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Impact of Peer Work in Social Psychiatry: Improving Quality or Missing Link for Inclusion

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Psychiatric diagnosis still is strongly linked with stigmatization and discrimination, it is regarded as “ultimate stigma” (Falk 2001), as second illness “(Finzen 2013), it goes along with “stigma by association” (Goffman 1975) and affects not only all areas of life, but also the staff (Thornicroft et al. 2009). One of the greatest threats to shaping their lives for those affected is the rejection from employment even though having recovered and being able to manage residuals or episodes. Work itself is beyond providing income an existential factor for well-being and health by affecting the socio-economic status as well as belonging and structure in daily living: protective factors that, being missed, can in reverse lead to mental health issues. So, in this context, stigmatization still is a great problem, although there is the UN CRPD (UN 2006) which sets agreed measures for inclusion and although there are several legislative implementations in different countries in Germany as well, that strengthen inclusion as a fundamental right. With the European Leonardo Da Vinci Project 2005-2007 „Experienced Involvement (EX-IN)” the problem is addressed by professionalizing peers with mental health issues for further deployment in social psychiatric care, gaining Peers as colleagues. In this contribution, taken from the results of a doctoral research project on “Experienced Involvement in social psychiatric care of Germany”, challenges and chances are discussed. After a short view on the actual employment situation of EX-IN in Germany, the effects of implementation of peers as colleagues on services, teams and colleagues, service user and EX-IN themselves are discussed and contextualized with the claim of improving inclusion.