

An das  
Bundesministerium für Gesundheit, Pflege, Soziales und Konsumentenschutz  
Abteilung V/2  
Stubenring 1  
1010 Wien

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## Projektwischenbericht

Projektnummer: **BMASK/57726/0066-V/A/2/18**

Projekttitle: **Mobile Heimhilfe und Freiwilligenarbeit in Dörfern des Bezirks Straseni in Moldau**

Land: **Republik Moldau**

Projektlaufzeit: Starting date: **1.07.2023**

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**Rechnungslegung per Stichtag (Euro) – Details siehe Finanzbericht**

Geplante Projektkosten (gesamt)	Projektkosten tatsächlich gesamt	vom BMASGK bewilligt	Ausgaben zu Einreichung

## 1. Kurzbeschreibung des Projektfortschritts

In the Republic of Moldova, at the beginning of 2023, there were 598,3 thousand people aged 60 and over, which is 23,8% of the total population of usual residence. Of the total number of elderly people, 359,7 thousand people were women (or 60,1%), every third person was aged 60-64 (32,6%), and 60,1 thousand people (or 10,0%) constituted people aged over 80.<sup>1</sup>

The share of people aged over 60 years is continuously increasing. In the last five years, the share of the elderly in the 70-74 age group increased the most - by 8.5 percentage points (from 13.6% at the beginning of 2019 to 22.1% at the beginning of 2023 ).

At the beginning of 2023, the population aging coefficient was 23.8%, which corresponds to a high level of demographic aging. Compared to the beginning of 2019, it registered an increase of 3.0 percentage points.

According to data from the Ministry of Health, in 2022 approximately 71.9% of new cases of malignant tumors will occur in people aged 60 and over. On average, every day 20 elderly people were diagnosed for the first time with malignant tumors, with a total of 7.3 thousand elderly people being registered. On average, 2,033 new cases of malignant tumors occurred per 100,000 elderly compared to 216 cases in 2018.

Households made up only of the elderly proved to be in less advantageous conditions regarding the level of equipment and comfort of the homes. Only 68,5% of the elderly have a sewage system, 54,3 % hot water, 47,5% bath or shower and sanitary unit with water inside the home. These numbers are mostly relevant for elderly in the urban areas; the rural areas have no such amenities.

Average consumer prices in **January 2024** compared to **January 2023** (over the last 12 months) increased by 4,6% (informative: in January 2023 compared to January 2022 average consumer prices increased by 27,3%), including food by 4,2%, non-food goods by 4,8% and household services by 4,3%.<sup>2</sup>

According to the data of the National Social Insurance House on January 1, 2023 about 78 percent of pension beneficiaries were pensioners for old age. The average size of the pension of the beneficiaries for old-age pension – was 2278,80 lei.<sup>3</sup>

The population aged 65 and over in Moldova presents an increased degree of material and financial vulnerability: the income of the elderly is 30% lower than that of the adult population up to 65 years old (for EU countries the discrepancy is 16%); only 4 out of 10 elderly people are not materially impaired, that is, they can secure certain goods and services during the year (in EU countries, 9 out of 10 elderly people);

According to the UNFPA Study the study of generations and gender (GGS), most of the elderly do not have the physical or mental strength to carry out daily activities, not to mention social participation. This fact drastically reduces the possibility and desire of the elderly to get involved in the decision-making process in the community.<sup>4</sup>

In the GGS, when asked if they "experience difficulties, lasting at least 6 months, in carrying out their usual daily activities (walking, personal care, sight, hearing, memory) due to physical or mental problems", 43.3% of the population they answered affirmatively. The rural population answered more frequently that they "encounter difficulties" (44.5%) compared to the urban population (41.3%). A significantly higher proportion of women (49.0%) stated that they "experience difficulties in carrying out usual daily activities" compared to men (37.1%). This gender inequality is visible in almost all age groups. As expected, the proportion of people who said they "experience some difficulty in carrying out usual daily activities" increases with age from 16.6% in the 15-19 age group to 94.0 % in the oldest group (75-79 years).

**The importance of the Home Care project has increased in the last year, due to the fact that the number of elderly increased, more medical issues related to elderly age occurred, the pensions in the rural areas are very**

<sup>1</sup> [https://statistica.gov.md/ro/varstnicii-in-republica-moldova-in-anul-2022-9578\\_60729.html](https://statistica.gov.md/ro/varstnicii-in-republica-moldova-in-anul-2022-9578_60729.html)

<sup>2</sup> [https://statistica.gov.md/en/consumer-price-indices-in-the-republic-of-moldova-in-january-9485\\_60943.html](https://statistica.gov.md/en/consumer-price-indices-in-the-republic-of-moldova-in-january-9485_60943.html)

<sup>3</sup> <http://cnas.md/lib.php?l=ro&idc=417&t=/Rapoarte/Rapoarte-anuale-privind-activitatea-CNAS/&year=2023>

<sup>4</sup> [https://moldova.unfpa.org/sites/default/files/pub-pdf/raportul\\_studiului\\_generatii\\_si\\_gen\\_realizat\\_de\\_unfpa.pdf](https://moldova.unfpa.org/sites/default/files/pub-pdf/raportul_studiului_generatii_si_gen_realizat_de_unfpa.pdf)

**low.** That's why the elderly are facing not only health problems, but also poverty and lack of financial support for the basic needs.

This project focuses on elderly in 17 villages of the district of Straseni in central Moldova, in particular elderly who live alone, suffer from health issues and find it difficult to take care of them. The project aims to **improve the life quality of the persons from the age of 65 plus living in villages of Straseni District in Moldova.**

During the reported project time (01.05.2023-31.12.2023), **82 persons** (63 women and 19 men) received social and medical home care. Due to the help of donors, it was possible to increase the number from 65 to 75 regular clients (82 is the total number of beneficiaries during the 8 month period).

