

CARES

Benchmark report on social care sectors at  
the national and EU level

Transnational report

2025





CARES – Caregivers Advancing Regulatory Environment and  
Skills

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## List of Abbreviations

CARES	Caregivers Advancing Regulatory Environment and Skills
CBT	Cognitive Behavioural Therapy
CFP	Centri di Formazione Professionale
ECEC	Early Childhood Education and Care
EIGE	European Institute for Gender Equality
EU	European Union
HU	Hungary
ILO	International Labour Organization
IT	Italy
KSH	Hungarian Central Statistical Office
LT	Lithuania
NGO	Non-Governmental organisation
OSS	Operatore Socio-Sanitario
PEPP	Pan-European Individual Pension Product
RO	Romania

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## 1. Executive Summary

This transnational benchmark report was developed within the *CARES project – Caregivers Advancing Regulatory Environment and Skills* – and provides an overview of the social care sector at both national and EU levels. It focuses on key demographic, institutional and workforce trends that influence the current and future state of social care in Europe, with an emphasis on four countries: Italy, Hungary, Lithuania, and Romania.

The report addresses the increasing demand for social and long-term care services, driven by aging population, the rising prevalence of chronic illnesses, and the increasing complexity of individuals' needs. In 2024, 21.6% of the EU population was aged 65 or over, with projections indicating a rise to nearly 30% by 2025. In Romania, for example, the healthy life expectancy at age 65 decreased from 5.9 years in 2014 to just 4 years in 2023, indicating an increasing need for health and social care services, as older people are spending more of their late years with illness, disability, or limited autonomy. This tendency is placing increased pressure on care systems and challenging the sustainability of public services. Despite efforts to reform social care systems, many European countries still face major challenges related to accessibility and quality of services, territorial disparities, workforce shortages.

At EU level, strategic initiatives such as the European Care Strategy, the European Pillar of Social Rights, and the European Child Guarantee provide important policy frameworks to improve care provision, ensure a better work-life balance, and promote the professionalisation of the social care workforce. National legal frameworks in the project countries reflect these priorities but vary in terms of implementation, funding, and integration of services. For example, Italy shows high levels of decentralisation with regional disparities in access to care services, while Lithuania presents a more centrally coordinated approach, focusing on improving service quality and expanding access through targeted national programmes.

The report highlights the systemic vulnerabilities of the workforce in the social care sector: it remains predominantly female (approximately 90% of care workers in the EU are women), underpaid, and undervalued, with high risks of burnout and high turnover. By 2024, around 12 million people were employed in care-related activities in the EU, yet 36% of them are estimated to be working under undeclared conditions, especially in the private sector. Informal carers, mostly women, represent a significant invisible workforce, with over 52 million Europeans providing informal long-term care weekly.

To address these issues, countries have developed training programs for professionals, focusing on digital tools, emotional resilience, and soft skills development. However, disparities exist between countries in terms of national strategies, access to training (especially in rural areas), and alignment with labour market needs. The comparative analysis of best practices indicates innovative approaches across all four countries, particularly in mental health support, reflective supervision and digital learning. This emphasises the



importance of holistic training and supportive environments for supporting a resilient and compassionate workforce.

The report concludes with a series of recommendations, mainly to develop coherent national training strategies with flexible, locally adapted implementation; to invest in emotional, digital, and green competencies; to strengthen cross-country learning through structured exchange of best practices.

Given the projected increase to 33 million people in need of long-term care in Europe by 2050, urgent action is required to strengthen systems, empower workers, and ensure equitable, high-quality care for all.

Overall, the report provides a solid evidence base to inform future policy, training initiatives, and cross-border cooperation aimed at enhancing the quality, sustainability, and accessibility of social care across Europe.

## **2. Introduction**

In the face of profound demographic, social, and institutional transformations, the provision of social and health care services is increasingly becoming a strategic priority. Across Europe and beyond, ageing populations, rising life expectancy and changing family structures are increasing the demand for long-term care, particularly for older people, disabled people and children with special educational needs. Meanwhile, early childhood education and care have gained renewed attention as key factors in preventing social exclusion and promoting well-being from the earliest stages of life.

This report examines the current landscape and future needs in the field of social healthcare, focusing on the growing pressure on long-term care systems at the level of the European Union and in particular in project countries: Italy, Hungary, Lithuania, and Romania. It explores the main factors driving demand, such as demographic changes, the prevalence of chronic conditions and disabilities, and the increasing complexity of individuals' needs. It also highlights the significant challenges faced by the care workforce. The report also assesses the status and development needs of social care professionals, emphasising the importance of continuous training, adequate regulation, and collaboration between the health, education, and social services sectors.

The analysis is grounded in an overview of the policy frameworks that shape care provision and offers insights into how systems can respond more effectively to emerging demands. Particular focus is given to care service integration, care quality and accessibility, and the vital role of professionalisation and support for care workers in ensuring sustainable, person-centred care delivery.

### 3. Need for Better Social Care

The issue of demographic challenges is becoming increasingly salient within the European Union. Demographic issues are garnering increasing attention among European citizens. According to the 2023 Eurobarometer survey, Europe's ageing population (42%) and the decline in the working age population and labour shortages (40%) were identified as the most pressing demographic challenges by respondents across the Member States. This was followed by migration and integration challenges (34%), depopulation and brain drain (26%), and declining fertility (21%). However, it should be noted that these challenges vary in their perceived urgency from one country to another. Specifically, population ageing was identified as the most pressing challenge in eight Member States (Poland, the Netherlands, Portugal, Spain, Slovenia, Czechia, Cyprus, and Italy), while declining populations in the working age category was highlighted in five Member States (Belgium, Denmark, Romania, Lithuania, and Ireland). Immigration was noted as a concern in six Member States (Germany, Luxembourg, Cyprus, Sweden, Malta, and Austria), depopulation and labour drain in five countries (Hungary, Slovakia, Croatia, Estonia, and Bulgaria), and declining fertility in three Member States (Finland, Latvia, and Estonia).<sup>2</sup>

In 2024, the proportion of the EU population aged 65 and over was 21.6%, which is a substantial increase from the 18.3% recorded in 2013. This indicates a 3.3% rise in just a decade, suggesting a clear trend of an ageing demographic. Projections indicate that by 2050, approximately 30% of the European population will be over 65, resulting in a ratio of less than two working-age adults for every older person (increasing the age dependency ratio to 56.7%), thereby confirming the increasing trend of age dependency in the future (Figure 1). In 2024, in the project countries the proportion of population aged 65 and over was 24.3 in Italy, 20.7 in Hungary, 20.3 in Lithuania, 20 in Romania (Eurostat<sup>3</sup>). Also, the proportion of the population aged 80 and over has increased by 1% in EU member states over the last 10 years, rising from 5.1% in 2023 to 6.1% in 2024. The situation in project countries is similar to the general EU-level trend: the proportion of the population aged 80 and over was as follows in 2024: Italy – 7.7%, Hungary – 4.6%, Lithuania – 5.7%, Romania – 4.4% (Eurostat<sup>4</sup>).

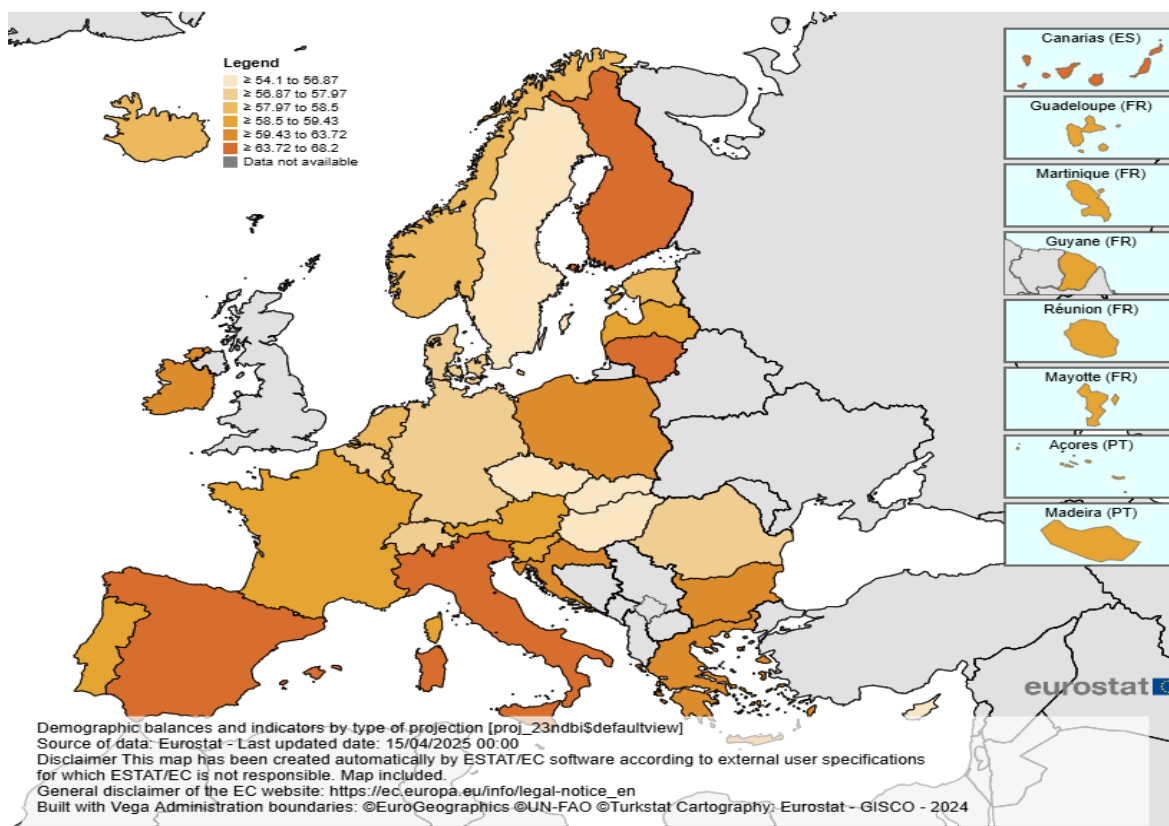
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<sup>2</sup> European Commission (2023). *Flash Eurobarometer 534: Demographic change in Europe*. Directorate-General for Communication, Secretariat-General. [https://data.europa.eu/data/datasets/s3112\\_fl534\\_eng?locale=en](https://data.europa.eu/data/datasets/s3112_fl534_eng?locale=en)

<sup>3</sup> <https://doi.org/10.2908/TPS00028>

<sup>4</sup> <https://doi.org/10.2908/TPS00010>

**FIGURE 1 PROJECTED OLD-AGE DEPENDENCY RATIO IN THE EUROPEAN UNION IN 2100 (%)**

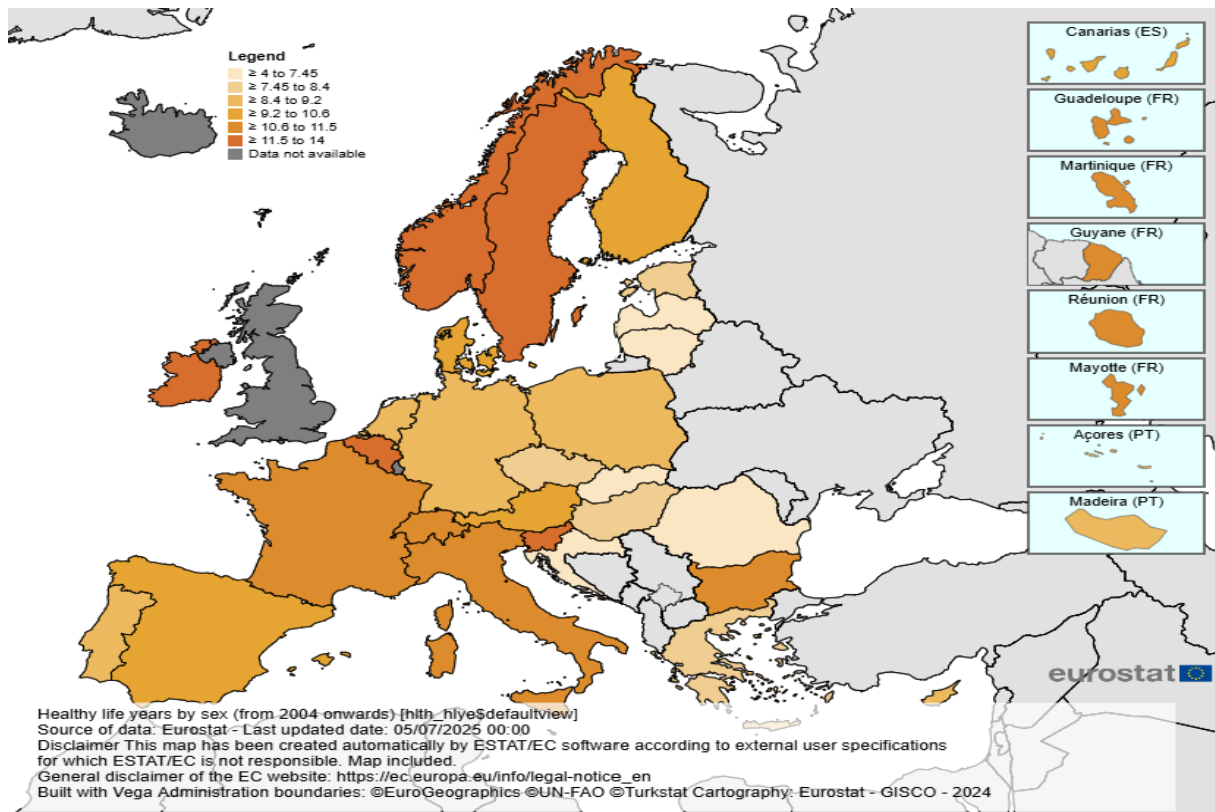


SOURCE: EUROSTAT, 2025, [HTTPS://DOI.ORG/10.2908/PROJ\\_23NDBI](https://doi.org/10.2908/PROJ_23NDBI)

