

A. COVER PAGE

- 1. Fund Name:** Joint SDG Fund
- 2. MPTFO Project Reference Number**
- 3. Joint programme title:** Improving Municipal Social Protection Service Delivery
- 4. Short title:** Improving Municipal Social Protection Service Delivery
Improving Municipal Social Protection Service Delivery
- 5. Country and region:** Albania
- 6. Resident Coordinator:** Brian Williams (brian.williams@one.un.org)
- 7. UN Joint programme focal point** Fioralba Shkodra, Head of Resident Coordinator
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9. Short description:

“Improving Municipal Social Protection Service Delivery” programme focuses on catalyzing a step-change in the quantity and quality of delivery at local (municipal) level of integrated social care, as part of an effective integrated social protection system. It builds upon the vast experience of the UN in addressing social inclusion, protection and the needs of the most vulnerable groups including Roma, refugees and migrants, persons with disabilities, vulnerable children, elderly, rural women, and women at risk of GBV. The programme supports the implementation of the newly shaped vision of the social sector in Albania, in line with Sustainable Development Goals (SDGs) and the country’s aspirations towards European Union (EU) integration. The programme avails of technical expertise and know-how of UN agencies aiming at allowing for greater impact and outreach by focusing on the municipal level and its linkage to the national level.

The programme’s goal – contribute to support Albanian Government translate the policy intent into proper local actions so that men, women, girls and boys living in poverty, or vulnerable situation have access to integrated, quality social care services- supports the vision of an overall inclusive Albania. The joint programme supports Albania’s progress in view of achieving SDGs - being directly related to social protection/inclusion - especially SDGs 1-5 (no poverty, zero hunger, good health and well-being, quality education, gender equality, 10 (reduced inequalities), and 16 (peace, justice and strong institutions).

In order to achieve the goal, the programme focuses on the following outcome: All women, men, girls and boys, especially those from marginalized and vulnerable groups, are exercising their entitlements to equitable quality services, in line with human rights; and more effective and efficient investments in human and financial resources are being made at central and local levels to ensure social inclusion and cohesion.

The programme’s target groups who indirectly and directly benefit from improved social care services, are the marginalized populations of Albania, with persons with disabilities often being the most vulnerable, along with Roma and Egyptians as well as children, women, migrant, refugees, long term unemployed etc. The improvement of their social protection is supported by interventions at macro level (central government authorities and national services), at meso level (municipalities and civil society organizations), and at micro level, actively involving the project’s target groups into the project’s implementation. The project covers six selected municipalities¹. The “Improving Municipal Social Protection Service Delivery”

¹ Following a preliminary local assessment, the municipalities of Tirana, Kamza, Rogozhina Devoll, Progradec and Puka are identified as potential targeted LGUs for the Joint programme. The final selection will happen during the programme inception phase in consultation with MHSP and respective municipalities.

programme is implemented through the modalities of the Delivering as One (DaO) mechanism, under the Programme of Cooperation for Sustainable Development 2017-2021, with the joint participation of UN agencies, including UNDP, UNICEF, UN Women, UNFPA, UNHCR, WHO and ILO, and in close partnership with relevant governmental bodies at the central and local levels. UNDP is the lead UN agency for the overall implementation and coordination of the Programme.

10. Keywords: Integrated Social Protection, Vulnerable communities

11. Overview of budget

Joint SDG Fund contribution	USD \$1,500,000
Co-funding 1 - to be resourced from regular or non-core resources of participating UN agencies to the proposed Joint Programme	USD \$400,000
Co-funding 2 - to be resourced from the Albania SDG Acceleration Fund (GoA contribution is currently undergoing government approval procedures)	USD \$100,000
TOTAL	USD \$ 2,000,000

12. Timeframe:

Start date	End date	Duration (in months)
1 January 2020	31 January 2022	24 months

The programme is planned for 24 months, leaving space for preparatory and exit phases. Preparatory phase can start as early as January 2020. The programme is very timely, given the ongoing effort of Ministry of Health and Social Protection to review the national social protection action plan 2015–2020 to extend it to 2022. The stakeholders’ consultation advised a sequencing that commenced with municipal actions to generate knowledge that fosters national dialogue. The municipal actions being the core of this intervention will be implemented during January 2020 – January 2022. Getting engaged with services on the ground will enable the programme to distill the best working practices and convey these immediately to the desks of policy-makers for scaling up national measures that will ultimately result into reforming social protection system and better links between social protection and health. Knowledge generation activities around financing and costing will happen in the first 6 months, while UN agencies will make sure that the advocacy and dissemination of knowledge and good practice will be continuous. With a two-way interface established between the local and national actions, we believe that we will be able to produce both short- and longer-term results

13. Gender Marker:

The Project’s overall Gender Marker Score is 2.

14. Target groups (including groups left behind or at risk of being left behind)

List of marginalized and vulnerable groups	Direct influence	Indirect influence
Women	x	
Children	x	
Girls	x	
Youth	x	
Persons with disabilities, including children with disabilities	x	
Older persons	x	
Minorities (incl. ethnic, religious, linguistic...)	x	

Human rights defenders (incl. NGOs, journalists, union leaders, whistleblowers...)		x
Migrants	x	
Refugees & asylum seekers	x	
LGBTI persons (sexual orientation and gender identity)	x	
Victims of (slavery, torture, trafficking, sexual exploitation and abuse...)	x	
Other groups: women at risk/victims of violence, isolated/poor rural women	x	

15. Human Rights Mechanisms related to the Joint Programme

The joint programme links to several recommendations provided by the following Human Rights mechanisms. Explicit HR details are included in the other relevant sections of this project document.

UPR third cycle (2019)

Committee on Migrant workers (Concluding observations (2019) CMW/C/ALB/CO/2)

Committee on the Elimination of Racial Discrimination (Concluding observations (2019)

CERD/C/ALB/CO/9-12)

Committee on the Elimination of Discrimination against Women (Concluding observations (2016) CEDAW/C/ALB/CO/4)

CoE-GREVIO (24 November 2017) CRC (7 December 2012)

Committee on Economic, Social and Cultural Rights (Concluding observations (2013) E/C.12/ALB/CO/2-3)

16. PUNO and Partners:

16.1 PUNO

UNDP will be the lead UN agency for the overall implementation and coordination of the joint programme, with significant implementation support from UNICEF, WHO, and UN Women. Other agencies to provide expertise (not direct recipients) are UNFPA, ILO and UNHCR - with important impact on the success of the programme.

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SIGNATURE PAGE

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Participating UN Organization (lead/convening) UNDP <i>Ms. Limya Eltayeb, UNDP Resident Representative</i> <i>Date</i> <i>Signature and seal</i>	
Participating UNICEF <i>Mr. Roberto de Bernardi, UNICEF Representative</i> <i>Date</i> <i>Signature and seal</i>	
Participating UN Organization UN Women <i>Mr. Michele Ribotta Michele, UN Women Representative</i> <i>Date</i> 5/11/2019 <i>Signature and seal</i>	
Participating UN Organization WHO <i>Mr. Gonzalez Raul, WHO Representative</i> <i>Date</i> <i>Signature and seal</i>	

B. STRATEGIC FRAMEWORK

1. Call for Concept Notes: 1/2019

2. Relevant Joint SDG Fund Outcomes

- **Outcome 1:** Integrated multi-sectoral policies to accelerate SDG achievement implemented with greater scope and scale

3. Overview of the Joint Programme Results

3.1 Outcome

- All women, men, girls and boys, especially those from marginalized and vulnerable groups, are exercising their entitlements to equitable quality services, in line with human rights; and more effective and efficient investments in human and financial resources are being made at central and local levels to ensure social inclusion and cohesion.

3.2 Outputs

- **Output 1.** Integrated social care services, institutional arrangements and coordination mechanisms functional with clear roles and responsibilities at local level in 6 municipalities.
- **Output 2.** Municipal and national institutional capacities strengthened through training and mentoring for the development of social care plans and accessing the Social Fund.
- **Output 3.** Innovative models of integrated social care services piloted, including established local linkages between health and social protection services.
- **Output 4.** Vulnerable communities (disaggregated by gender, ethnicity, disability etc.) are empowered to actively participate in decision making and make institutions accountable.
- **Output 5.** Financing options for extending social protection coverage and benefits developed and assessed at the national and municipality levels.
- **Output 6.** Joint Programme Management

4. SDG Targets directly addressed by the Joint Programme

4.1 List of targets

SDG 1- No poverty

- 1.3 Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable.

SDG 3- Good Health and well-being

- 3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.

- 3.9/3.c Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States.

SDG 5- Gender Equality

- 5.4 Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate

- 5.6 Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and

Development and the Beijing Platform for Action and the outcome documents of their review conferences

5.c Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels (Indicator 5.c.1 Proportion of countries with systems to track and make public allocations for gender equality and women's empowerment)

SDG 10- Reduced inequalities

10.2 By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status.

10.4 Adopt policies, especially fiscal, wage and social protection policies, and progressively achieve greater equality

SDG 16- Peace, justice, and accountable institutions

16.6 Develop effective, accountable and transparent institutions at all levels

4.2 Expected SDG impact

The Joint Programme's intention is to bring about system change in the field of social protection and the provision of social services that gradually ensures the realization of human rights by all. The goal is for Albanian Government to translate policy² intent into proper local actions so that men, women, girls and boys living in poverty, or vulnerable situation have access to integrated, quality social care services. Therefore, the Joint Programme results will directly contribute to accelerate social protection-related SDG targets - by focusing on financing and delivery of integrated services at Municipal level, the new building block of the Albanian administrative structure. This joint programme will both produce quick-wins through direct acceleration of programmes in 6 municipalities and trigger more sustainable scaling-up through demonstration of methods, capacity building and establishing a precedent and momentum for allocation of domestic resources (municipal and national) to social protection as well as a fiscal space analysis to gradually close the financial gap. (*Further details in Section C. Joint Programme Description- 1.3 SDG Targets*)

5. Relevant objective/s from the national SDG framework

The SDGs are integrated within the National Strategy for Development and Integration 2015-2020. Meanwhile, The Prime Minister Office, responsible for coordinating the SDG mainstreaming into the national policy framework, with the support of UN Albania, is currently conducting the mid-term SDG target setting exercise which will feed into the third National Strategy for Development and Integration 2020-2024. The Joint Programme is closely linked with the current NSDI and the below primary national strategies and laws.

- **National Strategy for Development and Integration 2016-2020:** Out of six NSDI priorities, the fourth focuses on "investing in people and social cohesion with objectives related to a modern educational system, a universal and quality health care system, expanded employment opportunities, a stronger social protection system, gender equality and social inclusion".
- **Social Protection Strategy 2015-2020.** It aims at mitigating the impact of poverty for Albanian families, ensuring social protection measures reach those most at risk through i) increased effectiveness and transparency of the Cash Assistance Scheme (NE) to better target and cover poor families and children in need, ii) improving the position of people with disabilities through cash benefits and proper social services, iii) developing social care services through a functional system planning, managing and delivering of integrated social care services at the newly established LGUs. The third policy objective appears for the first time, and it serves as key entry point for this programme. It is established a two phased approach: the country should establish the architecture of the system (policy, legal, administrative instruments) up to 2017 and

² Social protection strategies are solid on paper but need to be activated and be put on a solid financing basis (the Government's policy intent calls for an integrated, and transformative system which needs to be translated to local action but needs resources and solid models). The national Strategy itself relies on donor support, as it already outlines a financial gap.

then go to scale and pilot the system at the decentralized level in the next years with progressive measures until a national coverage.

- **Policy Document on Social Inclusion 2015-2020.** It addresses key social inclusion policy areas in accordance with the established EU conceptual frameworks and statistical standards including the following six domains: 1) poverty reduction and social protection; 2) employment and skills; 3) education and training; 4) health; 5) basic needs; and 6) social participation and human rights. Such policies are directed towards all people and with special regard to vulnerable groups, including Roma and Egyptians.
- **National Health Strategy 2016-2020 (primary care / universal health care).** It envisages financing healthcare with general taxation, implementation of universal health care programmes. It promotes the assumption of individual responsibilities for health care by guaranteeing, regulating and overseeing a transparent and competitive environment of healthcare providers.
- **Law on Social Care Services (2016).** The law approved in December 2016, provides for the first time ever the legal basis for an integrated system of services delivered at decentralized level, services that can be offered by public and non-public service providers to individuals and families in need, according to a nationally defined set of standards which include pre-social care, community-based, residential, family-based, specialized and online services.
- **Law on Inclusion of and Accessibility for Persons with Disabilities (2014).** The law approved in July 2014 is the key legal text, transposing the Convention on the Rights of Persons with Disabilities (CRPD) to Albanian law.

6. Brief overview of the Theory of Change of the Joint programme

6.1 Summary:

The intervention is founded on the principle that an integrated social protection system, which ensures adequate linkages between cash assistance and social care services is key to help households/families find pathways out of poverty and overcome vulnerability and enjoy a level of wellbeing compliant with the international human rights standards and the normative principles of the European Community. It pursues directly one of the three accelerators identified by the Albania MAPS³ report 2018: "the biggest weaknesses in Albania's social protection system may lie not its social assistance or insurance programmes, but in its social care components." The MAPS report further highlights both the need to focus on increased financing and the opportunity created by the establishment of the Social Fund by Government. The programme's main theory of change is that for Municipalities to be able to reach universal social protection, in particular to those most at risk of being left behind in line with human rights instruments, support at municipal level should be made at multiple levels and should include: (i) assisting with institutional arrangements and coordination mechanisms with clear roles; (ii) strengthening institutional capacities through training and mentoring for the development of social care plans and accessing the Social Fund; (iii) piloting innovative models of integrated social care services, including identifying local linkages between health and social protection services; (iv) empowering vulnerable groups to request services from authorities, hold them accountable and establish a culture of mutual decision-making; (v) assisting with an analysis of social protection needs, related costs and related sustainable sources of financing to match the costs.

6.2 List of main ToC assumptions to be monitored:

The main assumptions behind theory of change:

³ http://www.un.org.al/sites/default/files/MAPS_Report_web.pdf, pp. 78

- The most recent reform of increasing benefit levels of cash transfer programmes but targeting a narrower group of beneficiaries is a re-prioritization within the given envelope of social protection spending. These measures are insufficient to address the challenge of increasing social protection to all in need.
- There is sufficient political will to allocate the necessary financial resources to ensure no-one in need of social protection is left behind; the approval of the law on social care services in December 2016 and decentralization of functions to LGUs for planning and delivering social care services have put pressure on the municipalities and have made them aware of the new role. Vertical dialogue between Central and Local Government has already been established with the signing of a Social Pact in March 2017, which was a symbolic national pledge outlining clear steps and actions to be taken by both central and local governments for the establishment of a system of integrated social care services at local level.
- The central government will revise draft medium-term budget 2020-2022 to provide enough coverage to fund the Social Fund; EU delegation has put this as a key condition for the disbursement of the first fixed tranche of Instrument for Pre-accession Assistance (IPA II) 2014-2020.
- Actions supported through the SDG funding will inform national policies and systems. The Integrated Planning System (IPS) introduced by Government of Albania in the last few years is the main system to set the tools and mechanisms for integrated public policy planning by providing an effective allocation of financial resources. The government has committed to revitalize the Integrated Policy Management Groups (IPMGs), including the thematic group for Inclusion and Social Protection. The purpose of the thematic groups is to steer cross sectoral cooperation at technical level and with development partners, within the specific sectors of the respective priority area.

7. Trans-boundary and/or regional issues

The increasing recognition attributed to social protection in advancing sustainable and inclusive development is also underlined by the inclusion of social protection in the 2030 Agenda for Sustainable Development and the SDGs. Nonetheless, social protection is not yet a reality for all. In the wider region of Europe and Central Asia, including the advanced economies of Western Europe, 84% of the population is covered by at least one social protection benefit. However, this figure hides disparities across countries and types of risks, with wide variations in coverage for the same type of benefit observed across sub-regions.

The future of the Western Balkans as an integral part of the EU was reconfirmed by the European Commission's Western Balkans Strategy of February 2018⁴, which provided a major boost for the region's European path. During the last years, it is confirmed the significant progress the region has made on reforms including on the rule of law, the fight against corruption and organized crime, on economic and social reforms and competitiveness, regional cooperation and reconciliation. However, more efforts are needed at the regional level, in the crucial areas of the rule of law and fundamental rights.

Increased efforts across the Western Balkans are needed to effectively address abuses of child rights, Roma exclusion, marginalization and discrimination, persons with disabilities, minorities and other vulnerable groups social inclusion challenges as well as to ensure gender equality and to prevent and address discrimination and violence against women. Knowledge sharing and exchange of experience will be facilitated with the UN Joint Programme funded by the SDG Fund Secretariat in Montenegro. Given the key focus of both JPs on: integrated social protection system, linkages between cash assistance and social services, pathways out

⁴ https://ec.europa.eu/commission/sites/beta-political/files/communication-credible-enlargement-perspective-western-balkans_en.pdf

of poverty, and the reforms needed to join the EU family, there is room to engage in knowledge exchange sessions with UNCT in Montenegro.

C. JOINT PROGRAMME DESCRIPTION

1. Baseline and Situation Analysis

1.1 Problem statement

During the last years Albania has made important steps towards establishing a democratic state, functioning market economy, maintaining a stable economic growth, and investing in people, social cohesion and human development. Accession to the European Union (EU) is an over-arching development priority supported by all major political parties in Albania, and the EU integration processes remains the key development driver. However, living standards in Albania remain well below EU averages and socioeconomic convergence has been slow. Inequalities within Albania and among municipalities remain high. Roma and Egyptians, people with disabilities, children in large families, elderly, vulnerable women, migrants, and residents of rural and remote communities face the greatest risks of being left behind. The inadequate implementation of social policies for the inclusion of vulnerable groups, and the relatively small shares of GDP devoted to social services and social protection remain problematic. Some 40%⁵ of Albania's population has migrated abroad—the second highest ratio in the region.

Many people in Albania remain vulnerable to social exclusion and are unable to fully participate in society, having limited access to resources, rights and services available to the majority population, and remaining trapped in the poverty cycle.⁶ Both INSTAT and World Bank data show increases in the income poverty rate since the 2008 global financial crisis. The national poverty headcount (defined as those consuming less than 4891 lek/month, in 2002 prices) rose from 12.5% in 2008 to 14.3% in 2012, due to increases in urban poverty.⁷ The poverty rate in 2012 for households with children between the ages of 6 and 10 was 21%; for households with children under six years of age it was nearly 23%.⁸

Inclusion of vulnerable people in the labour market is a challenge; more than half of poor population is inactive, unemployed, nor in education⁹, and people living in remote areas are often completely excluded. In 2018, the unemployment rate (15-64) fell to 12.8% (12.3% for women, LFS, INSTAT data 2018), 1.3 percentage points below the level for the same period in 2017. The official youth unemployment rate (15-29) is 23.1%. It decreased by 2.8 percentage points as compared to 2017. Long-term unemployment remains a challenge to be addressed through more flexible and tailored policy interventions. The structure of employees shows that 25.5 % of women in the labour force are employed in paid positions while 14.0% of them engage in unpaid work in the family business. An important aspect about women and their participation in the labor market is the possibility for the combination of productive labor with reproductive life. The absence of such opportunity may force a good share of women to withdraw entirely from the labor force. Also, educational participation by gender in the education cycles indicates the existence of gender differences at various education levels.

The last UPR of Albania, 3rd cycle, highlighted that the social protection system in Albania still face challenges and obstacles. The UPR Working Group reviewed Albania at its 33rd session held in Geneva in May 2019 - of the 197 recommendations, 34 relate specifically to social cohesion and protection, 37 relate to child protection with 14 further recommendations relating to health care services. Other Treaty Bodies and Council of Europe human

⁵ INSTAT

⁶ Levitas, R., Pantazis, C., Fahmy E., Gordon, D., Lloyd E., Patsios, D., The multi-dimensional Analysis of Social Exclusion, University of Bristol, 2007.

⁷ Global SDG indicators 1.1.1 and 1.2.1 (both Tier I indicators) call for national monitoring of poverty reduction vis-à-vis international and national poverty lines, respectively. SDG indicator 1.2.2 calls for national monitoring of "men, women and children of all ages living in poverty in all its dimensions according to national definitions".

⁸ UNICEF/ESA (2016), Child Well-Being in Albania,

<https://www.unicef.org/albania/sites/unicef.org.albania/files/2019-01/Child%20Well-Being%20in%20Albania.pdf>

⁹ Labour Force Survey (LFS), INSTAT, 2018

mechanisms recently underlined the nexus between the specific phenomena or groups targeted by a Convention with social protections' need.

The latest Communication from the EC to the EU Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions on Albania 2019, issued on 29 May 2019 notes the progress in the implementation of the national strategy on social protection for 2015-2020¹⁰. Yet, current investments in social protection remain low and awareness of the role that the social protection system plays in the overall national development is missing. The report also notes that the social care services are currently undeveloped, underinvested and lacking in many areas. Currently the government reviewed the implementation of the National Strategy on Social Protection for 2015-2020 and started the process of revising and extending the strategy and its action plan until 2022.

The Law on Social Care Services (2016) received continued attention in 2018-2019, with secondary legislation approved to provide guidance to local authorities on planning and delivery of social care services. However, efforts should be scaled up to ensure implementation and appropriate allocation of financial resources to support the already adopted Law on social care services, the Law on the rights and protection of the child, and the 2017-2020 national agenda for children's rights. In 2018, Albania adopted the decision "on the functioning of the Social Fund". This decision stipulates that sources of funding for the social care services must be provided from the state budget, municipal budgets, donations and other sources. The Social Fund Mechanism was activated by the government in April 2019.