The team succeeded to help elderly with their daily necessities as well as bigger problems: like bureaucratic procedures- filling out forms, alerting them to claim benefits and other documents, helping with transportation (to the doctor, offices etc). Mending the windows, the doors, repairing the stairs of the house, mending broken furniture, digging in the garden, cleaning the garden, helping to plant some vegetables, delivering the coal and wood for winter, making fire in the winter stoves, installing the gas cylinders for the ovens to make food etc.-these are the activities that the team are doing besides their main duties.

The project improved the physical and emotional wellbeing and social inclusion of the elderly.

Living alone can often lead to isolation and a decline in the quality of life for seniors and their overall health. The team provides personal assistance and companionship to older people who live alone or may not have family members close by.

Psychological support and discussions play an important role. Very often the elderly, besides vital necessities need a talk, a discussion with someone. This often helps more than medications. The social assistant knows how important it is to be able to keep up with the latest news or offer emotional and mental stimulation by providing seniors with the chance to share their feelings, thoughts, and memories.



**Photo: Social assistant communicating with the elderly, recollecting memories**

The teams succeeded to strengthen the community structure and spirit of helping those in need by motivating local volunteers, neighbours and cooperating with public social workers.

## **2. Projektfortschritt nach Aktivitäten**

The project aims to **improve the quality of life of the elderly living in 20 villages \* of Straseni District in Moldova.** In particular, the aim is to improve the physical and emotional wellbeing and social inclusion of 65 single elderly (from 1.05.2023 the number increased to 75) living in poverty through **providing social and medical home care and by activating local support structures.**

\*At the moment of reporting 17 villages were included in the project. The teams have analyzed how to use more efficient the working hours and decided to reduce the number of villages in order to have more time to help directly the elderly. By reducing the number of villages, the team are serving a bigger number of elderly in the same village and do not spend time on travelling from a village to another one. Villages where the services are provided by the teams: 1. Onesti 2. Tiganesti 3. Negresti 4. Ghelauza 5. Recea 6. Galesti 7. Bucovat 8. Draguseni 9. Radeni 10. Zamciogi 11 Lupa Recea 12 Codreanca 13 Panasesti 14 Capriana 15 Scoreni 16 Micleuseni 17 Vorniceni

**Implemented Activities planned for Result 1 – 65 socially vulnerable elderly persons receive professional home care (medical and social) services:**

**Activity 1.1**

**Provide professional medical home care services to 65 elderly per week**

(01.05.2023-31.12.2023)

The work of the team had a very big impact on monitoring the elderly health. The team helped with the prescriptions, visited the doctors and discussed about the elderly health situation. In some situations, the team organised the transportation of the elderly to a medical consultation in Straseneni (district main city). **The project engaged 2 teams and serves 75 elderly per week, starting in May 20223.** The first team is made up of two social and one medical assistant, the second team of one social and one medical assistant. **The first team assists 40 persons per week. The second team assists 35 persons per week.**

Home care is an essential service that helps individuals maintain their independence and dignity while receiving the care and support they need. The team play a vital role, helping to keep people in their homes for longer and reducing the burden on the hospitals and other healthcare providers. The team aims to provide the support and care needed to help the elderly remain in their homes and avoid hospitalisation or institutionalisation, as a result Neoumanist Home Care team helps the state to make economy on these services.



photo 1,2.Providing medical care by team 1 and team 2

**Medical services included the following:**

1. Checking vital parameters (BP, pulse, respiration, t \* C)
2. Monitoring the family doctor's instructions
3. Procurement and delivery of medicines
4. Injections, giving medication prescribed by the General practitioner or by the team assistant
5. Providing first aid
6. Treatment of wounds, trophic ulcers
7. Body hygiene
8. Curative and respiratory gymnastics
9. Clyster Evacuation
10. Glycemia test
11. Sputum collection for BK (tuberculosis, Bacteria Koch)
12. Healthy eating recommendations / Healthy lifestyle education
13. Communication / psychological support
14. Prophylaxis measures /Covid-19
15. Transportation to medical appointments

**During the 8 months covered by this report, the both teams delivered 20148 medical services.**



Two examples of the impact of the team work on improving the health and quality of life for elderly:

1. Tutunaru Liubovi born in 1933 (91 years old)

She was born in the village of Vorniceni. She lived in this village all her life, worked in the collective farm, as a simple worker. Her pension is about - 100 euros. She lives alone, has no family, no children. Liubovi has a secluded way of life. She is rarely visited by her sister, who is also 74 years old.

She is on the family doctor's record with high blood pressure, heart pain and receives regular treatment. When carrying out the visit planned by the team, they found the beneficiary with multiple wounds on her leg and hand, bleeding. Liubovi fell down in the garden and hit by sharp objects. She was agitated. The team reassured her and help her calm down. After this, provided emergency medical aid - treatment of wounds, dressings. At each visit for 1 month, the medical assistant processed and treated the wounds. The beneficiary followed all instructions closely; as a result, it was possible to treat the received wounds. The team helped the elderly to avoid hospitalization as Liubov was very afraid of the hospital. She received a professional medical care in her home, her emotional safe environment.



Photo: Liubovi and the medical assistant

2. Nina Craciun is 75 years old. She lives the village of Lupa-Recea and has a small pension of 2350 lei. She still has to take of her son, who is 45 years old son and has a severe degree of disability. In December 2023 during one of the team visits, Nina had high blood pressure and fever. The team's medical assistant decided to call the emergency. The emergency concluded that the patient needs hospitalization. After the examination it was found that Nina has bilateral pneumonia and requires serious treatment. Such situations show how important the team's contribution is, without their intervention, Nina would have stayed at home treating herself for a regular flue. Involvement of the team prevented the health condition of the elderly from worsening.



Photo: The team visiting Nina in the hospital

## Activity 1.2

### Provide a comprehensive set of social care services to 65 elderly per week



Starting May 2023 the team helped 75 elderly a week.

A very important set of services, next to medical is social assistance. Home care team provide a range of support, including assistance with personal care, medication management, meal preparation, and Housekeeping.

