Monitoring the Implementation of Children's Rights at the Local Level



PRISHTINA, 2026

This report has been prepared by the Kosovo Local Government Institute (KLGI), within the framework of the project "Advancing Children's Rights at the Local Level", implemented in partnership with Save the Children Kosova/o and supported by the Government of Sweden through the Swedish International Development Cooperation Agency (Sida).

The author bears sole responsibility for the content of this report. The views and interpretations expressed herein do not necessarily reflect the positions of the Government of Sweden or Save the Children.

The report presents the findings of the monitoring of the implementation of children's rights at the local level and aims to provide an assessment of the commitment and performance of municipal institutions in fulfilling their obligations towards children.

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INTRODUCTION

This report presents the findings of the monitoring process assessing the implementation of children's rights at the local level, with a particular focus on the fulfilment of municipal responsibilities in the areas of social services and child protection during 2025.

The report was prepared by the Kosovo Local Government Institute (KLGI) under the project Advancing Children's Rights at the Local Level, implemented in partnership with Save the Children Kosova/o and funded by the Swedish International Development Cooperation Agency (Sida), within the framework of the Civil Society Strengthening Programme for Children's Rights.

During the period June–September 2026, KLGI conducted a monitoring process to assess the extent to which municipalities fulfil their obligations in the areas of social services and child protection. The monitoring covered all 38 municipalities of the Republic of Kosovo and was structured around six main areas, comprising a total of 25 indicators covering institutional responsibilities, planning, service provision and financing.

The monitoring process followed a combined approach involving the review of publicly available information and direct verification with municipalities. In the first phase, official municipal websites and available public documents were reviewed to identify relevant information and evidence for each indicator.

Following the initial monitoring exercise, preliminary data were submitted to municipalities for review, verification and completion. Supporting evidence was requested for each positive response to distinguish between documented compliance and compliance reported without supporting documentation.

Of the 38 municipalities included in the process, 28 provided responses, while 10 did not participate in the verification phase. Consequently, the detailed performance analysis, comparison between municipalities and indicator-based ranking were conducted on the basis of the 28 municipalities that responded and enabled data verification.

The monitoring was structured around six main areas:

1. **Institutional Mechanisms;**
2. **Planning and Policies;**
3. **Social Service Provision;**
4. **Child-Specific Services;**
5. **Financing;**
6. **Contracting and Licensing.**

These areas cover the main links of the municipal system of child protection and social services, starting from the creation and functioning of institutional mechanisms, policy planning and the provision of services, through to securing financing and cooperation with service providers.

The approach adopted in this report goes beyond simply establishing whether a mechanism, plan, service or activity exists. A central element of the monitoring process is the degree to which compliance can be verified. Accordingly, the data were classified into three categories: primary evidence, where compliance is supported by evidence; secondary evidence, where compliance has been reported by the municipality without supporting evidence; and no verifiable compliance, where no sufficient basis for establishing compliance was identified during the process.

This approach enables municipal performance to be analysed at two interconnected levels: the level of fulfilment of responsibilities and the extent to which such fulfilment is documented.

The report provides a comparative overview of the situation across municipalities and monitored areas, identifies aspects where performance is more consolidated and highlights gaps requiring further institutional attention and intervention.

Through its findings, conclusions and recommendations, the report aims to serve as a guiding instrument for municipalities, central-level institutions, civil society organisations and relevant partners in setting priorities and undertaking measures to improve social services and advance the protection of children's rights at the local level.

In this regard, the analysis is not limited to presenting numerical results but also seeks to assess the interconnections between institutional mechanisms, planning, service provision, financing and the practical implementation of municipal responsibilities, identifying the areas where the main weaknesses and opportunities for improvement arise.

EXECUTIVE SUMMARY

The findings indicate that municipal performance is not uniform and that significant differences exist both across the monitored dimensions and between the level of reported compliance and the level of compliance documented through primary evidence.

Dimension 3, Social Service Provision, records the highest level of identified compliance, at 61.9% of cases. However, the evidence is evenly distributed: 31.0% of cases are supported by primary evidence and 31.0% by secondary evidence, while 38.1% have no verifiable compliance. This indicates that a considerable proportion of the performance identified in this dimension continues to rely on secondary sources rather than primary institutional documentation.

Dimension 1, Institutional Mechanisms, achieves an identified compliance rate of 60.7%. Within this dimension, 38.4% of cases are supported by primary evidence and 22.3% by secondary evidence, while 39.3% have no verifiable compliance. Compared with Dimension 3, this dimension demonstrates a higher level of documentation through primary evidence, indicating that institutional mechanisms are relatively more formalised and documented.

In Dimension 2, Planning and Policies, 57.1% of cases demonstrate identified compliance. Of these, 36.6% are supported by primary evidence and 20.5% by secondary evidence, while 42.9% remain without verifiable compliance. This indicates an average level of institutionalisation of planning processes, alongside considerable reliance on secondary evidence.

Dimension 6, Contracting and Licensing, achieves an identified compliance rate of 52.1%, but its evidence profile differs: only 22.1% of cases are supported by primary evidence, while 30.0% are supported by secondary evidence. In this dimension, secondary evidence exceeds primary evidence, indicating that a considerable proportion of contracting, licensing and monitoring practices have been reported or confirmed without sufficient primary documentation.

The two dimensions with the lowest performance levels are Financing and Child-Specific Services. In Dimension 5, Financing, 21.4% of cases are supported by primary evidence and 17.1% by secondary evidence, while 61.4% have no verifiable compliance. In Dimension 4, Child-Specific Services, only 14.3% of cases have primary evidence and 15.2% have secondary evidence, while 70.5% have no verifiable compliance.

Within Dimension 1, the Child Rights Team is the indicator with the highest performance. Of the 28 municipalities, 17 (60.7%) have primary evidence, while 6 (21.4%) have secondary evidence. Overall, 82.1% of municipalities demonstrate identified compliance with this indicator. This result indicates that the establishment of the Child Rights Team is one of the most institutionally consolidated mechanisms.

Nevertheless, the practical functioning of this mechanism is considerably weaker. Regarding meetings of the Team during 2025, 35.7% of municipalities have primary evidence and 17.9% have secondary evidence, while 46.4% have no verifiable compliance. Overall, only 53.6% of municipalities appear to have held meetings. This highlights a clear gap between the formal establishment of the mechanism and its regular functioning.

The weakest indicator in Dimension 1 concerns the specialised child protection officer within the Centre for Social Work (CSW). Only 17.9% of municipalities have primary evidence, 25.0% have secondary evidence, while 57.1% have no verifiable compliance. This finding highlights significant gaps in specialised professional capacities and their documentation.

In Dimension 2, the highest performance is recorded in consultations with NGOs and local stakeholders. For this indicator, 42.9% of municipalities have primary evidence and 28.6% have secondary evidence, while 28.6% have no verifiable compliance. Overall, 71.4% of municipalities have some form of evidence demonstrating compliance with this indicator.

Social planning based on needs assessments is supported by 32.1% primary evidence and 17.9% secondary evidence, while municipal programmes for child well-being have 28.6% primary evidence and 21.4% secondary evidence. In both cases, half of the municipalities have no verifiable compliance.

In Dimension 3, informing citizens through the CSW is the highest-performing indicator. A total of 35.7% of municipalities have primary evidence and 32.1% have secondary evidence, resulting in an identified compliance rate of 67.9%. The public list of social services has 28.6% primary evidence and 28.6% secondary evidence, while the minimum standards for social services have 28.6% primary evidence and 32.1% secondary evidence.

The greatest disparity appears in Dimension 4, Child-Specific Services. Home-based services for children with disabilities and severe chronic illnesses demonstrate the best result, with 25.0% primary evidence and 32.1% secondary evidence, representing an identified compliance rate of 57.1%. Nevertheless, even for this indicator, secondary evidence exceeds primary evidence.

Day-care centres demonstrate a considerably lower result: only 10.7% of municipalities have primary evidence and 7.1% have secondary evidence, while 82.1% have no verifiable compliance. Children's protection homes and community-based homes each have 10.7% primary evidence and 10.7% secondary evidence, resulting in an identified compliance rate of only 21.4%.

Dimension 5 confirms this pattern from a financial perspective. Financial support for foster families and children in foster care represents the best-performing indicator in this dimension, but only 25.0% of municipalities have primary evidence, while 35.7% have secondary evidence. This indicates that financial support is reported relatively frequently, although primary documentation remains more limited.

Funding for day-care centres and community-based homes is considerably lower. For both indicators, only 14.3% of municipalities have primary evidence and 7.1% have secondary evidence, while 78.6% have no verifiable compliance.

The link between Dimension 4 and Dimension 5 is particularly important: the services that are least available are also those for which the lowest levels of financing are identified.

In Dimension 6, the licensing of service providers records the highest level of identified compliance, at 75%. However, only 25.0% of municipalities have primary evidence, while 50.0% rely on secondary evidence. This indicates that the relatively high level of reported compliance is not matched by an equivalent level of primary documentation.

The contracting of social services is supported by 25.0% primary evidence and 17.9% secondary evidence, while the alignment of contracts with the annual plan is supported by 28.6% primary evidence and 14.3% secondary evidence. In both cases, 57.1% of municipalities have no verifiable compliance.

The most concerning finding in Dimension 6 relates to the monitoring of service providers' quality. No cases supported by primary evidence were identified for this indicator. A total of 42.9% of municipalities have only secondary evidence, while 57.1% have no verifiable compliance. This indicates that even where municipalities report monitoring the quality of contracted service providers, the process is not sufficiently documented.

At the cross-sectoral level, the monitoring process demonstrates that the gap between identified compliance and compliance documented through primary evidence is one of the system's main challenges. Across a considerable number of indicators, positive results are partially or predominantly supported by secondary evidence.

Consequently, one of the report's key findings is that the municipal challenge is not limited to whether a responsibility is being implemented, but also concerns municipalities' capacity to formalise, document and make its implementation verifiable.

A comparison with the 2025 Annual Report of the Ministry of Local Government Administration (MLGA)* on the implementation of municipal policies in the field of human rights reinforces this conclusion. That report also indicates that municipal structures for the protection of children's rights exist in a considerable number of municipalities, but their operationalisation and reporting of results remain uneven.

According to the 2025 report, out of 29 reporting municipalities, 16 stated that they had drafted a Work Plan for the Child Rights Team, while 15 reported that the plan had been approved by the Municipal Assembly. Furthermore, data on activities carried out, particularly their financing, remained limited.

This is consistent with the findings of the current monitoring exercise: structures and plans are more prevalent than actual implementation, financing and systematic documentation of results.

Overall, the further responsibility moves from institutional formalisation towards the actual provision of services, financing and quality control, the greater the gaps become. Therefore, the challenge for the coming period is not merely to establish new structures, but to operationalise existing ones, ensure the provision of concrete services, secure sustainable financing and improve the level of institutional documentation of results.

*] https://mapl.rks-gov.net/raportet-vjetore-te-mapl-se/

METHODOLOGICAL APPROACH

The monitoring process was conducted in several interconnected stages to ensure the most comparable, objective and verifiable assessment possible of the extent to which municipalities fulfil their responsibilities in the field of social services and child protection.

In the initial version of the methodology, the assessment was designed to rely primarily on primary evidence, namely official documents and direct institutional sources enabling the verification of compliance with each indicator. This approach aimed to ensure a high standard of verifiability and comparability of the results.

However, during the practical testing of the monitoring instrument as part of the monitors' training, as well as through communication and consultations with municipalities, cases were identified in which municipalities reported that they had fulfilled a particular responsibility, but the primary documentation was either unpublished, unavailable at the time of monitoring, or not provided in sufficient form to allow full verification. If such cases had automatically been classified as non-compliant, the analysis would have overlooked a significant part of the information gathered during the verification process.

For this reason, the category of secondary data was also introduced during the operationalisation of the methodology. This category was not treated as equivalent to primary evidence, but rather as a distinct level of evidence that allows cases to be recorded in which a municipality confirms compliance but does not provide sufficient primary documentation. This methodological adjustment made it possible to distinguish more clearly between documented compliance, reported compliance and the absence of a sufficient basis for establishing compliance.

