



East African Journal of Education Studies

eajes.eanso.org

Volume 8, Issue 3, 2025

Print ISSN: 2707-3939 | Online ISSN: 2707-3947

Title DOI: <https://doi.org/10.37284/2707-3947>

ENSO
EAST AFRICAN
NATURE &
SCIENCE
ORGANIZATION

Original Article

Challenges and Implications of Mental Health on Educational Outcomes in Sub-Saharan Africa

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Article DOI: <https://doi.org/10.37284/eajes.8.3.3419>

Date Published: ABSTRACT

31 July 2025

Keywords:

Mental Health,
Education,
Sub-Saharan
Africa,
Educational
Outcomes,
Student Well-being,
Mental Health
Policy.

Mental health is vital to overall well-being and educational outcomes. However, it is often under-addressed in Sub-Saharan Africa. The purpose of this review was to explore the mental health challenges faced by educational systems in Sub-Saharan Africa and to examine their implications for educational outcomes. Therefore, this article examines the challenges of mental health in the region's education systems and their implications regarding education outcomes and proposes recommendations for addressing these issues. This study employed a qualitative approach combining literature review, case studies, and secondary data analysis. The findings reveal that mental health problems, including stress, depression, anxiety, and post-traumatic stress disorder, are prevalent among students and teachers in the Sub-Saharan region. This has worsened due to socio-economic disparities and insufficient mental health care, resource constraints, underdeveloped mental health policies, lack of psychosocial support systems, inadequate access to mental health care, shortage of trained workers, and insufficient policy frameworks. The review concludes that addressing mental health in education is essential for improving educational outcomes. The strategies for enhancing mental health include policy reforms, integrating mental health education into curricula, training educators, community-based interventions, and collaborations between governments and non-governmental organisations.

APA CITATION

Owomugisha, E., Atibuni, D. Z. & Olema, D. K. (2025). Challenges and Implications of Mental Health on Educational Outcomes in Sub-Saharan Africa. *East African Journal of Education Studies*, 8(3), 84-98. <https://doi.org/10.37284/eajes.8.3.3419>

CHICAGO CITATION

Owomugisha, Evelyn, Dennis Zami Atibuni and David Kani Olema. 2025. "Challenges and Implications of Mental Health on Educational Outcomes in Sub-Saharan Africa." *East African Journal of Education Studies* 8 (3), 84-98. <https://doi.org/10.37284/eajes.8.3.3419>.

HARVARD CITATION

Owomugisha, E., Atibuni, D. Z. & Olema, D. K. (2025), "Challenges and Implications of Mental Health on Educational Outcomes in Sub-Saharan Africa", *East African Journal of Education Studies*, 8(3), pp. 84-98. doi: 10.37284/eajes.8.3.3419.

IEEE CITATION

E., Owomugisha, D. Z., Atibuni & D. K., Olema "Challenges and Implications of Mental Health on Educational Outcomes in Sub-Saharan Africa", *EAJES*, vol. 8, no. 3, pp. 84-98, Jul. 2025.

MLA CITATION

Owomugisha, Evelyn, Dennis Zami Atibuni & David Kani Olema. "Challenges and Implications of Mental Health on Educational Outcomes in Sub-Saharan Africa". *East African Journal of Education Studies*, Vol. 8, no. 3, Jul. 2025, pp. 84-98, doi:10.37284/eajes.8.3.3419.

INTRODUCTION

Worldwide, education is acclaimed as a cornerstone of national development. However, mental health issues among students and educators remain largely unaddressed, resulting in significant effects on the envisaged educational outcomes (Monahan & Stuart, 2021). Mental health is a condition of well-being in which people can develop their ability to cope with stress and increase their productivity in the community (Bauman & Rivers, 2015; Cook & Champion, 2019). In addition, Richardson (2020) asserts that mental health entails cognitive, emotional, social, and psychological aspects of life affecting thoughts, feelings, and behaviours. More to that, WHO (2019) notes that mental health is an important aspect of general health and well-being that is necessary for educational success. It is important to mention that one in seven adolescents globally experiences mental health disorders, and higher prevalence is recorded in low-resource settings, including in Sub-Saharan Africa (WHO, 2021).