This includes all the aspects of life; which elderly cannot cope with by themselves in their particular life situation. The impact of the social services is very tangible. The beneficiaries got real support in their homes. The houses became cleaner; the personal hygiene improved substantially. By providing the food packages the team helped elderly to have something to eat on a regular basis. They are waiting for the team to come, like waiting for their children. Due to this, they do not feel alone and abandoned anymore. The community awareness about the elderly situation is increasing, due to the fact that the team is identifying cases that really need help and support. By communicating with the main actors in the villages (mayor, social assistant, doctors), the team triggers a wave of discussions in the villages about the situation of the elderly in the community. All the community members see the team coming to the village and they raise question, that's how they get to know that there are people in need in their community. In this way, some residents realized that they need to be more open, to help their neighbours. The team work closely with beneficiaries to understand their unique needs and develop personalised care plans that meet those needs. Home care services also provide significant social benefits to the community. By keeping individuals in their homes, home care services help to maintain social connections and helps elderly maintain their independence and quality of life.

The project also provide a valuable source of employment for social assistants and medical professionals, which helps to support the local economy.

**Social services provided included the following:**

Type of service	Number of times the service was provided during the project Period 01.05.2023 – 31.12.2023
Number of beneficiaries who received services (the total number of beneficiaries during the reported period)	82( 63 women, 19 men)
Number of visits	2359
Number of food packages distributed	2359
Food preparation support	1677 times (1444 for women, 233 for men)
Support for serving the meal 	1656 times (1449 women, 207 men)
Support for body hygiene	1169 (914 w, 255 m)
Dressing / undressing support 	1029 times (802 w, 227 m)



<p><b>Laundry services</b></p>	<p>70 times (2 or 3 loads) (58w, 12m)</p>
<p><b>Room hygiene</b></p> 	<p>1719 times (1394 w, 325 m)</p>
<p><b>Disposal of household waste</b></p>	<p>951 times (780 w, 171 m)</p>
<p><b>Water supply</b></p> 	<p>1744 times (1396 w, 348m)</p>
<p><b>Supply of wood, coal from outside to inside the house</b></p> 	<p>354 times (296 w, 58m)</p>
<p><b>Household support (yard, garden)</b></p> 	<p>902 (789w, 113m)</p>



<p><b>Shopping for the elderly</b></p> 	<p>356 (297w,59m)</p>
<p><b>Transportation assistance</b></p> 	<p>193(147w, 46 m)</p>
<p><b>Payment of invoices</b></p>	<p>295 (246w, 49 m)</p>
<p><b>Delivery of industrial products</b></p>	<p>105 (75w, 30m)</p>
<p><b>Helped to receive the specialists' consultation (Doctors / Lawyers / Police / etc.)</b></p>	<p>83(49 w, 34 m)</p>
<p><b>Coal / Wood / Gas procurement support</b></p> 	<p>Cola/wood 75 (61w, 14m)/ Gas-3</p> 
<p><b>Correspondence and communication support with relatives and friends</b></p>	<p>411 (352w, 59m)</p>
<p><b>Communication / Psychological support</b></p>	<p>2051(1606 w,445m)</p>
<p><b>Houses repaired with the help of Dutch volunteers and donors</b></p>	<p>4 houses</p>
<p><b>Delivery of donated goods</b></p>	<p>52times/ different goods from Dutch and local volunteers (38 w, 14m)</p>

### Activity 1.3

#### Continuous monitoring and assessment of needs

The elderly are included in the project after an evaluation done by the team and the state social worker. The evaluation is noted in a special form, which is elaborated by state. After it is done, an individual care plan is elaborated for each elderly.

After three months a new evaluation is done, to ensure that the needs of elderly are met. Based on it, the team elaborates a revised individual care plan. Following the relevant national standards, a review is then conducted every 6 months.

As a result of the evaluation, elderly might qualify out of the assistance or new elderly might be added as places become available.

Once a year, every beneficiary fills out a standard questionnaire. In addition to the care plan, this questionnaire is designed to monitor the progress of the project, needs and challenges. The questioners help the team to identify



new necessities, ideas or requirements from the elderly.

Neumanist complements this project's activities with its own engagement: volunteers and other, mostly private donors contribute to each beneficiary's well-being. During the cold season, blankets, clothing, shoes or fuel for heating and cooking are being provided. During summer, volunteers donate their expertise, time, energy and money to improve housing or conduct necessary repairs.

***Implemented Activities planned for Result 2 – Active volunteers and social workers support the elderly in their wellbeing and social inclusion:***

### Activity 2.1

#### Select 5 new volunteers

The number of volunteers increased to 20 volunteers in 12 villages with the aim to help the elderly through visiting them from time to time to check in on their state, by cooking or cleaning or helping with shopping. Volunteers sign an agreement and complete a standard form when they visit the elderly for documentation. These forms help the team to identify the needs of the elderly while they are not visiting them. It is not expected that the volunteer does a concrete amount of work or number of visits; the team have the objective to educate the volunteer spirit among neighbours and to assure the continuity of help in the community, even if the project ends. And this spirit is already developing as it is described below.

Often volunteers are in similarly precarious social situations as the persons they look after or are senior citizens, too, but in good health.

All of them benefit from the support package they receive for their services. Volunteers are expected to visit the elderly on a regular basis (2-3 times a week). A big success of the team is that some of the volunteers truly understood the volunteer spirit and if at first they were asked to help one elderly, during the project they have started to help more elderly from their village.

#### **For example:**

- 1) Colța Elena, 1946, (78 years old) from Scoreni village. She worked in a collective farm, as a simple worker. The husband died 15 years ago. Her daughter died 5 years ago, from cancer. Sometimes she is visited by a distant relative from the south part of the country. The health condition is weak, high blood pressure, heart pain, diabetes, leg trophic wounds. Elena moves with difficulty, leaves the house only with the help of another person.

From May 2023, the team involved as a volunteer, Ludmila, who is 28 years old, married, and has a 5-year-old daughter with a severe degree of disability. She is Elena's neighbour, visits her daily.



Ludmila helps with water supply, household activities, food preparation, in the cold period of the year she comes daily to make the fire in the wooden stove.