In the first phase, the official websites and publicly available documentation of all 38 municipalities were monitored. For each indicator, relevant information and documents were sought, including decisions, plans, reports, budget documents, contracts, lists, minutes and other institutional documents.

In the second phase, the preliminary monitoring results were sent to municipalities for verification and reporting. Municipalities were requested to provide supporting evidence for each positive response. Of the 38 municipalities included in the process, 28 submitted responses, while 10 did not participate in the verification phase.

In the third phase, data quality control was carried out by comparing the information identified through public monitoring with the responses and evidence provided by the municipalities. The aim was to distinguish between documented compliance and reported compliance that was not supported by sufficient evidence.

Based on this process, the data were classified into three categories:

1. **Primary data (1)** – Compliance was supported by direct, documentary and verifiable evidence.
2. **Secondary data (2)** – The municipality reported or confirmed compliance but did not provide sufficient primary evidence for full verification.
3. **No verifiable compliance (0)** – During the monitoring and verification process, no sufficient basis was established to confirm compliance.

This classification ensures that the analysis goes beyond simply determining whether a responsibility has been reported as fulfilled. It also assesses the quality and strength of the evidence supporting that claim. The present report applies this distinction between primary evidence, secondary evidence and cases of no verifiable compliance.

A data-weighting approach was used to determine the overall municipal rankings. Primary evidence was assigned a score of 1 point, secondary evidence 0.5 points, and the absence of evidence 0 points. In this way, secondary evidence is taken into account but is not considered equivalent to direct and verifiable evidence. In the event of a tie, the municipality with the higher number of indicators supported by primary evidence is given priority.

This approach enables the methodology to measure both the level of fulfilment of municipal responsibilities and the extent to which these responsibilities are institutionally documented, thereby providing a more accurate reflection of the situation identified through monitoring, the testing of the instrument and consultations with municipalities.

DIMENSION 1: INSTITUTIONAL MECHANISMS

1. General summary

The "Institutional Mechanisms" dimension assesses the extent to which municipalities have established, formalised and operationalised the basic institutional mechanisms for child protection.

Under Dimension 1, a total of 112 cases were assessed across four indicators in the 28 municipalities that participated in the verification phase. Of these, 43 cases (38.4%) were supported by primary evidence, 25 cases (22.3%) by secondary evidence, while 44 cases (39.3%) had no verifiable compliance. Overall, 68 cases, or 60.7%, were found to be compliant.

The highest result was recorded for the Child Rights Team, with 23 out of 28 municipalities (82.1%) demonstrating compliance. Of these, 17 cases were supported by primary evidence and six by secondary evidence. This indicates that the mechanism has been established in the majority of municipalities.

However, the holding of Child Rights Team meetings during 2025 showed a considerably lower compliance rate of 53.6%. Only 15 out of 28 municipalities provided evidence or reported that the Team had held meetings: 10 cases were supported by primary evidence and five by secondary evidence. The difference between the establishment of the Team and its actual operation indicates that the formal existence of the mechanism does not always translate into regular functioning.

The indicator concerning the appointment of a municipal child protection officer recorded a compliance rate of 64.3%, while the lowest result was recorded for the specialised child protection officer within the Centre for Social Work (CSW), with a compliance rate of only 42.9%.

Overall, Dimension 1 shows that the basic institutional mechanisms are relatively well established, but weaknesses remain in their operationalisation and in the availability of specialised professional capacities. The main challenge is not merely to establish these mechanisms, but to ensure that they function regularly and have the necessary capacities to fulfil their responsibilities.

Four key elements were analysed under this dimension:
- Appointment of a municipal officer responsible for child protection;
- Availability of a specialised child protection officer within the Centre for Social Work (CSW);
- Establishment and functionality of the Child Rights Team;
- Functioning of the Child Rights Team, assessed through the holding of meetings during 2025.

The monitoring methodology identifies the municipal officer responsible for child protection, the specialised officer within the CSW and the Child Rights Team as the main institutional mechanisms at municipal level.

The assessment covers 28 municipalities. With four elements assessed for each municipality, a total of 112 individual cases were analysed.

Of the 112 cases:
- 43 cases, or 38.4%, were supported by primary evidence;
- 25 cases, or 22.3%, were supported by secondary evidence;
- 44 cases, or 39.3%, had no verifiable compliance.

Overall, combining primary and secondary evidence, 68 out of 112 cases, or 60.7%, were found to be compliant.

The results indicate that, in most cases, the existence or functioning of institutional mechanisms was established. Nevertheless, the level of institutional documentation remains considerably lower: only 38.4% of all cases are supported by primary evidence.

At the same time, the results reveal a clear distinction between the formal establishment of mechanisms, professional capacities and their practical functioning. The Child Rights Team is the mechanism with the highest level of compliance, while the specialised officer within the CSW records the lowest level.

1.1. Compliance by indicators and institutional responsibilities

1.1.1. Municipal officer responsible for child protection

This indicator assesses whether the municipality has appointed an officer responsible for child protection.

The monitoring methodology stipulates that compliance must be verified through the relevant institutional documentation, including the decision appointing the officer.

Of the 28 municipalities:
- 11 municipalities (39.3%) provided primary evidence;
- 7 municipalities (25.0%) provided secondary evidence;
- 10 municipalities (35.7%) had no verifiable compliance.

Overall, 18 out of 28 municipalities, or 64.3%, were found to be compliant with this indicator.

The result shows that the appointment of an officer responsible for child protection has been carried out in the majority of municipalities. However, in only 11 municipalities was compliance demonstrated through primary documentation, while in seven other municipalities it was established through secondary sources.

This difference indicates that the challenge is not limited to appointing the officer, but also concerns the formalisation and availability of institutional documentation confirming the appointment.

Compliance by institutional responsibility

The responsibilities related to this indicator fall under:
- Mayor of the Municipality;
- Municipal Directorate of Health and Social Welfare.

For each of these institutions, out of 28 possible cases:
- 11 cases (39.3%) demonstrated that the responsibility had been fulfilled and was supported by primary evidence;
- 7 cases (25.0%) demonstrated fulfilment based on secondary evidence;
- 10 cases (35.7%) had no verifiable compliance.

Overall, for both the Mayor of the Municipality and the Municipal Directorate of Health and Social Welfare, the responsibility associated with this indicator was found to be fulfilled in 18 out of 28 cases, or 64.3%.

1.1.2. Specialised child protection officer within the Centre for Social Work (CSW)

This indicator assesses whether the Centre for Social Work has a specialised officer responsible for child protection.

Of the 28 municipalities:
- 5 municipalities (17.9%) provided primary evidence;
- 7 municipalities (25.0%) provided secondary evidence;
- 16 municipalities (57.1%) had no verifiable compliance.

Overall, only 12 out of 28 municipalities, or 42.9%, were found to be compliant with this indicator.

This is the indicator with the lowest level of compliance under Dimension 1.

The level of primary evidence is particularly low: only five municipalities provided direct evidence supporting compliance.

The result highlights a significant weakness in ensuring and documenting specialised professional capacities for child protection within Centres for Social Work.

Compliance by institutional responsibility

The responsibilities related to this indicator fall under:
- Municipal Directorate of Health and Social Welfare;
- Centre for Social Work.

For each of these institutions:
- 5 cases (17.9%) demonstrated that the responsibility had been fulfilled and was supported by primary evidence;
- 7 cases (25.0%) demonstrated fulfilment based on secondary evidence;
- 16 cases (57.1%) had no verifiable compliance.

Overall, the responsibility associated with this indicator was found to be fulfilled in 12 out of 28 cases, or 42.9%, for both the Municipal Directorate of Health and Social Welfare and the Centre for Social Work.

This result represents the largest institutional gap identified within this dimension.

1.1.3. Child Rights Team

This indicator assesses whether the Child Rights Team has been established and is operational.

Of the 28 municipalities:
- 17 municipalities (60.7%) provided primary evidence;
- 6 municipalities (21.4%) provided secondary evidence;
- 5 municipalities (17.9%) had no verifiable compliance.

Overall, 23 out of 28 municipalities, or 82.1%, were found to be compliant.

This is the indicator with the highest level of compliance under Dimension 1.

It also has the highest level of primary evidence: in 17 out of 28 municipalities, the existence of the mechanism is supported by direct institutional documentation.

This indicates that the establishment of the Child Rights Team is the most institutionally consolidated mechanism within this dimension.

Compliance by institutional responsibility

The responsibilities related to this indicator fall under:
- Mayor of the Municipality;
- Municipal Directorate of Health and Social Welfare;
- Centre for Social Work (CSW);
- Municipal Directorate of Education.

For each institution:
- 17 cases (60.7%) demonstrated that the responsibility had been fulfilled and was supported by primary evidence;
- 6 cases (21.4%) demonstrated fulfilment based on secondary evidence;
- 5 cases (17.9%) had no verifiable compliance.

Overall, for each of the four institutions, the responsibility associated with this indicator was found to be fulfilled in 23 out of 28 cases, or 82.1%.

The result indicates a relatively high level of institutional formalisation. However, the practical functioning of the Team must be assessed through the following indicator.

1.1.4. Meetings of the Child Rights Team during 2025

This indicator assesses the practical functioning of the Child Rights Team by examining whether it held meetings during 2025.

Of the 28 municipalities:
- 10 municipalities (35.7%) provided primary evidence;
- 5 municipalities (17.9%) provided secondary evidence;
- 13 municipalities (46.4%) had no verifiable compliance.

Overall, 15 out of 28 municipalities, or 53.6%, were found to be compliant.

This result is considerably lower than the result for the establishment of the Team.

While the existence of a Child Rights Team was established in 23 municipalities, evidence of meetings held during 2025 was identified in only 15 municipalities.

This represents a gap of eight municipalities, highlighting a significant discrepancy between the formal establishment and the practical functioning of the mechanism.

Compliance by institutional responsibility

The responsibilities related to this indicator fall under:
- Mayor of the Municipality;
- Child Rights Team.

For each:
- 10 cases (35.7%) demonstrated that the responsibility had been fulfilled and was supported by primary evidence;
- 5 cases (17.9%) demonstrated fulfilment based on secondary evidence;
- 13 cases (46.4%) had no verifiable compliance.

Overall, the responsibility was found to be fulfilled in 15 out of 28 cases, or 53.6%, for both the Mayor of the Municipality and the Child Rights Team.

The result indicates that the functionality of the mechanism is considerably weaker than its formal establishment.

Table 1 – Summary of Institutional Responsibilities

Responsible Institution	Responsibilities	With Primary Evidence	Based on Secondary Data	Non-Compliance	Total Compliant
Mayor of the Municipality	84	38 (45.2%)	18 (21.4%)	28 (33.3%)	56 (66.7%)
Directorate of Health and Social	84	33 (39.3%)	20 (23.8%)	31 (36.9%)	53 (63.1%)
Centre for Social Work (CSW)	56	22 (39.3%)	13 (23.2%)	21 (37.5%)	35 (62.5%)
Directorate of Education (DE)	28	17 (60.7%)	6 (21.4%)	5 (17.9%)	23 (82.1%)
Child Rights Team	28	10 (35.7%)	5 (17.9%)	13 (46.4%)	15 (53.6%)

At the level of Dimension 1, institutional responsibilities are distributed among five key actors.

This distribution shows that the Mayor of the Municipality, the DHSW and the CSW have broader and more widely distributed responsibilities within this dimension.

The Mayor of the Municipality has an overall compliance rate of 66.7%, the DHSW 63.1%, while the CSW has a compliance rate of 62.5%. The DE has the highest formal compliance rate, at 82.1%, but this result should be interpreted bearing in mind that the DE is linked to only one indicator.

On the other hand, the Child Rights Team has a compliance rate of 53.6% in the responsibility related to its functioning, which confirms that the main challenge remains the transition from formal establishment to regular functioning.

The ranking was established according to the following logic:
- The highest number of cases supported by primary data;
- In the event of a tie, the highest number of cases supported by secondary data;
- Subsequently, the lowest number of cases with no compliance.

