

Partnerships for Every Child

Annual Report

2018 - 2020



The years 2018-2020 were equally interesting, challenging and full of activities and achievements for the organization. I have the honor to represent.

In this period, our team continued to focus on developing new concepts, innovative approaches and programs to provide the wellbeing of every child and family, to make sure they are integrated in communities and supported by them. We invested in the professionals'

skills and provided expertise every time we were asked by the line ministries, local authorities or international organizations.

These are years full of analyses, assessments, debates, learning, development, testing, adjustments and direct work with the child and the family. Many of our achievements have been made possible by our partners and supporters, businesses, philanthropic individuals thus adding substantial value to our efforts.

The year 2020 has been an important and exciting year for our organization – we have turned 25. At 25 one can form a family and raise children. We have formed the organization's family, which is very large, and we have helped the children to grow and develop and, why not, to become advocates for our actions.

With gratefulness,

Daniela MĂMĂLIȚĂ,
“Partnerships for every child”
Director

ABOUT US

The Nonprofit Organization Partnerships for Every Child (P4EC) is a localized entity of EveryChild Moldova and has a clear record of 25 years in developing and strengthening child care and protection policies, systems, services in Moldova. P4EC has been instrumental in supporting local and central authorities to reform the child-care system, supporting legislative and policy change, developing alternative childcare services, and providing extensive capacity building opportunities to social work practitioners at local and national levels. P4EC has supported the Government of Moldova to reorganize/close 20 large-scale residential institutions and develop inclusive education programs for children with special needs, develop an integrated social service system, cash benefit system for vulnerable households, inter-agency collaboration mechanism on child protection issues and primary prevention; as well as establishment of a range of preventive programs for marginalized children, youth & families.



VISION

A world where every child enjoys the right to a childhood in a safe and caring family, free from poverty, violence and exploitation.

MISSION

- We work to give vulnerable children who are, or at risk of being, separated from their family or community a safe and secure future. We empower children, their families, communities and authorities to create opportunities for a better life.
- We give children the chance to grow up in loving families and communities - we help to strengthen families to prevent children from being separated.
- We help children to get back into families - wherever we can, we reunite children with their families; when this is not possible or against the child's best interest, we help them find alternative family-based care.
- We protect children from abuse, discrimination and exploitation - when children are living without the care and safety of a family, most at risk of violence, abuse or exploitation, we protect them with crisis care and support.
- We make sure children are heard - we help children, their families and communities speak for themselves, take part in decisions, which affect their lives, and find lasting solutions to their problems.
- We learn to do better - we innovate to bring about lasting, positive change and then share what works with communities and governments to bring about lasting, positive change.



PARTNERSHIPS

P4EC's PARTNERS includes the Ministry of Health, Labor and Social Protection and the Ministry of Education, Culture and Research.

LOCAL AUTHORITY PARTNERS: Chisinau Municipal Directorate for Child's Rights Protection, district Councils of Cahul, Calarasi, Falesti, Orhei, Ungheni, Telenesti, Singerei, Causeni, Nisporeni, Rezina, Soroca, Hancesti and Tiraspol.

LOCAL AND INTERNATIONAL ORGANIZATIONS AND NGOS: Lumos, CCF Moldova, Keystone Human Services International, Terre des hommes, NCCAP, Alliance for the Protection of Children and Families, Oxford Policy Management Ltd, Mellow Parenting Charity, HealthProm, the Alliance International Centre for Therapeutic Care, Public Fund "Child's Rights Defenders League", etc.

It is very important to mention the partnership between P4EC and Moldovan media that has supported P4EC's activity as devoted media partners (e.g. Teleradio Moldova public company, TVR Moldova, Jurnal TV, Publika TV)

DONORS



The programs implemented by the organization were supported financially by the USAID, European Union, World Childhood Foundation, UNFPA, Siol Foundation and other donors. The local donors and supporters include a number of private companies, such as Metro Cash&Carry, Fourchette and others.

Important assistance comes from private donors and individuals who permanently support P4EC through their donations into the boxes placed in shopping networks.