Ludmila learned about AE Neoumanist from another volunteer from this village and got in touch with the organisation and offered her volunteer services. This shows how the team's work has an impact on the community members and that the activity of the team is well known.



photo: Liudmila helping Elena to bring water from the neighbourhood well

2) Ciolac Alexandra, born in 1942 in the village of Zamcioji. The beneficiary has been a widow for many years. Alexandra had a son, but he has been away in Russia for many years and has not kept in touch with his mother. It is not yet known if he is alive. Alexandra worked her physically all her life, in construction, currently lives alone. She is helped by the HC team, the local social worker and neighbours. She is a sociable person and grateful to the people who help her. She needs moral and material support. The team identified a volunteer-Mariana, who wanted to help and visits her daily. Mariana helps her with the household and prepares meals for her. They became very close friends. For Mariana is very important not only to help on a daily basis, but she notices what changes needs to be done in the household in order to prevent future problems. Observing that the old wooden stove was defective, it was a safety issue, Mariana has involved her husband to volunteer together. They have broke down the old one and built a new stove.



photo: building a new stove

A wonderful impact of all these collective efforts is that community members became more active and got involved in helping their elderly. All of them helped without waiting to be rewarded or receiving something instead.

**That shows how the project strengthened the structure of the community and good neighbourly spirit.** The involvement of volunteers also makes the extremely poor and abandoned situation of elderly more visible to the community as a whole.

## Activity 2.2

### Identify motivated social workers and involve them into engaging for elderly's issues

The sphere of social assistance in Moldova is one with a low salary. In order to become a social worker\* it is not a must to have studied, that's why they are very low paid. The social assistant is obliged to have a university degree in a social-humanist domain (i.e. social assistance, teacher, lawyer degree or other relevant degrees). The salary of a social assistant is small, but the responsibilities are very big at a local level. Most of the specialists tend to leave for other better paid jobs or without such a professional pressure.

The team succeeded to collaborate more with social assistants, in villages that made the work to progress.

\* In Moldova, a **social worker** is the person that visits on a regular basis the elderly and provides the service in his home.

The **social assistant** is an administrator documenting the work of a social worker: identifying the elderly in need, admission to social services, preparing all the documents, designate the social worker that will assist the elderly, elaborating the individual plan of assistance, monitoring how the social worker is doing the job, re-evaluating the elderly's needs. The social assistant is not responsible only for elderlies, he/she is responsible of all categories of persons in need from the village.



**Photo 1: Collaborating with social assistant and local police representatives to identify new beneficiaries who need help and assistance.**

In the same time, the team succeeded to involve 7 social workers and 12 social assistants. Due to the close collaboration with the social workers, the elderlies were helped to solve concrete problems.

**For example:** Emilia is 78 years old, from Micleuseni village. She was born in this village and lived here all her life. Together with her husband, she built the house where they live. Because their income is low and they have no children to help them, the house has deteriorated. It was necessary to create decent living conditions. This was possible through the NKC volunteers with whom Neoumanist is collaborating for about 4 years.

Aliona is 46 years old, she is a social worker from the same village. She heard about AE Neoumanist from Emilia and saw the NKC volunteers working and offered to help. She collaborated with joy in the interior repair of the beneficiary's house. The home care team is an example for the social workers of involving volunteers and local community in helping the elderly. It motivates social workers to be more active and to learn to find local solutions for elderly problems.



**photo: Aliona together with NKC volunteer and the team helping Emilia**

## Activity 2.3

### Training for volunteers and social workers

During the reported period, the following trainings and one round table were organized:

1. Strengthening the capacities and sustainability of organizations that provide home care services



2. Community Nursing



3. Monitoring and Evaluation
4. Basics of computer operation. MS Word, extended possibilities.
5. Excel Interface and Basic Tools
6. Round table: "We collaborate to be near the elderly. Good practices applied by AE Neomansit and Family



Medicine from the Strășeni district"

## Activity 2.4

### Regular meetings with volunteers and social workers to identify and solve elderly's issues

At the beginning of the project each mayor of the village received a letter in which the project was described and how her/his cooperation was relevant to the project. When a new beneficiary is admitted to the project, the local public authority addresses a letter to Neoumanist by which the authority requests the admission of the beneficiary in service. In this way the public authority identifies the elderly needs, acknowledges the necessity of home care services on its territory and understands the role of Neoumanist's home care team in helping their community. Most of the mayors are open to collaborate and appreciate the team's contribution to the local community. Neoumanist received letters of recognition from the mayors. All the mayoralties organized to take the coal from Strasenii and deliver it to the elderly's homes, that was received due to Diakonie help.

Neoumanist works closely with the district's social department. The manager of the home care section developed a referral form for Neoumanist to be used whenever a beneficiary was included for this project's activities. This and regular meetings with the vice director of the department and the head of the district home care service, ensures information and cooperation with relevant public authorities as well as compliance with the law and regulations.

**Photo: collaborating with Mayor of Micleuseni village.**



Every week the team is communicating on the phone with the volunteers, social workers, state social assistants from the villages, doctors. Regular communication with social workers and social assistants had a very big impact on identifying elderly that need urgent care, and helped the community members to learn how a qualitative home care service should be done.

***Implemented Activity for Result 3 – Neومانist team has increased capacity to represent the interests and rights of elderly***

### **Activity 3.1**

#### **Recruitment and training of a second home care team**

The second Home Care team is working from 2021. Due to the recruitment of the second team, the number of beneficiaries that are served has increased. More communities benefit of qualitative home care services.

In June, social assistants, social workers From the District Social Assistance Department and medical assistant from Straseni Health Center were invited to attend the training on the topic of Community Nursing. The training was held by Mr. Reinhold Medicus-Michetschläger, expert from Austria.

A fairly new concept implemented by Diakonie Werk in Austria centered on the needs of the elderly but focused on the wishes of the beneficiaries, on the mobilization of all available personal, community and professional resources. The role of community nurses in identifying, mobilizing resources, monitoring the situation of beneficiaries after intervention was presented.