An ageing population has been identified as a contributing factor to the challenges of fiscal sustainability. The greater demands placed on health and long-term care by an ageing population necessitate additional infrastructure investments and adaptations to ensure accessibility for all. The increase of life expectancy in EU countries poses pressure on the social and health care systems to develop new type of services for older persons and also on the pension systems. At the same time the healthy life expectancy at age 65<sup>5</sup> increase at EU level with 1 year in the last decade, from 8.4 in 2014 to 9.4 in 2023. In the project countries the healthy life expectancy at age 65 in 2023 was: 10.8 healthy years in Italy, 7.5 in Hungary, 7.4 in Lithuania and 4 in Romania (Figure 2). In Romania there is a decrease in the healthy life expectancy at age 65 between 2014 and 2023 from 5.9 to 4.

<sup>5</sup> Healthy Life Expectancy at Age 65 - refers to the number of additional years that a person aged 65 is expected to live in good health, without major physical or mental limitations.

**FIGURE 2 HEALTHY LIFE EXPECTANCY AT AGE 65 IN THE EUROPEAN UNION 2023 (YEARS)**



SOURCE: EUROSTAT, 2025, INDICATOR: [HTTPS://DOI.ORG/10.2908/HLTH\\_HLYE](https://doi.org/10.2908/HLTH_HLYE)

The process of ageing in society engenders several issues that must be addressed, including but not limited to the prevalence of loneliness amongst the elderly, energy poverty, the necessity for augmented capacity, and the affordability of care and healthcare. An ageing population invariably imposes greater demands on health and long-term care services, thereby precipitating escalating costs and exacerbating the shortage of professionals. Elderly individuals are predisposed to a higher incidence of chronic diseases such as dementia, cardiovascular diseases, cancer, and diabetes, which necessitate appropriate prevention, diagnosis, treatment, and care.

Furthermore, the ageing demographic of healthcare professionals necessitates the consideration of issues such as burnout, stress, attrition, and retirement, which have the potential to impact the quality and safety of healthcare services. In this regard, there is a compelling need to implement strategies that focus on the retention, attraction, training, and motivation of the healthcare workforce. Such measures are essential for ensuring the effective



functioning of healthcare systems and the delivery of high-quality care to individuals and communities.<sup>6</sup>

It is important that care systems are adequately prepared to address the escalating demands. According to estimates by the Foundation for European Progressive Studies, the current number of individuals in Europe requiring long-term care stands at 24 million, with projections indicating a rise to 33 million by the year 2050.<sup>7</sup> This demographic comprises individuals who receive institutional care (4 million), those receiving care in the comfort of their own homes (6 million), and a significant proportion of 14 million individuals who are not receiving any assistance. Furthermore, 20 million people require intermediate care, which is projected to rise to 29 million by 2050. Of these, 1.5 million receive care in the comfort of their own homes.

Early childhood care is another area where the need for care is growing, as the EU has set a target to increase the proportion of children in such services. Around 15.7 million children were enrolled in early childhood education in Europe in 2023 (2.0 million in early childhood educational development and 13.7 million in pre-primary education) (Eurostat, Number of early childhood education pupils in 2023, Indicator: educ\_uae\_enrp01). There are significant differences between Member States, reflecting the demographic structure of their populations and differences in the age of compulsory schooling. Differences also reflect national policies on early childhood education and care (ECEC) systems. From the age of three until the start of compulsory primary education, children in ECEC typically attend pre-primary programmes (ISCED level 0, category 020). In 2023, the share of children enrolled in early childhood education between the age of three and the start of compulsory primary education was 94.6% in the EU (Eurostat, Share of pupils from age 3 years to the starting age of compulsory education at primary level who are enrolled in early childhood education in 2023, indicator: educ\_uae\_enra21). This is commonly referred to as the 3+ enrolment rate. In some countries, the rate is at or above the policy target of 96%: Luxembourg (96.0%), Lithuania (96.2%), Sweden (96.3%), Poland (96.6%), Hungary (97.4%), Spain (97.7%), Belgium (98.0%) and France (100.0%). Twelve countries, including Italy and Slovenia, recorded values between 90.0% and 95.9%, while five countries (Bulgaria, Czechia, Slovakia etc.) were between 80.0% and 89.9%. In Romania, it was below 80.0% (75.7%).

Children in early childhood education from birth to the age of three are usually enrolled in early childhood development programmes (ISCED level 0, category 010). In 2023, Luxembourg (81.9%), Sweden (76.9%) and Denmark (75.7%) had the highest rates of children in early childhood education from birth to the start of compulsory primary education – the highest

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<sup>6</sup> World Health Organization (2015). *World report on ageing and health*. <https://www.who.int/publications/i/item/9789241565042>

<sup>7</sup> Thissen, L., & Mach, A. (Eds.). (2023). *The European care strategy: A chance to ensure inclusive care for all?* Foundation for European Progressive Studies & Friedrich-Ebert-Stiftung. Authors: C., Navarra, M., Fernandes, C., Saraceno, A., Gromada, T., Bell, C., Marzo, J. F., Lebrun, B., Helfferich, E., Chierigato, & F., Sanden.

rates among EU countries. But it was also above 70% in Slovenia, Latvia, Spain and Lithuania. The countries with the lowest coverage (below 45%) were Malta (42.3%), Slovakia (44.1%) and Romania (44.2%). Hungary (59.1%) and Italy (51.4%) are in the middle (Eurostat, Pupils from age 0 to the starting age of compulsory education at primary level by sex - % of the population of the corresponding age in 2023 <sup>8</sup>).

Eurostat also has data on teachers and educators in early childhood education, with more than 1.5 million Europeans working in this field in 2022 (for 2023, there are data only for 22 EU member states). The largest number was in Germany (around half a million), followed by Spain (158,000) and Italy (128,000), with Hungary (26,000) and Romania (37,000) in the middle. 95% of teachers and childcare workers were women (Eurostat, 2025, Classroom teachers and academic staff by education level, programme orientation, sex and age groups<sup>9</sup>). The variation in absolute numbers is partly due to differences in the size and demographic structure of the countries, but also to differences in the ratio of carers/teachers per child. The average number of children per teacher in early childhood education also varies between Member States, ranging from 2.7 in Ireland to 13.8 in Romania. Lithuania is in the middle range (5.8), while Italy (11.1) and Hungary (12.6) have values similar to Romania.

The percent of persons at risk of poverty or social exclusion decrease from 24% in 2015 to 21% in 2024. In 2024, in the project countries the percentage of persons at risk of poverty and social exclusion was 23.1% in Italy, 20.2% in Hungary, 25.8% in Lithuania and 27.9% in Romania (Figure 3) (Eurostat, [https://doi.org/10.2908/ILC\\_PEPS01N](https://doi.org/10.2908/ILC_PEPS01N)). In 2024, 24.2% of Europeans under 18 was at risk of poverty or social exclusion. The percent of children at risk of poverty and social exclusion was 27.1 in Italy, 21.1 in Hungary, 22.8 in Lithuania and 33.8 in Romania (Eurostat<sup>10</sup>). In Romania the percent of population and of children at risk of poverty and social exclusion is higher.

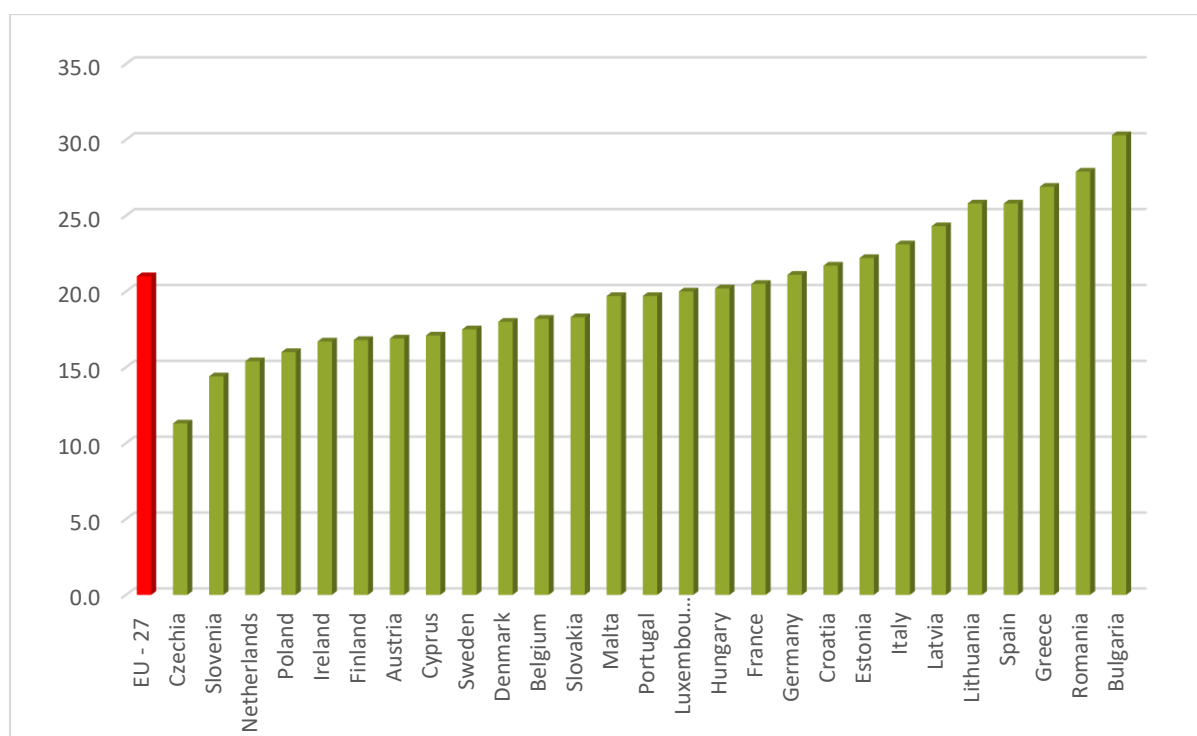
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<sup>8</sup> [https://doi.org/10.2908/EDUC\\_UOE\\_ENRA23](https://doi.org/10.2908/EDUC_UOE_ENRA23)

<sup>9</sup> [https://doi.org/10.2908/EDUC\\_UOE\\_PERP01](https://doi.org/10.2908/EDUC_UOE_PERP01)

<sup>10</sup> [https://doi.org/10.2908/ILC\\_PEPS01N](https://doi.org/10.2908/ILC_PEPS01N)

**FIGURE 3. PERSONS AT RISK OF POVERTY OR SOCIAL EXCLUSION BY AGE AND SEX**



Source: Eurostat, 2025, Persons at risk of poverty or social exclusion by age and sex, [https://doi.org/10.2908/ILC\\_PEPS01N](https://doi.org/10.2908/ILC_PEPS01N)

Furthermore, the necessity for care is projected to increase in conjunction with the ageing of the EU population. The proportion of individuals requiring care compared to those capable of providing it is projected to reach 76% by 2050.<sup>11</sup> This anticipated demographic shift necessitates strategic action at the EU level. The data indicates that, while currently approximately 52 million Europeans, constituting 14.4% of the population aged 18 to 74, predominantly female, provide informal long-term care to family members or friends on a weekly basis. However, this care resource is set to become increasingly scarce numerically in the face of increasing demand, and this scarcity may be further heightened by intra- and cross-country mobility, which involves mostly the younger and middle generations.<sup>12</sup>

The Labour Force Survey indicates that 16% of women not in the labour force who expressed an interest in employment cited caring responsibilities as their primary reason for being inactive. This figure is significantly higher than the 2% of men who reported the same reason.

