

**Edu World 2016**  
**7th International Conference**

**SWOT ANALYZE OF WORK INTEGRATION FOR  
PEOPLE WITH MENTAL DISEASES**

Mihaela Gavrilă-Ardelean (a)\*

\* Corresponding author

(a) 'Aurel Vlaicu' University of Arad, Bd. Revoluției Nr.77, Arad, Romania, miha.gavrila@yahoo.com, +40740640912

**Abstract**

Neuropsychiatric disorders are the third leading cause of disability in Europe and represent 15, 2% of the total number of diseases, how are estimates for 2014 by World Health Organization (World Health Organization, 2014a).

The research aims to analyze the strengths, weaknesses, opportunities and threats, (SWOT Analyze) of the employers' perception regarding labour integration of people with chronic mental diseases, in Arad County.

The research runs on a total of 10 employers who received a questionnaire about the work integration of people with mental diseases.

The results were processed in a SWOT analysis.

The research results are relevant to facilitate the work integration of people with psychic diseases.

The employability of people with mental diseases will be ameliorated by improving the skills of counselling employment specialists. Based on the SWOT results, we establish the competences required to train employment counselling specialists. This requires specific competencies to help people with chronic mental diseases obtain and keeping a job. These competences will be established as a final result of an international research project.

© 2017 Published by Future Academy [www.FutureAcademy.org.uk](http://www.FutureAcademy.org.uk)

**Keywords:** People with mental diseases; work integration; SWOT Analyze; employers.

**1. Introduction**



Neuropsychiatric disorders are the third leading cause of disability in Europe and represent 15, 2% of the total number of diseases retrieved from Global Health Estimates Summary Tables for year 2014 (World Health Organization, 2014a).

In Europe, 27% of the adult population, 83 million people with age between 18-65 years experienced at least one mental disorder in the past year. Located in the European Union (EU) 1 of 15 individuals/year suffer a major episode of depression, while 4 in 15 people are affected by anxiety. Studies show that 32% of those affected had a mental disorder associated 18% two associated mental illness, and 14% three or more psychiatric diagnoses associated. This leads through socio-professional and functional implications related to a disabled life years (WHO, 2015).

The WHO Report for 2014, 'Preventing Suicide: A Global Imperative' estimated that 804 000 deaths products worldwide in 2012 were by suicide, annual global suicide rate is 11.4:100,000 inhabitants (World Health Organization, 2014b).

In rich countries 90% of suicides are due to a mental illness and 22% by alcoholism and its implications (traffic accidents, accidents at work, etc.), (World Health Organization, 2014b).

The problem is underestimated because studies have not been performed on all psychiatric diagnoses and taken in the study population over 65 years, which is growing numerically, due to current demographic trends: increasing life expectancy and the retirement age (WHO, 2015). Regarding the evolution of mental disorders in Romania, it is currently a problem for public health, because the prevalence of mental disorders is constantly expanding. Psychiatric disorders are debilitating, chronic, and recovery to long, requires great cost and effort. Mental illnesses have a disabling effect on the individual and the family and community. The impact is economic, societal, legal, medical and professional. It has doubled the number of discharges with psychiatric diagnosis (depressive syndrome) recorded in the medical system in recent years. In terms of the incidence of mental illness, Romania ranks second in Europe % inhabitants 1403.75, after Estonia, 2057.27 % inhabitants in 2011 (World Health organization, 2014a). It is reports 300,000 new cases/year (second place in Europe). Between the years 2007-2013, Romania ranks second in Europe in incidence of mental illness (SPSM, 2015). They are thus required psychiatric departments of general hospitals and major link in university clinics, crisis centers, psycho-geriatric services, psychiatric services and community forensic psychiatric services.

According to article 23 of law 487/2012 of mental health in Romania and the Universal Declaration of Human Right, any persons with mental disease have the right to live and work in community in accord with his' function capacity (Gavrilă-Ardelean, 2015).

In this field was makes a research project of integration into employment of persons with mental illness at European level: 'SPSM - Santé Publique, Santé Mental' (SPSM, 2015). In SPSM – Project, are upgrading skills and practices of specialists in socio-professional integration of people with mental health problems.

This is necessary to facilitate social and professional (occupational) integration of this category of population (SPSM, 2015). The amelioration of the employability of psychiatric patients, depending on the remaining functional capacity, in relation with the perception of employers regarding this occupational category and it is in law (Supravegherea sănătății lucrătorilor, 2007, Legea protecției maternității la locurile de muncă, 2003).

