

THE MENTAL LOAD OF BEING KENYAN

*Why This Country Is Exhausting
And What To Do About It*

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A Note Before We Begin

From the author

I did not write this book because I had everything figured out. I wrote it because I was exhausted and I could not explain why.

I was a doctor. I had four degrees. I had plans, ambition, and a work ethic that would satisfy any Kenyan parent. By every standard this country uses to measure a person, I was doing the right things. And yet some mornings I would wake up feeling like I was carrying something invisible. Something heavy. Something that no one around me seemed to be talking about.

It took years in medicine, specifically in psychiatry, to understand what that weight actually was. It was not personal weakness. It was not ingratitude. It was the cumulative psychological toll of living inside a system that demands everything from you and guarantees almost nothing in return.

This book is what I wish someone had handed me when I first started feeling it.

It is not a self-help book. I am not going to tell you to wake up at 5am or manifest your dreams. I am going to tell you the truth about what this country does to your mind, why it does it, and what you can actually do about it.

Some of what I write here will make you uncomfortable. Some of it will feel like I am describing your life exactly. Some of it will make you angry. All of those reactions are appropriate. That is what honest books are supposed to do.

"Kenyans are not broken. We were just never given the language, or the permission, to describe everything we are going through."

— DR. MBITI MWONDI

Let us start.

Dr. Mbiti Mwendu

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Why You Are Always Tired

The psychology of exhaustion in a country that never stops asking

FIRST: YOU ARE NOT LAZY

If you are Kenyan, you have almost certainly been told, or told yourself, that you need to work harder. Push more. Rest less.

The national narrative around success in Kenya is built almost entirely on effort. Pure, grinding, relentless effort. This is not entirely wrong. Effort matters. But it is dangerously incomplete.

What it leaves out is what is happening to your brain and body when you are trying to function inside a system that is actively working against you in ways that are invisible, constant, and cumulative.



A typical outpatient queue at a Kenyan public hospital. The wait can be six hours. The system says it is being improved.

WHAT MENTAL LOAD MEANS

Mental load is a term that originally described the invisible cognitive work of managing a household. In the context of living in Kenya, it extends far beyond any one domain.

Your mental load as a Kenyan includes:

- The constant calculation of what you can and cannot afford, not just this week but six months out, because there is no real safety net if you fall.
- Monitoring your physical safety in your neighbourhood, on the roads, in certain parts of the city at certain hours.
- Managing extended family expectations, the unspoken rules about who you owe, what you owe, and when.
- Anxiety about healthcare, knowing that if something goes wrong, the system will not show up for you the way it should.
- Political vigilance, watching elections with the knowledge that the outcome will directly affect your economic life.

REAL STORY

A nurse in Kakamega County earns KES 28,000 per month. Her rent is KES 7,000. Her mother's dialysis costs KES 12,000 monthly. Her children's school fees are KES 6,500 per term. She earns too much to qualify for NHIF subsidies but too little to cover what NHIF does not.

Every single morning, before she walks into a ward to care for other people, she has already done three hours of financial arithmetic with no solution. Researchers call this cognitive scarcity. She calls it just getting up.

THIS IS NOT A CHARACTER FLAW. THIS IS BIOLOGY.

The stress response was designed for short-term threats. A predator. A physical danger. Something you can run from or fight. It was not designed to run continuously for years.

When it does, it has consequences: disrupted sleep, impaired memory, reduced immune function, increased risk of anxiety and depression, and chronic fatigue that no amount of sleep seems to fix.

THE SCIENCE BEHIND THE EXHAUSTION

Research in cognitive psychology has consistently shown that scarcity, whether of money, time, or security, does something measurable to the brain. It narrows focus. It creates what researchers Sendhil Mullainathan and Eldar Shafir call a cognitive tax.

When your mind is preoccupied with immediate survival concerns, your capacity for long-term thinking, impulse control, and complex problem-solving is genuinely reduced. This is not a character flaw. This is biology.

