

Dr Jill Evans Report 2010

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A Land of Shocks and Surprises

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A LAND OF SHOCKS AND SURPRISES

Although I knew what I might expect to find on my first visit to Moldova, there were still both shocks and surprises in store in this extraordinary country.

Shocks in terms of the appalling conditions where even the basics of life are absent, where a population can neither trust nor access decent health services, where social care is virtually absent and where the disabled are ignored and their families abandoned without support.

Surprises in that here there are open friendly and hospitable people, often cheerful even in extreme adversity. The countryside is often beautiful, but the infrastructure has disintegrated with multiple potholes in the unmade-up roads and ugly yellow gas pipes snaking around the town at head level, along with big poorly lagged hot water pipes.

As a doctor (I have been a GP in Surrey for over twenty years), I was obviously keen to investigate the medical system which I had heard was corrupt and relied on illegal payments and bribery. Unfortunately this was confirmed repeatedly during our travels across the country. In all areas of society, including the police, this corruption is widespread and expected.

The first few days Dr. John Perkins (another GP), Mariana, our translator and I spent with a young Moldovan doctor Artiom, whom we had been told was reliable and refused to take money from patients, as did his parents who practised in partnership with him. Thankfully their behaviour and attitudes were exemplary and modern and we were thrilled to find at last reliable loyal doctors that we could work with. However the equipment they



had was pitiful. We had taken a doctors bag filled with fairly standard items to give them. Shockingly we had to teach them how to use an ophthalmoscope and auroscope, (used routinely back in England) as they had never seen them. They were delighted with the range of new items and surprised we were leaving them for them to use rather than take them back home to England with us.



We spent the next couple of days visiting patients with them in the two small villages they look after. We had the opportunity to visit the local school where the Principal proudly showed us round, stepping over the broken floorboards and past the cold water buckets which serve for washing facilities. The toilets were a couple of



pungent holes in the ground side by side outside in the yard. We visited the practice medical centre, a cold concrete building that had a 1950's feel. In the tiny dark houses with mud walls, outside toilets and no running water, gas or electricity, we found people struggling with the basics and devastated by illness. Not surprisingly Moldovans are very focused on symptoms and ill health. They are terrified of becoming ill, which is a disaster in the Moldovan family. Not only can it be crippling financially, but the medical care is often suspect. The inability to work when sick can cause financial devastation.

Let me tell you some of the stories of the people in these two villages.

Alcohol is a major problem as with no employment and no purpose, a lot of people inevitably turn to alcohol as a means of escape. The very first house we visited could only be described as a hovel and inside a bewildered disabled daughter

with learning difficulties since birth sat hopelessly on a filthy bed. Both parents had been drinking and the Doctors said there was nothing that could be done.

The next family concerned me greatly. High blood pressure is often left untreated as whilst the villagers may be able to get together enough money to pay for a short course of antibiotics, long term daily medications are impossible for them to afford and therefore their blood pressure often runs out of control. Repeatedly we saw young people in the forties, fifties and sixties who had had strokes as a result of this. This was the scenario we found next with a grandmother in her sixties lying in a smelly bed unable to speak or move.



She had nothing to look at and nothing to do, but was apparently in charge of three children aged, three, four and seven while their Mother went into the city to work every day. The house was littered with dirty clothes in piles and food on





the floor and on their wood burning stove, which looked as though it had been there for days. Of course, they had no fridge and no means of keeping food fresh. Their difficult situation stayed with me, so Hugh visited them with us a few days later. We found that the seven year old was at school, Grandma was still in bed in the house and the three and four year old were 50 metres down the yard and had built a small fire among the rubbish. Back in the house there was a sharp knife presumably to cut the hunk of bread and small amount of butter that seemed to have been left out for them to eat. The house was quite isolated and had any



accident occurred there was no possibility that help could have been summoned. Hugh decided that the charity should try and intervene and the local doctors have been asked to identify a lady without a job

who could be paid to come and care for the Grandmother and the children whilst their Mother works; a neat solution which would help two families at once.

