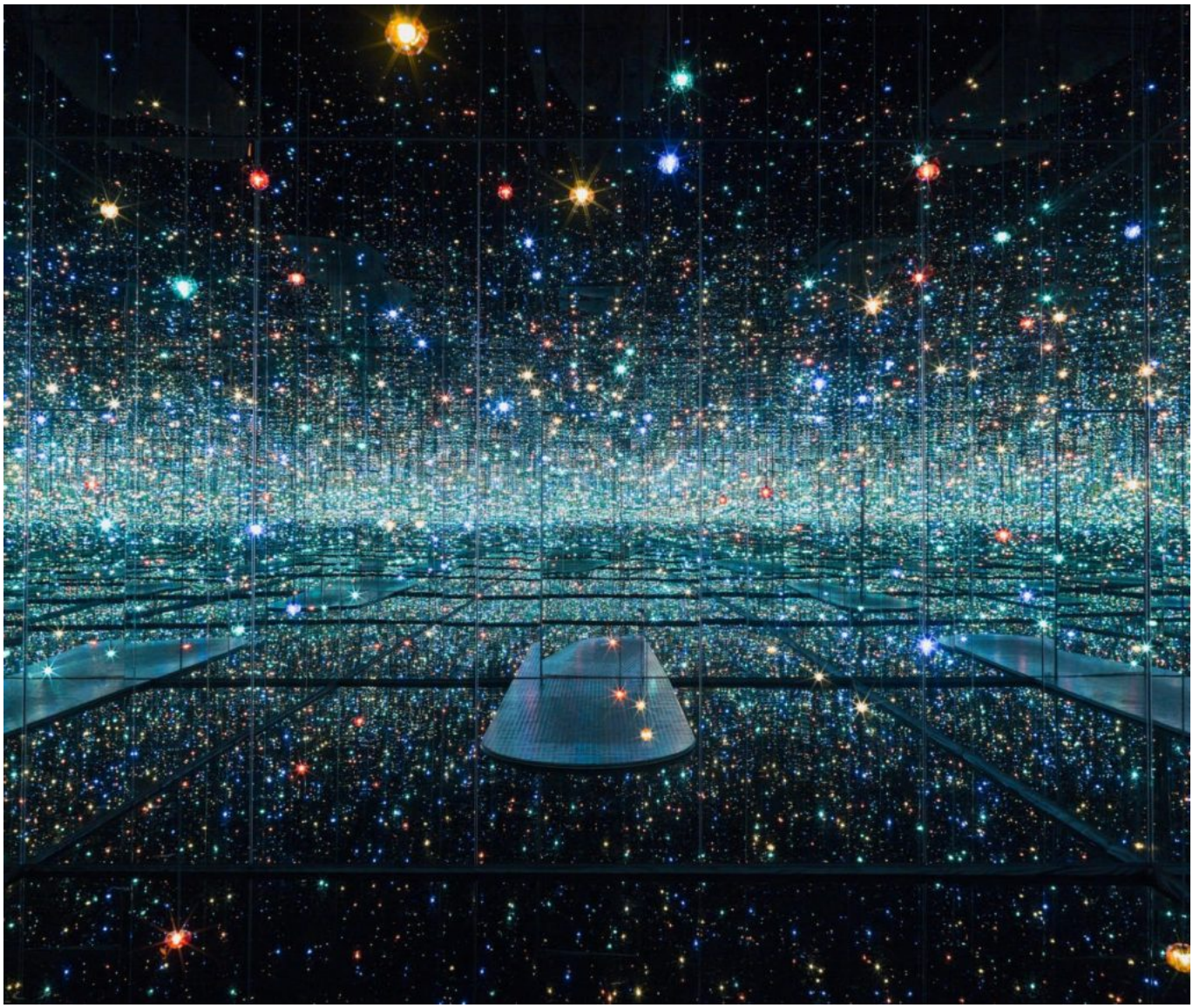
Over a Billion People in the World Suffer from Mental Health Ailments: The Thirty-Ninth Newsletter (2025)



Yayoi Kusama (Japan), *Infinity Mirrored Room – The Souls of Millions of Light Years Away*, 2013.