"Poverty and chronic stress do not just make you unhappy. They make you cognitively poorer. The mental bandwidth you spend worrying is bandwidth you cannot spend thinking."

This is the exhaustion that many Kenyans feel and cannot name. It is not laziness. It is the physiological consequence of running a stress response system at high intensity, for too long, with too few breaks.

WHAT DOCTORS SEE EVERY DAY

In any outpatient psychiatric clinic in Kenya, the presenting complaints are remarkably consistent: I cannot sleep, I am always tired, I cannot concentrate. These are symptoms of a population running on chronic stress. The correct intervention is not always medication. Sometimes it is naming what is happening and why.

WHY WE DO NOT TALK ABOUT IT

There are several reasons this exhaustion goes unnamed.

- ☹️ **Cultural.** Talking about being overwhelmed is still widely read as weakness. Men are socialised to perform strength. Women are expected to manage everything without complaint.
- 👛 **Economic.** Acknowledging exhaustion feels dangerous when you cannot afford to slow down. Pretending you can keep going feels like survival, even when it is destroying you.
- 👤 **Normalisation of suffering.** When everyone around you is also exhausted, exhaustion stops seeming like a problem and starts seeming like the weather. This is how Kenya is.



Kenya's streets have repeatedly spoken what offices refuse to acknowledge.

WHAT YOU CAN DO RIGHT NOW

Understanding the source of your exhaustion is not a solution, but it is the beginning of one.

- 📝 **Name what you are carrying.** Most people have never made an honest inventory of their mental load. Write it down. Everything you are monitoring, managing, worrying about, tracking. Seeing it listed explains the exhaustion and creates an opening to decide what is worth carrying.
- 🛌 **Protect sleep deliberately.** Sleep is not a reward for finishing your work. It is a biological requirement. Protecting your sleep is not laziness. It is strategy.
- 🔄 **Create genuine transitions.** Kenyan professionals never actually stop working even when not technically at work. Without deliberate transitions, the stress response never gets a signal to downregulate.
- 🗣️ **Reduce the stigma in your own circle.** You cannot change the culture immediately, but you can change what is acceptable in your immediate environment.

Your exhaustion is real. It has causes. And it has responses. The next chapter is about one of the biggest contributors that no one wants to say out loud.

The Mediocrity Trap

How systems that reward connections over competence quietly kill your ambition



There is a particular kind of demoralisation that happens when you watch someone less qualified than you get the job, the contract, the promotion, the opportunity.

You tell yourself it is one incident. Then it happens again. Then again. Then you start noticing a pattern. And the pattern tells you something that your school, your parents, and every motivational speaker you have encountered told you was not true: that working hard and being genuinely good at what you do is not the primary determinant of success in this country.

MY OWN EXPERIENCE

I completed MBChB then MMed. I added an MBA and an MPH. I applied to county government positions across Kenya — Kirinyaga, Machakos, Kisumu, Nairobi County, and the national government. Positions that should have been natural fits.

I attended interviews where I was told my qualifications were impressive. Then I waited. And waited. The positions either disappeared into silence or went to candidates whose qualifications were a fraction of mine but whose connections to the right people were the correct qualification. No letter. No feedback. Just silence, which is its own kind of answer.

72%

of Kenyan job seekers cite personal connections as more important than qualifications

KES 4.6B

paid in ghost worker salaries in public service over five years

1 in 3

public service hires made outside transparent competitive processes



"Tuna Taka Haki" — We want justice. Nairobi streets, 2023.

REAL EXAMPLES YOU ALREADY KNOW

The county health director who got the job because his uncle sits on the county executive. He has a diploma. The doctor who applied had a Masters degree and eight years of clinical experience. That doctor is now working in a mission hospital at a third of the salary he was qualified for.

The government tender for medical supplies that went to a company registered six months earlier, owned by a relative of the procurement officer, at three times market rate. The company with ten years of verified supply history and competitive pricing did not make the shortlist.