<sup>11</sup> Kiss, M. (2022). *Demographic outlook for the European Union*. European Parliamentary Research Service. [https://www.europarl.europa.eu/RegData/etudes/STUD/2022/729461/EPRS\\_STU\(2022\)729461\\_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/STUD/2022/729461/EPRS_STU(2022)729461_EN.pdf). The share who could provide care is approximated by the number of working-age people (aged 15-64 years) who could directly provide care or help to finance it.

<sup>12</sup> European Commission (2021). *The 2021 Ageing Report. Economic & Budgetary Projections for the EU Member States (2019-2070)* (European Economy – Institutional Paper No. 148). [https://economy-finance.ec.europa.eu/publications/2021-ageing-report-economic-and-budgetary-projections-eu-member-states-2019-2070\\_en](https://economy-finance.ec.europa.eu/publications/2021-ageing-report-economic-and-budgetary-projections-eu-member-states-2019-2070_en)

Furthermore, among those in part-time employment, 26% of women cited family care as their main reason for working part-time, compared with only 6% of men.<sup>13</sup>

#### 4. European Policy Framework on Ageing and Care

The **European Commission's Green Paper on Ageing** aims to discuss the social and economic impacts of ageing and possible responses.<sup>14</sup> The Green Paper adopts a life-cycle approach, reflecting the universal impact of ageing on all generations and life stages. It covers the following topics:

- Healthy and active ageing, lifelong learning and regional differences in access to education.
- Increasing labour force participation, promoting productivity, innovation and business opportunities, and territorial aspects of employment and productivity.
- Active ageing, poverty in old age and adequate, equitable and sustainable pension systems.
- Meeting the health and long-term care needs of an ageing population, improving mobility, connectivity and accessibility, reducing territorial disparities in access to care and services, and improving well-being through intergenerational solidarity.

The **European Care Strategy**, which was presented by the Commission in September 2022, is centred on the needs of both carers and care recipients, with the overarching objective being to ensure the provision of quality, affordable and accessible care services throughout the EU.<sup>15</sup>

The strategy is divided into three key areas:

- **Early Childhood Education and Care:** the European Commission aims to review the Barcelona targets and propose that Member States ensure that 45% of children under three, 95% of children between three and six, and 100% of children between six and the start of compulsory schooling receive quality childcare.
- **Long-term care:** the European Commission proposes that Member States establish high-quality criteria and standards for care environments, enhance working conditions and work-life balance for carers, address training requirements and staff shortages for care staff, and promote legal migration pathways for care workers.
- **Well-being of carers and cared-for persons:** the European Commission aims support Member States in improving the health, mobility, connectivity and accessibility of

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<sup>13</sup> Thissen, L., & Mach, A. (Eds.). (2023). *The European care strategy: A chance to ensure inclusive care for all?* Foundation for European Progressive Studies & Friedrich-Ebert-Stiftung. Authors: C., Navarra, M., Fernandes, C., Saraceno, A., Gromada, T., Bell, C., Marzo, J. F., Lebrun, B., Helfferich, E., Chierigato, & F., Sanden.

<sup>14</sup> European Commission (2022). *Green paper on ageing*. Publications Office of the European Union. <https://data.europa.eu/doi/10.2775/785789>

<sup>15</sup> European Commission (2022). *A European Care Strategy for caregivers and care receivers*. [https://employment-social-affairs.ec.europa.eu/news/european-care-strategy-caregivers-and-care-receivers-2022-09-07\\_en#navItem-relatedDocuments](https://employment-social-affairs.ec.europa.eu/news/european-care-strategy-caregivers-and-care-receivers-2022-09-07_en#navItem-relatedDocuments)



carers and cared-for people, and in promoting intergenerational solidarity and social inclusion.

This strategy is in line with the implementation of the **European Pillar of Social Rights** and contributes to the recovery from the health crisis caused by the coronavirus.

Furthermore, the **European Commission's Recommendation 2008/876/EC on promoting the active inclusion of people excluded from the labour market** requires Member States to provide services which are essential for active social and economic inclusion policies, including social assistance services, employment and training services, housing support and social housing programmes, childcare, long-term care support services and health services.<sup>16</sup>

The **Pan-European Individual Pension Product (PEPP)** has been introduced as a voluntary personal pension scheme, with the purpose of allowing EU citizens to save for retirement in different Member States.<sup>17</sup> The PEPP contains uniform product features and consumer protection rules and is designed to complement existing public and occupational pension schemes. It is envisaged that PEPPs will be offered by a wide range of financial institutions, and savers will be free to choose between different investment options. A notable feature of PEPPs is their portability, which enables savers to open a sub-account with the same provider in another Member State in the event of relocation. The PEPP Regulation (2019/1238) came into effect on 28 March 2022, with the EU aiming to increase the share of private pension savings to at least 33% by 2030.

The **Council Recommendation on access to affordable and high-quality long-term care (2022/C 476/01)** provides guidance to Member States to strengthen the adequacy, accessibility and quality of long-term care and to improve the working conditions of carers, for all those who need it.<sup>18</sup> Early childhood education and care is also an important strategic area for the European Union, which includes private and community early childhood services.

A **Council Recommendation on a high-quality early childhood education and care system** was adopted in May 2019.<sup>19</sup> The Council Recommendation aims to improve access to and the quality of early childhood education and care. It sets out a quality framework which identifies five key components: access to early childhood education and care; training and working conditions of early childhood education and care staff; definition of appropriate curricula;

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<sup>16</sup> Commission of the European Communities (2008). Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions – Cohesion Policy: investing in the real economy /\* COM/2008/0876 final \*/. <https://eur-lex.europa.eu/legal-content/EN/TXT/HTML/?uri=CELEX:52008DC0876&from=MT>

<sup>17</sup> European Commission (2022). *Pan-European private pension product (PEPP)*. [https://ec.europa.eu/commission/presscorner/detail/en/ip\\_22\\_1941](https://ec.europa.eu/commission/presscorner/detail/en/ip_22_1941)

<sup>18</sup> Council of the European Union (2019). *Council Recommendation of 8 December 2022 on access to affordable high-quality long-term care (2022/C 476/01)*. [https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32022H1215\(01\)](https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32022H1215(01))

<sup>19</sup> Council of the European Union (2019). Council Recommendation of 22 May 2019 on High-Quality Early Childhood Education and Care Systems (2019/C 189/02).



governance and funding; and monitoring and evaluation of systems. A quality framework has helped to improve the provision of early childhood education and care. For example, several countries have already reached the EU-wide target of 95% of children over four years of age participating in ECEC.

In 2021, the **European Children's Guarantee** was adopted.<sup>20</sup> The overarching aim of the European Children's Guarantee is to prevent and combat social exclusion by ensuring effective access to a range of key services for children in need. The following services are to be made available free of charge: early childhood education and care, education (including school activities and at least one healthy meal every school day), health care, healthy nutrition, and adequate housing.

While most children in the EU already have access to these services, inclusive and truly universal access is vital, especially for those who experience social exclusion due to poverty or other disadvantages. To implement the aforementioned Recommendation, Member States have appointed Child Guarantee Coordinators and prepared National Action Plans covering the period up to 2030. Member States encountering levels of child poverty that exceed the EU average (23.4% - AROPE 2017-2019) are obligated to allocate a minimum of 5% of their European Social Fund (ESF+) resources to the mitigation of child poverty.

## **Legal Framework in Italy, Hungary, Lithuania and Romania – Comparative Perspective**

All project countries recognize the growing need to adapt their care systems in response to demographic changes, notably population ageing and the increased demand for long-term care (LTC). National strategies and frameworks reflect a shared commitment to enhancing the accessibility, quality, and coordination of social and health care services.

Moreover, they all acknowledge the essential role of care professionals, whether formal or informal, and the necessity to invest in their training, working conditions, and long-term sustainability. A strong emphasis is placed across countries on cross-sectoral collaboration (health, education, social protection), though the degree of implementation varies.

Hungary's legal framework is built around two main strategies: the **National Strategy on Ageing** (2009) and the **Strategy on Long-term Care 2030**. The former focuses on equity and the harmonization of social and health services, highlighting issues such as fragmented care, poor inter-sectoral coordination, and duplication of services. It emphasizes workforce challenges, including high workloads, low wages, and low social recognition. The LTC 2030 strategy categorizes long-term care into informal, formal, and institutional types, but lacks a comprehensive and integrative approach, and does not address key issues such as the COVID-

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<sup>20</sup> Council of the European Union (2021). Council Recommendation (EU) 2021/1004 of 14 June 2021 establishing a European Child Guarantee ST/9106/2021/INIT.

19 impact. Despite its strategic ambitions, the framework is weakened by political shifts and limited implementation (Kiss, Koltai, Ludmán, & Vörösmarty-Horváth, 2025).

Italy's framework relies heavily on **national legislation** (Legge 328/2000 and Decreto Legislativo 117/2017) but is strongly shaped by **regional and local policies**, which creates variability in service delivery. The legal structure supports collaboration between public institutions and the third sector, promoting integrated social and health services. However, this decentralization also leads to **territorial disparities**, making access to care uneven across the country. Italy stands out for its advanced legal infrastructure for civil society involvement but struggles with consistency in care quality and access across regions (Michelucci, 2025).

Lithuania presents a cohesive and forward-looking framework centred on several **national programmes** (e.g., Social Inclusion Development Program 2021–2030, Family Policy Strengthening Programme). These initiatives focus on improving care for the elderly, persons with disabilities, and children with special needs. The country invests in social infrastructure (e.g., day centres, home care services) and emphasizes **capacity building of the workforce**. Lithuania's strategic documents incorporate demographic realities and outline concrete targets for the quality and accessibility of services. It is also among the few to integrate family support and poverty reduction into the care policy architecture (Brazienė & Vyšniauskienė, 2025).

Romania has a **rich and detailed legal framework** regulating care services, encompassing both general policies (e.g., Law 292/2011 on Social Assistance, Law 197/2012 on Quality Assurance) and specific strategies targeting elderly persons, children, and people with disabilities. It includes a recent and ambitious **Strategy on Long-Term Care and Active Ageing (2023–2030)** with specific objectives to strengthen the workforce and deinstitutionalize care. A major strength lies in the legal recognition of professional and informal carers. However, Romania still faces significant **challenges in service delivery**, workforce shortages, and underinvestment in community-based solutions, which undermines the practical realization of these legal commitments (Petrescu, Neaguț, & Goraș, 2025).

The legal frameworks in all four countries demonstrate an awareness of the growing care needs and a commitment to improving social and health care integration. However, **Hungary and Romania** face difficulties in operationalizing strategic goals, **Italy** struggles with regional disparities due to decentralization, and **Lithuania** shows relatively better coherence between strategic planning and local implementation. Workforce development, informal care recognition, and equitable access remain central themes across the board.

## 5. Social Care Sector in Europe

The estimation of the number of professionals working in the care sector is challenging due to the ambiguity of the sector's boundaries and the prevalence of undeclared employment.<sup>21</sup> Based on these considerations, it is estimated that approximately 12 million care workers are present in the EU. Of these, 3.1 million are migrants, of whom 2.8 million are female, thus emphasising the importance of considering intersectional inequalities and vulnerabilities.<sup>22</sup>

It is evident that care workers are more likely to be in the bottom third of the wage distribution, more likely to have temporary contracts, and more likely to be undeclared. This suggests that they are deprived of legal guarantees and social protection. The data from the European Labour Authority indicates that 36% of care workers work in undeclared conditions, while this share in the private sector is 8%.<sup>23</sup> The probability of under-declaration of employment is also elevated; however, the availability of data on this phenomenon remains limited. The aforementioned conditions have a disproportionately negative impact on women, as evidenced by the fact that 90% of care workers are female. This phenomenon perpetuates an intractable cycle of disadvantage.<sup>24</sup>

The prevailing challenges within health systems, including but not limited to elevated levels of stress, burnout, absenteeism and industrial action among the health and care workforce, are indicative of a situation that is suboptimal. Such symptoms are manifestations of adverse conditions, including but not limited to staff shortages, low remuneration, suboptimal and hazardous working environments, and an absence of requisite workplace safeguards. A survey conducted between January 2020 and April 2022 revealed that at least 25% of health and care workers reported symptoms consistent with anxiety, depression and burnout.<sup>25</sup> No significant reductions in these symptoms have been observed since 2022.