Another visit led us to a woman in her forties who had learning disabilities from birth. She had also recently been diagnosed with abdominal cancer. She had a haunted look in her face and was clearly in pain with a hacking cough. Her family



could afford neither the prescription for cough medicine nor for painkillers to ease her distress.

A young mother showed us her three year old daughter. It was difficult to work out whether this was a medical error or unavoidable, but she had developed meningitis

at the age of eight months and suffered severe brain damage from the complications. Her mother was giving her 24 hour care while looking after her five



year old in addition. We could see no future for this child who was unable to walk, talk or react in way. Hugh thought to buy a buggy for her as her Mother was having to carry her everywhere.

We visited a man with high blood pressure who had had his kidney removed because of cancer and noticed there was some blood on his wife's blouse. She explained that she had a partially treated breast cancer but had run out of money and courage to pursue this a few years before and the cancer had simply been left to progress without dressings or any medical attention.

A 50 year old woman very sick with cancer was being nursed at home by her 19 year old daughter. She had no husband and no outside help and was so unwell that she could not even turn to speak to us. Her 25 year old son returned from work and explained that he and his sister would be looking after her alone until she died.

We saw a tiny woman with grossly deformed joints, who had suffered with arthritis since the age of thirteen. She



said she was constantly in pain and could not pay for painkillers and as a result rarely moved from her bed. As is common, a family member, (her sister) was looking after her.

We came across a young man and his wife who had taken on the care some years ago of their great aunt who had had learning difficulties since birth. They have no help or support with this and when she had fractured her hip last year, their children aged ten, seven and five, looked after her when they were out at work.

Back at the surgery we were introduced to a woman of 43 who had had a stroke through untreated high blood pressure and had required surgery to her skull. We also met her son, aged seventeen, who had difficulty walking because of a road traffic accident in which he had fractured his hip and sustained a head injury which caused epilepsy. Accidents of all types are very common in Moldova, both from the unsafe electricity, from the poor





road conditions and driving, and from agricultural machinery out in the fields. Health and Safety is not a concept that has reached Moldova and there are hazards everywhere you go.

With Hugh I then travelled to Gura Bicalui, the new Community Centre funded by



the charity, and is now nearly complete. This is an amazing project inspirationally managed for the charity by a young Moldovan couple, Ion and Diana. The building is modern, warm, clean and airy and should prove a refuge for many of the poorer families in the village. There is to be a shop and café selling pizza, bread and pies made on the premises, with meeting rooms and function rooms for Mother and Toddler groups, a creche for children whose parents work and opportunities for older people to meet up. There is refuge accommodation for any families that might need it in a crisis and plans to use one of the rooms to help girls coming out of orphanages to learn a craft, to avoid

them ending up on the streets. There is a shower block with disabled access, along with a launderette so that clothes and larger items such as rugs can be washed. In addition, there is a Medical Centre where people can be treated safely and without cost and the local family doctor is keen to provide a presence there. This is a fantastic community resource, welcomed enthusiastically by all those who saw it. Hopefully we can hold medical conferences here and use it for health education, which is so desperately needed.

With Hugh I then spent a few days visiting some families the charity is in touch with. Firstly a four year old who became deaf after having meningitis. We were delighted when she responded in both ears to the music on Hugh's 'phone and promptly handed the phone back when the music stopped. She clearly has some hearing and we are arranging for her to be seen by a specialist for further advice.



We went to visit the father of four who had been given 13 years in prison when he stole a pair of shoes. Fortunately he was released after three years. He said one of the children was suffering from headaches and was out in the fields with the cows. We drove quite a distance before we located him with his brother and sister, one of whom seems to have



learning difficulties. Consulting in a field with cows was a first for me!. We learned that the three children tending eight cows from 8am until 7 pm earned £2.50 a day.

We visited the kindergarten which was full of delightful little ones. One room is unusable as the floor needs renewing, the charity will try to find funding for this. Even here it was not difficult to spot those with abnormalities. One little boy was



blind in one eye and had only 30% vision in the other. He was not being given any special help.