The public spending for social protection remains modest. A recent review on local and central public budget spending on social care services conducted by LNB programme in 2018 revealed that the share of this sector's budget to GDP decreased from 1.40% in 2017 to 1.32% in 2018.¹¹ Cash transfers continue to constitute about 95% of social protection sector's overall budget. When stripped of cash transfers, the social services budget constituted 0.40% of the whole government budget in 2018. Nevertheless, there is a pattern that shows that local governments are committing increasing resources to social care services at a level that is comparable to that of the central government. Regarding the social and economic disparities, there is scarce information available to indicate the trend even due to the still ongoing transition in the system of measuring and reporting countrywide data. LSMS is no longer applied while the SILC survey data are not yet available.

Key social protection schemes for vulnerable groups implemented in Albania are: i) Ndihma Ekonomike-NE (cash assistance scheme) for poor families, orphans, child/ family care, victims of trafficking and domestic violence; ii) disability allowance (DA) for people with mental and physical disability and payment for caregivers; iii) pension scheme; iv) universal health insurance/ health care; v) new-born payment, vi) unemployment payment; vii) Active Labour Market Measures; viii) maternity leave/payment for parents; and ix) social care services. The new scheme of Cash Assistance was extended throughout the territory of Albania in January 2018 and the number of applicants for 2018 has been dynamic (more applications/ increased number of beneficiaries in 2018 in comparison to 2017/ increased number of refusals). Poor households not benefiting from the scoring system were handled by the municipal councils through the use of the 6% municipal fund¹². The revised law on Cash Assistance has increased by 50% the average amount of NE per household, from ALL 3,500 (33 USD) to ALL 5,600 (53 USD) per month, with multi-member families earning up to ALL 10,000 including additional benefits. Additional NE subsidies are provided for families with young children for their vaccination and education up to an additional 400 ALL (4 USD) applied every month. Even though disability allowance payments have increased year on year, it is still evident that persons with disabilities find it difficult to cover their expenses with the money they receive. As the Albanian authorities are moving from the strategy and legislation

¹⁰ <https://ec.europa.eu/neighbourhood-enlargement/sites/near/files/20190529-albania-report.pdf>

¹¹ LNB annual report, 2018

¹² % of the cash assistance fund left to municipalities to use on their discretion for social services

development phase to the implementation process, a number of challenges need to be addressed. These include:

1. Lack of political interest in social care services.
2. Weak civic engagement and participation.
3. The need to consolidate financial mechanisms at the local level.
4. Gaps in availability of detailed operational procedures describing the action of state institutions in charge of planning, administering and monitoring social care services.
5. The decentralisation process and the amalgamation of municipalities is not accompanied by capacity building strategies.
6. Weak governance systems at the local level to respond to new and broader responsibilities as the result of decentralisation and social care reforms.
7. Weak capacities, financial and technical, of Central Government and LGUs to sustain the models of social services over time.
8. Low level of intersectoral and cross-sectoral cooperation between central and local governments and intra-governmental cooperation.

In order to address these challenges and support catalyzing delivery of social care services at the local level, the proposed joint programme, during its planned duration of two years and with a total amount of 2 million USD will pursue the following goal: **Albanian Government translates the policy intent into proper local actions so that men, women, girls and boys living in poverty, or vulnerable situation have access to integrated, quality social care services**, by accomplishing the following outcome:

All women, men, girls and boys, especially those from marginalized and vulnerable groups, are exercising their entitlements to equitable quality services, in line with human rights; and more effective and efficient investments in human and financial resources are being made at central and local levels to ensure social inclusion and cohesion.

The joint programme outcome supports UNDAF Outcome 2/Social Cohesion.

Governance and gender equality will be the joint programme's crosscutting issues that are mainstreamed throughout outcomes under a human rights perspective. The joint programme's target groups, who will indirectly and directly benefit from improved social services, are the marginalized populations of Albania, with children and women often being the most vulnerable, and especially persons with disabilities, Roma and Egyptians, children, migrants, refugees, and other poor and vulnerable groups. The improvement will be supported by interventions at macro level (central authorities and services), at meso level (municipalities and civil society organizations) and at micro level, actively involving the joint programme's target groups into the joint programme's implementation. The programme will cover six targeted municipalities. The joint programme approaches include full alignment on Albanian policies and strategies by supporting their implementation, cooperation with all types of stakeholders (public, civil society and private) and support to their cooperation, empowerment of target groups, support to the cooperation, "do no harm", integration into UN and SDC strategies as well as orientation on Sustainable Development Goals (SDGs). The sustainability of the joint programme's investments and effects and the scaling-up of successful practices and innovations will be a constant concern of the joint programme. The joint programme will use instruments for capacity building and organizational development, and it will fund innovative small local joint programmes that are in line with the endeavor's overall thrust. The joint programme's implementation is the responsibility of the four UN agencies UNDP, UNICEF, UN Women, WHO with the support of UNFPA, ILO and UNHCR, who will cooperate with state actors from central and local level, with civil society organizations and directly with target groups. The strategic steering of the endeavor will be assured by a Steering Committee in which participate the Ministry of Health and Social Protection, representatives of the implementing UN organizations, Representative of the two selected donors and civil society. One of the tasks of the Steering Committee, but also of all other actors participating in the joint programme's implementation, will be the monitoring and

assessment of risks – regarding the joint programme’s achievements, its strategic and fiduciary dimensions as well as the reputation of actors involved – their prevention and the joint programme’s adequate reaction to them. The purpose of the joint programme’s monitoring and evaluation include the provision of evidence for the joint programme’s steering, quality assurance, learning and accountability, including reporting. For covering the fields of context, results, efficiency, cooperation, the joint programme’s monitoring will be based on the logical framework and annual plans of operation, annual reviews, the budget, field visits, case studies and the monitoring results of other actors. Semi-annual joint programme reports will summarize the monitoring data on behalf of the Steering Committee. An external evaluation will be realized by the end of the joint programme.

Improving Municipal Social Protection Service Delivery (IMSPSD) Joint Programme is a step-change in quantity and quality of delivery at local (municipal) level of integrated social care, as part of an effective integrated social protection system. The Joint Programme will accelerate SDGs – being directly aimed at social protection-related SDG targets - by focusing on delivery of integrated services at Municipal level, the new building block of the Albanian administrative structure. Social protection strategies are solid on paper but need to be activated (the Government’s policy intent calls for an integrated, and transformative system which needs to be translated to local action but needs resources and solid models). The national Strategy itself relies on donor support, as it already outlines a financial gap. This joint programme will thus both produce quick-wins through direct acceleration of programmes in 6 municipalities and trigger more sustainable scaling-up through demonstration of methods, capacity building and establishing a precedent for allocation of domestic resources (municipal and national) to social protection.

Table 1 Regulatory framework, policies, HR recommendations

1	National Strategy for Development and Integration 2016-2020: The policy objectives are aligned to the global commitments stated by SDGs and offers a vision for Albania’s national social, democratic and economic development over the period 2016-2020, and its aspirations for European integration. Out of six established priorities, the fourth focuses on “investing in people and social cohesion with objectives related to a modern educational system, a universal and quality health care system, expanded employment opportunities, a stronger social protection system, gender equality and social inclusion”. It states the need to pay more attention to the protection of the rights of women, children as well as of people with disability, minorities, Roma, youth and prisoners; it further mentions that the elderly face difficult living conditions and often are subject to limited access for health care, education and other services.
2	Social Protection Strategy 2015-2020. It defines a system of social protection composed of policies and mechanisms to protect all those excluded or in need of protection through preventative and social reintegration programmes at local and national level. It aims at mitigating the impact of poverty for Albanian families, ensuring social protection measures reach those most at risk through i) increased effectiveness and transparency of the Cash Assistance Scheme (NE) to better target and cover poor families and children in need, ii) improving the position of people with disabilities through cash benefits and proper social services, iii) developing social care services through a functional system planning, managing and delivering of integrated social care services at the newly established LGUs. The third policy objective appears for the first time and established a two phased approach: the country should establish the architecture of the system (policy, legal, administrative instruments) up to 2017 and then go to scale and pilot the system at the decentralized level in the next years with progressive measures until a national coverage.
3	Policy Document on Social Inclusion 2015-2020. It addresses key social inclusion policy areas in accordance with the established EU conceptual frameworks and statistical standards including the following six domains: 1) poverty reduction and social protection; 2) employment and skills; 3) education and training; 4) health; 5) basic needs; and 6) social participation and human rights. Such policies are directed towards all people and with special regard to vulnerable groups, including Roma and Egyptians.

	It aims to establish a balanced and sustainable framework for ensuring that social inclusion is measured, monitored and reported in Albania through a robust set of indicators thereby improving ways in which social inclusion is linked to improving government policies and Albania's progress towards EU accession.
4	National Health Strategy 2016-2020 (primary care / universal health care). It envisages financing the healthcare with the general taxation, implementation of the universal health care programmes, It promotes the assumption of individual responsibilities for health care by guaranteeing, regulating and overseeing a transparent and competitive environment of healthcare providers.
5	Law on Social Care Services (2016). The law approved in December 2016, provides for the first time ever the legal basis for an integrated system of services delivered at decentralized level, services that can be offered by public and non-public service providers to individuals and families in need, according to a nationally defined set of standards which include pre-social care, community-based, residential, family-based, specialized and online services. The law defines clear accountability lines with local government units (LGUs) becoming the main actors in charge of planning and managing the public social care services with financing mechanisms involving a combination of local and central budget resources. The law clearly articulates the need for the Social Fund, which is a separate budget to be established at local level for financing of social care services and that should be resourced by central social protection budget, local revenues, and other locally mobilized resources including donor money.
6	Law on Inclusion of and Accessibility for Persons with Disabilities (2014). The law approved in July 2014 is the key legal text, transposing the Convention on the Rights of Persons with Disabilities (CRPD) to Albanian law. It aims to guarantee the promotion and protection of the rights of persons with disabilities to enable their full and effective participation in all social spheres, on an equal basis with others, by enabling autonomy and independent living for all persons with disabilities through offering assistance and support. It aligns protection levels by ensuring that all persons with disabilities receive the same amount of protection, supports the efforts for changing the model of disability assessment and switching to the bio-psycho-social model, promotes the collection of data related to persons with disabilities, and expands and strengthens the engagement with civil society, particularly DPOs.
7	National Cross-cutting Strategy on Gender Equality and Action Plan 2016-2020 foresee through dedicated objectives the reduction of women's unpaid domestic work by increasing access to and quality of social services and puts a special emphasis on rural women's access to services, such as nurseries and kindergartens; increasing access to quality health services, reduction of poverty in women and girls, improvement of specialized support services for protection and treatment of gender based violence and domestic violence cases.
8	<p><u>Supportive National Strategies and legislation</u></p> <ul style="list-style-type: none"> - National Cross-cutting strategy on Decentralization and Local Government 2015-2020 - National Action Plan for Roma / Egyptians 2015-2020 - National Action Plan for People with Disabilities 2016-2020 - National Action Plan on Children 2018 – 2021 Agenda for Children's Rights - National Action Plan on Health Promotion - Strategic Document and National Action Plan on SHR + Contraceptive Security - National Strategy for Social Housing 2015-2025 - Public Finance Management Strategy - Law On Gender Equality in the Society(2008) - Law "For Measures against Violence in Family Relations", as amended 23.7.2018 <ul style="list-style-type: none"> - Organic Budget Law (2016) - Law on Local Finances (2017)
9	UPR second cycle (2014) https://www.upr-info.org/sites/default/files/document/albania/session_19 - april 2014/recommendations and pledges albania 2014.pdf

	<ul style="list-style-type: none"> • Continue strengthening the social protection programmes developed in conformity with the Convention on the Rights of Persons with Disabilities • Step up its efforts in the promotion and protection of the rights of persons with disabilities in accordance with its obligation under the Convention on the Rights of Persons with Disabilities, including on the education of children with disabilities • Continue the implementation of the national strategy regarding the Roma and the National Action Plan relating to the decade for the inclusion of the Roma • Step up efforts to implement effectively the National Strategy and Action Plan for the Decade of Roma Inclusion with a view to improving the living conditions of the Roma community and, if necessary, to adopt measures to improve the education of Roma children • Strengthen the fight against discrimination affecting the Roma minority in access to housing, employment, education, social services and participation in public life • Fully implement its action plan to improve the living conditions of minorities, especially Roma • Increase the involvement of local authorities in the National Strategy on Roma and equip the Strategy with adequate financial means and evaluation mechanisms • Integrate specialized and holistic rehabilitation services into the public health system • Continue to implement effectively the National Action Plan on the Rights of the Child • Make stronger efforts to improve and raise the standard of gender equality in society
<p>10</p>	<p>CEDAW (25 July 2016) https://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CEDAW%2fC%2fALB%2fCO%2f4&Lang=en 35. The Committee recommends that the State party: (a) Strengthen its mechanisms for effective monitoring of the implementation of the legislation on social assistance and policies in all 61 municipalities, including by enhancing their capacity with regard to the delivery of social assistance services, and the economic empowerment of women, in particular those belonging to disadvantaged and marginalized groups</p>
<p>11</p>	<p>CoE-GREVIO (24 November 2017) https://rm.coe.int/grevio-first-baseline-report-on-albania/16807688a7 94. GREVIO strongly encourages the authorities to: a. ensure the appropriate funding for the social services delivered by municipalities to support victims of all forms violence against women and respond to their short and long term needs; b. increase the funding and the number of available services aimed at women victims' economic integration and social empowerment, through the involvement of both line ministries and local authorities. Such services should be based on proactive approaches, including provision of housing, assistance in accessing employment and outreach to businesses.</p>
<p>12</p>	<p>CRC (7 December 2012) https://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=RC%2fC%2fALB%2fCO%2f2-4&Lang=en The Committee urges the State party to: <ul style="list-style-type: none"> • Conduct a comprehensive assessment of budget needs of children and allocate adequate budgetary resources in accordance with article 4 of the Convention for the implementation of the rights of children and in particular to increase the budget allocated to social sectors, including to the education sector, and address the disparities on the basis of indicators related to children's rights; • While welcoming the enactment of Law No. 10221 of 4 February 2010 on the Protection against Discrimination and the appointment of the Commissioner for the Protection against Discrimination in May 2010 and other efforts undertaken to counter discrimination, especially against minorities in the State party, the </p>

Committee is concerned that, inter alia, girls, children belonging to minority groups, particularly Roma, children living in rural areas and children with disabilities continue to be the victims of serious discrimination, in particular in their access to education, social protection, health and adequate housing.

1.2 Target groups

People get left behind when they lack the choices and opportunities to participate in and benefit from development progress. All persons living in extreme poverty can thus be considered 'left behind', as can those who endure disadvantages or deprivations that limit their choices and opportunities relative to others in society.¹³ Key target groups of the joint programme – as will be identified by Municipalities - include: Roma and (European) Egyptian populations; persons with disabilities; vulnerable children; women at risk/victims of violence; isolated/poor rural women; elderly; refugees and migrants. (data provided in 1.1 above and paragraphs below).

These vulnerable groups are particularly likely to face risks of being left behind in Albania. People with disabilities are much less likely to participate in the labour market, due both to inferior education outcomes and to employers' discriminatory attitudes. Refugees' and asylum seekers' access to services are often hampered by lack of effective documentation, as well as by discriminatory practices; asylum seekers are explicitly excluded from some social welfare programmes. Despite the country's economic progress, children in Albania remain disproportionately affected by multiple dimensions of poverty—which, owing to its limited coverage of households with children and low monetary value (in terms of cash transfers per family), the Ndihma Ekonomike social assistance instrument and the disability benefit are unable to adequately address. A more systematic approach to addressing child vulnerability is needed, featuring inter alia: • Increased financial investments in those social service and social protection systems and instruments most relevant for children, as well as in the capacity development and professionalization of the social care work force; • The closer integration of social protection and social service delivery; and • An increased emphasis on the protection of children against domestic violence, trafficking, and other risks associated with socio-economic and legal vulnerability.¹⁴

Roma and Egyptians are among the most marginalized groups in the country and are often victims of discrimination and social exclusion, as they have been suffering systematic discrimination throughout history, and the government policies that have attempted to address the issue have been mostly ineffective. The 2017 Law on national minorities provided them with the minority status but it still remains unimplemented. A recent (2017) Regional Roma Survey commissioned by the EU, UNDP and the World Bank indicates that although some progress has been achieved on Roma issues over the last years, Roma and Egyptian communities remain one of the most excluded in the Western Balkans, and the gap between them and the majority population is widening in terms of human development and material well-being.¹⁵ The Survey revealed that marginalized Roma continue to face limited access to opportunities in virtually every aspect of human development such as basic rights, health, education, housing, employment and standard of living. Furthermore, members of these communities face direct and indirect barriers for accessing public services, stemming from lack of information or understanding of administrative procedures, as well as stigma and discriminatory attitudes emanating from the majority population. In addition, high unemployment rates, combined with a large share of youth not enrolled in school contribute to the exclusion of young Roma in Albania. The percentage of Roma youth (ages 18-24) not in employment, education or training (NEET) is 78%. As a result of these challenges migration is a common trend amongst Roma and Egyptian populations. A number of factors influence

¹³ <https://www.undp.org/content/undp/en/home/librarypage/poverty-reduction/what-does-it-mean-to-leave-no-one-behind-.html>

¹⁴ <https://www.un.org.al/publications/mainstreaming-acceleration-and-policy-support-achieving-sustainable-development-goals>

¹⁵ EU, UNDP and World Bank, *Roma at a Glance*, 2017

the decision for Roma and Egyptians to migrate, but the main reasons are economic decline and the slow recovery after the 2008 economic and financial crisis, a lack of trust in public institutions and services, tensions between certain population groups and discrimination, as well as high and persistent unemployment.¹⁶

People with disabilities are much less likely to participate in the labour market, due both to inferior education outcomes and to employers' discriminatory attitudes. Large families with children and elderly people are particularly likely to face risks of being left behind in Albania. Some 48% of elderly women in Albania are widows, hence most likely live on a single pension. About three quarters of elderly women who have passed retirement continue to work as contributing family workers, mostly in agriculture¹⁷. According to INSTAT population joint programmeions, the share of elderly population cohorts (age 65 and above) will rise from about 13% in 2017 to above 20% in 2030. As the share of working age cohorts (15-64 years of age) is joint programmeed to fall from 69% to under 64% during this time, this implies a sharp increase in the old-age dependency ratio.

Children: The adoption of the Law on the Rights and Protection of the Child in 2018 constituted a major step in improving the legal framework for child protection. This new law requires a multi-sectoral preventive and responsive approach to all forms of violence against children. Several by-laws have also been adopted. Currently, there are 223 child protection workers in total (52% of the required number) out of which only 45 (26%) work full-time. The new law requires all child protection workers to have a background in social work. However, currently only 78 out of 223 (35%) have such experience. There is growing evidence of child abuse and exploitation through the internet. Three ministries (Interior, Health and Social Protection, and Education) adopted a national action plan in 2018 to address these issues. However, capacities for investigation and prosecution of crimes against children committed through the internet need to be strengthened. The phenomenon of child marriage/union is still prevalent, particularly in Roma, Egyptian and rural communities. There is a lack of data and reporting on child poverty.

Elderly: large families with children and elderly people are particularly likely to face risks of being left behind in Albania. Some 48% of elderly women in Albania are widows, hence most likely live on a single pension. About three quarters of elderly women who have passed retirement continue to work as contributing family workers, mostly in agriculture¹⁸. According to INSTAT, the share of elderly population cohorts (age 65 and above) will rise from about 13% in 2017 to above 20% in 2030. As the share of working age cohorts (15-64 years of age) is anticipated to fall from 69% to under 64% during this time. This implies a sharp increase (from .19 to .32) in the old-age dependency ratio.

Vulnerable women and girls /gender inequalities: Albania has made strides in its efforts to mainstream gender into legislative and policy development initiatives and their implementation, and as part of these efforts, adopted the national Strategy and Action Plan on Gender Equality 2016-2020. Yet empowering women as agents of change will require a bold transformative framework at the macroeconomic level, which ensures that the benefits of economic growth are shared fairly through equal access to productive opportunities for all. This framework must explicitly recognize that women are at a disadvantage due to inequalities embedded in economic and social structures and must employ a set of tools that combines demand-led and supply-led policies. The Global Gender Gap Report 2017 ranks Albania 38th in the world—thanks in large part to the country's strong (31st) women's political empowerment ranking. However, Albania's ranking drops significantly on indicators for economic participation and opportunity (70th), education attainment (80th), and health and survival (120th).

¹⁶ Papa, J., & Keskin, I., *Roma Returnees from Western Balkans: "No place for us: neither here, nor there"*, 2017

¹⁷ UN Gender Brief, Tirana, page 64.

¹⁸ UN Gender Brief, Tirana, page 64.

According to causes of inactivity, generally speaking, women remain out of the labour force mostly because they are busy with unpaid work at home (21.4%) or are attending school (22.0%). On the other hand, only 1.0% of men declare homework as the reason behind their inactivity, while 30.4% are students or pupils. The structure of employees shows that 25.5 % of women in the labour force are employed in paid positions while 14.0% of them engage in unpaid work in the family business.¹⁹ An important aspect about women and their participation in the labor market is the possibility for the combination of productive labor with reproductive life. The absence of such opportunity may force a good share of women to withdraw entirely from the labor force.

