SOCIAL AND CULTURAL CONTEXTS REGARDING MENTAL HEALTH IN ROMANIA. INTERVENTION STRATEGIES

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Abstract: Our concerns regarding mental health have increased due to our participation in a European project on the labour and society insertion of youth suffering from a mental disorder. The follow-up of this project is a new project whose target group are the elderly suffering from a mental condition. After documentation and study of literature, we have identified some relevant aspects regarding mental health in Romania. Though our country has made significant progress in this area, the socio-professional reinsertion of these people remains an issue. The aim of the project is this particular aspect, i.e. the reinsertion of the mentally disordered people. We believe that social integration facilitates a faster and more efficient recovery. Another aspect identified in the studies but also in practice, refers to insufficient knowledge of the characteristics of mental disorders, hence the population’s attitude and prejudices. We aim through our research to signal and bring awareness upon the fact that mental health is a sensitive area, yet curable like any other disease if interventions use specific tools adapted to the needs of each suffering person.

Keywords: mental health, mental disorder, stigmatization, prejudices, strategies

An Overview
Overview
Mental health as basic part of an individual’s life, is a state of wellbeing which offers the individual personal comfort, i.e. a state of wellbeing towards him/herself and the others. Mental health offers the individual the ability to assort daily activities with wishes, interests, feelings and personal consciousness. Mental health is also inner peace and tranquillity; it involves acceptance, work satisfaction and the joy of living. Mental health is not only a strictly personal matter; a person suffering from a mental disorder is of concern for everyone, s/he interacts with under several aspects: affective, professional, social and economic. Thus, we notice that
mental health is a major issue in the European community and a desideratum followed with special attention. In 2001 WHO\textsuperscript{8}, based on statistics that were available at that time, reiterated the idea that an average of one in four people suffers from a mental disorder, more or less severe throughout their lifetime. The 2006 WHO Conference Report mentioned the following aspects related to mental health at European level: \textit{Out of 880 million inhabitants of the European region, an estimated number of 100 million suffer from anxiety and depression; more than 21 million people suffer from alcohol related disorders; more than 7 million suffer from Alzheimer disease and other cases of dementia; approximately 4 million people suffer from schizophrenia; 4 million from bipolarity; and 4 million people suffer from panic attacks.}\textsuperscript{9} WHO has noticed that neuro-mental disorders are the second cause of death after cardiovascular causes.\textsuperscript{10} It is common knowledge that when a person faces a mental disorder, his/her ability of facing the challenges of the society and of a normal social life drop significantly, causing disorder and a state of discomfort in all aspects of the person`s life. The main concern of the Ministry of Health in every country and in Romania as well, is to promote the population`s mental health but mostly to act towards disease prevention. In Romania, 3.2% of the population admits facing mental health issues.\textsuperscript{11} It has been noticed that the care provided for people with mental disorders in Romania faces certain malfunctions, it is incomplete and has weak or missing parts\textsuperscript{12}. In this respect, the system tries to promote prevention measures through organisms that are responsible for health education in schools, sanitary organizations and the mass media. Consequently, the aim is the identification of problems concerning mental health and finding viable solutions to improve and overcome them as efficiently as possible.


\textsuperscript{9} Santé mentale: relever les défis, trouver des solutions. Rapport de la Conférence ministérielle européenne de l’OMS, 2006


\textsuperscript{11}Manuela Sofia Stănculescu,Dana Niţulescu, Mihnea Preotesi,Mugur Ciumăgeanu, Raluca Sfetcu, Persoanele cu probleme de sănătate mentală în România: stereotipuri, cauze și modalități de îngrijire percepute, atitudini și distanță socială http://www.revistacalitateavietii.ro/2008/CV-3-4-2008/04.pdf

\textsuperscript{12}http://ec.europa.eu/health/archive/ph_determinants/life_style/mental/docs/romania.pdf
According to Law no 487/2002 republished in 2012, the Law on mental health and protection of people with mental disorders, we define a person with mental disorder as follows:

a) a person with a mental unbalance or a person who is insufficiently developed mentally or addicted to psycho-active substances whose manifestations can be included in the diagnostic criteria used by the psychiatric practice;

b) person with mental disorders who is unable to understand the significance and the consequences of his/her behaviour and therefore needs immediate psychiatric help.  

