

Mental health in the superpowers: Surprising findings in a comparison between the frequency of mental disorders in the US and Russia

Robert Epstein (re@aibrt.org), Amanda Newland, & Milana Veera

American Institute for Behavioral Research and Technology

Abstract

We report on the differences between the frequency of mental disorders in the US and Russia as measured by a validated 63-symptom DSM-5-based online questionnaire between September 3, 2019 and April 16, 2025. We began with two samples: 49,392 Americans who completed an English version of the questionnaire, and 838 Russians who completed the same questionnaire in Russian. We then compared the Russian sample to a random sample of 838 people from the US sample. The Russian version was translated from the English version by a native speaker of Russian and was subsequently reverse translated to check for accuracy. The English version had been validated in two published studies, including one with 201,625 participants in 184 countries. Perhaps because the US and Russia are adversaries, people in each country generally view their counterparts in a negative light; to Americans, for example, the stereotyped Russian male is an abusive alcoholic, and Russians in general are poor and depressed (cf. Jogerst et al., 2006). Contrary to such expectations, however, we found that the mean number of symptoms reported by Americans (21.9) was significantly greater than the mean number of symptoms reported by Russians (18.0) ($p < .001$) and that this same pattern held for common disorders such as PTSD and major depressive disorder. Our findings appear to contradict a recent study (Velten et al., 2022) that found that “positive mental health” was higher in the US than in Russia; however, that study relied on a 9-item scale that did not measure disorders and that was not DSM-based. Our findings are consistent, however, with a larger-scale study published recently in the *American Psychologist* that found that mental health was generally better in collectivist countries (such as Russia) than in individualistic countries (such as the US). The authors of this study (Tamir et al., 2024) attributed the difference to different patterns of emotion regulation in collectivist vs. individualistic countries, with people in the latter countries more prone to harmful regulation methods such as rumination and expressive suppression. We intend to examine such issues further as the size and diversity of our Russian sample grows.

Sample Characteristics:

- Combined Data:
 - o Total n before random sampling = 50,230
 - o Date Range = September 3, 2019 to April 16, 2025
 - o Total n after sampling = 1,676
- Russian:
 - o Original Clean n = 838
 - o Date Range = September 3, 2019 to March 7, 2025
- English:
 - o Original Clean n = 49,392
 - o Random Sample n = 838
 - o Date Range = September 3, 2019 to March 1, 2025

Interesting Findings:

- Total scores between the Russian ($M = 18.01$) and English ($M = 21.91$) samples was significantly different ($p < .001$).
- PTSD in Russia ($M = 1.04$) and in the US ($M = 1.23$) were significantly different ($p < .001$)
- Depression in Russia ($M = 1.27$) and in the US ($M = 1.74$) were significant ($p < .001$)
- Mania ($M_{\text{American}} = 0.29$ and $M_{\text{Russian}} = 0.41$), OCD ($M_{\text{American}} = 0.95$ and $M_{\text{Russian}} = 1.19$), and Anxiety ($M_{\text{American}} = 1.38$ and $M_{\text{Russian}} = 1.69$), sexual disorder ($M_{\text{American}} = 0.64$ and $M_{\text{Russian}} = 0.47$) all significant ($p < .001$) between US and the Russia.
- Bipolar disorder in Russia ($M = 1.33$) and the US ($M = 1.18$) were significantly different ($p < .05$)
- Russian women scored higher in symptoms of OCD ($M = 1.24$) and phobia ($M = 1.40$) than Russian Males with OCD ($M = 0.96$) and phobia ($M = 1.12$) which was significantly different ($p < .001$)
- Depression was significantly higher in females than males in Russia as well as Professional success, Bipolar Disorder, Social Phobia, Eating disorders, and Borderline personality disorder ($p < 0.05$)
- Between American and Russian Men, Bipolar Disorder ($M_{\text{American}} = 1.23$ and $M_{\text{Russian}} = 1.40$), Psychosis ($M_{\text{American}} = 0.57$ and $M_{\text{Russian}} = 0.48$), Social phobia ($M_{\text{American}} = 1.37$ and $M_{\text{Russian}} = 1.21$), and OCD ($M_{\text{American}} = 1.14$ and $M_{\text{Russian}} = 0.98$) were significantly different ($p < 0.05$)
- For personal success, panic, persistent dep, psychosis and PTSD were all significant negative predictors ($p < 0.05$) but depression was again the most significant predictor with a beta value of -0.39.
- Social phobia, Borderline, and sleep were all significant negative predictors of Happiness ($p < .001$) but depression was again the most significant predictor with a beta value of -0.585.