According to the latest (2013) national survey on gender-based violence, 59,4% of Albanian women have experienced some form of gender-based violence; even though the national gender-based violence reporting rate is estimated at under 1%.³⁵ Violence against Roma women is still severely under-reported. The Baseline Report for Albania released in 2017 by the Council of Europe's Group of Experts on Action against Violence against Women and Gender-based violence (GREVIO) called for the more ambitious application of such legal tools as restraining orders, improvements in the quality of the services provided to victims, and better coordination of administrative data collection on gender-based violence. While some cultural norms and practices empower women and promote women's human rights, others are used to justify various forms of gender-based discrimination. Child and forced marriage and gender-biased sex selection can serve as examples of the latter.

Migration/ immigration and transit: In 2017 Albania had about 1.5 million citizens outside its territory, or about one third of the country's population.²⁰ The majority of migrant communities are present in the neighbouring countries, Italy (448 407) and Greece (356 848)²¹, however, with a growing trend of presence in other European Union countries as well as in North America and Canada. At the same time, the population projection indicates a long-term trend toward achieving a neutral migration balance.²²

Emigration from Albania is primarily driven by economic reasons (unemployment and search for better living conditions) although other considerations have been prominent.²³ Two categories of persons – youth and women have found the situation on the local labour market particularly difficult. In 2017, young people aged 15-29 who were not employed and not attending school or vocational training made up 29.7% of total youth. Only 50.3% of women (compared to 64.3% men) were employed.

Albania is increasingly becoming also a country of destination for economic immigrants, students, asylum seekers and refugees, although the numbers, in this case, are relatively small. During 2017, the General Directorate of National Employment Service issued in total 1,705 work permits for foreigners. The largest number of work permits was issued by the Regional Employment Directorate in Tirana (651 work permits). The top countries of origin of work permit recipients in 2017 included Turkey (582 or 34% of the total work permits issued) followed by China (208 work permits or 12% of the total) and Colombia (85 work

¹⁹ INSTAT, *Women and men*, 2019

²⁰ According to INSTAT, the average population in 2017 was 2 873 457 inhabitants. The difference between the data registered in the National Civil Status Register and the average population for 2017 can be estimated indirectly as an indicator of the number of Albanian citizens living abroad.

²¹ According to UNDESA the number of Albania citizens in Greece and Italy by 2017 was 429,428 and 455,468 respectively

²² By 2021, the number of emigrants should exceed between 5,000 and 16,000 the number of immigrants. This should be followed by a faster decline in the number of emigrants, leading to an almost neutral migration balance by 2030. http://www.instat.gov.al/media/3075/projeksionet_e_popullsis_2011-2031.pdf

²³ Apart from labour migrants, the main categories of emigrants from Albania include family members of migrants, or people migrating to reunite with their families abroad; students; and asylum-seekers and refugees

permits or 6% of the total).²⁴ Out of 1,705 total work permits for 2017, 245 or 14% of them were granted to women and 1,142 were first-time applications.

A rapid assessment²⁵ carried out by UN Country Team in Albania in 2019 indicates a steep increase in the number of persons intercepted at the border areas – 5,180 persons were intercepted in the first 8 months of 2019, compared to 5,700 in all of 2018. This was matched by an increase in the number of asylum requests -- 2,557 in the first 8 months of 2019 (Fig. 3).²⁶ The main affected area border with the increase of arrivals is Devoll Municipality in Korca regions with 1,195 persons with a number of 71 unaccompanied children. Identification and referral mechanisms for unaccompanied children is non-existent in this municipality and there is an urgent need to establish them with the increase of capacities of the municipality.

Refugees and Asylum Seekers: The number of refugees and asylum seekers still stays at low numbers which do not surpass 300 persons, nevertheless the 'leave no one behind' serves the purpose of addressing needs for such categories. The asylum legislation affords refugees social and economic rights at the same level as Albanian citizens. However, two problems arise in exercising these rights. First, foreigners' identity documents are technically incompatible with the national civil registry, hence preventing effective access to most public services. Second, while the asylum legislation generically grants the said rights, access is regulated in other legal instruments, such as Laws on Foreigners, on Social Protection, on Pre-University Education, on Social Housing, on Free Legal Aid and on Promotion of Employment. Nevertheless, this category does not enjoy access to social rights and services mentioned above due to lack of appropriate coordination among ministries as well as local government and lack of proper state budget allocated for the implementation, compound the situation.

A human rights-based approach will build capacities of municipal level staff to institutionalize social and health services which meet human rights standards, put the last first and empower excluded groups to claim their rights. Programme actions will follow recommendations coming from human rights treaties, including those recently reviewed such CEDAW, GREVIO; or UPR, CRPD and CRC to be reviewed soon. The integration of gender equality will follow a 'twin-track' approach. First, all of the joint programme's interventions will be gender sensitive, using gender analysis and promoting engendered social inclusion. Second, targeted interventions to support gender equality and women's empowerment will be incorporated, with a focus on integration of gender results budgeting at social fund and local budget plans. (HR recommendations provided in section 1.1 above)

The participating UN Agencies will closely consult with and actively involve representatives from all target groups in all programme decisions concerning issues relating to them. (see section 1.3 below on how accelerating of SDGs through this programme)

1.3 SDG targets

The SDG goals and targets in the focus of the joint programme are:

SDG 1- No poverty

1.3 Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable.

The programme will support creation of sound policy frameworks and mechanisms at the local level, based on pro-poor and gender-sensitive development, to support accelerated investment in poverty eradication actions, social protection and coverage of the poor and most vulnerable.

²⁴ Turkish citizens are mainly employed in the construction sector, the education and health sector, Chinese citizens in the extractive industry (mining and quarrying), while Colombian citizens in the construction sector in the professions (welder, mechanic, electrical and steering heavy machinery for the construction of gas pipelines.

²⁵ Joint Assessment Asylum and Mixed Migration, Situation in Albania 2018; Initial Rapid Assessment, July 2018

²⁶ UNHCR data on asylum in mixed migration/Dashboard January –August 2019

Baseline: Poverty level in Albania is 14.3% in 2012; Low economic and social indicators on access to rights and social services for Roma/ Egyptians, PWD, vulnerable women and children and migrants; Low level of implementation of the National Action Plan on Roma/ Egyptians (rate 3.66 in 2018 year, in a scale of 0-5), PWD, Children and other vulnerable groups and of the local social care plans.

Estimated measured progress at the end of the joint programme:

- 85% of vulnerable persons and groups in the six targeted municipalities benefit from improved delivery of social services by local authorities;
- Level of implementation of the National Action Plan on Roma/ Egyptians, PWD, Children and other vulnerable groups and of the local social care plans increased.
- Progress in implementing the Social Protection Action Plan 2019 – 2022, so as all related policies/action plans that aim to increase social protection coverage and benefits to vulnerable groups and vulnerable children.
- Increase in proportion of domestically generated resources allocated by the government directly to poverty reduction programmes, including Social Fund and financing of social care plans.

SDG 3- Good Health and well-being

3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.

3.9/3.c Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States.

Baseline: NA

Estimated measured progress at the end of the joint programme:

- At least 3 Guidelines, Orders of Ministers drafted and endorsed to support better integration between health care/ access to health insurance and social protection at national level as well as links to cash assistance programmes to inform local actions;
- 200 municipality staff, service providers and decision makers trained/coached to increase capacities on establishing linkages between health and social protection;
- 6 new regulations and instructions on integrated social care services that involve two or more target ministries (cross-sectoral, issue-based approach) and municipalities;
- At least 50 trained staff of service providers applies standards of service provision, new services, needs assessment, planning and budgeting as per the new established integrated roles.
- Equity analysis of health expenditure patterns and in use of health services, so as new data on the costs of assistive devices for children with disabilities will inform policies about increase in social protection and health care coverage and benefits.

SDG 5- Gender Equality

5.4 Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate

5.6 Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences

5.c Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels (Indicator 5.c.1 Proportion of countries with systems to track and make public allocations for gender equality and women's empowerment)

Baseline: Over a quarter of inactive women in prime working age reported being out of the labor force for reasons directly related to care and family responsibilities. Furthermore, women in

Albania carry out disproportionately large portion of the unpaid household work. Women spend over 5 hours a day on unpaid work, which is above the OECD average. On the contrary, men spend one hour or less, which is one of the lowest levels among the countries with available time use data. The gender gap in time use is even greater in rural areas: rural women spend on average 6 hours while rural men spend 56 minutes a day on unpaid work, even though one might expect more time allocated to maintenance tasks in rural than in urban environment.

In Albania, gender equality principles are integrated in the Public Finance Management reforms. Due to a solid legal framework at the central and local level that integrates GRB in the Public Finance Management and extensive capacity building provided to expertise among state and non-state actors, Albania is the fourth country in Europe and the first non-EU member to embed gender equality in the key budget law. It is crucial to continue institutionalization of GRB at the local level, where communication and coordination between Ministry of Finance- as the lead entity and municipalities is effected so that local budgets as well reflect equally the needs of women and men.

Estimated measured progress at the end of the joint programme:

- Conducted analyzes on expenditures and the fiscal space related to integrated social care services.
- Conducted Mapping of social vulnerabilities of women and their link to services and budgets through application of gender responsive budgeting in central and local finance systems.
- 6 municipalities supported to conduct Gender and Children responsible budgeting.
- Empowered communities (50% vulnerable women and girls) that seek accountability of local governments on engendered policies and budgets that address their social needs
- 6 monitoring reports produced addressing social protection needs and gaps of vulnerable communities, including women and girls
- 6 target municipalities effectively integrate GRB in their Local medium-term budget programs
- An order of the Minister of Health and Social Protection endorses the standards on monitoring and inspecting integrated social care services.

SDG 10- Reduced inequalities

10.2 By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status

10.4 Adopt policies, especially fiscal, wage and social protection policies, and progressively achieve greater equality

Baseline: NA

Estimated measured progress at the end of the joint programme:

- Annual increase of central government's budget for social services by 2% and targeted LGUs by 4%;
- Social protection floor level decision taken during a National Conference;
- Vulnerable population compose at least 20% of participants in annual planning and budgeting;
- At least 10% of issues/concerns addressed in annual planning and budgeting are raised by vulnerable populations.
- At least 6 integrated social care joint programmes co-financed through social fund, a majority of them for Roma and persons with disabilities CSOs, are implemented every year.

SDG 16- Peace, justice, and accountable institutions

16.6 Develop effective, accountable and transparent institutions at all levels

Baseline: N/A

Estimated measured progress at the end of the joint programme:

- Increased no of Municipalities where Management Information System (MIS) is operational;
- Increased no of national and local civil servants trained on Management Information System (MIS);
- 2 municipalities co-finance implementation of integrated models of health and social care services;
- 6 municipalities supported with at least 1 innovative proposal in implementation of social care plans.

These five targeted SDGs and their related goals inherently interlink with each other forming an indivisible framework that aims to achieve holistic sustainability from a systemic perspective on social protection. On the one hand, achieving one goal or target may contribute to achieving other goals or targets. The programme engages the inter-connectedness of SDGs. Many problems that hamper the wellbeing of children and families- such as lack of access to education (SDG4), low health status (SDG3), low employability (SDG8), or gender inequality (SDG5) could be prevented if they were able to access basic social protection. Any effective social protection system should ensure that cash entitlements (SDG 1.8) and social services are provided. Strategies (and this joint programme) focus on most at risk of being left behind (Roma and Egyptian minorities; people with disabilities, women survivors of gender based violence, remote communities, at- risk children, aging population). And by engaging with Municipal authorities, it is building accountable institutions (SDG16) for sustainability.

“Mainstreaming, Acceleration and Policy Support for Achieving the Sustainable Development Goals in Albania” report identifies three broad policy and programming platforms for accelerating progress towards EU accession and achieving the SDGs: (i) governance reform, human rights, and the rule of law; (ii) the inclusive green economy; and (iii) investment in social and human capital. These accelerator platforms reflect Albania’s development and partnership priorities (as articulated in the EU accession process and the GoAUN Programme of Cooperation for Sustainable Development), the added value of UN agencies, complementarity with ongoing efforts, as well as the substantive challenges enumerated in this report.²⁷

Two of the accelerator platforms: a) the governance, human rights, and rule of law and b) investment in social and human capital reflect the logic under this new programme. IMSPSD programme identifies key governance bottlenecks that, when addressed, can have synergistic and catalytic effects on other, related development challenges. Investing in human capital and social cohesion is one of the NSDI II pillars, while promoting social cohesion is a priority under the UN-GoA Programme of Cooperation for Sustainable Development. Social protection—understood as tax-funded social benefits, contributory social insurance, social services, public works programmes, and other guarantees of basic income security—is central to prospects for boosting investment in social and human capital in Albania. Addressing these lynchpin issues could then trigger acceleration of the achievement of development targets that are indicated in the NSDI II, and thereby support the EU accession process and the achievement of the SDGs in Albania.

Table 2. Accelerating social protection through IMSPSD programme, adapted from Table 4 of MAPS report²⁸

Alignment of NSDI II, UNDAF priorities/policy areas/outcomes with accelerator platforms		
Priority	Policy area	Accelerator platform

²⁷ <https://www.un.org.al/publications/mainstreaming-acceleration-and-policy-support-achieving-sustainable-development-goals>

²⁸ <https://www.un.org.al/publications/mainstreaming-acceleration-and-policy-support-achieving-sustainable-development-goals>

Document: NSDI II (2015-2020)						
1	<i>Foundation: Consolidating good governance, democracy, and the rule of law</i>	Strengthening human rights	A: Governance, human rights, and the rule of law			
2		Decentralization and local governance reform				
3	<i>Pillar 3: Investing in human capital and social cohesion</i>	A stronger and more accessible health care system	C: Investment in social and human capital			
4		Increased employment opportunities				
5				Strengthening social insurance		
6				Managing migration		
7				Consolidating social protection		
8				Building a more inclusive society		
9				Ensuring gender equality		
10				Youth empowerment		
11						
11						
	Priority	Outcome	Proposed accelerator platform			
Document: UNPoCSD (2017-2021)						
1	<i>Social cohesion</i>	Health	C: Investment in social and human capital			
2		Education				
1				Social protection		
3					Child protection	
1						Gender and social inclusion
4						
1						
6						
1						
4						

1.4 Stakeholder mapping

The programme will be implemented by several actors representing central and local state levels; its success depends on the good quality of their cooperation and coordination. It will be the task of the programme Steering Committee and of single actors involved in the joint programme to guarantee cooperation and coordination.

The joint programme will be carried out by the involved UN Organisations through their Delivering as One mechanism. It will ensure a cohesive coordinated UN approach through internal coordination mechanism in targeting different municipalities to ensure a critical mass of support and increase chances of success. It will ensure a strategic integration and cohesion with other UN agencies as well as with development partners working in Albania in the areas of social inclusion and protection, public administration and local governance. A coordination platform with UN agencies, donors and other joint programmes targeting local governance and social protection will be established to coordinate intervention, avoid overlapping and maximize synergies and results. The implementation modality of the joint programme will be affiliated within the overall architecture of the DaO approach, ensuring that activities are coordinated with Outcome 2 strategic deliverables as presented biannually in support of the Government of Albania and United Nations Programme of Cooperation for Sustainable Development (PoCSD) 2017-2021. In this context, higher-level coordination will be facilitated by Ministry of Health and Social Protection in its overall efforts to chair and coordinate all partners' efforts under the Integrated Planning and Management Group (IPMG) on Employment and Social Sector and Outcome 2 of the Programme of Cooperation for

Sustainable Development (PoCSD). The joint programme logframe provides for the general framework and indicative deliverables that will be further fine-tuned and annualized in relevant annual work plans over a time frame of two years (2020-2021). UNDP will be the leading UN agency for the overall implementation and coordination of the joint programme. Each participating UN agency will implement activities and outputs as defined in the respective joint work plans agreed for the respective roles and responsibilities in line with their mandate and expertise.

The main governmental partner at central level is **Ministry of Health and Social Protection** with the focal point being within the GENERAL Directorate of Health and Social Policies and its dependent institutions (State Social Services and its regional directorates, Inspectorate) which will be responsible for coordination with other line ministries (MESY, MFE, MOI etc.) as well as with local government authorities at regional or municipal level. Municipalities responsible for social protection service provision will be the key partners in implementing activities at local level and in coordinating activities with other local authorities.

To ensure steady participation (regardless of staff changes), MOUs will be signed with respective **(pilot) LGUs** to define roles and responsibilities in implementation of joint programme activities. (Pilot) LGUs will be the targeted beneficiaries for community-based delivery of social protection services, mainstreaming social inclusion in local policies, and in developing and implementing innovative delivery of social services; they can also be direct beneficiary of the grant component for innovative social services. Their role as beneficiaries will additionally ensure the active involvement of municipalities in the joint programme's implementation. Active contributions of LGUs will consist of engaging in organisational development in view of efficient and effective service delivery, including accessing target groups, encouraging staff to participate in capacity building events, exchange with other LGUs, possibly planning and implementing service delivery jointly with other municipalities, etc.

Civil society organizations and target groups CSOs at national and local level representing interests of different vulnerable and marginalized groups (Roma and Egyptians, persons with disabilities, women, children, etc.) will be key partners at central and particularly local level. They will have a double role – they will advocate, lobby and network for promoting social protection services at local level, and they will develop and deliver innovative social services at local level. The CSOs will also be direct beneficiaries of the joint programme's grant component for innovative social services. The potentially multiple role of CSOs – advocacy and paid for service provision – might result in a conflict of interest for these organizations. Their capacity to speak up for the groups they represent or intend to work for may be reduced, and their accountability might suffer due to institutional interests not derived from their organizational purpose. The joint programme's management is very much aware of the issues deriving from CSOs' multiple role; it will address these issues explicitly in the Steering Committee and with CSO partners, and it will contribute to the clarification of roles wherever possible – by facilitating the interface between state authorities and CSOs, a productive dialogue, by presenting examples of NGOs that are paid service providers but that therefore have not lost their capacity to address crucial issues for the groups and persons they represent.

Policy dialogue with authorities will be crucial in this respect: the beneficial contribution of CSOs multiple roles – policy advocacy, service delivery, and monitoring – will be discussed, including how this can ultimately result in improved service provision. Their knowledge about the situation on the ground, their lobbying for the improvement of this situation is not to result in "punishments" of these organizations by not accepting them as service providers if they critically comment what remains to be improved. Rather, the experiences and insights of CSOs are to be seen as a resource that enriches the further development of social protection service provision and the system of social inclusion in general.

World Bank is supporting the Ministry of Health and Social Protection through a loan to reform the eligibility criteria for both Ndihma Ekonomike program and Disability Allowance as well as providing technical assistance to strengthen the Government's capacity to manage cash assistance programs.

The programme will cooperate with other active stakeholders on the topic such as the European Union, World Bank, GIZ, Italian Cooperation, Austrian Cooperation, USAID, Swiss Development Cooperation (SDC) etc.

2. Programme Strategy

2.1. Overall strategy

Driven by the Agenda 2030, this Joint Programme aims to bring an integrated approach, drawing on mutually *reinforcing "levers" to examine, empower and enact change, to ensure "no one will be left behind" and to "endeavor to reach the furthest behind first"*²⁹. To address inequity, exclusion and deprivation; the six targeted municipalities will be supported to identify and build key roadblocks that prevent progress across vulnerable local population segments and SDGs. The programme will be housed under Output 2.3 Social Protection in the UNDAF/PoCSD 2017-2021, with linkages to other UNDAF outputs addressing gender equality, human rights, prevention of violence against women, child protection and support for refugees and migrants. It pursues directly one of the three accelerators identified by the Albania MAPS report 2018: "the biggest weaknesses in Albania's social protection system may lie not its social assistance or insurance programmes, but in its social care components."

The programme's intention is to bring about system change in the field of social protection and the provision of social services that gradually ensures the realization of human rights by all. The proposal is fully rooted on a nationally approved policy and legal framework: the National Social Protection 2015 – 2020 for the first time ever sets the vision for the country to establish social care services reforming the social protection system which up to 2014 was based only on providing cash assistance. Law for establishing social care services in Albania (n.121/2016) articulates clearly accountability lines and clear roles for planning, financing and delivery of social care services for both national and local level. The Law on Inclusion of and Accessibility for Persons with Disabilities defines the responsibilities of central and local government bodies, in the implementation of the principles of inclusion and accessibility, to minimize, and ultimately remove, the barriers faced by persons with disabilities with a view to enabling their equal participation in society. The recently approved instruments for Social Fund outline modalities for budgets and financial flows from national to local level for the financing of social care services.

To maximize the impact of social protection on families and children, the system should be supported in both policy design and the capacities needed to put them into practice – from budgeting and administrative arrangements at central level, to service delivery and social work on the ground. The policy framework has been advanced thanks to UN support and a strong political will and awareness on the need to have social care services in the country which address the needs of all vulnerable groups and citizens through their lifecycle. Such political will has been the key for a strong partnership between UN agencies and Ministry of Health and Social Protection and for clearly outlining what is the technical and financial support needed by UN to advance this important agenda which is transforming the social protection system in the country; therefore, the approach and the intervention logic proposed are already aligned with the rolling Annual Work Plans between UN and Government of Albania. For this sound policy framework to be implemented, it needs to be accompanied by the necessary allocation of resources. In order to deliver results at scale, the financing framework needs to go beyond the conventional approach of analyzing how resources are allocated across sectors and investigate, how additional revenues can be generated to increase the currently low levels of social protection expenditure. Through the Joint

²⁹ 2030 Agenda for Sustainable Development

Programme, the government will have a thorough analysis of various options to increase fiscal space to inform related decisions on increasing social protection allocation over time.

Tools that will be used during this programme have been already developed and tested with national and local partners. UN engaged in dedicated consultations with national and local authorities and there is a national consensus that there is a strong need to pilot the system with select municipalities ensuring we reach out to those that have the highest needs, to continue to provide technical advice for completing the national policy.