Eurostat data on employment in social work activities shows an increase at the EU level between 2010 and 2024, from 7,319.3 thousand to 9,606.5 thousand people. This increase

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<sup>21</sup> European Institute for Gender Equality (EIGE) (2021), *ibid*, International Labour Organization (ILO) (2018). *Care work and care jobs for the future of decent work*. [https://www.ilo.org/global/publications/books/WCMS\\_633135/lang-en/index.htm](https://www.ilo.org/global/publications/books/WCMS_633135/lang-en/index.htm)

<sup>22</sup> Thissen, L., & Mach, A. (Eds.). (2023). *The European care strategy: A chance to ensure inclusive care for all?* Foundation for European Progressive Studies & Friedrich-Ebert-Stiftung. Authors: C., Navarra, M., Fernandes, C., Saraceno, A., Gromada, T., Bell, C., Marzo, J. F., Lebrun, B., Helfferich, E., Chierigato, & F., Sanden.

<sup>23</sup> European Labour Authority (2022). *Tackling undeclared work in the personal and household services sector*. [https://www.ela.europa.eu/sites/default/files/2022-03/UDW\\_Study\\_report\\_on\\_PHS\\_2022.pdf](https://www.ela.europa.eu/sites/default/files/2022-03/UDW_Study_report_on_PHS_2022.pdf); European Commission (2017). *An evaluation of the scale of undeclared work in the European Union and its structural determinants*. Publications Office of the European Union. <https://www.ela.europa.eu/sites/default/files/2021-09/KE-06-17-268-EN-N.pdf>

<sup>24</sup> European Institute for Gender Equality (2021). *Gender inequalities in care and consequences for the labour market*. <https://eige.europa.eu/publications-resources/publications/gender-inequalities-care-and-consequences-labour-market>

<sup>25</sup> World Health Organization (2024). *Protecting health and care workers' mental and well-being: Technical Consultation Meeting*. [https://www.who.int/news/item/25-04-2024-202404\\_protecthw\\_mentalhealth](https://www.who.int/news/item/25-04-2024-202404_protecthw_mentalhealth)

occurred in both residential care activities (from 3,526.2 thousand to 4,209.3 thousand people) and social work activities without accommodation (from 3,793.1 thousand to 5,397.2 thousand people) (Table 1).

In Italy, employment in social work activities has increased over the last 14 years in both residential care and social work activities without accommodation, with a slight increase in residential care compared to social work activities without accommodation.

In Lithuania, employment in social work activities increased to 25,400 people in 2024. However, the number of people employed in residential care activities remains higher than the number of people working in social work without accommodation.

In Hungary, the number of social workers increased to 144,400 in 2024. Between 2010 and 2024, the number of employees in non-residential social work increased by more than double, surpassing the number of employees in residential care.

Despite having a high proportion of people at risk of poverty or social exclusion, Romania has one of the lowest numbers of social workers per capita in the EU. In 2024, 75,100 people were employed in social work, with 29,000 working in residential care and 46,100 in non-residential social work. The number of employees in residential care decreased from 35,000 in 2010 to 29,000 in 2024. In contrast, the number of employees in non-residential social care rose from 40.2 thousand to 46.1 thousand over the same period. This suggests that the policy framework is focusing on decentralisation in social services and the development of community services.

**TABLE 1. EMPLOYMENT IN SOCIAL WORK ACTIVITIES (THOUSAND PERSONS)**

Employment in social work activities		2010	2015	2019	2020	2021	2022	2023	2024
<b>EU-27</b>	Total	7,319.3	8,284.6	8,942.0	8,766.5	9,086.3	9,247.3	9,416.6	9,606.5
	Residential care activities	3,526.2	4,028.0	4,376.9	3,940.1	3,986.4	4,123.7	4,171.1	4,209.3
	Social work activities without accommodation	3,793.1	4,256.6	4,565.1	4,826.4	5,099.9	5,123.6	5,245.5	5,397.2
<b>IT</b>	Total	435.6	542.2	580.7	560.8	551.0	567.8	545.9	547.7
	Residential care activities	234.7	297.1	309.2	298.5	287.1	307.4	296.8	300.3
	Social work activities without accommodation	200.9	245.1	271.5	262.3	263.9	260.4	249.1	247.4
<b>LT</b>	Total	:	18.3	23.9	24.4	21	23.2	26.3	25.4
	Residential care activities	8.9	11.7	15.7	13.9	9.5	11.6	15.3	13.5
	Social work activities without accommodation	:	6.6	8.2	10.5	11.5	11.6	11.	11.9
<b>HU</b>	Total	90.9	107.0	127.7	130.7	124.6	116.3	125.6	144.4
	Residential care activities	57.2	57.2	61.5	60.1	60.2	56.6	62.1	69.1

	Social work activities without accommodation	33.7	49.8	66.2	70.6	64.4	59.7	63.5	75.3
<b>RO</b>	Total	75.2	73.3	89.1	85.3	84.0	75.2	68.4	75.1
	Residential care activities	35.	34.3	41.6	36.2	34.9	25.1	28.	29.
	Social work activities without accommodation	40.2	39.	47.5	49.1	49.1	50.1	40.4	46.1

Source: EUROSTAT, 2025, Employment by sex, age and detailed economic activity (from 2008 onwards, NACE Rev. 2 two-digit level) - 1 000, [https://doi.org/10.2908/LFSA\\_EGAN22D](https://doi.org/10.2908/LFSA_EGAN22D)

## The Pact for Skills: a large-scale skills partnership for ageing care

The establishment of a comprehensive skills development partnership for the elderly care sector has been achieved by care providers, social partners and education and training institutions, with the support of the European Commission. The aim of the partnership is twofold: firstly, to improve career opportunities in the sector and raise the quality of care, and secondly, to make the sector more attractive. The partners have committed to providing training to a minimum of 60% of all professionals working in the care sector by 2030, which equates to 3.8 million workers. The training will be centred on digital skills and personalised care. Europe’s ageing society is creating a growing need for carers. The current workforce in the care sector in the EU is estimated to be 6.3 million, and it is projected that by 2050, the demand for care will increase by 1.6 million to maintain current levels of care. In order to address the shortage of labour, it is essential that the sector enhances its capacity to attract and retain professionals. This can be achieved through upgrading skills and creating more opportunities for further training. This initiative will also promote gender equality, as women constitute nearly 90% of the care workforce.

Ultimately, the partnership will promote the exchange of experiences and effective practices with pertinent authorities, educational and health institutions, and other social care actors.<sup>26</sup>

## Social Care Sector in Hungary, Italy, Lithuania, Romania – Comparative Perspective

### *Types of social care services provided*

All four countries offer a dual structure of services: residential (with accommodation) and non-residential (community- or home-based). Services target a wide range of vulnerable groups including elderly people, children, persons with disabilities, and victims of violence or poverty.

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<sup>26</sup> European Commission (2023). *Pact for Skills: launch of a large-scale skills partnership for long-term care*. [https://employment-social-affairs.ec.europa.eu/news/pact-skills-launch-large-scale-skills-partnership-long-term-care-2023-04-20\\_en](https://employment-social-affairs.ec.europa.eu/news/pact-skills-launch-large-scale-skills-partnership-long-term-care-2023-04-20_en)

- **Hungary** provides basic (e.g., home care, catering, outreach work) and specialized services (e.g., long-term residential care, rehabilitation).
- **Italy** offers an integrated system comprising **home care, day centres, nurseries, and residential facilities**, though coverage varies significantly across regions.
- **Lithuania** distinguishes between **general services** (e.g., transport, hygiene, social integration) and **specialized care** (e.g., long-term care, crisis services).
- **Romania** has a rich but administratively fragmented catalogue of over **80 types of social services**, many socio-medical in nature, and classified by location and beneficiary type.

A common thread is the **increased attention to home-based and community services**, driven by cost efficiency and the goal of enabling independent living. However, institutional care remains dominant, especially in **Romania** and **Hungary**.

### ***Types of social care service providers***

All four systems rely on a **mixed model** of public and private provision, though with notable differences in balance and structure.

- **Hungary** and **Romania** emphasize the **public sector**, particularly in residential services, with local authorities playing a key role. In Hungary, **NGOs and faith-based organisations** also provide some services, though private provision remains limited.
- **Italy** features a more diverse landscape, with **municipalities, social cooperatives, NGOs, and volunteers** forming a dynamic third sector that complements public efforts.
- **Lithuania** exhibits a **decentralised system**, where **municipalities** are the main organisers, but services are delivered by **state, local and private institutions**, including parishes and NGOs.

While **Italy** and **Lithuania** benefit from more active third sectors, **Romania's licensing data** shows that private providers still only account for **45%** of licensed services, and mostly in non-residential care.

### ***Employment in the social care sector***

The social care workforce is predominantly **female, aging, and underpaid** across all countries.

- In **Hungary**, **90%** of workers in social care are women, with significant reliance on public employment schemes and declining workforce numbers.
- **Italy** has a large, diversified workforce (over **370,000** in socio-healthcare facilities), with **35%** being social and healthcare workers and strong contributions from volunteers.
- **Lithuania** has more than **17,000** public sector employees and **7,500** private sector employees in social services, with recent **wage increases** aimed at retaining staff.
- Romania's workforce is largely urban-based and female-dominated (87%), with significant concerns around staff aging, burnout, and the lack of workers in rural areas.

All systems struggle with **staff shortages, low attractiveness of the profession**, and a **need to professionalize** the sector and improve working conditions.

### ***Key challenges***

Several shared challenges emerge:

- **Aging workforce and care recipients**, creating growing demand for long-term and specialized services.
- Unequal access, with significant territorial disparities (notably in Italy and Romania) and urban-rural divides (notably in Hungary and Romania).
- **Underfunding**, especially visible in **Italy**, where public spending on social services is below the EU average.
- **Heavy reliance on informal or unpaid caregivers**, especially in **Hungary** and **Italy**, where families play a key welfare role.
- Limited development of non-residential and preventive services, due to rigid institutional models (notably in Romania).

### ***Opportunities for improvement***

Despite challenges, several **positive developments and opportunities** are observed:

- **Growing third sector engagement** in Italy and Lithuania, offering more diversified, person-centred services.
- **Reforms in salary and training** in Lithuania, alongside better data collection for workforce planning.
- **Digitalisation and investments** under national recovery plans (e.g., **Italy's PNRR**) to expand service coverage and equity.
- In Romania, the increase in licensed services (by 65% from 2017–2023) signals a trend toward formalisation and diversification.
- Emphasis on integrated services (social and health) and community-based alternatives is increasingly recognised as both cost-effective and aligned with user needs.

## **6. Training Programmes Dedicated to the Social Care Sector**

Across Europe, the professionalisation of the social care workforce has become increasingly urgent due to demographic pressures, rising care needs, and growing awareness of the emotional and technical demands placed on care professionals. Hungary, Italy, Lithuania, and Romania have each taken important steps toward formalising and improving the training and qualification frameworks for social care workers. Although these countries share a number of common objectives, their approaches differ significantly in terms of policy coherence, institutional responsibility, and practical implementation.

A shared feature across all four countries is the existence of a structured framework for professional development. All acknowledge the complexity of social care and have established some form of continuing education to strengthen both hard and soft skills. The emphasis on

soft skills and well-being is crucial, especially in a context where burnout and compassion fatigue are widespread occupational hazards. A shared concern is the well-being of care workers. Programmes in Italy, Lithuania, and Romania incorporate stress management, emotional resilience, and work-life balance components to mitigate burnout and improve job satisfaction. Furthermore, digital skills development is increasingly emphasized, acknowledging the shift toward e-health tools, case management software, and online services in social care provision.

Training programmes in all countries are also increasingly leveraging modern pedagogical methods. Blended learning, experiential learning, and reflective practices are employed to better engage adult learners and to tailor content to practical needs. Moreover, the alignment of national frameworks with European standards supports transparency and mobility across borders, helping to professionalise the sector and ensure consistency of care.

Despite these shared elements, the national approaches reveal important differences. Hungary has one of the most formalised systems, based on a structured, points-based training model. Workers must accumulate credits across various categories over a four-year cycle, and training is tightly regulated by designated national institutions. While this ensures accountability, it may limit responsiveness to emerging needs.

In contrast, Italy adopts a more decentralised and flexible model. Training opportunities are delivered through a mix of public, private, and third-sector organisations. The Italian model places strong emphasis on lifelong learning and includes cross-cutting skills such as digital literacy, sustainability, and empathy. Italy stands out for its integration of innovation and technology into training, often linked to regional development initiatives and labour market strategies.

Lithuania's system places emphasis on supervision, peer learning, and burnout prevention. It mandates formal qualifications for entering the sector and imposes yearly requirements for continuing education, with specific time allocations. National centres and programmes support skill development, and training content increasingly reflects the need for emotional well-being and ethical care.

