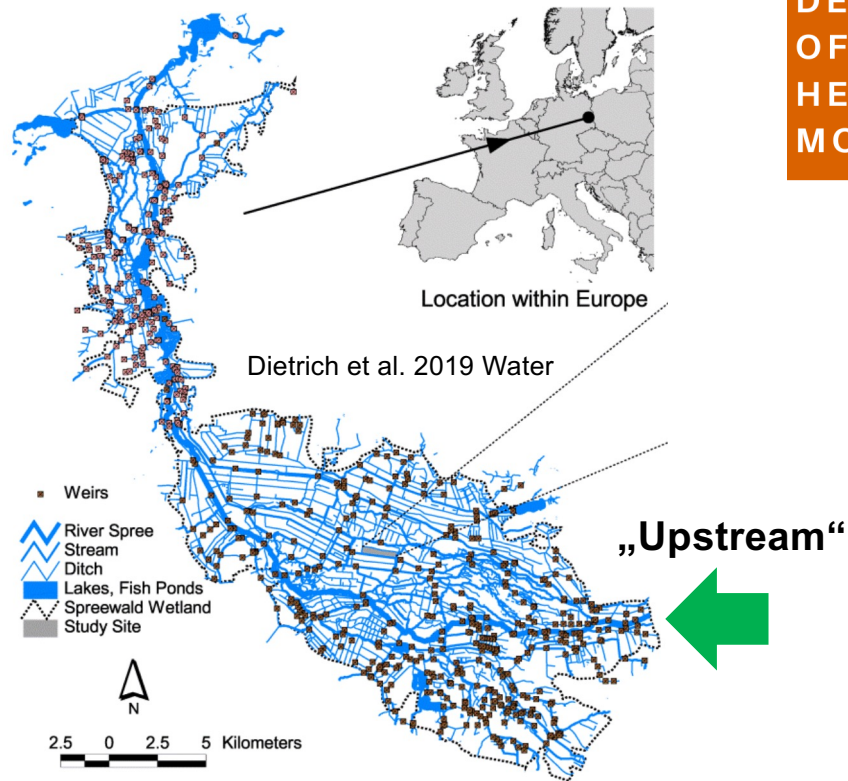


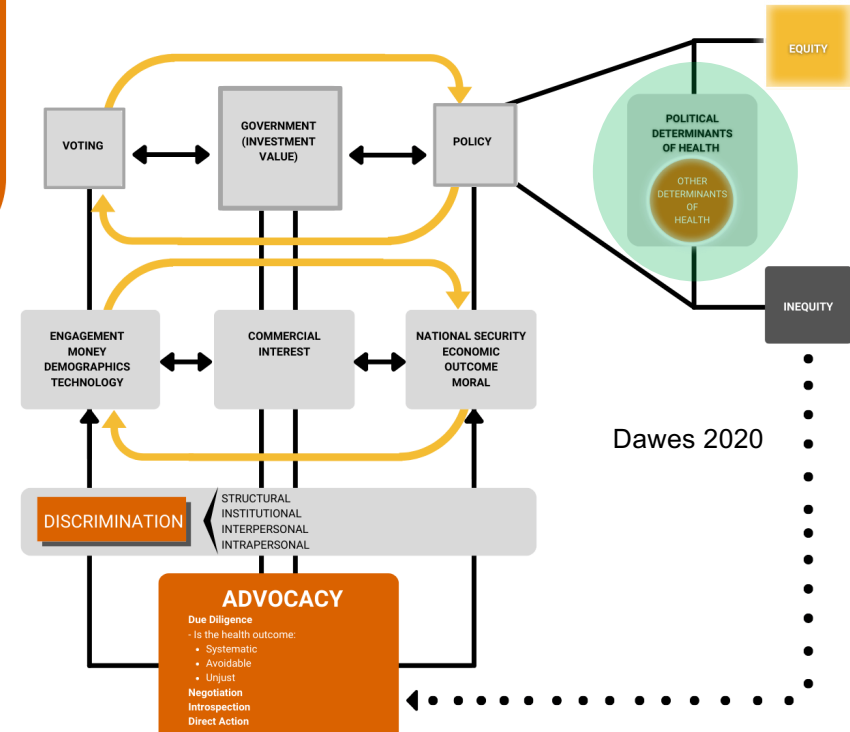
Heutige Agenda: Sehr konzentriert!

