

# Chile's Mental Health Crisis: Tackle Root Causes, Not Just Symptoms

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*As Chile confronts rising anxiety, depression and a surge in suicides, experts urge a shift from short-term fixes to structural solutions — making mental health a national priority while expanding community care and addressing the social and economic pressures driving distress.*



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By Paula Rosso, psychologist and regional councilor for Valparaíso.-

Making mental health a national priority is one of Jeannette Jara's core health proposals — and Chile urgently needs it. Mental health is among the country's most complex, serious challenges, affecting thousands of families every day and, in recent weeks, dominating headlines after multiple suicides on Santiago's Metro.

There is no shortage of data and perspectives. According to the 2024 UC Mental Health Thermometer, at least one in four people nationwide report severe anxiety symptoms and cannot access treatment, largely due to high out-of-pocket costs and a shortage of available appointments.

The same study finds that 1 in 7 people in Chile show moderate or severe symptoms of depression. Prevalence among women is nearly double that of men (17.4% vs 9.8%). The 18–24 age group is affected most, at 28.9%, followed by ages 35–44 at 19.5% and 25–34 at 14.4%. The remaining age brackets did not exceed 12%.

This has a tangible impact on daily life. Among those with severe symptoms, 46% said it had become very or extremely difficult to manage their household or maintain relationships with others as a result.

On suicides, Chile's rate outpaces homicides: there are 5 suicides for every 3 homicides. A study by Universidad Adolfo Ibáñez shows most cases occur among people over 40, particularly adult and older men.

What is driving this picture? First, the country's social context, as many experts note: long workdays, lengthy commutes, precarious housing, insecurity. Many people juggle two jobs to get by; others face the uncertainty of unemployment or informal work. The spiral grows, spreading anxiety and hopelessness while the economic system presses on with profits and advertising.

One of the most memorable slogans from the 2019 social uprising read: 'It wasn't depression, it was capitalism.' A glance at the global landscape seems to back the sentiment. The World Health Organization projects depression will be the leading cause of disability by 2030; even now it affects more than 300 million people worldwide.

In that vein, several thinkers, including Wilhelm Reich, argue that the system itself makes us ill, creating a vicious cycle. So while expanding mental health care is urgent and necessary, we must just as urgently build a State that guarantees the basic rights needed to live with dignity.

From the WHO's perspective, health is not merely the absence of illness; it is physical, social, and emotional well-being. That means if we create more collective and community spaces, reclaim public areas for children, adolescents, and families, and provide accessible sports, arts, and cultural activities for all; if wages and pensions are not meager but enable a decent life; if students can count on employment prospects after graduation; if public policy truly delivers the well-being we deserve and can achieve — then we would not only avoid deepening the mental health crisis and suicides, we would also reduce prevention costs compared with what is required when trying to respond to urgent care needs.

To do this, we need the courage to address immediate needs while simultaneously improving living conditions — and to recognize that it is possible. Individualism, even in clinical practice, has taken hold, overshadowing the value of community, collective action, mutual care, and social co-construction.

From the presidential campaign, Jeannette Jara's plan sets out concrete steps: expanding access, deploying mobile teams, and opening 25 new COSAM community mental health centers — like the one President Gabriel Boric just inaugurated in Maipú. That facility will serve 50,000 people with a multidisciplinary team of psychologists, social workers, psychiatrists, a family physician, and an occupational therapist, among others.

Similar centers already operate in municipalities such as San Antonio, Copiapó, and Aysén, and another 15 are expected to open before the end of the current administration. In addition, 23 COSAM will remain in various stages of development.

It is up to us to consolidate this mental health network now being rolled out — and to strengthen it as a cross-cutting State policy focused on the public's well-being. Just as importantly, the broader social drivers must be addressed, sooner rather than later, not only for their impact on mental health but because they are root causes of deterioration for thousands of people and families.

*By Paula Rosso, psychologist and regional councilor for Valparaíso.-*



Paula Rosso

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## **Jeannette Jara makes mental health a national priority and proposes a comprehensive plan**

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**Fuente:** [El Ciudadano](#)