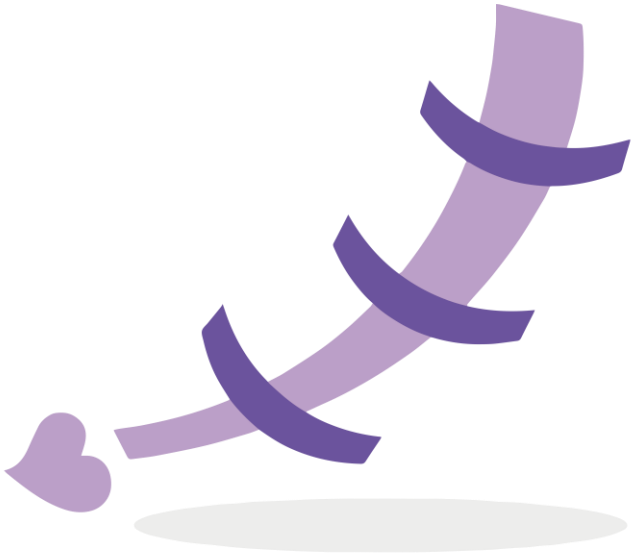

WHEN SCARS BECOME ART

POLICY RECOMMENDATIONS FOR INCLUSION AND MENTAL WELL-BEING OF YOUNG ROMA AND REFUGEES

– Romania -

Co-funded by the European Union

NEVO PARUDIMOS

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INTRODUCTION

This Policy Recommendation Paper for Romania was developed under the Erasmus+ project 'When Scars (!) Become Art'. It builds on the national research conducted with young Roma, refugees, and other vulnerable youth, examining the interlinkages between inclusion and mental well-being. The findings demonstrate significant correlations between discrimination, social exclusion, and deteriorating mental health. Conversely, social belonging, access to education, and community support have positive impacts on mental health outcomes.

The purpose of this document is to inform national and local policymakers on evidence-based measures to improve inclusion, prevent discrimination, and promote mental well-being among young people. The recommendations are aligned with the European Youth Strategy (2019–2027) and the project's objective to empower youth workers and organizations addressing mental health and inclusion challenges.

1. MENTAL HEALTH AND WELL-BEING

Context and key findings

The national research conducted within *When Scars (!) Become Art* project shows that mental health remains a critical yet under-addressed component of youth inclusion policies in Romania. Roma and refugee youth face multiple and overlapping barriers when accessing mental health services. These barriers stem from:

- Stigma and cultural perceptions of mental health within families and communities, which often lead to avoidance or denial of emotional distress.
- Institutional barriers, such as limited information on available services, shortage of psychologists in rural or disadvantaged areas, and bureaucratic procedures that discourage young people from seeking help.
- Cultural and linguistic distance, particularly affecting refugee youth, who struggle to find counsellors trained in intercultural communication.
- Low mental health literacy among youth workers, educators, and parents, which restricts early identification and timely support.

The findings demonstrate strong correlations between discrimination, feelings of social isolation, and symptoms of anxiety and depression. Conversely, access to counselling, supportive peer networks, and mentoring strengthens resilience and social belonging among vulnerable youth.

POLICY RECOMMENDATIONS

1. Establish a national action plan for mental health and inclusion (2026–2030)

A strategic framework jointly coordinated by the Ministry of Health, Ministry of Education, and Ministry of Family, Youth and Equal Opportunities should be adopted to guide national and local actions on youth mental health.

The plan should:

- Integrate prevention, early intervention, and promotion of mental well-being across schools, youth centers, and community services.
- Define measurable targets for reducing stigma, improving access, and increasing service coverage in underserved regions.

- Include dedicated funding for local partnerships and pilot programs supporting Roma and refugee youth.

2. Develop a network of local support centers

Create multidisciplinary community centers co-managed by NGOs, public health authorities, and local administrations.