OUR ACHIEVEMENTS

2018–2020

Main strategic directions

Keeping families together.

Helping babies stay with their parents and making baby homes history.

Offering children safe alternative families.

Ensuring institutional care is used as a last resort.

Ensuring social/educational inclusion of children.

Building child participation.

Commitment to protect children from violence, abuse, neglect and exploitation.





Helping babies stay with their parents and making baby homes history. Keeping families together.

With the support of the European Union the early years support programmes for children with special needs – Communication through Music, Portage, Makaton and Mellow Parenting - were piloted and implemented in 5 districts of the country, integrating innovative approaches in working with children with special needs aged 0-7. *Communication through Music (CTM)*, *Portage* and *Makaton* programmes were approved as educational programmes by the Ministry of Education, Culture and Research through the Ministerial Order. *Mellow Parenting Programme (MPP)* has been embedded in the Family Support Service as one of the most promising parenting programmes.

Outcomes in FIGURES

Communication through MUSIC*



618 CHILDREN benefitted from CTM individual and group sessions.

41 professionals working in **19** kindergartens and District Psycho-Pedagogical Assistance Services (DPPAS) from **5** districts acquired new skills in Communication through Music

10 trainees got certificates of trainers in CTM.

* Communication through Music - therapeutic programme that achieves outcomes drawn from Music Therapy and Speech and Language Therapy



PORTAGE*



16 **CHILDREN AND THEIR CARERS**
were assisted in home-based Portage approach.



34 practitioners from DPPAS, CSOs and Social Assistance and Family Protection Departments were certified to deliver Portage

2 national trainers were trained to replicate Portage model to other professionals.

* Portage - home care and education support service for families with children who have special needs





MAKATON Language Programme*

30 CHILDREN with communication needs from **12** districts were provided with appropriate support in Makaton.



14 practitioners were trained in Makaton language programme

* Makaton Language Programme - a nationwide communication program, involving the use of signs and symbols to help people communication

MELLOW Parenting*



127 PARENTS with **127** CHILDREN benefitted from the MPP

OVER **20** MPP facilitators were trained in MPP, successfully passed reflective consultations and were qualified as certified practitioners by Mellow Parenting Charity.

* Mellow Parenting - a therapy course for parental skills development and strengthening of relations between parents and children

1342

PARENTS improved their knowledge and skills in understanding the needs of their children through capacity building trainings and through direct support in accessing the appropriate services.

The capacity of over

300

NATIONAL AND LOCAL LEVEL DECISION MAKERS, professionals and practitioners from pilot districts was strengthened in early childhood development and implementation of the new early years support programmes.

Outcomes in FIGURES



Outcomes in FIGURES

6 grass-root NGOs from **5** pilot districts and Transnistria developed models of support and early intervention focused on children with special needs (CWSN) aged 0-7 through small grants scheme.



Overall through the Small Grant Scheme civil society organizations could reach

465 **PARENTS** to improve their knowledge and skills in understanding the needs and providing care of CWNS,

the recipients also built capacity of

73 **EARLY YEARS' PRACTITIONERS** in social inclusion and rehabilitation of CWSN.

The raising awareness campaign “Give your child love today, so that they become conscious parents and responsible citizens” was carried out in partnership with 3 national TV channels. A video clip on the importance of early childhood development was produced and broadcasted. A range of program slots on the tested models were developed and broadcasted. A series of dissemination events of community-based early years support and developed programmes were carried out with the project partners.



Outcomes in FIGURES

With World Childhood Foundation support P4EC has introduced and contributed to the rollout of the Mellow Parenting programme in four districts of the country. The project has placed a special emphasis on the engagement of fathers in the programme. Within the action the organization has supported the Government of Moldova in the implementation of the the Child Protection Strategy for 2014-2020 and the Inter-agency Strategy of developing parental abilities and competences (2016-2022).



9 practitioners, all of whom had previously been accredited in Going Mellow, have participated in the **Mellow Bumps** training.

