Good Practices & Lessons Learned
The Case of Community-Based Service Provision for Children in Ukraine

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ABBREVIATIONS

Covid  Coronavirus disease
CSO  Civil Society Organizations
HIV  Human immunodeficiency virus
IDP  Internally displaced person
GCA  Government-controlled area
KfW  German Government and the German Development Bank
NGCA  Non government-controlled areas
OSCE  Organization for Security and Co-operation in Europe
UAH  Ukrainian hryvnia
UNICEF  United Nations Children’s Fund
USD  United States dollars
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SUMMARY

The reform of the social sector has been among the most pending issues in the post-Soviet Ukraine. Various international organizations are supporting the Government of Ukraine in developing and implementing adequate policies and regulatory frameworks to ensure access to and quality of social services to all citizens in need, and especially to the most vulnerable.

The UNICEF project “Jointly: Social services for the family in the community” implemented in 12 municipalities of Donetsk and Lugansk regions is among the flagship UN interventions promoting an integrated approach to the provision of social services for vulnerable families with children in Ukraine. This Case Study paper aims to summarize the project experience and lessons learned so far.

The project is being implemented in a challenging situation. The post-Soviet system of social service provision was organized and funded in a highly centralized way and was very ineffective. Currently, expectations for improving social services provision are reliant on the ongoing social protection system reform and de-institutionalization reform, where de-institutionalization of care is an essential part. Although the statutory functions for the social protection and child protection systems are delegated to the local level, many local authorities have limited understanding and capacities. Reorganization of social services provision has additional dimensions and is more difficult in the East of Ukraine, affected by the conflict. The Covid-19 pandemic has generated an additional burden on municipalities and made it more challenging to advance social services reform at the local level.

In Ukraine, households with children are the most vulnerable group, particularly in terms of monetary poverty. While focusing on child protection, the “Jointly” project helps communities to strengthen social cohesion and organize a quality social service system capable of preventing and responding to life crises of vulnerable families with children. The child-centrism and continuum of social services is the main ideology of the project and is a conceptually new approach. Such integrity in work can be ensured by an integrated model of social protection at the community level, which includes the provision of services. The project main deliverable is the network of integrated community-based social services established for children and families with children in the targeted municipalities of Eastern Ukraine. The project supported partner municipalities in implementing full cycle: from needs assessment, planning and budgeting social services provision, to implementing integrated service provision.

At the needs assessment stage the project experience revealed:
- The importance of local commitment and cooperation for starting the process of introduction of social services for families with children in municipalities;
- The instrumental role of inter-agency Working Groups and local level regulations on inter-departmental interaction for overcoming silos and securing cooperation during early identification of children and families in difficult life circumstances, as well as for future rendering of social services to them;
- A need for clearly defining a framework for needs analysis, methods, capacities and roles of different actors;
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› The value of multiple information sources, including qualitative data;
› A need to secure human capacity of municipalities to conduct needs assessments systematically.

At the planning and budgeting stage the project showed:
› The importance of ensuring continuity between needs assessment outcomes and strategic decision-making related to municipal plans and budgets;
› The link between relevance and feasibility of implementation of measures elaborated in targeted social programs of municipalities and the level of involvement of all actors engaged in social services;
› The significance of all program elements, including goals, chosen strategies and indicators for effective programming and progress implementation;
› A need to advocate for social programs on the background of competing priorities;
› The capacity deficit for the calculation of social services costs;
› The rigidity of a sector-based public finance management system that hinders application of an integrated approach to social services delivery;
› A need to thoroughly assess financial capacity of municipalities to provide social services on the background of limited resources available for investments in infrastructural improvements (especially in municipalities heavily affected by the conflict);
› The importance of (re)structuring to address existing service provision shortcomings and an increase of social workers, also for reaching out in rural areas.