Table 2 – Summary of Compliance by Indicator 1

Ranking	Municipality	Child Protection Officer	Specialized Officer at the CSW	Child Rights Team	Team Meetings 2025	Primary	Secondary	Non-compliance	Compliance
1	Elez Han	1	1	1	1	4	0	0	100%
1	Suhareka	1	1	1	1	4	0	0	100%
2	Lipjan	1	1	1	2	3	1	0	100%
2	Rahovec	2	1	1	1	3	1	0	100%
3	Gjakova	1	0	1	1	3	0	1	75%
3	Istog	1	0	1	1	3	0	1	75%
4	Junik	1	2	1	2	2	2	0	100%
4	Peja	2	2	1	1	2	2	0	100%
5	Shtime	2	0	1	1	2	1	1	75%
6	Dragash	1	0	1	0	2	0	2	50%
6	Gjilan	1	0	1	0	2	0	2	50%
6	Klina	1	0	1	0	2	0	2	50%
6	Obiliq	0	0	1	1	2	0	2	50%
6	Prishtina	0	1	1	0	2	0	2	50%
6	Prizren	0	0	1	1	2	0	2	50%
6	Vushtrri	1	0	1	0	2	0	2	50%
7	Ferizaj	1	0	2	0	1	1	2	50%
7	Viti	0	0	2	1	1	1	2	50%

8	Gracanica	0	0	1	0	1	0	3	25%
9	Fushe Kosovo	0	2	2	2	0	3	1	75%
9	Skenderaj	2	2	2	0	0	3	1	75%
10	Drenas	0	0	2	2	0	2	2	50%
10	Kamenica	0	0	2	2	0	2	2	50%
10	Mamusha	2	2	0	0	0	2	2	50%
10	South Mitrovica	2	2	0	0	0	2	2	50%
10	Podujeva	2	2	0	0	0	2	2	50%
11	North Mitrovica	0	0	0	0	0	0	4	0%
11	Ranilug	0	0	0	0	0	0	4	0%

At the top of the ranking are Suhareka and Elez Han, where all four assessment cases are supported by primary evidence.

Lipjan and Rahovec also demonstrate full compliance, but with three primary data points and one secondary data point.

Peja and Junik achieve 100% compliance, but with two indicators supported by primary data and two by secondary data.

Fushë Kosova and Skenderaj present a different profile. Both have a compliance rate of 75%, but all three compliant cases are supported only by secondary data. This demonstrates the distinction between the level of compliance and the strength of the evidence supporting that compliance.

At the bottom of the ranking are North Mitrovica and Ranilugu, where no verifiable compliance was identified in any of the four elements of Dimension 1.

When interpreting the ranking, two elements should be distinguished:
- Level of compliance, which includes both primary and secondary data;
- Level of documentation, where priority is given to cases supported by primary evidence.

For this reason, a municipality with full compliance based mainly on secondary data is ranked below a municipality with a higher number of indicators demonstrated through primary evidence.

DIMENSION 2: PLANNING AND POLICIES

2. General overview

The “Planning and Policies” dimension assesses the extent to which municipalities have established the planning and programmatic foundations for child protection and the development of social services. Under Dimension 2, a total of 112 cases were assessed, divided into four indicators across the 28 municipalities that participated in the verification phase. Of these, 41 cases were supported by primary data (36.6%), 23 by secondary data (20.5%), while 48 cases (42.9%) were found to have no verifiable compliance. Overall, 64 cases, or 57.1%, were found to be compliant.

The highest result was recorded for consultations with NGOs and local stakeholders, where 20 out of 28 municipalities, or 71.4%, demonstrated compliance. Of these, 12 cases were supported by primary evidence and 8 by secondary data. This result shows that the involvement of local stakeholders is the most developed element of municipal planning.

The indicator concerning the annual child protection plan shows a compliance rate of 57.1%, corresponding to 16 out of 28 municipalities. The evidence for this indicator is relatively stronger, as 12 cases are supported by primary data and only 4 by secondary data.

The lowest results are recorded in social planning based on needs assessments and in programmes for child well-being, both with a compliance rate of 50%. In social planning, 9 cases are supported by primary data and 5 by secondary data, while for child-focused programmes, 8 cases are supported by primary data and 6 by secondary data.

This shows that municipalities are relatively more advanced in organizing consultations and drafting formal documents, while they face greater difficulties in linking planning with needs assessments and developing concrete programmes for child well-being.

Another important element is the quality of documentation. Although overall compliance reaches 57.1%, only 36.6% of all assessed cases are supported by primary evidence. This indicates that a considerable share of compliance continues to rely on municipal declarations rather than complete supporting documentation for verification.

Overall, Dimension 2 indicates a moderate level of compliance, with better results in consultation and weaker results in needs-based planning and programme development. The main challenge remains linking formal planning processes more directly with needs assessments, concrete priorities and programmes for children.

Within this dimension, four indicators were analysed:
- Existence of a child protection plan;
- Involvement of NGOs and local stakeholders in the planning process;
- Social planning based on needs assessments;
- Development of municipal programmes for child well-being.

The monitoring matrix treats these indicators as part of municipal planning and policies and defines separate responsibilities among the Mayor of the Municipality, the Directorate of Health and Social Welfare (DHSW), the Centre for Social Work (CSW), the Directorate of Education (DE) and the Child Rights Team.

The assessment covers 28 municipalities. With four indicators for each municipality, a total of 112 individual cases were analysed.

Of the 112 cases:
- 41 cases, or 36.6%, are supported by primary data;
- 23 cases, or 20.5%, are supported by secondary data;
- 48 cases, or 42.9%, have no verifiable compliance.

In total, combining primary and secondary data, 64 out of 112 cases, or 57.1%, demonstrate compliance.

The results show that the overall level of compliance in this dimension is slightly lower than in Dimension 1. Furthermore, only around one-third of all cases are supported by primary evidence.

Performance varies considerably across the indicators. Consultation with NGOs and local stakeholders demonstrates the highest level of compliance, while social planning based on needs assessments and programmes for children have the lowest results.

This shows that the main challenge is not related only to the existence of planning documents, but also to the quality of planning, its grounding in concrete needs and the translation of plans into implementable programmes.

2.1 Compliance by Indicators and Institutional Responsibilities

2.1.1. Child Protection Plan

The indicator assesses whether the municipality has a child protection plan.

Of the 28 municipalities:
- 12 municipalities – 42.9% have primary data;
- 4 municipalities – 14.3% have secondary data;
- 12 municipalities – 42.9% have no compliance.

In total, 16 out of 28 municipalities, or 57.1%, demonstrate compliance with the indicator.

The result shows that slightly more than half of the municipalities have an identified form of planning for child protection. A positive aspect is that most of the compliant cases are supported by primary data.

However, 12 municipalities have no verifiable compliance, indicating that formal planning for child protection has not yet been consolidated in all municipalities.

Compliance by responsibilities

Responsibilities for this indicator are related to:
- The Mayor of the Municipality;
- The Municipal Directorate of Health and Social Welfare;
- The Centre for Social Work;
- The Municipal Directorate of Education;
- The Child Rights Team.

For each of these institutions, out of 28 possible cases:
- 12 cases – 42.9% demonstrate implemented responsibilities supported by primary evidence;
- 4 cases – 14.3% demonstrate implemented responsibilities according to secondary data;
- 12 cases – 42.9% show no compliance.

In total, the responsibility related to this indicator is considered fulfilled in 16 out of 28 cases, or 57.1%, for each responsible institution.

2.1.2. Consultation with NGOs and Local Stakeholders

The indicator assesses whether NGOs and local stakeholders have been involved in the planning process.

Of the 28 municipalities:
- 12 municipalities – 42.9% have primary data;
- 8 municipalities – 28.6% have secondary data;
- 8 municipalities – 28.6% have no compliance.

In total, 20 out of 28 municipalities, or 71.4%, demonstrate compliance.

This is the indicator with the highest level of compliance in Dimension 2.

The result suggests that the practice of involving local stakeholders is relatively widespread. However, eight of the compliant cases are supported only by secondary data.

This indicates the need for more systematic documentation of consultation processes through attendance lists, minutes, consultation reports and documentation of the comments received.

Compliance by responsibilities

Responsibilities are related to:
- The Mayor of the Municipality;
- The DHSW;
- The Centre for Social Work;
- The Municipal Directorate of Education;
- The Child Rights Team.

For each institution:
- 12 cases – 42.9% demonstrate implemented responsibilities supported by primary evidence;
- 8 cases – 28.6% demonstrate implemented responsibilities according to secondary data;
- 8 cases – 28.6% show no compliance.

In total, the responsibility is considered fulfilled in 20 out of 28 cases, or 71.4%.

2.1.3. Social Planning Based on Needs Assessment

This indicator assesses whether municipal social planning is based on needs assessments.

Of the 28 municipalities:
- 9 municipalities – 32.1% have primary data;
- 5 municipalities – 17.9% have secondary data;
- 14 municipalities – 50.0% have no compliance.

In total, 14 out of 28 municipalities, or 50.0%, demonstrate compliance.

The result shows that only half of the municipalities have evidence that social planning is based on needs assessments.

In only nine municipalities is this supported by primary evidence. This result represents one of the main weaknesses of the dimension, because social planning should be based on identifying the real needs of the community and vulnerable groups.

In the absence of needs assessments, the risk increases that priorities, services and funding will not sufficiently address actual demand at the local level.

Compliance by responsibilities

Responsibilities are related to:
- The DHSW;
- The CSW;
- The Child Rights Team.

For each institution:
- 9 cases – 32.1% demonstrate implemented responsibilities supported by primary evidence;
- 5 cases – 17.9% demonstrate implemented responsibilities according to secondary data;
- 14 cases – 50.0% show no compliance.

In total, the responsibility is considered fulfilled in 14 out of 28 cases, or 50.0%.

2.1.4. Municipal Programmes for Child Well-being

The indicator assesses whether the municipality develops concrete programmes for the well-being of children.

Of the 28 municipalities:
- 8 municipalities – 28.6% have primary data;
- 6 municipalities – 21.4% have secondary data;
- 14 municipalities – 50.0% have no compliance.

In total, 14 out of 28 municipalities, or 50.0%, demonstrate compliance.

This indicator has the lowest level of primary evidence in Dimension 2.

The result shows that moving from planning to concrete programmes for the well-being of children remains a challenge for a large number of municipalities. In half of the municipalities, no verifiable compliance was identified, while primary data were identified in only eight municipalities.

Compliance by responsibilities

Responsibilities are related to:
- The Mayor of the Municipality;
- The DHSW;
- The CSW;
- The Municipal Directorate of Education;
- The Child Rights Team.

For each institution:
- 8 cases – 28.6% demonstrate implemented responsibilities supported by primary evidence;
- 6 cases – 21.4% demonstrate implemented responsibilities according to secondary data;
- 14 cases – 50.0% show no compliance.

In total, the responsibility related to this indicator is considered fulfilled in 14 out of 28 cases, or 50.0%.

Table 3 – Summary of Institutional Responsibilities

Responsible Institution	Possible Cases	With Primary Evidence	According to Secondary Data	No Compliance	Total Compliant
Mayor of the Municipality	84	32 (38.1%)	18 (21.4%)	34 (40.5%)	50 (59.5%)
DHSW	112	41 (36.6%)	23 (20.5%)	48 (42.9%)	64 (57.1%)
CSW	112	41 (36.6%)	23 (20.5%)	48 (42.9%)	64 (57.1%)
DE	56	20 (35.7%)	10 (17.9%)	26 (46.4%)	30 (53.6%)
Child Rights Team	112	41 (36.6%)	23 (20.5%)	48 (42.9%)	64 (57.1%)

At the level of Dimension 2, responsibilities are distributed among five key institutions.

The Mayor of the Municipality is linked to three of the four assessment areas and achieves an overall compliance rate of 59.5%. The DHSW, the CSW and the Child Rights Team are broadly involved in the dimension and demonstrate an overall compliance rate of 57.1%.