- For professional success, panic and social phobia were significant negative predictors ($p < 0.05$) but persistent depression was again the most significant predictor with a beta value of -0.181.

Sources:

- Maksimov, S. A., Kotova, M. B., Gomanova, L. I., Shalnova, S. A., Balanova, Y. A., Evstifeeva, S. E., & Drapkina, O. M. (2023). Mental health of the Russian Federation Population versus regional living conditions and individual income. *Int J Environ Res Public Health*, 20(11), 5973.
<https://doi.org/10.3390/ijerph20115973>
 - **Main Point:** Depression in Russia is significantly higher in females than males aligning with our research
 - **Abstract:**
 - “The objective of our study was to assess the impact of regional living conditions on the Russian population’s mental health. For the analysis, we used data from the cross-sectional stage of a 2013–2014 study, “Epidemiology of Cardiovascular Diseases in the Regions of the Russian Federation (ESSE-RF)”. The final sample included 18,021 men and women 25–64 years of age from 11 regions of Russia. Using principal component analysis, we performed an integral simultaneous assessment of stress, anxiety, and depression. To describe the regional living conditions, we utilized five regional indices, which were computed from publicly available data of the Federal State Statistics Service of Russia. Overall, mental health indicators were improved, on the one hand, with the deterioration of social conditions and an aggravation of the demographic depression in the region, but on the other hand, they were improved with an increase in economic and industrial development, along with economic inequality among the population. In addition, the impact of regional living conditions on mental health increased with a higher individual wealth. The obtained results provided new fundamental knowledge on the impact of the living environment on health, using the case study of the Russian population, which has been little studied in this regard.”
 - **Important Findings:**
 - This article found that depression in Russia is significantly higher in females than males aligning with our research.
 - Significance also $p < .001$ same as our data
 - This article stated anxiety and stress higher in women which can translate to women have higher symptoms of PTSD and OCD in our research.

- Velten, J., Brailovskaia, J., & Margraf, J. (2022). Positive Mental Health Scale: Validation and measurement invariance across eight countries, genders, and age groups. *Psychological Assessment*, 34(4), 332–340.
<https://doi.org/10.1037/pas0001094>
 - **Main Point:** Russian found to have the lowest mental health scores compared to seven other countries including the United States.
 - **Abstract:**
 - “Positive mental health (PMH), defined as the presence of general emotional, psychological, and social well-being is an important factor of general mental health. To allow for valid comparisons of PMH across different groups of interest, measurement invariant instruments are needed. The present study tested the measurement invariance of the nine-item Positive Mental Health Scale (PMH-Scale) across eight countries (i.e., France, Germany, Poland, **Russia**, Spain, Sweden, the United Kingdom, and **the United States**) as well as across genders, and age groups. Population-based online-panel surveys were conducted (N per country > 1,000). The PMH-Scale showed good to excellent internal consistency as well as unidimensionality in all subsamples. Convergent validity was supported by positive correlations with the Perceived Social Support Questionnaire (F-SozU K-6), discriminant validity was shown by negative correlations with the subscales of the Depression Anxiety Stress Scales 21 (DASS-21). The PMH-Scale showed scalar measurement invariance across countries, genders, and age groups. Comparisons of latent means showed small to medium group differences, with **highest levels of PMH found in the French and US-American samples** as well in participants between 45 and 54 years of age. **Lowest levels of PMH were found in Russian participants**. Gender differences in PMH were negligible. The PMH-Scale can be used to meaningfully compare the levels of PMH across the eight investigated countries, women, and men, as well as younger and older individuals.”
- Tamir, M., Ito, A., Miyamoto, Y., Chentsova-Dutton, Y., Choi, J. H., Cieciuch, J., Riediger, M., Raters, A., Padun, M., Kim, M. Y., Solak, N., Qiu, J., Wang, X., Alvarez-Risco, A., Hanoch, Y., Uchida, Y., Torres, C., Nascimento, T. G., Afshar Jahanshahi, A., . . . García Ibarra, V. J. (2024). Emotion regulation strategies and psychological health across cultures. *American Psychologist*, 79(5), 748–764.
<https://doi.org/10.1037/amp0001237>
 - **Main Point:** Mental health in collectivist cultures is better than individualistic cultures
 - **Abstract:**

