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Glasgow Mental Health Failures Leave Vulnerable Scots Without Help

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A vulnerable mental health patient has exposed a shocking crisis within Glasgow's public care system, revealing chronic neglect, long delays, and widespread rejections that have left many without essential treatment.

Marius Samavicius, a 33-year-old artist, conducted a personal investigation after spending three years fighting for support from Scotland's adult Community Mental Health Teams.

Data obtained under the Freedom of Information Act showed that nearly 27,500 of more than 86,000 people referred to Glasgow's Community Mental Health Teams between 2018 and 2024 were rejected outright. Even among those referred and accepted, just 6% were referred for psychological therapies, leaving thousands to fend for themselves while battling severe mental health problems.

During this period, more than 1,100 patients died while under the care of NHS Greater Glasgow and Clyde's mental health services, prompting campaigners to describe the situation as "heartbreaking." Wait times for treatment reached as long as 81 weeks, far surpassing Scotland's 18-week target. Samavicius shared that after disclosing suicidal thoughts, a staff member callously described the message as a "lovely wee email," and no follow-up welfare check was carried out.

Samavicius reported being discharged from services three times without fault and was never placed on a psychology waiting list. "When I was finally assessed, I was told trauma therapy might make me worse," Samavicius said. "It felt like I was dismissed and written off."

The crisis unfolds against the backdrop of cuts approved by the Glasgow City Integration Joint Board, which agreed to reduce its 2025 budget by £42 million, affecting services including counselling, psychotherapy and trauma recovery programmes. Critics argue these decisions have only deepened the failures of an already overwhelmed system.

Paul Sweeney, a Scottish Labour Member of the Scottish Parliament and Mental Health spokesperson, warned that the situation reflects a total breakdown in care, stating, "Thousands of people are being turned away from help in their hour of need." While NHS Greater Glasgow and Clyde offered an apology to Samavicius, the health board maintained that "appropriate treatment" was provided when possible.

These revelations raise pressing questions about whether continued reliance on centralised bureaucracies and constant budget expansions under the Scottish National Party have genuinely improved care or merely papered over a system increasingly unable to deliver on its promises.