At the school we visited we happened to



call in on a lesson where the class were drawing on the theme-“What would be your dream? This was fascinating- most of the pictures involved dreaming of escaping from their current environment and relaxing in ideal countryside. One boy’s dream was to go on an aeroplane; one girl drew her whole family together at home . It is estimated that over half of the children at the school have at least one parent living away from home in order to find work. I noticed that two of the boys were sitting not doing anything and asked the teacher why. She explained that they were gypsy children and could not afford paper, therefore could not take part in the lesson – extraordinary.



We visited some more very unwell patients. Violena, who has renal failure and is on dialysis, aged twelve and looks about



eight, but as bright as a button, cheerful and lively. Without a transplant (totally beyond the family's means) there is little hope for her; meanwhile she and her mother (also on dialysis) go twice a week to the hospital for treatment leaving at 5am and returning at 11pm. We saw a gypsy family where the young mother has cancer. She has four children - what will happen to them? We called in on a thirteen year old with



leukaemia who is very sick. She was pale and weak, having recently had pneumonia and undergoing chemotherapy. She did



not look as if she would live for very long. It was very hard to walk away from these people, knowing that the care and support they would have in our country would be so much better.

The following day word had got around that Hugh was in the area! We were urged to visit a school where we found a special

ceremony had been laid on with presents and a dance and singing display. This was



a delight and in traditional costumes they entertained us.

Then on with the visiting. We saw a two year old with difficulty walking following correction of his club feet, one still very deformed. We took photos so we can discuss his case with an Orthopaedic Surgeon back here. Another family with



two haemophiliac boys, both with joint pains, deformities and weakness. The elder one worried me greatly, he was extremely thin, I believed to be anorexic.

We went to assess a new family of three girls, a baby, a two and a three year old. They and their home were very grubby, but they were beautiful children and their young mother was struggling with an alcoholic husband. The eldest child was

not speaking well and we encouraged the mother to send her to kindergarten. The charity will try and find a supporter for this young mother, ensuring the money goes only to her and is not spent on alcohol



by her husband. Alcohol is a huge problem in Moldova where many turn to alcohol as an escape. We saw a lot of evidence of the harm this causes to families and also to health, including a man of only 39 with a young family, who already had cirrhosis. At a visit to the Orphanage we were surrounded by excited children all wanting their photo taken in turn. We obliged most of them, noticing that many had squints or slight deformities. A twelve year old looked tearful in the corner and Hugh



took her aside to talk to her. Although she, Rodica, lives in the Orphanage she has two parents, an alcoholic father and a

schizophrenic mother. She t h o u g h t her mother should be in hospital and her father was preventing her going; there was some talk of violence. She was desperately worried and



helpless to do anything. We drove with her round to her parent's house where we found her father was indeed drunk, but cheerfully so. There was no evidence of violence and her mother, although slightly distant, talked to us at length. The father was worried about her being admitted to hospital and was refusing to take her there for her regular injections, but we persuaded him to do so and were able to



partially reassure the girl before returning her to the Orphanage.

The following day we met Sergei, a lively intelligent man in his twenties with a great sense of humour. He was confined to a wheelchair following a medical accident, apparently paralysed after a

lumbar puncture. This is a huge tragedy and since his (gifted) computer had gone to be repaired several months ago he had been cut off from the outside world. The charity had supplied him with an electric wheelchair, but disabled access is not a concept familiar in Moldova and he cannot get into any of the shops as they all have



steps to negotiate. He asked if we could arrange some traction on the ramp the charity had provided to allow him to get out of his flat. He explained, with great hilarity, how he had slid down the ice on the ramp during the winter and only stopped when he skidded into the shed and hit the bins!

One of our hosts had seen an appeal on TV for help with a local nineteen year old, Dumitrii. He asked us to go and see if we could help. This proved to be the most shocking case we saw in Moldova. The story was that this bright, intelligent and handsome eighteen



year old had gone to Moscow to study and also took a job there because he wanted to send back money to his mother in Moldova to buy her a washing machine.