Notably, mental health issues are a growing concern in educational systems in Sub-Saharan Africa, although it is often neglected (Kinyanda et al., 2011). Mental health is a critical issue in educational settings, particularly in the Sub-Saharan region, which often experiences scarce mental health services (Kieling et al., 2011). Poor mental health has significant implications for educational outcomes, which include decreased academic achievement, increased absenteeism, and decreased teacher morale (Walker et al., 2011). Furthermore, mental health is an essential aspect of total health and well-being whose function is pivotal in shaping educational experiences as well as educational

outcomes (WHO, 2019). However, in the Sub-Saharan region, the intersection of limited resources, cultural norms and attitudes has created unique challenges. For instance, studies have revealed that nearly twenty per cent of children and adolescents in the region experience mental health disorders, although only a fraction receive adequate care (WHO, 2021). This is because the prevalence of poor mental health among students in the Sub-Saharan region is high (WHO, 2019).

In addition, the region has the highest prevalence of mental health disorders in the world and is home to more than 200 million people struggling with mental health conditions (WHO, 2019). The mental health conditions include depression, anxiety, and psychosis. Remarkably, approximately one in five students in Sub-Saharan Africa experience mental health problems that have significant implications for educational outcomes, such as poor academic performance, absenteeism, and dropout (Agyei et al., 2018). Several case studies have confirmed this. For example, Gureje et al. (2015) conducted a study in Nigeria, which revealed that 25% of students experienced symptoms of depression and anxiety, whereas in Ghana, 15% of students reported experiencing suicidal ideation, plans, and attempts (Agyemang et al., 2018). Similarly, in Uganda, a study concluded that 20% of students experienced suicidal ideation and attempts (Kabiru et al., 2019); while in South Africa, 30% of teachers reported experiencing extreme stress/ burnout that has contributed to depression and anxiety (Okeke and Dlamini, 2013). It is important to point out that the education systems in the Sub-Saharan region are poorly equipped to address these needs. This has created a gap that has critical implications for educational outcomes, as students with mental

health problems may struggle to access the support services they need to attain educational outcomes.

METHODOLOGY

This review utilised a qualitative research approach to synthesise current evidence on the intersection between mental health and educational outcomes in Sub-Saharan Africa. To attain the purpose of this study, which is to explore the mental health challenges faced by educational systems in Sub-Saharan Africa and to examine their implications for educational outcomes, the study focused on secondary data analysis to provide an integrated understanding of the challenges and implications of mental health and educational outcomes in that setting. Therefore, to ensure consistency and relevance in data collection, the following criteria were applied: Sources included mental health issues and their impact on educational outcomes within Sub-Saharan African countries. Additionally, articles from databases such as Google Scholar, ResearchGate, official government reports, and publications from reputable international organisations, including the WHO, UNESCO, and TASO, were included. We selected case studies that documented interventions, policy changes, or community-level programs directly concerning mental health and education, which were focused on Sub-Saharan Africa. Ethically, the study was based solely on secondary and publicly available data, and formal ethical approval was not required. However, all sources were duly acknowledged and referenced.

CHALLENGES TO MENTAL HEALTH IN EDUCATION IN SUB-SAHARAN AFRICA

According to Kilonzo et al. (2018), the challenges of mental health in the education system of Sub-Saharan Africa include inadequate resources, lack of trained personnel, stigma, and discrimination. Additionally, UNESCO (2019) asserts that the education sector in Sub-Saharan Africa is faced with significant challenges that include limited access to mental health care, poverty, conflict, and cultural and social norms, which have worsened the

mental health status of educators and learners as explained below:

Limited Access to Mental Health Care

Mental health care is largely inaccessible in Sub-Saharan Africa due to its limitedness, particularly in rural areas (Ministry of Health Uganda, 2019). Taking an example from Tanzania, there is a serious scarcity of mental health experts, with only 0.03 psychiatrists per 100,000 people (WHO, 2017); while in Uganda, only 33 psychiatrists serve more than 43 million people (Ministry of Health Uganda, 2019). Additionally, a study conducted in rural areas of Uganda showed that 70% of patients with mental illness had not sought treatment due to a lack of access to mental health services (Kigozi et al., 2016). Furthermore, in many sub-Saharan African countries, mental health services are scarce, especially in rural areas, and this has contributed to increased mental health issues in the region (World Health Organization, 2019). Also, there are limited school-based mental health services in Sub-Saharan Africa, making it difficult for students to access mental health support, as observed by Kinyanda et al. (2011).