The amelioration of wellbeing, in bio-psycho-social terms, of this category of population is possible through socio-occupational integration and the increase of social utility (Gavrilă-Ardelean, & Gavrilă-Ardelean, 2016).

On international level were created protected workshops in micro type that people with mental health self useful to be paid. People with physical disabilities can be integrated into a joint team at work or you can make contracts subsidized by health insurance budget. An example of this is the program of reintegration of City Hall in Toronto through cooperation with professional teams in insertion employment of persons with mental disorders (SPSM, 2015).

### **1.1. The Aim Of Research**

This research aims to analyze the strengths, weaknesses, opportunities and threats, (SWOT Analyze) of the employers' perception regarding labor integration of people with chronic mental diseases, in Arad County.

The study was set up as preliminary research for laying the foundations of a research project of integration into employment of persons with mental illness at European level: 'SPSM - Santé Publique, Santé Mental' (SPSM, 2015).

### **1.2. Research Hypothesis**

In the West of Romania, there are specific regional needs, opportunities and threats of work integration for people with mental disease. These are in direct relation with the employers' perception regarding labor integration of people with chronic mental diseases, in Arad County.

## **2. Research Methodology**

### **2.1. The Study Group**

In the research run 10 employers who received a questionnaire about work integration of people with psychic diseases. The results were processed in a SWOT analysis. The results of the research are relevant to facilitate the social and professional (occupational) integration of people with psychic diseases.

## 2.2. Methodology Of Research

There were created models of grid questionnaires to analyze the employers' perception regarding labor integration of people with chronic mental diseases, in Arad County (SPSM, 2015).

At the time of employment, the beneficiaries are compensated in terms of functionality through medication, psychotherapy, social and welfare monitoring. This is done by a multidisciplinary team composed of: psychiatrist, specialist in occupational medicine physician, psychologist and social worker (Gavrilă-Ardelean, & Gavrilă-Ardelean, 2016). They applied grid investigation for a number of 10 employers.

Grids investigation questioned aspects of perception regarding integration into employment of people with mental diseases. The grids were completed by a total of 10 employers, potential employers and managers of companies and enterprises, but also by team leaders and executives zonal units of the headquarters of the company is in another locality and several outlets have location in Arad County.

These companies work units of activity:

- Catering (restaurant);
- Car wash;
- Vulcanizing shops and auto mechanics;
- Metal fabrications (welders);
- CNC lathe operators (CNC operators) in manufacturing medical parts;
- School (cleaning maid);
- Waste sorting workers.

The 10 employers completed each questionnaire in the doctor's office, under the supervision of occupational physician.

At the same time, meetings were held in small groups, focus groups, consisting of 2 to 3 employers in the profile of activity, during which were discussed main needs, possibilities and threats in various fields in order to labor integration and to adapt the organization for people suffering from mental diseases.

## 2.3. Search Results

The responses to the grids and meetings are gleaned in a SWOT analysis. This is shown in table 1.

**Table 1.** SWOT Analysis results of current or inside points.

	<b>Positive – Strong Points</b>	<b>Negative – Weak Points</b>
Current or Inside	<ul style="list-style-type: none"> <li>- Job with little risk of injury;</li> <li>- Job without psychic overloading;</li> <li>- Good relations between employer and employee.</li> </ul>	<ul style="list-style-type: none"> <li>- Lack of knowledge of a network of support in finding suitable employment;</li> <li>- Inability to engage in certain fields;</li> <li>- Incompatibility;</li> <li>- High taxes /employee;</li> <li>- Inability to work.</li> </ul>

SWOT analysis notes that currently, in Romania and in the county of Arad, strengths, positive opportunities regarding the employability of people with compensated functional mental diseases, are:

- availability of jobs with little risk of injury;
- existence of activity profiles jobs without neuropsychological stress;
- existence of good relationship between employer and employee.

Regarding the negative side SWOT analysis identified the following weaknesses:

- lack of knowledge and support finding suitable employment;
- inability to work in certain fields;
- incompatibility;
- high taxes / employee;
- medical inability to work (occupational medicine).

Future opportunities for the socio-professional integration of people with mental diseases are identified as:

- change and adapt the legislation on mental disability and the labor code, for people with special needs;
- equal opportunities/more chances;
- facilitating bilateral tax and lower taxes;
- institutional multidisciplinary work teams and counseling, to special needs;
- institutional electronic interface, on-demand labor market;
- adjusting the number of workshops sheltered with the number of beneficiaries;
- complex workplace adaptation to the needs of the employee;
- providing financial support and approval of preventive mental health organizational programs financed from the state or tax breaks for business;
- training professionals specialists in mental health who work in enterprises;
- information, education and training for understanding people with special needs => reduction / elimination of prejudice and improving communication: employer-recipient-team, facilitating socio-professional insertion.