The participants had the opportunity to learn about the social services system in Austria, the benefits and the challenges.

It was a session full of practical and innovative ideas. "Prevention" is the central goal of community nurses. Anticipating future situations, taking concrete actions, the community nurse helps both the elderly and saves the medical and social systems from financial expenses that can be avoided through prevention.

AE Neومانist had the opportunity to identify which aspects of Community nursing can already be implemented within the organization's projects. This training was possible thanks to the support of the Austrian Development Agency in partnership with Diakonie Katastrophenhilfe Österreich.

### **Activity 3.2**

#### **Engage and train a new project assistant**

Reallocated in the budget

### **Activity 3.3**

#### **Exchange visit to Austria on qualitative home care**

Activity described in previous reported period

### **Activity 3.4**

#### **Learning visit to other Moldovan organisations and to Casa Iris in Romania on community mobilisation-**

Reallocated in the budget



### Activity 3.5

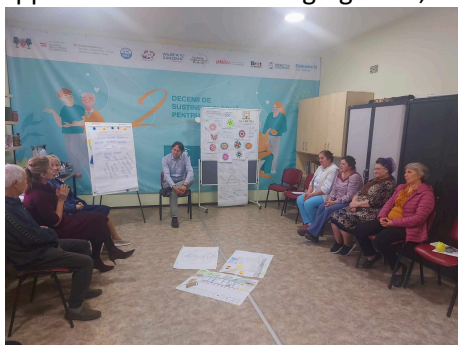
#### Burn out prevention

The frequency of burnout in modern organizations, as well as the very severe consequences for both the individual (physical and mental health disorders) and the organization (decreased productivity, absenteeism, high fluctuation, accidents) justify the attention paid to this phenomenon in recent years.

Considered to be an important social and individual problem, this phenomenon requires special attention!

In this context, the Neومانist team participated in the training: "Burn-Out Prevention" by Mr Vlad Ianusevici, expert of N.Dumitrescu Academy.

The staff greatly appreciated the knowledge gained, the impact for the future, both at the individual level, as well



as for teamwork.

In July 2023, a teambuilding activity was organised for 3 days in Romania.

The activity was planned with the aim of strengthening the team and combating the professional burnout syndrome and carried out successfully. The participants visited picturesque places, travelled a particularly beautiful Transalpina mountain route, accumulated unique experience, memories, impressions and unforgettable emotions. This helped the team to build stronger group cohesion, to discover colleague's talents. The common activities encouraged collaboration and built trust and respect among Neومانist employees.



### Activity 3.6

#### Neومانist engages for elderly's rights in URONPIC national level network

Till 2022, the network had a non-formal juridical form. In 2022 the network started the process of official juridical registration as a public association in order to have the possibility to access funds for the development of the network. After the registration process the network received the following name: Network of Community Care Organizations (abbreviation from Romanian: "ROIC").

Due to the collaboration with ROIC, Neومانist had the possibility to apply for a small grant "Strengthening capacities and financial sustainability in the social homecare sector of Moldova" funded by Czech Republic Development Cooperation Agency and implemented by Caritas Czech Republic in Moldova. One of the mandatory requirements for applying was to be a member of ROIC.

As a result AE Neومانist implemented the small one month project "Empowerment through digitalization of Home Care teams".

**The project achieved 2 main Objectives:**



**Objective1:** Training home care teams in the use of technological solutions

**Achieved result:** Within the project the team had possibility for the first time to be trained in the use of IT. Solutions. Two trainings were organized for 5 employees of the Home Care service. Two laptops were bought, one per each team and a color printer.

**Post on AE Neومانist Facebook:**

[https://m.facebook.com/story.php?story\\_fbid=pfbid08uwyyKVKmrw6sJ4iFdyUY2hk2ogNhyZNP8NLp68ipbRgkSAxPZYMMa11YvfvEEI&id=100080361787981&mibextid=ZbWKwL](https://m.facebook.com/story.php?story_fbid=pfbid08uwyyKVKmrw6sJ4iFdyUY2hk2ogNhyZNP8NLp68ipbRgkSAxPZYMMa11YvfvEEI&id=100080361787981&mibextid=ZbWKwL)

Module 1: Basics of computer operation. MS Word, extended possibilities.

Module 2: Excel interface and basic tools, formatting. Formulas, Tables, Data storage. Dynamic tables, synchronization of information

**Objective 2.** Facilitating online medical consultations for 75 elderly people from 18 villages of the Străseni district

**Activity 2.1** Organization of 20 medical consultations for the beneficiaries of the home care service

**Achieved result:** The project coordinator had organized a meeting with the director of IMSP Strasen Health Center, Mr. Victor Bahnaru and established a verbal collaboration. As well, an official Demarche was registered at the Strasen Health Center. Mr. Bahnaru, as the head of family doctors in the district of Strasen had informed the doctors about the new method which was implemented by the home care teams.

After this meeting, the teams went to the health centers in the villages, cooperation with family doctors was established. Each team have organized 10 medical consultations. In total 20 medical consultations were carried out. The teams used social network that family doctors already use (viber).

Online discussions with doctors is facilitating efficient and timely consultations, with the aim of not only prescribing a treatment but also preventing worsening of the elderly's health. AE Neومانist will continue to organize online consultations on a regular basis for all the 75 elderly, in this way the project will have a continuity and sustainability.

**Post on AE Neومانist Facebook:**

<https://www.facebook.com/1289445526/posts/pfbid0yh3BGNTSYaH6TKvfhQw91csqCG6zzeAXtBfVcTGftQGjps4ZLA1GACEUHew3H5otl/?mibextid=CDWPTG>

**Activity 2.2** Round table to finalize and promote the results of the project

**Achieved result:** Invitations to the round table were offered to the family doctors in villages, representatives of mayoralities, Director and vicedirector of the IMSP Strasen Health Center.