According to Kieling et al. (2011), many schools in Sub-Saharan Africa lack mental health services, including counselling and therapy. This was confirmed by the study that was conducted in Kenya, whose results showed that only 12% of schools had a school counsellor or mental health professional, as noted by Mwaura et al. (2018); while in Nigeria, there is a lack of mental health services in schools, which has worsened mental health problems, as asserted by Gureje et al. (2015). More still, mental health services are highly needed in schools, especially in Sub-Saharan Africa. This is because this region is highly deprived of resources, and the situation has worsened due to COVID-19 and HIV/AIDS, which have left many students orphans with the associated problems. This is confirmed by Kessler et al. (2005). WHO states that orphans are at a higher risk of developing anxiety and depression due to the stress and uncertainty of

their living situation. Moreover, orphans may struggle with low self-esteem and self-worth due to feelings of abandonment, rejection, or inadequacy (Harter, 1999).

Stigma and Discrimination

According to Read and Doku (2009), poor mental health is always misunderstood and perceived as spiritual or moral failings in many African societies, which is often stigmatised and discriminated against. This is because poor mental health/mental illness is often attributed to witchcraft or evil spirits, which has caused stigma and discrimination in the region. This has resulted in social marginalisation and limited access to mental health services (Mugisha et al., 2015). Additionally, students experiencing psychological issues may face isolation from peers and educators. For example, according to a study carried out in Nigeria by Atilola et al. (2014), results revealed that students with mental health issues were often ridiculed and ostracised by their peers. Similarly, Gureje et al. (2015) state that in Nigeria, traditional beliefs about poor mental health or mental illness deter students and teachers from addressing mental health concerns openly. According to Kigozi et al. (2016), in Uganda, cultural beliefs often attribute mental illness to supernatural causes, hence hindering access to appropriate care.

A survey by mental health professionals in Uganda revealed that 80% of the respondents reported that stigma and discrimination were major barriers to mental health care (Nuwagaba et al., 2018), while Abbo (2011) concluded that several African cultures stigmatise mental illness as a sign of weakness or a curse. It is worth noting that stigma and discrimination can lead to amplified symptoms of anxiety and depression among students, which makes them experience intense emotional pain (Meyer, 2003). In addition, Link and Phelan (2001) assert that experiencing stigma and discrimination can lead to negative self-talk, self-blame, and low self-esteem; thus, leading to exacerbated mental health issues. This can result in social isolation,

since students may avoid social interactions and feel excluded by their peers (Hinrichsen & Clark, 2000). Consequently, students may feel hopeless, and this can lead to suicidal ideation (Haas et al., 2011).

Poverty and Socio-Economic Challenges

According to WHO (2019), poverty and socio-economic challenges are prevalent in Sub-Saharan Africa and have exacerbated mental health issues. It is worth mentioning that socioeconomic factors such as poverty, unemployment, and socioeconomic inequality are significant risk challenges to mental health in Sub-Saharan Africa (Nuwagaba et al., 2018). WHO (2018) defines poverty as a state where individuals lack the means to satisfy their basic needs. This definition does not encompass economic aspects only, but also access to essential services like healthcare and education. Poverty is often associated with poor health outcomes, limited access to healthcare services, and a higher risk of experiencing discrimination, abuse, and exploitation (WHO, 2018). Conspicuously, one is regarded as poor if living on less than \$1.90 per day. However, according to the World Bank (2020), the international poverty line was raised from \$1.90 to \$2.15 per person per day, based on 2017 prices that reflect the increase in the costs of basic needs in low-income countries between 2011 and 2017.

