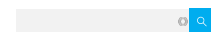




# United Nations

Department of Economic and Social Affairs  
Sustainable Development



## HEALTHCARE ASSISTANCE FOR VULNERABLE CHILDREN WITH DISABILITIES IN REMOTE AREAS

Hands with Heart (Non-governmental organization (NGO))  
#SDGAction3383

### Intro

The health system of the countries where we deployed our operations (Costa Rica, Bali, Romania) is characterized by the lack of sufficient health facilities and the scarce offer of healthcare qualified workers fit to meet the demands. Our practice is about providing free healthcare in the areas of Osteopathy, Physical Therapy, Optometry and Psychology (OPOP) to disadvantaged children with disabilities (CWD) with limited access to health. This assistance is delivered by a group of highly qualified professional who will also train local therapist and educate the families of CWD in the areas listed above through supervised clinical cases guaranteeing the local sustainability of the project.

### Implementation of the Project/Activity

Planification • Locate and contact Local Therapy Centers. • Offer and proposal of our services. • 2 weeks trial period for both parties to ensure conformity. Services delivered by our staff of seniors professional of OPOP, not by volunteers. • Sign a Memorandum of Understanding (Partnership) with local strategic and operating partners Application • Execution of the project based on 2-3 Missions per year & location (100h of activity on each one) • Services delivered by a full team (Staff & Volunteers) Services provided to the main beneficiaries 1. Clinical Assistance; Evaluation, Diagnosis & Treatment of CWD. Including: OPOP and Dentistry 2. Training adapted to Local Therapists' level of knowledge and experience 3. FBT; Educational and informative talks for families strengthening the understanding of the conditions of the CWD, including guidance, technical counsel and recommendations. Specific exercise programs based on their child's individual needs and adapted to the home's facilities. Services provided for the Volunteers as beneficiaries 1. Master class from each field including OPOP and master class of an integrative approach to healthcare of CWD 2. Clinical Supervision with patients 3. Certificate of completion of the trainings Our staff monitor the development of the activity through 1. Documenting the clinical intervention: Anamnesis, Evaluation, Diagnosis, Treatment, and Evolution of the CWD 2. Satisfaction of the beneficiaries through surveys & interviews Financial resources of volunteers' donations so far cover the cost of the Mission (accommodation, meals, logistics, etc) No other source of financial support was obtained so far Human resources Volunteers (different professions) Drivers Translators Project Managers Administrative staff

### Results/Outputs/Impacts

Since 2017 3 Projects: Bali, Costa Rica, Romania 19 Missions 114 Volunteers from 13 countries 5 Different Healthcare Professions 806 CWD treated with 80% of improvement 4.573 Treatments 40 Local Therapists 7.450€ Donated to CWD 13 Therapy Centers 17 Academic Institutions All of the above directly contributing to SDG3-4-5-10-17 Contribution SDG 3 providing health for vulnerable CWD SDG 4 improving academic performance & physical skills increasing social inclusion SDG 5 achieving equality empowering women SDG 10 promoting social inclusion SDG 17 through partnership and international cooperation Positive Favorable reception from volunteers worldwide Well received by local therapeutic centers, communities and authorities Great reception by academic institutions Breaking new ground via FBT with fully grateful families Negative Lack of a permanent presence mitigated by promoting sustainability via FBT Sociocultural conflicts mitigated by including local representatives

### Enabling factors and constraints

Enabling - Willingness and commitment from volunteers - Partnerships with Public, Private & Civil-society Institutions - Large support and warm welcome from local communities - Collaborations with local religious representative supporting our work within the community Innovation - Implementing Community-Based Rehabilitation concepts contributing to the sustainability of the project - \*Stop fathering the communities by promoting own decision-making and boosting their capacities Constraints Sociocultural diversity\* - \*Disability believed to be related to Divine acts leading to shame and guilt - Lack of financial resources to recruit more volunteers

### Sustainability and replicability


Our model is proven to be replicable in other countries and we have done it already twice expanding now to a total of 3 countries (19 missions, 114 volunteers, 806 CWD treated, 4.573 treatments, 40 therapist trained) The model has been replicated in Romania and Costa Rica The project sustainability is guaranteed by knowledge transferring & skill development through training local therapist and educating families Volunteers obtain a certificate of completion to claim time spent as internship / continuous professional development guaranteeing continuous human resources needed for the project Plans Apply to multinational grants Contact more Universities and Professional Registers Contact more Therapy Centers and Associations of Parents Include surgery, speech therapy and nutrition to tap into technical synergies Expand to other countries in Africa Advocacy of adapted sports as a way of inclusion and health promotion Diversify training methodologies (create e-learning training outputs)

### Other sources of information


<https://handswithheart.com/> <https://www.facebook.com/handswithheartinternational> <https://www.instagram.com/handswithheartinternational/> <https://www.youtube.com/watch?v=5mt09-BQeX&t=18s>

### COVID-19 Impact

Covid-19 has greatly impacted the implementation of the project, making it difficult to travel to some locations. A main measure has been fundraising campaigns to buy food and basic needs supplies for those families with CWD. Unemployment has raised up to 80% in most of these communities linked to the assistance projects, this has also affected the Therapy Centers not having income to pay their staff. Monthly donations have been made to pay their salaries Adapted on-line training and case discussion FBT has been a strong element of promotion of CWD health, especially during lockdown and also due to fact of the permanent closure of some of the therapy Centers where they used to go to






This initiative belongs to [SDG Good Practices](#)



This initiative does not yet fulfil the SMART criteria.

**Share**

**Timeline**

- 01 September 2017 (start date)
- 01 March 2021 (date of completion)






**Entity**

HANDS WITH HEART

**Ongoing**

No

**SDGs**


**Other beneficiaries**

The main ones are disadvantaged CWD, their families and communities. Supported by local therapists and through volunteers our organization engages with public, public-private and civil society partnerships, including universities, professional registers, and healthcare authorities. These stakeholders help identifying with our activity in the different communities, including our online community supporting the project

**More information**

<https://handswithheart.com/>

**Countries**


Indonesia

**Contact information**

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