The DE is linked to two indicators and has a compliance rate of 53.6%. Across all institutions, it is observed that a considerable share of responsibilities are considered implemented only according to secondary data or remain without verifiable compliance.

Table 4 – Summary of Compliance by Indicator 2

Ranking	Municipality	Annual plan	Consultation	Social planning	Programmes for children	Primary	Secondary	No fulfilment	Total fulfilled	Fulfilment
1	Lipjan	1	1	1	1	4	0	0	4/4	100%
1	Obiliq	1	1	1	1	4	0	0	4/4	100%
1	Prizren	1	1	1	1	4	0	0	4/4	100%
1	Suhareka	1	1	1	1	4	0	0	4/4	100%
2	Dragash	1	1	1	2	3	1	0	4/4	100%
3	Gjakova	1	1	0	1	3	0	1	3/4	75%
3	Shtime	1	1	1	0	3	0	1	3/4	75%
3	Elez Han	1	1	0	1	3	0	1	3/4	75%
4	Junik	1	2	2	1	2	2	0	4/4	100%
5	South Mitrovica	1	0	1	2	2	1	1	3/4	75%
6	Gjilan	1	1	0	0	2	0	2	2/4	50%
6	Istog	1	0	1	0	2	0	2	2/4	50%
6	Prishtina	0	1	1	0	2	0	2	2/4	50%
6	Rahovec	0	1	0	1	2	0	2	2/4	50%
7	Vushtrri	0	1	0	0	1	0	3	1/4	25%
8	Kamenica	2	2	2	2	0	4	0	4/4	100%
8	Peja	2	2	2	2	0	4	0	4/4	100%
9	Drenas	2	2	2	0	0	3	1	3/4	75%
9	North Mitrovica	0	2	2	2	0	3	1	3/4	75%
10	Skenderaj	2	2	0	0	0	2	2	2/4	50%
11	Klina	0	2	0	0	0	1	3	1/4	25%

11	Fushe Kosovo	0	0	0	2	0	1	3	1/4	25%
11	Viti	0	2	0	0	0	1	3	1/4	25%
12	Podujeva	0	0	0	0	0	0	4	0/4	0%
12	Ferizaj	0	0	0	0	0	0	4	0/4	0%
12	Mamusha	0	0	0	0	0	0	4	0/4	0%
12	Gracanica	0	0	0	0	0	0	4	0/4	0%
12	Ranilug	0	0	0	0	0	0	4	0/4	0%

The ranking begins with Lipjan, Obiliq, Prizren and Suhareka, which have all four indicators supported by primary data.

Dragash also has 100% compliance, with three primary data points and one secondary data point.

Junik also demonstrates full compliance, but its evidence structure consists of two primary data points and two secondary data points.

Kamenica and Peja present a distinct profile. Both have 100% compliance, but all four indicators are supported by secondary data. For this reason, they are ranked below the municipalities that have primary evidence.

At the bottom of the ranking are Podujeva, Ferizaj, Mamusha, Graçanica and Ranilug, where no verifiable compliance was identified in any of the four indicators.

DIMENSION 3: PROVISION OF SOCIAL SERVICES

3. General overview

The "Provision of Social Services" dimension assesses the extent to which municipalities ensure accessible information on social services, the functioning of the Centre for Social Work as an information point for citizens, and the availability of standards on the basis of which social services are provided.

Under Dimension 3, a total of 84 cases were assessed, divided into three indicators across 28 municipalities. Of these, 26 cases were supported by primary data (31.0%), 26 cases by secondary data (31.0%), while 32 cases (38.1%) showed no verifiable compliance. In total, 52 out of 84 cases, or 61.9%, were found to be compliant.

The highest result was recorded for the function of the Centre for Social Work as an information centre for citizens, where 19 out of 28 municipalities, or 67.9%, demonstrated compliance. Of these, 10 cases were supported by primary evidence and 9 by secondary data. The indicator related to minimum social service standards achieved a compliance rate of 60.7%, while the public list of social services recorded a compliance rate of 57.1%.

Dimension 3 has the highest compliance rate among the six monitored dimensions. However, an important characteristic is that primary and secondary data are equal, at 31% each. This indicates that a considerable share of compliance continues to rely on municipal confirmations rather than direct documentation.

Overall, the results show that the information function and the basic organisation of services are relatively more developed. However, there is still a need to increase transparency, publish lists of services, and improve the documentation of standards and service delivery practices. The indicators in this dimension are specifically related to the list of services, the information function of the CSW and minimum standards.

Within this dimension, three indicators were analysed:

1. The existence and publication of the list of social services;
2. The functioning of the Centre for Social Work as an information centre for citizens;
3. The existence of the list and minimum standards for social services.

The monitoring matrix links these indicators primarily to the Municipal Directorate of Health and Social Welfare and the Centre for Social Work, while responsibility for minimum standards has also been assigned to the Mayor of the Municipality.

The assessment covers 28 municipalities. With three indicators for each municipality, a total of 84 individual cases were analysed.

Of the 84 cases:

- 26 cases, or 31.0%, are supported by primary data;
- 26 cases, or 31.0%, are supported by secondary data;
- 32 cases, or 38.1%, show no compliance.

In total, combining primary and secondary data, 52 out of 84 cases, or 61.9%, demonstrate compliance.

The results show that the overall compliance rate is above 60%, but the evidence structure presents an important characteristic: the number of cases supported by primary and secondary data is identical – 26 cases each.

This indicates that, although compliance has been established in a considerable number of municipalities, only half of the compliant cases are supported by primary institutional documentation.

In comparative terms, the highest performance was recorded in informing citizens through the CSW, while the lowest level was recorded in the publication of the list of social services.

3.1. Compliance by Indicators and Institutional Responsibilities

3.1.1. List of social services

The indicator assesses whether a list of social services available to citizens exists and is publicly accessible.

Of the 28 municipalities:
- 8 municipalities – 28.6% have primary data;
- 8 municipalities – 28.6% have secondary data;
- 12 municipalities – 42.9% show no compliance.

In total, 16 out of 28 municipalities, or 57.1%, demonstrate compliance with the indicator.

The result shows that only slightly more than half of the municipalities have evidence of the existence of a list of social services.

Of particular importance is the fact that only eight municipalities have primary data, while in another eight cases, compliance is established solely through secondary data.

The publication of the list of services should not be viewed merely as an administrative matter. It is directly linked to citizens' access to services, as citizens should have clear information about the types of services provided, the responsible institution and the procedures for accessing them.

Compliance by Responsibilities

Responsibilities for this indicator are linked to:
- The Municipal Directorate of Health and Social Welfare (DHSW);
- The Centre for Social Work (CSW).

For each of these institutions, out of 28 possible cases:
- 8 cases – 28.6% demonstrate that the responsibility has been implemented and is supported by primary evidence;
- 8 cases – 28.6% demonstrate that the responsibility has been implemented according to secondary data;
- 12 cases – 42.9% show no compliance.

In total, for both the DHSW and the CSW, the responsibility related to this indicator is considered fulfilled in 16 out of 28 cases, or 57.1%.

3.1.2. Informing citizens

The indicator assesses whether the Centre for Social Work serves as an information centre for citizens regarding social services.

Of the 28 municipalities:
- 10 municipalities – 35.7% have primary data;
- 9 municipalities – 32.1% have secondary data;
- 9 municipalities – 32.1% show no compliance.

In total, 19 out of 28 municipalities, or 67.9%, demonstrate compliance.

This is the indicator with the highest level of compliance in Dimension 3.

However, the difference between primary and secondary evidence is small: ten cases are supported by primary data and nine by secondary data.

This indicates that in a relatively large number of municipalities, the information function of the CSW has been identified, but it is not necessarily accompanied by institutional documentation that directly demonstrates this function.

Compliance by Responsibilities

Responsibility for this indicator is directly linked to:
- The Centre for Social Work (CSW).

Out of 28 possible cases:
- 10 cases – 35.7% demonstrate that the responsibility has been implemented and is supported by primary evidence;
- 9 cases – 32.1% demonstrate that the responsibility has been implemented according to secondary data;
- 9 cases – 32.1% show no compliance.

In total, the CSW's responsibility related to this indicator is considered fulfilled in 19 out of 28 cases, or 67.9%.

This is a relatively positive result, but the evidence structure indicates the need for further formalisation and better documentation of the CSWs' information function.

3.1.3. Minimum Standards for Social Services

The indicator assesses whether lists and the relevant standards on the basis of which social services are provided exist.

Of the 28 municipalities:
- 8 municipalities – 28.6% have primary data;
- 9 municipalities – 32.1% have secondary data;
- 11 municipalities – 39.3% show no compliance.

In total, 17 out of 28 municipalities, or 60.7%, demonstrate compliance.

The result is higher than that recorded for the publication of the list of social services, but the level of primary evidence remains low.

In only eight municipalities is compliance supported by primary data, while in another nine cases it has been established through secondary data.

Standards are important because they provide the basis for assessing:
- the quality of services;
- the conditions under which services are provided;
- the responsibilities of service providers;
- the equal treatment of beneficiaries;
- the monitoring of quality and results.

Compliance by Responsibilities

Responsibilities for this indicator are linked to:
- The Mayor of the Municipality;
- The Municipal Directorate of Health and Social Welfare;
- The Centre for Social Work.

For each of these institutions:
- 8 cases – 28.6% demonstrate that the responsibility has been implemented and is supported by primary evidence;
- 9 cases – 32.1% demonstrate that the responsibility has been implemented according to secondary data;
- 11 cases – 39.3% show no compliance.

In total, the responsibility related to this indicator is considered fulfilled in 17 out of 28 cases, or 60.7%, for each of the responsible institutions.

Table 5 - Summary of Institutional Responsibilities

At the level of Dimension 3, the main responsibilities are distributed among the Mayor of the Municipality, the DHSW and the CSW.

Responsible Institution	Possible Cases	With Primary Evidence	According to Secondary Data	No Compliance	Total Compliant
Mayor of the Municipality	28	8 (28.6%)	9 (32.1%)	11 (39.3%)	17 (60.7%)
DHSW	56	16 (28.6%)	17 (30.4%)	23 (41.1%)	33 (58.9%)
CSW	84	26 (31.0%)	26 (31.0%)	32 (38.1%)	52 (61.9%)

The Centre for Social Work has the broadest responsibility in this dimension, as it is linked to all three indicators. Out of 84 possible cases, 52, or 61.9%, demonstrate compliance.

An important characteristic of the CSW is the identical distribution between primary and secondary evidence: 26 primary cases and 26 secondary cases. The DHSW is linked to two indicators and demonstrates a compliance rate of 58.9%, while 41.1% of cases show no verifiable compliance.

The Mayor of the Municipality is linked only to the indicator on minimum standards and demonstrates a compliance rate of 60.7%. For this reason, this result should not be directly compared with those of institutions that have responsibilities across two or three indicators.

Table 6 – Summary of Compliance by Indicator 3

Rank	Municipality	List of social services	Informing citizens	Minimum standards	Primary	Secondary	No fulfilment	Total fulfilled	Fulfilment
1	Lipjan	1	1	1	3	0	0	3/3	100%
1	Prishtina	1	1	1	3	0	0	3/3	100%
1	Suhareka	1	1	1	3	0	0	3/3	100%
1	Junik	1	1	1	3	0	0	3/3	100%
1	Gracanica	1	1	1	3	0	0	3/3	100%
2	Elez Han	1	1	2	2	1	0	3/3	100%
3	Dragash	1	0	1	2	0	1	2/3	66,70%
3	Rahovec	1	1	0	2	0	1	2/3	66,70%
3	Shtime	0	1	1	2	0	1	2/3	66,70%
4	Istog	0	1	2	1	1	1	2/3	66,70%
5	Podujeva	0	0	1	1	0	2	1/3	33,30%
5	Prizren	0	1	0	1	0	2	1/3	33,30%
6	Drenas	2	2	2	0	3	0	3/3	100%
6	Klina	2	2	2	0	3	0	3/3	100%
6	Skenderaj	2	2	2	0	3	0	3/3	100%
6	South Mitrovica	2	2	2	0	3	0	3/3	100%
7	Fushe Kosovo	0	2	2	0	2	1	2/3	66,70%
7	Kamenica	2	2	0	0	2	1	2/3	66,70%
7	Obiliq	2	0	2	0	2	1	2/3	66,70%
7	Peja	2	0	2	0	2	1	2/3	66,70%
8	Ferizaj	0	2	0	0	1	2	1/3	33,30%
8	Viti	2	0	0	0	1	2	1/3	33,30%

8	North Mitrovica	0	2	0	0	1	2	1/3	33,30%
8	Mamusha	0	2	0	0	1	2	1/3	33,30%
9	Gjakova	0	0	0	0	0	3	0/3	0%
9	Gjilan	0	0	0	0	0	3	0/3	0%
9	Vushtrri	0	0	0	0	0	3	0/3	0%
9	Ranilug	0	0	0	0	0	3	0/3	0%

At the top of the ranking are Lipjan, Prishtina, Suhareka, Junik and Gracanica, which have primary evidence for all three indicators and a compliance rate of 100%.