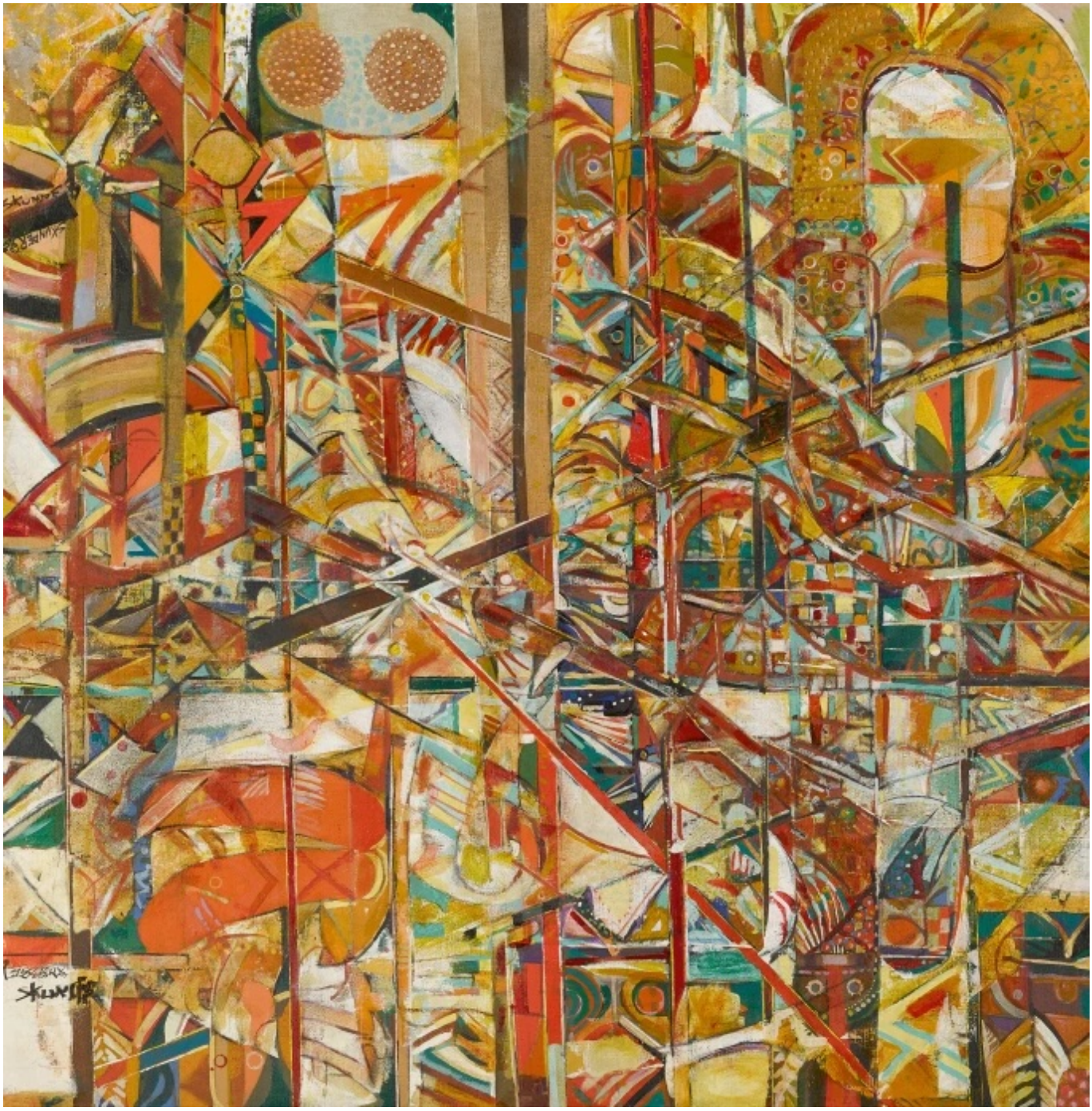
Dear friends,

Greetings from the desk of **Tricontinental: Institute for Social Research**.

I first heard the word 'depression' when I was about sixteen. My mother took me to the National Institute of Mental Health and Neurosciences (NIMHANS) in Bengaluru, India, to be seen by a professional for what I had just considered to be nightmares and difficult afternoons. I was lucky. Today, only 9% of people in the world receive **treatment** for depression. The doctor spoke to me for a long time, and I spent several days at NIMHANS being treated by this and other doctors. It was clear to me that my problems largely stemmed from a traumatic incident that took place a few years earlier, when I was raped in my school.

My parents held me through the process, giving me the courage to get through the aftermath and shielding me from what they thought would be the absolute humiliation of a public display of the violence. I remain grateful to them for being so kind and conciliatory, allowing me to take the time I needed before I was ready to talk openly about something that makes no sense, and should not make sense, to a child. In fact, the experience of depression and the impact this has on self-esteem continues throughout one's life. Medication helps, and so does the love of friends, but there is no 'cure' that enables the complexity of hurt to be overcome.