- “Emotion regulation is important for psychological health and can be achieved by implementing various strategies. How one regulates emotions is critical for maximizing psychological health. Few studies, however, tested the psychological correlates of different emotion regulation strategies across multiple cultures. In a preregistered cross-cultural study (N = 3,960, 19 countries), conducted during the COVID-19 pandemic, we assessed associations between the use of seven emotion regulation strategies (situation selection, distraction, rumination, cognitive reappraisal, acceptance, expressive suppression, and emotional support seeking) and four indices of psychological health (life satisfaction, depressive symptoms, perceived stress, and loneliness). Model comparisons based on Bayesian information criteria provided support for cultural differences in 36% of associations, with very strong support for differences in 18% of associations. Strategies that were linked to worse psychological health in individualist countries (e.g., rumination, expressive suppression) were unrelated or linked to better psychological health in collectivist countries. Cultural differences in associations with psychological health were most prominent for expressive suppression and rumination and also found for distraction and acceptance. In addition, we found evidence for cultural similarities in 46% of associations between strategies and psychological health, but none of this evidence was very strong. Cultural similarities were most prominent in associations of psychological health with emotional support seeking. These findings highlight the importance of considering the cultural context to understand how individuals from diverse backgrounds manage unpleasant emotions.”
- Jogerst, G. J., Daly, J. M., Hesli, V., & Saha, C. (2006). Comparison of health and effective functioning in Russia and the United States. *Clin Interv Aging*, 1(2), 189-196. <https://pubmed.ncbi.nlm.nih.gov/18044115/>
 - **Main Point:** General mental health was much worse in Russia but this paper is from 2006
 - **Abstract:**
 - “Background: Global aging may increase the societal burden of providing more resources to augment elders’ disabilities. The implications of functional disabilities can vary depending on the society in which they occur. Objective: To determine differences in US and Russian elder citizens’ function. Research design: Convenience sample of persons 60 years and older were surveyed and evaluated. Subjects: One hundred community dwelling residents, half from Galesburg, Illinois and half from Moscow,

Russia. Measurements: An interviewer administered questionnaire and functional assessment examination. Results: The Russian sample was younger than the American sample with a mean age of 67 years versus 78 years, and less likely to be widowed or living alone. Sixty percent of Russians took no medications compared with 14% of Americans, but Russians reported more cardiovascular disease, angina, and hypertension. Forty-four percent of Russians screened as being depressed and only 4% of the Americans. Self-assessed health was good for 77% of Americans and only 6% of Russians. The Medical Outcomes Study SF-36 Health Survey (MOS) eight health concepts showed favorable results for the Americans except for physical functioning, which indicated no difference. Conclusions: Marked health and functional differences exist between our samples. Russians had more cardiovascular disease, took less medication, drank and smoked more and were much more likely to be depressed than the US subjects.”

○ **Important Findings:**

- This article general mental health was much worse in Russia but that is the opposite of our data findings.
- Depression was shown higher in Russians which was again the opposite of our findings.
- This article found that there was higher significance of substance abuse in Russia verses the USA but our data does not display that significance.