Elez Han also achieves full compliance, with two indicators supported by primary data and one by secondary data.

Drenas, Klina, Skenderaj and South Mitrovica also achieve 100% compliance, but all three indicators are supported by secondary data. For this reason, they are ranked below the municipalities with primary evidence.

Another group consists of Dragash, Rahovec, Shtime, Istog, Fushe Kosovo, Kamenica, Obiliq and Peja, which demonstrate compliance in two out of the three indicators, but differ significantly in terms of the strength of the evidence.

At the bottom of the ranking are Gjakova, Gjilan, Vushtrri and Ranilug, where no verifiable compliance was identified in any of the three indicators.

Methodological Note

The ranking should be interpreted by distinguishing between the level of compliance and the strength of the evidence.

A municipality may achieve 100% compliance, but if all cases are supported only by secondary data, it is ranked below a municipality with a higher number of indicators demonstrated through primary evidence.

DIMENSION 4: SPECIFIC SERVICES FOR CHILDREN

4. General summary

The “Specific Services for Children” dimension assesses the extent to which municipalities provide or support concrete and specialised forms of social services for children, including residential services, day care, home-based services and forms of community-based care.

Under Dimension 4, a total of 112 cases were assessed, divided into four indicators across 28 municipalities. Of these, only 16 cases were supported by primary data (14.3%), 17 cases by secondary data (15.2%), while 79 cases, or 70.5%, showed no verifiable compliance. In total, only 33 out of 112 cases, or 29.5%, demonstrate compliance.

This is the dimension with the lowest level of compliance across the entire monitoring exercise.

The best result was recorded for home-based services for children with special needs, where 16 out of 28 municipalities, or 57.1%, demonstrate compliance. Of these, 7 cases are supported by primary evidence and 9 by secondary data.

On the other hand, day care centres show the lowest result, with only 17.9% compliance, corresponding to 5 out of 28 municipalities. Children's protection homes or the relevant service contracts, as well as community-based homes, each have a compliance rate of 21.4%. The structure of the indicators in this dimension includes precisely these four forms of service.

The results indicate a significant gap in the infrastructure and provision of specialised services for children. While institutional mechanisms and basic forms of information provision exist in a relatively larger number of municipalities, services that require specialised staff, dedicated capacities and continuous funding are much less developed.

Overall, Dimension 4 represents the weakest link in the municipal system and shows that the main challenge is the transition from mechanisms and planning towards the actual provision of specialised services.

Within this dimension, four indicators were analysed:

1. Children's protection homes or the contracting of these services;
2. The existence of day care centres;
3. The provision of home-based services for children with disabilities and severe chronic illnesses;
4. The existence of community-based homes.

These forms of services are based on various legal provisions: residential services and shelters for the protection of children, day care centres, home-based services and forms of community-based care.

The assessment covers 28 municipalities. With four indicators for each municipality, a total of 112 individual cases were analysed.

Of these:

- 16 cases, or 14.3%, are supported by primary data;
- 17 cases, or 15.2%, are supported by secondary data;
- 79 cases, or 70.5%, show no verifiable compliance.

In total, combining primary and secondary data, only 33 out of 112 cases, or 29.5%, demonstrate compliance.

This is a significantly lower level compared to the three preceding dimensions. More than seven out of ten cases show no verifiable compliance.

The results indicate that the main challenge is no longer related solely to the establishment of mechanisms, planning or the provision of information, but to the actual availability of specialised services for children at the local level.

There are significant differences between the indicators. Home-based services for children with disabilities and severe chronic illnesses demonstrate the highest level of compliance, while day care centres have the lowest result.

4.1. Compliance by Indicators and Institutional Responsibilities

4.1.1. Children's Protection Homes

The indicator assesses whether the municipality manages children's protection homes or has contracts in place to ensure the provision of this service.

The monitoring matrix links this indicator to residential services for the protection of children.

Of the 28 municipalities:

- 3 municipalities – 10.7% have primary data;
- 3 municipalities – 10.7% have secondary data;
- 22 municipalities – 78.6% show no compliance.

In total, only 6 out of 28 municipalities, or 21.4%, demonstrate compliance.

This result shows that residential services or agreements for their provision are very limited at the municipal level.

Of particular significance is the fact that almost four out of five municipalities show no verifiable compliance.

Compliance by Responsibilities

Responsibilities related to this indicator are assigned to:

- The Mayor of the Municipality;
- The Municipal Directorate of Health and Social Welfare;
- The Centre for Social Work.

For each of these institutional actors:

- 3 cases – 10.7% demonstrate that the responsibility has been implemented and is supported by primary evidence;
- 3 cases – 10.7% demonstrate that the responsibility has been implemented according to secondary data;
- 22 cases – 78.6% show no compliance.

In total, the responsibility related to this indicator is considered fulfilled in only 6 out of 28 cases, or 21.4%.

4.1.2. Day Care Centres

The indicator assesses whether day care centres providing services for children exist in the municipality.

The methodological basis links this indicator to day care centres envisaged within the framework of social and family services.

Of the 28 municipalities:

- 3 municipalities – 10.7% have primary data;
- 2 municipalities – 7.1% have secondary data;
- 23 municipalities – 82.1% show no compliance.

In total, only 5 out of 28 municipalities, or 17.9%, demonstrate compliance.

This is the indicator with the lowest level of compliance in Dimension 4.

More than 82% of municipalities show no verifiable compliance, while only three municipalities have primary evidence of the existence of day care centres.

The result shows that this form of service remains very limited at the local level.

Compliance by Responsibilities

Responsibilities are linked to:
- The Mayor of the Municipality;
- The DHSW;
- The CSW.

For each institution:
- 3 cases – 10.7% are supported by primary evidence;
- 2 cases – 7.1% are identified according to secondary data;
- 23 cases – 82.1% show no compliance.

In total, the responsibility is considered fulfilled in only 5 out of 28 cases, or 17.9%.

This is also the lowest level of fulfilment of institutional responsibilities within this dimension.

4.1.3. Home-Based Services for Children with Disabilities and Severe Chronic Illnesses

The indicator assesses whether home-based services are provided for children with disabilities and severe chronic illnesses.

This form of service is linked to the provisions on home-based services for persons and children with disabilities and severe chronic illnesses.

Of the 28 municipalities:
- 7 municipalities – 25.0% have primary data;
- 9 municipalities – 32.1% have secondary data;
- 12 municipalities – 42.9% show no compliance.

In total, 16 out of 28 municipalities, or 57.1%, demonstrate compliance.

This is the indicator with the highest level of compliance in Dimension 4.

However, the evidence structure shows that secondary data are more numerous than primary data. Of the 16 compliant cases, nine are supported by secondary data and only seven by primary evidence.

This indicates that home-based services are the most widespread form of specialised service analysed, but their institutional documentation remains limited.

Compliance by Responsibilities

Responsibilities are linked to:
- The Mayor of the Municipality;
- The DHSW;
- The CSW.

For each institution:
- 7 cases – 25.0% demonstrate that the responsibility has been implemented with primary evidence;
- 9 cases – 32.1% demonstrate that the responsibility has been implemented according to secondary data;
- 12 cases – 42.9% show no compliance.

In total, the responsibility related to this indicator is considered fulfilled in 16 out of 28 cases, or 57.1%.

This result is significantly higher than those recorded for the other three indicators in the dimension.

4.1.4. Community-Based Homes

The indicator assesses whether the municipality has community-based homes.

These services are part of alternative forms of social care and community-based services.
Of the 28 municipalities:
- 3 municipalities – 10.7% have primary data;
- 3 municipalities – 10.7% have secondary data;
- 22 municipalities – 78.6% show no compliance.

In total, only 6 out of 28 municipalities, or 21.4%, demonstrate compliance.

The result is identical to that of the indicator on children's protection homes and shows that residential or community-based forms of care remain very limited at the municipal level.

Compliance by Responsibilities

Responsibilities are linked to:
- The Mayor of the Municipality;
- The DHSW;
- The CSW.

For each institution:
- 3 cases – 10.7% demonstrate that the responsibility has been implemented with primary evidence;
- 3 cases – 10.7% demonstrate that the responsibility has been implemented according to secondary data;
- 22 cases – 78.6% show no compliance.

In total, the responsibility is considered fulfilled in only 6 out of 28 cases, or 21.4%.

Table 7 - Summary of Institutional Responsibilities

In Dimension 4, all four indicators are linked to the same three institutional actors:
- The Mayor of the Municipality;
- The Municipal Directorate of Health and Social Welfare (DHSW);
- The Centre for Social Work (CSW).

For this reason, each of them has 112 possible cases of responsibility.

Responsible Institution	Possible Cases	With Primary Evidence	Based on Secondary Data	No Compliance	Total Compliance
Mayor of the Municipality	112	16 (14.3%)	17 (15.2%)	79 (70.5%)	33 (29.5%)
DHSW	112	16 (14.3%)	17 (15.2%)	79 (70.5%)	33 (29.5%)
CSW	112	16 (14.3%)	17 (15.2%)	79 (70.5%)	33 (29.5%)

The overall results for institutional responsibilities are significantly lower than those in the previous dimensions.

Only 29.5% of responsibilities related to child-specific services are found to be fulfilled, while 70.5% remain unfulfilled.

Furthermore, primary evidence accounts for only 14.3%, indicating not only the limited availability of services but also a very low level of documentation thereof.

Table 8 – Summary of Compliance by Indicator 4

Ranking	Municipality	Child protection homes	Day care centre	Home-based services	Community-based homes	Primary	Secondary	No fulfilment	Total fulfilled	Fulfilment
1	Lipjan	1	1	1	1	4	0	0	4/4	100%
1	Prizren	1	1	1	1	4	0	0	4/4	100%
2	Istog	1	0	1	0	2	0	2	2/4	50%
2	Rahovec	0	1	1	0	2	0	2	2/4	50%
3	Shtime	2	0	1	1	2	1	1	3/4	75%
4	Suhareka	0	0	1	0	1	0	3	1/4	25%

4	Junik	0	0	1	0	1	0	3	1/4	25%
5	Dragash	2	0	2	2	0	3	1	3/4	75%
5	Gracanic a	0	2	2	2	0	3	1	3/4	75%
6	Peja	0	2	2	0	0	2	2	2/4	50%
6	Skenderaj	2	0	2	0	0	2	2	2/4	50%
7	Drenas	0	0	2	0	0	1	3	1/4	25%
7	Fushe Kosovo	0	0	2	0	0	1	3	1/4	25%
7	Kamenica	0	0	0	2	0	1	3	1/4	25%
7	Ferizaj	0	0	2	0	0	1	3	1/4	25%
7	Viti	0	0	2	0	0	1	3	1/4	25%
7	Elez Han	0	0	2	0	0	1	3	1/4	25%
8	Gjakova	0	0	0	0	0	0	4	0/4	0%
8	Gjilan	0	0	0	0	0	0	4	0/4	0%
8	Klina	0	0	0	0	0	0	4	0/4	0%
8	Obiliq	0	0	0	0	0	0	4	0/4	0%
8	Podujeva	0	0	0	0	0	0	4	0/4	0%
8	Prishtina	0	0	0	0	0	0	4	0/4	0%
8	Vushtrri	0	0	0	0	0	0	4	0/4	0%
8	North Mitrovica	0	0	0	0	0	0	4	0/4	0%
8	South Mitrovica	0	0	0	0	0	0	4	0/4	0%
8	Mamusha	0	0	0	0	0	0	4	0/4	0%
8	Ranilug	0	0	0	0	0	0	4	0/4	0%

At the top of the ranking are Lipjan and Prizren, both of which demonstrate primary evidence for all four indicators and a compliance rate of 100%.

