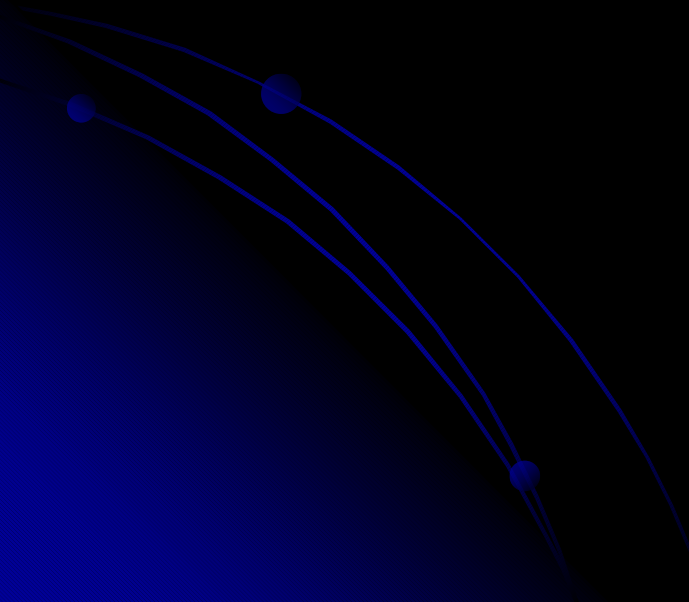


# Mental Health in Romanian Occupational Medicine

Elena-Ana Pauncu, Associate Professor  
University of Medicine and Pharmacy  
“Victor Babes” Timisoara, ROMANIA


- WHO estimates: the mental disorders and those generated by the alcohol and drug addiction will be rising in the next decades.



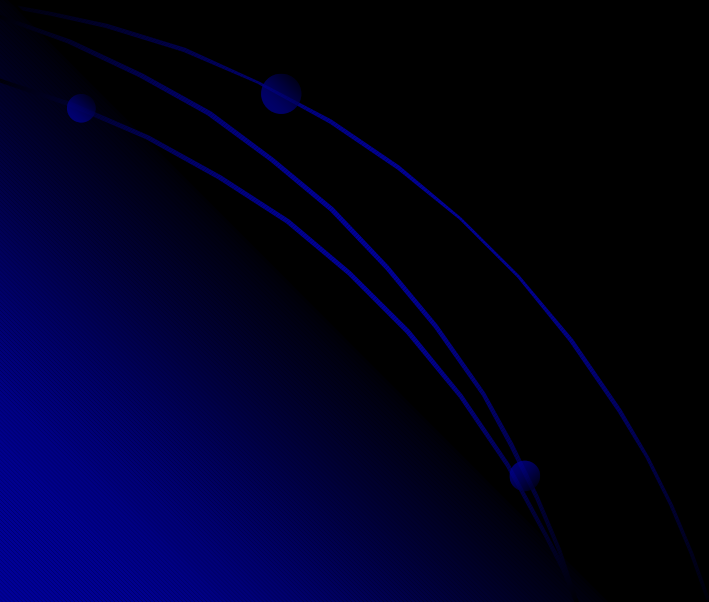
# ***The Green Paper and the future EU strategy on Mental Health***

***Francesco Longu, Communications Officer - European  
Public Health Alliance (Bucharest, 26 January 2006)***

- 1 person out of 4 will experience mental ill health during his/her lifetime
- About 58,000 citizens die each year from suicide
- People with mental ill health or disability experience stigma, discrimination or non-respect of their dignity and fundamental rights
- **Integrate health into all Community policies**

- Mental Health in Romania – actual situation
  - Occupational Medicine, Mental Health, Teaching OH
- 

# Mental Health in Romania



# Statistic Data (1)

- 38 psychiatry hospitals (4 are of psychiatry and safety measures)
- 66 LSM, outpatient services (out of which a limited number are functional)
- Total chronic patients in 2004: 206,555\* (CCSS)
- Total number of beds for psychiatry: 15,700 (CCSS)
- Total number of psychiatry doctors: 975 (2004)
- The deficit of psychiatry doctors at national level is about 750 (2004)

