

FINAL REPORT

ANALYSIS OF THE FUNCTIONING OF THE COORDINATED COMMUNITY RESPONSE TO DOMESTIC VIOLENCE AT THE LOCAL LEVEL IN ALBANIA

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Disclaimer: The assessment is funded by UNDP. The views and opinions expressed in this document are solely the responsibility of the author and do not represent the views of UNDP or any other agency.

LIST OF ACRONYMS

CCR	Coordinated Community Response
CoM	Council of Ministers
CoE	Council of Europe
DV	Domestic Violence
EPO	Emergency Protection Order
KI	Key Informant
GE	Gender Equality
GEE	Gender Equality Employee
GoA	Government of Albania
LCDV	Local Coordinator for Domestic Violence
LoA	Letter of Agreement
LGU	Local Government Unit
MOLSAEO	Ministry of Labor, Social Affairs and Equal Opportunities
MSWY	Ministry of Social Welfare and Youth
PO	Protection Order
SC	Steering Committee
TAR	Territorial Administrative Reform
MTT	Multidisciplinary Technical Team
TOR	Terms of Reference
UN	United Nations
UNDP	United Nations Development Program

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EXECUTIVE SUMMARY

Background

Albania has made progress in the last ten years in respecting and promoting gender equality through improving national legislation and policies and aligning them to international human rights standards.

The Government of Albania is supported in its efforts to promote gender equality by the United Nations through the Programme of Cooperation 2012-2016, where specific support is provided to implement improved legislative and policy framework on combating gender-based violence and in particular to build and strengthen coordinated community response (CCR) which is transformed into National Referral Mechanism (NRM)¹ for managing the cases of domestic violence in compliance with the Law No. 9669 “On measures against violence in family relations ” (2006), NSGE-DV 2011-2015 and CoM Decision No. 334, dated 17.02.2011, “On the establishment of the national referral mechanism for the treatment of domestic violence cases and its way of functioning”

UNDP’s support built on previous work carried by the Network against Gender-Based Violence and Trafficking funded by UN Trust Fund (2007-2009) to pilot CCR model for the first time in five municipalities (Shkodra, Vlora, Berat, Rreshen and Pogradec), the experience of which served as guideline for developing in 2009 the National Platform for the Establishment of the Coordinated Community Response against DV at local level in Albania. Following the endorsement of the National Platform in 2009 by MSWY (former MOLSAEO), UNDP under One UN Joint Programme continued to provide support to establish CCR in municipalities of Durres, Korca and Kamza and UNICEF in Kukes during the period 2010-2012 and UN Trust Fund supported CCR establishment in municipalities of Puka, Lezha, Manze, Elbasan, Mini-municipality no.6 in Tirana during 2010-2013.

During the period 2012-2013, UNDP provided technical assistance to 8 municipalities (i) to establish CCR and build capacities in mainstreaming gender in local development plans in municipalities of Tirana, Fier, Burrel, Permet, and (ii) strengthen CCR and build capacities in mainstreaming gender in local development plans in municipalities of Durres, Korca, Lezha and Kamza, which were already supported by UNDP to establish CCR during the period 2010-2012 to address and manage the domestic violence’ cases in their territory. The municipalities of Durres and Korca during the period 2012-2013 were also supported to expand CCR in 4 communes each.²

UNDP has commissioned in March 2015 the analysis of CCR mechanism whether supported in the past by the UN or not, aiming at comparing and evaluating their actual

¹ The term CCR is used in this report instead of NRM as TORs request a CCR analysis at the local level.

² Municipality of Durres: *Municipality of Sukth and Shijak and communes of Rrushbull and Maninas*; Municipality of Korca: *Communes of Drenove, Libonik, Mollaj and Voskop*

functioning on the ground. The analysis took place during the period March-April 2015 where 11 LGUs³ and their respective CCRs were visited and consulted.

Main Findings

CCR mechanism is established and operational in 27 out of 65 municipalities⁴ under the guidance of MoSWY (former MOLSAEO) and with the support of UN Trust Fund (10 municipalities), UNDP (7 municipalities) and other donors during the period 2007-2015. CCR mechanism is established in compliance with the relevant legislation and guided by the strategic national platform on CCR mechanism developed by UNDP to support the operationalization of the relevant legislation.

CCR mechanism is composed of (i) Steering Committees representing relevant institutions at local level led by mayor of LGU, (ii) Multidisciplinary Technical Teams (MTT), whose members are appointed by SCs and are technical representatives of SC member institutions and (iii) Local Coordinator for Domestic Violence⁵ who leads and coordinates the work and services of MTTs to refer and respond to cases of domestic violence at local level.

It should be noted that CCR mechanism, at least in the municipalities supported by the UN Trust Fund and UNDP following the phasing out of their technical assistance, is continuing to function, but with varying levels of political and financial support from the mayors and municipal councils and cooperation from CCR members. Each CCR has its own individuality and has developed a profile customized to the local conditions, yet they do share a number of common elements:

- (i) *relatively passive SCs in inter-institutional cooperation and coordination;*
- (ii) *operational MTTs particularly in coordinating and cooperating in small group (GE&DV specialist), police, NPOs and health center), but subject to a frequent turnover of its members (police, judicial system, employment office and health centers);*
- (iii) *Specialists of GE&DV are active in leading and coordinating CCR, particularly MTTs, stable in this position since their appointment and integrated into the organogram of municipality. This structural sustainability has been vital for the functioning of MTTs and their role has proven to be of paramount importance particularly in municipalities where no specialized NPOs operate (Korca, Fier, Burrel, Permet and Lezhe) for providing services to victims of domestic violence and where they have taken over the role of service provider for legal counseling and psycho-social support following phasing out of UNDP support;*
- (iv) *limited network of multi-disciplinary services for victims of domestic violence at local level, although efforts are made to ensure provision of basic emergency multidisciplinary services by relying on in-house or on-site expertise of municipal*

³ The municipalities of Tirana, Durrës, Korça, Fier, Shkodra, Lezha, Burrel, Permet, Erseka, Patos and the commune of Mamurras in the municipality of Durrës.

⁴ Interview with GE Experts in MSW.

⁵ Currently this position in most of visited municipalities is assigned to GEE, who in this report is referred as Specialist for GE&DV

staff (GE&DV specialist, CPU, legal department and school psychologist), emergency sheltering in premises owned or managed by municipality (hospitals, dormitories, geriatric homes). The only LGU that provides an integrated network of multidisciplinary services is municipality of Durrës, which has contracted a specialized NPO operating on site as well as Municipalities of Tirana and Shkodra, where specialized NPOs, funded by donors, operate and provide services for free⁶. Most of helplines run only 8 hours and a few charge the cost to the caller (municipality of Shkodra).

- (v) *Collection of statistics at local level.* Specialists for GE&DV collect and report data on line on cases referred and managed at local level, but in most of cases this includes only urban area (municipality territory). They face challenges in cross-checking and consolidating data with other local actors/CCR members (particularly police, court, prosecutor, who report data at region or prefecture level) and quite often there are delays in their updates due to the work load on ground as well as lack of awareness of their institutional obligation to provide biweekly reports to the GE&DV specialist on DV cases managed or treated by their institution either through multi-disciplinary intervention or on their own. This leads to lack of consolidated data and discrepancies of reported data

Overall, it is assessed that progress is made in establishment and functioning of CCRs, yet there is a long way to make them fully functional, effective and sustainable. Addressing domestic violence requires long-term commitments, human and financial resources, capacities as well as keeping it on the agenda of central and local governments and international donors to further progress in preventing and eradicating it.