The Mellow Bumps programme is one of the Mellow family programmes that aims to engage with and support parents in pregnancy who have had or are currently experiencing any one or more of the following: previous negative experiences with health and/or social services, previous and/or current mental health issues, addiction issues, social isolation, etc.

81 PARENTS WITH **83** CHILDREN
AND **10** MOTHERS
to – be benefitted from MPP

A cartoon illustration of a diverse group of people standing in a line. From left to right: a young girl in a blue dress, a man in a black shirt, a woman in a red shirt holding a baby, an older woman in a green shirt, a man in a yellow shirt, a woman in a red shirt, a man in a blue shirt, and a young boy in a blue shirt holding a colorful ball. There are also two children in the middle of the group.

Outcomes in FIGURES

FOR THE FIRST TIME,

a group of **7** DADS with **7** CHILDREN from Ungheni district was included in the Mellow Parenting programme.



” I admit that from the beginning my willingness to participate in the program was not too high given the lack of time. But now I'm happy with the decision. I learned to pay more attention to my son, we find both compromises. I have learned to listen to him, because until now there is a rule - I am your father, you are the child.

” My concern and affection for my child made me accept to attend the program, because I knew I did not know how I could help him in his development, learn to socialize with his fellows. I recommend other fathers to participate in the program.

” I'm sorry the program is over, I've learned a lot, and my opinion about what it's like to be a true parent has changed radically, my eyes opened. The child felt good to me in this program, so I spent more time together.

” And I learned how to speak and behave to my daughter. Thank you for offering me this opportunity.

Quotes of the fathers at the end of the group

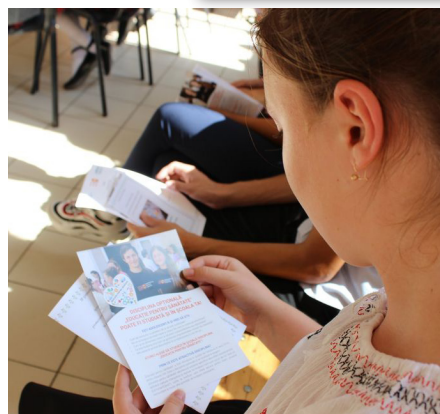
Building child and youth participation

The participation of children and young people in promoting health education was one of the priorities in the reporting period. In this respect with the support of UNFPA P4EC has worked on building the capacity of the advocacy participatory platforms for increasing support for comprehensive sexual and reproductive health education and services for young people, including for key population, established in 5 targeted districts. The activities of the action were related to: informing the community members (parents, teachers, religious leaders, young people, local public administration representatives) on the role of “Education for Health”, as well as developing and implementing 48 community mobilisation Action Plans. They aimed to promote education for health, particularly sexual and reproductive health of all young people.



” The health of young people is a big problem at the moment, many of them have chronic diseases. Adolescents neglect doctors. Parents are abroad and there is no one to watch over them and take care of their health. We need more information for teenagers. The Internet is good, but it's not always the information that needs to reach them.

(A doctor within a community)



” Students talk about health education anyway (especially about sex education) whether it is an optional school lesson or not. This information appears on the internet, whether you like it or not, it would be better if it were taught it in a correct way, explained to children, rather than teenagers on their own reading whatever appears on the internet.
(A boy, 14 years old)

Outcomes in FIGURES



48 **COMMUNITIES** from **5** **DISTRICTS** established and strengthened the local advocacy platforms in promoting sexual reproductive health of young people.



48 **COMMUNITY DISCUSSIONS** were conducted in the newly selected communities to promote the right of youth to health education and to strengthen local partnership for health education promotion.



Overall

1100

PEOPLE (young people, teachers, parents, representatives of LPA of the 1st level, representatives of youth centers and youth-friendly health centers, librarians, volunteers and religious leaders) have increased their awareness on this issue. The participants recognize the importance of health education for young people.



10

WORKSHOPS on community mobilization to advocate for youth right to health education and development of local action plans with participation of local supporters: parents, teachers and young people) were conducted. Key stakeholders were involved in the workshops to learn about the concept of promoting the education for health and development of youth, key aspects on the community mobilization and the need to advocate for youth rights to health education and their integration into community values and behavior.

