

The West's Struggle for Mental Health

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Since the 1990s, there has been talk of a mental-health epidemic in the U.S., particularly among young people. The mass shootings last month in Uvalde, Texas, and Buffalo, N.Y., carried out by 18-year-old gunmen, have heightened fears that something's gone horribly wrong. But the problem isn't new. American psychiatrists have been studying rates of functional mental illness, such as depressive disorders and schizophrenia, since the 1840s. These studies show that the ratio of those suffering from such diseases to the mentally healthy population has been consistently rising.

Ten years ago, based on the annual [Healthy Minds study](#) of college students, 1 in 5 college students was dealing with mental illness. Between 2013 and 2021, according to Healthy Minds, the share of U.S. college students affected by depression surged 135%. During the same period, the share of students afflicted by any psychiatric illness doubled to more than 40%. "America's youth," [wrote](#) journalist Neal Freyman in April, "are in the midst of a spiking mental health crisis, and public health experts are racing to identify the root causes before it gets even worse."

They are right to race. Functional mental illness threatens society's existence and lies behind its social, economic and political ills.

Functional mental illness has no cure. It can only be managed, for example, with lithium or Prozac. The effectiveness of such management depends on a patient's rationality, but a symptom of the ailment is irrationality. The epidemic rates of mental illness, even if taken at the 2007 measurement of incidence among adults aged 18 to 54 as 20%, means that 1 in 5 American adults at any point in time are likely to be irrational. That is, their judgments would be erroneous and subjective, reflecting their psychological condition and not objective reality. If we consider the current rates among college students, or tomorrow's elite, we might expect judgments about economic, military, political or social matters by 2 out of every 5 American decision makers soon to become unreliable.

By definition, functional mental illness is illness of unknown biological origins. The constant, systematic increase in its rates of incidence since the 1840s is proof that its origins are not biological. Yet, against all logic, mental-health research focuses exclusively on biology and doesn't cast a wider explanatory net. The evidence points to a historical and cultural explanation of the increase in incidence rates. Specifically, it suggests that functional mental illness is a characteristic disease of prosperous and secure liberal democracies.

The more a society is dedicated to the value of equality and the more choices it offers for individual self-determination, the higher its rates of functional mental illness. These rates increase in parallel with the increase in the available occupational, geographical, religious, gender and lifestyle-related choices. This explains why, since the 1970s, the U.S. leads the world as the country most affected by functional mental illness, though other prosperous liberal democracies aren't far behind. Before the 1970s, first place belonged to the U.K., which lost that ranking together with its empire and the dramatic contraction in the number of choices the nation offered its members as a result. In contrast, rates of functional mental illness in societies that are insecure, poor, inequalitarian or authoritarian are remarkably low. For decades, the World Psychiatric Association has pondered the "perennial puzzle" of the relative immunity to such illnesses in Southeast Asian countries.

Equality inevitably makes self-definition a matter of one's own choice, and the formation of personal identity—necessary for mental health—becomes personal responsibility, a burden some people can't shoulder. A relatively high rate of functional mental illness, expressing itself centrally in dissatisfaction with self and, therefore, social maladjustment, thus must be expected in democracies. But while high rates of mental illness are an old problem, the soaring rates of the recent decades aren't explained by equality alone. They are related, in addition, to what happened to Western values, especially in the U.S., since the dissolution of the Soviet Union.

The disappearance of the West's common opponent rendered individual identities in the West more confusing and dissatisfying. Having lost sight of what they, as a society, were against, millions of Westerners lost the sense of what they represented, rejecting common reference points, such as personal responsibility, which previously constituted the core of the self in the West. Virtues and vices, Soviet-style, came to be seen as characteristics of groups, significant social groupings were defined genetically, all personal discomfort was attributed to society, and the burden of responsibility was shifted off individual shoulders.

This change transformed the understanding of justice from one based on individual actions to one based on collective, biologically determined dispositions. It encouraged social maladjustment because people believing themselves decent were naturally uncomfortable in a society that wasn't decent. And at the same time it trapped huge numbers within vicious, yet inescapable genetically determined identities. While solving the problem for some, this change in values accelerated the increase in rates of mental illness.

The tragedies in Uvalde and Buffalo underscore the urgency of addressing the mental-health crisis. Understanding its causes will help us do so.