It is recommended establishment of CCRs in all LGUs in Albania and strengthening the existing CCRs through (i) improved inter-institutional and multi-agency cooperation and coordination to better implement relevant legislation, (ii) allocation of resources for continuous capacity building, adequate staffing, public awareness and provision of a comprehensive package of services to victims of domestic violence to ensure their safety, protection and long-term rehabilitation and integration in mainstream society, (iii) capitalizing on experiences and lessons learnt from existing CCRs to respond to domestic violence in the framework of Territorial Administrative Reform (TAR) to improve accessibility, quality and timely delivery of services for victims of domestic violence.

⁶ This finding is relevant for 11 LGUs visited for data collection purposes for this analysis

1. Introduction

1.1 Background and Context of Project

Albania's progress in recent years in respecting and promoting gender equality is highlighted in a series of international commitments as well as domestic legal and policy development and implementation. In 2008, Government of Albania endorsed the Gender Equality Law (GEL), established the national gender machinery, endorsed the Law on Measures against Violence in Family Relations in 2006 and amended it respectively in 2008 and 2010, opened the first national shelter in 2011 for survivors of domestic violence with support of UNDP in 2011, established the referral mechanism for domestic violence cases based in the philosophy of the coordinated community response in several municipalities, evaluated the National Strategy for Gender Equality and Domestic Violence (2007-2010), and approved in 2011 the revised National Strategy on Gender Equality, Reduction of Gender-Based Violence and Domestic Violence (2011-2015).

In addition, Albania created a stronger data collection system through conducting Domestic Violence, Time Use and Demographic Health Surveys as well as through approval of a series of harmonized gender indicators that will mandate gender disaggregation of public statistics for a number of entities. Introduction of the 30% quota of representation in the Electoral Code and recently 20% quota for women representation for mayor candidates and 50% for women municipal councilors in the upcoming local elections in June 2015 and initiatives in engaging women more actively in electoral and decision-making processes have opened the door for a greater voice for women's needs. In 2010 the CEDAW Committee reviewed Albania's periodic report on implementation of the UN Convention and provided a set of recommendations on domestic violence, progress on which was reported in the fourth national periodic report submitted in November 2014. Albania signed in December 2011 the Council of Europe Convention on preventing and combating violence against women and domestic violence, which was ratified in February 2013 and entered in force on 1st August 2014.

To support Albania's international commitments to the implementation of international human rights standards, gender equality, environmental sustainability, and development of national capacities the Government of Albania and the United Nations signed in 2011 the Programme of Cooperation 2012-2016. Its Output 4.1.5 focuses entirely on gender-based violence: Action taken at national and local level to implement improved legislative and policy framework on combating gender-based violence.

UNDP's support built on previous work carried by the Network against Gender-Based Violence and Trafficking funded by UN Trust Fund (2007-2009) to pilot CCR model for the first time in five municipalities (Shkodra, Vlora, Berat, Rreshen and Pogradec), the experience of which served as guideline for developing in 2009 the National Platform for the Establishment of the Coordinated Community Response against DV at local level in Albania. Following the endorsement of the National Platform in 2009 by MSWY (former

MOLSAEO), UNDP under One UN Joint Programme continued to provide support to establish CCR in municipalities of Durres, Korca and Kamza and UNICEF in Kukes during the period 2010-2012 and UN Trust Fund supported CCR establishment in municipalities of Puka, Lezha, Manze, Elbasan, Mini-municipality no.6 in Tirana during 2010-2013.

During the period 2012-2013, UNDP provided technical assistance through Letters of Agreement to 8 municipalities (i) to establish CCR and build capacities in mainstreaming gender in local development plans in municipalities of Tirana, Fier, Burrel, Permet, and (ii) strengthen CCR and build capacities in mainstreaming gender in local development plans in municipalities of Durres Korca, Lezha and Kamza, which were already supported by UNDP to establish CCR during the period 2010-2012 to address and manage the domestic violence' cases in their territory. The municipalities of Durres and Korca during the period 2012-2013 were also supported to expand CCR in 4 communes each.

In order to enable tailored UNDP technical expertise to the local needs of the CCR members, as well as to support the Ministry of Social Welfare and Youth (former MOLSAEO) in their monitoring role of the implementation of domestic violence legislation, UNDP has commissioned a thorough analysis of CCR mechanisms whether supported in the past by the UN or not, aiming at comparing and evaluating their actual functioning on the ground with the initial legal and theoretical framework that UNDP supported the GoA to develop.

1.2 Purpose and Scope of Evaluation

TORs of the assignment define the scope of evaluation, which focuses on providing an independent view on:

- (i) assessing functioning of local CCRs
- (ii) identifying good practices, lessons learnt
- (iii) challenges CCRs are facing
- (iv) forward look to improve CCRs performance, analyze their potential strengthening and recommendations for their establishment throughout local government units

The evaluation is carried out to inform MSWY, LGUs, UNDP, UN agencies and other stakeholders on CCR implementation and functioning at local level, to assess progress to date and identify future needs and support measures.

2. Evaluation Framework

2.1 Evaluation Approach and Methodology

In conducting the evaluation, the Consultant applied a consultative, inclusive and human rights based approach by actively engaging and seeking high quality participation and input of key relevant actors and partners involved as members of CCR.

The Consultant prepared a list of key evaluation stakeholders (Annex 1) made up of the following categories:

- UNDP staff dealing with DV;
- central government authorities;
- local government authorities staff (mayor, GE&DV specialist/ social service administrator and other relevant staff);
- CCR members (police, court, prosecutor, regional social services directorate, regional employment directorate, regional health directorate, regional education directorate, bailiff office);
- NPOs providing services for victims of domestic violence.

Purposive sampling was used to ensure a cross-section of stakeholders and partners as members of CCRs by using the following criteria: geography/location, population size, support from government and donors to set up CCR including LGUs with consolidated CCRs as well as LGUs which are in their first steps of establishing CCR. During the evaluation, there were reached out the identified categories of stakeholders as CCR members in 11 LGUs (municipalities of Tirana, Durres, Korca, Erseka, Permet, Patos, Fier, Shkodra, Burrel, Lezha and commune of Maminas)⁷. The list of CCR stakeholders and LGUs was consulted and agreed with UNDP staff.

2.2 Methods of Data Collection and Analysis

In order to ensure accuracy and quality of evaluation findings and conclusions and enable triangulation of data, the evaluation utilized a mixed-methods approach. Data came from a variety and were collected through the following methods:

a) desk study: review of international instruments, domestic legislation and policies, and literature, particularly from previous similar exercises conducted nationally and internationally, LoAs with LGUs and project reports along with other documents provided by UNDP project management;

b) face to face semi-structured key informant interviews with the identified categories of stakeholders. Interview Guides for identified stakeholders' categories were prepared. (Annex 3).

c) focus group discussions with identified stakeholders where possible. Two focus groups were organized with identified stakeholders in the municipalities of Korca and Fier.

d) field visits and on site observations: categories of identified stakeholders were visited, interviewed and observed on site to obtain necessary information and evidence for data analysis.

⁷ Municipalities of Shkodra and Lezha were supported by UN Trust Fund respectively in 2007 and 2010; Municipalities of Durres and Korca were supported by UNDP during the period 2010-2013 and municipalities of Permet, Burrel, Fier and Commune of Maminas were supported by UNDP during the period 2012-2013; Municipality of Erseka is selected in 2015 to be supported by UNDP.

During data collection phase there were reached out through interviews and focus groups 42 representatives (36 F and 6 M) of identified stakeholders in 11 LGUs. All data collected through the evaluation are analyzed and reported in this report.