- **Was verstehe ich unter „Psychopolitik“?**
- **Politik und psychische Gesundheit**
 - **3 Beispiele**
- **Was braucht es in Zukunft?**

Gesundheit ist politisch - politische Determinanten von Gesundheit

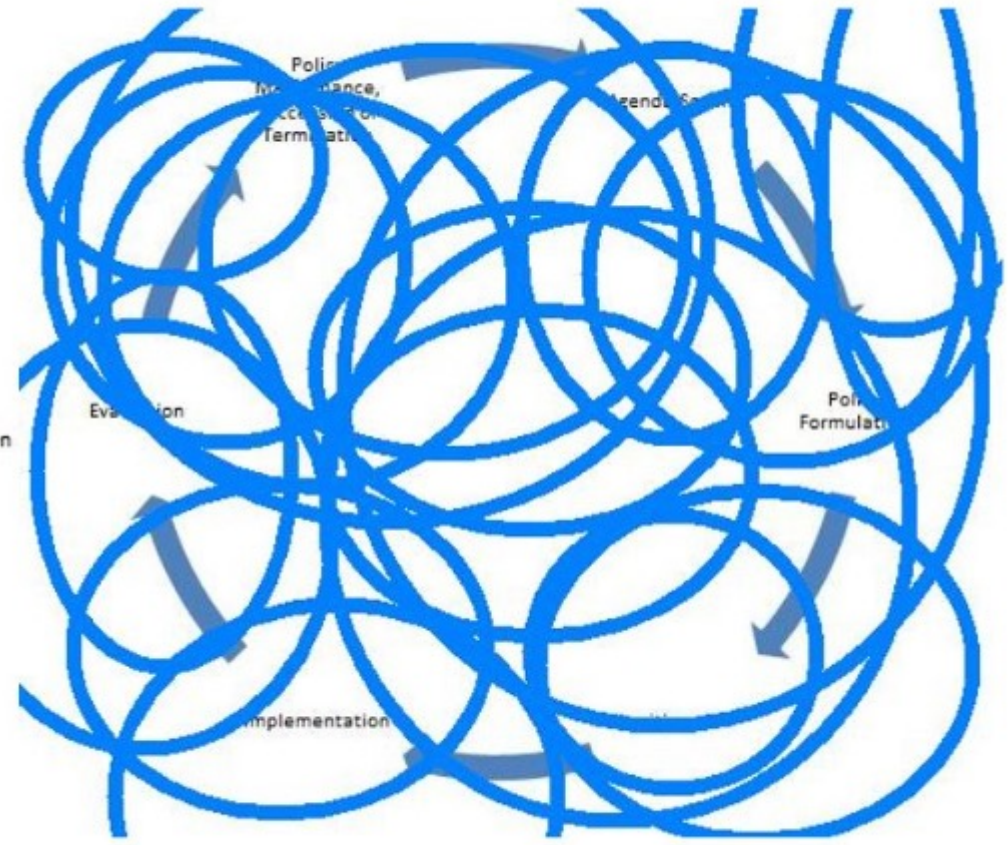
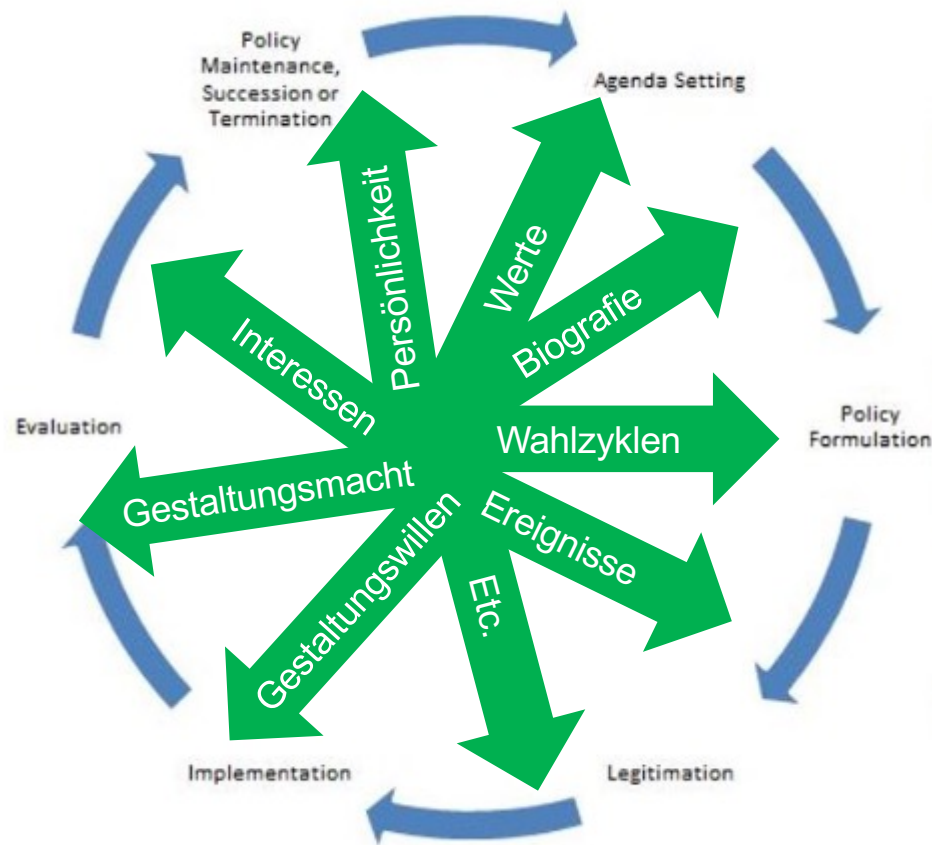