The JP will work to expand opportunities for local civil society and community networks to engage decision makers, in consensus building on the social national and local policies, taking into account state obligations and recommendations from human rights treaty bodies and the Universal Periodic Review. The programme will also strengthen the capacities of civil society actors, and expanding and protecting spaces for people's participation in public life, by supporting organizations of vulnerable groups. Effective implementation of the national social protection policy in line with the best international standards, requires a sustained commitment and active measured linking policies, planning and budgets, so as clearly defined tools for decentralised governance of service delivery properly linked and integrated with other social protection entitlements.

Improving Municipal Social Protection Service Delivery has taken stock of recent recommendations and concluding observation expressed by experts' committees during reviews. The joint programme will work in 6 municipalities that directly target vulnerable groups identified in UN mechanisms recommendations (that is Roma and Egyptian, vulnerable children, women at risk, isolated/poor rural women, migrants, persons with disabilities and elderly, refugees and migrants). Taking concrete and effective measures to eliminate discrimination that vulnerable groups face in terms of social care and health services will help implement the recommendations related to these same issues.

The proposed intervention is designed to support municipalities translate into local action, the national policy intent of ensuring an integrated social protection system to all vulnerable families and children. As such, strengthening the governance of social care services is key for the JP. The proposed intervention will make sure that challenges faced for proper management, financing and delivery of social care serviced are addressed at both national and local level with a coordinated approach and unified solution. The joint programme will promote good governance at local level by fostering policy dialogue and cooperation mechanisms of local authorities with central government, with relevant stakeholders, donors, CSOs, representatives of vulnerable communities, in the belief that participation of many actors at all levels is key and that a shared vision of all actors is required for the system to properly function at local level. This also includes continuous dialogue with MoFE, MoHSP and Ministry of Interior (Mol) to prevent mismatches between policy goals and objectives and financial allocations for adequate delivery of social care services at local level.

The intervention will make use of the following strategies

- The Joint Programme will generate knowledge to guide the design, the implementation and financing of a comprehensive, right based, gender and disability sensitive, social care system which responds to the real needs of vulnerable groups with an equity and gender focus. Knowledge generation activities will include expenditure and fiscal space analysis, equity analysis of public spending on health and social care, so as highlight key issues related to gender and child sensitive budgeting.
- Advocacy: Based on the priority bottlenecks identified and other knowledge generated from the joint programme, UN will develop joint advocacy messages to advance the social protection and social care system in the country. UN will advocate for the national policy intent to be properly translated into local actions by convening an effective policy dialogue with central and local authorities to increase awareness and confidence about effective strategies and solutions. UN will strongly advocate to build a national consensus on the social protection floor in Albania.

- Direct policy advice and direct technical guidance will be provided to national and local government institutions for the country to establish the foundations of a comprehensive, right based, gender and disability sensitive, social care system. UN will propose solutions for clear and sound institutional arrangements and coordination mechanisms at local level, so as will provide guidance and tools for the country to progressive increase finances of social care through Social Fund.
- Capacity building is central of this JP. The capacities of local authorities and local service providers will be strengthened through provision of tools and innovative training, which rather than the traditional "one off event" will be provided throughout the cycle of the programme and will combine training with on the job mentoring and coaching.
- Direct demonstration of pilots is another important strategy to be undertaken. Local innovative models of integrated social care services will be piloted, including established local linkages between health and social protection services. Local authorities will be our key partner in every step of developing the pilots, making sure that the models can be easily replicable. JP also included activities that related to collection and dissemination of already identified good practices among all stakeholders in the provision of social protection services.
- Empowerment of vulnerable communities, families and children is key to build trust between local authorities and social protection workforce and the beneficiaries. Vulnerable groups will be provided tools and fora to participate in the process of developing local social care plans and hold the local authorities accountable. Targeted communication and social mobilization campaigns will be also implemented to increase the demand for social care services.

2.2 Theory of Change

Families and children living in poverty experience deprivation in multiple and interlinked dimensions. The intervention is founded on the principle that an integrated social protection system, which ensures adequate linkages between cash assistance and social care services is key to help households/families find pathways out of poverty and overcome vulnerability and enjoy a level of wellbeing compliant with the international human rights standards and the normative principles of the European Community. It pursues directly one of the three accelerators identified by the Albania MAPS report 2018: "the biggest weaknesses in Albania's social protection system may lie not its social assistance or insurance programmes, but in its social care components." The MAPS report further highlights both the need to focus on increased financing and the opportunity created by the establishment of the Social Fund by Government³⁰.

The theory of change that lead the joint programme design is that for Municipalities to be able to provide integrated social care services and social protection to all girls, boys, men and women that are most at risk of being left behind in line, support at municipal level should be made at multiple levels and should include: (i) assisting with institutional arrangements and coordination mechanisms with clear roles; (ii) strengthening institutional capacities through training and mentoring for the development of social care plans and , budgeting the plans and resourcing the Social Fund with funds from local revenues and central social protection budget; (iii) piloting innovative models of integrated social care services, including identifying local linkages between health and social protection services. (iv) empowering vulnerable groups to request services from authorities, hold them accountable and establish a culture of mutual decision-making (v) assisting with an analysis of social protection needs, related costs and related sustainable sources of financing to match the costs.

The pathway of the result chain that underpins the theory of change is as follows:

³⁰ http://www.un.org.al/sites/default/files/MAPS_Report_web.pdf, pp. 78

1. *If* municipalities have the proper policies, administrative structures, institutional capacities, human resources, tools, and financial resources to deliver adequate and sustainable social care services integrated with social protection schemes and allowances covering vulnerable communities, men, women, girls and boys through their lifecycle, and
2. *If* knowledge is available to guide the design, implementation and financing of a comprehensive, right based, gender and disability sensitive, social protection system that guarantees the extension of adequate and sustainable social protection benefits,
3. *If* vulnerable men and women, girls and boys, especially those left behind, are empowered to demand their rights and hold institutions accountable for quality delivery of social care services.
4. *Then* Municipalities will be able to reach universal social protection, in particular to those most at risk of being left behind in line with human rights instruments.

Activities will be informed by knowledge generated during the programme intervention and will come from: i) an in-depth analysis of social protection expenditure and fiscal space including a costing of a proper system at both national and local level and identifying links with the GRB; ii) capacity building to use nationally the social protection Management Information System ; iii) policy support for better integration between health and social protection at national level as well as links to cash assistance programmes to inform local actions.

Given the current underinvestment in Social Protection, as highlighted by the MAPS report, what is needed instead is a fiscal space analysis to examine options to fill the existing financing gaps. This requires first, an estimation of the financing gap, informed by an assessment of existing social protection needs, including the needs for social care services, scenarios how to address these needs and what these measures would cost. This analysis will provide an estimation of the financing gaps by making a comparison of differences between current allocation of resources (or expenditure, including donor funding) on social protection programmes and the required allocation of resources (or expenditure) to fill in the identified gaps in coverage and financing. Second, a fiscal space analysis will provide guidance to the government (and municipalities) on how to create fiscal space to finance economically sustainable social protection system in the country. This will include estimated amounts (as a percentage of the GDP) that can be mobilized from different financing options, examining both existing and potential sources of revenue. The analysis and results will follow the framework provided by the ILO SOCPRO's work on fiscal space. The analysis will propose low and high costs of combined benefit-packages in order to provide several alternatives to the governments. Thus it helps illustrate how a government can gradually move towards universal social protection and increased levels of benefits. In the case of fiscal space analysis, the analysis will provide a summary of different financing options in terms of their timing, political feasibility, and the extent to which they can create fiscal space in the country-specific context. The entire exercise for the financing framework will follow a participative process, based on national dialogue to ensure scenarios and recommendations are based on as large a societal consensus as possible. This analysis is necessary for the government to be able to make informed decision based on evidence regarding its social protection expenditure. Only an adequately financed social protection system will be able to perform its function of protecting the population against life cycle risks, in particular the most vulnerable who do not have the contributory capacity to participate and earn entitlements in the social insurance schemes.

The Universal Health Coverage (UHC) vision is to ensure that everyone has access to needed healthcare services regardless of their place in society and without getting into financial ruin or impoverishment. Against this background, analytical work on household health expenditure patterns and inequality in the use of healthcare services in Albania will be conducted, with focus on children and adolescent under 18 years of age. This will provide evidence for advocacy on achieving universal health coverage (SDG 3.8), including financial risk protection and access to quality health care services for most vulnerable population. This will also reduce financial burden on people living in poverty.

The main assumptions behind theory of change:

- The most recent reform of increasing benefit levels of cash transfer programmes but targeting a narrower group of beneficiaries is a re-prioritization within the given envelope of social protection spending. These measures are insufficient to address the challenge of increasing social protection to all in need.
- There is sufficient political will to allocate the necessary financial resources to ensure no-one in need of social protection is left behind; the approval of the law on social care services in December 2016 and decentralization of functions to LGUs for planning and delivering social care services have put pressure into municipalities and have made them aware of the new role. Vertical dialogue between Central and Local Government has already been established with the signing of a Social Pact in March 2017, which was a symbolic national pledge outlining clear steps and actions to be taken by both central and local governments for the establishment of a system of integrated social care services at local level.
- The central government will revise draft medium-term budget 2020-2022 to provide enough coverage to fund the Social Fund; EU delegation has put this as a key condition for the disbursement of the first fixed tranche of Instrument for Pre-accession Assistance (IPA II) 2014-2020.
- Actions supported through the SDG funding will inform national policies and systems. The Integrated Planning System (IPS) introduced by Government of Albania in the last few years is the main system to set the tools and mechanisms for integrated public policy planning by providing an effective allocation of financial resources. The government has committed to revitalize the Integrated Policy Management Groups (IPMGs), including the thematic group for Inclusion and Social Protection. The purpose of the thematic groups is to steer cross sectoral cooperation at technical level and with development partners, within the specific sectors of the respective priority area.

2.3 Expected results and impact

This programme will ultimately contribute to support Albanian Government translate the policy intent into proper local actions so that men, women, girls and boys living in poverty, or vulnerable situation have access to integrated, quality social care services, by accomplishing the following result:

All women, men, girls and boys, especially those from marginalized and vulnerable groups, are exercising their entitlements to equitable quality services, in line with human rights; and more effective and efficient investments in human and financial resources are being made at central and local levels to ensure social inclusion and cohesion. Lower level results that will help reach the above mentioned are:

Integrated social care services institutional arrangements and coordination mechanisms functional with clear roles and responsibilities at local level in 6 municipalities.

Lack of institutional clarity, roles and responsibilities and lack of coordination among governmental agencies engaged at the local level challenge the implementation of the social care reform. The Joint Programme will support the targeted municipalities to design guidance note, workflows, protocols and effective mechanisms that aim to provide information on how municipalities have adapted their existing institutional and coordination frameworks or established new ones in order to implement integrated social care services. It will support efforts and mobilize municipalities/ each sub-directory and structure around social protection, improve their functioning and promote horizontal and vertical coherence. The guidance note includes information on how responsibility is allocated amongst various levels of government (national, subnational and local)/ municipality (decision making and programmatic structures) for coherent implementation and review of the Integrated social care services. To achieve this the JP will work on the following directions:

- Support municipalities to establish adequate processes, workflows, protocols and effective mechanisms to ensure proper planning and delivery of integrated social care services in 6 municipalities. (UNICEF, UNDP)
- Support LGs to revise and update terms of reference, job descriptions and responsibilities of the teams and officials for social care services planning and management. (UNICEF, UNDP)
- Establish and make functional local intersectoral coordination groups on integrated social care services with representation of related public and private local institutions, including academia and faculties of social work and ensuring vertical coordination with line ministries. (UNDP, UNICEF)
- Support the capacities of national, regional and local government relevant units into better planning and managing Social Fund for social care services as part of the overall budget planning and monitoring processes (UNICEF, UNDP)

Institutional capacities strengthened through training and mentoring for the development of social care plans and accessing the Social Fund. Municipalities will strengthen their capacities in operationalizing social protection policies at local level by developing and costing social care plans which respond to the needs of vulnerable men and women. New innovative models of integrated social services, community-based services for persons with disabilities are to be developed at the local level. MoHSP will be supported to make functional MIS on social care services as part of Social Protection MIS. The programme will support the government to identify and validate with national stakeholders the set of indicators that will be collected, inputted and processed in the system according to the existing legislation on case management practices and social care services delivery. Following selection of indicators, training materials will be developed and capacity building is provided to staff of municipalities. To achieve this the JP will work on the following directions:

- Conduct a mapping of social vulnerabilities with gender lenses in 6 target municipalities with the purpose to map linkages between women's social vulnerabilities-identified needed social services and their reflection in the respective social care plans. (UNW)
- At least four municipalities supported to develop/update and adopt fully costed local social care plans. (UNDP, UNICEF)
- Identify and disseminate best practices and exchange experiences about the development and implementation of social care plan. (UNDP, UNICEF)
- Support 6 local governments in collaboration with MoHSP to make Management Information System on social care services fully functional at national, regional and local level and improve capacities of national and local civil servants on its usage.

Innovative models of integrated social care services piloted, including established local linkages between health and social protection services.

The improvement of management of social services at local level will be supported by the development of human resources and of organizations, including their processes, as well as by the divulging, across Albania, good and innovative practices for providing social services and promoting social protection. A grant scheme will provide the opportunity to support social inclusion of persons with disabilities, Roma and Egyptians not only through training of staff and organizational development, but also by realizing innovative small projects to be realized in selected municipalities and as cooperation of authorities and beneficiaries possibly also civil society organizations. Innovative service delivery is an approach municipality should explore to ensure better and efficient services and nontraditional ways to address vulnerability and exclusion. Elements of good governance such as public transparency and accountability, participatory decision-making will serve to bring municipalities closer to citizens, including vulnerable groups, and render effective services.

To achieve the result the Joint Programme will:

- Develop standards and protocols for the integrated social and health care services and pilot digital tools for each component of care including home visit, first encounter with social or health services, referral, social diagnosis, integrated service records (WHO, UNICEF).
- Develop a regulatory framework to enable the implementation of integrated health and social service models in pilot municipalities and build the capacities of the local intersectoral coordination groups to employ a public health lens in decisions that relate to the health and wellbeing of children, young people and women with disabilities, elderly and wider families (WHO, UNICEF, UNFPA).
- Build the capacities of the primary health care and social care personnel to focus on the most vulnerable including children, young people and women with disabilities, and elderly and prepare individual plan for holistic care using a family centered approach and post training supervision and coaching (WHO, UNICEF, UNFPA).
- Support infrastructure upgrades of designated areas in selected facilities for psychosocial care, disability adjustments of the health facilities, and mobility solutions for the professionals to reach out to families (WHO, UNICEF).
- Support 6 municipalities in setting up social fund and modeling and delivering innovative and integrated health and social care services in implementation of social care plans. (UNDP, UNICEF)
- Support the government to ensure better integration between social care service, health and social protection at national level as well as links to cash assistance programmes to inform local actions. (UNICEF, UNDP, UNFPA, WHO, UNW)
- Support MoHSP to develop and institutionalize standards on monitoring and inspecting integrated social care and health care services. (UNDP, WHO, UNFPA).
- Coordinate with MOHSP and Ministry of Interior on recommendations for standard structures at municipality level in charge of social care planning and delivery (in coordination with STAR).(UNDP)
- Upgrade community social services facilities for providing new inclusive social and health care services with the focus on vulnerable groups. (UNDP, UNICEF)

Vulnerable communities (disaggregated by gender, ethnicity, disability etc.) are empowered to actively participate in decision making and make institutions accountable.

The empowerment of target groups, especially persons with disabilities, Roma and Egyptians and vulnerable women, vulnerable children, migrants and refugees for their capacity to request social protection and access social services is a precondition for improving their social situation and their livelihoods. The achievement of the planned outcome then depends on the supported persons' and groups' preparedness to demand adequate services and to equally access these. This willingness will be supported by contributing to the improvement of a constructive dialogue and culture of participatory decision-making between municipal structures and target groups, the capacity of service providers and beneficiaries to interact effectively and efficiently and establish a culture of mutual dialogue and decision-making.

With the aim to achieve this result the Joint Programme will:

- Provide capacity building for activists and CSOs in the 6 target municipalities on integrated social care services, expenditure monitoring and accountability for gender equality through watchdog monitoring reports. (UNDP, UN Women, ILO)
- Increase participation of vulnerable women and girls in the participatory budgeting practices in 6 target municipalities to better respond to their needs for social services. (UNW)
- Strengthen the capacity of vulnerable groups and their organizations and support them with competitive grants to uphold their rights and hold local institutions accountable for delivering social services. (UNDP)
- Develop and implement a social mobilisation campaign in 6 targeted municipalities to help build trust between service providers and vulnerable communities, families and

children and educational materials for care givers and family members of persons with disabilities (UNICEF, UNFPA)

Financing options for extending social protection coverage and benefits developed and assessed at the national and municipality levels.

The public spending for social inclusion programmes remains modest in Albania. A recent review on local and central public budget spending on social care services conducted by LNB programme in 2018 revealed that the share of this sector's budget to GDP decreased from 1.40% in 2017 to 1.32% in 2018.³¹ Cash transfers continue to constitute about 95% of social protection sector's overall budget. When stripped of cash transfers, the social services budget constituted 0.40% of the whole government budget in 2018. Nevertheless, there is a pattern that shows that local governments are committing increasing resources to social care services at a level that is comparable to that of the central government. To formulate and implement sustainable social protection strategies and policies it is essential to assess the financial requirements that they would entail, so that social protection policy decisions can be based on solid quantitative information. The ILO has developed a wide set of quantitative tools and maintains a comprehensive database, including data and information on coverage and expenditure for all branches of social protection, to assess the financial costs of national social protection floors and programmes and to undertake actuarial valuations of social security schemes. The costing exercise serves as a basis for discussions on strategies to create fiscal space.

The fiscal space analysis offers support to governments to assess financing options for extending social protection coverage and benefits. The fiscal space analysis conducted is rooted in the statement of the SDG target 1.A, which proposes to "ensure significant mobilization of resources from a variety of sources, including through enhanced development cooperation, in order to provide adequate and predictable means for developing countries." Creating fiscal space based on domestic sources is a fundamental part of the every strategy to achieve comprehensive and sustainable national social protection systems. The fiscal space analysis will be also guided by the ILO Fiscal Space Guide, the ISPA (Interagency Social Protection Assessment) tool on social protection financing as well as the module on Financing and Financial Management.

To achieve this result the joint programme will:

- Conduct expenditures and fiscal space analysis, including gender and child sensitive budgeting on establishing social protection floor in Albania. (UNICEF, ILO, UNW)
- Conduct analysis of equity in health utilization and expenditure with focus on MCH services in Albania. (WHO, UNICEF)
- Conduct cost and financial analysis for health insurance coverage for most vulnerable families with children and provision of assistive devices for children with disabilities in Albania. (WHO, UNICEF)
- Capacity building of 6 target municipalities on application of gender and children responsive planning and budgeting of local Medium-term Budget programme (MTBPs). (UNW, UNICEF)
- National dialogue with all stakeholders to discuss and agree on establishment of the social protection floor in Albania (ILO, UNICEF, UN Women).
- Conduct tripartite policy dialogue to present the key findings and recommendations of the fiscal space report and agree on the areas of priority action to reform the social security system, including provision of training to local authorities on self-conducting the fiscal space analysis (ILO).

The programme is situated clearly within Output 2.3 Social Protection in the UNDAF/PoCSD 2017-2021, with linkages to other outputs addressing gender equality and prevention of

³¹ LNB Annual Report 2018.

violence against women, child protection and support for refugees and migrants. It is responding directly to one of the three SDG accelerators identified in the Albania MAPS report.

2.4 Financing

Full implementation of the proposed Joint Programme will require an estimated total of USD \$ 2,000,000 to be mobilised over the implementation period as indicated in box 9 above. The overall resource requirements (anticipated inputs) include: USD \$1,500,000 to be resourced from the Joint SDG Fund (75%); USD \$400,000 (20%) to be resourced from regular or core resources of participating UN agencies to the proposed Joint Programme; and USD \$100,000 (5%) to be potentially resourced from the Albania SDG Acceleration Fund. Moreover, this Programme aims to leverage resources from the government contribution to the Social Fund for the pilot municipalities.

The funds will be utilized by the participating UN agencies to support the development and implementation of activities under this proposed Joint Programme, which as detailed in the respective budget table will include technical support, grants to counterparts, supplies and equipment, procurement services, transport, funds for advocacy, research and studies, programme development and implementing, training activities and staff support.

The detailed breakdown of the funds accompanied by specific activities is included as required. In addition, budget and activities will be included in the Joint Work Plan of Outcome 2/Output 2.3 Social Protection of the Government of Albania and United Nations Programme of Cooperation for Sustainable Development (PoCSD) 2017-2021, formulated and signed jointly by GoA and Heads of contributing UN Agencies and aligned with the planning and budget cycle of relevant GoA ministries and departments.

From the standpoint of cost-efficiency, under the Delivering as One modality in Albania, participant UN agencies will access the UN Albania common systems, including rosters of consultants and providers of development services as well as the support provided by the network of UN Specialized Agencies, Funds and Programmes. In addition, the Joint Programme will make use of the implementation and governance architecture already established and operational under the GoA-UN PoCSD 2017-2021.

The Joint Programme multidimensional approach is reflected through a justified balance of resource allocation prioritizing the local level, granting substantial resources to local government units and the civil society (circa 16 % of total budget) and an adequate level of support to the essential budget post for human resources (circa 12 % of total budget). The size of JP in terms of budget appears to create large impact with a contained use of resources. The programme will leverage government financing through the costing and implementation of local social care plans, social fund and more specifically through the whole work-package no 5, "Financing options for extending social protection coverage and benefits developed and assessed at the national and municipality levels".