2.3 Risks and Limitations

The following potential risks and limitations were identified that could undermine the reliability and validity of the evaluation results:

- i) Access to key informants and stakeholders hindered by their unavailability during the time of the scheduled data collection phase;
- ii) The list of identified LGUs and evaluation stakeholders might not be sufficient for generalization about the functioning of CCR, but provide orientation understanding of activities, concrete results, achievements, challenges and lessons learnt at local level on the establishment and functioning of CCR;
- iii) Time was considered a constraint given the diversity of stakeholders and LGUs supported in Albania. Efforts were made to maximize the time and reach out as many LGUs and CCR members as possible by considering the geographic vicinity of selected beneficiaries at a time. Consultation with UNDP project management staff were key in arranging the visits to ensure geographic coverage and diversity of beneficiaries;
- iv) Evaluation draws on the opinions of governmental representatives at central and local level, CCR members, UNDP program management staff involved in the design, implementation and monitoring of the project and their opinions are subject to bias when people are asked to evaluate their performance. To address this issue, the Consultant relied on multiple sources of information and requested evidence to support the opinions.

2.4 Support and Logistics

During the data collection process, the Consultant was supported from UNDP project management staff to be introduced to the stakeholders and relied on the expertise and knowledge of UNDP staff to coordinate the meetings and interviews with identified stakeholders. Evaluation Work Plan (Annex 2) was prepared for work and interview planning.

3. Main Findings

3.1 Overview on CCRs

MSWY reports that CCRs are established and operational in 27 out of 65 municipalities in Albania following the approval of GEL in 2008, law No. 9669, "On measures against violence in family relations" (2006) and amended in 2008 and 2010, NSGE-GBV&DV 2011-2015 and CoM Decision No. 334, "On the establishment and functioning of the national referral mechanism for the treatment of cases of domestic violence" (2011). The process of CCR establishment and functioning has taken place in close consultation with MSWY (former MOLSAEO) and with the technical support of UN Trust fund, UN agencies particularly UNDP, which developed and piloted CCR in 17 municipalities. The national strategic platform for CCR establishment was developed in 2009 to support the operationalization of the relevant legislation and which fed into

preparation of CoM Decision No. 334 “On the establishment and functioning of the national referral mechanism for the treatment of cases of domestic violence” (2011).

The process of CCR establishment started in 2007 with the support of UN Trust Fund in piloting CCR in five municipalities respectively Shkodra, Vlora, Berat, Pogradec and Rreshen, and it slowly and gradually expanded in other municipalities during the period 2010-2013 respectively with the support of UN Trust Fund in municipalities of Elbasan, Puka, Lezha, Mini-municipality No. 1 in Tirana and Puka and UNDP in municipalities of Korca, Durres, Kamez, Fier, Tirane, Burrel, Permet and with the support of other donors (ADA in municipalities of Gramsh, Lac, Lushnje and USAID in municipality of Kurbin).

It is still an ongoing process in other municipalities where either mayors take initiative in compliance with the legal obligations deriving from Law No. 9669 and CoM Decision No. 334 (e.g. municipality of Patos recently) or municipalities are supported by UNDP to initiate the process (e.g. municipality of Kruja, Kavaja, Erseka, Saranda).

Despite efforts at national and local level, MSWY gives credit to UN agencies and UNDP in particular for their technical assistance and support to pilot successfully a holistic model of CCR mechanism at local level and scale it up in other municipalities and expand it in communes as well (4 communes in Durres and 4 communes in Korca).

It is assessed that established CCRs, particularly those supported by UNDP with a package of services, following the phasing-out of UNDP technical assistance, are functioning with varying degrees of political and financial support and cooperation from the mayors, municipal councils and cooperation from CCR members. Each CCR has its own individuality and has developed a profile customized to the local conditions, yet they do share a number of common elements.

CCR is a team of community professionals who have institutional responsibility to respond and address the various needs of domestic violence survivors. These teams are multi-disciplinary and each member plays a key role in the overall community response to the crime of domestic violence.

As defined in CoM Decision No. 334, CCR mechanism is composed of (i) Steering Committees representing relevant institutions at local level led by mayor of municipality, (ii) Multidisciplinary Technical Teams (TMTs), whose members are appointed by SCs and are technical representatives of SC member institutions and provide their services and support to victims of domestic violence (iii) Local Coordinator for DV (LCDV) who leads and coordinates the work and services of TMTs to refer and respond to cases of domestic violence at local level.

3.2 Functioning of the CCR mechanism

3.2.1 Steering Committees established based on MoUs signed with relevant state and non-state actors and institutions at local level and the mayor, where roles and responsibilities of each party are clearly defined. MoU model designed by UNDP is used

and adapted to the local level and the signing of MoU was preceded by a series of lobbying and consultation meetings initiated by the mayor with heads of relevant institutions to explain the relevant legislation related to CCR, need for MoU, the role of municipality as the responsible institution to lead it and the legal obligations of respective institutions to cooperate.

While SCs are established and operational in 27 municipalities, and at least most of them have had 1 annual meeting since their formalization, SCs role is perceived passive in sharing information with their staff about the MoU with the municipality, on coordinating the work for referring and responding to domestic violence, timely appointing and replacing their representative in MTT in case of staff turnover, in monitoring the work of MTT and in attending periodic meetings organized by the mayor. The role of the mayor has proven key in bringing parties together in SCs, although to some extent it has been difficult by some heads of institutions particularly representing judicial system to accept mayors' leadership role.

The positive outcome of the SCs is the nomination of members in the multidisciplinary technical team at local level, who are technical representatives of institutions represented in SCs.

3.2.2 MTTs established and operational

MTTs are composed of members nominated by representative institutions in SCs, CPU employee, GE&DV specialist, NPO representatives providing services to victims of domestic violence if they operate in the area, freelance lawyers, psychologists providing legal and psycho-emotional support to victims of domestic violence. Interviews and focus group discussions with members of MTTs provide evidence that there is good coordination, communication and cooperation among members to refer and respond to cases of domestic violence, to identify needs of victims of domestic violence and provide the required services to them, case management, data and information provision and sharing among members. There are regular routine MTTs meetings (every two or three months instead of monthly meetings) as well as ad hoc meetings in emergency cases called by GE&DV specialist, who also have shared contact lists of MTTs members, prepare regular updates on case management and issues addressed and have set up case management system. Only municipality of Tirana reports development and use of protocols for case management for domestic violence survivors.

Interviews and focus groups confirm that there is a core nuclei of active MTT members that is key in effective referral and response to victims of domestic violence particularly in emergency cases (GE&DV specialist, police, specialized NPOs in domestic violence services when operational on site, health center or social services), who identify and coordinate provision of necessary services and actions depending on the case. It is also highlighted cooperation and coordination with Regional Employment Agency and specialized NPOs for medium and long-term solutions and responses of referred cases. Level of cooperation and response from other members particularly representing judicial

system (court, prosecutor's office and bailiff) is reported slow and more bureaucratic sometimes affecting the credibility and effectiveness of CCR.

MTT members and in particular GE&DV specialist and police see the benefit of working in a coordinated way instead of working separately as it facilitates sharing of information, resources, access to services and provision of services faster and more effectively for survivors of domestic violence.

3.2.3 GE&DV specialist active in leading and coordinating CCR particularly MTTs.

GEEs nominated in pilot municipalities in most of cases are assigned also the function of Local Coordinator of Domestic Violence (e.g. municipalities of Durres, Korce, Fier, Permet, Shkoder, and Lezhe) or both functions are an add-on task to one of the municipality staff (municipalities of Burrel and Erseke). Only Municipality of Tirana has kept these positions separate and with clearly defined roles.