"Why should I go above and beyond when going above and beyond does not get rewarded? Why should I invest in myself when the person with the right connections gets the position anyway?"

NOT IRRATIONAL QUESTIONS. LOGICAL CONCLUSIONS.

THE DOCTORS STRIKE THAT KEPT COMING BACK

Kenyan doctors went on strike in 2017. They went on strike again in 2023. The core grievances were nearly identical both times: non-payment of salaries, failure to implement the 2013 CBA, inadequate staffing, lack of basic equipment.

Between the two strikes, a government task force was formed, reports were written, press conferences were held, and promises were made. Nothing changed. The doctors who left for the private sector or the diaspora are now described in government speeches as having abandoned the country. The government that failed to pay them is not described as having abandoned them.

THE LOW ARE REWARDED. HERE IS HOW IT LOOKS.

The politician who performed catastrophically in office and lost their seat was appointed to a parastatal board within six months at a salary higher than what they earned as an elected official. The qualification for the appointment was loyalty during the campaign.

The procurement official who approved a KES 400 million tender for equipment that was never delivered received a merit certificate from his department for efficiency in procurement.

The nurse who spent personal money buying supplies for her ward received the same salary increment as the nurse who did nothing.

"The system does not simply fail to reward competence. In many cases it punishes it — by making the person who works harder carry more without receiving more, until they burn out or adapt downward."

Learned helplessness is not depression, though it can look like it. It is not laziness, though it produces some of the same behaviours. It is the learned belief, based on repeated experience, that your actions do not reliably produce outcomes.

The lessons start early. You study hard. You pass. You get the grades. Then you discover that what happens next depends on factors entirely outside your control. You vote and participate in civic life. The promised change does not materialise.

You apply for government jobs with excellent qualifications. You attend the interviews. You answer well. You go home and wait. You are never called. You apply again. You wait again. After enough cycles of this, you stop applying. Not because you are lazy. Because the experience has taught you that the application does not matter.

THE DOCTOR WHO STOPPED APPLYING

After my fifth county government application with no response and my third interview that ended in silence, I stopped applying to government positions entirely. Not in anger. Simply as a conclusion drawn from evidence.

The system was communicating clearly: your qualifications are not the deciding factor here. I redirected the energy into building something I could actually control. That is not a triumphant story. It is just what happens when a person eventually stops banging their head against a wall that will not move.

THE COGNITIVE DISTORTIONS THAT FOLLOW

- ∞ **Permanence thinking.** Kenya will never change. Corruption will always be there. Nothing I do will matter. These feel like realism but are psychological adaptations to repeated disappointment.
- ∞ **Pervasiveness.** Helplessness in your job bleeds into your personal relationships, your health, your finances. The feeling that you are out of control generalises to everything.
- ∞ **Reversed personalisation.** Why can I not figure this out? Other people manage. This places responsibility for systemic problems on individual psychology, which is particularly toxic.

"The most insidious thing about helplessness is that it makes inaction feel rational. And once inaction feels rational, it becomes the default."

BREAKING THE CYCLE

- ∞ **Dispute permanence.** What evidence do you actually have that change is impossible? Kenya has changed significantly over two decades.
- ∞ **Contain pervasiveness.** My experience with county government applications has been frustrating and unfair. That is accurate. I have no control over anything in my life is a distortion. These are not the same thing.
- ∞ **Find small controllables.** The fastest way to rewire helplessness is to take small, clear actions in areas where you do have control and observe the outcomes.

CHAPTER 4 **The Plan Nobody Gave You**

There is a version of growing up that involves receiving reliable instructions for how to construct a life. Go to school. Get good grades. Get a good job. Work hard. Save money. Buy land. Retire.

This script worked, at least partially, for a certain generation. That moment is largely over.

67%

of Kenyan graduates unemployed or underemployed within one year

2.9M

young Kenyans entering the job market yearly against 800K formal jobs created

WHAT NOBODY PREPARED ME FOR

After completing specialist training, I expected to enter a system that needed me. Kenya has a doctor to population ratio of approximately 1 to 10,000 against the WHO recommendation of 1 to 1,000. We are desperately short of doctors.