# Statistic Data (2)

- Standard for staff in hospitals :
  - acute - 1 doctor position/ 12-16 beds
  - chronic - 1 doctor position / 30-40 beds
- Psychiatry doctors in ambulatory
  - Standard : 1 at 60,000 inhabitants
  - Total needed : 373
  - Total existing : 256 (1 for 60000 people)
- The relation hospital/ambulatory doctors
  - Actual 3:1
  - Ideal 1 : 1.5

# Statistic Data (3)

- 4168 nurses in psychiatric services (Only around 300 have a specific training in psychiatry)
- Currently there are around 100 social workers in the system of mental health service. 400 – 600 more are needed. The training of social workers (university degree) is good.

- In Romania, in the state-owned institutions, psychologists are currently used almost exclusively for examinations that take up almost all of their time.
- The involvement in doing therapy is minimal.
- They only apply several classic, cognitive, affective, projective tests.
- There is no assessment of the life skills, social skills, assessment of therapy and progress.
- Comparing to the present numbers, an extra number of 250 – 500 psychologists are needed.

# Statistic Data (4)

- Number of hospitalisations is 258 000 / year which means a number of 12/bed and year.
- Number of consultations: 1,7 million / year
- Number of ambulatory patients – 100 000/ year.
- **In 2004, 3% of GDP was allocated for the health sector, out of which 3% was distributed to the mental health field.**
- In 2003 , there were 165 000 new cases of mental health disorders diagnosed at the level of dispensaries. (National Institute of Statistics, 2004)

# Infrastructure

## **Types of existing units of psychiatric care:**

- Psychiatry hospitals,
- Sections and departments of psychiatry / other types of hospitals,
- Daily stationeries,
- Public and private psychiatry cabinets and mental health laboratories,
- Units of the ministries with own network (transportation, justice, army, labor, internal affairs, etc.)

# Services

- 38 mental hospitals and 75 psychiatric sections in general hospitals
- 16 700 beds (76/100 000 inhabitants); 11,5% of the total number of hospital beds, 4800 are for chronic patients
- 66 Mental Health Laboratories (outpatient services)
- 50 Community Mental Health Services are in course of starting
- Services for elderly people - underdeveloped
- Sheltered housing projects are only experimental
- The care model is old fashioned (**not client centred**).

# *Characteristics of the mental health care system in Romania*

- Concentrated in the hospitals and psychiatric departments.
- Excessively institutionalised while the reported number of beds is one of the smallest in Europe: 76,1 beds/100.000 people.
- The care model is mostly based on drug treatment.
- Lack of flexibility and diversity of services provided to people with mental disorders.
- Incomplete and not effective care services.
- The ambulatory services do not provide a continuum of care, but the continuation of drugs based care.
- A few local initiatives to improve the care and support for people with mental disorders.
- An official Strategy on Mental Health since 2005.

# Problems at Local Level

- Old mentalities and prejudices that generate **stigmatization, discrimination and social exclusion**
- The lack of information amongst the population regarding the problems in the field of mental health and available services
- The lack of alternative services of community care for the beneficiaries of psychiatric services
- Defective legislation with enforcement difficulties
- Insufficient financial, material and even human resources (psychologists, psychotherapists, social workers)
- Lack of involvement and poor collaboration of the local institutions in problems of mental health

# Legislation (I)

- **Mental Health Law (487/2002)**
- Publication on the site of the Ministry of Health of the final form of the enforcement regulations of the Law of Mental Health and of Protection of the Persons with Mental Disorders.
- **Order of the Minister of Health 639/2005 – The National Strategy regarding the mental health services**

# Legislation (II)

- Order of the Ministry of Health 661/2005 for the Constitution of a Consultative National Group in the area of psychiatric issues.
- Projects/Programs – shall be the basis for the improvement of the psychiatric legislation
  - PHARE Twinning Light Program with Dutch technical assistance (2005)
  - MATRA Project for the improvement of the hospitalization conditions in psychiatry and safety measures hospitals