At the stage of integrated service provision and introducing a case management approach the project demonstrated:
› That case management is an effective social work tool with its main principles of complexity, interdisciplinary and interdepartmental interaction, cooperation of the specialist and the recipient of services, individual approach with the recipient of services in center and confidentiality;
› The benefits of training targeting all key stakeholders, including systematic training and supervision;
› The importance of single coordination and management of all relevant services supported by local level regulations and adjusted procedures of involved agencies;
› A need to eliminate silos and apply a single window approach where applicable;
› A deficit of common information systems and shared performance indicators;
› The value of cooperation between local self-governments and CSOs in (re)organizing service delivery.

The project experience yielded a number of important general lessons related to:
› Integrated service provision as an effective approach for meeting the needs of vulnerable children and their families, opportunities for which are widening with decentralization and social sector reforms, and which needs to be supported through further policy and regulatory adjustments;
› The importance of widening the services menu, capital investments in infrastructure improvement, as well as structural changes that should be understood, effectively planned and budgeted;
› The quality of planning depending on the quality of planning inputs, including awareness of real needs and data availability;
› Work on both “supply” and “demand” side of the social services provision equilibrium;
› The emerging role of CSOs in social service provision that needs to be better utilized locally and reinforced through the regulatory base;
› Effective advocacy for a favorable environment for an integrated approach in social services provision to vulnerable children and their families at the national level, informed by practices in the field.
The reform of the social sector has been among the most pending issues in the post-Soviet Ukraine. Addressing the issue has become possible since the implementation of the large-scale decentralization and territorial administrative reform in the country. Shifting from a highly ineffective and inefficient Soviet system to the standard of a European social service provision system with an integrated approach to social services in line with principles promoted by the European Social Charter1 is a challenging task.

A number of international organizations are supporting the Government of Ukraine in developing and implementing adequate policies and regulatory frameworks to ensure access to and quality of social services to all citizens in need, and especially to the most vulnerable.

The UNICEF project “Jointly: Social services for the family in the community” is among the flagship UN interventions promoting an integrated approach to the provision of social services for vulnerable families with children in Ukraine. The project is implemented with the financial support of the German Government and the German Development Bank (KfW) and in partnership with the Consortium of Civil Society Organizations (CSOs) led by the Ukrainian Child Rights Network, whose members formed the consortium for an effective project implementation (Hope and Homes for Children, Mariupol Youth Union, Partnership for Every Child, SOS Children’s Villages and Social Synergy).

The first phase of the project engaged with 12 municipalities (hromadas) of Donetsk and Lugansk oblast affected by the conflict in the East of Ukraine.2 On one hand, it aimed at strengthening social cohesion among internally displaced persons (IDP) and host communities. On the other hand, it worked on introducing a continuum of social services and addressing key challenges in sustainable social services provision to vulnerable children and their families in partner municipalities in the context of the on-going social sector and decentralization reforms. The completion of the first project phase in mid-2021 was followed by the launching of the second phase 2021-2022.

INTRODUCTION

The project covers 12 territorial communities in the east of Ukraine. The following implementing partners are designated for local project implementation within the Consortium headed by the Civil Association “Ukrainian Child Rights Network”:

- SOS CHILDREN’S VILLAGES UKRAINE: Chmyrivka, Bilovodsk and Novopskovsk amalgamated territorial communities, Luhansk region
- PARTNERSHIP FOR EVERY CHILD: Bahmut, Donetsk region, Bilokurakyne and Troitske amalgamated communities, Luhansk region
- SOCIAL SYNERGY: Soledar and Siversk amalgamated communities, Donetsk region
- HOPE AND HOMES FOR CHILDREN: Druzhkivka and Mykolaivka amalgamated communities, Donetsk region
- MARIUPOL YOUTH UNION: Sartana and 1 district of Mariupol city, Donetsk region

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1 https://www.coe.int/en/web/european-social-charter/charter-texts
2 Government controlled area. The choice of the municipalities was based on an assessment of collective social needs, prioritization processes and consultations with local communities with a focus on communities with the highest number of IDP population.
This Case Study paper aims to summarize the experience and lessons learned of the first project phase in partner municipalities. The purpose of the Case Study is to demonstrate what can be achieved at the local level in terms of reforming social services provision to vulnerable children and their families, as well as to identify supporting and limiting factors that require special attention at local, sub-national and national levels for further advancement of integrated service provision in Ukraine. The Case Study is also meant to inform the second phase of the project.