These centers should provide:

- Free individual and group counselling delivered by trained professionals.
- Mentorship and peer-support programs focusing on resilience and self-esteem.
- Referrals to medical or social services, ensuring continuity of care.

Such centers could be financed through a combination of EU structural funds, national health budgets, and local authority contributions.

3. Ensure free and confidential psychological services

Guarantee that all youth aged 16–29 can access free psychological assistance without referral, both in person and online.

Key measures include:

- Expanding tele-counselling platforms coordinated by the Ministry of Health and operated by regional NGOs.
- Ensuring the presence of interpreters and mediators for non-Romanian speakers, particularly refugees and asylum seekers.
- Simplifying administrative procedures (e.g., removing referral requirements and introducing youth-specific service codes).

4. Train youth workers and psychologists in culturally competent and trauma-informed care

Develop accredited national training curricula for youth workers, educators, and psychologists on:

- Recognizing trauma and secondary stress among vulnerable youth.
- Providing culturally responsive counselling methods.
- Strengthening communication skills for sensitive topics such as discrimination, migration, and identity.

This training could be implemented through cooperation between universities, professional associations, and NGOs specializing in youth inclusion and mental health.

Expected outcomes

- Improved access to mental health services for Roma and refugee youth by at least 30 percent within five years.
- Increased awareness of mental health and reduction of stigma in community and educational environments.
- Stronger cooperation between public institutions and NGOs in delivering integrated psychosocial support.
- Better capacity among youth workers and educators to identify and respond to mental health challenges effectively.

2. SOCIAL INCLUSION AND NON-DISCRIMINATION

Context and key findings

The research results highlight that social exclusion and discrimination are major determinants of psychological distress among Roma, refugee, and vulnerable youth in Romania. Experiences of rejection, prejudice, or differential treatment, based on ethnicity, migration background, or gender, significantly affect young people's sense of self-worth and belonging.

Participants in both quantitative and qualitative components reported that discrimination in schools, workplaces, and public institutions leads to anxiety, social withdrawal, and loss of trust in authorities. Many respondents also described feelings of being "invisible" or "unheard," particularly when reporting incidents of discrimination that were ignored or inadequately addressed.

In addition, educators and youth workers often lack the necessary tools and institutional support to handle discrimination cases or to promote diversity and intercultural understanding effectively. As a result, discriminatory behavior frequently remains unchallenged, and young people from minority backgrounds internalize social stigma.

POLICY RECOMMENDATIONS

1. Strengthen the National Council for Combating Discrimination (CNCD) and develop local reporting mechanisms

Enhance the institutional capacity of CNCD by establishing local reporting units in partnership with municipalities, county youth departments, and civil society organizations. These one-stop offices should:

- Offer accessible complaint mechanisms and legal counselling for young people who experience discrimination.
- Provide psychological first aid and referral to support services when cases involve trauma or emotional harm.
- Coordinate local awareness campaigns and training for institutions on anti-discrimination measures.

2. Introduce national anti-bullying and desegregation standards

Adopt a joint ministerial order (Ministry of Education, CNCD, Ministry of Family, Youth and Equal Opportunities) establishing a unified framework for preventing, reporting, and monitoring discrimination and bullying in schools and youth institutions.

Key elements should include:

- Clear procedures for case registration, mediation, and sanctions.
- Mandatory annual reporting of incidents by schools.
- The integration of anti-discrimination education into teacher training and student well-being curricula.

These standards should also address school segregation, ensuring that educational environments remain inclusive and diverse.

3. Promote inter-community initiatives and local dialogue platforms

Support the creation of municipal and regional dialogue platforms bringing together Roma, refugee, and majority youth for exchange, artistic collaboration, and joint civic action.

Such initiatives should be supported through public funding and EU programmes, prioritizing:

- Community-based events fostering intercultural dialogue and trust.
- Collaborative art projects and peer-led activities that build empathy and social cohesion.
- Engagement of local media to promote positive narratives and counter prejudice.

