’m taking care of her six children, and two of my own. With no husband or brother to support me. It is difficult. The children are too young, and they don’t understand… I have lost all hope, I am hopeless.”

The widespread violence has not only displaced families but has also stripped them of their livelihoods, crops, and any sense of stability. “We are not the only ones. This is happening to everyone in South Sudan. Everyone is suffering,” Mary explains. “My mother has no hope, she still thinks that we are going to die. She thinks my brothers are going to die every day.”

**Mental Health: The Silent Crisis**

While primary healthcare is scarce in South Sudan, mental health services are even more limited. There are many people like Mary and Nyayong who have been left to fend for themselves with little or no access to food, education, or healthcare. The continuous cycles of conflict, displacement, food insecurity, and extreme poverty create overwhelming stress, and the stigma around mental health remains strong.

MSF is one of the few organisations providing mental health services in South Sudan. “We receive many patients with post-traumatic stress disorder (PTSD), depression, and postpartum depression affecting new mothers,” says Germando Kagomba, MSF’s mental health activity manager in Lankien, South Sudan.

Between January and July 2024, MSF provided more than 9,600 mental health consultations and facilitated group discussions for 54,000 people across South Sudan. However, these efforts only scratch the surface of a dire need.

The continuous cycles of conflict, displacement, food insecurity and extreme poverty create overwhelming stress for many people, but the stigma around mental health struggles is one of several reasons they are not talked about. "I only talk about it during the MSF mental health sessions because here, everyone is going through the same thing,” says Mary. Yet amid everyone’s suffering, Mary adds, “if you complain at home, they call you weak.”.

Three out of four patients seeking mental health support through MSF have endured intercommunal violence, sexual violence or gender-based violence. Yet, mental health issues are often complex, and the patients’ initial need for help might stem from other sources of trauma or stress.

In South Sudan, caregivers are often forced to make impossible choices due to lack of access to treatment when a loved one struggles with mental health issues. Many lock their family members away out of fear of the stigma and the violence it might provoke. In extreme cases, they even resort to chaining them. Individuals suffering from mental illnesses are left to languish by society more broadly. Instead of receiving care, they are often confined to prisons or other unsuitable environments, worsening their condition and deepening their suffering, due to inadequate resources, a lack of infrastructure, and no trained mental health professionals.

“With limited infrastructure, some patients take up to four days just to reach the hospital. So, when you have a mental health condition, people don't really take care of you as they do for others, and the patients who make it to the hospital do not come back for follow-up,” Kagomba adds.

Untreated mental health conditions may lead to long-term harm, from deteriorating physical health—affecting not only individuals but entire generations.

The significant gap in mental health treatment means individuals lacking care are likely to struggle in their communities, which can further entrench them and their families in poverty. Limited participation in community activities and restricted employment opportunities diminish their quality of life. This situation may also lead to higher rates of teenage pregnancy and domestic violence. Untreated mental health conditions can also result in higher mortality rates.

To break the cycle of neglect, mental healthcare must be integrated into the broader healthcare system, so that people of South Sudan can begin to heal from the deeper scars that displacement and poverty have left behind. Without this change, families like Mary’s and Nyayong’s will continue to struggle, with the hope for recovery always out of reach.