Notably, in Sub-Saharan Africa, 40% of the population is estimated to live in poverty, with 433 million people living in extreme poverty in 2018 (World Bank, 2018). The situation has worsened due to the COVID-19 pandemic, which resulted in a 2.3 percentage point rise in the poverty rate compared to a no-COVID-19 scenario (World Bank, 2020). Generally, poverty is a persistent concern in Sub-Saharan Africa that affects students' mental health through food insecurity, inadequate learning resources, and stressful home environments. This is evidenced by Flisher et al. (2012), whose study in South Africa concluded that for students from low-income backgrounds, poverty increased their likelihood of experiencing mental health disorders. Furthermore, a study in Kenya

revealed that financial instability contributes to anxiety and depression among students, thus affecting their academic performance (Njenga et al., 2020). More to that, Patel et al. (2018) note that children from low-income families face higher stress levels owing to food insecurity and limited access to basic resources. This has impaired cognitive functioning and academic achievement in Sub-Saharan Africa.

It is worth noting that food insecurity and hunger are serious issues in Sub-Saharan Africa and have been accelerated due to climate change, which is largely attributed to environmental degradation. This has affected many farmers in the region, especially in rural areas, since they still depend on nature for their agricultural production. Climate change has resulted in planned agricultural output not being equal to the actual agricultural output, thus leading to reduced revenue (income) that has caused stricken poverty, a socio-economic stressor in Sub-Saharan Africa. This has left many students starving, hence contributing to mental health issues in schools. It is important to point out that hunger can lead to increased stress and anxiety levels that have made it difficult for students to focus and learn (Kleinman et al., 2015). Similarly, starvation can impair cognitive function, including attention, memory, and problem-solving skills, making it harder for students to succeed academically (Grantham-McGregor et al., 2007). Also, hunger can cause students to feel ashamed, guilty, and have poor self-esteem, which has a negative impact on their mental health and academic performance (Eisenberg et al., 2012). Conclusively, chronic hunger or starvation might raise the chances of suffering mental health disorders, such as depression, anxiety, and post-traumatic stress disorder (PTSD) (Hadfield et al., 2017).

Conflict and Trauma

Conflict and trauma are common in Sub-Saharan Africa and have significantly impacted mental health (Okello et al., 2014). According to Okello et al. (2018), conflict and trauma have contributed to

mental health in Sub-Saharan Africa. This is because the region has experienced several conflicts and traumatic actions, including civil wars, terrorist attacks, and natural disasters that have contributed to mental health problems. A case in point is in the Democratic Republic of Congo, where a study revealed that students who experienced trauma and conflict were more likely to experience mental health issues (Kinyanda et al., 2013). Furthermore, Uganda has experienced decades of conflict, displacement, and trauma, leading to high levels of post-traumatic stress disorder (PTSD), depression, and anxiety (Okello et al., 2018). For instance, according to Okello et al. (2014), Uganda experienced several conflicts and wars, among which include the Lord's Resistance Army insurgency, which led to widespread trauma and mental health issues.

In addition, many students in Sub-Saharan Africa have experienced trauma and violence, including child abuse, domestic violence, and conflict-related trauma (Betancourt et al., 2012). More to that, in South Sudan, many students have experienced displacement, violence, and trauma due to the ongoing conflict (UNICEF, 2020). Notably, according to Kessler et al. (2005), students who are exposed to violence experience trauma, anxiety, and depression, while those who are displaced or living in uncertain circumstances equally experience the same. Besides, conflict can disrupt social support networks, leaving students feeling isolated and vulnerable (Eisenberg & Hefner, 2009). These students are in schools; therefore, they need social-emotional support to enhance their mental health and to increase their learning outcomes.

Cultural and Traditional Beliefs

Cultural and social factors such as stigma and discrimination can also contribute to mental health problems (Kabagambe et al., 2017). It is important to mention that cultural and traditional beliefs about mental illness can hinder access to mental health services and support in Sub-Saharan Africa (Mugisha et al., 2015). In Ghana, a study revealed

that traditional beliefs about mental illness often led to stigma and discrimination against individuals with mental health issues (Read & Doku, 2009). Several studies have shown that mental illness is often stigmatised and discriminated against in Ugandan cultures, and this has led to social isolation and delayed treatment-seeking (Kigozi et al., 2016; Mugisha et al., 2015). For example, a qualitative study of women with PTSD in Northern Uganda showed that cultural and traditional beliefs about mental illness, such as the belief that mental illness is caused by evil spirits, hindered treatment-seeking and adherence to modern mental health treatments (Kabagambe et al., 2017). According to Abdullah and Brown (2011), in some cultures, mental health issues are stigmatised, leading to shame and silence. This discourages students from seeking assistance or revealing their mental health issues.