POLITICAL DETERMINANTS OF HEALTH MODEL



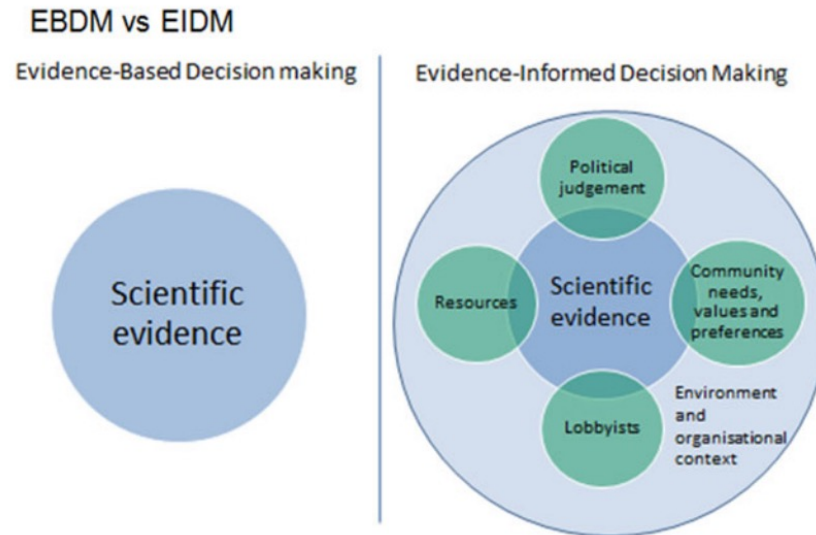
- Downstream Determinanten u.a.
 - Rechtlich, administrativ, sozial, ökonomisch...
- Hebelwirkung erkennen und nutzen

Ordnung und Chaos – ein paar subjektive Eindrücke aus der Politik



<https://paulcairney.wordpress.com/2017/07/10/5-images-of-the-policy-process/>

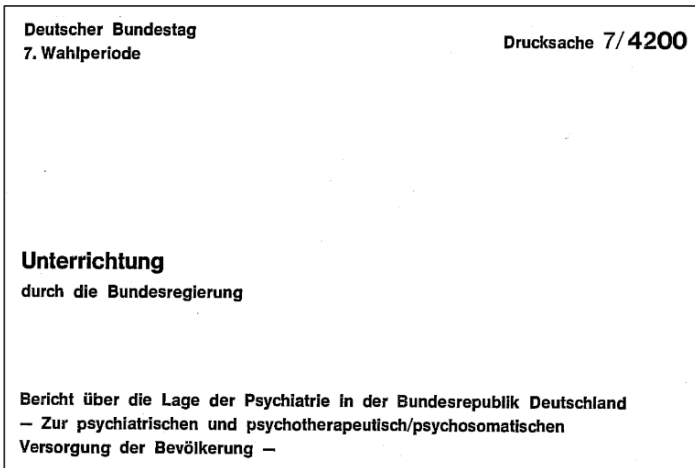
Werte – Emotionen – Evidenz



Aryeetey et al. 2017

- Werte und Emotionen zeigen eine starke Interdependenz (Deonna & Teroni 2015; Conte et al. 2023)
- Affekte/Emotionen spielen eine wichtige Rolle bei Gestaltungsprozessen
- Natürlich auch im politischen Kontext!
- Nostalgie, Vertrauen, Unsicherheit, Angst...

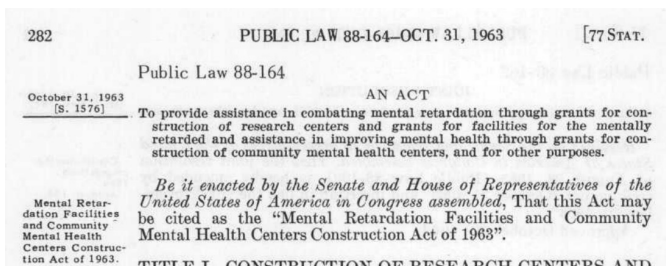
Beispiel: Psychiatrie-Enquête 1971-1973, Abschlussbericht 1975 in D