” The problems in the community are very diverse. There are problems that the individual person, the family, the population groups face, but there are also problems that affect community as a whole. Health education is an issue that affects everybody. A consolidated effort is needed to overcome this problem.
(A mayor within a community)

Outcomes in FIGURES

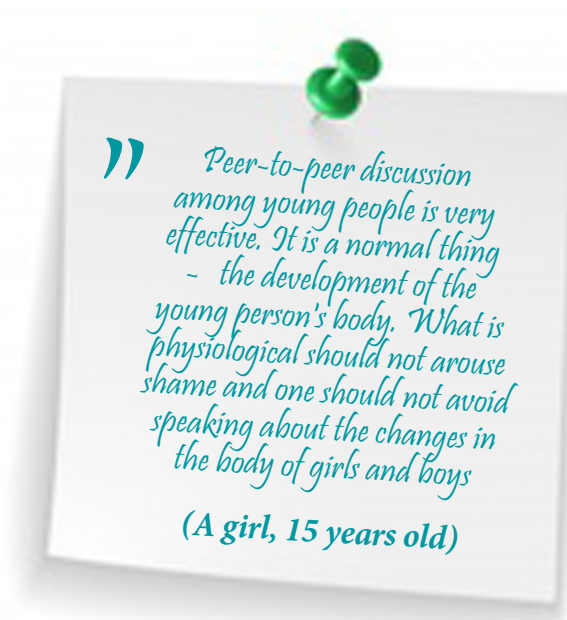
120

COMMUNITY MOBILIZATION activities were organized and included as follow: social theatre, round tables and workshops, painting bus stations with drawings and messages that promote education for health, decorating of school building wall with messages related to healthy and safe society, exhibitions of photographs and drawings, sport competitions, promotional marches.

2608

PARTICIPANTS: pupils, pre-school children, parents, representatives of local public authorities, youth-friendly health centers, youth centers, NGOs, volunteers, community members were engaged in the activities.

The community mobilization activities have been organized as part of the information campaign launched by UNFPA “Education for Health: my right, my choice!”. The events have contributed to raising the awareness of community members about the health and development issues faced by young people, to identifying joint solutions for overcoming them, to increasing the support from community members for the education for health of young people, to creating partnerships between the main stakeholders involved in the promotion of education for health.



” Peer-to-peer discussion among young people is very effective. It is a normal thing - the development of the young person's body. What is physiological should not arouse shame and one should not avoid speaking about the changes in the body of girls and boys

(A girl, 15 years old)

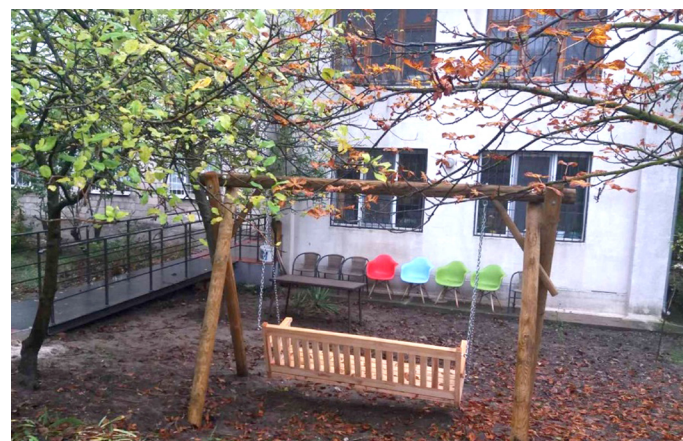
**Ensuring institutional care is used as a last resort.
Offering children safe alternative families.
Ensuring social/educational inclusion of children.**