4. Implement national awareness campaigns on respect, diversity, and mental health

Develop annual public campaigns addressing stereotypes, discrimination, and the link between social inclusion and mental well-being.

The campaigns should:

- Involve influencers, youth ambassadors, and cultural figures as role models.
- Combine traditional media, digital platforms, and community events.

- Promote messages of equality, solidarity, and shared responsibility for inclusion. These campaigns should be coordinated by CNCD in partnership with the Ministry of Health and youth organizations, ensuring alignment with the National Mental Health Strategy.

Expected outcomes

- Increased reporting and resolution of discrimination cases at local and national levels.
- Enhanced institutional response and accountability of schools, youth centers, and local administrations.
- Strengthened trust between minority youth and public institutions.
- Reduced prevalence of discrimination and bullying in educational and community settings.
- Improved perceptions of social belonging, safety, and self-esteem among Roma and refugee youth.

3. EDUCATION AND PARTICIPATION

Context and key findings

Education plays a fundamental role in shaping social inclusion, equality, and mental well-being. The research conducted in Romania demonstrates that the school environment can either reinforce exclusion or serve as a platform for empowerment and belonging. Roma and refugee youth often face subtle or explicit forms of discrimination in classrooms, such as negative stereotypes, segregated practices, or low academic expectations from teachers.

Participants reported that discriminatory attitudes from peers or educators lead to reduced motivation, school dropout, and social isolation. In contrast, when young people feel accepted and supported, education becomes a protective factor for mental health, fostering self-esteem, confidence, and future aspirations.

The study also highlights a lack of systemic approaches to inclusive education. Teachers often receive limited training on cultural diversity or mental health literacy, while school counselling services are understaffed and unevenly distributed. Strengthening these structures is essential to ensure that all students, regardless of their background, have equal access to supportive and stimulating learning environments.

POLICY RECOMMENDATIONS

1. Integrate art-based and creative learning methods

Incorporate art-based and creative pedagogical approaches into formal and non-formal education curricula as tools for emotional expression, resilience, and intercultural understanding.

These activities can include visual arts, theatre, storytelling, and digital media workshops that encourage empathy and dialogue.

The Ministry of Education, in cooperation with local cultural institutions and NGOs, should:

- Develop guidelines for art-based inclusion activities adaptable to different school contexts.
- Provide small grants for schools and youth centers implementing such initiatives.

- Recognize participation in creative projects as part of school extracurricular achievements.

2. Introduce mandatory teacher training on inclusive education and mental health

Establish accredited continuous professional development programs for teachers, school counsellors, and youth workers focusing on:

- Inclusive education practices and classroom management for diversity.
- Anti-discrimination principles and intercultural communication.
- Identification and early response to mental health challenges in students. Teacher training institutes and universities should embed these competencies into all teacher preparation pathways.

3. Establish youth advisory councils at national and local levels

Create formal youth advisory councils to institutionalize young people's participation in shaping education, youth, and inclusion policies.

These councils should:

- Include representatives from Roma and refugee communities.
- Be consulted on school curricula reforms, youth strategies, and community development plans.
- Serve as a bridge between decision-makers and young citizens, ensuring that lived experiences inform policy.

The Ministry of Family, Youth and Equal Opportunities should coordinate this mechanism in partnership with local authorities and civil society.

4. Strengthen school counselling and psychological services

Ensure that every school in Romania has access to at least one psychologist or counsellor trained in diversity-sensitive and trauma-informed approaches.

To achieve this, the Ministry of Education should:

- Increase the number of funded positions for school psychologists.
- Support joint initiatives with NGOs to deliver mental health workshops for students.

- Promote cooperation between schools, parents, and community services to create a comprehensive support network.

Expected outcomes

- Improved inclusion and well-being of Roma, refugee, and vulnerable youth within educational institutions.
- Increased teacher capacity to manage diversity and promote safe, supportive learning environments.
- Greater participation of young people in decision-making processes affecting education and social policy.
- Reduction in school dropout rates and improved student engagement.
- Recognition of schools as key actors in promoting mental health and intercultural dialogue.