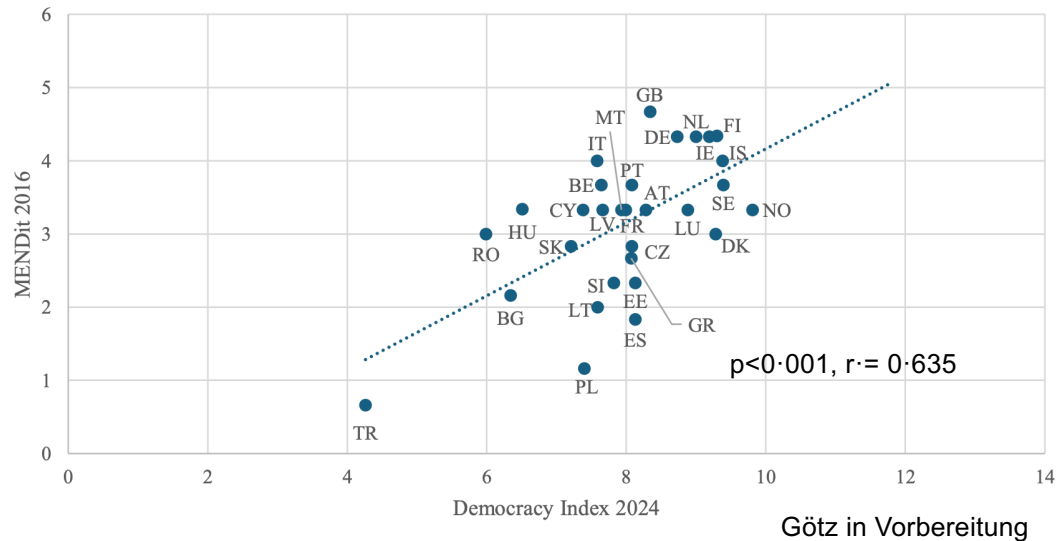
- Psychiatrie-Enquête war ein Meilenstein auf dem Weg zu einer deinstitutionalisierten, gemeindenahen psychiatrischen Versorgung
- Rolle von Walter Picard (CDU) (betroffener Angehöriger und Politiker) als Motor der Enquête

„Ich bin damals (1960) mit meinem Thema unter Beschuss geraten bei meinen Kollegen im Bundestag, weil ich mich mit den linken Krawallern zusammengetan hätte. Du kannst doch nicht mit den Kommunisten arbeiten, was fällt dir ein, ein CDU-Mann, der kann doch nicht mit den ganz Linken Krawall machen, das waren die Kommentare. **Sie hatten noch nicht verstanden, dass die Studenten von mir – auch als betroffenem Angehörigen – viel Anregung in Sachen Psychiatrie bekommen konnten.**“

- S. auch John F. Kennedy (ebenfalls Angehöriger) mit dem Community Mental Health Act von 1963



Beispiel: 50 Jahre nach der Psychiatrie-Enquête



- Korrelation Gesundheit, Gesundheitsversorgung und Vertrauen in Demokratie (Menon et al. 2025)
- Assoziation Demokratieindex und Deinstitutionalisierungsgrad psychiatrischer Angebote
- Ggw. erneute Exklusions- und Institutionalisierungstendenzen
 - „And for those who are severely mentally ill and deeply disturbed, we will bring them back to mental institutions, where they belong.“ Donald Trump 11/24
 - D: Zunahme forensischer Betten (Lesting & Lindemann 2025), Diskussion über Register im Kontext von Psyche und Gewalt (DGPPN 2025, 2026)

MENDit: Mental Health Services Deinstitutionalisation Measure (Taylor Salisbury et al. 2016)

Democracy Index: Economist Intelligence Unit (2006-2024) – processed by Our World in Data. <https://ourworldindata.org/grapher/democracy-index-eiu?tab=table>

Beispiel: Anti-Transgender-Gesetzgebung und Suizide in den USA

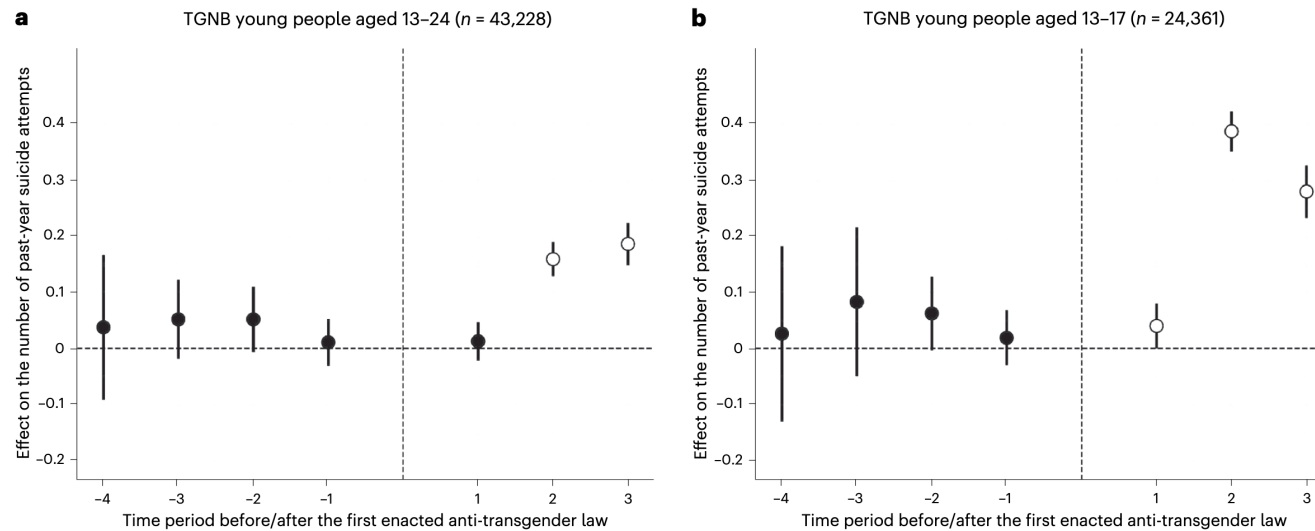


Fig. 1 | Effects of anti-transgender law on past-year suicide attempts.