**Table 2.** SWOT Analysis results of future or foreign elements.

	<b>Positive – Opportunities</b>	<b>Negative – Threats</b>
Future or Foreign elements	Legislation; Equal Opportunities / more chances; Facilitate bilateral tax; Lower taxes;  Institutional multidisciplinary teams; Institutional electronic interface, on-demand labor market demand; Counseling team work to individuals with special needs; Adapting number of sheltered workshops in the number of beneficiaries; Comprehensive adaptation of the workplace to the needs of the employee; Financial support; Mental health prevention programs organizational financed from the state or tax breaks for business; Formation of organizational mental health specialists;	Prejudices/social stigmatization;  Lack of information / knowledge;  Rejection.

Information, education and training for people with special needs  
understanding => reduction / elimination of prejudice and  
improving communication: employer-recipient-team facilitating  
insertion

---

SWOT analysis has identified several external threats for the future. These are:

- prejudices/social stigma;
- lack of information/knowledge;
- dismiss/social exclusion.

### **3. Conclusions**

The research hypothesis is confirmed. In the West of Romania, there are specific regional needs, opportunities and threats of work integration for people with mental diseases. These are in direct relation with the employers' perception regarding labor integration of people with chronic mental diseases, in Arad County. Labor market analysis in Arad County, to assess the perception of employers/entrepreneurs on the employment of people with mental disorders compensated is an innovative concept of socio-professional integration of a broad category of beneficiaries (SPSM, 2015).

This study, undertaken in order to assess the perception of employers in the county of Arad, to employment integration of people with mental illness, concludes that, in future, there are multiple opportunities to facilitate the socio-occupational integration of this population groups. Opportunities prevent threats. Socio-professional opportunities for integration of people with mental illness on labor market in our county, but also to the whole country, are:

- change and adapt the legislation on mental disability and the labor code, for people with special needs (Legea sanatatii mintale si a protectiei persoanelor cu tulburari psihice, 2002);
- equal opportunities/more chances (Mărginean, & al. 2006);
- facilitating bilateral tax (<http://cnsm.org.ro/arad.php>);
- lower taxes;
- institutional multidisciplinary work teams;
- institutional electronic interface, on-demand labor market;
- team work counseling, to individuals with special needs (Gavrilă-Ardelean, & Moldovan, 2014);
- adjusting the number of sheltered workshops on the number of beneficiaries;
- comprehensive adaptation of the workplace to the needs of the employee (Gavrilă-Ardelean, & Gavrilă-Ardelean, 2016);
- providing financial support;
- approval of preventive mental health programs organizational financed from the state or tax breaks for business;
- training professionals specialists in mental health organizational who work in enterprises;
- information, education and training for people with special needs understanding => reduction/elimination of prejudice and improving communication: employer-recipient-team facilitating socio-professional insertion.

If these opportunities are applied in practice, we conclude that the objectives of our study:

- Improving the employability of psychiatric patients, depending on the remaining functional capacity, reduce medical and social assisting costs;
- Improving this population groups health on psychosocial view increase social utility and socio-occupational integration;
- will be achieved and fulfilled, reducing the social support of the population groups, reduce the economic costs of health insurance and contributions to beneficiaries while increasing social utility, improves wellbeing on emotional and bio- psychosocial terms.

The challenge of current therapeutic approach is integrated psychiatric patient, in terms of bio-psycho-socio-occupational. Working in multidisciplinary teams, psychiatrists, psychologists, social workers, physiotherapists, occupational integration and professional insertion, is important to good therapy and patient monitoring in terms of bio-psycho-socially and professionally. The team of specialists includes: psychiatrist, family doctor, specialist in obstetrics and gynaecology (pregnant psychiatric patients), social worker, psychologist, mental health professionals, occupational physician, for the integration and socio-professional reintegration of the physical disorder patient.

The occupational physician is the specialist directly involved in determining suitability and compatibility for the type of work for psychiatric patient. Occupational physician recommendations are for adapting the workplace and the socio-professional residual functional capacity of the individual active person. The occupational physician recommendations (change of job or profession) are for unfitness to work for the position held by psychiatric patient. These recommendations are in accordance with labor legislation in Romania. Clearly stipulated by law are incompatible professions for permanent or temporary psychiatric pathology (traffic, decision and leadership functions, etc.).