The programme provides durable solutions for the beneficiaries and simultaneously it also creates a model that is transforming previous disconnected integration efforts into a coordinated and integrated model on social protection.

At least 50% of the budget will be allocated to gender equality and women's empowerment. This indication is also in line with Gender Marker 2 of the Output 2.3 Social Protection under the Outcome 2 Joint Work Plan 2019-2020.

2.5 Partnerships and stakeholder engagement

All stakeholders involved are drivers of change, and so are the regulatory framework and the policies and strategies for the coming years, in which social inclusion and protection are streamlined concern. The proposed programme intends to empower central government entities, municipalities, the vulnerable groups and the civil society organisations to further advance the protection at the local level in Albania. It is the Albanian actors who, in the long

run, are to guarantee social protection without foreign support. At the same time, it is to be noted that currently, international organisations, together with Albania's intention to make progress in the EU accession process, are to also be considered main drivers of change regarding social inclusion and social protection. The Government of Albania is supported by the UN Programme of Cooperation for Sustainable Development (PoCSD) 2017-2021, guided by a rights-based and inclusive approach and fully aligned to country strategic priorities. One of the four outcomes (Outcome 2) focuses on social cohesion: Health, education, social protection, child protection, and gender-based Violence. Other donors, such as the EU, WB, GIZ, Italian Cooperation, Austrian Cooperation, USAID and, last not least, Swiss Development Cooperation (SDC). SDC, in its Albania Cooperation Strategy 2014-2017, puts emphasis on better provision of socially inclusive services through an advanced decentralisation reform and strengthened local democracy.

UN agencies are currently among the major players in supporting social inclusion, social protection, the decentralisation and local/regional governance in Albania. Regarding the constraints, they are not to be identified in single actors. Lacking financial capacities and otherwise defined priorities, municipalities might not actively promote social protection. While the legal framework for social cohesion, inclusion and protection as well as local governance and decentralisation are in place and efforts at central and local level are being made to absorb and implement social protection and social inclusion, this implementation is slow. It is hindered by: i) the capacities of organizational units and of individual staff, including the understanding of the needs of vulnerable and marginalized groups; ii) the lack of services offered (regarding quantity, quality, and specialization); and iii) as an underlying problem, the lack of funding for social protection and social inclusion. Besides these structural issues, they are also comprised of the fact that the central priority of the country is economic development (and, for political parties, the control of the state apparatus), there are social dimension who constrain social inclusion. The partly negative perception of the proposed programme's target groups by the society at large is the problem that authorities, service providers and the programme are faced with. Such perceptions do not prevent actors involved in social protection to be active, but they are a frame condition that is to be taken into consideration – and that is to be worked on whenever possible.

Albanian governmental authorities

Albanian authorities are the major type of stakeholder and lead actor in the implementation of the IMSPSD programme. They are to define the framework for social protection and service provision and they are to provide respective services through the social fund and other means. The Ministries involved in the definition of the respective regulatory framework understand themselves as the main owners of the social inclusion processes and social protection in Albania. Their cooperation is to improve, their capacity to innovate is to be developed – regarding concepts and mechanisms, including the participation of target groups and civil society organisations in the planning, decision making and provision of social protection services – and the provision of adequate funding is to be guaranteed.

Ministries

The Ministry of Health and Social Protection has the leading role in social protection and is the key partner during the planning, implementation, monitoring and evaluation of this programme. The new Law on Social Care Services grants the MHSP the responsibility to organize and administer social care services in accordance with legal requirements and relevant standards. State Social Services (SSS), and the Inspectorate for Social Care Services (ISCS) are responsible for the monitoring of implementation of the legislation on social care and social care standards. SSS also serves as a key intermediary between national and local government authorities. The SSS is also expected to play a crucial role in the development of capacities of local government staff in charge of providing social care services. The new Law on Social Care Services places a great importance on the professional development of practitioners who provide social care services, offered from both public and non-public providers. A new system for accreditation, certification, and continuous education of professionals is expected to be established under the auspices of the MHSP – which will need

support as the governing and administrative tool for the proper functioning. Integrated social care services institutional arrangements and coordination mechanisms, roles and responsibilities will be guided for preparation by MHSP. In addition, MHSP will be the lead stakeholder during the development of financing options for extending social protection coverage and benefits at the national and municipality levels.

Institute of Statistics

The Institute of Statistics (INSTAT) will play a critical role in measuring and monitoring the evolution of social exclusion over time. (The Social Inclusion Policy Document specifies the methodology of monitoring the policy domains of financial poverty and social protection, employment and skills, health, education, housing and deprivation of basic needs, and social participation and human rights as those where progress has to be made). The new social inclusion policy framework requires also shifting towards the current measurement of poverty based on consumption (Living Standards Measurement Study, LSMS). INSTAT, has already piloted an income approach to measuring deprivation based on the Statistics on Income and Living Conditions (SILC) that is the commonly used statistical tool in EU. The Institute of Statistics is one of the co-chairs of the Statistical Indicators and Integrity Group (SIIG). SIIG is co-chaired by the Director of the Department for Social Inclusion and Gender Equity (DSIGE) in the Ministry of Social Welfare and Youth and Head of INSTAT. SIIG will draw on high-level participation from the main government institutions with responsibilities for social protection, employment and enterprise development, health, education, housing, justice and human rights plus representatives from academia and think tanks.

Municipalities

The 61 Albanian municipalities will be the main partners of the joint programme on the side of authorities, alongside central government units. The LGUs' increased responsibilities under the decentralisation and social care reforms will make them more receptive to collaboration with the international organisations, donors, central government and national government on delivering results on social protection. The improvement of their capacities to deliver adequate (social) services is a main requirement for improving social inclusion in Albania.

State Agency for Children's Right Protection (SACHRP)

SACHRP is the national agency in charge of monitoring the implementation of national legislation and policies on protection of children's rights in partnership with relevant national and local authorities as well CSOs and other service providers ensuring child's protection. It cooperates and coordinates work with Child Protection Units (CPUs) set up in LGUs for collecting and sharing data to monitor child's protection at local level.

Vulnerable communities

Many people in Albania remain vulnerable to social exclusion and are unable to fully participate in society, having limited access to resources, rights and services available to the majority population, and remaining trapped in the poverty cycle.³² Both INSTAT and World Bank data show increases in the income poverty rate since the 2008 global financial crisis. The national poverty headcount (defined as those consuming less than 4891 lek/month, in 2002 prices) rose from 12.5% in 2008 to 14.3% in 2012, due to increases in urban poverty.³³ The poverty rate in 2012 for households with children between the ages of 6 and 10 was 21%; for households with children under six years of age it was nearly 23%.³⁴ INSTAT data also indicate that less than one third of Albania's youth have been employed since 2012. Unemployment rates increased sharply during 2012-2014, particularly for youth. While these have fallen since

³² Levitas, R., Pantazis, C., Fahmy E., Gordon, D., Lloyd E., Patsios, D., The multi-dimensional Analysis of Social Exclusion, University of Bristol, 2007.

³³ Global SDG indicators 1.1.1 and 1.2.1 (both Tier I indicators) call for national monitoring of poverty reduction vis-à-vis international and national poverty lines, respectively. SDG indicator 1.2.2 calls for national monitoring of "men, women and children of all ages living in poverty in all its dimensions according to national definitions".

³⁴ UNICEF/ESA (2016), Child Well-Being in Albania, <https://www.unicef.org/albania/sites/unicef.org.albania/files/2019-01/Child%20Well-Being%20in%20Albania.pdf>

2015, the weak recovery in employment rates underscores the continuing importance of labour market inclusion for women, youth, Roma, Egyptians, persons with disabilities and other vulnerable population groups. Almost 30% of 15-29 year-olds in Albania are not in education, employment, or training (NEET). Three out of four unemployed young workers are classified as long-term unemployed. This is compounded by high rates of labour migration; for instance, in 2015, an estimated 2.9 million Albanians lived in the country and 1.1 million lived abroad³⁵.

Inequalities within Albania and among municipalities remain high. Roma and Egyptians, people with disabilities, children in large families, elderly, and residents of rural and remote communities face the greatest risks of being left behind. The most recent official data (from 2012) indicate that poverty in Albania has been increasing; the relatively small shares of GDP devoted to social services and social protection may have contributed to this.³⁶

Specialized Civil Society Organizations (CSOs)

Currently, civil society organisations are the primary providers of social protection services. While under the social care reform, the local government is expected to play a key role in managing these services, the involvement of civil society in the provision of services will continue to be central for years to come. Thus, under the guidance of national authorities, local governments need to foster and formalize partnerships and modalities of collaboration with civil society. Civil society organisations are also expected to be important partners of this joint programme, in particular for the capacity support offered to local and national government. The joint programme will also draw on lessons learned from civil society organisations to provide quick fix solution and address extreme marginalization. Successful models will be replicated in other municipalities with the purpose of systematically addressing marginalization and exclusion. A certain resistance may be expected from some organisations as the social care reform may result on donation shifts, reorganisations of services, as well as greater control from government authorities on the standards of service delivery. Overall, civil society organisations are donor dependent and donor driven in their activities and access to government funds has been negligible. However, this situation is slowly changing since the establishment of the (state) Agency for the Support of Civil Society (ASCS) in 2010 and started providing financial assistance through calls for proposals in thematic priority areas including advocacy, human rights, civic engagement in influencing policy-making at central and local level.

Roma and Egyptian Civil Society Organisations

Roma and Egyptian civil society organisations and those representing their interests have been identified as a key partner in ensuring that public social protection services reach the most vulnerable communities. The Roma and Egyptian Civil Society Organisations – they represent Roma and Egyptians separately – are mainly based in Tirana. Most of their activities are in support of the protection of the rights of Roma and Egyptians and increased participation in decision-making, lobbying and advocacy about the minority rights with international institutions, central and local governments. Very few of them focus on activities that address priority needs for Roma and Egyptian communities such as social, healthcare and education services, facilitation of civil registration, identification of emergency housing situations and employment opportunities. Studies show that around 60% of the Roma and Egyptian CSOs does not have any permanent staff, 12.5% have declared one person as permanent staff and only 5% inform to employ 2 persons. About 80% of the CSOs are not currently implementing any joint programme or running any activity.³⁷

Organisations of persons with disabilities

³⁵ UNDESA, 2015, 2017, World Population Prospects, https://esa.un.org/unpd/wpp/publications/files/wpp2017_keyfindings.pdf

³⁶ UN, Albania MAPS Report 2018, <http://www.un.org.al/publications/mainstreaming-acceleration-and-policy-support-achieving-sustainable-development-goals>

³⁷ UNDP/HDPC, *Capacity and needs assessment of Roma and Egyptian NGOs*, 2016

The community of persons with disabilities and the organisations of persons with disabilities are well placed to raise awareness about the reform processes, explain the relevance of interventions to potential participants, inform about any problems in implementation, record lessons learned from policy implementation and monitor and evaluate the impact of implemented measures. Organisations of persons with disabilities have made efforts to influence relevant policy and legislative processes, but in general they lack expertise in strategic planning, advocacy, internal organisation and leadership skills. These organisations face difficulties with resource mobilization and financial sustainability, though some do receive state funding. In general, their members have limited ability to pay fees and they mainly rely on donor funding, which is temporary and joint programme based. In addition, organisations of persons with disabilities suffer from fragmentation and lack of networks to ensure better coordination of their activities. Persons with mental and intellectual impairments are less likely to be organised and represented by existing organisations, and associations of youth with disabilities are almost inexistent.

CSOs specialized in supporting children and families

CSOs specialized in supporting children and families are active in the area of child rights protection and are identified as key partners to provide advocacy, family outreach services, community-based day care service, capacity building for empowerment of parents, daily “case management” and follow up, coordination between various actors and services, promoting intersectoral action, etc.

Involvement of PUNOs

The joint programme will be carried out by the involved UN Organisations through their Delivering as One mechanism. Together with actors representing central and local state levels, and with civil society organisation that provide social protection services and that defend and promote the interests of socially excluded persons and groups. The implementation modality of the joint joint programme will be affiliated within the overall architecture of the DaO approach, ensuring that activities are coordinated with Outcome 2 strategic deliverables as presented biannually in support of PoCSD. The joint programme logframe provides for the general framework and indicative deliverables that will be further fine-tuned and annualized in relevant annual work plans over a time frame of two years (2020-2021). UNDP will be the leading UN agency for the overall implementation and coordination of the joint programme. Each participating UN agency will implement activities and outputs as defined in the respective joint work plans agreed for the respective roles and responsibilities in line with their mandate and expertise.

1. **UNDP** will focus its work on building on the results of previous joint programmes focusing on: i) Strengthening institutional capacities of municipalities through training and mentoring for the development of social care plans and accessing the social fund; ii) Designing and piloting innovative models of integrated social care services, including established local linkages between health care/ insurance, cash transfer and social protection services; iii) Empowering vulnerable communities (disaggregated by gender, ethnicity, disability etc.) to demand rights and hold institutions accountable for quality delivery of social care services’ iv) institutional strengthening and capacity building of LGUs and CSOs on service delivery, planning, budgeting, monitoring and inspecting in the field of social protection; v) innovative approaches and partnerships by LGUs to provide integrated social care services to R & E and people with disabilities; vi) civic engagement, advocacy and networking to promote social protection at local level; vii) strengthening capacity of CSOs representing the most marginalized populations in community mobilization, advocacy and policy dialogue to enable the targeted groups demand for their rights and social services by capitalizing on resources, outputs, expertise, results and experiences of the Joint Programme Leave No One Behind and the EU funded joint programme ESERE (Economic and Social Empowerment of Roma and Egyptians) implemented by UNDP and other UN agencies.

2. **UNICEF** intends to build further on its current contribution to provide policy advice to the legislative and policy framework of reformed system of social care services. UNICEF will provide technical assistance to LGUs to implement Albania's new legal framework on social care services, the revised action plan of Social Protection 2019 – 2022, including alignment with the new Law on Child Rights and Protection through: i) supporting LGUs to develop tools, structures and mechanism for the adequate and budgeting and monitoring of social protection services in the 6 targeted LGUs, with an explicit focus on the most vulnerable families including innovative coordination and referral mechanism for integration of social care and health services; (ii) support LGUs to build the adequate structures for delivery and monitoring of health and social care services, including piloting and dissemination of effective solutions for quality health and social care services (iii) Expand and operationalize Management Information System; iv) standardization and scaling up of training and orientation programmes for health workers, social protection workers, and social care practitioners v) explore and propose financing options for better equity financing and spending in health and social care including building national consensus on social protection floor.
3. **UN Women** will contribute to the process of institutional capacities strengthening for the development of engendered social care plans by initially i) conducting a mapping of social vulnerabilities with gender lenses in 6 target municipalities with the purpose to map linkages between women's social vulnerabilities-identified needed social services and their reflection in the respective social care plans; ii)empowering vulnerable women and girls so that they demand their rights and hold institutions accountable for quality delivery of social care services; iii) direct work with vulnerable women in the communities to increase their participation in the participatory budgeting practices in 6 target municipalities to better respond to their needs for social services. Jointly with UNICEF and FAO, UN Women will also iv) review and analyze financing options for extending social protection coverage and benefits by conducting expenditures and fiscal space analysis with gender lenses, on establishing social protection floor in Albania and starting a v) national dialogue with all stakeholders to discuss and agree on establishment of the social protection floor in the country. Finally, UN Women will continue its support to municipalities for on vi) application of gender and children responsive planning and budgeting of local Medium-term Budget programs.
4. **WHO** will contribute in strengthening LGUs' capacities to: i) Conduct analyses/ costing of models of integrated social care services linking health and social protection; ii) Pilot Universal Home Visiting programme for health and social care services in 3 LGUs; iii) Improve capacities of municipality staff, service providers and decision makers to establish linkages between health and social protection.
5. **UNFPA** builds on its comparative advantages in data, population dynamics, reducing inequalities in health and education, will contribute towards: i) building capacities at local level to address social determinants of health and reduce health inequities through "health in all" policies, social protection and universal health coverage approaches; ii) Supporting the government to design and endorse guidelines, Orders of Ministers to ensure better integration between health and social protection at national level as well as links to cash assistance programmes to inform local actions.
6. **UNHCR** will support the joint programme with technical advice in providing solutions and coordination mechanisms for the addressing the gaps in providing social services to refugees and asylum seekers. It is necessary to continue to fully mainstream refugees' solutions in the SDGs given that structural barriers preventing the complete and effective integration of refugees in the county persist due to lack of resources.
7. **ILO** will continue its support by building on the [Social Protection Floors Recommendation, 2012 \(No. 202\)](#) which provides guidance to member States in

building comprehensive social security systems and extending social security coverage by prioritizing the establishment of national floors of social protection accessible to all in need. It will contribute to: i) Conducting expenditures and fiscal space analysis, including GRB on establishing social protection floor in Albania; ii) Organizing a national conference to discuss and agree on the Social protection floor level; iii) Conduct of tripartite policy dialogue to present the key findings and recommendations of the fiscal space report and agree on the areas of priority action to reform the social security system; and iv) Training and coaching national and local authorities on self-conducting the fiscal space analysis.

The Joint Programme will ensure a cohesive coordinated UN approach through internal coordination mechanism in targeting different municipalities to ensure a critical mass of support and increase chances of success. It will ensure a strategic integration and cohesion with other UN agencies as well as with development partners working in Albania in the areas of social inclusion and protection, public administration and local governance. A coordination platform with UN agencies, donors and other joint programmes targeting local governance and social protection will be established to coordinate intervention, avoid overlapping and maximize synergies and results. In this context, higher-level coordination will be facilitated by Ministry of Health and Social Protection in its overall efforts to chair and coordinate all partners' efforts under the Integrated Planning and Management Group (IPMG) on Employment and Social Sector and Outcome 2 of the Programme of Cooperation for Sustainable Development (PoCSD).

The dynamic to be created in JP implementation will be used to nurture **Peer-Learning initiatives on social protection**. This group of practitioners in UN Albania will engage in a platform for learning and sharing amongst PUNOs and UNCT. It will also facilitate a broader engagement with government and civil society partners in peer-learning and sharing of experiences, scalable good practices and solutions, and lessons learned (including on bottlenecks and challenges).

3. Programme implementation

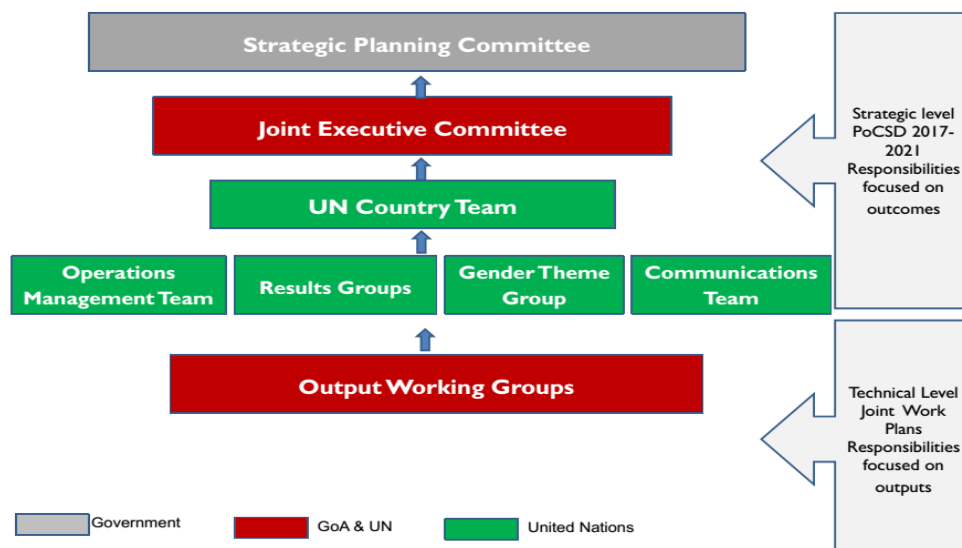
3.1 Governance and implementation arrangements

The Programme will be implemented through the Delivering as One mechanism, under the framework of the Programme of Cooperation for Sustainable Development 2017-2021 (UNDAF), specifically with reference to Outcome 2 Social Cohesion (output 2.3 Social Inclusion and Protection), with the joint participation of four UN agencies (UNDP, UNICEF, UN Women and WHO), and with the contribution of ILO, UNFPA and UNHCR alongside other UN agencies Albania, relevant governmental bodies at the central and local levels, independent institutions, relevant international community and CSOs.

The logframe of this Programme provides for the general framework and indicative deliverables that will be further fine-tuned and annualized in UNDAF/PoCSD Outcome 2 Joint Work Plan, prepared by relevant UN agencies and government counterparts, and signed by the UN Resident Coordinator, the Outcome 2 chairs – UNICEF Representative, UNDP Resident Representative and Minister of Health and Social Protection – and the Heads of contributing UN agencies (including the lead and implementing UN agencies of this Programme).

Below is a graphical presentation of the UN in Albania joint management arrangements as indicated in the PoCSD 2017-2021, which will be applied as well to this Programme.

Joint Management Arrangements



The four participating UN agencies (UNDP, UNICEF, UN Women and WHO), supported by UNFPA, ILO and UNHCR, will work in close partnership with relevant governmental bodies at central and local level. UNDP will be the lead UN agency for the overall implementation and coordination of the joint programme. From the standpoint of cost-efficiency, under DAO modality in Albania, participant UN agencies will access the UN Albania common systems and the support provided by the network of UN Specialized Agencies, Funds and Programmes.

The Ministry of Health and Social Protection is the key government authority that leads and regulates policies in the area of social protection. The Ministry will be the lead national governmental partner, and co-chair the joint programme Steering Committee. The Ministry is responsible for the roll-out of the Social Fund, for which a key task is managing the central level matching contributions to municipal social protection proposals.