On 15th of December, the round table was attended by 19 persons. The round table's topic: "We collaborate to be near the elderly. Good practices applied by AE Neومانist and Family Medicine from the Străseni district"

The aim of the round table was to emphasize the importance and the positive impact on the beneficiaries of the project, as well as the promotion of these services through online consultations in other localities of the district. The participants had also the opportunity to take a tour of the Day Center and the Placement Center, during the tour the participants had the opportunity to ask questions to Vladislava Tcaci and Ecaterina Bulicanu - project managers.

The presentation of the home care services offered by the Home Care teams was made through a powerpoint presentation by Veronica Chiorascu - Home Care social worker and Calmiș Nicolae - Home Care medical assistant. Conclusions were drawn and the participants expressed their appreciation for the work done by the entire AE Neومانist team.

All those present made it their goal to continue collaborating to ensure the sustainability of the project and to be closer to the elderly!

At the end of the round table an official Collaboration Agreement was signed between AE Neومانist and IMSP Strasen Health Center.

**Post on AE Neومانist Facebook:**

[https://m.facebook.com/story.php?story\\_fbid=pfbid0doM4EWCB004WLNqXUyZS7psk6gXKZ6Fqs5ATi9rYiL2Ezmk8nxAHFzS2Za4Tkoypl&id=1289445526&mibextid=ZbWKwL](https://m.facebook.com/story.php?story_fbid=pfbid0doM4EWCB004WLNqXUyZS7psk6gXKZ6Fqs5ATi9rYiL2Ezmk8nxAHFzS2Za4Tkoypl&id=1289445526&mibextid=ZbWKwL)

### 3. Progress per indicators

Indicators (baseline, target values)	How to measure
<b>Objective level indicators</b>	
80 % of the elderly benefitting from the project say their physical and/or psychological wellbeing has improved	Questionnaires at the beginning of the project, and at the end of the project, that will collect information about elderly's feedback on their physical and/or psychological wellbeing.
80 % of elderly benefitting from the project say they are better able to solve their (administrative, legal, medical, etc.) problems	Questionnaires at the beginning of the project, and at the end of the project, that will collect information about how elderly were able to solve their (administrative, legal, medical, etc.) problems (counting number of options and self-assessment of their efficiency)
Local Authorities of Straseni district and participating villages are better informed about the issues of elderly	Meetings with Local Authorities. / List of presence/photos. Short questioners before and after the information meetings/sessions. The information sessions will include the real needs and problems identified by the team after discussions with elderly in that village.
<b>Result 1 – 75 socially vulnerable elderly receive professional home care (medical and social) services</b>	
75 elderly receive social and medical home care services on a weekly basis (W/M)	Internal documents: Individual Plan of Assistance. Schedule of the visits. Daily Care Record Sheet.
Regular feedback exercises to evaluate appropriateness of service and identify issues of elderly	Questionnaires
<b>Result 2 – Active volunteers and social workers support the elderly in their wellbeing and social inclusion</b>	
20 volunteers are supporting elderly at least once a week	Record sheet of social services provided by volunteers
Social workers in 5 villages supporting elderly more than before	Every half a year, meeting with social workers, discussing the elderly's needs and achievements. Attendance list/Photos  Questionnaires at the beginning of the project, and at the end of each project year, that will collect information about how often elderly were visited and helped by social workers at the beginning of the project and after it started.
5 Trainings for volunteers held	Attendance list/Photos
5meetings/trainings with local authorities –	Attendance list/Photos
<b>Result 3 – Neومانist team has increased capacity to represent the interests and rights of elderly</b>	
Two new staff members of home care team received 2trainings per year.	Attendance list/Photos. Work contracts.
Exchange visit to Austria conducted	Attendance list/Photos
Neومانist has engaged for qualitative homecare in the URONPIC national network for medical and social services	Attendance list/Photos/ Meetings Agenda

Results	Indicators	Results achieved / incl. # of beneficiaries		Reasons for deviation(s)	Steering measures
		Aim	Achieved		
<b>Result 1 – 75 socially vulnerable elderly receive professional home care (medical and social) services</b>	<ul style="list-style-type: none"> <li>- 75 elderly receive social and medical home care services on a weekly basis (W/M)</li> <li>- Regular feedback exercises to evaluate appropriateness of service and identify issues of elderly</li> </ul>	Starting May 2023 : 75 elderly	82 persons during May 2023-December 2023 (65women, 16men) - 82 interviews were held by the social assistants of the project.		
<b>Result 2 – Active volunteers and social workers support the elderly in their wellbeing and social inclusion</b>	<ul style="list-style-type: none"> <li>- 20 volunteers are supporting elderly at least once a week</li> <li>- Social workers in 5 villages supporting elderly more than before</li> <li>- 5 Trainings for volunteers held</li> <li>- 5meetings/trainings with local authorities –</li> </ul>	20 volunteers	<ul style="list-style-type: none"> <li>- 20 volunteers in 12 villages (2-3 times a week).</li> <li>- 7 social workers in 7 villages and 12 social assistants are supporting elderly more than before.</li> <li>-Through half of the year, each month at least a meeting was held with representative of each mayoralty.</li> </ul>		
<b>Result 3 – Neoumanist team has increased capacity to represent the interests and rights of elderly</b>	<ul style="list-style-type: none"> <li>- Two new staff members of home care team received 2 trainings per year.</li> <li>- Exchange visit to Austria will be conducted</li> </ul> <p>Neoumanist has engaged for qualitative homecare in the URONPIC national network for medical and social services</p>	<p>2 new staff members</p> <p>2 trainings /year</p> <p>Exchange visit to Austria planned for the second half of 2022</p> <p>- URONPIC Collaboration</p>	<p>2 new staff members were hired and formed the second home care team (one social assistant and one medical assistant). The new staff members received 12 trainings during the project.</p> <p>Neoumanist have actively participated in 6 meeting of the URONPIC/ROIC network during the project.</p> <p>Due to the collaboration with ROIC, AE Neoumanist received a small grant for digitalization of Home Care teams.</p>		

#### 4. Cooperation and networking

- The cooperation between Diakonie ACT Austria and Neoumanist is close (weekly, sometimes daily, email and zoom exchanges) and contributes to building project implementation and technical skills of Neoumanist. The cooperation with the Ministry of Social Affairs, both in Vienna and in Chisinau, is characterised by a smooth, flexible and supportive attitude which greatly contributes to timely project

implementation. Partners participated in various events organised by the Ministry in Chisinau as well as in Vienna and the social attaché is regularly updated on events.