What I discovered is that the same government that points to the doctor shortage in press releases has a completely different priority structure when it comes to actual hiring. The shortage is a talking point. The bureaucracy that controls hiring is a different conversation entirely.

BUILDING WHEN THERE IS NO ROADMAP

The absence of a reliable inherited script is genuinely difficult. It is also a form of freedom. You are not locked into a path that no longer works.

What this requires: a longer time horizon than your environment encourages, multiple income streams rather than one, a genuine emergency fund covering three to six months of essential expenses, and an honest network of people who will actually tell you the truth.

Gaslighting refers to a pattern in which someone is made to question their own perception of reality. Kenya has a systemic version of this.

You wait six hours in a public hospital. The official narrative tells you the health system is being improved. You pay taxes and watch them disappear into procurement scandals. The officials responsible are rarely prosecuted and sometimes re-elected.

You try to access a government service. You are sent from office to office. You are asked for documents you were not told about. The system appears designed not to serve you but to exhaust you into giving up or paying a bribe.

A SPECIFIC EXAMPLE: THE INTERNSHIP THAT DISAPPEARED

In 2023 the government announced it was cutting internship positions across the public sector as a cost-saving exercise. At the same time, it was adding new Cabinet Secretary positions and creating new parastatal boards with generous sitting allowances.

The interns being cut were earning KES 15,000 per month. The new board members were earning KES 50,000 per sitting. This happened with a straight face. The young people who lost their internships were told to be patient and that the country was going through a difficult period. No Cabinet Secretary was told to be patient.

HOW THE LOW ARE REWARDED

The politician who performed catastrophically and lost their seat was appointed to a parastatal board within six months at a higher salary. The qualification was loyalty during the campaign.

The county health officer who presided over a drug stock-out lasting eight months across 14 facilities was promoted to a regional coordination role. His promotion press release described his long service and dedication.

"The most insidious thing about systemic gaslighting is that it makes your accurate perception of dysfunction feel like a character flaw: pessimism, ingratitude, or lack of patriotism."

STAYING SANE WITHOUT LOSING YOURSELF

Trust your direct experience. Your lived experience of the system is data. When official narratives consistently contradict your direct experience, the problem is more likely to be in the narrative.

Find reliable information. Not all Kenyan journalism is captured. Seek out journalists, researchers, and civil society organisations who produce honest accounts.

Maintain civic engagement without naive expectation. Switching off entirely is a gift to the people who benefit from apathy.

Protect your anger. Anger at genuine injustice is healthy. The goal is not to extinguish it but to channel it productively rather than allowing it to corrode into bitterness.

Everything we have covered is real. The exhaustion is real. The unfairness is real. But real does not mean permanent. And real does not mean you have no response available.

THE FOUNDATION: ACCURATE THINKING

Accurate thinking means holding reality as it is. Not rosier than it is, which leads to repeated disappointment, and not darker than it is, which leads to paralysis. It means seeing the system clearly and seeing your own resources clearly.

WHAT I EVENTUALLY DID WITH THE REJECTION

After the county government silence, after the national government applications that went nowhere, after the interviews that ended with nothing, I made a decision.

I was not going to wait for a system that had shown me clearly it was not waiting for me. I built MBITMED Global Solutions. I built MindFiti. I started writing and speaking. The work reached people the government job never would have.

The systemic problem is still there. Qualified people are still being passed over. But you cannot fix a system while waiting for that system to give you permission to exist. You have to build in parallel.

A FINAL WORD

Kenya is exhausting. The system is real and its failures are real and the toll it takes on people's minds is real and it is not your fault.

You are not broken. You were never broken. You were operating in a system that never gave you the tools to understand what it was doing to you.

Now you have some of those tools.

Use them.

"The country needs you thinking clearly. Stay sane."

— DR. MBITI MWONDI

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