It should be noted that individuals who are nominated in the above position, originally funded and trained by UN Trust Fund and UNDP, have been retained in this position for several years and integrated into the organogram of municipality and funded with municipal funding, becoming thus a key stable actor in MTTs (e.g. municipality of Shkoder, Korce, Burrel, Permet, Fier). This structural stability and sustainability to date has been vital for the functioning of MTTs, which over the years has suffered members' turnover (particularly members representing police, employment office, health centers, judicial system).

The role of the GE&DV specialist has proven to be of significant importance particularly in the municipalities of Korca, Fier, Burrel, Permet and Lezhe where no specialized NPOs operate for providing services to survivors of domestic violence and where they have taken over the role of service provider for legal counseling and psycho-social support, backed by their academic background in social work⁸ or psychology (municipality of Fier, Korca, Burrel, Lezha) or law (Permet, Durres), training and coaching provided by UNDP and MSWY as well as support from municipality staff (legal department, CPU, social services) and TMT members.

The specialists for GE&DV are relying on their own knowledge, expertise, experience and contacts built over the years to coordinate and facilitate a range of services for survivors of domestic violence (finding safe accommodation in the territory of municipality or outside it in cases of EPO or PO, provide legal assistance for divorce, provide specialized legal and psycho-social counseling, provide assistance for economic aid subsistence, refer the case for employment, etc.). In the cases when such services are not available on-site, they coordinate with other NPOs providing services for survivors of domestic violence in the neighboring municipalities or Tirana including local and national shelters, counseling centers as well cooperate with local NPOs dealing with human rights or children's rights operating in the territory of municipality (Save the Children, Terre des Hommes, TLAS in Korce, Fier, Burrel) and religious institutions (Lezhe) to find alternative solutions.

⁸ Educational background of the GE&DV specialist is not defined by law.

The specialists or GE&DV in cooperation with police and other local actors (Regional Educational Directorate) have been quite active in promoting CCR mechanism through public awareness campaigns, its functions and services in community enhancing its visibility, credibility and accessibility at local level.

3.2.4 Limited local resources and network of services and capacities on site for victims of domestic violence

Following the phasing out of UNDP technical and financial support, municipalities were faced with scarcity of financial resources to continue funding and provision of the same services. In order to avoid service gaps, they have made efforts to find alternative ways to sustain provision of the following services:

- (i) multidisciplinary services, particularly legal counseling and psycho-emotional support are provided by relying on in-house or on-site expertise of municipality staff: the GE&DV specialist, legal department in municipality, CPU employee and school psychologist (e.g. municipalities of Burrel, Permet, Fier, Korçë). The only municipality, out of 11 visited LGUS, that provides an integrated network of multidisciplinary services is municipality of Durrës, which has contracted a specialized NPO operating on site as well as Municipalities of Tirana and Shkodra, where specialized NPOs, funded by donors, operate and provide services for free;
- (ii) emergency sheltering as well as medium-term and long term sheltering remain an issue as most of municipalities do not have emergency shelters or residential shelters. While models of (emergency) shelter solutions were provided (e.g. renting a flat which was managed by Kennedy center in Korçë through a grant provided by Municipality of Korçë and the same model was applied in municipality of Durrës), it is not sustained for financial and safety reasons in Korçë or replicated in other municipalities. Quite often municipalities provide emergency sheltering for survivors of domestic violence in hospitals, dormitories, geriatric/elderly care homes, relatives, or in the national shelter managed by MSWY or other shelters (medium and long-term solutions) managed by specialized NPOs in bigger cities or neighboring municipalities;
- (iii) phone help line: while municipalities are obliged by law to provide a 24 hour phone help line for referring cases of domestic violence, most of municipalities provide 8 hour help line service during the office hours of the GE&DV specialist and this service is not always for free (in municipality of Shkodra the call is charged to the caller). Municipalities of Tirana and Durrës benefit from the free phone help line provided by the NPO CDC-TFF, which is CCR member in both municipalities
- (iv) emergency support (food and hygiene packages) in most of the cases is provided in coordination with local businesses, Red Cross, religious institutions or organizations working with children (Terre des Hommes and Save the Children).

Most of visited municipalities provide funding only for the (i) position of the GE&DV specialist and (ii) public awareness campaigns against domestic violence. Only municipality of Durres, out of 11 visited LGUS, has succeeded in allocating funding and contracting services of a specialized NPO to provide multi-disciplinary services (legal counseling, psycho-social support, sheltering, although in limited capacities). Municipality of Shkodra reports allocation of funding for emergency services to victims of domestic violence for two consecutive years and the challenge to disburse the funding due to complex procurement procedures.

3.2.5 Data collection and reporting on case management at local level and national level

MSWY with the support of UNDP has developed and made operational a web-based integrated system for collecting data on case management at local level and national level as of 2013 based on a program originally piloted by UN Trust Fund in five municipalities in 2010, but which was improved continuously. The data collection system is installed in all municipalities and respective training is provided to the specialists of GE&DV and nominated persons by municipalities where this position does not exist.

The specialists for GE&DV collect and report data on line on cases referred and managed at local level, but in most of cases this includes only urban areas. Although MSWY has trained the specialists of GE&DV in reporting data on-line, they face challenges in cross-checking and consolidating data with local actors (particularly police, court and prosecutor's office). Quite often there are discrepancies on data reported by various actors and data consolidation, data entry and update is considered a time-consuming task given the workload in case management and coordination by the specialists of GE&DV. On-line reporting system is not considered user-friendly and additional capacity building is needed.

The advantage of data collection and reporting is that they have provided municipalities and MSWY with baseline data on domestic violence at local and national level since the establishment of CCRs and continuously feed municipalities and MSWY with information for monitoring and analyzing CCR performance and domestic violence case management at local level and national level, identify gaps and areas for improvement of relevant services for survivors of domestic violence. Currently, only 29⁹ out of 65 municipalities report on line and further training needs to be provided on the reporting system.

3.3 Lessons Learnt and Good Practices

3.3.1 Legal framework related to measures against domestic violence including CCR is a prerequisite to address domestic violence, but its implementation becomes effective when human and financial resources are committed by the authorities at central and local level. Legal framework on domestic violence and CCR

⁹ Interview with MSWY GE staff.

was not accompanied with financial bill by the government and the support provided by UNDP and MSWY to LGUs to implement the relevant legal framework through pilot interventions particularly in setting up functioning and credible CCRs has shown that technical and financial resources are needed to set up structures and services, provide comprehensive trainings to build capacities in implementing the laws, awareness raising campaigns to inform the public on referral structures and available responsive services.

CCR Holistic Model

UN Trust Fund and UNDP through LoAs of technical and financial support provided the holistic model based on cooperation model among local institutions through MoU, assigning human resources to coordinate CCR mechanism (GE&DV specialist) and typology and budgeting of services needed for victims of domestic violence in 17 municipalities namely:

- (i) legal counseling and support;*
- (ii) psycho-social and emotional support;*
- (iii) emergency, medium and long-term sheltering;*
- (iv) food and hygiene packages in emergency cases;*
- (v) transportation to safe location;*
- (vi) help phone line;*
- (vii) public awareness campaign on CCR mechanism and legislation on domestic violence, relevant services and structures available at local level;*
- (viii) coaching and learning by doing*

The multi-disciplinary services were provided either by contracting specialized NPOs where operational (e.g. municipalities of Durres, Tirana, Shkoder, Korca) or lawyers, psychologists and social workers (e.g. municipalities of Korca, Burrel, Permet, Fier) where specialized NPOs do not operate.