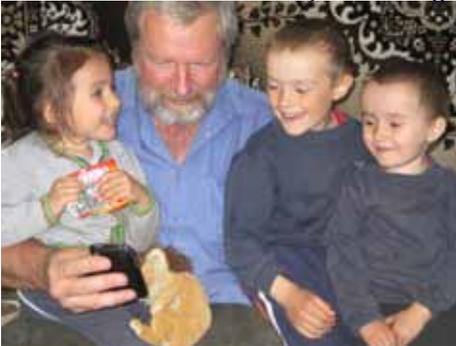
When he went to a shop to buy some bread and milk with his first pay cheque, he was apparently attacked, hit over the head sustaining a severe skull fracture and dumped on a railway line, presumably in the hope that he would be killed by a train. He was pulled off the line by passers-by and taken to hospital. Here they operated twice to remove fragments of skull from his brain and to drain a blood haemorrhage but he was left severely brain damaged and sent back to Moldova. When we walked into the flat several floors up, there was what looked like a corpse in the



bed. He was painfully thin and pale, lying motionless with a tube for him to breathe and a tube for feeding. He had a catheter made from a plastic bottle and a piece of tubing. For the last eighteen months his mother had nursed him 24 hours a day. He apparently blinks to say yes or no and moves his mouth when hungry: he had recently started to swallow. His mother told us how desperate she was to see improvement and believed that a further operation would restore him in some way. I had to gently tell her that sadly I thought this was highly unlikely, although I promised to take copies of his scans back with me to show a specialist in London. I am amazed that she has managed to keep him alive for so long. Apparently

the week prior to our visit he had had pneumonia and she had administered an intravenous drip at home - unthinkable in England. She had looked after him with no support and no social care; without good neighbours she would not have managed. The doctor visited rarely and no specialist was involved with him any longer. We were then surprised when a middle aged lady with Downs syndrome appeared at the door from the next room. It turned out that Dumitrii's mother had not only been caring for him but for the last 22 years had cared for her ex-husband's sister with a learning disability as well. What a courageous woman.

We visited another young family where two of the children had brittle bone disease. The seven year old girl was unable to walk because of deformity of her thigh



bone, which was crescent shaped. They had been offered a new treatment which I had come across in England, but this involved travelling to Moscow and several thousand pounds for the cost of the treatment, completely impossible for this poor family. I am going to investigate how the child's leg may be treated and whether this new treatment could be obtained more cheaply for them by the charity.

The rest of the day involved meeting old friends.

We travelled almost to the Romanian border to a remote village to see Vasile, who some of you may remember lost his arms in an electrical accident and came over to England several times to have artificial arms fitted. He was 21 the day before we visited and in great form, an articulate, mature and charming young man who now needs to find a suitable



job. Despite still mourning the death of his mother a few months ago, his father, unselfishly, was keen for us to help Vasile move away from the village where he felt there was no future for him.

Next Andrei, the boy who came over three years ago for neuro-surgical closure of a large skull defect and plastic surgery to restore hair over his scalp. Andrei had lived in England for five months and I had been his doctor. He integrated with our families, becoming thoroughly westernised with his mobile phone, his digital camera, his computer and even attending a private school free of charge! He was thrilled to see us and has grown into a fine young man with a full head of hair. He wanted to tell us how much his life had changed since the operation and made a point of

asking us to thank everybody who was involved in helping him when he was in England. His father, who previously had an alcohol problem, stopped drinking after Andrei returned to Moldova; he is very supportive and they clearly now have an excellent relationship. Andrei's future looks bright, he is studying and hopes to go to University.



Finally we had dinner with Alina and family, who came over and stayed with me last year when she had surgery for a very painful back condition. She has had no pain



since and is now expecting her first baby. The Neurosurgeon who carried out the operation in England joked that he would do the operation for her free if she called her first child after him, 'Marios'. She's told me that if her baby is a boy she will!