a, b, Event study plots of effects of enacted state-level anti-transgender law on the number of past-year suicide attempts among TGNB young people aged 13–24 (n = 43,228) (**a**) and those aged 13–17 (n = 24,361) (**b**). Data are presented as mean \pm 1.96 s.d. Open circles are statistically significant; filled circles are not statistically significant at 95% confidence level. Values in the x axis represent

the number of time periods before or after the first enacted anti-transgender law; values in the y axis represent the regression coefficients in the estimated equations. The dashed vertical line represents the time period during which the first anti-transgender law was enacted (that is, time period 0); the dashed horizontal line represents where the estimated regression coefficient equals zero.

Article <https://doi.org/10.1038/s41562-024-01979-5>

State-level anti-transgender laws increase past-year suicide attempts among transgender and non-binary young people in the USA

Received: 12 December 2023

Accepted: 21 June 2024

Published online: 26 September 2024

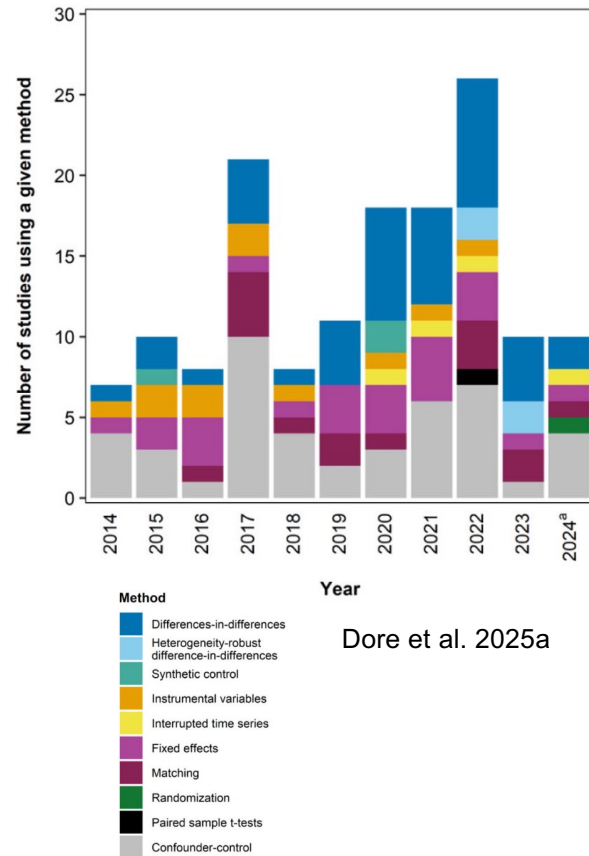
[Check for updates](#)

Wilson Y. Lee , J. Nicholas Hobbs, Steven Hobaica , Jonah P. DeChants , Myeshia N. Price  & Ronita Nath 

From 2018 to 2022, 48 anti-transgender laws (that is, laws that restrict the rights of transgender and non-binary people) were enacted in the USA across 19 different state governments. In this study, we estimated the causal impact of state-level anti-transgender laws on suicide risk among transgender and non-binary (TGNB) young people aged 13–17 (n = 35,196) and aged 13–24 (n = 61,240) using a difference-in-differences research design. We found minimal evidence of an anticipatory effect in the time periods leading up to the enactment of the laws. However, starting in the first year after anti-transgender laws were enacted, there were statistically significant increases in rates of past-year suicide attempts among TGNB young people ages 13–17 in states that enacted anti-transgender laws, relative to states that did not, and for all TGNB young people beginning in the second year. Enacting state-level anti-transgender laws increased incidents of past-year suicide attempts among TGNB young people by 7–72%. Our findings highlight the need to consider the mental health impact of recent anti-transgender laws and to advance protective policies.

Beispiel: Auswirkungen von Sozialreformen

a. Studies using one or more methods by year



Social Science & Medicine 371 (2025) 117878

Table 2

Estimated effects of years of exposure to welfare reform in childhood on adult health.