The implementation of CCR holistic model is being pursued by municipalities, although the lack of financial resources for identified services is a continuous challenge for the implementation of legal obligations of LGUs to address domestic violence at local level.

3.3.2 Political leadership of mayors to drive the process of setting up and functioning of CCRs (SCs, MTTs, appointment of GE&DV specialist to lead and coordinate CCRs) has been key in ensuring municipality's leadership and ownership of CCRs, customizing CCR to local context, relying on local capacities and resources and supporting gender mainstreaming in local strategic development plans, but It should be extended in applying GRB in service provision for survivors of domestic violence.

3.3.3 Protection against domestic violence is a long-term process, which requires long-term commitment and coordination of national government and local government authorities, CSOs and donors. Experience in the last decade when relevant legal framework is endorsed and implemented has shown that it takes more than few years to

change the former practice of non-intervention by the authorities to coordinated response of many actors at local and central level, patriarchal mentalities and prejudices stand in the way of professional action by the police and judicial system as well as citizens to report and refer domestic violence. Political and social efforts as well as initiatives to address domestic violence should be organized on long-term basis and include long-term planning, budgeting, data collection, monitoring and evaluation of services, capacity building of actors and public awareness and education on adverse impact of domestic violence. It is a process where legislation and its implementation as well protocols and standards of service provision need to be reviewed continuously to better respond to local and national context.

Case of Municipality of Durres: Provision of multidisciplinary services

Municipality of Durres provides a good example of integrated coordinated community response to domestic violence. It is the first municipality at national level which set up the GE office in 2008 right after the approval of GEL and it is one of the five municipalities supported by UNDP (UNJP) to set up CCR mechanism in March 2010 through the signing of MoU on Establishment of CCR against DV by representatives of 11 institutions (Police Department for Durres Region, District Court for Durres Region, Prosecutor's Office for Durres Region, Regional Hospital, Regional Education Directorate, bailiff's office for Durres Region, Regional Employment Office, Regional Health Directorate) and NPO CDC "Today for the Future").

UNDP provided technical assistance during the period 2010-2012 to set up and strengthen CCR mechanism and continued support during the period 2012-2013 to consolidate CCR mechanism and expand it in 4 neighboring LGUs (municipality of Sukth and Shijak and communes of Rrushbull and Maninas). It should be noted that after the termination of UNDP support, CCR mechanism in Durres is functioning well through (i) regular meetings of CCR representatives, (ii) case management through contribution of CCR members particularly Police, Regional Social Service and NPO CDC "Today for the Future", (iii) provision of professional services by NPO CDC "Today for the Future" (legal counseling, psycho-social support, case assessment), (iv) provision of emergency sheltering by NPO and Regional Social Services and coordination with other service providers for long-term sheltering, outside Durres (Tirane, Vlore, Elbasan). Municipality of Durres has ensured its leading and coordination role in CCR mechanism through the GE&DV specialist.

It is worth mentioning that the political will of the mayor of Durres to set up the GE office in 2008 and nominate GEE is also reinforced by his decision to delegate the tasks of Local Coordinator for DV to the GEE and make it a permanent position in the organogram of the municipality (Gender Equality Sector) along with the annual allocation of budget for the multi-disciplinary services to victims of domestic violence provided by the NPO, which ensures quality of services and support in case management. Municipality of Durres is one of the few municipalities¹⁰ in Albania that budgets since 2011 for services for victims of domestic violence along with advocacy campaigns and contracts an NPO to deliver them. It is worth mentioning that its finance department has overcome the complex procurement services for contracting such services.

¹⁰ Municipalities of Vlora and Pogradec are reported to budget for DV services as well and subcontract NPOs for delivering such services

The Specialist for GE& DV, a lawyer by background, has been in this position for over 4 years becoming the central point of sustainability of CCR in terms of knowledge, expertise, experience and institutional cooperation with CCR members and in increasing the trust of the community in the mechanism and is a valuable resource person in CCR mechanism. It is worth mentioning the close cooperation with CPU and other local actors such as University, community centers in rural areas and cooperation with CCRs established in 4 other LGUs (two municipalities and two communes).

3.3.4 A range of network of services needs to be provided on site to survivors of domestic violence and coordination and cooperation with various actors including specialized NPOs is indispensable. Current experience where limited services are provided on site shows that there is lacking a evidence-based strategic approach at local level on addressing domestic violence (lack of emergency shelters, 24 hours phone line, multidisciplinary services, counseling services for perpetrators, medium and long-term rehabilitation services to integrate survivors in mainstream society, lack of standards and protocols). MSWY is planning to address this issue through the new social care reform, which aims at building a network of services at local level targeting various needs and social groups.

Case of Municipality of Korca : Data collection and monitoring

Municipality of Korca reports that there is no specialized NPO for responding to victims of domestic violence, although there are a number of NPOs providing services for children, old people and Roma community. It has set up a data collection system as of 2010 when CCR mechanism was established, which serves as baseline year. Data show that number of reported cases is five times higher in 2014 (156 cases) vs. 38 cases reported in 2010 and there is an increase of 50% compared to 2013 (102 cases).

Data are also broken down by:

- (i) type of relationship with the perpetrator (54% spouse, 30% family member);*
- (ii) gender (women and men as survivors of domestic violence). In 2010 there are reported 38 cases (33 F and 5 M) whereas in 2014 there are reported 156 cases (123 F and 33 M);*
- (iii) type of violence exerted (psychological 84%, physical violence 99.35%, economic 9%, sexual violence 0.43%);*
- (iv) case management by number of actors: 320 cases managed by three actors and 190 cases managed by more than three actors.*

It is reported that the majority of cases are members of Roma community.

The above data are serving as inputs to municipality to analyze the situation, identify service gaps and plan for adequate services at local level. There are several initiatives being explored and evaluated to set up an emergency shelter either by using a social housing flat, renting a flat or contracting the service to an NPO as it was the case of Kennedy Center, which was contracted during UNDP support to municipality. There is also a local fundraising initiative by Kennedy Center for setting up a multifunctional

center to provide services to victims of domestic violence offering sheltering, rehabilitation services and vocational training

Municipality of Shkodra: Initiative to provide services to victims of domestic violence

Municipality of Shkodra cooperates with two local NPOs (“Gruaja tek Gruaja” and “Hapat e Lehte”), which provide basic services to survivors of domestic violence: psycho-social and emotional support, legal counseling and also sheltering, although in limited capacities.

There is reported an increase of reported cases of domestic violence and the number of EPO/PO issued in 2014 were 70. The limited accommodation capacities of two NGOs and the unwillingness of the survivors of domestic violence to be accommodated in shelters outside Municipality of Shkodra have “urged” the municipality of Shkodra to identify a current building to be used as a shelter, refurbish it and in partnership with the NGO provide services to victims of domestic violence. The shelter is not opened yet, but the work and negotiations are on-going to finalize this initiative.

3.3.5 Structural and financial sustainability is key in implementation of legislation and functioning of CCR. The fact that the GE&DV specialist have been stable over years in municipality organogram and budget in leading and coordinating CCR vis a vis CCR member turnover has contributed in ensuring consistency in referral, response and coordination of services and has been the main functioning link in CCR mechanism. It is important that municipalities start to think strategically based also on gender mainstreamed development plans and action plans to provide financial resources for responding to domestic violence and ensure continuity and sustainability of actions taken so far. Effective violence prevention will cost money but violence that is not prevented would cost far more to society.