Limited Mental Health Funding in Sub-Saharan African Countries

Schools in Sub-Saharan Africa usually lack counselling services, trained mental health personnel, and supportive policies. For example, less than 20% of schools in Kenya have access to trained counsellors, leaving many students without the support they need (Abubakar et al., 2017). This is because the mental health sector in many Sub-Saharan African countries is underfunded, with less than 1% of healthcare budgets allocated to mental health (WHO, 2021). For instance, in 2019, Ghana allocated 1.4% of its total health expenditure to mental health, while in 2019, Kenya allocated 1.2% of its total health expenditure to mental health. Tanzania allocated 1.1% of its total health expenditure to mental health in 2019, as stated by WHO (2019). Thus, resulting in under-resourced educational systems with limited access to school-based mental health care, which has left vulnerable learners unsupported. This is evidenced by Atilola (2015), who states that schools often lack the financial and human resources needed to implement mental health programs. Taking an example from Nigeria, the student-to-counsellor ratio is

alarmingly high, where one counsellor serves over 3,000 students. This calls for urgent attention, if we are to support students' mental well-being as well as increase on the attainment of the educational outcomes in the Sub-Saharan region.

Inadequate Policy Frameworks

Mental health policies are always underfunded or even absent in education strategies, and this has led to policy gaps. For instance, in South Africa, the education policy does not sufficiently integrate mental health support into its school programs (Lund et al., 2020). Generally, very few countries in Sub-Saharan Africa have comprehensive mental health policies that address the needs of students. However, it is important to state that even in countries where the policies do exist, they are poorly implemented due to a lack of political will and institutional capacity (Sorsdahl et al., 2020). It is worth mentioning that an inadequate policy framework is the genesis of all the challenges to students' mental health. This is because inadequate policy frameworks have led to increased student stress, as students may feel overwhelmed by academic pressures and lack support (Kessler et al., 2005). In addition, Hogan (2003) notes that inadequate policy frameworks may not provide sufficient resources for mental health support. Thus, hindering students from accessing the necessary services. Furthermore, without adequate policy frameworks, teachers may not receive sufficient training to identify and support students with mental health issues (Weist et al., 2007). Similarly, inadequate policy frameworks have led to inadequate school counselling services, which have left many students with mental health challenges unable to access guidance and support (Dimmitt & Wilkerson, 2012). Generally, it is important to mention that inadequate policy frameworks have perpetuated stigma and silence about mental health issues, hence making it difficult for students to disclose their mental health struggles or seek help (Corrigan, 2004).

Limited Preparedness of Teachers

Teachers play a fundamental role in recognising and supporting students with mental health issues, although the majority in Sub-Saharan Africa lack the training required to fulfil this role. Studies in South Africa have shown that teachers feel ill-equipped to handle mental health challenges in their classroom (Cluver et al., 2018). In addition, according to Eddy et al. (2016), educators in Sub-Saharan Africa often work in challenging conditions with large class sizes, low pay, and limited training. This contributes to stress and burnout, which can negatively impact both their well-being and their ability to support students. Mental health awareness and education are limited in Sub-Saharan Africa, leading to a lack of understanding and support for students with mental health issues (Kinyanda et al., 2011). Furthermore, according to Mwakabutanga et al.'s (2017) study in Tanzania, teachers often lacked the knowledge and skills to support students with mental health issues, which has affected their educational outcomes.

Generally, in Sub-Saharan Africa, many teachers lack training and support in mental health, and this has made it difficult for them to recognise and support students with mental health problems (Mental Health and Psycho-social Support Network, 2019). In Kenya, for example, teachers have reported feeling overwhelmed and unsupported in dealing with students' mental health problems (Mbwayo et al., 2020). Therefore, limited teacher preparedness has contributed to limited mental health awareness and education in the region, thus resulting in a lack of understanding and support for students with mental health issues (Kinyanda et al., 2011). Similarly, Mwakabutanga et al.'s (2017) study in Tanzania found that teachers often lacked the knowledge and skills to support students with mental health issues. There is limited mental awareness and education in Sub-Saharan Africa, thus leading to high mental problems.