Romania, on the other hand, is still in the process of building a coherent national training system. While technician-level qualifications have recently been introduced and NGO-led training programmes offer innovative content, public training provision remains fragmented. Gaps in workforce planning, limited access in rural areas, and a lack of strategic alignment between education and service delivery continue to hamper progress.

These divergences reflect broader institutional and policy differences between the countries. Nonetheless, the shared investment in soft skills, the use of modern learning tools, and the movement toward EU-aligned frameworks suggest an increasing convergence of standards. There is a growing consensus that social care training must be holistic, responsive, and supportive of the unique demands of care work.

Going forward, it will be important for countries like Romania and Lithuania to build stronger, more flexible national strategies that integrate diverse training formats while ensuring equitable access. At the same time, the innovative elements found in the Italian and Lithuanian systems, such as emotional well-being modules and reflective supervision, could inform future reforms across the region. In all contexts, investing in the digital, emotional, and ethical capacities of the workforce will be key to ensuring that care services are sustainable, inclusive, and dignified.

## 7. Best Practices

Across Hungary, Italy, Lithuania, and Romania, social care systems have developed innovative training programmes aimed at strengthening the professional capacities and emotional resilience of their workforce. These initiatives reflect a growing recognition that the sustainability and quality of care depend not only on technical expertise but also on the well-being, motivation, and emotional competence of social care professionals.

In **Hungary**, a strong emphasis is placed on **mental health and personal development**. Certified training programmes such as *Protection of Mental Health for Preventing and Coping with Burnout* and *Self-Improvement for Social Services Professionals* focus on practical tools for stress management, emotional resilience, and assertive communication. Another notable initiative, *Change Management in Helping Professions*, equips professionals to adapt to crises and dynamic work environments, while *Solution in Focus* supports decision-making through coaching and reflective practice. Collectively, these programmes represent a hands-on, experiential approach that prioritises the internal resources and well-being of professionals as a foundation for quality care.

**Italy** takes a complementary approach, embedding innovation and person-centred care into its training philosophy. Italian best practices focus on interprofessional collaboration, continuous learning, and the integration of new technologies and pedagogical methods such as digital platforms and reflective practice. These programmes not only strengthen technical skills but also foster responsiveness to diverse user needs, bridging the gap between training and real-world challenges. What distinguishes the Italian model is its ability to align modern learning tools with core care values, creating a workforce that is not just qualified, but also adaptive and empathetic.

In **Lithuania**, the training system addresses a critical challenge faced across the care sector: **professional burnout**. A variety of training programmes have been developed specifically to prevent emotional exhaustion among social workers. Notable strategies include holistic training, peer supervision, practical learning formats, flexible work policies, and the use of evidence-based techniques such as Cognitive Behavioural Therapy (CBT). The Vilnius City Social Services Centre's Burnout Prevention Programme exemplifies a well-rounded approach by combining theory with skills-building. These Lithuanian programmes stand out for their

systematic attention to mental health and for incorporating psychological support and flexible working arrangements as integral components of professional training.

In **Romania**, best practices focus on developing **soft skills and emotional competence**, essential for navigating the complex interpersonal dynamics of care work. Training content includes modules on burnout prevention, conflict resolution, emotional intelligence, and mental health awareness. These programmes explore both the psychosocial risks of care work and the protective strategies needed to build resilience, such as relaxation techniques, effective communication, and teamwork. Romania's approach emphasises the development of self-awareness, emotional regulation, and empathetic listening - key elements for creating more humane and effective care environments.

Despite contextual differences, the best practices across these countries share several **common features**: they prioritise **worker well-being**, incorporate **reflective and experiential learning**, and address both **individual and systemic factors** contributing to stress and burnout. At the same time, each country brings unique strengths to the table—Hungary with its personal development focus, Italy through innovation and digital learning, Lithuania via psychological and organisational support, and Romania through its emphasis on emotional intelligence and conflict resolution.

Together, these practices provide a rich source of inspiration for future policy and programme development. They show that training is not just about professional qualification—it is about creating a **resilient, adaptive, and compassionate workforce** that is equipped to meet the growing and diverse demands of long-term social care.

## 8. Recommendations

**Establish national training strategies with local flexibility (especially for Romania and Lithuania).** It is important to develop coherent national training strategies that allow for local adaptation. A mix of centralized standards and local innovation should be encouraged to ensure that both urban and rural areas have access to high-quality, relevant training.

**Invest in digital, emotional, and sustainability skills across countries.** Expand training modules that focus on digital literacy, emotional well-being, and green competencies to equip social care workers for the changing landscape of the care sector. Training programs dedicated to burnout prevention are also essential. Additionally, recognising soft skills (such as communication, empathy, emotional intelligence) as a core component of professional qualification is key to delivering person-centred care.

**Strengthen cross-country learning and best practice sharing.** Facilitate platforms for peer learning and knowledge sharing across countries. Specific national strengths – such as Hungary's structured framework, Italy's focus on innovation, Lithuania's supervision model, and Romania's technician pathways – can serve as valuable resources for improving training systems throughout Europe.



**Support social care workers and promote professionalisation:** Improving working conditions (e.g. fair remuneration, social recognition, work-life balance, manageable workloads) is essential to retaining staff and preventing burnout. Clear job roles and responsibilities must also be defined to reduce confusion and work-related stress and increase job satisfaction.

**Improve data collection and workforce planning:** Data collection systems regarding social care workers, including those providing informal care, are needed to support strategic workforce planning. These data should provide valuable information for the design and continuous adjustment of training programmes, in order to ensure they respond to real workforce needs.

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## 10. Annexes

This report presents a comparative analysis of training programs across several European countries that address the professional development needs of social workers, particularly in the areas of mental health, burnout prevention, emotional regulation, resilience, communication, and innovation. The document draws on more than 25 training programs from Hungary, Italy, Lithuania, Romania, Austria, Germany, and Sweden, selected for their relevance, practical value, and transferability across diverse institutional contexts.

The goal of this report is to identify programs with the highest applicability to everyday practice, especially within public and non-governmental social service environments.

The analysis is based on a qualitative review of each training program using the following evaluation criteria:

- Practical relevance: Utility in everyday social work situations
- Content structure: Balance between theoretical input and applied methodology
- Transferability: Potential for adaptation in other EU countries or institutions
- Duration and accessibility: Feasibility of participation (e.g., short vs. long format, online/ hybrid)
- Thematic focus: Alignment with current challenges in social care practice (e.g., burnout, trauma, digital literacy)

In the area of burnout prevention and mental health support, the most representative training programmes are:

- Protection of Mental Health for Preventing and Coping with Burnout (Hungary)
- Sustainability in Social Work Practice (Sweden)
- Primary Prevention of Burnout in Socio-Health Settings (Italy)

- Burnout Among Social Workers (Romania)
- Manifestation of Professional Burnout and Coping Strategies (Lithuania)
- Burnout Prevention for Managers (Romania)
- Rafforzamento dei Servizi Sociali (Italy)

In the area of stress management and emotional load, the representative programmes are:

- Stress Management in Challenging Client Interactions (Lithuania)
- Managing Emotional Load in Social Work (Lithuania)
- Relax – Calm Down – Gaining New Strength (Austria)
- Intervention and Prevention of Work-Related Stress (Romania)

When it comes to emotional intelligence and communication, the representative programmes are:

- Emotional Intelligence Course (Romania)
- Fact or Fake? – Health Communication Skills (Austria)
- Conflict Management Course (Romania)

Regarding change management and resilience, the representative programmes are:

- Change Management in Helping Professions (Hungary)
- AI in Social Work: Introduction to AI Technology (Germany)
- Sustainability in Social Work (Sweden)

Below is a selection of training programs considered relevant both in the partner countries of the CARES project (Hungary, Italy, Lithuania, Romania) and in other EU countries.

## Best Practice Examples from the EU

<b>Name of the training</b>	Relax – calm down – gaining new strength
<b>Name of the training provider</b>	AK (Arbeiterkammer) Steiermark
<b>Website</b>	<a href="https://stmk.arbeiterkammer.at/beratung/arbeitundrecht/gesundheitsberufe/Fortbildung.html">https://stmk.arbeiterkammer.at/beratung/arbeitundrecht/gesundheitsberufe/Fortbildung.html</a> <a href="https://stmk.arbeiterkammer.at/beratung/arbeitundrecht/gesundheitsberufe/20240610_Programm_Gesundheits_Sozialberufe_2425.pdf">https://stmk.arbeiterkammer.at/beratung/arbeitundrecht/gesundheitsberufe/20240610_Programm_Gesundheits_Sozialberufe_2425.pdf</a>
<b>Country</b>	Austria
<b>Region</b>	Styria
<b>Start Date</b>	11.03.2025, 9-16 online 27.05.2025, 9-16 online (3 other older dates for 2024/2025, 2 of them was attendance)
<b>Sector of activity concerned</b>	Health and social service professionals who are members of the Styrian AK (the Chamber of Labour)
<b>Description</b>	The participants of this training will learn relaxation techniques, physical exercises, body awareness and mindfulness techniques.
<b>Course structure</b>	The course is free for members, but it is restricted to only 2 courses / school year or to 16 training hours 7 hours online via Zoom

<b>Curricula</b>	The many demands and challenges of our daily life often lead to stress and restlessness. The aim of relaxation techniques and health-promoting movement (various relaxation techniques, gentle physical exercises, exercises for body awareness and mindfulness) are to relieve the tensions and stresses of everyday life, to get back in touch with oneself, and to bring body, mind, and soul back into harmony. This course gives time and space for the participants to find inner peace and new strengths, increase their well-being and joy in life.
<b>How this Good Practice could be used/ transferred</b>	This course not only introduces several useful techniques to decrease stress, tensions, and burnout, but it might be a good occasion to become more relaxed and relieved by the end of the training as well; it could have an immediate effect on participants.

<b>Name of the training</b>	<b>„Fact or fake? – Being well-informed in health issues</b>
<b>Name of the training provider</b>	AK (Arbeiterkammer) Steiermark, cooperation with FH JOANNEUM Gesellschaft mbH, INSTITUT Gesundheits- und Tourismusmanagement
<b>Website</b>	<a href="https://stmk.arbeiterkammer.at/beratung/arbeitundrecht/gesundheitsberufe/Fortbildung.html">https://stmk.arbeiterkammer.at/beratung/arbeitundrecht/gesundheitsberufe/Fortbildung.html</a> <a href="https://stmk.arbeiterkammer.at/beratung/arbeitundrecht/gesundheitsberufe/20240610_Programm_Gesundheits_Sozialberufe_2425.pdf">https://stmk.arbeiterkammer.at/beratung/arbeitundrecht/gesundheitsberufe/20240610_Programm_Gesundheits_Sozialberufe_2425.pdf</a>
<b>Country</b>	Austria
<b>Region</b>	Styria
<b>Start Date</b>	10.10.2024, 9-12 (no new start date available for 2024/2025)
<b>Sector of activity concerned</b>	Health and social service professionals who are members of the Styrian AK (the Chamber of Labour)
<b>Description</b>	The aim of this course is to improve digital and communication skills of health and social professionals.
<b>Course structure</b>	Online via Zoom, 3 hours 2 modules The course is free for AK members, but it is restricted to only 2 courses / school year or to 16 training hours
<b>Curricula</b>	Part 1 Information related to health and illnesses reach us via various media, especially the Internet. Most of this information are fake news. In the first section of this course participants will learn how to recognize reliable and helpful information and websites about health on the internet. Part 2 This part focuses on one’s role as a valuable contact person in health and illness related fields. Therefore, it is important to ensure the good quality of conversation situations. In the second part of the course, one will learn how to communicate in an understandable and motivating way in the interests of health in one’s everyday (professional) life. One will learn methods that will help them to ensure that the person they are talking to has correctly understood what they have said.
<b>How this Good Practice could be used/ transferred</b>	This course gives relevant information on digital skills: recognizing fake news, incorrect information which is crucial nowadays for all professions.