Case of municipality of Burrel: Gender Mainstreaming in sustainable community development plan 2012-2030

Municipality of Burrel, led by a woman mayor since 2011, is a small municipality situated in northeastern part of Albania with a population of 17,000 inhabitants. In 2011-2012 it was supported by Dutch Embassy to design its sustainable community development plan for the period 2012-2030 along with project fiches based on identified development priorities. The development plan was designed in close consultation with the community and it was supported by UNDP in using gender mainstreaming as a tool to account women’s needs and priorities into planning process.

It should be noted that a number of project fiches related to respond to women's needs are identified and in particular three projects address domestic violence:

i) establishment of the center for providing services to survivors of domestic violence (psycho-social and emotional support and sheltering for survivors provided with EPO/PO);

ii) provision of legal and psychological counseling for survivors of domestic violence"

iii) strengthening the CCR mechanism in the municipality to provide access to judicial system for survivors of domestic violence.

The projects have well established objectives, activities, budgets and timeline and are ready to be submitted for funding to municipal council and donors.

3.3.6 Showcasing results is key in disseminating good practices and in learning. Exchange study tours among CCRs have served as learning experiences to develop and customize CCRs at local level. The study tours organized in Municipality of Korca and Durres respectively for municipalities of Permet and Fier are assessed quite positively by participants.

Municipality of Permet: Study Visit to Municipality of Korca on CCR mechanism

CCR mechanism in municipality of Permet was set up in 2012 with the technical and financial support by UNDP, which also facilitated a study tour of CCR members to municipality of Korca.

They were introduced to the CCR activity in the municipality of Korca since its establishment in 2010, its results and effectiveness in working as a team in case management. The visitors also attended a MTT meeting and observed how cases are managed and resolved by the multi-disciplinary team.

They also visited the Regional Employment Office to become familiar with the role of this actor in facilitating employment for survivors of domestic violence, successful stories as well as challenges faced in providing vocational training and employment to this category.

A visit was paid to Kennedy Center where CCR members from Permet were presented with its services including the sheltering services for victims of domestic violence as well the residential center for trafficked women and old people.

CCR members from municipality of Permet were introduced to the CCR expansion model in the neighboring communes of Korca municipality (communes of Mollaj, Drenove, Libonik, Voskop). They met MTT representatives at commune level, who shared their experiences on their work, cooperation with CCR in Korca municipality and their contribution in resolving reported cases of domestic violence from the rural areas.

This experience is assessed by CCR members in Permet as "quite informative and practical, a concrete example how CCR mechanism should function and helped them coordinate better

their resources and services. The expansion of CCR model in communes was a good example for replication in their municipality”.

3.3.7 Public awareness of CCR and adverse impact of domestic violence on society is key in raising CCR visibility, public sensitivity to domestic violence and awareness that violence is not tolerated and contribute to domestic violence prevention.

Public awareness campaigns targeting boys and men

Municipality of Korca in its strategy for conducting public awareness campaigns against domestic violence has reached out young people in University of Korca, local communities in 4 communes that are members of CCR, high schools and in particular organized a special information session with male students in the mechanical high school in Korca.

NPO CDC “Today for the Future” is a community development center that provides multidisciplinary services to victims of domestic violence. It is a CCR member in the municipality of Durrës since 2010 and Municipality of Tirana since 2012. In the recent years it is actively engaged in targeting boys and men in its public awareness campaigns to become part of the solution and in promoting positive role models of men and boys.

3.4 Challenges

Overall, it is assessed that progress is made in establishment and functioning of CCRs, yet there is a long way to make them fully functional, effective and sustainable. A number of challenges are identified which will need resources, time, political will and support to be addressed.

3.4.1 System deficiencies accompanied with lack of financial resources for CCR functioning:

i) **Weak implementation of relevant legislation on domestic violence by several “links” of CCR mechanism members** particularly representing judicial system, who see participation in MTTs meetings and data or information sharing with CCR members and particularly with the GE&DV specialist as an extra work rather a legal obligation affecting quality of case management and information exchange. There are reported cases when police mediates reported cases of domestic violence and considers them “petty offence”. There are reported cases dismissed by the court due to lack of proper documentation by police (missing information on contacts or ID details, lack of medical report) or slow execution of EPOs/POs due to weak cooperation between police, bailiff’s office and social services directorate.

ii) **Lack of financial resources to provide for an extensive and comprehensive specialized support services for survivors of domestic violence** ranging from emergency support and emergency centers/shelters on site, specialized legal and psycho-social counseling on site, counseling for perpetrators and children as witnesses of domestic violence, transportation to safe accommodation, long-term rehabilitation

services including psycho-emotional support, vocational training, employment programs and opportunities to ensure victims' economic independence and strengthening.

iii) **Frequent staff turnover in CCR representative institutions (members of Steering Committees and members of multi-disciplinary technical teams).** While the GE&DV specialist in LGUs is found to be consolidated as a position and function in most of visited LGUs, the frequent changes of nominated staff in CCR mechanism trained in addressing domestic violence constitutes loss of capacities on site which affects quality of cooperation, level of response to case management and coordination with other partners and credibility of the CCR mechanism. This translates into additional efforts for the GE&DV specialist to re-establish contacts with the newly appointed staff, provide training and introducing them to CCR's model of cooperation and partnership;

(iv) **Rigid procurement procedures** for subcontracting NPOs' services for survivors of domestic violence or emergency support services delay effectiveness of measures to respond to cases of domestic violence.

3.4.2 Local elections scheduled on June 21st, 2015 might lead to political rotation in the leadership of municipalities, which quite often leads to re-organization of municipality organogram, staff turnover and loss of capacities built. This in particular might also affect the position of the GE&DV specialist and the coordination of CCR mechanism.

3.4.3 Implementation of Territorial Administration Reform (TAR), which involves the amalgamation of 373 LGUs (65 municipalities and 308 communes) into 61 municipalities with larger territories to manage and cover with services. While quality and coverage of provision of services for survivors of domestic is a challenge for the existing municipalities in smaller territories, re-organization of municipalities in functional areas which cover larger territories, allocation of resources and provision of services including addressing of domestic violence is going to be a "trial and error exercise" to be explored after the elections by newly elected mayors and municipal councils.

3.4.4 Mentality that violence is a private and not a public issue, a long history and acceptance of violence against women as "normality", the subordinate position of women in society and family, prejudice and bias in justifying it are noticed also in CCR members particularly police in small urban areas, despite relevant trainings. Quite often it is a hidden phenomenon particularly in small urban areas and rural areas and it takes a lot of courage to report it and CCR members should be capable to respond adequately and free of prejudices and biases.

3.5 Recommendations

Addressing domestic violence requires long-term commitments, human and financial resources, capacities as well as keeping it on the agenda of central and local governments and international donors focusing on the following directions to further progress in preventing and eradicating it.

3.5.1 Establishment of CCRs in all municipalities at local level

The CCR model already established and operational in 27 municipalities should be expanded and become operational in all municipalities in Albania particularly in the context of TAR, where municipalities' territories will be expanded and serve larger communities as a result of merging of existing 65 municipalities and 308 communes into 61 newly re-formatted municipalities. Definitely re-formatting of municipalities and their re-organization in functional areas will lead to internal restructuring of municipalities which amidst of a number of priorities in TAR context should not neglect their legal obligation of setting up and making functional CCR mechanism at local level where it does not exist and consolidating CCR where it is established and operational.

UNDP strategic platform for coordinating community responses against domestic violence in Albania, experience gained and lessons learnt from piloted CCRs can support the set up and expansion of CCR model all over Albania. It is important to understand that CCR mechanism should build upon existing capacities, resources of social services provisioning at local level and the process must be led and owned by local governments which can decide how to customize it to local context based on available resources and capacities.