To ensure a coordinated approach in the drafting, consultation and implementation of this Programme a **Technical Committee** was established (Aug.14), consisting of the technical experts of the four participating agencies and the 2 supportive UN agencies and UN RCO staff. The Technical Committee will meet at least 4 times per year and will be responsible to provide updates to the Resident Coordinator and the Heads of relevant UN agencies (i.e. Steering Committee) on the practical implementation of the Programme interventions by the UN agencies and ensure that results are delivered timely and efficiently.

A Steering Committee (SC) will be established to oversee and coordinate the operations of this Programme, taking all necessary strategic decisions based on the JP's initial plan and budget as well as monitoring data. It will provide policy guidance and recommendations regarding the JP's strategy and objectives, receive and comment on annual reports, approve annual plans of operation and reports, and participate in the evaluation of the JP. The SC will meet at least twice a year and as needed. The SC will be chaired by the RC and composed of senior representatives of the participating UN agencies, a senior representative of MoHSP, senior representatives of 6 municipalities, and at least two representatives of CSOs.

As Programme implementation will be based on a structure of several institutions and organizations that cooperate and interact with one another, the Steering Committee will keep a close watch on institutional relations and be ready to pro-actively intervene to avoid bottlenecks developing. Performance indicators will have to be constructed so as to flag such issues quickly triggering corrective measures.

Given that the bulk of proposed activities of the JP will take place at local level, a major risk is therefore around local political commitment, local financial resource availability and local capacity. One way to safeguard ownership, strategic relevance and therefore sustainability of the intervention, is the early and continuous engagement of UN teams with local stakeholders in shaping together and implementing the priority interventions and modalities of cooperation with distinct roles and responsibilities. In addition, local level might suffer from high staff turnover as a result of the 2019 local election, resulting in a loss of knowledge and know-how and in slow implementation. The support to organizational development is a means to anchor innovation at institutional level, thus allowing newcomers to adopt practices introduced by the joint programme.

The sustainability of the Programme's investments and effects and the scaling-up of successful practices and innovations will be a constant concern of the Programme. Several approaches and methods will be applied to contribute to the durability of the Programme's interventions: (i) Full alignment on national policies and strategies; Investments in actors, processes and persons; Support for increasing funding of social services; Promotion of community based social services. The concern for sustainability will also be reflected in the fact that no parallel systems will be introduced. The Programme will capacitate existing state structures and civil society organisations to implement strategies and to provide services. It will support the improvement of the interface between state and civil society actors, since both types of actors participate in service delivery, e.g. by facilitating contacts between them, showcasing good practices, proposing forms of cooperation and supporting such cooperation in view of improved service delivery.

3.2 Monitoring, reporting, and evaluation

Reporting on the Joint SDG Fund will be results-oriented, and evidence based. Each PUNO will provide the Convening/Lead Agent with the following narrative reports prepared in accordance with instructions and templates developed by the Joint SDG Fund Secretariat:

- *Annual narrative progress reports*, to be provided no later than one (1) month (31 January) after the end of the calendar year, and must include the result matrix, updated risk log, and anticipated expenditures and results for the next 12-month funding period;
- *Mid-term progress review report* to be submitted halfway through the implementation of Joint Programme³⁸; and
- *Final consolidated narrative report*, after the completion of the joint programme, to be provided no later than two (2) months after the operational closure of the activities of the joint programme.

The Convening/Lead Agent will compile the narrative reports of PUNOs and submit a consolidated report to the Joint SDG Fund Secretariat, through the Resident Coordinator.

The Resident Coordinator will be required to monitor the implementation of the joint programme, with the involvement of Joint SDG Fund Secretariat to which it must submit data and information when requested. As a minimum, joint programmes will prepare, and submit to the Joint SDG Fund Secretariat, 6-month monitoring updates. Additional insights (such as policy papers, value for money analysis, case studies, infographics, blogs) might need to be provided, per request of the Joint SDG Fund Secretariat. Joint programme will allocate resources for monitoring and evaluation in the budget.

Data for all indicators of the results framework will be shared with the Fund Secretariat on a regular basis, in order to allow the Fund Secretariat to aggregate results at the global level and integrate findings into reporting on progress of the Joint SDG Fund.

PUNOs will be required to include information on complementary funding received from other sources (both UN cost sharing, and external sources of funding) for the activities supported

³⁸ This will be the basis for release of funding for the second year of implementation.

by the Fund, including in kind contributions and/or South-South Cooperation initiatives, in the reporting done throughout the year.

PUNOs at Headquarters level shall provide the Administrative Agent with the following statements and reports prepared in accordance with its accounting and reporting procedures, consolidate the financial reports, as follows:

- Annual financial reports as of 31st December each year with respect to the funds disbursed to it from the Joint SDG Fund Account, to be provided no later than four months after the end of the applicable reporting period; and
- A final financial report, after the completion of the activities financed by the Joint SDG Fund and including the final year of the activities, to be provided no later than 30 April of the year following the operational closing of the joint programme activities.

In addition, regular updates on financial delivery might need to be provided, per request of the Fund Secretariat. Also, the joint annual UN Progress Report will include results from this Programme under the narrative of implementation progress of the Outcome 2 Social Cohesion/Output 2.3 Social Inclusion and Protection.

After completion of the joint programmes, a final, *independent and gender-responsive*³⁹ *evaluation* will be organized by the Resident Coordinator. The cost needs to be budgeted, and in case there are no remaining funds at the end of the joint programme, it will be the responsibility of PUNOs to pay for the final, independent evaluation from their own resources.

The joint programme will be subjected to a joint final independent evaluation. It will be managed jointly by PUNOs as per established process for independent evaluations, including the use of a joint evaluation steering group and dedicated evaluation managers not involved in the implementation of the joint programme. The evaluations will follow the United Nations Evaluation Group's (UNEG) Norms and Standards for Evaluation in the UN System, using the guidance on Joint Evaluation and relevant UNDG guidance on evaluations. The management and implementation of the joint evaluation will have due regard to the evaluation policies of PUNOs to ensure the requirements of those policies are met and the evaluation is conducted with use of appropriate guidance from PUNOs on joint evaluation. The evaluation process will be participative and will involve all relevant programme's stakeholders and partners. Evaluation results will be disseminated amongst government, development partners, civil society, and other stakeholders. A joint management response will be produced upon completion of the evaluation process and made publicly available on the evaluation platforms or similar of PUNOs.

3.3 Accountability, financial management, and public disclosure

The Joint Programme will be using a pass-through fund management modality where UNDP Multi-Partner Trust Fund Office will act as the Administrative Agent (AA) under which the funds will be channeled for the Joint Programme through the AA. Each Participating UN Organization receiving funds through the pass-through has signed a standard Memorandum of Understanding with the AA.

Each Participating UN Organization (PUNO) shall assume full programmatic and financial accountability for the funds disbursed to it by the Administrative Agent of the Joint SDG Fund (Multi-Partner Trust Fund Office). Such funds will be administered by each UN Agency, Fund, and Programme in accordance with its own regulations, rules, directives and procedures. Each PUNO shall establish a separate ledger account for the receipt and administration of the funds disbursed to it by the Administrative Agent.

³⁹ [How to manage a gender responsive evaluation, Evaluation handbook](#), UN Women, 2015

Indirect costs of the Participating Organizations recovered through programme support costs will be 7%. All other costs incurred by each PUNO in carrying out the activities for which it is responsible under the Fund will be recovered as direct costs.

Funding by the Joint SDG Fund will be provided on annual basis, upon successful performance of the joint programme.

Procedures on financial transfers, extensions, financial and operational closure, and related administrative issues are stipulated in the Operational Guidance of the Joint SDG Fund.

PUNOs and partners must comply with Joint SDG Fund brand guidelines, which includes information on donor visibility requirements.

Each PUNO will take appropriate measures to publicize the Joint SDG Fund and give due credit to the other PUNOs. All related publicity material, official notices, reports and publications, provided to the press or Fund beneficiaries, will acknowledge the role of the host Government, donors, PUNOs, the Administrative Agent, and any other relevant entities. In particular, the Administrative Agent will include and ensure due recognition of the role of each Participating Organization and partners in all external communications related to the Joint SDG Fund.

3.4 Legal context

This Joint Programme, in respect of each of the United Nations system agencies signing, will be read, interpreted, and implemented in accordance with and in a manner that is consistent with the basic agreement between such United Nations system agency and the Host Government.

Agency	Agreement	Date signed
UNDP	Standard Basic Assistance Agreement (SBAA) between the Government of Albania and UNDP	17 June 1991
UNICEF	Basic Cooperation Agreement (BCA) with the Government of Albania	23 July 1993
UN WOMEN	Exchange of letters stating that mutatis mutandis the Standard Basic Assistance Agreement (SBAA) between the Government of Albania and UNDP applies	17 June 1991
WHO	Biennial Collaborative Agreement (BCA) between the Ministry of Health of Albania and the Regional Office for Europe of the World Health Organization for the period 2016-2017.	19 May 2016

D. ANNEXES

Annex 1. List of related initiatives

Name of initiative/project	Key expected results	Links to the joint programme	Lead organization	Other partners	Budget and funding source	Contract person (name/email)
<p>UN Joint Programme Leave No One Behind for Social Inclusion (2017-2021) (LNB)</p>	<p>-Empowered persons with disabilities, Roma and Egyptians, and vulnerable women, to request and have access to social services, as a pre-condition to improve their lives. -Enabled municipalities to effectively manage the provision of rights-based social services and promote social inclusion. -Enhanced capacities of national institutions to implement their policy framework, to fund and provide social services</p>	<p>The programme will ensure a strategic integration and cohesion with LNB project at the national and local level working in the area of human security, human rights and social care, protection and employment.</p> <p>Knowledge generated will be transferred from LNB to the programmes.</p> <p>Different targeted municipalities.</p>	<p>UNDP Albania</p>	<p>UNICEF UN Women UNFPA</p>	<p>\$2,632,435</p> <p>Swiss Development Cooperation (SDC)</p> <p>United Nations Development Programme</p> <p>Government of Albania</p> <p>Mptf-sdgs Acceleration Fund for Albania</p>	<p>Entela Lako, UNDP Programme Specialist</p> <p>Entela.lako@undp.org</p>
<p>Support to Employment and Social Services for Vulnerable Youth and Women in Northern Albania</p>	<p>The project sets out to boost youth employment in the selected areas by introducing tailor-made entrepreneurship training programs. It will moreover address migration through youth support and skills development, and thus provide better opportunities for young persons to pursue a sustained living in their own towns. The role of local public institutions will be crucial to the project success.</p>	<p>The programmes will ensure a strategic integration and cohesion in the area of human security, human rights and employment.</p> <p>Knowledge generated will be transferred between the programmes.</p>	<p>UNDP Albania</p>		<p>\$450,417</p> <p>Foreign Common Wealth Office</p>	<p>Eno Ngjela, Programme Specialist</p> <p>eno.ngjela@undp.org</p>

<p>STAR 2 - Consolidation of the Territorial and Administrative Reform</p>	<p>Ensure functionality of the newly established local government units (LGUs) so that local administrative and service delivery outcomes are effective, qualitative, participatory and inclusive, and correspond to evolving decentralized competencies and responsibilities.</p>	<p>The programmes will ensure a strategic integration and cohesion in the area of institutional strengthening and decentralization.</p> <p>Knowledge generated will be transferred between the programmes.</p>	<p>UNDP Albania</p>	<p>EU</p>	<p>\$7,918,218 European Union, the Government of Sweden through Swedish International Development Agency, the Government of Italy through Italian Development Cooperation, Swiss Government through Swiss Development Cooperation, the United States through the United States Agency for International Development and UNDP and the Government of Albania.</p>	<p>Vladimir Malkaj, Programme Specialist</p> <p>vladimir.malkaj@undp.org</p>
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<p>Regional Local Democracy Programme (ReLOaD)</p>	<p>The Programme aims to strengthen participatory democracies and the EU integration process in the Western Balkans by empowering civil society to actively take part in decision making and by stimulating an enabling legal and financial environment for civil society and pluralistic media. More over its objective is to strengthen partnerships between local governments and civil society in the Western Balkans by scaling-up a successful model of transparent and project-based Civil Society Organisations (CSO) funding from local government budgets towards greater civic engagement in decision-making and improvement of local service delivery.</p>	<p>The programmes will ensure a strategic integration and cohesion in the area of civil society participation.</p> <p>Knowledge generated will be transferred between the programmes.</p>	<p>UNDP Albania</p>	<p>EU</p>	<p>\$589,082</p> <p>EU UNDP Government of Albania</p>	<p>Entela Lako, UNDP Programme Specialist</p> <p>Entela.lako@undp.org</p>
<p>United Nations Joint Programme Ending Violence against Women in Albania (EVAWIA)</p>	<p>(1) A strengthened normative and accountability framework related to GB-VAW; (2) Improved institutional practices, services and coordination for survivors of GB-VAW; and (3) Challenged norms pertaining to GB-VAW at the state, community and individual levels.</p>	<p>The programmes will ensure a strategic integration and cohesion in the area of women/ gender related issues.</p> <p>Knowledge generated will be transferred between the programmes.</p>	<p>UNDP Albania</p>	<p>UN Women, UNFPA</p>	<p>1,967,417 \$</p> <p>Sweden Government</p>	<p>Entela Lako, UNDP Programme Specialist</p> <p>Entela.lako@undp.org</p>
<p>Western Balkan Countries and Turkey and</p>	<p>1.The adoption of frameworks addressing gender- based discrimination and violence against women (VAW), aligned</p>	<p>The programmes will ensure a strategic integration and</p>	<p>UN Women</p>	<p>EUD</p>	<p>450000EU</p>	<p>Estela Bulku UN Women Programme Specialist</p>

<p>Turkey - Multi-beneficiary (regional) project Albania, Bosnia and Herzegovina, Kosovo, FYR Macedonia, Montenegro, Serbia" ALBANIA</p>	<p>with international normative standards as enshrined in CEDAW and the Istanbul Convention, as well as the European Union (EU) "acquis communautaire", are crucial to address impunity, and convey the message that VAW is not tolerated</p> <p>2. Strengthening women's organizations, including through capacity building, to hold governments accountable, advocate for effective implementation, and monitor to prevent and respond to VAW is imperative. Addressing the root and structural causes of gender inequality, and violence against women as one of its most pervasive expressions, requires a transformative change in society and communities' beliefs and perceptions on discriminatory gender stereotypes.</p> <p>3. Protection, prevention and response to VAW is closely interlinked with availability and access to comprehensive, coordinated, inter-disciplinary, and sustained multi-sectoral services and its demand from the survivors/victims' side.</p>	<p>cohesion in the area of civil society participation.</p> <p>A network of 48 organizations was established, which is actively involved in ensuring compliance with international standards, and an enabling legal and policy environment for victims of all forms of violence against women and girls in line with IC. Targeted local government structures are actively monitored in their responsibilities to implement the National Strategy on Gender Equality, specifically on dealing with VAWG,</p> <p>Knowledge generated will be transferred between the programmes.</p>				<p>estela.bulku@unwomen.org</p>
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<p>UN Women</p>	<p>1.Supporting the key government institutions at national and local levels to gain knowledge and tools to analyze, formulate and execute gender-responsive plans and budgets; 2. Providing the tools to the key institutions to monitor budget allocations and tracking of expenditures as well as raising the capacities of the women's groups to track budget allocations and expenditure from a gender respective;</p>	<p>Knowledge generated will be transferred between the programmes in interventions related to Gender responsive Budgeting</p>	<p>UN Women</p>			<p>Ermira Lubani GRB Regional Project Manager ermira.lubani@unwomen.org</p>
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Annex 2. Overall Results Framework

2.1. Targets for Joint SDG Fund Results Framework

Joint SDG Fund Outcome 1: Integrated multi-sectoral policies to accelerate SDG achievement implemented with greater scope and scale

Indicators	Targets	
	2020	2021
1.1: integrated multi-sectoral policies have accelerated SDG progress in terms of scope ⁴⁰	2	2
1.2: integrated multi-sectoral policies have accelerated SDG progress in terms of scale ⁴¹	2 municipalities	6 municipalities

Joint SDG Fund Output 3: Integrated policy solutions for accelerating SDG progress implemented

Indicators	Targets	
	2020	2021
3.1: # of innovative solutions that were tested ⁴² (disaggregated by % successful-unsuccessful)	1	2
3.2: # of integrated policy solutions that have been implemented with the national partners in lead	1	2
3.3: # and share of countries where national capacities to implement integrated, cross-sectoral SDG accelerators has been strengthened	1	1

Joint SDG Fund Operational Performance Indicators

- Level of coherence of UN in implementing programme country⁴³
- Reduced transaction costs for the participating UN agencies in interaction with national/regional and local authorities and/or public entities compared to other joint programmes in the country in question
- Annual % of financial delivery
- Joint programme operationally closed within original end date
- Joint programme financially closed 18 months after their operational closure
- Joint programme facilitated engagement with diverse stakeholders (e.g. parliamentarians, civil society, IFIs, bilateral/multilateral actor, private sector)
- Joint programme included addressing inequalities (QCPR) and the principle of "Leaving No One Behind"
- Joint programme featured gender results at the outcome level
- Joint programme undertook or drew upon relevant human rights analysis, and have developed or implemented a strategy to address human rights issues
- Joint programme planned for and can demonstrate positive results/effects for youth
- Joint programme considered the needs of persons with disabilities
- Joint programme made use of risk analysis in programme planning
- Joint programme conducted do-no-harm / due diligence and were designed to take into consideration opportunities in the areas of the environment and climate change

⁴⁰Scope=substantive expansion: additional thematic areas/components added or mechanisms/systems replicated.

⁴¹Scale=geographical expansion: local solutions adopted at the regional and national level or a national solution adopted in one or more countries.

⁴²Each Joint programme in the Implementation phase will test at least 2 approaches.

⁴³ Annual survey will provide qualitative information towards this indicator.

2.2. Joint programme Results framework

Goal: Support Albanian Government translate the policy intent into proper local actions so that men, women, girls and boys living in poverty, or vulnerable situation have access to integrated, quality social care services.

Result / Indicators		Baseline	2020 Target	2021 Target	Means of Verification	Responsible partner
Outcome: All women, men, girls and boys, especially those from marginalized and vulnerable groups, are exercising their entitlements to equitable quality services, in line with human rights; and more effective and efficient investments in human and financial resources are being made at central and local levels to ensure social inclusion and cohesion.						
Proportion of population covered by social protection floors/systems, by sex, gender, distinguishing children, unemployed persons, Roma and Egyptians, persons with disabilities, migrants, refugees, pregnant women, newborns, work-injury victims and the poor and the vulnerable.		No available data for this indicator. Baseline for 2019 at the national level to be calculated as number of various groups benefitting from different social protection schemes (first quarter of 2020) 0.2% is the percentage of population with access to social care services. ⁴⁴	Institutional arrangements and coordination mechanisms completed and strengthened, and pilot models of integrated social care services are operational.	85% of vulnerable persons and groups in the six targeted municipalities benefit from improved delivery of social care services by local authorities.	<ul style="list-style-type: none"> - Data collected in the framework of the project's monitoring. - Observations and reports of target groups and their organizations - Studies and reports of specialized civil society organizations 	<p>Government of Albania</p> <p>Ministry of Health and Social Protection</p> <p>Ministry of Finance and Economy</p> <p>Municipalities of Tirana, Kamez, Pogradec, Puke, Rogozhine and Devoll (to be defined).</p> <p>UNDP, UNICEF, WHO, UN Women</p>
Positive progress of the implementation of social care and protection national policies, strategies and related local action plans.		Level of implementation of R/E action plan is rate 3.66 for the year 2018.	Level of implementation of the National social Protection Strategy and Action Plan, National Action Plan on Roma/Egyptians (rate 3.8), PWD, Children and other vulnerable groups and of the local social care plans increased.	Level of implementation of the National Social Protection Strategy and Action Plan, National Action Plan on Roma/Egyptians (rate 3.9), PWD, Children and other	<ul style="list-style-type: none"> - Data and reports of Albanian ministries and INSTAT. - Reports of multilateral agencies and other bilateral donors. - SILC Indicators. - Social Care Plans. 	