In MOLDOVA

Since 2018 P4EC with the support of Siol Foundation from Ireland and in collaboration with the Ministry of Health, Labour and Social Protection (MHLSP) has been providing technical assistance in the reformation of the residential care for children and adults with disabilities in the country, particularly in safeguarding the right to social inclusion of girls and young women from the Hancesti Temporary placement centre for children with disabilities (Hancesti Centre) by enhancing the capacities of policy-makers and professionals in applying an appropriate mechanism to reorganize the institution and develop community-based services for children and adults with disabilities. One of the priorities of the project is to strengthen the capacity of the National Social Assistance Agency (NSAA) by assisting them in their effort to provide appropriate methodological support to residential institutions for children and people with disabilities and implement the National Care Reform Program and Action Plan for people with disabilities. In doing so, the project creates clear opportunities for the deinstitutionalization of girls and young women from Hancesti Centre as well as for the development of sustainable community care based models that would demonstrate that persons with disabilities of Moldova can live full and inclusive lives.

The project carried out the assessment of Hancesti Center, including complex social assessment of beneficiaries and evaluation of human and financial resources of the institution, as well as mapping of social services available for people with disabilities in Hancesti and Ialoveni districts. Both assessments were aimed at identifying: solutions for the deinstitutionalization of girls and women and their re/integration with families and communities; the workforce capacities and their ability to provide high quality rehabilitation and support services; and the costs of services and the possibility to free resources, redirecting them to the deinstitutionalization of girls and improvement of services for the beneficiaries that will continue to leave in the Center.

The project has finalised the assessment of children and youth under 18 years of age, as well as of a number of adults placed in the Temporary Placement Center for children with disabilities in Hancesti (Hancesti Centre). The Protected Living facility was established and started to function in Ialoveni in February 2020. The model was developed based on the national practices and the Irish experience. The development of its Regulations and procedures was informed by the findings from the legislation analyses, Irish model and is under piloting. With the support of our partners, Nua Healthcare Services from Ireland, we have developed the training programme for the staff of the newly established Protected Living facility. The staff of the Protected Living facility was recruited and trained. The beneficiaries were placed and they are being supported in the service based on the Individual Care Plans developed with project support.



Outcomes in FIGURES

40 **GIRLS** and **40**

YOUNG WOMEN from Hancesti residential institution were assessed and their individual care plans were developed.



with

- 1** **COMMUNITY PROTECTED LIVING SERVICE** established
- 5** **YOUNG WOMEN** in placement (purchasing, rebuilding and renovation of the flat, recruitment and training of personnel). Service Regulations and procedures developed and under piloting.
- 3** **GIRLS** prepared for de-institutionalization (DI) and placement in family type alternative care.

A new Community Living Facility for the other 5 young women and a new model of community drop-in centre for people with disabilities is under development.

In TRANSNISTRIA

P4EC in partnership with the organisation “Childhood to Children” from Tiraspol provided support in the implementation of the project “Supporting the socio-professional integration of adolescents at risk from the left bank of the Dniester river by opening a social tailoring workshop” funded by UNDP.

P4EC has supported the local partners in the implementation of the project by: developing a set of training packs, delivering a Training for Trainers on youth professional orientation; organising sharing of experience visits to the Complex of social services in Cahul and trainings for the projects’ beneficiaries group.







The relations of trust and cooperation between

Outcomes in FIGURES

15

GIRLS at risk from the left bank of the Dniester enjoyed additional opportunities of professional training in the social service and are integrated in the community;

15

EMPLOYEES of the Charity Fund “Childhood to Children” from Tiraspol and of other NGOs in this field from the left bank of the Dniester river acquired knowledge and skills to support the professional integration of young women in the labour market and in the community;

50

persons from both banks of the Dniester were developed (30 young people and 20 employees).



BEYOND THE BORDERS OF MOLDOVA

In KYRGYZSTAN

Since 2018 P4EC in partnership with the Child's Rights Defenders League from Kyrgyzstan has been supporting the Kyrgyz Government in the child care reform implementation by strengthening national policies and systems, building up the decision-making process and social services system in 2 districts to prevent family separation as well as to provide protection of children at risk and those deprived of parental care. The action is carried out with the financial support of the European Union.