Distinctive characteristics

People suffering from mental issues hide their problem from their acquaintances and relatives or sometimes they aren’t even aware of their problem. Mostly, there are warning signs that can be easily identified when certain symptoms are noticed. The person:

1. Loses joy of living and no longer enjoys anything;
2. Does not find a goal in life;
3. Experiences feelings of guilt;
4. Is isolated from family, friends and society;
5. Experiences panic, fear and anxiety;
6. Loses interest for the most enjoyable activities and hobbies;
7. Shows a state of lethargy, lack of energy;
8. Has too much energy, difficulty in completing a task, poor concentration;
9. Shows irritation, uncontrolled nervousness;
10. Hears voices and sees pictures not seen by the others;
11. Thinks that everyone conspires against him/her;
12. Shows violence towards him/herself or the others;
13. Feels incapable of facing daily issues and activities;
14. Makes substantial changes to his/her behaviour, in daily food and sleep routines;
15. Has suicidal thoughts.

Good mental health allows people to find a balance between family, social activity and keep control over their own life. Health and mental illness are

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14 https://www.google.ro/?gws_rd=ssl&q=sanatate+mintala+sau+mentala
thus the two poles of a continuum, between which each person evolves (Obsan, 2011)\textsuperscript{16}.

**What needs to be done**

Obviously, state policies focus on fund allocation to increase the capacity to promote public health, as well as the prevention and implementation of actions that are for the benefit of the mentally disabled who are a distinctive category. A person, who has already contacted a mental disorder is already stigmatized by social prejudices and it is very difficult to reintegrate in any social activity. Stigmatization leads to the mentally disabled’s discrimination and to isolation and they gradually lose confidence in themselves and self-esteem. The consequence is the degradation of family relationships, alienation and isolation, all along with complications in the progress of the disease. The costs are both emotional and economic. It is necessary to develop prevention measures, sanitary education, promotion of mental health, treatment according to the disease and to the person in such a situation as well as palliative intervention, which is a long term care and requires continuous rehabilitation treatment. (Fig.nr.1.)

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\textsuperscript{16} Plan d’action en dix objectifs pour la santé mentale, Canton de Neuchâtel Elaboré par le Service cantonal de la santé publique, Département de la santé et des affaires sociales (DSAS), 2012

www.ne.ch/.../sante-mentale/.../Plan%20d'action
Fig.no.1. The concept of mental health
Bringing back these people on the right path, providing them with a normal, active, productive and creative life is a costly and complicated endeavour, if not almost impossible. Therefore, programmes that focus on the following aspects are needed:
- strategies of developing competence in maintaining mental health;
- strategies of identifying risk factors and access to measures which fight them;
- strategies of keeping the mentally disabled on the labour market.

Fig.no. 2. Strategies for fight with mental illness

There is a huge difference currently, at least in Romania, between the necessities of the mentally disabled and the offer in the socio-medical field. Differences are noticed also at European level according to a study conducted by WHO in 2003. According to this study, only 2,5 % out of 90% of the mentally disordered people, benefited from treatment in the last 12 months. 8% of the urban population and only 4% of the rural population sought for a psychologist`s help, mainly because institutions where psychologists are employed are more common in cities than in villages. The European policy on mental health has made huge steps in the development of programmes through EU financed projects.

