
CONFERENCE ABSTRACT

Assessing community needs in rural Moldova – an integrated medico-social service approach

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The long distance to services, professionals working in sectoral silos with little collaboration and little awareness of the value of preventive services, both for service providers and beneficiaries alike, increase the burden of non-communicable diseases (NCDs) and the likelihood of premature mortality in rural Moldova. Supported by Swiss Development Cooperation, the Government of Moldova tests new integrated community service approaches in the Ungheni district to better identify and address people's health and social needs. The prevention and control of NCDs is one of the main objectives of the Healthy Life Project.

This study assesses the complex needs of elderly patients with NCDs living in the Cula region of Ungheni district in Moldova in order to adapt and improve existing services, to develop integrated care plans and to identify and address service and collaboration gaps. Seventeen communities of Cula region in the district of Ungheni were identified as particularly vulnerable based on the Moldova Ministry of Finance IDAM index (deprivation index for rural areas). Fifteen patient files from patients diagnosed with NCDs were selected for each of the communities from the list of patients registered with family doctors' offices. Patients were asked to participate in face-to-face interviews on voluntary basis. The assessment included wellbeing and functional status indicators, behavioural factors related to health risk and medico-social needs. The questionnaire included elements of self-management (American Academy of Family Physicians), a depression and anxiety scale (PHQ-9 by Kurt Kroenke) and a WHO audit for the evaluation of high-risk alcohol consumption.

Data collection was done between April and May 2019 and included 255 persons with NCDs (173 (68%) female and 82 (32%) male), 70% of the sample were between 60 and 69 years old. About 73% suffered from Hypertension (HTA); Diabetes and Cardiac diseases were equally present (approximately 14% each). Most interviewees claimed to be independent in terms of managing daily life issues, including personal hygiene and activities of daily life. Approximately 27% needed additional support. People in need of assistance are mostly taken care of by family members (68% male, 42% female). More

than 45% of all women needing assistance are benefiting from social services. Only 57% of the sample would go see a doctor in case of need. Most people mentioned the absence of a family physician in their community and the lack of resources to seek for treatment outside of their home community. Patients who received services mostly got a combination of medical treatment and recommendations for behaviour change, mostly on nutrition. The study shows significant differences in health seeking behaviour and disease prevention between elderly men and women. Men are less likely to engage in preventive activities such as behaviour change with risk reduction and self-management activities than women. Combined medico-social services close to home have the potential to close the significant service gap in rural Moldova. The role of prevention, early detection and management of NCDs needs much more attention.