In a nutshell, teachers who lack mental health knowledge will not have the necessary knowledge

and skills to identify and support students with mental health needs. Hence, leading to inadequate support (Weist et al., 2007). In addition, such teachers have inadequate classroom management, since they are not prepared to support students with mental health challenges in their classes. This leads to increased stress and anxiety for students (Marzano & Marzano, 2003) and consequently, insufficient emotional support that has caused students to feel isolated and disconnected (Jennings & Greenberg, 2009).

The Implications of Mental Health on Educational Outcomes in the Sub-Saharan African Region

Mental Health has significant implications for educational outcomes in Sub-Saharan Africa, and different studies have revealed that mental health problems, such as depression, anxiety, and trauma, can negatively impact academic performance, attendance, and overall educational attainment, as clarified below:

Academic Achievement

Mental health issues can significantly impact academic achievement, with students experiencing mental health issues often performing poorly in school (Hunt & Eisenberg, 2010). More than that, mental health problems have a bad impact on students' academic performance and lead to low grades and high dropout rates. This has been evidenced in a study conducted by Mabrouk et al. (2022) in South Africa, which found that youths with mental health issues were more likely to achieve poor academic performance, lower grades and higher dropout rates. Furthermore, according to Kariuki et al. (2018)'s study conducted in Kenya, students with mental health issues such as depression and anxiety had lower academic achievement and attendance rates compared to their peers without mental health challenges. In addition, a study in Nigeria cited in Mabrouk et al. (2022) found that learners with anxiety and depression had lower GPAs and were more likely to repeat a grade.

Learners' academic achievement also significantly depends on their teachers' mental state. This was confirmed by the study that was conducted in Tanzania by Mdee et al. (2017), which revealed that teachers' mental health problems, such as stress and burnout, affected their teaching effectiveness and student outcomes. Stress, depression, and burnout are significant mental health concerns that affect educators and students in Sub-Saharan Africa, ultimately impacting the education system (Kessler et al., 2005). Additionally, stress is a common experience among educators in Sub-Saharan Africa, especially after the implementation of Universal Primary Education (UPE) and Universal Secondary Education (USE), government programs that have resulted in increased enrolment rates. This has resulted in heavy workloads, inadequate resources, and poor working conditions (Mdee et al., 2017).

This has increased stress among teachers, which has resulted in decreased job satisfaction, reduced teaching effectiveness, and increased absenteeism among educators (Kabagambe et al., 2017). Notably, many teachers have experienced depression in Sub-Saharan Africa (Kariuki et al., 2018). Correspondingly, a study conducted in Kenya by Ayele et al. (2018) concluded that 25% of teachers reported experiencing depression that led to decreased motivation and reduced academic performance, which eventually led to increased dropout rates among students. Ultimately, studies have revealed that burnout is common among educators in Sub-Saharan Africa, resulting from factors such as heavy workloads, lack of resources, and poor working conditions (Mdee et al., 2017). Burnout is a state of emotional, mental, and physical exhaustion caused by prolonged stress (Maslach et al., 2001). Consequently, burnout can lead to decreased job satisfaction, reduced teaching effectiveness, and increased absenteeism among educators (Kabagambe et al., 2017).

These have affected the teaching and learning process, thus leading to a negative impact on the learning outcomes in the education system of Sub-

Saharan Africa. Notably, high stress levels among teachers lead to reduced teaching effectiveness, which further undermines students' success (Mwaniki, 2020). Conclusively, mental health has a significant impact on academic achievement, as it leads to cognitive impairment (Kessler et al., 2005). In this case, mental health issues such as anxiety and depression can impair cognitive function, including attention, memory, and processing speed; thus, leading to declined academic performance. In addition, according to Ecclestone (2007), mental health issues have led to decreased motivation and engagement in academics, which has resulted in low grades and low academic achievement. This is because mental health issues lead to increased absenteeism and decreased attendance, hence resulting in missed instructional time and a decline in academic achievement (Kessler et al., 2005). Finally, mental health issues have impacted students' social relationships and support networks, which have reduced academic achievement and increased dropout rates (Wentzel, 2013).