3. CROSS-SECTORAL GOVERNANCE AND SUPPORT MECHANISMS

Context and key findings

The research findings underline that the challenges related to youth mental health and inclusion are multidimensional, cutting across health, education, social welfare, and youth sectors. However, the current institutional framework in Romania remains fragmented, with limited coordination among ministries and insufficient mechanisms for joint planning and monitoring.

Local authorities often lack both resources and expertise to design integrated programs for vulnerable youth, while collaboration between governmental institutions and civil society is inconsistent and project-dependent. The absence of shared data and performance indicators further complicates policy evaluation, leading to duplication of efforts and inefficient resource use.

A cross-sectoral and evidence-based governance model is therefore essential to ensure coherence, sustainability, and accountability in public actions addressing mental health and inclusion.

POLICY RECOMMENDATIONS

1. Create an inter-ministerial committee for youth inclusion and mental health

Establish a permanent inter-ministerial coordination body composed of representatives from the Ministries of Health, Education, Family, Youth and Equal Opportunities, Labor and Social Solidarity, and Internal Affairs.

The committee should:

- Develop and oversee a National Action Framework on Youth Mental Health and Inclusion.
- Ensure regular exchange of data and harmonization of indicators between ministries.
- Coordinate the implementation of cross-sectoral programs and monitor results.

- Involve civil society, youth organizations, and academic experts as advisory members to guarantee transparency and participation.

2. Implement a standardized monitoring framework using the Mental Health Inventory (MHI-5)

Adopt the Mental Health Inventory (MHI-5) as a national monitoring tool for programs targeting young people's inclusion and well-being.

This approach would:

- Enable consistent measurement of mental health outcomes across different initiatives.
- Facilitate comparative analysis and policy evaluation.
- Encourage data-driven decision-making at both local and national levels. The Ministry of Health, in collaboration with the National Institute of Public Health and NGOs, should develop guidelines and training for applying this framework.

3. Support municipalities in developing "Housing + Support" pilot programs

Promote integrated local interventions that combine access to adequate housing with psychosocial and employment support for vulnerable youth.

These pilot programs should:

- Target young Roma, refugees, and those transitioning out of institutional care.
- Include multidisciplinary teams of social workers, psychologists, and community mediators.
- Be co-financed through national funds, local budgets, and EU programmes such as ESF+ and REACT-EU.

The Ministry of Development, Public Works and Administration should provide technical assistance and ensure dissemination of successful models to other municipalities.

4. Fund NGO–public partnerships for training and innovation

Encourage partnerships between public institutions and non-governmental organizations for capacity building and digital innovation in the field of youth inclusion and mental health.

Key priorities include:

- Developing and scaling up digital tools such as mobile applications, online counselling platforms, and resource toolkits for youth workers.
- Supporting joint training programs for professionals working with Roma and refugee youth.
- Establishing multi-actor collaboration platforms that connect health, education, and youth services.

Such partnerships should be financed through national grant schemes or EU funding mechanisms promoting social innovation.

Expected outcomes

- Improved coordination and policy coherence across sectors addressing youth inclusion and mental health.
- Better use of public resources through integrated planning and shared monitoring.
- Increased local capacity to provide combined social, health, and housing support.
- Broader participation of civil society and young people in policy implementation and evaluation.
- Stronger evidence base for decision-making through systematic data collection and performance assessment.

EVIDENCE AND SOURCES

• National Research Report – Romania (2024), 'When Scars Become Art' project.
• Interviews and focus groups with 100 young people, 15 NGOs, and 5 mental health centers across 6 Romanian regions.
• National Youth Strategy (2023–2027), National Health Strategy (2022–2030), EU Youth Strategy (2019–2027).

CONTACT AND FOLLOW-UP

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Follow-up: The recommendations will be presented during the National Expert Panel (December 2024) and the International Policy Conference (2025, Timișoara).