# Law on Mental Health and Protection of People with Mental Disorders

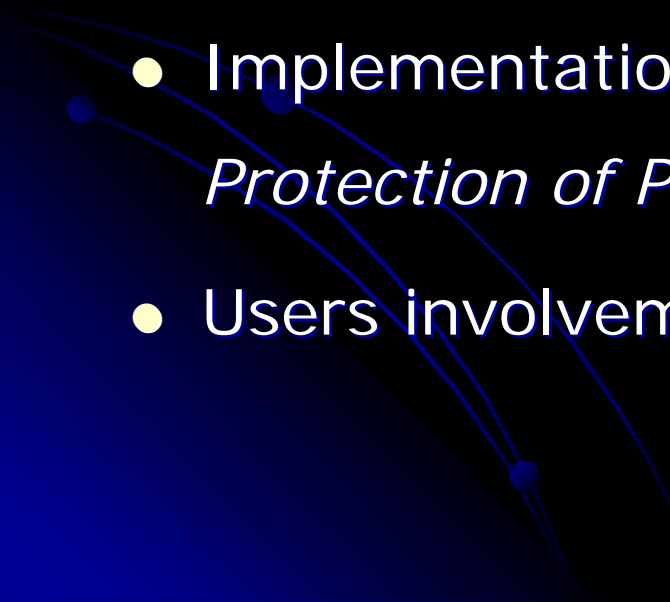
- Aims:

- improving the social and legal position of persons with mental disorders and
- improving the quality of and access to mental health care facilities.

- Chapters

- Mental health promotion and prevention of mental illness
- Assessment of mental health and diagnostic procedures
- Mental health care services
- Admission to a psychiatric unit

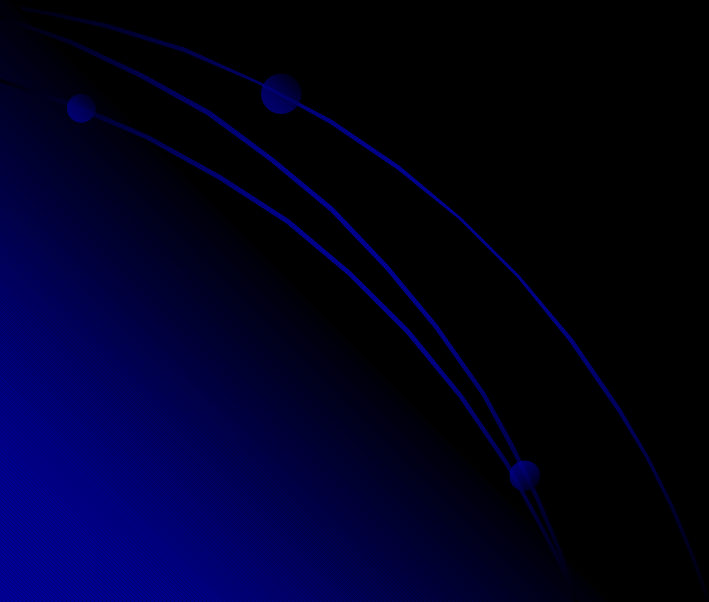
# Priorities

- Anti-stigma program
  - Community mental health centres
  - Quality improvement of hospital services
  - Training and education
  - Implementation of the *Law on Mental Health and Protection of People With Mental Disorders*
  - Users involvement
- 

# ACTION PLAN FOR THE IMPLEMENTATION OF MENTAL HEALTH POLICY

- National Mental Health Action Plan including short, medium and long-term objectives
- **stigma and discrimination of persons with mental disorder have a high prevalence in Romanian society, mental health promotion should be an essential part of the action plan.**

- Occupational Medicine, Mental Health, Teaching



# Mental health and wellbeing may cover the following domains:

- Subjective well-being/life satisfaction
- Personal and social relationships
- Occupation (personal development, employment and other activity)
- Engagement/participation in community