Educational Attainment

According to the World Health Organization (2017), mental health issues can also impact educational attainment since students who experience mental health challenges often drop out of school or fail to complete their education. This is so dominant among vulnerable populations, such as orphans and children with disabilities (Mabrouk, 2022). Mental health issues, including depression, anxiety, and stress, can affect learners' academic performance, attendance, and total well-being (Kessler et al., 2005). This has a significant impact on educational outcomes since students with mental health issues may experience decreased motivation, reduced concentration, and impaired cognitive function (Hunt & Eisenberg, 2010). In addition, mental illness can lead to absenteeism, decreased motivation, and reduced academic performance (Hysenbegasi et al., 2018). Furthermore, research has steadily shown that mental health issues can negatively impact students' ability to enrol and

succeed in school. For instance, a study discovered that students who experienced mental health problems such as anxiety and depression were less likely to enrol in post-secondary education (Eisenberg et al., 2020).

Another study concluded that students who reported higher levels of anxiety and stress were less likely to enrol in school and more likely to experience decreased academic motivation (Wang et al., 2020). Similarly, research has shown that students who experience mental health issues may be more likely to experience social isolation, decreased self-esteem, and decreased academic engagement, all of which can contribute to decreased enrolment rates (Hatch et al., 2019). Additionally, mental health problems harm the completion rates of students. For instance, different studies have unswervingly shown that mental health issues can negatively impact students' ability to complete school, which has led to decreased academic achievement and increased dropout rates.

According to Eisenberg et al. (2020), students who experience mental health issues, especially anxiety and depression, are more likely to drop out of school and less likely to complete their degree. Also, Kessler et al. (2020) and Wang et al. (2020) observed that students who reported higher levels of anxiety and stress were more likely to experience decreased academic motivation and increased risk of dropping out. Overwhelmingly, research has continually shown that students who experience mental health issues may be more likely to experience social isolation, decreased self-esteem, and decreased academic engagement, hence contributing to decreased completion rates (Hatch et al., 2019).

Ultimately, mental health issues have negatively impacted educational attainment through increased dropout rates, as students try to cope with academic demands and mental health symptoms (Wagner et al., 2006). More to that, it is important to point out that poor mental health has contributed to delayed completion rates or graduation in Sub-Saharan

Africa. This is because students may need to take some time off from school to receive treatment or recover from mental health episodes, as confirmed by Hunt and Eisenberg (2010). Lastly, Ecclestone (2007) records that mental health challenges have led to reduced educational aspirations, and this is due to when students feel overwhelmed by academic demands, resulting in a loss of motivation to pursue higher education.

CONCLUSION

This study highlights the thoughtful impact of mental health challenges on educational outcomes in Sub-Saharan Africa. The study findings expose mental health problems, particularly stress, depression, anxiety, and trauma, which are widespread among students and teachers throughout the region. These issues have been intensified by poverty, limited resources, stigma, insufficient mental health care, and underdeveloped policy frameworks. The significant findings include high prevalence and underrecognition. Mental health disorders affect up to 20% of children and adolescents, yet a fraction receive adequate care. Both students and teachers frequently experience psychological distress, often leading to poor academic achievement, absenteeism, and higher dropout rates. Furthermore, resource constraints are the biggest challenge that has contributed to a persistent shortage of trained mental health professionals, inadequate funding, and limited access to school-based counselling services. Many schools lack basic psychosocial support structures, which have left vulnerable youth unsupported. Additionally, socioeconomic and environmental stressors resulting from poverty, food insecurity, conflict, and trauma significantly worsen mental health issues. Notably, disadvantaged students face additional barriers, including hunger and unsafe home environments, which have further impaired cognitive and academic development. Furthermore, stigma and cultural barriers that are deep-rooted in traditional beliefs and societal stigma have led to marginalisation, delayed treatment, hesitancy to

seek help, and students alike are isolated by these cultural attitudes. Moreover, the study reveals that adequate policy and teacher preparation are insufficient. Most teachers lack the training and support necessary to identify and assist students with mental health needs.

On the implications of mental health on educational outcomes in the sub-Saharan region, the study shows that mental health challenges directly contribute to poor academic performance, reduced motivation, increased absenteeism, elevated dropout rates, and diminished educational attainment. Teachers' mental health plays a critical role, especially stress and burnout that undermine their effectiveness in teaching, which in turn affects students' progress. Vulnerable populations, such as orphans and children with disabilities, are mostly at risk of adverse outcomes.