⁴⁴ National Strategy for Social Protection, 2015-2020

				vulnerable groups and of the local social care plans increased.		ILO, UNFPA, UNHCR
Proportion of domestically generated resources allocated by the government directly to poverty reduction programmes.		8.1% ⁴⁵	8.3%	8.5%		
Output 1. Integrated social care services institutional arrangements and coordination mechanisms functional with clear roles and responsibilities at local level in 6 municipalities.						
1.1 No of regulations and instructions designed and adopted by 6 Municipalities to establish workflows, protocols and mechanisms that enable access of vulnerable communities to quality integrated social care services.		Regulations and instructions on integrated social care services have been designed in Tirana only.	Regulations and instructions on integrated social care services are available in 3 targeted municipalities. Cross sectorial and inter-ministerial regulations and instructions on integrated social care services are available.	Regulations and instructions on integrated social care services are available in all targeted municipalities .	- Data collected in the framework of the project's monitoring. - Decisions of council of municipalities .	Ministry of Health and Social Protection Ministry of Finance and Economy Municipalities of Tirana, Kamez, Pogradec, Puke, Rogozhine and Devoll.
1.2 Six municipalities with improved capacities of at least 20% of service providers (50%		0	At least 100 trained staff (municipal and direct service providers) apply	At least 100 trained staff (municipal and direct service	- Data collected in the framework of	UNDP, UNICEF

⁴⁵ Ministry of Finance and Economy, Goa Annual Budget Figures Social Protection Program Budget, 2018

women), on organization development and quality management, and effective planning, budgeting and financing.			the tools and knowledge of needs assessment, planning of services, standards implementation. budgeting and accessing Social Fund as per the new established integrated as per institutional arrangements established.	providers) apply the tools and knowledge of needs assessment, planning of services, standards implementation. budgeting and accessing Social Fund as per the new established integrated as per institutional arrangements established.	the project's monitoring.	
Output 2. Institutional capacities strengthened through training and mentoring for the development of social care plans and accessing the Social Fund.						
2.1. Mapping of social vulnerabilities with gender lenses in 3 target municipalities with the purpose to map linkages between women's social vulnerabilities-identified needed social services and their reflection in the respective social care plans.		NA	NA	Mapping report available.		UN Women Ministry of Health and Social Protection
2.2 No of Social Care Plans developed, updated and adopted.		4 municipality social care plans developed/ improved and adopted	Rogozhina develops social care plan. Other Social care plans improved		Decisions of Council of Municipalities.	Ministry of Health and Social Protection Municipalities of

			and adopted when needed.			Tirana, Kamez, Pogradec, Puke, Rogozhine and Devoll. UNDP
2.3 No of Municipalities where Management Information System (MIS) is operational.		0	Staff is trained in 6 municipalities how to use MIS.	Staff in 6 municipalities is actively feeding and using MIS.	MIS report. Programme report.	Ministry of Health and Social Protection UNICEF
Output 3. Innovative models of integrated social care services piloted, including established local linkages between health and social protection services.						
3.1 Regulatory framework for the integrated health and social service models is implemented in pilot municipalities with focus on the health and wellbeing of vulnerable groups and children.		No regulatory framework for integrated health and social care services are available.	Standards and protocols for the models of integrated health and social care services are developed.	2 municipalities supported to implement the integrated health and social care services model.	Government instructions. Project Progress report.	Ministry of Health and Social Protection UNDP, UNICEF, WHO, UNFPA, UNWomen,

<p>3.2 Municipalities strengthened to take over and co-finance through social fund the proposed and integrated health and social care services.</p>		<p>At least 30 representatives (50% women) of all 6 targeted municipalities trained to make linkages btw health and social protection.</p> <p>A grant scheme is set up by LNB for municipalities to introduce innovative models of integrated health and social care services.</p>	<p>At least 50 representatives (50% women) of all 6 targeted municipalities trained to make linkages btw health and social protection.</p> <p>Calls for submitting proposals are realized in a transparent manner. At least 10 proposals received.</p>	<p>6 municipalities supported with at least 1 innovative proposal in implementation of innovative models of health and social care services.</p>	<p>Minutes of the evaluation commission meetings.</p> <p>Progress reports on the implementation of grants.</p> <p>Government report.</p>	
<p>Output 4. Vulnerable communities (disaggregated by gender, ethnicity, disability etc.) are empowered to actively participate in decision making and make institutions accountable.</p>						
<p>4.1 Extent/level of participation of vulnerable population in the consultation process of planning and budgeting of integrated social care services at the municipality level (in 3 municipalities).</p>		<p>5-7% in selected municipalities.</p>	<p>Vulnerable population compose at least 20% of participants in annual planning and budgeting.</p> <p>At least 10% of issues/concerns addressed in annual planning and budgeting are raised by vulnerable populations.</p>	<p>Vulnerable population compose at least 20% of participants in annual planning and budgeting.</p> <p>At least 10% of issues/concerns addressed in annual planning and budgeting are raised by vulnerable populations.</p>	<ul style="list-style-type: none"> - Data collected in the framework of the project's monitoring. - Decisions of council of municipalities - Municipality annual budgets. 	<p>Ministry of Health and Social Protection</p> <p>NGOs</p> <p>3 prioritized LGUs.</p> <p>UNDP, UN Women, ILO</p>

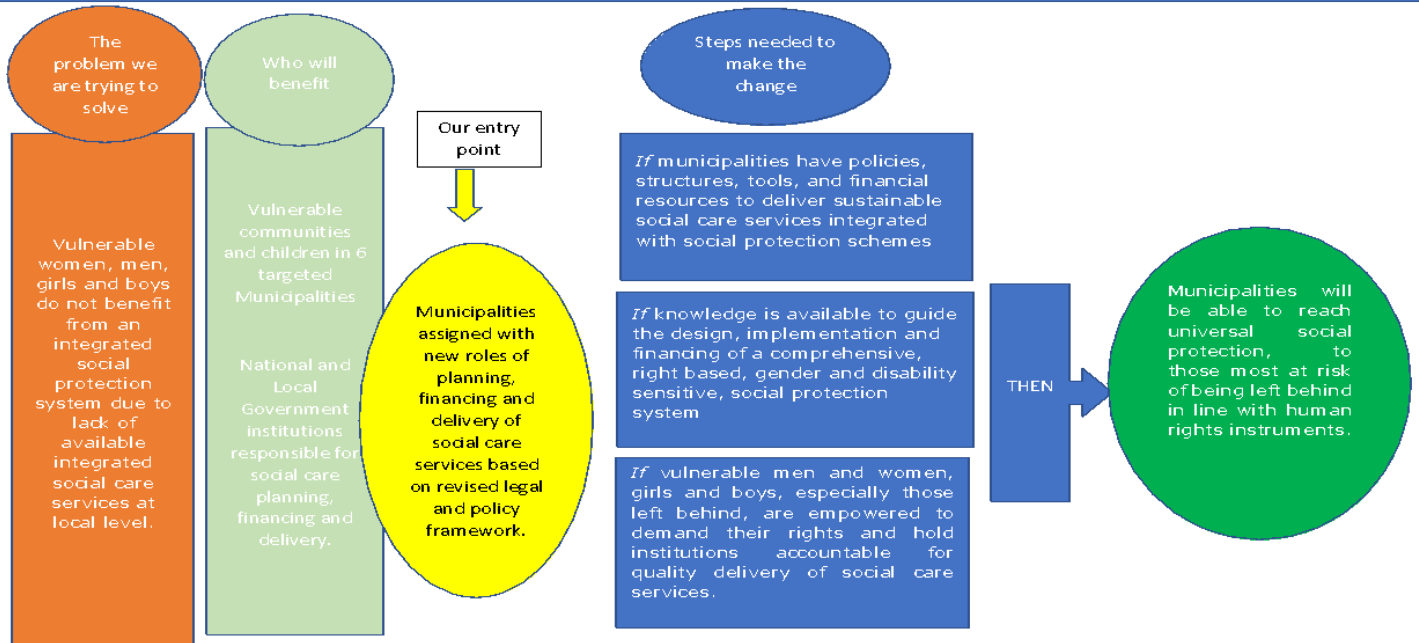
4.2 No of projects implemented by CSOs representing vulnerable groups, demanding rights and holding municipal service providers accountable for quality social care services.		0	At least 6 grant fund projects, a majority of them for Roma and persons with disabilities, are implemented every year.	At least 6 grant fund projects, a majority of them for Roma and persons with disabilities, are implemented every year.		
Output 5. Financing options for extending social protection coverage and benefits developed and assessed at the national and municipality levels.						
5.1 No of municipalities supported to conduct Gender Responsive Budgeting and budget briefs for investments on children.		0	3 LGUs	3 LGU	Government progress report.	Ministry of Health and Social Protection
5.2 Percentage of increased funds for social care services made available at local level also due to national consensus around social protection floor.		Social care service compose 6.4% of the total social protection budget. ⁴⁶	Annual increase of central government's budget for social services by 2% and targeted LGUs by 4%.	Annual increase of central government's budget for social services by 2% and targeted LGUs by 4%. Social Protection Floor defined and discussed with national stakeholders.	Research reports. National Consultations reports.	Ministry of Finance and Economy 6 LGUs UNICEF, ILO
5.3 Data on equity in health utilization and expenditures in MCH		No recent data available in equity analysis	Equity analysis in health utilization and expenditure	Financial analysis for health	Study reports	Ministry of Health and

⁴⁶3. Ministry of Finance and Economy, 2018

and health insurance coverage for the most vulnerable families and children with disabilities is available to inform policy discussions and actions to extend social protection and health care coverage and benefits.		and cost of health insurance coverage for the most vulnerable groups and children.	completed and shared with key stakeholders.	insurance coverage for most vulnerable groups and children.	National consultations reports.	Social Protection Ministry of Finance and Economy UNICEF, WHO ILO
Output 6. Joint Programme Management						
6.1 No of communication means and events.			1 donor event organized	1 donor event organized.	Programme progress report.	RC, UNDP and PUNOs
6.2 Social media outreach			150,000 social media social media post reach Min 50,000 post engagement	200,000 social media social media post reach Min 60,000 post engagement		
6.2 The programme is regularly monitored and documented.			Annual progress report.	Final evaluation of the programme in place.	Programme progress reports. Steering Committee meeting minutes.	

Annex 3. Theory of Change graphic

OUTCOME: All women, men, girls and boys, especially those from marginalized and vulnerable groups, are exercising their entitlements to equitable quality services, in line with human rights; and more effective and efficient investments in human and financial resources are being made at central and local levels to ensure social inclusion and cohesion



MAIN PRINCIPLE: An integrated social protection system, which ensures adequate linkages between cash assistance and social care services is key to help households/families find pathways out of poverty and overcome vulnerability and enjoy a level of wellbeing compliant with the international human rights standards and the normative principles of the European Community

Annex 4. Gender marker matrix

Indicator		Score	Findings and Explanation	Evidence or Means of Verification
N°	Formulation			
1.1	Context analysis integrate gender analysis	2	<p>Context analysis partly takes into consideration gender analysis and in a major part underlying causes of gender inequality and discrimination in line with SDG priorities including SDG 5.</p> <p>Baseline and Situation Analysis includes a Gender analysis that highlights inequalities and reveals how gender equality can be promoted throughout proposed interventions. Most of the data through the context analysis are sex-disaggregated and gender sensitive Adequate reference is made to Regulatory framework and policies that address gender inequality in the country, as well as international commitments to Gender Equality, i.e CEDAW, CoE GREVIO, UPR, Agreed Conclusions of the 63rd Session of the UN Commission of the Status of Women- on Social protection systems, access to public services and sustainable infrastructure.</p> <p>Capacities of existing institutions and some of mechanisms in place to promote gender equality among target groups are described and addressed;</p>	<p>UN Gender Thematic Review Group Reports</p> <p>SDG Global Fund Steering Committee</p> <p>Program Final Evaluation</p> <p>CCA documents</p>
1.2	Gender Equality mainstreamed in proposed outputs	1	<p>Most of the program outputs include explicit and visible reference to gender equality, even though gender equality is not the core purpose of the output. Even in those outputs where gender equality is not explicit in the output formulation, GE is backed by sex disaggregated indicators</p> <p>The programme does not contain any gender-targeted output. However, outputs do contain specific targeted interventions where the principal purpose is to advance gender equality and the empowerment of women, with a clear link to the SDGs gender indicators, including SDG 5.</p>	<p>UN mid-year review and Annual reports</p> <p>Results matrix monitoring data</p> <p>Program Final Evaluation</p>
1.3	Programme output indicators measure changes on gender equality	2	<p>Out of 16 output indicators, 8 indicators or 50% of the output indicators measure changes in gender equality and the empowerment of women</p>	<p>UN mid-year review and Annual reports</p> <p>Results matrix monitoring data</p> <p>Program Final Evaluation</p>
2.1	PUNO collaborate and engage with Government on gender	2	<p>PUNO have consulted with at least two government agencies that fosters gender equality within the current proposed project, respectively Ministry of Health and Social Protection that leads Gender Equality work in the country, and Ministry of Finance and</p>	<p>UNCT Minutes</p>

	equality and the empowerment of women		<p>Economy that leads work on Gender responsive Budgeting in the country.</p> <p>Additionally, the program interventions foresee cooperation with the parliamentary Sub-Commission of Gender Equality and Prevention of Violence Against Women on expenditure monitoring through gender lenses.</p> <p>The National Women’s Machinery has not yet participated in program consultations related to either context analysis, strategic prioritization, implementation or M&E.</p> <p>The programme contributes to substantively strengthen local government participation and engagement in gender related SDGs localization by supporting municipalities and MoHSP to track gender budget allocation (SDG5c1)</p>	
2.2	PUNO collaborate and engages with women’s/gender equality CSOs	1	<p>Although program interventions take stalk of previous work conducted with women rights CSOs, at this stage of the Program Formulation PUNOs have not directly collaborated with GEWE CSO and women’s rights advocates on elaborating the project. GEWE CSO have not participated in the project consultations context analysis, strategic prioritization, implementation, M&E.</p> <p>The programme contributes to substantively strengthen GEWE CSO participation and engagement in gender equality and women empowerment</p>	<p>UN mid-year review and Annual reports</p> <p>Results matrix monitoring data</p> <p>Program Final Evaluation</p> <p>Observations and reports of target groups and their organizations</p>
3.1	Program proposes a gender-responsive budget	2	At least 30% of the total budget is allocated to gender equality or women’s empowerment.	<p>UN mid-year review and Annual reports</p> <p>Program Final Evaluation</p>
Total scoring		2		

Annex 5. Communication plan

1) Overall narrative of the joint programme

“Improving Municipal Social Protection Service Delivery” programme focuses on catalyzing a step-change in the quantity and quality of delivery at local (municipal) level of integrated social care, as part of an effective integrated social protection system. It builds upon the vast experience of the UN in addressing social inclusion, protection and the needs of the vulnerable groups. The programme supports the implementation of the newly shaped vision of the social sector in Albania, in line with Sustainable Development Goals (SDGs) and the country’s aspirations towards European Union (EU) integration. The programme avails of technical expertise and know-how of UN agencies aiming at allowing for greater impact and outreach by focusing on the municipal level and its linkage to the national level.

The programme’s goal – *contribute to support Albanian Government translate the policy intent into proper local actions so that men, women, girls and boys living in poverty, or vulnerable situation have access to integrated, quality social care services,-* supports the vision of an overall inclusive Albania. The joint programme supports Albania’s progress in view of achieving SDGs - being directly related to social protection/inclusion - especially SDGs 1-5 (no poverty, zero hunger, good health and well-being, quality education, gender equality, 10 (reduced inequalities), and 16 (peace, justice and strong institutions).

In order to achieve the goal, the programme focuses on the following outcome: *All women, men, girls and boys, especially those from marginalized and vulnerable groups, are exercising their entitlements to equitable quality services, in line with human rights; and more effective and efficient investments in human and financial resources are being made at central and local levels to ensure social inclusion and cohesion.*

The programme’s target groups who indirectly and directly benefit from improved social care services, are the marginalized populations of Albania, with persons with disabilities often being the most vulnerable, along with Roma and Egyptians as well as children, women, migrant, refugees, long term unemployed etc. The improvement of their social protection is supported by interventions at macro level (central government authorities and national services), at meso level (municipalities and civil society organizations), and at micro level, actively involving the project’s target groups into the project’s implementation. The project covers six selected municipalities. The “Improving Municipal Social Protection Service Delivery” programme is implemented through the modalities of the Delivering as One (DaO) mechanism, under the Programme of Cooperation for Sustainable Development 2017-2021, with the joint participation of UN agencies, including UNDP, UNICEF, UN Women, UNFPA, UNHCR, WHO and ILO, and in close partnership with relevant governmental bodies at the central and local levels. UNDP is the lead UN agency for the overall implementation and coordination of the Programme.

2) Strategic approach to key audiences

The Joint Programme (JP) “Improving Municipal Social Protection Service Delivery” will raise awareness among stakeholders about the “support to the social protection/ social care agenda of the country for a system change toward improvement of social services and empowerment of vulnerable people to hold municipalities accountable.

The strategic approach of this communication plan is based in the following principles: (i) generation of measurable results, (ii) ensure impact, being effective and proactive, (iii) ensure an open and dynamic communication through identified target groups and (iv) use innovative communication tools and channels to the audiences.

The Communication Strategy for the Joint Programme “Improving Municipal Social Protection Service Delivery” will promote positive values and models and support improved access of vulnerable communities to basic equitable, inclusive and decentralized services.

It includes the communication goal and objectives, targeted audiences and communication partners, tools and techniques that are suggested to be used for the implementation of the communication strategy and action plan, the message that might be used and a roadmap activity specific communication support elements.

3) Objectives of strategic communication plan

- Ensured valuable communication/ overall visibility about IMSPSD Programme. Through its communication plan, the project will enhance the level of general knowledge about social protection framework and vulnerable communities' issues/ challenges faced, through a broad education and information campaign with detailed information. This includes also production of content for mainstream and social media on factual negative and positive aspects of the life of vulnerable communities emphasizing the empowerment and achievements. In order to achieve this, a strategic partnership with public service TV (RTSH) or national commercial TVs such as TV Klan and Top Channel should be pursued with the intend to produce a series of documentary packages to be included in relevant programs over an extended period. This would also be used to build sustainable understanding of challenges faced by vulnerable groups/ those left behind, amongst journalists, acting as multipliers in different levels. This approach will address also all aspects targeted by the project. As part of a holistic approach, possible documentaries, sitcom and all other content should be picked up and be reflected in respective online portals and social media, which would give the audience an opportunity to engage in further discourse and discussion. Adequate public outreach activities (Print media ads, bill boards, radio, TV spots etc.) could complement those initiatives. Extend and budget implication depends on the agreements with respective media partners. These activities would also increase dialogue with key public audiences and opinion multipliers.
- Vulnerable communities (including persons with disabilities, Roma and Egyptians, and vulnerable women etc.), empowered to request and have access to social protection services, as a pre-condition to improve their lives. Rebut confusing, misleading, mischievous information about vulnerable communities and integration process. This requires pro-active communication through press-releases, interviews with respective stakeholders in mass media, social media, online surveys, media content analyses, etc.
- Increased coordination and exchange of information amongst all relevant actors: state institutions, civil society, education and academic institutions, etc. in regard to ensuring that no one is left behind and enjoys fully social protection. This will be achieved through a series of regional and central roundtables and working groups.
- Enhanced communication at the central Government as well as at local Government level to improve participation for communicating Action Plan by increasing the level of openness and transparency of governance towards social protection measures and inclusion of vulnerable communities.

Although UNDP will take the lead in this communication programme, inclusion of the other UN/ partner agencies, a multitude of many local communication partners and other "actors" is key to successful implementation. As far as possible, vulnerable communities should feel that they have "ownership" of the process and results achieved by the project. A wide range of sources of information is crucial – under the condition that they do not contradict or simply duplicate each other. Effective communication coordination is essential. This is the basic framework of the so-called "multiplier approach" to communication, which consists of relaying messages to final destination target audiences via intermediary "opinion multipliers" – people and bodies to whom others look to for reliable information, such as political representatives, the media, academics, local organization, civil society and so on. Working with and through opinion multipliers is therefore a central pillar of this Communication Strategy.

External Audiences

The Strategy aims to reach the following target audiences: Affected communities in the programme areas; Central Government; Local Government; International and local development partners; Civil society organizations; International, local and national media; Albanian society.

4) Main activities

protection services and usage of social fund.		capacities of LGUs as multipliers /promotion and replication of good practices/ models of social care service provision.	relevant stakeholders		
4. Ensure visibility and promote Integrated social care services institutional arrangements and coordination mechanisms functional with clear roles and responsibilities at local level in 6 municipalities.	<p>4.1 Ensure visibility of any important multi-stakeholders coordinating forums to present expert research findings; Round tables, conference/workshops, and public talks</p> <p>4.2 Develop and transmit to audience life stories promoting innovative models of integrated social care services which include local linkages between health and social protection services.</p>	Successful social protection and its sustainability is possible when policy frameworks and legislation is implemented accurately and at large.	Central and Local government authorities; related CSOs; vulnerable communities; all other relevant stakeholders	10,000 USD	Jan 2020-Dec 2021

This communication action plan will be applicable during all the project implementation. The messages techniques and tools suggested have been made taking into account specific needs and absorption capacity of the main stakeholders at this stage.

If necessary, adjustment should be made through annual action plans and partial or thorough revision at the moment when major milestones in the integration process have been achieved.

UN Agencies, with UNDP leadership and the Ministry of Health and Social Protection should be in charge of carrying out this communication plan, monitoring its implementation and measuring the fulfillment of the set targets.

The Project Manager will be responsible for ensuring communication/visibility actions are taking place in line with the plan (costs attributed to the Action).

UN Resident Coordinator and PUNOs Heads for participation in events to ensure high level visibility.

UNDP Communication Officer in close cooperation with RCO and communication colleagues from PUNOS will follow up on the implementation of this communication plan.

Annex 6. Learning and Sharing Plan

IMSPSD Joint programme will adopt innovative approaches towards learning and sharing with the aim of expanding the new knowledge and instruments. The planned capacity building activities will aim to advance:

- Knowledge and skills acquisition;
- Networking;
- Sharing experiences and peer to peer collaboration;
- Learning about practical actions and best practices;
- Practical policy integration and coherence.

The Learning and Sharing Plan will ensure the action's learning curve is in line with latest international best practices and standards on knowledge management, monitoring and evaluation and iterative project implementation. The Learning and Sharing Plan will be refined during the kick-start workshop to be held during the first month of implementation.

An important aspect of the JP is a strong emphasis on mentorship and ensuring that the action's beneficiaries are appropriately and individually supported and guided through the learning process. This is required by the focus on "learning by doing" which will lead beneficiaries to translate newly acquired tools into action shortly after being trained. This is specifically important for outputs 1, 2 and 4 where the activities' collaborative teams of beneficiaries will benefit from coaching throughout the implementation of the JP.