(Hird, Susan (2003) What is Wellbeing? A brief review of current literature and concepts NHS Scotland)

# ROMANIA

(01.07.2003)

Surface –  
238,391 km<sup>2</sup>

Population –  
21,733,556

“Active persons”  
between 20-59 years -  
12,567,300 inhabitants

3,986,014 employers  
1,885,931 exposed at risk

Occupational Diseases  
– 2,000/ year

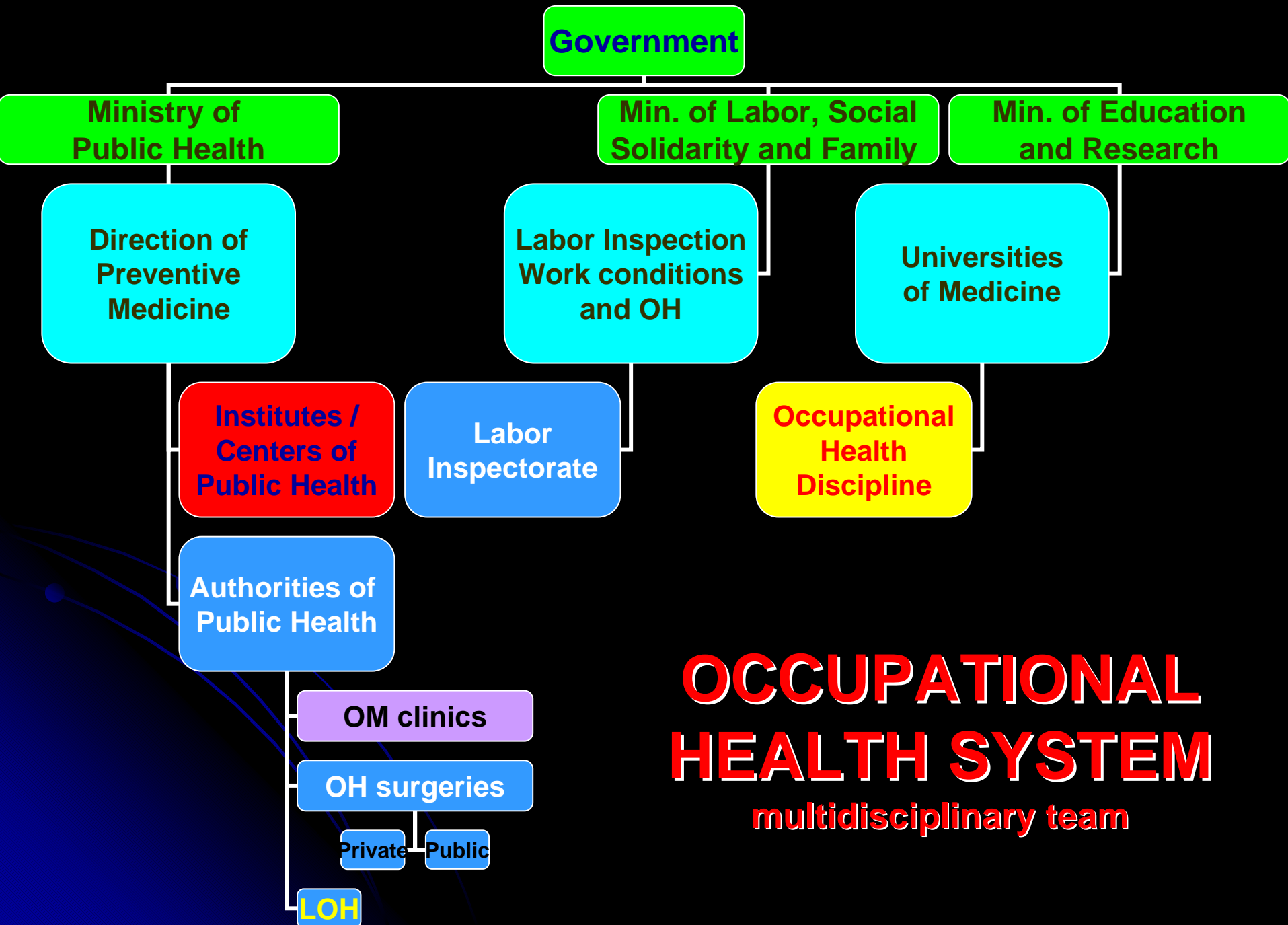


OH Physicians (2007)