Policymakers, educators, and healthcare experts must prioritise mental health services in the education system to address mental health issues in Sub-Saharan Africa, which requires a comprehensive or holistic approach. This approach involves increasing access to mental health care, reducing stigma and discrimination, promoting mental health awareness and education since knowledge is power; an informed person makes the right choices and decisions that aim at promoting mental wellbeing (WHO, 2014). The role of schools in promoting and supporting mental health should not be underestimated. It plays a pivotal role in supporting students' mental health and promoting enrolment, retention and completion rates, through laying strategies that aim at providing increased access to mental health services, promoting social-emotional learning, and creating a conducive, and supportive school environment to curb down the negative impacts of mental health issues in the education systems in Sub-Saharan Africa. There is a crucial need to address the challenges and implications of mental health on educational outcomes in Sub-Saharan Africa by promoting mental health awareness and education, increasing

access to mental health services in schools by prioritising mental health support services such as counselling and therapy. Lastly, it is very important that policymakers, educators, and healthcare professionals prioritise mental health support in educational systems to promote overall well-being among students, which will enable them to attain the educational outcomes.

Recommendations

Mental health has a significant impact on educational outcomes in Sub-Saharan Africa; thus, a need to:

Integrate Mental Health into Education Policies

Governments and education authorities in Sub-Saharan Africa should integrate mental health into education policies and programs. There is a need for policymakers to integrate Mental Health Education into School Curricula to promote mental health awareness and well-being.

Increase Access to Mental Health Services

Governments and education authorities should increase access to mental health services for students and educators, including counselling and therapy. This can be achieved by establishing School-Based Mental Health Services to provide accessible mental health support for both students and teachers.

Promote Mental Health Awareness and Education

Governments and educational authorities should promote mental health awareness and education among students, educators, and communities. This can be enhanced by training teachers and school staff on mental health awareness, which will contribute to providing a supportive learning environment and reducing stigma and discrimination against individuals with mental health problems. Schools and communities should promote mental health awareness and education, including campaigns and programs aimed at reducing stigma and promoting help-seeking

behaviours. This can be attained if governments and education authorities can support educators through mental health training and provide them with resources, a support system, and an environment. Additionally, providing teachers with training and support will enable them to identify and support students with mental health problems as well as promote mental health awareness and education in their classrooms. In conclusion, to promote mental health and improve educational outcomes in Sub-Saharan Africa, there is a need to promote mental health awareness and education through schools and communities via conducting campaigns and programs aimed at reducing stigma and promoting help-seeking behaviours.

Collaborating with Mental Health Professionals

According to WHO (2019), fostering collaborations and partnerships among governments, schools, communities, and other partners, such as mental health professionals and organisations, would promote mental health and high attainment of educational outcomes in Sub-Saharan Africa. This is possible if governments and education authorities collaborate with mental health professionals to develop and implement mental health programs that aim to increase mental awareness and support students with poor mental states. Furthermore, collaboration should not leave families behind. This is because students' mental health should be protected both at home and at school, since it is everyone's responsibility. Therefore, the involvement of families in mental health awareness and educational efforts is vital.

Governments and Organisations to Increase Funding

Governments and organisations need to increase funding for mental health initiatives in schools, and funding for teacher training, mental health services, and awareness campaigns is paramount. In addition, increased funding will cater to the need to support students with mental health problems by providing accommodation and modifications to help them

succeed academically. Lastly, increased funding will promote creativity and innovation, such as using Technology-Based Interventions by governments and education authorities that include online, counselling and therapy to increase access to mental health services in Sub-Saharan Africa.

In addition, there is an urgent need for governments in Sub-Saharan Africa to increase funding to finance Mental Health initiatives, such as school programs, teacher training campaigns on mental awareness and mental health services in schools. These would contribute greatly to students' well-being, hence increasing the educational outcomes in the region. Conclusively, schools can play a vital role in supporting students' mental health and promoting high levels of educational achievement if they are well-funded and facilitated to implement strategies such as providing access to mental health services, promoting social-emotional learning, and creating a supportive school environment that is inclusive. This can lessen the negative impacts of mental health issues on educational outcomes in Sub-Saharan Africa.

Declaration of Conflict of Interest

The authors declare no conflict of interest.

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