<b>Name of the training</b>	<b>Artificial Intelligence in social work: Introduction and basics to AI technology</b>
<b>Name of the training provider</b>	Deutsche Vereinigung für Soziale Arbeit im Gesundheitswesen e.V. (DVSG)
<b>Website</b>	<a href="https://dvsg.org/veranstaltungen/dvsg-veranstaltungskalender/details/kuenstliche-intelligenz-in-der-sozialen-arbeit-einfuehrung/">https://dvsg.org/veranstaltungen/dvsg-veranstaltungskalender/details/kuenstliche-intelligenz-in-der-sozialen-arbeit-einfuehrung/</a>
<b>Country</b>	Germany
<b>Region</b>	Berlin
<b>Start Date</b>	18. February 2025, 14:00 - 15:30
<b>Sector of activity concerned</b>	social work professionals
<b>Description</b>	AI is changing the practice of social work! This short online seminar offers an introduction on the basics of AI and gives an overview to social work professionals on how these innovative tools could contribute to their work. Participants will understand the possibilities, limitations and risks of AI technologies in the context of social work.
<b>Course structure</b>	Online seminar, 1,5 hours
<b>Curricula</b>	No detailed curricula are available; it is only a short seminar
<b>How this Good Practice could be used/ transferred</b>	AI is one of the most important topics related to all fields of professions, it will transform how we work. This course might give a snapshot on up-to-date sector specific knowledge related to AI.

<b>Name of the training</b>	<b>Sustainability in social work practice</b>
<b>Name of the training provider</b>	Marie Cederschiöld University AB
<b>Website</b>	<a href="https://www.mchs.se/uppdraagsutbildning/aktuella-vara-utbildningar/aktuella-uppdraagsutbildning/hallbarhet-i-socialt-arbete.html">https://www.mchs.se/uppdraagsutbildning/aktuella-vara-utbildningar/aktuella-uppdraagsutbildning/hallbarhet-i-socialt-arbete.html</a>
<b>Country</b>	Sweden
<b>Region</b>	Stockholm
<b>Start Date</b>	April 29, 2025
<b>Sector of activity concerned</b>	The training is aimed both at individual employees who want to learn more about how they can take care of themselves at work and at supervisors who want to increase their organization's preparedness to prevent burnout, empathy fatigue and secondary traumatization.
<b>Description</b>	Providing help, support and making a difference for people in difficult life situations is experienced by many as meaningful and rewarding. However, we also know that professions and workplaces within the welfare sector are overrepresented in terms of sick leave due to stress-related ill health. High workload, stress and encounters with people's vulnerability arouse difficult emotions that social workers need strategies to manage. Marie Cederschiöld University offers a three-day training that provides an overview of the current state of knowledge about what in social work creates or increases stress and the importance of self-care, colleagues

	and management for our health and recovery. The training also aims to provide concrete strategies for dealing with stress experiences and preventing ill health, as well as knowledge about how symptoms of stress and burnout can be alleviated when they have already occurred.
<b>Course structure</b>	3 days, online via Zoom, 9:00 a.m.-4:00 p.m. 21 hours total (lectures and group discussions)
<b>Curricula</b>	<ul style="list-style-type: none"> <li>• Stress, powerlessness and inadequacy</li> <li>• Traumatic stress, secondary traumatization</li> <li>• Self-care and recovery</li> <li>• Strategies for supervisors and organizations</li> </ul>
<b>How this Good Practice could be used/ transferred</b>	The course is designed so that participants can integrate theoretical knowledge with their own experiences regarding the various themes covered by the course.

## Best Practice Examples from Hungary

<b>Name of the training</b>	<b>Protection of mental health for preventing and coping with burnout</b>
<b>Name of the training provider</b>	Raabe Klett Oktatási Tanácsadó és Kiadó Kft.
<b>Website</b>	<a href="https://raabe.hu/termek/mentalis-egeszseg-vedelme/">https://raabe.hu/termek/mentalis-egeszseg-vedelme/</a>
<b>Country</b>	Hungary
<b>Region</b>	Budapest
<b>Start Date</b>	17 March 2025
<b>Sector of activity concerned</b>	all institutions and services of the social care sector
<b>Description</b>	The aim of this course is to help workers of the social care sector to explore their mental resources and give them practical guidance. Participants will learn relaxation techniques and stress management techniques.
<b>Course structure</b>	30 hours blended training (20 hours attendance + 10 hours online) 18 credits
<b>Curricula</b>	<ol style="list-style-type: none"> <li>1. The stress <ul style="list-style-type: none"> <li>○ Good and bad stress: Differences of eustress (positive stress) and distress (negative stress)</li> <li>○ The effects and symptoms of acute and chronic stress</li> <li>○ The Yerkes-Dodson Law: Understanding the relationship between performance and stress</li> </ul> </li> <li>2. Workplace stress in the social care sector <ul style="list-style-type: none"> <li>○ Appearance of stress in workplaces, especially in social care sector</li> <li>○ Cause of stress in workplaces: working environment, tasks and organizational factors</li> <li>○ Actors of the social care sector: Interactions between workers, beneficiaries, and families</li> </ul> </li> <li>3. The burnout <ul style="list-style-type: none"> <li>○ The concepts and symptoms of burnout</li> <li>○ The theories of Freudenberger and Selye: Stages of general adaptation syndrome</li> </ul> </li> </ol>

	<ol style="list-style-type: none"> <li>4. The concepts and elements of mental hygiene <ul style="list-style-type: none"> <li>○ What is mental hygiene and why is it important?</li> <li>○ The stages of prevention: primary, secondary, and tertiary prevention</li> <li>○ Parts of mental hygiene: being in harmony with ourselves and with our environment</li> </ul> </li> <li>5. Transform stress management habits <ul style="list-style-type: none"> <li>○ Deepening of self-awareness and analysis of life situations</li> <li>○ Being aware of our reactions, learning stress management methods</li> </ul> </li> </ol>
<b>How this Good Practice could be used/transferred</b>	The strength of this training is not only introducing the basic concepts and theories related to stress, burnout, and mental hygiene but to give practical guidance and techniques that could be used in everyday life and at work to decrease stress and prevent burnout.

<b>Name of the training</b>	<b>Change management in helping professions</b>
<b>Name of the training provider</b>	Budapest Esély Nonprofit Kft.
<b>Website</b>	<a href="https://pestesely.hu/szocialis-tovabbkepzes">https://pestesely.hu/szocialis-tovabbkepzes</a>
<b>Country</b>	Hungary
<b>Region</b>	Budapest
<b>Start Date</b>	25 February 2025 or 25 March, 2025 or 6 May 2025
<b>Sector of activity concerned</b>	Social services professionals (for institutional, municipal or NGO employers) People working in institutions, NGOs, offices, municipalities in customer service Others working with people, regardless of sector or job title
<b>Description</b>	The aim of this course is to improve the change management skills and the resilience of social care workers and workers in helping professions.
<b>Course structure</b>	25 hours attendance, 3 consecutive days (all practice, no theoretical part) 32 credits
<b>Curricula</b>	<p>Introduction, ice breaking, preparation, team cohesion (1 h)</p> <p>The concept of change, its effects and how to cope with them (3h)</p> <ul style="list-style-type: none"> <li>• The types of change: unexpected, internal/external change</li> <li>• Relevant and most common changes related to helping professions</li> </ul> <p>Preparing for change – is it possible?</p> <ul style="list-style-type: none"> <li>• Unexpected incidents and their impact on the helping attitude</li> <li>• Crisis vs change</li> </ul> <p>Personal boundaries and resilience (5h)</p> <ul style="list-style-type: none"> <li>• Change as a process</li> <li>• Conflicts caused by change</li> <li>• Setting the boundaries of the helping attitude under the impact of conflict/confrontation caused by change; protecting the integrity of the facilitator and the facilitation process</li> <li>• Defining safety points – for helpers’ own stability</li> <li>• Resilience</li> </ul> <p>Crisis management I. (3h)</p>

	<ul style="list-style-type: none"> <li>Identifying and measuring the negative effects of change</li> <li>Reducing risks and identifying their scope</li> </ul> <p>Crisis management II. (3h)</p> <ul style="list-style-type: none"> <li>Social services professionals as mediators</li> <li>Creating a solution-focused toolkit</li> <li>Crisis communication in the client-facilitator relationship</li> </ul> <p>Crisis management III. (4h)</p> <ul style="list-style-type: none"> <li>Coherence and self-compassion</li> <li>The elements of health and harmony, and its implementation to everyday life</li> <li>Identifying and exploring internal and external resources</li> </ul> <p>Implementation for real situations (3h)</p> <p>Using Covid-19 pandemic as a model: Participants look for direct connections between the pandemic and the knowledge gained. Exploring best practices under the guidance of the trainer for conscious application in the present and future.</p> <p>Evaluation, conclusion (1h)</p>
<b>How this Good Practice could be used/ transferred</b>	The knowledge on change and crisis management could improve resilience and mitigate burnout. Like the other courses in the best practice section, it also contains a 3 hour-long section to implement the new knowledge and tools.

## Best Practice Examples from Italy

<b>Name of the training</b>	<b>Prevenzione primaria del burn-out nei contesti di lavoro assistenziale socio-sanitari</b>
<b>Name of the training provider</b>	Agenzia DBSI
<b>Website</b>	<a href="https://www.agenziadbsi.it/courses/prevenzione-primaria-del-burn-out-nei-contesti-di-lavoro-assistenziale-socio-sanitari/">https://www.agenziadbsi.it/courses/prevenzione-primaria-del-burn-out-nei-contesti-di-lavoro-assistenziale-socio-sanitari/</a>
<b>Country</b>	Italy
<b>Region</b>	Lombardia
<b>Sector of activity concerned</b>	Burnout Prevention
<b>Description</b>	<p>Social care sector workers risking Burnout. This training is designed for healthcare and social workers at risk of burnout. The training focuses on:</p> <ul style="list-style-type: none"> <li>Burnout prevention</li> <li>Early recognition of emotional and behavioural reactions</li> <li>Strategies for primary and secondary prevention</li> </ul>
<b>Course structure</b>	<p>The training consists of:</p> <ul style="list-style-type: none"> <li>Risk factor mapping</li> <li>Critical analysis of operational methods</li> <li>Informative and classroom training sessions</li> <li>Guided focus group discussions</li> <li>Experiential sessions for case analysis and sharing experiences</li> </ul> <p>Total Duration: 30 hours</p>
<b>Curricula</b>	<ul style="list-style-type: none"> <li>Burnout prevention</li> <li>Early recognition of emotional and behavioural reactions</li> <li>Strategies for primary and secondary prevention</li> </ul>

<b>How this Good Practice could be used/transferred</b>	<p>Integration into corporate training plans: Social and healthcare organizations can make this training mandatory to prevent burnout among staff.</p> <p>Monitoring employee well-being: Implement periodic stress assessment tools and organize training and strategies.</p> <p>Psychological support for staff: Establish peer support and supervision groups to share experiences and develop stress management techniques.</p>
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<b>Name of the training</b>	<b>Gestione degli aspetti emotivi e prevenzione del burnout</b>
<b>Name of the training provider</b>	IFOA
<b>Website</b>	<a href="https://www.ifo.it/corsi/azi-cisurezza-corsi-di-lavoro-di-corso-gestione-degli-aspetti-emotivi-e-prevenzione-del-burnout/">https://www.ifo.it/corsi/azi-cisurezza-corsi-di-lavoro-di-corso-gestione-degli-aspetti-emotivi-e-prevenzione-del-burnout/</a>
<b>Country</b>	Italy
<b>Region</b>	Emilia - Romagna
<b>Start Date</b>	2025
<b>Sector of activity concerned</b>	Burnout Prevention
<b>Description</b>	<p>This training program is aimed at professionals working in the personal care sector, particularly in healthcare and social assistance. The training focuses on:</p> <ul style="list-style-type: none"> <li>• Identifying the causes of burnout</li> <li>• Developing communication and relational skills</li> <li>• Stress management and well-being promotion</li> </ul>
<b>Course structure</b>	<p>The training consists of:</p> <ul style="list-style-type: none"> <li>• 21 hours of instruction via videoconference</li> <li>• Integrated teaching methodologies, combining theoretical content with practical examples</li> <li>• Sessions on time management</li> <li>• Techniques for effective communication</li> <li>• Strategies for workload monitoring</li> </ul>
<b>Curricula</b>	<ul style="list-style-type: none"> <li>• Causes of burnout</li> <li>• Development of communication and relational skills</li> <li>• Stress management and well-being promotion</li> </ul>
<b>How this Good Practice could be used/transferred</b>	<p>Continuous training for social care workers: Integrate this course into mandatory refresher programs to improve emotional awareness.</p> <p>Encouraging self-care practices: Promote relaxation and stress management techniques as part of the daily work routine.</p> <p>Creating peer support networks: Implement discussion groups for sharing experiences and practical solutions.</p>

<b>Name of the training</b>	<b>Corso di Operatore Socio Assistenziale (OSA)</b>
<b>Name of the training provider</b>	Deaform
<b>Website</b>	<a href="https://www.deaform.com/corsi-di-formazione/osa/">https://www.deaform.com/corsi-di-formazione/osa/</a>
<b>Country</b>	Italy
<b>Region</b>	Campania
<b>Start Date</b>	2025