	Poor Health b (95% CI)	Psychological Distress b (95% CI)	Chronic Conditions b (95% CI)
Treated			
Welfare Reform (conception to 5 years old)	0.03 (-0.002, 0.06)	0.41* (0.08, 0.74)	0.21*** (0.10, 0.33)
Sample Size	3,685	3,506	3,676
Control			
Welfare Reform (conception to 5 years old)	0.004 (-0.01, 0.01)	0.09 (-0.04, 0.22)	0.004 (-0.05, 0.06)
Sample Size	14,862	14,145	14,811
Treated			
Welfare Reform (6–18 years old)	-0.03** (-0.05, -0.01)	-0.33** (-0.54, -0.11)	-0.18*** (-0.25, -0.10)
Sample Size	3,685	3,506	3,676
Control			
Welfare Reform (6–18 years old)	-0.004 (-0.01, 0.002)	-0.02 (-0.12, 0.08)	-0.01 (-0.05, 0.03)
Sample Size	14,862	14,145	14,811

Notes: ***p < 0.001, **p < 0.01, *p < 0.05. Models control for childhood state fixed effects, year of interview fixed effects, time-varying state-level characteristics, and individual demographics. The treated group consists of individuals whose parents had a high school education or less and did not live with both parents for most of their childhood. The control group consists of individuals whose parents had more than a high school education, and individuals who lived with both parents for most of their childhood.

Dore et al. 2025b

1990er Sozialreformen in USA mit mehr Restriktionen/Sanktionen, höherem bürokratischem Aufwand

- Armut, Sozialleistungen und psychische Gesundheit korrelieren (Ridley et al. 2020; Ribanszki et al. 2022; Meina et al. 2025)
- In den letzten Jahren (2014-2024) vermehrt Untersuchungen zu Auswirkungen von Sozialreformen auf Gesundheit (Dore et al. 2025a, n=117, u.a. auch psychische Gesundheit (32%))
- Differenzierte Langzeiteffekte sichtbar (Dore et al. 2025b)
- Schaffung von Evidenz und Methodik herausfordernd (Kelstrup 2024; Kotlar & Tiemeier 2025; Craig et al. 2025)

Beispiel: Migrationspolitik UK

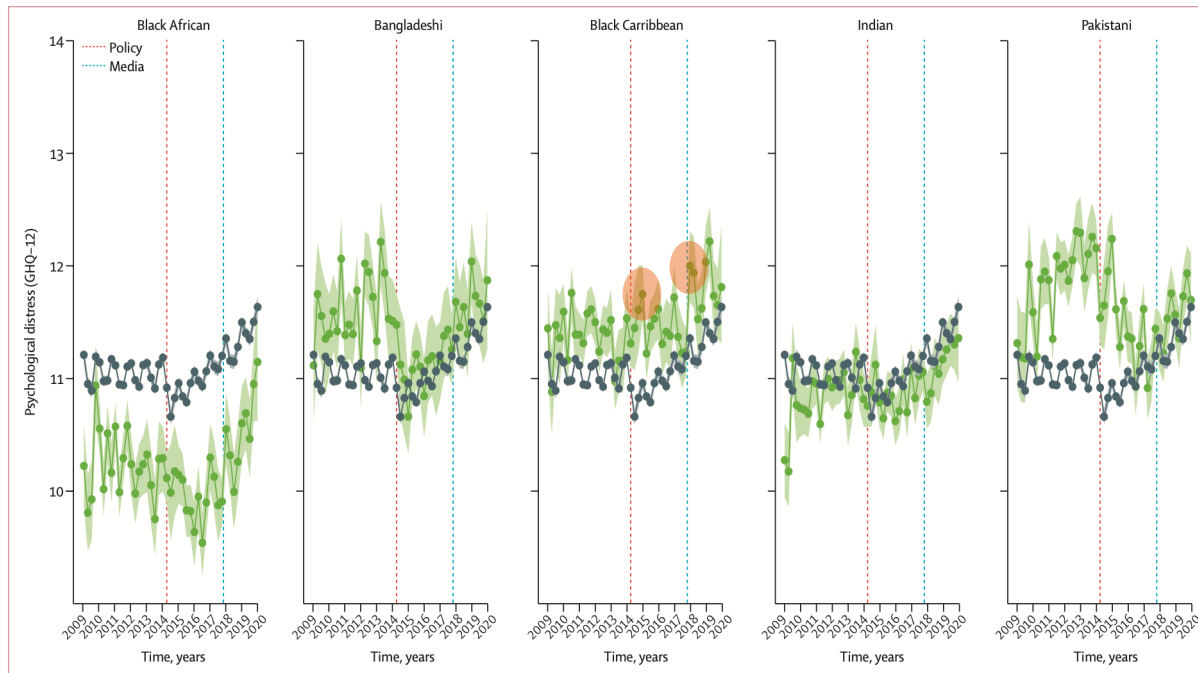


Figure: Effects of the hostile environment policy on mental ill health across different ethnic groups compared with people of White ethnicity
 Green data points and lines represent mean GHQ-12 scores from the respective ethnic minority groups; black data points and lines represent mean GHQ-12 scores from the White ethnicity group. The red dashed line shows the implementation of the Immigration Act 2014 and the blue dashed line shows the start of the Windrush scandal media coverage. GHQ-12=General Health Questionnaire 12-item version.