3.5.2. Strengthening of existing CCRs through improved inter-institutional and multi-agency cooperation, coordination and exchange of information

CCRs already established and operational at local level have found their way of functioning and responding to cases of domestic violence despite many challenges related to inter-institutional cooperation among members of Steering Committee and multidisciplinary technical teams. It is important that MSWY at central level, the municipalities at local level, donors and service providers should continue to lobby with relevant institutions at central and local level that supporting CCR and being part of CCR is not an additional task, it is not a personal favor, but legal obligation to carry out successfully their institutional duties and ultimately contributing to reduction of domestic violence cases through coordinated work and services.

It is of significant importance updating of CCR members on legal amendments in Penal Code in 2012 and 2013¹¹ and how these amendments affect their respective work. Institutional mechanisms for exchange of information should be in place among municipality, police and judicial institutions particularly prison directorate on release of perpetrators in order to notify the domestic violence survivors and take necessary measures for their safety and protection and avoid repetition of acts of domestic violence as a revenge on the survivor for reporting the domestic violence.

A monitoring and evaluation system should be set up and managed by MSWY to supervise CCR functioning and performance at local level, inter-institutional cooperation, coordination and exchange of information.

¹¹ Amendments in Penal Code define domestic violence a criminal offence along with stalking, sexual harassment and forced sexual relationships

3.5.3. Provision of a comprehensive package of services to victims of domestic violence

While emergency response to cases of domestic violence functions well among the members of multidisciplinary teams (particularly the GE&DV specialist, police, health center and NPOs as service providers in the areas where they operate), LGUs need to budget to provide for emergency shelters, medium and long-term shelters and comprehensive specialized services for survivors of domestic violence as well as long-term interventions related to their rehabilitation and reintegration into daily life.

Provision of safe emergency sheltering in the first 24-48 hours when EPO is underway, long-term sheltering along with specialized rehabilitation services including psycho-social and emotional counseling, vocational education and training to acquire employable skills, facilitation of employment, social housing are key in ensuring a safe and independent life to victims of domestic violence and integrate them into mainstream society. Counseling services for perpetrators of domestic violence and children witnesses of domestic violence should be developed and available as well on site.

It is of paramount importance to find a long-term solution to the sheltering issue by building, acquisition or refurbishing existing premises that are owned by municipalities that can have regional coverage for referred cases of domestic violence in need of emergency and long-term sheltering and ensuring that the survivors remain close to their social and family ties.

3.5.4 Allocation of resources for capacity building, development and harmonization of standards and protocols and new services. Given the high turnover of CCR members, expansion and strengthening of CCRs in larger territories in the context of TAR and all over the country, there is the need for continuous trainings and education to be provided to the staff dealing with domestic violence and building sustainable knowledge and skills on domestic violence issues.

Financial support will be needed to provide nationwide coverage with women's shelter, comprehensive support services for women and children and development of guidelines on quality standards and protocols. Establishment of 24 hours local, regional and national help line free of charge is a must to provide soft assistance on women's rights, legal options and advising. It is also important establishment of performance standards for CCR work as they do not exist to date.

3.5.5. Showcasing successful CCR models or even successful elements of CCR models through study tours or roundtable discussions can be an effective way to support establishment of CCRs in all municipalities of Albania. In addition, coaching or mentoring of newly established CCRs by more experienced CCRs already functional and operational in neighboring municipalities can be quite efficient (e.g. GE&DV specialist in Fier can coach the counterpart in the municipality of Patos, or the one in municipality of Korca can support the counterpart in municipality of Erseka). This will not only contribute in sharing experiences and learning, but also in establishing and

facilitating contacts for pooling resources and finding solutions for management of cases of domestic violence at regional and intra-regional level.

3.5.6. Public awareness on CCR mechanism and its visibility, information and education on protection and services provided to survivors of domestic violence targeting community at large, youth at school and particularly boys and men are key for prevention of domestic violence, change of mentality and giving the message that domestic violence is not a private matter for the state, community and individual, it is human rights' violation, a public and political problem and as such it is not tolerated by the state.

3.5.7. Capitalizing on experiences and lessons learnt from existing CCRs and consultations with specialists for GE&DV, CPUs and local service providers for responding to domestic violence in the context of TAR at local level, with regard to required human resources and their professional profiles, quality and range of services provision to victims of domestic violence, territorial coverage and standards. It is recommended that at least the positions of GEE and Local Coordinator for Domestic Violence (LCDV) should be separate positions and depending on the territory additional human resources are required (preferably psychologist and social worker). GEE is recommended to be involved more in GM in local development and planning and GRB, while LCDV in service provision, coordination of CCR and data collection.

Brainstorming and reflection sessions at regional and national level can be organized with specialists of GE&DV and other CCR members to conduct mapping and analysis of services and capacities currently available on site, needs and gaps for services, resources and capacities, accessibility and quality of services in rural areas and people with disabilities in the context of TAR. Recently, UNW Albania in partnership with MSWY and with the support of CoE has made available the findings and recommendations of national research study on the service provision adequacy and accessibility in response to domestic violence against women and girls from the perspective of Istanbul Convention, which feeds important information to decision-makers and service providers at central and local level.

3.5.8 Presentation on CCR mechanism to incoming mayors and municipal councilors following elections in June 2015 to raise awareness of the legal obligations of the LGUs on CCR establishment and functioning and take the opportunity to lobby for more budgets and services related to domestic violence with municipal councilors where 50% are expected to be females. This will also be an excellent opportunity to present them the gender-mainstreamed local action plans and strategies, where they exist, which include project fiches targeting services provision for addressing domestic violence at local level and lobby for allocation of financial resources to implement them or develop them into full project proposals for donors' funding.

3.5.9 Improvement of data collection on domestic violence cases and on-line reporting on case management at local level and national level through better cooperation among CCR members in timely feeding information in the web-based integrated system allowing for more effective monitoring. There is the need to

strengthen the capacities in using the web-based data system as well as in building in the system specific features that will enable the tracking of the EPO/PO decisions and therefore, consequently ensure effective monitoring in practice.

ANNEX 1

LIST OF EVALUATION STAKEHOLDERS

No	Name and Surname	Position	Location	Gender	Date
UNDP Project Management					
1	Emira Shkurti	Former Project Manager	Tirana	F	6 March, 2015
2	Elona Dini	Gender Equality Expert	Tirana	F	6 March, 2015
3	Monika Kocaqi	Consultant	Consultant	F	5 March, 2015
4	Aurela Bozo	Consultant	Consultant	F	4 March, 2015
Partners at Central Level					
1	Brunilda Dervshaj	GE Specialist	Ministry of Social Welfare and Youth	F	10 March, 2015
2	Irena Benusi	GE Specialist	Ministry of Social Welfare and Youth	F	10 March, 2015
3	Ilda Bozo	Director of Social Inclusion and Gender Equality Directorate	Ministry of Social Welfare and Youth		10 March, 2015
4	Etleva Sheshi	GE Specialist	Ministry of Social Welfare and Youth	F	15 April, 2015
Partners/CCR members at local level					
1	Aida Shehu	Head of GE Office	Municipality of Tirana	F	9 March, 2015
2	Aurora Hyka	GE&DV specialist	Municipality of Durres	F	9 March, 2015
3	Elizeta Vando	GE&DV specialist	Municipality of Korca	F	17 March, 2015
4	Elena Zhapa	Director	Regional Employment Office, Korca	F	17 March, 2015
5	LogoraqToshi	Chancellor	District Court, Korca	M	17 March, 2015
6	Mamica Shehi	Expert for Roma and LGBT Communities	Municipality of Korca	F	17 March, 2015
7	Anjeza Duci	Intern in GE Office	Municipality of Korca	F	17 March, 2015
8	OrigesLifo	Lawyer	Municipality of Erseka	M	17 March, 2015
9	Gilberto Jace	Mayor	Municipality of Permet	M	18 March, 2015
10	Arjana Papapano	GE&DV specialist	Municipality of Permet	F	18 March, 2015
11	Elvira Pasho	Director of Public Health	Municipality of Permet	F	18 March, 2015
12	Maltin Delia	Police Inspector	Police	M	18