The next day on to see Liuba who had also stayed with me last summer whilst helping look after my next door neighbour's autistic child and practicing her English. Again we were delighted to see each other and I was happy to meet some of her family. Her improved English will be a great help with her career.



Our next visit was to a Grandmother who was quite unwell. Dr. John and I wanted to send her into hospital, her oxygen levels were low and her lungs sounded very congested with infection. However, she said she did not want us to call an ambulance as she could not afford to pay to be taken to hospital, nor to pay when she reached there. In addition two of her grandchildren lived with her and she said it would be impossible to leave them. In the end we agreed to leave her with antibiotics and we gave her some money in case she should deteriorate and need to go to hospital after all.

Our final day was spent at the new centre at Gura Bicalui. We all gathered with our new doctor friends and a patient representative. A tour of the Centre and a meeting with everybody proved extremely fruitful and very encouraging. Everyone was positive and hopeful that this could mark the beginning of a new type of facility that could be replicated

across the country. Here was real hope. The patient who had been at the meeting was asked afterwards how she felt. She



was almost in tears; “No-one has valued me like this before” she said. “In the village they look down at me but here you made me feel important and that what I thought mattered.” Such a simple thing, but she had never felt valued in this way before. We decided to go and visit her at home; she has five children and is a single mother. The family occupy a building in a disused hospital and the land is due to be sold. The charity are trying to help them find a house. She related how the journey to collect firewood for their stove and heating each day is a 3 hour round trip. This involves crossing over into a dangerous occupied area of the country and that in the winter snow, when the



wood is needed most due to the bitter cold, it is impossible to make the trip.

The last family we visited was the Mattei family. Another sad situation where the mother is an alcoholic and the house was the dirtiest and most neglected I had seen.



We suspected fleas! I was scratching hard when we came out but that might have been psychological!



Finally we had to make our way to the airport.

What a wonderful privilege to have lived amongst these welcoming people who allowed us to share their lives with them. There was no hint at all of resentment of our presence, quite the opposite. There are people in Moldova in urgent desperate need that we must try and help immediately, but in parallel with this, we need to look at the more long term future and at ways of altering the attitudes that have created these awful situations. Maybe then we can contribute towards producing lasting changes that will help large numbers of Moldovans have a better quality of life.

Any ideas anyone?!!

Dr Jill Evans(Asher)

Hugh Scudder has been to Moldova since Jill's report. These are a few follow-up notes.

Once again we held our Summer Camp, for 200 children. A wonderful time, albeit in searing heat.

In Jill's report she mentioned Rodica, the girl from the orphanage and the mental trauma she was suffering knowing the plight of her parents. Rodica was invited to join us at our Summer Camp. What a different girl she was there; running, playing, laughing, a far cry from her normal worried life at the orphanage. Rodica, along with so many of the children we invite to the Summer Camp, lead such hard and unbelievably difficult lives it is a real treat for us to see them having so much fun. These children do not need the latest computer game, televisions or DVD's, all they need is a few simple games and people who will play with them. This year



Georgiana, Zoe and Ellie raised the money to come to Moldova and help at the camp.

With so many children looking so wonderfully healthy and happy it is so difficult to believe their suffering. Georgiana, Zoe and Ellie were each amazed and shocked when they visited the homes of some of the children they had been playing with the previous week. They had such basic and primitive living conditions but at camp they were all so happy.

Our appeal for the Summer camp shoe boxes was a huge success, like Christmas in August! The Summer Camp Shoeboxes contained many things including seemingly boring items such as Toothpaste and tooth brush, soap, a Tee Shirt and underwear. The children were delighted; many had arrived with nothing bar



the clothes they stood up in. It is very humbling to see children genuinely excited and grateful for such mundane things. Most of the boxes also had toys and games. One child was heard to say when he discovered some school equipment in his box, "... this means I will now be able to go to school, and I can give some pencils to my sister".