They are followed by Shtime, which presents a significant profile, with three out of the four services identified, two of which are supported by primary data and one by secondary data.

Dragash and Graçanica also demonstrate compliance in three out of the four indicators, but all cases are supported by secondary data. For this reason, according to the ranking methodology, they are positioned below the municipalities with primary evidence.

On the other hand, a considerable number of municipalities: Gjakova, Gjilan, Klina, Obiliq, Podujeva, Prishtina, Vushtrri, North Mitrovica, South Mitrovica, Mamusha and Ranilugu show no verifiable compliance across all four indicators.

This high concentration of municipalities with a zero score distinguishes Dimension 4 from the previous dimensions and indicates that the availability of child-specific services is one of the weakest areas of the local social services system.

DIMENSION 5: FINANCING

5. General summary

The "Financing" dimension assesses the extent to which municipalities have secured and documented funding for social services and specific forms of child care. In Dimension 5, a total of 140 cases were assessed, divided into five indicators across 28 municipalities. Of these, 30 cases were supported by primary data (21.4%), 24 cases by secondary data (17.1%), while 86 cases, or 61.4%, showed no verifiable compliance. Overall, only 54 out of 140 cases, or 38.6%, were found to be compliant.

The highest result was recorded in financial support for foster families and children in family-based care, with a compliance rate of 60.7%.

The indicator concerning the budget line for social services recorded a compliance rate of 53.6%, indicating that slightly more than half of the municipalities were able to demonstrate or confirm the existence of an identifiable financial basis for this area.

The result drops significantly when it comes to financing more specialised services. Residential services reach only 35.7%, while the financing of day care centres and community-based homes reaches only 21.4% each. The indicators in this dimension cover the budget line, financial support, shelters, day care and community-based homes.

This result is particularly important when compared with Dimension 4. The services that appear to be less developed are also those that receive less funding. This indicates that gaps in specific services are not merely a matter of institutional organisation, but are directly linked to the lack of sustainable financing.

Overall, Dimension 5 shows that financing remains one of the main constraints of the system. Without a stronger link between needs analysis, planning and budget allocations, the development of new services and the sustainability of existing ones remain limited.

Within this dimension, five indicators were analysed:

1. The existence of a budget line for social services;
2. Financial support for foster families and children in foster care;
3. Financing of residential services and shelters for children;
4. Financing of day care centres;
5. Financing of community-based homes.

The monitoring matrix links all five indicators to the Mayor of the Municipality, the Municipal Directorate of Health and Social Welfare, and the Child Rights Team.

The assessment covers 28 municipalities. With five indicators for each municipality, a total of 140 individual cases were analysed.
Of these:

- 30 cases, or 21.4%, are supported by primary data;
- 24 cases, or 17.1%, are supported by secondary data;
- 86 cases, or 61.4%, show no verifiable compliance.

Overall, combining primary and secondary data, 54 out of 140 cases, or 38.6%, are found to be compliant.

The results show that financing is one of the dimensions with the lowest level of compliance. More than six out of ten cases show no verifiable compliance, while only around one in five cases is supported by primary evidence.

Differences between the indicators are also considerable. Financial support for foster families shows the highest level of compliance, while the financing of day care centres and community-based homes shows the lowest levels.

This indicates that the challenge lies not only in the existence of services, but also in securing sustainable and identifiable funding for their operation.

5.1. Compliance by Indicators and Institutional Responsibilities

5.1.1. Budget for Social Services

The indicator assesses whether the municipality has a budget line for social services.

Out of 28 municipalities:

- 9 municipalities – 32.1% have primary data;
- 6 municipalities – 21.4% have secondary data;
- 13 municipalities – 46.4% show no compliance.

Overall, 15 out of 28 municipalities, or 53.6%, are found to be compliant with the indicator.

This is one of the indicators with the highest level of compliance in Dimension 5; however, almost half of the municipalities have no verifiable budget line for social services.

The fact that only nine municipalities have primary evidence indicates that even where funding is declared, it is not always clearly identifiable through budget documents.

Compliance by Institutional Responsibilities

Responsibilities for this indicator are linked to:
- The Mayor of the Municipality;
- The Municipal Directorate of Health and Social Welfare (DHSW);
- The Child Rights Team.

For each institution:
- 9 cases – 32.1% show that the responsibility has been fulfilled with primary evidence;
- 6 cases – 21.4% show that the responsibility has been fulfilled according to secondary data;
- 13 cases – 46.4% show no compliance.

Overall, the responsibility linked to this indicator is found to be fulfilled in 15 out of 28 cases, or 53.6%.

5.1.2. Foster Families and Children in Foster Care

The indicator assesses whether foster families and children in foster care receive financial support.

Out of 28 municipalities:
- 7 municipalities – 25.0% have primary data;
- 10 municipalities – 35.7% have secondary data;
- 11 municipalities – 39.3% show no compliance.

Overall, 17 out of 28 municipalities, or 60.7%, are found to be compliant.

This is the indicator with the highest level of compliance in Dimension 5.

However, the structure of the evidence shows that secondary data are more prevalent than primary data. Only seven municipalities have primary evidence, while in ten cases financial support was identified through secondary data.

This indicates that financial support for this category is relatively widespread, but clearer and more systematic documentation is needed.

Compliance by Institutional Responsibilities

Responsibilities are linked to:
- The Mayor of the Municipality;
- The DHSW;
- The Child Rights Team.

For each institution:
- 7 cases – 25.0% show that the responsibility has been fulfilled with primary evidence;
- 10 cases – 35.7% show that the responsibility has been fulfilled according to secondary data;
- 11 cases – 39.3% show no compliance.

Overall, the responsibility is found to be fulfilled in 17 out of 28 cases, or 60.7%.

5.1.3. Financing of Residential Services

The indicator assesses whether shelters or other forms of residential services for children are funded.

Out of 28 municipalities:
- 6 municipalities – 21.4% have primary data;
- 4 municipalities – 14.3% have secondary data;
- 18 municipalities – 64.3% show no compliance.

Overall, only 10 out of 28 municipalities, or 35.7%, are found to be compliant.

The result shows that the financing of residential services is significantly more limited than the general financing of social services or the support provided to foster families.

Nearly two-thirds of the municipalities show no verifiable compliance.

Compliance by Institutional Responsibilities

Responsibilities are linked to:
- The Mayor of the Municipality;
- The DHSW;
- The Child Rights Team.

For each institution:
- 6 cases – 21.4% are supported by primary evidence;
- 4 cases – 14.3% are identified according to secondary data;
- 18 cases – 64.3% show no compliance.

Overall, the responsibility is found to be fulfilled in 10 out of 28 cases, or 35.7%.

5.1.4. Financing of Day Care Centres

The indicator assesses whether the municipality finances day care and day care centres for children.

Out of 28 municipalities:
- 4 municipalities – 14.3% have primary data;
- 2 municipalities – 7.1% have secondary data;
- 22 municipalities – 78.6% show no compliance.

Overall, only 6 out of 28 municipalities, or 21.4%, are found to be compliant.

This is one of the two indicators with the lowest performance in Dimension 5.

Almost four out of five municipalities show no verifiable funding for this type of service.

The result is particularly significant when compared with Dimension 4, where the existence of day care centres was also found to be very limited. This indicates that the lack of services and the lack of funding are interconnected.

Compliance by Institutional Responsibilities

Responsibilities are linked to:
- The Mayor of the Municipality;
- The DHSW;
- The Child Rights Team.

For each institution:
- 4 cases – 14.3% show that the responsibility has been fulfilled with primary evidence;
- 2 cases – 7.1% show that the responsibility has been fulfilled according to secondary data;
- 22 cases – 78.6% show no compliance.

Overall, the responsibility is found to be fulfilled in 6 out of 28 cases, or 21.4%.

2.5. Financing of Community-Based Homes

The indicator assesses whether the municipality finances community-based homes.

Out of 28 municipalities:
- 4 municipalities – 14.3% have primary data;
- 2 municipalities – 7.1% have secondary data;
- 22 municipalities – 78.6% show no compliance.

Overall, only 6 out of 28 municipalities, or 21.4%, are found to be compliant.

The result is identical to that for the financing of day care centres and indicates that alternative forms of social care receive a very limited level of municipal financial support.

Compliance by Institutional Responsibilities

Responsibilities are linked to:
- The Mayor of the Municipality;
- The Municipal Directorate of Health and Social Welfare (DHSW);
- The Child Rights Team.

For each institution:
- 4 cases – 14.3% show that the responsibility has been fulfilled with primary evidence;
- 2 cases – 7.1% show that the responsibility has been fulfilled according to secondary data;
- 22 cases – 78.6% show no compliance.

Overall, the responsibility is found to be fulfilled in only 6 out of 28 cases, or 21.4%.

Table 9 - Summary of Institutional Responsibilities

IIn Dimension 5, all five indicators are linked to the same three institutional actors: the Mayor of the Municipality, the DHSW, and the Child Rights Team.

For this reason, each actor has a total of 140 possible cases of responsibility.

Responsible Institution	Possible Cases	With Primary Evidence	Based on Secondary Data	No Compliance	Total Compliant
Mayor of the Municipality	140	30 (21.4%)	24 (17.1%)	86 (61.4%)	54 (38.6%)
DHSW	140	30 (21.4%)	24 (17.1%)	86 (61.4%)	54 (38.6%)
Child Rights Team	140	30 (21.4%)	24 (17.1%)	86 (61.4%)	54 (38.6%)

The results show that only 38.6% of responsibilities related to financing are found to be fulfilled, while 61.4% show no verifiable compliance.

The level of primary evidence is even lower, accounting for only 21.4% of cases.

This indicates that the weakness of Dimension 5 is related not only to documentation, but also to the overall level of financing for social services and specific forms of care.

Table 10 – Summary of Compliance by Indicator 5

Rank	Municipality	Budget for social services	Foster families	Residential services	Day care	Community homes	Primary	Secondary	No fulfilment	Fulfilment
1	Lipjan	1	1	1	1	1	5	0	0	100%
1	Prizren	1	1	1	1	1	5	0	0	100%
2	Prishtina	1	1	1	0	0	3	0	2	60%
2	Shtime	1	1	1	0	0	3	0	2	60%
2	Gracanica	1	0	0	1	1	3	0	2	60%
3	Peja	1	0	1	2	0	2	1	2	60%
3	Junik	1	1	2	0	0	2	1	2	60%
4	Rahovec	1	0	0	1	0	2	0	3	40%
4	Suhareka	1	1	0	0	0	2	0	3	40%
4	Mamusha	0	1	1	0	0	2	0	3	40%
5	Klina	0	0	0	0	1	1	0	4	20%
6	Ferizaj	0	2	2	2	2	0	4	1	80%
7	Kamenica	2	2	0	0	2	0	3	2	60%
8	Dragash	0	2	2	0	0	0	2	3	40%
8	Istog	2	2	0	0	0	0	2	3	40%

8	Fushe Kosovo	0	2	2	0	0	0	2	3	40%
8	Obiliq	2	2	0	0	0	0	2	3	40%
8	Skenderaj	2	2	0	0	0	0	2	3	40%
9	Drenas	0	2	0	0	0	0	1	4	20%
9	Viti	0	2	0	0	0	0	1	4	20%
9	North Mitrovica	2	0	0	0	0	0	1	4	20%
9	South Mitrovica	2	0	0	0	0	0	1	4	20%
9	Elez Han	0	2	0	0	0	0	1	4	20%
10	Gjakova	0	0	0	0	0	0	0	5	0%
10	Gjilan	0	0	0	0	0	0	0	5	0%
10	Podujeva	0	0	0	0	0	0	0	5	0%
10	Vushtrri	0	0	0	0	0	0	0	5	0%
10	Ranilug	0	0	0	0	0	0	0	5	0%

At the top of the ranking are Lipjan and Prizren, which have primary evidence for all five indicators and 100% fulfilment. They are followed by Prishtina, Shtime and Graçanica, with three primary data points each.