Over the years, I have had to privately deal with the immense shame that comes with such experiences and the lack of certainty about the facts of the incident (*did I encourage it?*). This shame is commonplace for those who have faced such acts, and it is something that marks people from the time a traumatic incident takes place until the moment they die, as evidenced by the significantly higher rate of death by suicide among people who have experienced such violence in their youth. For good reason, the importance of medication and therapeutic intervention cannot be minimised. But, in a world that pays more attention to debt repayments and arms purchases, with healthcare spending in decline, support for mental health is at a ferocious low.



Alexander 'Skunder' Boghossian (Ethiopia), *Crossroads*, 1997.

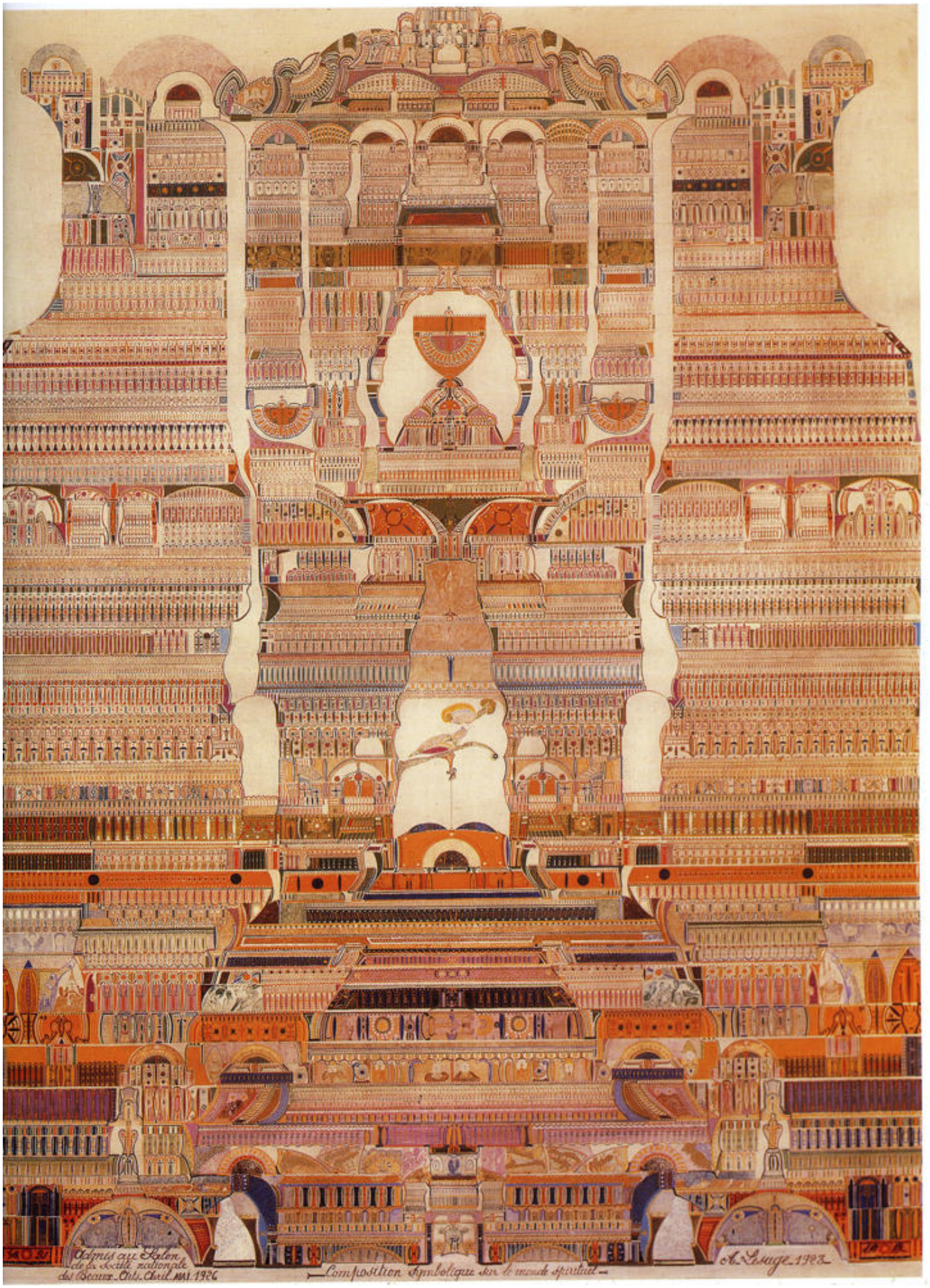
One of the reasons why I am a staunch advocate of the United Nations agencies, and particularly the World Health Organisation (WHO), is that these institutions keep a close eye on the problems of mental health and on the outrageous underfunding of support structures for those who face these challenges. Two reports in particular – ***Mental Health Atlas 2024*** and ***World Mental Health Today*** (both published in 2025) – found that over one billion people live with a mental disorder. Contrary to received wisdom, most of those who suffer these maladies live in low- and middle-income countries. The most common ailments are anxiety and depression, with women disproportionately impacted.