338

OH Residents (2007)

392



**Government**

**Ministry of Public Health**

**Min. of Labor, Social Solidarity and Family**

**Min. of Education and Research**

**Direction of Preventive Medicine**

**Labor Inspection Work conditions and OH**

**Universities of Medicine**

**Institutes / Centers of Public Health**

**Labor Inspectorate**

**Occupational Health Discipline**

**Authorities of Public Health**

**OM clinics**

**OH surgeries**

**Private**

**Public**

**LOH**

# **OCCUPATIONAL HEALTH SYSTEM**

**multidisciplinary team**

# Training OM

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graph TD; A[Training OM] --> B[OM Discipline (Universities)]; A --> C[Clinics of OM]; A --> D[Institutes and Authorities of Public Health];
```

OM  
Discipline  
(Universities)

Clinics  
of OM

Institutes  
and  
Authorities  
of Public  
Health

# Romanian OH Curriculum, Mental Health of Workers

- 2 - 4 weeks in psychiatric clinics – practical stage of residents
- No psychiatric subjects in the final evaluation of the resident
- **No specific occupational health aspects linked at the work places, just psychiatric pathology – in the psychiatry stage**

# Teaching practice

Timisoara OH Discipline:

Lectures:

- Stress at the work place
- Risk assessment
- Violence, bullying, sexual harassment at the work place
- Psychiatric patients and professional activity
- Mental health and aptitude for work
- Mental health promotion

# *Mental health and work environment*

- It is widely accepted that people should balance between work and other activities.
- This aspect is very important for the social and economic areas. Work is expected to fill peoples' life and have a positive influence on their health status.
- Each person should work in good conditions without being exposed to unacceptable level of stress or other aggression.
- In order to support people integrating work and other activities in their lives, the stakeholders should be supported to develop campaigns encouraging employers to explore those practices allowing employees to balance the workplace and day-today tasks.

# *Mental health and work environment*

- Moreover, employers should be encouraged to develop anti-stress policies in the workplaces.
- Also, employers could be stimulated to develop projects on preventing and combating bullying, intimidation and assaults in the workplaces.