<b>Sector of activity concerned</b>	Burnout Prevention
<b>Description</b>	<ul style="list-style-type: none"> <li>• Social care sector assistants</li> <li>• Personal care and assistance</li> <li>• Health support</li> <li>• Family support for the assisted individual</li> <li>• Promotion of psychological and relational well-being</li> </ul>
<b>Course structure</b>	<p>The training consists of:</p> <ul style="list-style-type: none"> <li>• 300 hours of training</li> <li>• 210 hours of distance learning</li> <li>• 90 hours of practical training in a laboratory setting</li> <li>• Comprehensive curriculum covering fundamental care needs</li> </ul>
<b>Curricula</b>	<ul style="list-style-type: none"> <li>• Personal care and assistance</li> <li>• Relational skills development</li> <li>• Management of the living environment of the assisted individual</li> </ul>
<b>How this Good Practice could be used/transferred</b>	<ul style="list-style-type: none"> <li>• Standardization of competencies: Establish this course as a minimum requirement for professionals in the sector, ensuring uniform and high-quality training.</li> <li>• On-the-job training: Combine theoretical instruction with mandatory internships in care facilities.</li> <li>• Use of innovative teaching methodologies: Incorporate digital tools, simulations, and case studies to enhance learning.</li> </ul>

<b>Name of the training</b>	<b>Burnout e stress lavoro correlato nelle professioni sanitarie</b>
<b>Name of the training provider</b>	Agenzia MiVFAP
<b>Website</b>	<a href="https://shop.eapfedarcom.it/prodotto/burnout-e-stress-lavoro-correlato-nelle-professioni-sanitarie/">https://shop.eapfedarcom.it/prodotto/burnout-e-stress-lavoro-correlato-nelle-professioni-sanitarie/</a>
<b>Country</b>	Italy
<b>Region</b>	Nationwide
<b>Start Date</b>	2022
<b>Sector of activity concerned</b>	Burnout Prevention
<b>Description</b>	<p>Healthcare professionals across all disciplines. The training focuses on:</p> <ul style="list-style-type: none"> <li>• Work-related stress factors</li> <li>• Burnout evolution</li> <li>• Prevention and intervention strategies</li> </ul>
<b>Course structure</b>	<p>3-hour Online Distance Learning (FAD) course</p> <p>Three modules covering:</p> <ul style="list-style-type: none"> <li>• Work-related stress factors</li> <li>• Moderating factors between stress and burnout</li> <li>• Prevention and intervention strategies</li> <li>• Theoretical lessons and assessment through quizzes</li> </ul>
<b>Curricula</b>	<ul style="list-style-type: none"> <li>• Causes of work-related stress</li> <li>• Burnout progression</li> <li>• Intervention and prevention techniques</li> </ul>
<b>How this Good Practice could be used/transferred</b>	<ul style="list-style-type: none"> <li>• Implementation of a burnout prevention plan: Adopt strategies to reduce workplace risk factors and improve the balance between professional and personal life.</li> <li>• Engagement of management: Train sector leaders to promote a</li> </ul>

<p>culture of organizational well-being.</p> <ul style="list-style-type: none"> <li>• Course impact assessment: Regularly evaluate program effectiveness through surveys and stress level analysis within teams.</li> </ul>
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<b>Name of the training</b>	<b>Rafforzamento dei servizi sociali e prevenzione del burn-out tra gli operatori sociali</b>
<b>Name of the training provider</b>	Sirio Società Cooperativa Sociale
<b>Website</b>	<a href="https://www.sirio.coop/progetti/welfare-accesso/rafforzamento-dei-servizi-sociali-e-prevenzione-del-fenomeno-del-burn-out-tra-gli-operatori-sociali/">https://www.sirio.coop/progetti/welfare-accesso/rafforzamento-dei-servizi-sociali-e-prevenzione-del-fenomeno-del-burn-out-tra-gli-operatori-sociali/</a>
<b>Country</b>	Italy
<b>Start Date</b>	2023
<b>Sector of activity concerned</b>	Burnout Prevention
<b>Description</b>	Healthcare professionals across all disciplines. The training focuses on: <ul style="list-style-type: none"> <li>• Burnout prevention</li> <li>• Promotion of psychological and physical well-being</li> <li>• Enhancement of the quality of social service</li> </ul>
<b>Course structure</b>	Group, individual, and organizational professional supervision including: <ul style="list-style-type: none"> <li>• Case study discussions</li> <li>• Experience sharing and feedback from expert operators</li> </ul>
<b>Curricula</b>	<ul style="list-style-type: none"> <li>• Burnout prevention</li> <li>• Promotion of psychological and physical well-being</li> <li>• Improvement of the quality of social services</li> </ul>
<b>How this Good Practice could be used/transferred</b>	<ul style="list-style-type: none"> <li>• Supervision and mentoring system: Establish a mentoring system between experienced and new professionals to promote integration and mutual support.</li> <li>• Development of better welfare policies: Include initiatives for employee well-being, such as paid leave for training and enhancement activities.</li> <li>• Evaluation of effectiveness: Collect data on the benefits of these practices and continuously improve training programs.</li> </ul>

## Best Practice Examples from Lithuania

<b>Name of the training</b>	<b>Manifestation of Professional Burnout in Social Work and Coping Strategies</b>
<b>Name of the training provider</b>	Panevėžys Qualification Improvement Center (PKTC)
<b>Website</b>	<a href="https://pktc.lt/mokymo-programos/socialiniu-darbuotoju-ir-kitu-specialistu-mokymai/profesinio-perdegimo-socialiniame-darbe-raiska-ir-iveikos-strategija">https://pktc.lt/mokymo-programos/socialiniu-darbuotoju-ir-kitu-specialistu-mokymai/profesinio-perdegimo-socialiniame-darbe-raiska-ir-iveikos-strategija</a>
<b>Country</b>	Lithuania
<b>Region</b>	Panevėžys County
<b>Start Date</b>	2023-06-01
<b>Sector of activity concerned</b>	Social workers

<b>Description</b>	The program offers training on 'Professional Burnout in Social Work: Expression and Coping Strategies'. The goal is to provide knowledge about professional burnout, its causes, symptoms, and coping strategies. In these trainings, social workers can participate in supervision groups, where they openly share their work-related experiences and challenges. Experienced psychologists facilitate these groups, who help analyze emotional difficulties and provide practical recommendations for stress management and burnout prevention. Supervisions are held periodically, offering social workers the psychological support they need.
<b>Course structure</b>	Eight academic hours and four main themes discussed: Definition of professional burnout. Manifestations and symptoms of professional burnout. The importance of personal boundaries. Strategies for overcoming professional burnout.
<b>Curricula</b>	Definition of professional burnout. Manifestations and symptoms of professional burnout. The importance of personal boundaries. Strategies for overcoming professional burnout.
<b>How this Good Practice could be used/ transferred</b>	This program provides a comprehensive training module that can be easily adapted to various settings. The supervision groups, facilitated by experienced psychologists, offer an opportunity for social workers to share challenges and receive guidance. To transfer this practice, institutions in other countries can introduce similar peer support and supervision groups. These groups can be implemented in in-person and virtual formats, ensuring accessibility for professionals in remote or underserved areas. Additionally, integrating this program into university curricula for social work students could prepare future professionals with coping strategies from the outset of their careers.

<b>Name of the training</b>	<b>Burnout Syndrome Prevention in Social Workers' Professional Activities</b>
<b>Name of the training provider</b>	Social Innovation Studio
<b>Website</b>	<a href="https://www.sistudija.lt/mokymu-programos/degti-neperdegant/">https://www.sistudija.lt/mokymu-programos/degti-neperdegant/</a>
<b>Country</b>	Lithuania
<b>Region</b>	
<b>Start Date</b>	2013
<b>Sector of activity concerned</b>	Social workers
<b>Description</b>	This program is designed for social workers providing general and specialized services, helping to recognize burnout symptoms and apply preventive measures. What is "Burnout Syndrome Prevention in Social Workers' Professional Activities" and why is it Important? Social work is closely related to psychology. Continuous interaction with vulnerable groups (people with disabilities, individuals with addictions, and socially marginalized persons) requires strong psychological preparedness, self-awareness, and resilience. Unfortunately, these essential components are often lacking. This program aims to familiarize social workers with

	<p>the risks associated with their challenging profession and help them learn how to care for themselves while caring for others.</p> <p>This interactive approach ensures that social workers gain theoretical knowledge and hands-on skills to effectively manage emotional stress and prevent burnout in their professional activities. These training sessions are announced on their website. Sessions are paid for and happen frequently.</p>
<b>Course structure</b>	16 academic hours (8 hours of theory, 8 hours of practice)
<b>Curricula</b>	<p>The course content:</p> <p>1) Signs, causes, and consequences of burnout syndrome. 2) Key personality types based on psychoanalytic theory. 3) Characteristics and negative aspects of depressive personality traits. 4) The principles of active listening and its benefits in social work.</p> <p>Training Methodology: The program consists of theoretical and practical components. The training is structured around practical tasks that gradually uncover the learning objectives and key topics. Many tasks are addressed through discussions conducted in two formats: 1) Dialogues between participants and 2) Group discussions involving all seminar attendees.</p>
<b>How this Good Practice could be used/ transferred</b>	<p>This program's emphasis on recognizing burnout symptoms and providing preventive strategies makes it a strong candidate for transferability. The interactive nature of the training, which includes practical tasks and group discussions, can be implemented in various professional fields beyond social work, such as healthcare and education. This program can reach a broader audience by incorporating online discussion forums and e-learning modules. Moreover, partnerships with local governments and NGOs could help fund and promote similar programs, ensuring widespread adoption and sustainability.</p>

<b>Name of the training</b>	<b>Professional Burnout Syndrome in Social Work</b>
<b>Name of the training provider</b>	Klaipėda State College Training and Service Center
<b>Website</b>	<a href="https://kvkmokymai.lt/socialiniu-paslaugu-teikejams/">https://kvkmokymai.lt/socialiniu-paslaugu-teikejams/</a>
<b>Country</b>	Lithuania
<b>Region</b>	Klaipėda County
<b>Sector of activity concerned</b>	Social workers
<b>Description</b>	<p>This program focuses on identifying the causes and factors of burnout syndrome and developing stress management skills to reduce burnout risk. Certain social institutions in Klaipėda, such as the Klaipėda Social Services Center, are implementing flexible work schedules for social workers to reduce work-related stress. This initiative allows employees to balance their work and personal lives, ensuring they do not experience emotional exhaustion. Workers also can choose their working hours based on their personal circumstances.</p>
<b>Course structure</b>	8 academic hours



## Curricula

**Case Management, Teamwork, and Communication Skills Development in Social Work** In today's society, one of the key features of a modern organization is teamwork. Social work is no exception. Teams are formed to achieve various goals, but their primary significance lies in evidence showing that teams achieve better results than individual employees.

### Professional Burnout Syndrome in Social Work

For social service providers, it is crucial to properly assess stress-inducing situations and identify their strengths and weaknesses when working with various at-risk groups. The training program "Professional Burnout Syndrome in Social Work" helps address this by revealing the causes and factors of burnout, developing stress management skills that reduce the risk of professional burnout in social work.

### Coping Strategies for the Grieving Process in Supporting Bereaved Individuals

In the face of loss, one side's process ends forever, while the other is left with emptiness, often described as grief. The training aims to ease the grieving process for those experiencing loss by individually assessing the situation of emptiness. The program covers various types of loss, including the death of a loved one, divorce, child removal from a family, separation from a close person, and the emigration of a loved one.

### Social Work in Palliative Care

Understanding how to work with terminally ill individuals is essential for organizations and professionals providing social and healthcare services. Supporting a suffering individual requires specific knowledge and skills that need continuous improvement. Lecturers and practitioners from Klaipėda State College provide guidance on ensuring the best quality of life for individuals facing an incurable illness and their families.

### Stress Management in Challenging Client Interactions

Social work is an emotionally demanding profession. Social workers regularly interact with a diverse range of people—calm, irritated, or even angry. This makes it crucial for professionals providing social assistance to improve their communication skills constantly. This is addressed in the training "Stress Management in Challenging Client Interactions".

### Conflict Resolution and Decision-Making in Social Work

Conflict situations are an inevitable part of community life, affecting people of different ages, financial conditions, and social statuses. This training provides knowledge on the causes, signs, recognition methods, and management strategies for conflicts.

### Emotional Intelligence in Social Work

By delving into the social context of a client's situation, social workers often navigate the unconscious dynamics of relationships. Therefore, continuous social and emotional education for professionals is essential.