In 2023, the project was visited by Diakonie ACT Austria's representatives: project coordinator Doris Brenner and DAA's General Secretary Nina Hechenberger. Apart from monitoring, Ms Brenner conducted a gender and M&E training together with DAA colleague Pia Ferner for nine staff members.

- In July 2023, a delegation from Austria led by the Minister of Social Affairs, Health, Care and Consumer Protection Mr. Johannes RAUCH, the representative of the ministry Mr. Andreas SCHALLER, the representative of Diakonie Katastrophenhilfe Österreich Roberta RASTL-KIRCHER, media representatives accompanied by S.E. The Ambassador of Austria in the Republic of Moldova Ms. Stella Avallone, the attaché of the ministry- Mr. Martin Muehlbacher and the representative of the Austrian Development Agency Moldova visited the social projects of AE Neomanist.

The first part of the visit, the delegation focused on the activities of the day center financed by ADA, Diakonie, followed by the home visit of two beneficiaries of the Home Care project financed by the Ministry of Social Affairs, Health, Care and Consumer Protection and Diakonie.

During the visit, the importance of the above-mentioned projects for the elderly was discussed. A great emphasis was also placed on the challenges and plans for the future to be implemented by AE



Neoumanist.

Facebook post: <https://www.facebook.com/share/p/3YnvCFw31c58XhdP/?mibextid=oFDknk>

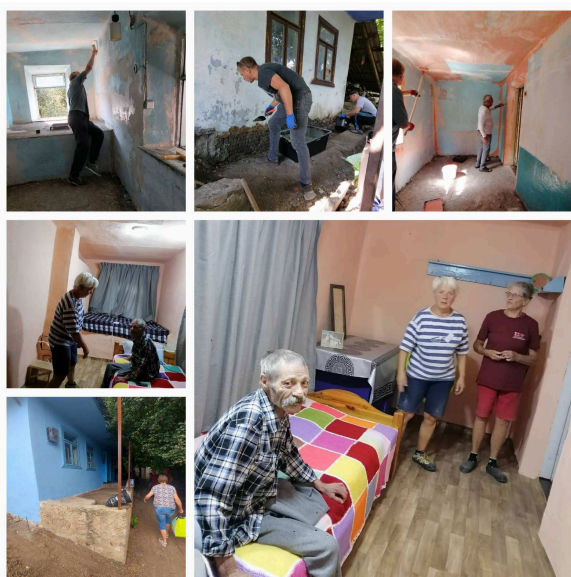
- In May 2023, AE Neoumanist was visited by the Martin Mühlbacher, Social Attaché of Federal Ministry of Social Affairs, Health, Care and Consumer Protection of Austria in Moldova, Mr. Gernot Antes, coordinator within the Austrian Network "Healthy Cities" and Antonina Dranga, Assistant to the Social Attaché.  
The purpose of the visit was to know the organization, the social projects and the activities implemented by the Association, but also the perspectives of creating new contacts initiating possible partnerships between networks and cities/localities. The second part of the visit was the City Hall of Straseni municipality.  
Considering that AO Neoumanist has been successfully implementing projects funded by the Austrian Government for many years and the fact that this organization has always benefited from the support and good cooperation with the Straseni City Hall, a meeting with Mrs. Valentina Casian- the Mayor of Straseni was organized. Thus, the possibilities for future cooperation between the two institutions were discussed.
- A better collaboration with Mayors from district villages was established. Despite the fact that economically the village mayoralty's budget is poor and can't help the team and the elderly financially, the mayors started to collaborate in identifying elderly needs and better acknowledge the senior's problems in their community. For example, of recognition of team's work was that 2 letters of gratitude were addressed to AE Neoumanist from mayors of 2 villages.
- Since 2003, Neoumanist established a productive partnership with the **Local Municipality of Straseni**: the two buildings where Neoumanist operates its day care and home care centres are provided free of charge for 99 years, including the fees for authorisation by the state bodies for inspection of the building by the fire department, ecological department, sanitary department and gas department, free engineering services for renovation works, free assistance of a lawyer (if needed) and free garbage disposal. Neoumanist formally joined an expert group that enables participation of civil society in the budgeting process in the City Hall of Ştrăşeni. This will allow to bring up needs of elderly and also

informing them about the allocation and spending of public money and enable Neoumanist to take part in trainings on public budgeting.

- In Moldova, Neoumanist is an active member and one of the founding organizations of the Union "Network of Non-Commercial Organizations Providing Community Care" - **URONPIC**. The community home care network was created in 2011 and focuses on improving home care services in Moldova. Till 2022, the network had a non-formal juridical form. In 2022 the network started the process of official juridical registration as a public association in order to have the possibility to access funds for the development of the network. After the registration process the network received the following name: Network of Community Care Organizations (abbreviation from Romanian: "ROIC"). Due to the collaboration with ROIC, Neoumanist had the possibility to apply for a small grant "Strengthening capacities and financial sustainability in the social homecare sector of Moldova" funded by Czech Republic Development Cooperation Agency and implimented by Caritas Czech Republic in Moldova. One of the mandatory requirements for applying was to be a member of ROIC.
- Further, the organisation has various long term cooperation partners such as the Dutch organisation **SOM** which annually raise funds and motivate local volunteers. Due to the help of Dutch donors, the elderly received donation in good: Clothes, blankets, shoes, bed linen, and other goods.
- Neoumanist collaborates with NKC volunteers from Holland, 20 volunteers came across the Europe with their campers in order to help Neoumanist with repairs on its premises, doing activities with the elderly, organising excursions trough Moldova with the seniors. A well as three house repairs in villages, which had a very big impact on elderly life and on community acknowledgement about the importance of helping elderly. The volunteers repaired roofs, house facades, changed door, windows, installed proper flooring, because most of the houses had dirt floor, where it was possible connected water and installed a sink, new furniture, bed linen, curtains, even toilets were built, as some of the beneficiaries didn't have the outside toilet (all the toilets are outside in the villages), they used the buckets and bushes in the garden for this. All these changes brought dignity in the elderly life. Despite the age, the mental estate, everyone deserves human condition to live in. The team worked along with the volunteers throughout the repair process.