Learning and sharing activities

- ❖ Kick-start workshop;
- ❖ Reflection workshops on outputs 1, 2 and 5;
- ❖ Technical committee quarterly meeting;
- ❖ Outcome 2 consultations on JP results and learning;
- ❖ UNCT meeting focused on social protection.

The learning strategy for the project will be both iterative and generative⁴⁷. Iterative learning aims at improving actions, processes, structures, operations, it is mostly continuous learning (how can we better frame our presentation of users' perspectives to policy-makers and service deliverers?). Generative learning focuses on inquiring, exploring the unknown of some larger and complex questions (what works in Albanian local context when it comes to social services?). It should be highlighted that interventions under outputs 1, 2 and 4 will be designed following an iterative learning process (prototype, test, refine, scale up). Reflection workshops linked to above activities will ensure regular learning space as will the discussions held in the meetings of Technical Working group that prepare and feed into Steering Committee Meetings.

The dynamic to be created in JP implementation will be used to nurture Peer-Learning initiatives on social protection. This group of practitioners in UN Albania will engage in a platform for learning and sharing amongst PUNOs and UNCT. It will also facilitate a broader engagement with government and civil society partners in peer-learning and sharing of experiences, scalable good practices and solutions, and lessons learned (including on bottlenecks and challenges).

Learning by doing, but also showcasing successful pilot models of social services/social care plans is key in operationalizing the country's legal framework. By supporting the strengthening of human capacities, but also the identification and diffusion of good practices, the JP will contribute to the general improvement of social services, and thus to the implementation of national strategies.

Thus, in addition to the above described interventions, the learning and sharing plan of the Joint Programme includes 2 rounds of consultations at Outcome 2 level and one discussion with the UNCT.

The Steering Committee will serve as a guide and quality assurance to the JP. During the implementation of the JP, the programme teams will capture learning and adaptive process in a view to compile lessons learnt. Updates on implementation of the Learning and Sharing Plan will be included in Steering Committee meetings\ discussions and feedback.

A JP Lesson-learned section will be included in the Annual Report and regularly updated to ensure on-going learning and adaptation within the Joint Programme teams, and to facilitate the preparation of the lessons-learned report at the end of the project.

IMSPSD JP will make use of the expertise and knowledge coming from The Issue Based Coalition on Social Protection in Europe and Central Asia (IBC-SP) which is a thematic regional coalition of UN agencies that represents a new way of working together to improve policy and programming coherence among UN agencies active on social protection, and to implement social protection components of the 2030 Development Agenda in a more integrated way. The group has two objectives: to support coordinated country work; and to contribute to UN reform and SDG implementation. Knowledge development and sharing is also at the focus of IBC on SP, so expanding the possibilities for IMSPSD JP to benefit and contribute across a broader spectrum of UN Partners contributing in the area of social protection.

UN Regional Issue Based Coalition on Social Protection, UNDG Europe and CIS have developed a regional policy advocacy document⁴⁸ that will be used broadly during programme implementation.

Annex 7. Budget and Work Plan

7.1 Budget per UNSDG categories

⁴⁷ Iterative and generative learning are https://cdkn.org/wp-content/uploads/2017/07/CDKN_WP_Learning-Organisation_Final_WEB.pdf

⁴⁸ <https://www.social-protection.org/gimi/RessourcePDF.action?id=55259>

UNDG BUDGET CATEGORIES	UNDP		UNICEF		UN WOMEN		WHO		TOTAL	
	Joint SDG Fund (USD)	PUNO Contribution (USD)	Joint SDG Fund (USD)	PUNO Contribution (USD)	Joint SDG Fund (USD)	PUNO Contribution (USD)	Joint SDG Fund (USD)	PUNO Contribution (USD)	Joint SDG Fund (USD)	PUNO Contribution (USD)
1. Staff and other personnel	98,000	34,000	36,900	36,900	31,600	0	0	0	166,500	70,900
2. Supplies, Commodities, Materials	30,000	30,000	30,000	8,500	0	0	1,500	0	61,500	38,500
3. Equipment, Vehicles, and Furniture (including Depreciation)	8,000	0	5,000	2,000	0	0	7,222	0	20,222	2,000
4. Contractual services	370,243	123,000	229,606	50,000	143,316	46,000	76,000	27,000	819,165	246,000
5. Travel	16,000	10,000	20,000	6,100	0	0	8,736	0	44,736	16,100
6. Transfers and Grants to Counterparts	160,000	0	112,980	21,500	12,000	5,000	0	0	284,980	26,500
7. General Operating and other Direct Costs	0	0	4,766	0	0	0	0	0	4,766	0
Total Direct Costs	682,243	197,000	439,252	125,000	186,916	51,000	93,458	27,000	1,401,869	400,000
8. Indirect Support Costs (Max. 7%)	47,757		30,748		13,084		6,542		98,131	
TOTAL Costs	730,000	197,000	470,000	125,000	200,000	51,000	100,000	27,000	1,500,000	400,000
1st year	400,000		270,000		100,000		100,000		470,000	-
2nd year	330,000		200,000		100,000				300,000	-

7.2 Budget per SDG targets

SDG TARGETS	%	USD
1.3 Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable.	18%	350,000
3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.	8%	152,000
3.9/3.c Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States.	6%	114,000
5.4 Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate	3%	57,000
5.6 Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences	5%	95,000
5.c Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels (Indicator 5.c.1 Proportion of countries with systems to track and make public allocations for gender equality and women’s empowerment)	10%	190,000
10.2 By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status.	17%	323,000
10.4 Adopt policies, especially fiscal, wage and social protection policies, and progressively achieve greater equality	13%	247,000
16.6 Develop effective, accountable and transparent institutions at all levels	20%	380,000
TOTAL (USD)	100%	1,900,000

These five targeted SDGs and their related goals inherently interlink with each other forming an indivisible framework that aims to achieve holistic sustainability from a systemic perspective on social protection. On the one hand, achieving one goal or target may contribute to achieving other goals or targets.

“Mainstreaming, Acceleration and Policy Support for Achieving the Sustainable Development Goals in Albania” report identifies three broad policy and programming platforms for accelerating progress towards EU accession and achieving the SDGs: (i) governance reform, human rights, and the rule of law; (ii) the inclusive green economy; and (iii) investment in social and human capital. These accelerator platforms reflect Albania’s development and partnership priorities (as articulated in the EU accession process and the GoAUN Programme of Cooperation for Sustainable Development), the added value of UN agencies, complementarity with ongoing efforts, as well as the substantive challenges enumerated in this report.⁴⁹

⁴⁹ <https://www.un.org.al/publications/mainstreaming-acceleration-and-policy-support-achieving-sustainable-development-goals>

Two of the accelerator platforms: a) the governance, human rights, and rule of law and b) investment in social and human capital reflect the logic under this new programme. IMSPSD programme identifies key governance bottlenecks that, when addressed, can have synergistic and catalytic effects on other, related development challenges. Investing in human capital and social cohesion is one of the NSDI II pillars, while promoting social cohesion is a priority under the UN-GoA Programme of Cooperation for Sustainable Development. Social protection—understood as tax-funded social benefits, contributory social insurance, social services, public works programmes, and other guarantees of basic income security—is central to prospects for boosting investment in social and human capital in Albania. Addressing these lynchpin issues could then trigger acceleration of the achievement of development targets that are indicated in the NSDI II, and thereby support the EU accession process and the achievement of the SDGs in Albania.

7.3 Work plan

Given the big table format, the work plan is appended at the end of the document.

Annex 8. Risk Management Plan

UN agencies in the country have been working in the area of social protection and social inclusion for several years in line with UNDAF outcome 2. Results reflect solid partnership with national authorities and civil, at central or local level. As a trusted partner of choice for reforms in the area of human rights, gender equality and social protection, UN in Albania has usefully gained the trust of other bilateral and multilateral donors in leading forward the social reforms (all the major development partners present in Albania work with the UN in one way or another). The Government's policy commitment to social protection and more generally human rights and SDGs is very strong, driven and evidenced by the Albania aspiration to join the European Union. The JP will build on previous interventions and knowledge.

The bulk of proposed activities of the JP will take place at local the local level and the major risk is therefore around local political commitment, local financial resource availability and local capacity. One way to safeguard ownership, strategic relevance and therefore sustainability of the intervention, is the early engagement of UN teams with local stakeholders in shaping together the priority interventions and modalities of cooperation with distinct roles and responsibilities.

Other stakeholders that will interact with the programme are civil society organizations in their different role as social services providers or advocates of vulnerable groups interests. Organizations of Roma, persons with disabilities, rural women, elderly and others will be engaged and supported.

A clear risk is that national level allocation of financial resources, especially the Social Fund, will be insufficient. However, it is the purpose of this initiative to build momentum for such allocation of resources, making it more likely to be sustained.

Based on the initial screening and risk assessment, the proposed Joint programme is of low risk according to the degree of potential social and environmental risks and impacts.

Local level might suffer from high staff turnover as a result of the 2019 local election (scheduled for June), resulting in a loss of knowledge and know-how and in slow implementation. The support to organisational development is a means to anchor innovation at institutional level, thus allowing newcomers to adopt practices introduced by the project.

There is a potential risk that parliamentary elections and local elections might happen as part of a new political solution to give an end to the current political crisis where central government and all local governments are run by one political party.

Programme implementation will be based on a structure of several institutions and organizations that cooperate and interact with one another. It is necessary that institutions,

at all levels, will be responsive and pro-active in the implementation of the newly introduced mechanisms. This might constitute a risk for the success of the project.

Mitigating these risks, the Steering Committee will have to keep a close watch on institutional relations and be ready to pro-actively intervene to avoid bottlenecks developing. Performance indicators will have to be constructed so as to flag such issues quickly triggering corrective measures.

Risks	Risk Level: (Likelihood x Impact)	Likelihood: Certain - 5 Likely - 4 Possible - 3 Unlikely - 2 Rare - 1	Impact: Essential - 5 Major - 4 Moderate - 3 Minor - 2 Insignificant - 1	Mitigating measures	Responsible Org./Person
Contextual risks					
Replacements and turnover happen in leadership, management and human resources of central government institutions and local authorities after elections posing a risk to continuity of committed initiatives and projects.	High (16)	Likely (4)	Major (4)	Methodologies and tools developed by the programme will get adopted and institutionalized officially to ensure continuity over time. The programme staff will establish immediate contacts with the new leadership and management in beneficiary municipalities right after the elections to ensure understanding of the interventions and ensure commitment for their continuity and scale-up.	PUNOs
Programmatic risks					
Scaling-up of successfully introduced innovations introduced may be at risk due to low commitment by government.	Medium (12)	Possible (3)	Moderate (3)	Scaling-up is to be realised with the support of central authorities who can contribute to the preparedness of municipalities to replicate good practices identified and tested elsewhere. And scaling-up of projects for specific target groups (Roma, Egyptians) and persons with disabilities) is to be facilitated by a careful selection of municipalities and the beneficiaries. A means to support preparedness of these actors consist in the demonstration of successes already achieved in the field of social inclusion.	PUNOs

Potential beneficiaries do not see their interest in participating in innovating social services.	Medium (12)	Possible (3)	Moderate (3)	UNDP will take a facilitator role in engaging different CSOs and representatives of vulnerable communities to plan, coordinate, and take action to the same discussion table in improving the situation.	PUNOs
Institutional risks					
High polarization of political situation in the country might lead to demotivation of partners at the institutional level.	High (16)	Likely (4)	Major (4)	The programme will work closely with partners and monitor them closely to ensure that project activities are not negatively impacted.	PUNOs
Low priority given to issues of social protection and lack of focus on vulnerable populations by central and local government.	Medium (12)	Possible (3)	Moderate (3)	PUNOs have established partnership with the government and have ensured their commitment in this programme.	PUNOs
Fiduciary risks					
The promotion of services for specific target groups may affect the Albanian population's perception of the support provided, especially the perception by groups of the population who are not beneficiaries but who consider to be in need of support they do not receive.	Medium (12)	Possible (3)	Moderate (3)	The project, especially when making visible interventions (e.g. by activities facilitated by the grant fund) is to communicate well – not only with the target groups and the service providers, but also with the neighbourhoods: Persons and groups not directly targeted by the intervention are to be informed, if possible and suitable also included in the programme, e.g. by making a community centre accessible not only to those mainly targeted.	UNDP

4.3 Work plan																																		
Outcome 1		All women, men, girls and boys, especially those from marginalized and vulnerable groups, are exercising their entitlements to equitable quality services, in line with human rights; and more effective and efficient investments in human and financial resources are being made at central and local levels to ensure social inclusion and cohesion																																
Output	Annual target/s		List of activities	Time frame						Overall budget description	PLANNED BUDGET					Governance Contribution	Total Cost (USD)	PUNO/s involved	Implementing partner/s involved															
	2020	2021		Q1	Q2	Q3	Q4	Q1	Q2		Q3	Q4	UNDP	UNICEF	UNWOMEN					WHO														
Output 1: Institutional arrangements and coordination mechanisms to ensure quality social care services functional with clear roles.	3 new regulations and procedures of national care services	6 new regulations and integrated social care services	1.1 Support municipalities to establish and update policies and effective mechanisms to ensure proper planning and delivery of integrated social care services in 6 municipalities with gender focus in 6 target municipalities																			Participatory contracts, institutional contracts, individual contracts; costs for travel/publication costs	43,000	26,000	16,000									
			1.2 Support LGs to revise and update policies and procedures, taking into account responsibilities of the teams and officials for social care services and management (UNICEF, UNFP)																					18,000	10,000	8,000								
Output 2: Institutional capacities strengthened through existing mentoring for the development of social care plans and social protection services.	2 municipalities with social care plans	2 municipalities with social care plans	1.3 Establish and make functional local coordinator at municipal level, ensuring representation of related public and private local entities, citizens, and ensuring vertical coordination with the ministries (UNICEF, UNICEF)																			Participatory agreements, institutional contracts, individual contracts, social care plans, and ensuring vertical coordination with the ministries (UNICEF, UNICEF)	18,000	10,000	8,000									
			1.4 Support the capacities of national coordinators and local government coordinators to better plan and manage Social Fund for administrative services and monitoring processes (UNICEF, UNFP)																				LOA with INSTAT costs for institutional contracts, individual contracts, costs for travel	22,000		22,000								
Output 3: Innovative models of integrated social care services designed and piloted, and role institutions and local linkages to ensure health and social protection services.	2 municipalities with social care plans	2 municipalities with social care plans	2.1 Conduct a mapping of social care services with gender focus in 6 target municipalities, with the purpose to create integrated, holistic, social care services and their reflection in the -this activity will align with activity 1.2.2																				60,000		60,000									
			2.2 Conduct a mapping of social care services with gender focus in 6 target municipalities, with the purpose to create integrated, holistic, social care services and their reflection in the -this activity will align with activity 1.2.2																					81,000	80,000	1,000								
Output 4: Vulnerable communities (disaggregated by gender, ethnicity, disability etc.) are empowered to demand their rights and hold institutions accountable for quality delivery of social care services.	At least 100 people are trained	At least 100 people are trained	2.3 Capacity building provided through thematic training and on the job mentoring and supervision to staff on: 2.3.1 Identify and disseminate best practices and successful approaches around the social care services plan (UNICEF, UNICEF)																				60,000	60,000	15,000									
			2.4 Identify and disseminate best practices and successful approaches around the social care services plan (UNICEF, UNICEF)																					80,000	20,000	15,000								
Output 5: Financing options for extending coverage and benefits developed and assessed at the national and municipality levels.	At least 10% of municipalities are trained	At least 10% of municipalities are trained	2.5 Support 6 local governments in collaboration with WHO to create a national strategy for integrated social care services in the national region and local level (UNICEF, UNICEF)																			Costs for training and mentoring costs, institutional contracts, individual contracts, social care plans, and ensuring vertical coordination with the ministries (UNICEF, UNICEF)	80,000		80,000									
			2.6 Develop standards and protocols for the integrated social and health care services with gender focus in 6 target municipalities, with the purpose to create integrated, holistic, social care services and their reflection in the -this activity will align with activity 1.2.2																					80,000		80,000								
Output 6: Joint programs managed.	At least 100 people are trained	At least 100 people are trained	2.7 Support 6 municipalities in collaboration with WHO to create a national strategy for integrated social care services in the national region and local level (UNICEF, UNICEF)																				80,000		80,000									
			2.8 Develop standards and protocols for the integrated social and health care services with gender focus in 6 target municipalities, with the purpose to create integrated, holistic, social care services and their reflection in the -this activity will align with activity 1.2.2																					80,000		80,000								
TOTAL																							1,500,000	730,000	470,000	200,000	100,000	100,000	1,600,000					

4.3 Work plan amendment no 1_ August 2020

Outcome 1		All women, men, girls and boys, especially those from marginalized and vulnerable groups, are exercising their entitlements to equitable quality services, in line with human rights; and more effective and efficient investments in human and financial resources are being made at central and local levels to ensure social inclusion and cohesion																										
Output	Annual target/s		List of activities	Detailed activities per agency/ municipality (under development)	Time frame												Overall budget description	PLANNED BUDGET 2020-2021							PUNO/s involved	Implementing partner/s involved		
	2020	2021			M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12		Joint SDG original budget	Joint SDG Fund Revision no 1 (USD)	UNDP	UNICEF	UNWOMEN	WHO	Government Contribution			Total Cost (USD)	
Output 1: Institutional arrangements and coordination mechanisms to ensure quality social care services functional with clear roles.	3 new regulations and instructions on integrated social care services. 6 local intersectoral coordination groups established including women, men, girls and boys. At least 25 trained staff (women and men) of service providers applies standards of service provision, as per the new established integrated roles.	6 new regulations and instructions on integrated social care services. 6 Local intersectoral coordination groups established. At least 30 trained staff (women and men) of service providers apply standards of service provision, as per the new established integrated roles.	1.1 Support municipalities to establish adequate processes, workflows, protocols and effective mechanisms to ensure proper planning and delivery of integrated social care services in 6 municipalities. (UNICEF, UNDP)	1.1.1 Support municipalities of Tirana, Kamza, Rrogzohina, Pogradec, Puke and Devoll to design at least 2 new regulations and instructions on integrated social care services. (UNDP, UNICEF)													41,000	33,000	25,000	8,000			122,000	UNDP, UNICEF	Ministry of Health and Social Protection Ministry of Finance and Economy 6 Municipalities UNDP, UNICEF			
			1.2 Support LGUs to revise and update terms of reference, job descriptions and responsibilities of the teams and officials for social care services planning and management. (UNICEF, UNDP)	1.2.1 Support municipalities to revise and update terms of references, job descriptions and responsibilities of the teams and officials for social care services planning and management, with focus on case management and referral (Puke, Devoll). (UNICEF)															18,000	7,000	5,000	2,000						
			1.3 Establish and make functional local intersectoral coordination groups on integrated social care services with representation of related public and private local institutions, including academia and faculties of social work and ensuring vertical coordination with line ministries. (UNDP, UNICEF)	1.3.1 Conduct initial feasibility assessment (UNICEF) and mapping of the local stakeholders to participate in the local intersectoral working groups for improved integrated social care service delivery. (UNDP)																18,000	72,000	40,000				32,000		
			1.4 Support the capacities of national, regional and local government relevant units into better planning and managing Social Fund for social care services as part of the overall budget planning and monitoring processes. (UNICEF)	1.4.1 Support the capacities of national, regional and local government relevant units into better planning and managing Social Fund for social care services as part of the overall budget planning and monitoring processes. (UNICEF)																22,000	10,000	10,000						
			2.1 Conduct a mapping of social vulnerabilities with gender lenses in 6 target municipalities with the purpose to map linkages between women's social vulnerabilities-identified needed social services and their reflection in the respective social care plans. (Un Women)	2.1.1 Conduct a mapping of social vulnerabilities with gender lenses in the municipalities of Kamza, Rrogzohina, Puka, Devoll; (UNW)																60,000	60,000					60,000		
Output 2: Institutional capacities strengthened through training and mentoring for the development of social care plans and accessing the Social Fund.	2 municipalities with gender sensitive social care plans. MIS operational and producing annual reports. At least 50 representatives of LGs coached on MIS usage.	2 municipalities with gender sensitive social care plans. At least 50 representatives (50% women) of all 6 targeted municipalities were trained and coached. MIS operational and producing annual reports. At least 50 representatives of LGs coached on MIS usage.	2.2 At least four municipalities supported to develop/update and adopt fully costed local social care plans. (UNDP, UNICEF)	2.2.1 Support LGUs to develop social care plans: UNDP- Rrogzohina , Kamza (UNW joins), Skrapar, Poican, Fushe-Arrez; UNICEF- Puka (UNW joins) and Devoll (UNW joins).													81,000	43,000	25,000	18,000			223,000	UNDP, UNICEF, UN Women	Ministry of Health and Social Protection 6 Municipalities UNDP, UNICEF, UN Women			
			2.3 Capacity building provided through blended training and on the job mentoring and supervision to staff of municipalities (at least 50% women) on the implementation of social care plans. (UNDP, UNICEF)	2.3.1 Study on the proportion of population covered by social protection floors/systems, by sex, gender, distinguishing children, unemployed persons, Roma and Egyptians, persons with disabilities, migrants, refugees, pregnant women, newborns, work-injury victims and the poor and the vulnerable. (UNDP)														65,000	65,000	50,000	15,000							
			2.4 Identify and disseminate best practices and exchange experiences about the development and implementation of social care plan. (UNDP, UNICEF)	2.4.1 Organize 2 study tours to identify and disseminate best practices and exchange experiences about the development and implementation of social care plan. (UNDP) (one in each year)															35,000	35,000	20,000	15,000						
			2.4.2 Organize an exchange visit of social care service providers btw Albania and Montenegro (UNICEF 2ND YEAR).																									