Women also experience higher rates of violence in the home, which leads to increased mental stress, and women with severe mental health challenges are more likely to face sexual and other forms of violence. Yet, strikingly, the WHO studies find that women are less able to access therapeutic treatment for a range of reasons. One **study** from India, cited by the **WHO**, shows 'that women with depression were three times more likely than other women to spend more than half their monthly household expenditure on out-of-pocket healthcare costs'. Three factors – cost, stigma, and fear – obstruct the process of healthcare and legal redress for those struggling with mental health diseases.

Ding Liren (China), *Rose Silk Locust*, 2019.

The data is horrifying. Median government **spending** on mental healthcare accounts for about 2% of health budgets, which has remained unchanged since 2017. A mere 9.89% of the global GDP was **spent** on healthcare in 2022, though world healthcare spending figures are utterly misleading since a large volume is spent in the Global North on insurance companies and on expensive interventions that skew the data. Average public healthcare **spending** in the Global South is 1.2% of GDP as of 2022, with 141 governments spending less than the WHO's healthcare spending benchmark of 5% of GDP (a similar figure to a 2010 **report** suggested that a 6% threshold would prevent high out-of-pocket expenses). While high-income countries spend $65 per person on mental healthcare, low-income countries spend $.04 per person.

At a time when the poorer nations are **spending** about 6.5% of export revenues to service external debt while world military and police **spending** skyrockets, it is unlikely that most countries will have the political will to shift their priorities from social destruction to social care.


Admis au Salon
de la Société nationale
des Beaux-Arts. Avril MM. 1926
Composition Symbolique sur le monde spirituel
A. Lesage 1923

Augustin Lesage (France), *Untitled*, 1923.

What is the impact of the failure to build a strong healthcare system, including a mental healthcare system?

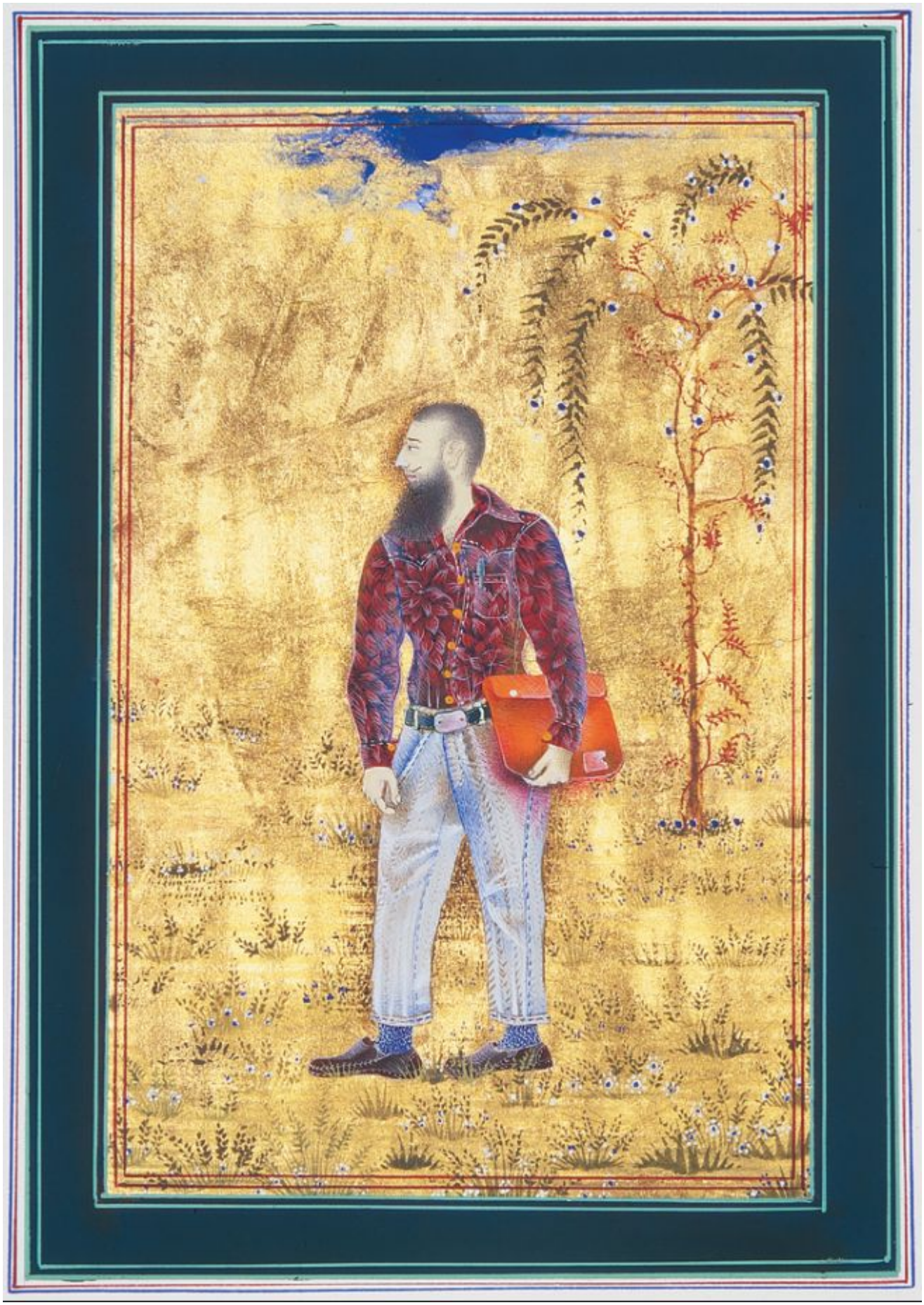
1. The number of people who are lost to suicide is scandalously high. It is **reported** that over 720,000 people take their lives every year, about 8 per 100,000 people. Youth suicide rates are either stable or rising, depending on the country (the last reliable **data** on this is from 2021). Nearly three-fourths of global suicides took place in low- and middle-income countries. In African countries, for instance, these numbers are on the rise, currently at 11.5 per 100,000 people.