Peja and Junik have two primary data points and one secondary each, while Rahovec, Suhareka and Mamusha have two cases each supported by primary evidence.

A special case is Ferizaj, which has fulfilment in four of the five indicators, i.e. 80%, but all the fulfilled cases are based on secondary data. For this reason it is ranked after the municipalities that have primary evidence.

At the bottom of the ranking are Gjakova, Gjilan, Podujeva, Vushtrria and Ranilug, where no verifiable fulfilment was found in any of the five indicators.

DIMENSION 6: CONTRACTING AND LICENSING

6. General summary

The "Contracting and Licensing" dimension assesses the extent to which municipalities ensure that social service providers are licensed, contract services when necessary, link contracts to municipal planning, monitor the quality of service provision, and cooperate with non-governmental organisations in the provision of social services.

In Dimension 6, a total of 140 cases were assessed, divided into five indicators across 28 municipalities. Of these, 31 cases were supported by primary data (22.1%), 42 cases by secondary data (30.0%), while 67 cases, or 47.9%, showed no verifiable compliance. Overall, 73 out of 140 cases, or 52.1%, were found to be compliant.

The highest result was recorded for the licensing of service providers, with a compliance rate of 75%, corresponding to 21 out of 28 municipalities. However, only 7 cases are supported by primary evidence, while 14 are supported by secondary data. This indicates that compliance is relatively high, but its documentation remains limited.

Cooperation and financing or active contracts with NGOs show a compliance rate of 57.1%.

On the other hand, contracting of social services, alignment of contracts with the annual plan, and monitoring of providers' quality each show a compliance rate of 42.9%. These are also the main elements of this dimension, together with licensing and cooperation with NGOs.

The most problematic finding concerns quality monitoring, where not a single case supported by primary evidence was identified. The reported compliance for this indicator is based exclusively on secondary data.

This highlights an important distinction between the existence of a contractual relationship and its quality management. Municipalities appear to be more advanced in identifying or engaging licensed providers than in documenting contracting, linking contracts to planning, and systematically monitoring quality.

Overall, Dimension 6 presents a moderate level of compliance, but with a high reliance on secondary data. In the future, the focus should shift from the formal existence of licensing and contracting towards a system in which contracted services are linked to plans, standards and performance indicators, and monitored through documented evidence.

Within this dimension, five indicators were analysed:

1. Licensing of social service providers;
2. Contracting of social services by the municipality;
3. Alignment of contracts with the annual plan;
4. Monitoring of providers' quality;
5. Cooperation with NGOs through financing or active contracts.

The monitoring matrix assigns different responsibilities depending on the indicator. Licensing is linked to the DHSW and the CSW, while the other four indicators are linked to the Mayor of the Municipality, the DHSW, the CSW and the Directorate of Finance.

The assessment covers 28 municipalities. With five indicators for each municipality, a total of 140 individual cases were analysed.

Of these:

- 31 cases, or 22.1%, are supported by primary data;
- 42 cases, or 30.0%, are supported by secondary data;
- 67 cases, or 47.9%, show no verifiable compliance.

Overall, combining primary and secondary data, 73 out of 140 cases, or 52.1%, are found to be compliant.

An important characteristic of this dimension is that secondary data are more prevalent than primary data. This indicates that, in many cases, municipalities declare or confirm the existence of contracting, licensing or monitoring practices, but do not provide sufficient primary documentation to verify them.

Performance varies considerably across the indicators. The licensing of providers shows the highest level of compliance, while contracting, alignment with the plan and quality monitoring show significantly lower levels.

6.1. Compliance by Indicators and Institutional Responsibilities

6.1.1. Licensing of Service Providers

The indicator assesses whether social service providers are licensed.

Out of 28 municipalities:

- 7 municipalities – 25.0% have primary data;
- 14 municipalities – 50.0% have secondary data;
- 7 municipalities – 25.0% show no compliance.

Overall, 21 out of 28 municipalities, or 75.0%, are found to be compliant with the indicator.

This is the indicator with the highest level of compliance in Dimension 6.

However, the structure of the evidence is important: two-thirds of the compliant cases are based on secondary data. Only seven municipalities have primary evidence, while 14 cases rely on declarations or other secondary sources.

This indicates that licensing is relatively widespread, but the documentation demonstrating licensing status is not always available or systematically maintained at the municipal level.

Compliance by Institutional Responsibilities

Responsibilities for this indicator are linked to:

- The Municipal Directorate of Health and Social Welfare;
- The Centre for Social Work (CSW).

For each of these institutions:

- 7 cases – 25.0% show that the responsibility has been fulfilled with primary evidence;
- 14 cases – 50.0% show that the responsibility has been fulfilled according to secondary data;
- 7 cases – 25.0% show no compliance.

Overall, the responsibility is found to be fulfilled in 21 out of 28 cases, or 75.0%.

6.1.2. Contracting of Social Services

The indicator assesses whether the municipality contracts external providers to deliver social services.

Out of 28 municipalities:

- 7 municipalities – 25.0% have primary data;
- 5 municipalities – 17.9% have secondary data;
- 16 municipalities – 57.1% show no compliance.

Overall, 12 out of 28 municipalities, or 42.9%, are found to be compliant.

The result indicates that contracting social services is not yet an established practice in most municipalities.

In more than half of the municipalities, no verifiable compliance was identified, while only seven municipalities have primary documentation of contracting.

Compliance by Institutional Responsibilities

Responsibilities are linked to:
- The Mayor of the Municipality;
- The Municipal Directorate of Health and Social Welfare (DHSW);
- The Centre for Social Work (CSW);
- The Directorate of Finance.

For each institution:
- 7 cases – 25.0% show that the responsibility has been fulfilled with primary evidence;
- 5 cases – 17.9% show that the responsibility has been fulfilled according to secondary data;
- 16 cases – 57.1% show no compliance.

Overall, the responsibility linked to this indicator is found to be fulfilled in 12 out of 28 cases, or 42.9%.

6.1.3. Alignment of Contracts with the Annual Plan

The indicator assesses whether contracts for social services are linked to the annual plan and the priorities established by the municipality.

Out of 28 municipalities:
- 8 municipalities – 28.6% have primary data;
- 4 municipalities – 14.3% have secondary data;
- 16 municipalities – 57.1% show no compliance.

Overall, 12 out of 28 municipalities, or 42.9%, are found to be compliant.

This result is the same as the level of contracting, but the structure of the evidence is slightly stronger in terms of primary evidence.

Only around four out of ten municipalities demonstrate that contracting is linked to annual planning. This indicates that the challenge lies not only in the existence of contracts, but also in systematically linking them to priorities and needs identified through municipal planning.

Compliance by Institutional Responsibilities

Responsibilities are linked to:
- The Mayor of the Municipality;
- The DHSW;
- The CSW;
- The Directorate of Finance.

For each institution:
- 8 cases – 28.6% show that the responsibility has been fulfilled with primary evidence;
- 4 cases – 14.3% show that the responsibility has been fulfilled according to secondary data;
- 16 cases – 57.1% show no compliance.

Overall, the responsibility is found to be fulfilled in 12 out of 28 cases, or 42.9%.

6.1.4. Quality Monitoring

The indicator assesses whether the municipality monitors the quality of contracted social service providers.

Out of 28 municipalities:
- 0 municipalities – 0.0% have primary data;
- 12 municipalities – 42.9% have secondary data;
- 16 municipalities – 57.1% show no compliance.

Overall, 12 out of 28 municipalities, or 42.9%, are found to be compliant.

This indicator presents one of the most significant findings of Dimension 6: not a single case supported by primary evidence was identified for quality monitoring.

All cases identified as compliant are based on secondary data.

This indicates a significant weakness in the system, as the contracting of services should be accompanied not only by formal agreements, but also by documented monitoring of the quality, results and compliance with standards by providers.

Compliance by Institutional Responsibilities

Responsibilities are linked to:
- The Mayor of the Municipality;
- The DHSW;
- The CSW;
- The Directorate of Finance.

For each institution:
- 0 cases – 0.0% show that the responsibility has been fulfilled with primary evidence;
- 12 cases – 42.9% show that the responsibility has been fulfilled according to secondary data;
- 16 cases – 57.1% show no compliance.

Overall, the responsibility is found to be fulfilled in 12 out of 28 cases, or 42.9%, but in none of these cases is it supported by primary evidence.

This is a clear signal that documenting quality monitoring should be one of the main priorities for improvement.

6.1.5. Cooperation with NGOs

The indicator assesses whether the municipality has a plan for financing or active contracts with non-governmental organisations for the provision of social services.

Out of 28 municipalities:
- 9 municipalities – 32.1% have primary data;
- 7 municipalities – 25.0% have secondary data;
- 12 municipalities – 42.9% show no compliance.

Overall, 16 out of 28 municipalities, or 57.1%, are found to be compliant.

This is the indicator with the second-highest level of compliance, after licensing.

The result indicates that cooperation with NGOs is relatively more developed than the formal contracting of services. However, no verifiable compliance was identified in 12 municipalities.

Compliance by Institutional Responsibilities

Responsibilities are linked to:
- The Mayor of the Municipality;
- The DHSW;
- The CSW;
- The Directorate of Finance.

For each institution:
- 9 cases – 32.1% show that the responsibility has been fulfilled with primary evidence;
- 7 cases – 25.0% show that the responsibility has been fulfilled according to secondary data;
- 12 cases – 42.9% show no compliance.

Overall, the responsibility is found to be fulfilled in 16 out of 28 cases, or 57.1%.

Table 11 – Summary of Institutional Responsibilities

Responsible Institution	Possible Cases	With Primary Evidence	Based on Secondary Data	No Compliance	Total Compliant
Mayor of the Municipality	112	24 (21.4%)	28 (25.0%)	60 (53.6%)	52 (46.4%)
DHSW	140	31 (22.1%)	42 (30.0%)	67 (47.9%)	73 (52.1%)
CSW	140	31 (22.1%)	42 (30.0%)	67 (47.9%)	73 (52.1%)
Directorate of Finance	112	24 (21.4%)	28 (25.0%)	60 (53.6%)	52 (46.4%)

In Dimension 6, responsibilities are not distributed equally among institutions.

The DHSW and the CSW are linked to all five indicators, while the Mayor of the Municipality and the Directorate of Finance are linked to four indicators.

The DHSW and the CSW have an overall compliance rate of 52.1%, but only 22.1% of their cases are supported by primary evidence. The Mayor of the Municipality and the Directorate of Finance have a compliance rate of 46.4%, while no compliance was identified in more than half of their cases.

A common characteristic across all institutions is the high proportion of secondary data. This is particularly related to the quality monitoring indicator, for which no institution has primary evidence.