Talking of school. We had invited nine-year-old Pasha to join us at camp but her mother said she could not come. When asked why not mother replied "Pasha will have to work all the summer to earn money to buy clothes for school". Pasha agreed willingly with her mother, she understood she would have to do this. Children have to contribute to the family and school was very important and the money had to come from somewhere. In the knowledge school uniforms were very cheap in England, far cheaper than in Moldova we agreed if we were to give her school clothing she could come to camp. This she did and had a brilliant time. We must ensure we can raise enough money to run the camp again next year; it is so important to these children.



In our Newsletters you may have read time and time again some of the problems caused by excessive drinking. This is a huge problem in Moldova. Another sad example relates to a family we met in August who live in Drochia in the north of Moldova. Mum Zulfia cares for her two children, ten-year-old Daniel and four-year-old Veronika.

The family live with their father in a flat in the town however their father drinks excessively and frequently becomes violent. Mother regularly has to take her children and find somewhere to sleep on the streets.

During the bitter winter months this is potentially life threatening.

On the day we visited it was Daniel's tenth birthday. Typically for the poor in Moldova this means very little change



to a normal day; there are no presents, no party, no cake, nothing. Just a normal day but with the added excitement of knowing it is your birthday. We were very pleased we had some new shoes, a balloon and a few other things we were able to give him and his sister. Needless to say they were both very excited in receiving these.

We are very grateful to all who support our work, we believe it is so very important; after all we are blessed with so much in this country and it is wonderful for us to share our good fortune with others. The financial and practical support we have had over the past twenty years is quite amazing and enabled us to help so many. Thank you all for your amazing support. Please keep it up.

Antalis Paper Suppliers (www.antalis.co.uk) have kindly been donating the paper for our Newsletters for many years now and we are again very grateful to them for giving us the paper for this newsletter.

If you have read the past newsletters you will have read about the plight of so many families, many have severe problems born of abject poverty, some have medical problems whilst others suffer the consequences of alcohol abuse.

Just look at the children. Their sweet innocence blighted by the reality of a grim and harsh life. It is no wonder so many wish to leave their villages especially with the promise of a better life abroad. We have all seen the headlines relating to this; the number of children and young girls who find themselves trapped into a life of prostitution or even worse, being unwilling organ donors. Many are so desperate to find that kidney, heart or liver for their loved one and are willing to pay privately. Who thinks of where these organs come from? Maybe a child from Moldova.

Just look at twelve year old Jenea, (right), or even Rodica, mentioned before in this newsletter on page 9 and 14. Beautiful young girls from very poor families. How many depraved adults from the West would pay to “have fun” with one of them? Even Pasha who has to work all summer long to earn money for her school uniform, maybe if a few years she will also leave Moldova for a “better life”.



We may not be able to stop all of this but with projects such as our new community centre we can stop this happening to many of them. We can help them have a better life in Moldova which will encourage them to stay in their country and work to improve the situation in their country. We can educate them to the perils of looking for a “better life” abroad. So many are working away, so many young people are leaving their country and their families; sadly so many are never seen nor heard of again.

The reality of our work is the fact we need to increase the income we receive. Our supporters have been wonderful and we have achieved so much but the need is huge and our work is expanding. As a voluntary charity we have no staff to pay for nor offices to rent so we can use all the money to help those in Moldova.

For many years we have run the family support project and this has proved very successful with the Moldovan families and their English counterparts becoming one big family. Sadly we always have more families looking for help.

The new Community centre in Gura Bicului is an amazing opportunity to help so many people. We can help the young and old alike, the able and disabled. We will have educational facilities for children and adults. A medical centre with conference facilities. A bakery with an affordable Café for families. Showers and washing facilities for everyone including the disabled. There is so much we can do and so many plans. We anticipate this will become self-funding in time but we need a regular income to begin with. If you can afford a few pounds each month to help it would be great.

With your help we can do so much. Without it we can do nothing. Just a few pounds a month from you and your friends is so very important. Please, if you can help us. You can download a Standing Order form from our website or ‘phone Hugh on 01626 891945..