**Photos before repair, during and after:**

**Codreanca village: Fiodor 69 years old**



**Micleuseni village: Emilia 78 years old**





- Neومانist is cooperating with State University, students are doing their internship in our organisation. Student learns how to use their knowledge in practice and what are the real situation and needs of the elderly. Together with university professors, Neومانist are organising different intergenerational activities with elderly and students.
- Neومانist was chosen as an example organization in republic of Moldova, by the Ministry of Labor and Social Protection. We have been invited as experts in the Working Group on Examination of Adult Placement Requests in Residential Social Institutions (State Homes for Elderly). This partnership shows that the organization is reliable and trustworthy; our opinion has been taken in consideration.

## 5. Challenges encountered in implementation and necessary action

Challenges faced in delivering home care assistance were:

- Lack of the staff. Moldova is facing a big lack of medical and trained social services staff. During the report period, one medical assistant left for a better paid job.
- Moldova faces a big increase of the living costs. This brought a socio-economic and psychological impact. The most social-vulnerable part of the society was most affected: people with disabilities and elderly.
- Many elderlies have larger needs than the project can satisfy, including the need for operations (e.g. eye operations to avoid blindness), need for hearing devices, need for dentist services which are too expensive, reparation of houses and stoves.
- Not all the mayors are open to cooperate when elderly need help in solving special needs. For example, repairs of the house, wooden stoves. These necessities have a high cost, that's why authorities refuse to be involved. In Moldova, if an elderly doesn't have children or close relatives, the mayors are the guardianship authority, defined by the national regulation. This means they have to help the elderly with all problems, including house repairs, stove repairs, all which can affect or put in danger elderly health and life. In order to succeed a mayor has to involve the social assistance department, the village council and sometimes if it is not possible to help at a local level to accede to national funds or services.
- There is also a **lack of specialists and practitioners** in Moldova. In most villages, the family doctor comes once a week. Due to the lack of proper and time effective medical check, the health of the elderly becomes worse.

## 6. Sustainability

The main aspect of sustainability is the increased competences of the staff and this could be noticed through better recognition of the organization at the national level and increased visibility among key stakeholders, including the

Ministry of Health, Labour and Social Protection and Family as well as important NGOs and public institutions in Moldova.

Furthermore, Neoumanist is actively trying to improve and expand its fundraising activities:

- Continuation and co-funding of the home care work could be sought through the Austrian Ministry of Social Affairs and Brot für die Welt Deutschland;
- Unfortunately the state doesn't have the financial possibility to support the project and analysing the country current economical situation future forecast is not optimistical. As the projects relies on donors, Neoumanist is constantly searching for possibilities to apply to different grants in order to assure the sustainability of the project. A small grant was received at the end of 2023 from Czech Republic Development Cooperation Agency, that helped to develop digital skills of the team and to implement IT solutions in their work.
- Neoumanist has built three wooden houses for sustainable tourism - Castania room rent: international volunteers visit the organization every year and rent Castania houses. They pay for the accommodation. Neoumanist started to develop Castania project, not only for volunteers renting, but for other tourists that need a space for accommodation.
- Volunteers, neighbors, as well students that do their internship in or organization: all of them are doing unpaid work, as a result the team is helped and time and efforts are saved, so team members can focus on other important aspects of the home care service.

## 7. Monitoring and Evaluation

During the implementation, an action plan is made based on the project proposal and it is monitored through the project manager as well as through monthly and quarterly reports. The final reports are presented to the donors, ministries and other institutions of Moldova.

In 2023, the project was visited by Diakonie ACT Austria's representatives: project coordinator Doris Brenner and DAA's General Secretary Nina Hechenberger. Apart from monitoring, Ms Brenner conducted a gender and M&E training together with DAA colleague Pia Ferner for nine staff members.

The social and medical assistants provide the internal monthly report every month to the project manager, which includes data on number of times services have been provided and number of visits conducted as well as any challenges observed.

At the end of each year, a questionnaire is provided to beneficiaries in order to give a possibility for feedback on the services and analyse whether all activities and services are still adequate. The project manager regularly conducts review meetings together with the team make the planning for the coming months.

Besides external monitoring, once in a quarter, meetings with the Board members are organized. They come with recommendations and internal evaluations of the project.

At the end of the project, an external audit company will be contracted for an external financial audit.

## 8. Lessons learned / Outlook

- During the project activities, the home care team learnt how important the home care services for the elderly are. Every day they faced poverty, lack of hygiene, lack of infrastructure, houses with no running water, no baths, no sewerage system, elderly with big health problems. The team's help **is vital for the elderly** and these are not only beautiful words, this is the reality. Most of the elderly would have died earlier, because of lack of medical services, malnutrition and no possibilities to heat the houses. There were several cases when the team came to visit the elderly and found them unconscious due to strokes, by giving urgent medical care and the ambulance called on time the team prevented the death of the elderly and more severe brain damages.

- Every village has presented a waiting list of elderly that need help and want to become beneficiaries of the home care services. In 2023, 30 elderly have registered in the waiting list of the project. This shows that home care services are needed and are important for the communities.
- The team learned to cooperate more closely with Local Public Authorities and the District Social Department. This helped to lobby and advocate for the beneficiaries, in order to help the elderly to fulfil their economic and social rights.

## 9. Finanzen

Das Projekt wurde im Großen und Ganzen entsprechend der ursprünglichen Finanzplanung umgesetzt.

Geplante Ausgaben	Ausgaben per Projektende