- Employees should be informed and educated to recognise and report or use the legislation to combat intimidation and assaults in the workplaces.
- The comparative analysis regarding Mental Health in the Workplaces could be useful in having the entire picture of public/ private sectors, the situation detailed by gender and geographic areas, a.s.o.

# *Specific recommendations regarding Mental Health in the Workplaces*

- Increasing the access of employees to mental health prevention centres at the workplaces and community centres.
- Informing managers and changing their attitudes regarding the impact of mental health in the workplaces on social/ economic indicators; assistance can be provided to them in order to implement preventive measures of mental ill health in the workplaces.
- Promoting the preventive measures of mental ill health in the workplaces focused on vulnerable and at risk persons.
- Multi-sectored approach of Mental Health in the Workplaces.
- Prevention of discrimination and stigmatisation related to mental ill health, in the workplaces.

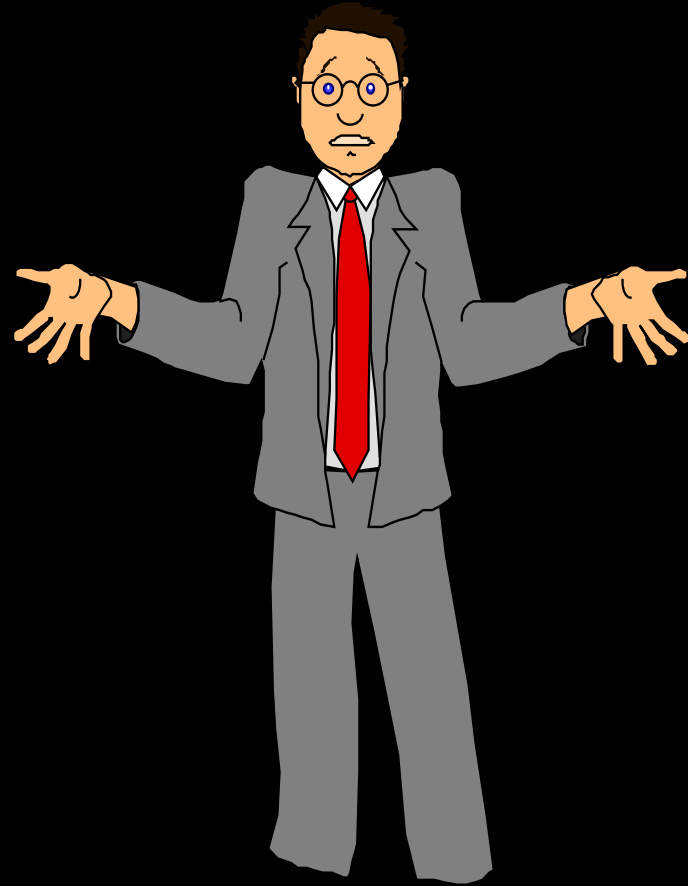
# *Specific recommendations regarding Mental Health in the Workplaces*

- Identifying the risk factors for mental ill health in the work environment (e.g. factors related to work management, work environment and psycho-social relationships at the workplace) for avoiding or reducing the impact of these on the nervous central system.
- Counselling the employers on guidelines to prevent and avoid workplace related stress.
- Elaborating guidelines on good practices addressed to employers and employees on prevention of stress at the workplaces.
- Developing the legislation on prevention of stress in the workplaces through adapting and implementing the specific regulations applied in the European Union
- Promoting mental well-being for the entire population, emphasising on the importance of Mental Health in the Workplaces.

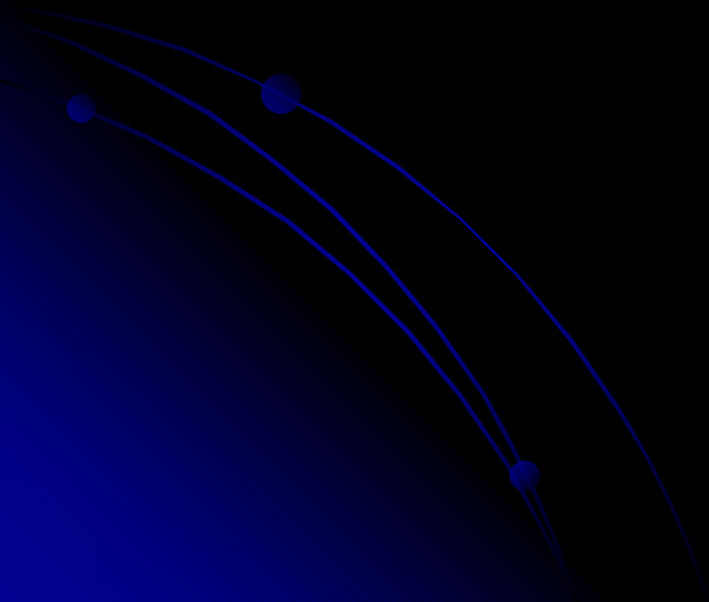
# Actual Situation in the Field

- Managers - time and money for production
- No coherent OHS politics, especially in small and medium size enterprises
- Multinational factories – OHS politics ( $\pm$ )
- No engagement of psychiatric persons, regular employment – problem
- “Important is to find a worker, a good one, **NOT THE WORKER!**”

And me?



**Thank you!**



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