Jeffery et al. 2024

- 2012 ff in UK Politik eines „feindlichen Klimas für illegale Migranten“ (T. May)
- Besonders betroffen Black Carribeans
- 2017 Windrush Skandal: Unrechtmäßige Ausweisung von Black Carribeans mit legalem Aufenthaltstitel



What has been the impact of western governments' laws and policies on the mental health of asylum seekers and refugees? A systematic-narrative hybrid literature review

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Tilburg University, the Netherlands

ARTICLE INFO

Keywords:
 Asylum seekers
 Refugees
 Law
 Policy
 Mental health

ABSTRACT

This article reviews research on the causal impact of Western governments' laws and policies on the mental health of asylum seekers and refugees. The systematic-narrative hybrid literature review yielded 34 studies using quantitative, qualitative and mixed methods approaches, focusing almost exclusively on restrictive and deterrence-oriented measures. The synthesis shows that, over the last two decades, Western governments' laws and policies around detention, access to basic rights, asylum procedure, and reception have had a substantial and almost exclusively negative impact on the mental health of protection seekers. Based on our findings, we urge legislators and policymakers to consider the long-term consequences and costs of the laws and policies they introduce, within and beyond the realm of mental health. In addition, we highlight the need for more research on governmental measures that are likely to have a positive impact on the mental health of asylum seekers and refugees.

Psychische Gesundheit weiter gedacht....

Concepts and New Frontiers for Development

Democracy: the forgotten determinant of mental health

Marilyn Wise and Peter Sainsbury

Context

Promoting mental health is a relatively new initiative being taken by organisations, governments and individuals in countries across the world.^{1,2} These initiatives have been stimulated, variously, by concerns such as the global burden of depression, high rates of suicide among young people in some populations, and growing evidence of mental health inequalities.³⁻⁶ In addition, even in economically developed nations there is debate about whether the proportion of people expressing satisfaction with their quality of life and/or happiness is increasing with economic growth.⁷ These illnesses, causes of premature death, and feelings of disappointment, despair and unhappiness are indicators of poor mental health in populations.

At the same time there has been growing evidence that, in addition to biological and behavioural factors, the health of populations is influenced, significantly, by social determinants

of health. Furthermore, the significant, persistent inequalities in health outcomes (including mental health) experienced within and between countries have been found to be positively associated with the unequal distribution of the social determinants of health.⁸⁻¹¹ More explicitly, the unequal distribution of the social determinants of health means that those people and groups who have the most limited access to these experience feelings of alienation, shame, powerlessness, despair and anger – all of which are linked with higher levels of mental ill-health.⁸

If it is to be possible to achieve positive mental health outcomes across populations, and to ensure that the distribution is equitable, it will be necessary to redistribute the social determinants of health. On one hand, this is a major challenge for health promotion specifically and for societies generally. On the other hand, it is within reach. The distribution of the social determinants of health is the responsibility of human decision-

nature medicine

Review article

<https://doi.org/10.1038/s41591-024-03307-w>

Political polarization and health

Received: 6 July 2024

Accepted: 18 September 2024

Published online: 25 October 2024

Check for updates

Jay J Van Bavel^{1,2}, Shana Kushner Gadarian³, Eric Knowles⁴ & Kai Ruggeri⁵

In addition to social determinants of health, such as economic resources, education, access to care and various environmental factors, there is growing evidence that political polarization poses a substantial risk to individual and collective well-being. Here we review the impact of political polarization on public health. We describe the different forms of polarization and how they are connected to health outcomes, highlighting the COVID-19 pandemic as a case study of the health risks of polarization. We then offer strategies for mitigating potential harms associated with polarization, with an emphasis on building social trust. Finally, we propose future research directions on this topic, underscore the need for more work in a global context and encourage greater collaboration between social scientists and medical scientists. We conclude that polarization is a serious – if largely overlooked – determinant of health, whose impacts must be more thoroughly understood and mitigated.

Review

The weight of office? A scoping review of mental health issues and risk factors in elected politicians across democratic societies

Alexander Smith^{1,2}, Stefanie Hachen¹, Ashley Weinberg³, Peter Falkai⁴, Sissel Guttormsen⁵ and Michael Liebrecht¹

Abstract

Background: The mental health and capacity to govern of democratically-elected politicians have become burgeoning topics of interest. Notably, in fulfilling demanding and high-stress roles, political officeholders could encounter distinctive risk factors, yet existing research literature about these subpopulations remains underexplored.

Aims: This scoping review aimed to systematically examine the breadth of available evidence on mental health issues and risk factors affecting democratically-elected politicians internationally and to identify future research needs.