			Commissariat In Permet		March,2015
13	Oriana Dervishi	Chancellor	District Court of Permet	F	18 March, 2015
14	Liliana Myrtolli	Head of Hospital	Municipality of Permet	F	18 March,2015
15	Natasha Doko	GEO and Local Coordinator for DV	Municipality of Fier	F	18 March,2015
16	Merita Bitri	Director of Public Health	Municipality of Fier	F	18 March,2015
17	Florida Targa	Social Administrator	Municipality of Fier, Region 3	F	18 March,2015
18	Alma Agalli	Expert in Child protection Unit	Municipality of Fier	F	18 March,2015
19	Jora Dylgjeri	Regional Employment office	Municipality of Fier	F	18 March,2015
20	Elda Goxhaj	Information Officer, Former GFP	Municipality of Patos	F	18 March,2015
21	Esmeralda Dervishi	GE&DV specialist	Municipality of Patos	F	18 March,2015
22	Maria Lee	Peace Corps Volunteer	Municipality of Patos	F	18 March,2015
23	Jeta Xhabiaj	GE&DV specialist	Municipality of Shkodra	F	24 March,2015
24	Adelina Farici	Mayor	Municipality of Burrel	F	27 March,2015
25	Enea Gjyla	GE&DV specialist	Municipality of Burrel	F	27 March,2015
26	Edlira Drici	Head of Social Assistance/ CPU	Municipality of Burrel	F	27 March,2015
27	Malvina Hoxha	Lawyer	Municipality of Burrel	F	27 March,2015
28	Shpetim Bushati	Head of Police Department	Municipality of Burrel	F	27 March,2015
29	Dile Nikolla	Head of Development Department	Municipality of Lezha	F	3 April, 2015
30	Kastriot Kodheli	Head of Social Assistance Department	Municipality of Lezha	M	3 April, 2015
31	Edison Kiti	Specialist for Social Assistance	Municipality of Lezha	M	3 April, 2015
32	File Daci	Social Administrator	Commune of Maminas	F	17 April, 2015
NGOs providing services for victims of DV					
1	Fabiola Egro	Executive Director	Community Development Center "Today for the Future"	F	11 March, 2015
2	Aferdita Proni	Executive Director	Human Rights in Democracy Center	F	11 March, 2015

ANNEX 2

DRAFT EVALUATION WORK PLAN

Tasks	Days	Timeframe	Responsibility	Location
Inception Phase				
Start-up meetings	0.5 day	2 March 2014		Tirana
Documentation review and request for additional documentation	3 days	Week 4, February	Consultant	Tirana
Development of draft inception report and work plan	1.5 days	Week 4, February	Consultant	Tirana
Draft Inception review and feedback			UNDP	Tirana
Deliverable: Submission of Final Inception Report		4 March 2014	Consultant	
Data Collection Phase				
Meetings/Interviews with identified stakeholders and field visits to selected LGUs	15 days	March-April 2015	Consultant	Selected LGUs
Data Analysis and Reporting Phase				
Data analysis and development of evaluation report	6 days	April 2015	Consultant	Tirana
Deliverable: Submission of first draft of evaluation report		Week 5, April 2015	Consultant	Tirana
Report review and feedback from UNDP			UNDP	Tirana
Preparation and presentation of main findings	1.5 days	Week 5, April 2015	Consultant	Tirana
Incorporation of comments from UNDP	1.5 days	Week 5, April 2015	Consultant	Tirana
Preparation of consultancy report	1 day	April 2015	Consultant	Tirana

Tasks	Days	Timeframe	Responsibility	Location
Deliverable: Submission of final evaluation report		Week 5, April 2015	Consultant	Tirana

ANNEX 3

INTERVIEW GUIDES

1. UNDP Management Staff and UN agencies involved with DV

- What type of support is provided to central government institutions and LGUs to implement/operationalize strategy/law on DV and set up CCR? (TA, institutional building, capacity building, financial support)? Please specify
- Which central and local government institutions are supported? Please provide info on achievements to date and gaps.
- What synergies are built with other UN agencies and donors involved with victims of domestic violence (UNICEF, UNFPA) and in what areas?
- What are some of the challenges faced and lessons learnt/good practices in setting up CCR?
- Which are the identified needs/areas for improvement at central and local level?

2. Central Government Authorities

- What actions are taken by your institution to implement CCR? (MOUs, structures, protocols and standardization of procedures, capacity building, financial resources, awareness raising) and how are these translated by your institutions at local level?
- What coordination and feedback mechanisms (monitoring and evaluation, baseline data, statistics) are in place for CCR with institutions at central and local level?
- What are the achievements to date and which areas need improvement?
- Areas and type of support provided by donors for CCR?

3. Local Government Institutions

- What is the progress that your institution has made in establishing and functioning of CCR (MOUs-roles and responsibilities of members, structures-GFP, DV Coordinator, protocols and standardization of procedures, capacity building, financial resources, awareness raising, mapping of services at local level relevant to DV)?
- Do you have a strategic plan/action plan in place for implementing local response to DV?
- Have you received support from donors to establish CCR? In what areas? Is CCR functioning after donor's support? In what ways? (staff, budget, work and communication plan, reporting mechanism)?
- What is the situation of DV in your LGU (statistics, baseline data, data collection system of cases referred, managed and addressed)?
- What is the coordination mechanism among CCR members and how does it work?
- Do you have resources for CCR (HR and financial resources)? Please specify persons/functions assigned, responsibilities and budget for DV?
- What is the level of capacities of CCR members to address DV cases? What are the needs?
- What services are available for victims of DV at local level and who provides them? What are their capacities?
- What is the level of awareness of community on DV and relevant structures/mechanism to report it? How reliable is CCR mechanism? Do you have statistics on reported cases for the last three years?
- What are your needs to improve CCR mechanism?

- Which are some of lessons learnt in the process of CCR?

4. NPOs involved with DV services

- What services do you provide for victims of DV? How long have you been providing these services? What is the number of DV victims you have supported? What other services are available/needed in your area for DV victims?
- Are you member of CCR? What is your opinion on the functioning level of CCR? What needs to be improved?
- What is your level of cooperation with LGU and other CCR members? How can CCR work better with you?
- What needs to be done differently?
- Have you been supported/are you supported by the donors for services you provide? How are your organizational capacities for providing such services?

5. Community

- Are you aware of CCR in your community and law on domestic violence and how did you learn about them?
- What do you think of CCR's work/functioning? Which institutions at local level are involved?
- Are there services in your community for victims of DV and who provides them (LGU shelters NGOs, counseling and legal services)?
- Do you know what to do in case you witness or are a victim of DV? Would you refer it and where?
- What should be done to address the issue of DV in your community? What are the needs?

6. CCR Beneficiaries (victims of DV)

- Are you aware of CCR work in your community? Have you benefited of their services/support? What kind of support did you receive? Please specify
- What was your experience with services provided and how they helped you or did not help you? Please specify which services were more effective? How?
- What other services are needed/you needed in your case?
- What needs to be improved?
- Would you use these services again or advise others to use them in case of need?

ANNEX 4

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