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Methodology
The ERASMUS +KA project, Professional networks for mental health and strategic partnership for the elderly was gained by the partner from Luxembourg, Luxembourg Institute of Health, (RPSMPA) with Aurel Vlaicu University of Arad as partner along with: Centre Neuro Psychiatrique Saint-Martin from Belgium, Center of Psychological and Pedagogical Support from Greece, Panepistimio Kritis University from Crete, EPSM Lille Metropole and the University of Luxembourg. The project is a follow up of a previous project entitled Employability in Europe – public health and mental health: urgent needs for training, social integration and employability (SPSM) whose main objective was the improvement of professionals` activity so as to enhance social and occupational insertion of the mentally disabled on the labour market. The target group of the beneficiaries of the SPSM project were young, employable people while the beneficiaries of the second project are the elderly who contacted a mental condition at some point in their lives. The purpose is to provide them with a decent living, to enhance socialization, to make them feel useful ad accepted along with the attempt to improve the quality of their lives.
In short, the aim of RPSMPA project is the improvement of the professionals’ competences and abilities in the area of medical care and
social assistance of the elderly so as to reduce risk situations. This goal is pursued from a double perspective: improvement of professional practice networks and improvement of care for the elderly diagnosed with a mental disorder.

We believe that the project will be successful as we find specialists from different scientific and professional areas, as well as from medical and psycho-social field among its members.

The project implementation methodology is based on a scientific approach in six stages:

1. Building professional multidisciplinary teams to investigate the local situation of the elderly with mental conditions and to analyse the international scientific literature.
2. Knowledge of the elderly’s needs and elaboration of concrete proposals for training specialists in multidisciplinary teams to improve practices in the local network through appropriate and concrete strategies.
3. Developing professional competences and improving the professionals’ practice, of those who care for the mentally disabled people.
4. Improving the tools used in the dissemination of good practices by using a platform for communication among professionals.
5. Elaborating a guide for good practices used in professional intervention in situations with elderly people suffering from a mental condition.
6. Disseminating the project results in scientific publications, on the project website and in some international conferences.

The strategic objectives of the project aimed for the period 2016-2019 are the following

According to the National strategy for promoting active aging and protection of the elderly 2015–2020\(^{18}\), Romanian population is aging and according to Eurostat 2013: healthy life expectancy for women at birth is –57,9 years compared to UE 28 average -61,5 years; healthy life expectancy at birth for men –58,6 years compared to UE 28 average -61,4 years).

Thus, the aim is a longer and healthier life for the elderly along with increased social and political involvement of them by implementing measures such as:

16 Elaborating a set of methods used for the identification of the elderly suffering from a mental condition and facing social issues;

17 Quality social services that would lower the dependence of the elderly;

Improving the infrastructure for home care (with emphasis on rural and isolated areas), day care services, retirement homes and intermediary accommodation facilities;

Improving recruitment services, training of people who offer care services organized according to the Social Work Nomenclature;

Development of support mechanisms for informal caregivers (family), including training, preferential access to temporary financed care (for example, 10 days per year within the programme for health resorts) for caregivers and patients with long term care;

Development of an action plan, programmes, professional activities for support and protection of the elderly;

Facilitating access to information on the rights and concrete access ways to social work services through knowledge of the legal framework and access to suitable services;

Providing support through counselling, to rebuild the social and professional integration of the elderly with mental disorders.

These are only some of the measures that need to be implemented by the Romanian social system. The Romanian Government through the Ministry of Labour, Family, Social Protection and the Elderly has developed a strategic action plan for 2015-2020, as well as operational plans, measures and assessment methods to monitor the implementation of these measures.

Conclusions
The improvement of life quality for the elderly who contacted a mental disorder is a major objective and it can be reached only by activating social, demographic, psycho-social and biological factors. Poverty, social isolation, loss of independence are causes that lead to a deterioration of an elderly’s mental condition.

Promotion of mental health involves creating conditions for the elderly so that they would benefit from a quality life, use their personal talent, conduct a creative activity and get actively involved in the social life.

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***Centrul de sanatate mintala.
Conceptul de sanatate mintala.

https://www.google.ro/?gws_rd=ssl#q=sanatate+mintala+sau+mentala


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