So far since the beginning of the project there have been registered the following achievements: a joint Coordination Reform Council was established under the Administration of the President; Training programmes on social services development, primary prevention, child wellbeing, inter-agency cooperation; on children's reintegration and children's in foster care placement support, as well as making decisions regarding the prevention of separation and alternative care for children and regarding the children's reintegration for the members of the Commission for Children, change management for residential staff were developed and delivered to national and local decision makers, child and family protection specialists, community social workers, members of the Commission for Children, residential staff, teachers from mainstream schools and children.



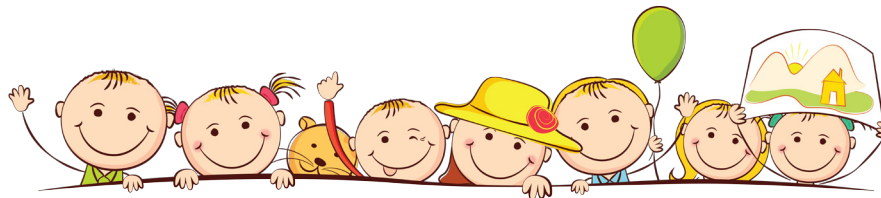
Two Local Authorities have the Social Services Development Strategic Plans developed and approved. Regulations of Commissions for Children were revised to integrate gatekeeping elements. The Family Support and Reintegration (FSR) Regulation was developed. FSR and Foster care (FC) teams were established, trained and integrated in the local service provision. The methodologies on FSR and FC services were developed and are currently being piloted.

Outcomes in FIGURES



3 **RESIDENTIAL INSTITUTIONS** were assessed and their Optimisation plans were developed.

1 **INSTITUTION** is in the process of **CLOSURE**



3374 **CHILDREN AT RISK** of separation and institutionalisation helped to stay together with their families

434 **CHILDREN** have been assessed

AND **274** **CHILDREN** supported to leave institutional care

91 **CHILDREN** trained and prepared for DI process

Outcomes in FIGURES

424 **LOCAL DECISION-MAKERS & PROFESSIONALS** have been strengthened to prioritise family care for children and act in the best interest of the child

124 **RESIDENTIAL CARE STAFF WORKING** IN **3** **INSTITUTIONS** trained and prepared to support DI of children and the transformation of residential care



40 **TEACHERS** from mainstream schools provided with training to support children inclusion

39 **SCHOOL DIRECTORS AND DEPUTY DIRECTORS** of mainstream schools received initial training in inclusive education



19 **POLICY MAKERS** AND **17** **JOURNALISTS** strengthened to support child care reform

95 **MEDIA PRODUCTS AND EVENTS** developed /organized

In KAZAHSTAN

P4EC team with UNICEF Kazakhstan support has provided technical assistance *in the development of training package for strengthening core competencies of community based social service workforce in Kazakhstan*. The organization provided guidance and support to the local trainers in delivering the trainings based on the programme developed.

Outcomes in FIGURES



Development of the training package “Guidelines for supportive supervision and tools for tracking the quality of workforce/social workers engagement with individuals, families and communities” drawing on the experience of in-country consultations and piloting

Delivery of a 5-day joint development and trial of training package with 10-12 master trainers in Nur Sultan

Provision of guidance and support to local master trainers in delivering pilot training in 2 districts (Nur-Sultan and Kyzylorda).

GLOBAL INITIATIVE

P4EC team in collaboration with a group of international experts have developed the Community-level Case Management Guidance to Support Family Care for Children with Disabilities ([Link](#)) to be used by frontline professionals working with children with disabilities globally. The Guidance aims at both (1) increasing the effectiveness of the work of case management personnel (such as social workers or para-professional social workers) in low-income countries in facilitating family and community-based care for children with disabilities; and (2) increasing the effectiveness of project and service planners/designers and managers to effectively design and manage programs that support the reintegration and prevention of family separation of children with disabilities.

The guidance has an explicit focus on elaborating the role of the case manager and the ways that case management personnel contribute to informing policies and links with complementary services in health, education and social assistance that can support family care for children with disabilities.