In conclusion, required specialized services must be addressed primarily to information and education (changing behaviour) in the organization, regarding people with such mental health problems, mainly among employers and working environment.

Prioritizing mental health policies in Romania for the period 2014-2020 is to promote integrated services to treat mental illness. Creating partnerships between the public and private sector in providing special services is very important. Romania aims for the future till 2020, the treatment of mental disorders, to integrate mental health services throughout the health system: public, private and non-government improve the phenomenon of social stigma and promote integrated approach of person and therapeutically act for social reintegration of persons with psychiatric disorders.

The research results are relevant to facilitate the work integration of people with psychic diseases. The employability of people with mental diseases will be ameliorated by improving the skills of counselling employment specialists. Based on the SWOT results, we establish the competences required to train employment counselling specialists. This requires specific competencies to help people with chronic mental disorders obtain and keeping a job. These competences will be established as a final result of an international research project (SPSM). ‘The mission of this project is to professionalize and develop the teaching career of the future specialists and graduates, as well as handling them in pedagogical, psychological and psychosocial relation with forming of professional competences, methodological design, evaluative, communication, identification and solving interpersonal conflicts and problem-

situations occurred in the process of supporting the employment and employability of people with chronic psychic disorders.’ (Gavrilă-Ardelean, & al. 2016, pp. 38)

## Acknowledgement

The manuscript is not under consideration for publication elsewhere and if accepted, it will not be published elsewhere in the same form, either in English or in any other language, without the consent of the publisher.

Bring to the Editor’s attention any Conflict of Interest: The authors don’t have any Conflict of Interest.

## References

- Gavrilă-Ardelean, M. (2015). Comparative analysis of the evolution of mental illness in Romania and EU countries. *Journal Plus Education*, XII (1), 151-160. <http://www.uav.ro/jour/index.php/jpe/issue/>.
- Gavrilă-Ardelean, M., Fond-Harmant, L., Kelemen, G. (2016). The improvement of the counselors’ competences for the professional integration of people with mental disorders. *Asian Academic Research Journal of Social Science & Humanities*, 3 (4), 29-40. [www.asianacademicresearch.org](http://www.asianacademicresearch.org).
- Gavrilă-Ardelean, M., & Gavrilă-Ardelean, L. (2016). *Elemente de medicină internă și socială: note de curs*. București, Eikon Press.
- Gavrilă-Ardelean, M., Moldovan, O.D. (2014). The occupational stress to the young workers came from institutionalized environment. *Procedia Social and Behavioral Science* 159, 589-592. doi:10.1016/j.sbspro.2014.12.430.
- Legea protecției maternității la locurile de muncă, O.U.G96 (2003). Retrieved from <http://legeaz.net/text-integral/oug-96-2003-actualizata-2011-legea-protectiei-maternitatii-la-locurile-de-munca>.
- Legea sanatatii mintale si a protectiei persoanelor cu tulburari psihice, L487 (2002). Retrieved from [http://www.dreptonline.ro/legislatie/legea\\_sanatatii\\_mintale.php](http://www.dreptonline.ro/legislatie/legea_sanatatii_mintale.php).
- Mărginean, I., Precupețu, I., Tsanov, V., Preoteasa, A.M., Voicu, B. (2006). First European Quality of Life Survey: Quality of life in Bulgaria and Romania. *Luxembourg, Office for Official Publications European Communities*. <http://www.eurofound>.
- SPSM. (2015). *Context national. Romania*. <http://sante-mentale-insertion.org>, SPSM.
- Supravegherea sănătății lucrătorilor, H.G355 (2007). Retrieved from [http://www.preventive.ro/legislatiepdf/HG\\_nr\\_355\\_din\\_2007\\_privind\\_supravegherea\\_sanatatii\\_lucratorilor.pdf](http://www.preventive.ro/legislatiepdf/HG_nr_355_din_2007_privind_supravegherea_sanatatii_lucratorilor.pdf).
- World Health Organization. (2014a). *Global health estimates summary tables: DALY by cause, age and sex, 2000-2012*. Retrieved from: <http://www.who.int/healthinfo/>.
- World Health Organization. (2014b). *Preventing suicide: a global imperative*. Retrieved from: <http://cc.bingj.com/cache.aspx?q=who+2014+report+%e2%80%9c>.
- WHO. (2015). [www.who.int/healthinfo/global\\_burden\\_disease](http://www.who.int/healthinfo/global_burden_disease).