2. A new **report** from the WHO finds that a hundred people die of loneliness every hour, totalling 871,000 deaths per year. Among the drivers of loneliness or social isolation, the report explains, are 'poor physical or mental health (especially depression), personality traits such as neuroticism, being without a partner or unmarried, living alone and features of the built environment such as poor access to public transportation'. Most of these drivers can be overcome by increased social connection through such simple reforms as better public transportation, cultural centres, and community care centres.

3. Mental health workers are themselves prone to mental and physical challenges due to overwork and lack of support. There are merely 13 mental health workers for every 100,000 people, with low-income countries only able to marshal one mental health worker for 100,000 people. Two-thirds of the countries in the world, mostly poorer nations, have only one psychiatrist per 200,000 people. The stress that this places on the kind-hearted people who enter this profession is immense. The only low-income country where I have met genuinely happy mental health professionals is Cuba, where the system provides as much support as possible for those who work at the community level against all odds with a population neurologically battered by the impact of sanctions.

4. Scholarship on care shows clearly that it is far better to treat people with severe mental health issues through **community-based** care centres located near the patients' family homes rather than in psychiatric hospitals that are often far too large and sterile. Yet less than one in ten countries have moved from psychiatric hospital systems to community-based care systems (if they have these systems in place at all), and many of those that have are socialist. Local community-based care centres allow for all people to be better integrated into society and for mental health workers to better understand the full psychosocial history of their patients and the communities from which they come. The treatment is then both social and medical.

We **must** spend more of our social wealth on care and less on death and **debt**.



Imran Qureshi (Pakistan), *Moderate Enlightenment*, 2007.

When I discovered Pink Floyd's *The Dark Side of the Moon* (1973) in my teenage years, it was a revelation. I would sit in our apartment in the afternoon, as the Kolkata light filtered through the large trees outside and the sound of the tram drifted into the room, and listen to the album over and over again. It is difficult to explain what it meant to me to close my eyes and fly into the world of 'Breathe (In the Air)':

> Breathe, breathe in the air.
> Don't be afraid to care.
> Leave, but don't leave me.
> Look around and choose your own ground.
>
> Long you live and high you fly
> And smiles you'll give and tears you'll cry
> And all you touch and all you see
> Is all your life will ever be.
>
> Run, rabbit, run.
> Dig that hole, forget the sun,
> And when at last the work is done
> Don't sit down
>
> It's time to dig another one.
>
> Long you live and high you fly
> But only if you ride the tide
> And balanced on the biggest wave
> You race towards an early grave.

I have often felt that it is this song that kept me alive, alongside the love of my parents, Rosy Samuel, and my family and comrades.

Slow down, rabbit, look at the sun.

Warmly,

Vijay