Methods: Using pre-defined eligibility criteria based on JBI guidelines, a systematic keyword search was conducted in May 2024 of MEDLINE, Scopus, and APA PsycNet, supplemented by snowballing techniques. Only those studies reporting primary, empirical evidence on mental ill-health or risk factors with psychological correlates from serving politicians in “Full” or “Flawed” democracies (per Democracy Index) were included from 1999 to 2024. Titles and abstracts were screened and the full-texts of potentially eligible literature were assessed before extraction and synthesis.

Results: Eighteen sources met the eligibility criteria, cumulatively encompassing ~3,500 national, state, and municipal politicians across seven democracies (Australia, Canada, the Netherlands, Norway, New Zealand, the United Kingdom, and the United States). Cross-sectional surveys were predominantly utilized, with lesser use of mixed-methods approaches, qualitative interviews, and longitudinal cohorts. Violence emerged as a key concept, with twelve sources (66.7%) underlining its psychological toll and certain data indicating a disproportionate impact on female officeholders. Furthermore, four sources (22.2%) explored general psychopathology trends, revealing varying but sizeable mental ill-health and high-risk alcohol consumption rates, and two studies (11.1%) demonstrated adverse effects from specific occupational conditions.

Conclusions: Current literature suggests that democratically-elected politicians can face complex mental health challenges. However, significant research gaps remain, including a paucity of prevalence estimates, longitudinal data, and intervention studies. Equally, the underrepresentation of most democratic countries accentuates the need for a more diverse evidence-base to better support the mental wellbeing of politicians worldwide.

Keywords

Politicians, mental health, political violence, democracy, members of parliament, political science

Psychiatry's Obligation to Promote Voting Among Patients With Mental Illness

Julie A. Graziane, M.D., Aria Ghahramani, M.D., Joy Luther Bowen, M.P.I.A., Sarah Horton, B.S., Alison Swigart, M.D., Elisabeth Kunkel, M.D., Katharine B. Dalke, M.D., M.B.E.

The American Medical Association adopted a resolution in June 2022 recognizing voting as a social determinant of health. As psychiatric professionals and trainees with experience in civic health, the authors argue that psychiatrists must consider the relationship between voting and mental health as part of care delivery. People with psychiatric illness can experience unique barriers to voting and garner mental

health benefits from civic engagement. Provider-led activities to promote voting are accessible and simple. Given the benefits of voting, and the availability of interventions to foster voter engagement, psychiatrists have an obligation to promote voting access among their patients.

Psychiatric Services 2023; 74:1291–1293. doi: 10.1176/app.ps.20230006

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Sage

- Downstromeffekte politischer Entscheidungen oder Untätigkeit (z.B. Klimaangst, Hickman et al. 2021)
- Polarisierung wirkt sich negativ auf psychische Gesundheit aus
- Repräsentation und Akzeptanz von Menschen mit psychischen Beschwerden im politischen Alltag und als Wähler:innen

Ausblick: Den Rahmen mitgestalten und ausfüllen!

- **Rahmengestaltung** ist (nicht nur) eine Aufgabe der „Politik“
- Gemeinsame **Ziele** aushandeln und leben: Gesamtgesellschaftlichen **Wert** von psychischer Gesundheit und Wohlbefinden herausheben! (Vanderweele et al. 2025)
- **Stigma** psychischer Erkrankungen reduzieren (Thornicroft et al. 2022)
- **Co-Kreation** und **Empowerment** schaffen Transparenz und Vertrauen
- Evidenz-informierte **Resonanz- bzw. Empathieräume** schaffen = **Beziehungen** ermöglichen
 - Emotional: „Storytelling“ und „Storyliving“
 - Kognitiv: Daten – v.a. legal epidemiology (Schnake-Mahl et al. 2025)
- Spagat aus „lauter“ Klarheit und intellektueller Bescheidenheit (seitens professioneller Vertreter:innen, Porter et al. 2022)
- Unterschiedliche **Zeitperspektiven** im Blick haben (Esposito & Becker 2023)
- Strukturierte **Vernetzung mit vielen Perspektiven** schafft Masse und Impact

Ein Ansatz: www.mental-health-alliance.org

Für ein System der mentalen Gesundheit, das stärkt, bevor es behandelt

Unsere Vision ist eine Gesellschaft, in der Wohlbefinden und psychische Gesundheit als selbstverständlicher Bestandteil eines resilienten und zukunftsfähigen Gemeinwesens gelten – als Querschnittsaufgabe in allen Politik- und Lebensbereichen („Mental Health in All Policies“). Eine Gesellschaft, in der gesunde Rahmenbedingungen und frühe Unterstützung dafür sorgen, dass Menschen – insbesondere Kinder und Jugendliche – unabhängig von Herkunft oder Lebenslage gestärkt aufwachsen, lernen und leben können.

- Partizipation
- Breites Bündnis mit vielen Perspektiven
- Leitbild: Mental Health in/for All Policies
- Evidenz-basiert
- Vernetzend - Vernetzt
- Brücke zwischen bundesweiten Systemrahmen und mentalen Gesundheitsregionen