Table 12 – Summary of Compliance by Indicator 6

Ranking	Municipality	Licensing	Contracting	Alignment with the Annual Plan	Quality Monitoring	Cooperation with NGOs	Primary	Secondary	No Compliance	Compliance
1	Lipjan	1	1	1	2	1	4	1	0	100%
1	Gracanica	1	1	1	2	1	4	1	0	100%
2	Suhareka	1	1	1	0	1	4	0	1	80%
2	South Mitrovica	1	1	1	0	1	4	0	1	80%
3	Istog	1	1	1	2	0	3	1	1	80%
4	Prizren	1	1	1	0	0	3	0	2	60%
5	Elez Han	2	1	1	2	0	2	2	1	80%
6	Klina	1	1	0	0	0	2	0	3	40%
7	Prishtina	1	2	0	2	1	1	3	1	80%
8	Rahovec	1	0	0	2	0	1	1	3	40%
8	Junik	1	0	0	2	0	1	1	3	40%
8	Mamusha	1	0	0	2	0	1	1	3	40%
9	Shtime	1	0	0	0	0	1	0	4	20%
10	Obiliq	2	2	2	2	2	0	5	0	100%
10	Peja	2	2	2	2	2	0	5	0	100%
10	Ferizaj	2	2	2	2	2	0	5	0	100%
11	Drenas	2	2	2	2	0	0	4	1	80%
11	Fushe Kosovo	2	2	2	2	0	0	4	1	80%
12	Dragash	2	2	0	0	0	0	2	3	40%
12	Podujeva	2	2	0	0	0	0	2	3	40%

13	Kamenica	2	0	0	0	0	0	1	4	20%
13	Skenderaj	2	0	0	0	0	0	1	4	20%
13	Viti	2	0	0	0	0	0	1	4	20%
13	North Mitrovica	2	0	0	0	0	0	1	4	20%
14	Gjakova	0	0	0	0	0	0	0	5	0%
14	Gjilan	0	0	0	0	0	0	0	5	0%
14	Vushtrri	0	0	0	0	0	0	0	5	0%
14	Ranilug	0	0	0	0	0	0	0	5	0%

Lipjan and Graçanica are at the top of the ranking, with four indicators supported by primary evidence and one by secondary evidence, achieving 100% compliance.

Suhareka and South Mitrovica each have four cases supported by primary evidence and one case showing no compliance, while Istog has three primary cases, one secondary case and one case showing no compliance.

A distinct profile is presented by Obiliq, Peja and Ferizaj. All three municipalities demonstrate compliance across all five indicators, achieving 100%, but all cases are supported by secondary data. This places them lower in the ranking in terms of the strength of evidence.

At the bottom of the ranking are Gjakova, Gjilan, Vushtrri and Ranilugu, where no verifiable compliance was identified in any of the five indicators.

INTERPRETATION OF THE AGGREGATED RESULTS

The following scale was used to interpret the results:

Total Points out of 25	Percentage	Category	Colour
20.0–25.0	80–100%	Very High Level	🟢
15.0–19.9	60–79.9%	High Level	🟩
10.0–14.9	40–59.9%	Moderate Level	🟡
5.0–9.9	20–39.9%	Low Level	🟠
0–4.9	0–19.9%	Very Low Level	🔴

The ranking is based on the total number of weighted points. In cases where two or more municipalities achieve the same score, priority is given to the municipality with the higher number of primary evidence records, as these represent a higher level of verifiability of compliance.

Table 13 – Aggregated Results by Municipality

RANKING	MUNICIPALITY	PRIMARY	SECONDARY	WEIGHTED SCORE	PERCENTAGE	CATEGORY
1	Lipjan	23	2	24.0 / 25	96%	🟢 Very High Level
2	Prizren	19	0	19.0 / 25	76%	🟩 High Level
3	Suhareka	18	0	18.0 / 25	72%	🟩 High Level
4	Shtime	13	2	14.0 / 25	56%	🟡 Moderate Level
5	Junik	11	6	14.0 / 25	56%	🟡 Moderate Level
6	Elez Han	11	5	13.5 / 25	54%	🟡 Moderate Level
7	Rahovec	12	2	13.0 / 25	52%	🟡 Moderate Level
8	Istog	11	4	13.0 / 25	52%	🟡 Moderate Level
9	Gracanica	11	4	13.0 / 25	52%	🟡 Moderate Level
10	Prishtina	11	3	12.5 / 25	50%	🟡 Moderate Level
11	Peja	4	16	12.0 / 25	48%	🟡 Moderate Level
12	Dragash	7	8	11.0 / 25	44%	🟡 Moderate Level
13	Obiliq	6	9	10.5 / 25	42%	🟡 Moderate Level
14	South Mitrovica	6	7	9.5 / 25	38%	🟠 Low Level
15	Klina	5	4	7.0 / 25	28%	🟠 Low Level
16	Ferizaj	1	12	7.0 / 25	28%	🟠 Low Level

17	Drenas	0	14	7.0 / 25	28%	🟠 Low Level
18	Fushe Kosovo	0	13	6.5 / 25	26%	🟠 Low Level
19	Kamenica	0	13	6.5 / 25	26%	🟠 Low Level
20	Skenderaj	0	13	6.5 / 25	26%	🟠 Low Level
21	Gjakova	6	0	6.0 / 25	24%	🟠 Low Level
22	Mamusha	3	4	5.0 / 25	20%	🟠 Low Level
23	Gjilan	4	0	4.0 / 25	16%	🔴 Very Low Level
24	Viti	1	6	4.0 / 25	16%	🔴 Very Low Level
25	Vushtrri	3	0	3.0 / 25	12%	🔴 Very Low Level
26	Podujeva	1	4	3.0 / 25	12%	🔴 Very Low Level
27	North Mitrovica	0	6	3.0 / 25	12%	🔴 Very Low Level
28	Ranilug	0	0	0.0 / 25	0%	🔴 Very Low Level

CONCLUSIONS AND RECOMMENDATIONS

Conclusions

- The monitoring results show that municipalities have made significant progress in establishing institutional mechanisms and formalising certain responsibilities in the field of social services and child protection. However, this progress is uneven and is not reflected to the same extent in the actual provision of services, their financing, the contracting of external service providers, and quality monitoring.

- Overall, the analysis of the six dimensions reveals a clear distinction between what can be considered formal institutional capacity and what constitutes actual implementation capacity. Structures, mechanisms and planning processes appear to be relatively more developed, while gaps become more evident when these structures are expected to deliver concrete services, supported by financing and documented through measurable results.

- This is also clearly reflected in the comparison between the dimensions. The area with the highest level of compliance is the Provision of Social Services, at 61.9%, followed closely by Institutional Mechanisms, at 60.7%. On the other hand, the lowest results were recorded in Specific Services for Children, at only 29.5%, and Financing, at 38.6%.

- This difference indicates that municipalities are relatively more advanced in establishing basic structures and providing general forms of information and social services, while remaining more limited when it comes to specialised forms of care and securing sustainable financing for them.

- One of the key findings concerns the operationalisation of institutional mechanisms. The establishment of the Child Rights Team represents one of the highest monitoring results, with 82.1% compliance. However, its practical functioning is significantly lower, as Team meetings were recorded in only 53.6% of municipalities. This difference shows that the formal establishment of structures does not necessarily guarantee their regular functioning.

- Weaknesses have also been identified in specialised professional capacities. Only 42.9% of municipalities have a specialised child protection officer within the CSW. This indicates that strengthening mechanisms must be accompanied by investment in human resources and the professionalisation of the roles of the responsible actors.

- In the field of planning, the most positive result relates to consultations with NGOs and local actors, with 71.4% compliance. However, social planning based on needs assessments and specific programmes for children's well-being each record only 50% compliance. This indicates that consultation is relatively more developed than the translation of identified needs into structured plans and programmes.

- This is an important finding because planning should serve as the link between needs assessment, financing and service provision. When this link is weak, there is a risk that planning documents will remain formal and will not sufficiently influence practical decision-making.

- In the field of social service provision, the results are relatively better, but gaps remain. Informing citizens through the CSW achieves 67.9% compliance, while the public list of social services reaches only 57.1%. This indicates that a functional basis for informing citizens exists, but transparency and structured access to information need to be improved.

- The greatest weakness in the system is evident in specific services for children. With an overall compliance rate of only 29.5%, this dimension reveals the largest gap between formal mechanisms and the actual provision of services. Day care centres have a compliance rate of only 17.9%, while Children's Protection Homes and community-based homes each record 21.4%.

- This indicates that the more specialised forms of care, which require professional staff, infrastructure and continuous financing, are significantly less developed at the local level. In this regard, home-based services for children with disabilities and severe chronic illnesses, with 57.1% compliance, show a considerably better result, but one that is still insufficient to ensure equal coverage.

- The financing dimension confirms this problem. Overall compliance stands at only 38.6%. While financial support for foster families reaches 60.7%, the financing of day care centres and community-based homes stands at only 21.4%.

- This creates a direct link between the lack of services and the lack of financing. The services that are least available are also those that receive the least funding. For this reason, service development cannot be addressed separately from budget planning.

- In the field of contracting and licensing, licensing demonstrates a relatively good result, with 75% compliance. However, the contracting of services, the alignment of contracts with the annual plan, and quality monitoring each record only 42.9% compliance.

- Particularly important is the finding that no cases supported by primary evidence were identified in relation to quality monitoring. This indicates that even where municipalities declare that they monitor service providers, the process is not documented sufficiently.

- Another important cross-cutting finding concerns the distinction between primary and secondary data. In many cases, municipalities declared that a responsibility had been fulfilled but did not provide sufficient documentation to substantiate it. This indicates that improvements in performance must also be accompanied by improvements in the documentation, archiving and publication of institutional evidence.

- In this regard, the report shows that compliance should not be understood solely as the completion of an activity or the existence of a mechanism. Sustainable compliance requires that an action be planned, financed, implemented, monitored and documented.

- The comparison with the 2025 Annual Report on the Implementation of Municipal Policies in the Field of Children's Rights reinforces this conclusion. That report also identifies that structures and plans exist in a relatively large number of municipalities, but their operationalisation, the implementation of activities and financing remain more limited.

- Overall, it can be concluded that the municipal system is at a stage where institutional formalisation is more advanced than functional implementation. The main challenge for the coming period is to transform existing mechanisms into actual capacities for the provision of quality and sustainable services.

Recommendations

- Based on the monitoring findings, the main priority should be the full operationalisation of existing mechanisms. Municipalities should ensure that Child Rights Teams hold regular meetings, have work plans, clearly defined responsibilities and documentation of their activities. At the same time, gaps in professional capacities should be addressed, particularly by ensuring the availability of specialised child protection officers within the CSW.

- Social planning should be more directly linked to needs assessments. Municipalities should periodically conduct structured analyses that identify groups in need, missing services and existing capacities. These analyses should serve as the basis for programme and budget planning, so that plans do not remain merely formal documents.

- Particular priority should be given to the development of specific services for children. Given that this dimension has the lowest level of compliance, municipalities should systematically assess the need for day care centres, home-based services, residential services and community-based forms of care.

- In cases where a municipality's individual capacities are insufficient, inter-municipal cooperation and the contracting of licensed service providers should be considered more seriously. Not every municipality necessarily needs to establish all services independently, but it must ensure that citizens have genuine access to the services they need.

- Financing should be treated as a central element in the development of the system. Municipalities should establish clearer and identifiable budget allocations for social services and specific services for children. Financial planning should be linked to the priorities identified in social plans and to services that are currently lacking.

- Furthermore, it is recommended that financing should not be limited to covering existing costs, but should also be used for the gradual development of new services. In this regard, day care centres and community-based services should be considered priority areas.

- Contracting with NGOs and other licensed providers should be used more strategically. Contracts should be linked to annual plans and needs assessments, while each contract should include clear objectives, expected results and performance indicators.

- One of the most important recommendations concerns quality monitoring. Given that no primary evidence was identified for this indicator, municipalities should develop standardised procedures for monitoring service providers. These procedures should include monitoring visits, periodic reports, quality indicators and mechanisms for addressing shortcomings.

- Institutional documentation should also be significantly improved. Every activity, meeting, plan, contract or service delivered should be accompanied by clear documentation and stored in a structured manner.

- Municipalities should also improve transparency towards citizens. Information on social services, eligibility criteria, contacts, providers and programmes for children should be published and easily accessible on municipal websites.

- At a broader level, it is recommended that municipal reporting in this field be standardised. A unified reporting format would help compare data across municipalities and improve the quality of evidence.

- At the same time, municipalities demonstrating better performance and a high level of primary evidence can serve as examples for the exchange of practices and the development of models that can also be adapted by other municipalities.

- Finally, the monitoring results should be used to provide differentiated support to municipalities. Municipalities with gaps in institutional mechanisms need support in strengthening their structures, while those that have mechanisms in place but lack services should focus more on financing, contracting and the development of service provision.

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