	This process helps develop the knowledge, attitudes, and skills necessary to recognize and manage emotions effectively.
<b>How this Good Practice could be used/ transferred</b>	One of the unique aspects of this program is its holistic approach to burnout prevention, which includes flexible work schedules for social workers. This practice could be transferred to other regions where work-related stress is a major issue. Employers could introduce policies that allow social workers to tailor their work schedules according to their personal needs, reducing emotional exhaustion. Additionally, modules focusing on stress management, teamwork, conflict resolution, and emotional intelligence could be integrated into professional development programs in various social service settings.

<b>Name of the training</b>	<b>Managing Emotional Load in Social Work</b>
<b>Name of the training provider</b>	Kolping College
<b>Website</b>	<a href="https://www.kolpingokolegija.lt/artimiausi-mokymai/">https://www.kolpingokolegija.lt/artimiausi-mokymai/</a>
<b>Country</b>	Lithuania
<b>Sector of activity concerned</b>	Social workers
<b>Description</b>	<p>Kolping College organizes sessions for social service providers, including burnout prevention topics. With constant fatigue, stress, and critical situations, over time, the body becomes less resilient, and such an employee is at risk of burnout syndrome sooner or later. Social workers experience significant emotional strain in their daily work, making the ability to manage negative emotions essential for every worker.</p> <p>During the seminar, social workers will be introduced to Cognitive Behavioural Therapy (CBT), a globally recognized approach, and will learn to apply therapeutic techniques that help manage emotional tension both at work and in daily life.</p>
<b>Course structure</b>	<p>8 academic hours.</p> <p>Participants of the seminar will receive certificates of professional development.</p>
<b>Curricula</b>	During the seminar, social workers will become familiar with globally recognized cognitive-behavioural therapy and learn to apply therapeutic techniques that help manage emotional tension both at work and in everyday life.
<b>How this Good Practice could be used/ Transferred</b>	This program introduces Cognitive Behavioural Therapy (CBT) techniques to help social workers manage emotional stress. Given the global recognition of CBT, this approach can be easily transferred and adapted to different professional settings. Institutions can develop online courses and certification programs for professionals in high-stress jobs, equipping them with the necessary skills to handle emotional challenges. Additionally, workplace mental health initiatives can incorporate elements from this program, fostering a culture of well-being and resilience among employees.

## Best Practice Examples from Romania

Name of the training	Burnout prevention for staff in social care and local authorities
Name of the training provider	Social Alert
Website	<a href="https://socialalert.ro/oferta-cursuri/">https://socialalert.ro/oferta-cursuri/</a>
Country	Romania
Sector of activity concerned	Social care
Description	For staff from: <ul style="list-style-type: none"> <li>• Public social services</li> <li>• UATs</li> <li>• County Councils</li> <li>• Other institutions</li> </ul>
Course structure	Practical modules; Duration: 3 days/24 hours. Format: in-person
Curricula	- The impact of stress in our lives; eustress and distress, - Stressors, - Ways to manage stress in both professional and personal life, - What burnout is (and is not), causes of burnout, consequences, - How to recognize the syndrome? How to say <i>stop</i> ? How to approach recovery? How to avoid reactivation?
How this Good Practice could be used/ transferred	This course can be integrated into the CARES project to support its objectives, such as creating a healthier working environment and preventing burnout among social sector workers. The practical modules offer transferable solutions to other social organizations across Europe and are relevant for project partners in Romania, Italy, Hungary, and Lithuania.

Name of the training	Intervention and prevention of work-related stress and burnout
Name of the training provider	Social Alert
Website	<a href="https://socialalert.ro/oferta-cursuri/">https://socialalert.ro/oferta-cursuri/</a>
Country	Romania
Sector of activity concerned	Social care
Description	A programme that offers practical solutions for identifying stress, managing it, and preventing burnout among staff in social welfare directorates and other institutions.
Course structure	Practical modules; Duration: 3 days/24 hours; Format: in-person
Curricula	The impact of stress in our lives; stress-inducing factors; ways to manage stress in professional and personal life; protective and risk factors; work-life balance; what burnout is and is not; preventing, recognizing and managing recovery; avoiding burnout reactivation.
How this Good Practice could be used/ transferred	This course can be integrated into the CARES project to support social workers in Romania, Italy, Hungary, and Lithuania, offering transferable modules on preventing burnout and creating a healthier working

environment. The information can be included in further training to reduce stress and improve well-being at work.

<b>Name of the training</b>	<b>Intervention and burnout prevention for managers</b>
<b>Name of the training provider</b>	Social Alert
<b>Website</b>	<a href="https://socialalert.ro/oferta-cursuri/">https://socialalert.ro/oferta-cursuri/</a>
<b>Country</b>	Romania
<b>Sector of activity concerned</b>	Social care
<b>Description</b>	A programme dedicated to managers to identify and manage work-related stress, support work-life balance, and prevent burnout at individual, team, and managerial levels.
<b>Course structure</b>	Practical modules; Duration: 3 days/24 hours; Format: in-person
<b>Curricula</b>	The impact of stress in our lives; stress-inducing factors; stress management methods; protective and risk factors; work-life balance; identifying and assessing signs of burnout at individual, team and managerial levels; supervision, coaching, team building; relaxation methods for team effectiveness.
<b>How this Good Practice could be used/ transferred</b>	This course can be used in the CARES project to develop managerial skills for preventing burnout among social sector teams. The supervision and coaching techniques included can improve the performance and well-being of teams and are transferable to organizations in all project partner countries.

<b>Name of the training</b>	<b>Burn-out among social workers</b>
<b>Name of the training provider</b>	Foundation for the Development of Social Services
<b>Website</b>	<a href="https://www.fdss.ro/fenomenul-de-burn-out-in-randul-asistentilor-sociali">https://www.fdss.ro/fenomenul-de-burn-out-in-randul-asistentilor-sociali</a>
<b>Country</b>	Romania
<b>Region</b>	Bucharest
<b>Start Date</b>	N.A.
<b>Sector of activity concerned</b>	Social care
<b>Description</b>	A workshop dedicated to understanding the phenomenon of burnout among social workers, raising awareness of its psycho-emotional effects, and developing techniques for managing stress and emotions.
<b>Course structure</b>	Workshop; Duration: 1 day; Format: in-person
<b>Curricula</b>	Stress management techniques; managing emotions; making communication more effective; problem-solving strategies; relaxation techniques; interventions for restoring and supporting recovery in social workers affected by burnout.
<b>How this Good Practice could be used/ transferred</b>	This workshop can be integrated into the CARES project to support the development of networking among social care professionals. Through the proposed techniques and strategies, it can help to reduce burnout and improve team performance.

<b>Name of the training</b>	<b>Conflict Management Course</b>
<b>Name of the training provider</b>	Impact Training
<b>Website</b>	<a href="https://impacttraining.ro/curs-managementul-conflictelor/">https://impacttraining.ro/curs-managementul-conflictelor/</a>
<b>Country</b>	Romania
<b>Sector of activity concerned</b>	Personal and professional development
<b>Description</b>	The course aims to equip participants with the skills to manage conflicts constructively, understand the root causes of conflicts, and implement strategies for resolution. It is targeted at professionals who want to improve collaboration in their teams or organisations.
<b>Course structure</b>	Includes theoretical sessions, case studies, and interactive activities, delivered over a duration of 1-2 days, either in-person or online.
<b>Curricula</b>	<p>Module 1. Introduction</p> <ul style="list-style-type: none"> <li>Defining conflict and different types of conflict.</li> </ul> <p>Understanding Conflict</p> <ul style="list-style-type: none"> <li>Identifying the causes and underlying factors of conflict</li> <li>Exploring the different stages of a conflict and the reactions involved.</li> </ul> <p>Module 3. Conflict Management Styles</p> <ul style="list-style-type: none"> <li>Introducing different approaches and styles of conflict management such as avoidance, competition, compromise, collaboration and accommodation</li> <li>Analysing the advantages and disadvantages of each style and identifying when each style is appropriate.</li> </ul> <p>Module 4. Techniques and Strategies for Conflict Management</p> <ul style="list-style-type: none"> <li>Effective communication and active listening in conflict management</li> <li>Negotiating and resolving conflicts by identifying common interests and win-win solutions</li> <li>The ability to mediate and facilitate dialogue between parties in conflict.</li> </ul> <p>Module 5. Conflict Management in the Organisational Environment</p> <ul style="list-style-type: none"> <li>Identifying and preventing conflict in the workplace</li> <li>The role of leadership in managing conflict and promoting a culture of dialogue and cooperation</li> </ul> <p>Managing Interpersonal Conflicts</p> <ul style="list-style-type: none"> <li>Conflict management techniques in interpersonal relationships, including communication and empathy skills</li> <li>Strategies for overcoming conflict and building relationships of trust and respect.</li> </ul> <p>Course Closure and Recap</p> <ul style="list-style-type: none"> <li>Feedback and conclusions</li> <li>Creating a personalised action plan for applying and improving conflict management skills in personal and professional environments.</li> </ul> <p>The practical part includes:</p> <ul style="list-style-type: none"> <li>Role-playing and simulated conflict situations to practice conflict management skills</li> </ul>

	- Case analysis for applied understanding of concepts and practical skills development.
<b>How this Good Practice could be used/ transferred</b>	Its content and strategies can be easily adapted to different organisational settings to enhance team productivity and foster a positive work environment.

<b>Name of the training</b>	<b>Emotional Intelligence Course</b>
<b>Name of the training provider</b>	Impact Training
<b>Website</b>	<a href="https://impacttraining.ro/curs-inteligenta-emotionala/">https://impacttraining.ro/curs-inteligenta-emotionala/</a>
<b>Country</b>	Romania
<b>Sector of activity concerned</b>	Personal and professional development
<b>Description</b>	The training focuses on understanding emotional intelligence, managing emotions effectively, building meaningful relationships, and improving communication skills. It is designed for individuals looking to enhance their personal and professional success.
<b>Course structure</b>	A 2-day programme, delivered in person or online, with interactive activities and practical exercises.
<b>Curriculum</b>	<p>Session 1: Introduction to Emotional Intelligence</p> <ul style="list-style-type: none"> <li>Defining the concept of emotional intelligence</li> <li>The importance of emotional intelligence in personal and professional life.</li> </ul> <p>Session 2: Components of Emotional Intelligence</p> <ul style="list-style-type: none"> <li>Self-awareness: understanding and recognizing your own emotions</li> <li>Self-regulation: managing and controlling emotions</li> <li>Motivation: setting and maintaining personal goals and objectives</li> <li>Empathy: the ability to understand and feel the emotions of others</li> <li>Social skills: effective and constructive interaction with others.</li> </ul> <p>Session 3: Developing Self-Awareness</p> <ul style="list-style-type: none"> <li>Techniques for self-observation and reflection on your own emotions</li> <li>Identifying and understanding factors that influence your emotional state</li> <li>Practical exercises to increase emotional awareness.</li> </ul> <p>Session 4: Managing Emotions</p> <ul style="list-style-type: none"> <li>Techniques and strategies for managing and regulating negative emotions</li> <li>Building emotional resilience and adaptability to stress</li> <li>Relaxation and mindfulness exercises to manage stress and anxiety</li> </ul> <p>Session 5: Motivation and Performance Improvement</p> <ul style="list-style-type: none"> <li>Understanding motivational factors and how to maintain personal motivation</li> <li>Setting and achieving personal and professional goals</li> <li>How to manage failure and maintain focus and determination.</li> </ul> <p>Session 6: Developing Empathy and Social Skills</p>



	<ul style="list-style-type: none"><li>• The importance of empathy in interpersonal and workplace relationships</li><li>• Understanding and responding to the emotions of others</li><li>• Developing effective communication and conflict resolution skills.</li></ul> <p>Session 7: Applying Emotional Intelligence in Professional Life</p> <ul style="list-style-type: none"><li>• How to use emotional intelligence to become an effective and respected leader</li><li>• Applying emotional intelligence in negotiation and decision-making in the workplace</li><li>• How to manage and motivate your team using the principles of emotional intelligence.</li></ul> <p>Session 8: Consolidation and Planning</p> <ul style="list-style-type: none"><li>• Review of the main concepts and techniques learned</li><li>• Creation of a personalized emotional intelligence development plan</li><li>• Identification of additional resources and next steps for further growth in this area.</li></ul>
<b>How this Good Practice could be used/ transferred</b>	This training can be adapted to various professional settings to enhance interpersonal skills and collaboration. It provides a solid foundation for improving emotional intelligence, benefiting individuals and teams in achieving organisational goals.



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PRIMĂRIA SECTORULUI 6  
DIRECȚIA GENERALĂ DE ASISTENȚĂ  
SOCIALĂ ȘI PROTECȚIA COPILULUI



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