The Case Study will be of interest to all actors engaged in promoting social service reforms in Ukraine, including government, CSOs and international partners.

The Case Study paper is organized along the following structure:

› Chapter 1 explains the Situation;
› Chapter 2 lays out Response used by the “Jointly” project;
› Chapter 3 analyzes step by step Achievements and Challenges, including supporting and restricting factors, by three stages of cooperation:
   1. Needs Assessment;
   2. Planning and Budgeting Social Service Provision;
   3. Introduction of Integrated Service Provision through Case Management.
› Chapter 4 concludes with overall lessons learned and ways forward.
The post-Soviet system of social service provision was organized and funded in a highly centralized way and was very ineffective. Service coverage, access and quality were poor, especially for elderly people, vulnerable children and their families, and the marginalized in need of (re)integration assistance (as shown on Scheme 1). Bringing services closer to people using a community-based approach is among key tasks to be addressed.

Scheme 1. Service provision index for Ukraine, 2020

The Ukrainian social protection system has been systemically unable to prevent, proactively identify, and holistically respond to the growing social needs of vulnerable children and families, especially in the most deprived and risk-prone areas of the conflict-affected Eastern Ukraine. The system is highly skewed towards financial/ cash assistance with social services being underdeveloped and often accessible only for those living in urban areas and closer to sub-regional (rayon) centers. Services have been provided by different agencies in a fragmented, non-coordinated and reactive way, adhering to highly administrative and bureaucratic procedures. Focus on financial assistance as the main solution to social problems of families has bred dependency on the system and failed to lead to sustainable situation improvement.

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2 N. Timoshenko, presentation “Planning of social services development for amalgamated communities: Approaches, Practices and Challenges” at the UNICEF Conference “Quality Social Services for Families with Children”, 15-17 September, 2020
Currently, expectations for improving social services provision are reliant on the on-going social protection system reform and de-institutionalization reform. Political, administrative and financial decentralization, combined with the territorial-administrative reform, has led to municipalities’ expansion to a size where they are expected to be more capable of generating revenues and sustaining local development and service provision. Local authorities in Ukraine have also received new powers and opportunities to organize social services based on identified needs of their residents, and in particular vulnerable families with children. Along with these new opportunities the decentralization reform poses a number of challenges and risks, including: growing inequality between municipalities and regions, misalignment of responsibilities between national, sub-regional and local levels for basic and specialized services, and a need to address significant gaps in the capacities of municipalities. The transfer of responsibilities for social services from rayon to municipal level is not yet supported by an understanding of what the organization of social services provision means and why it should be prioritized among other competing pending issues.

De-institutionalization of the childcare system is an essential part of the on-going social protection reform. With new powers the municipalities also gained new duties, including implementing the de-institutionalization reform in line with the National Strategy for Forming the System of Children’s Institutional Care and Upbringing. While effective social services are considered to be the means of prevention of child institutionalization, to bring some 100,000 institutionalized children back to their communities and families is a challenging task to address at both municipal level (that is responsible for basic services) and at higher sub-national level (that should secure access to specialized social services, including through inter-municipal cooperation). The third round of the de-institutionalization reform that began in 2017 was expected to be better linked to other related reforms, including inclusive education, health care and decentralization. However, the latest revision of the De-institutionalization Action Plan resulted in the slow-down of the reform.

Planning, programming and budgeting, based on actual needs assessment, became key instruments for managing development locally, including in the social domain. Municipalities can now independently define their needs and set their social development goals in their general mid-term community development strategies and targeted social programs, using a person-centered development approach and results-based methods. To achieve their strategic goals, they are expected to plan and finance measures for the development of the social sphere, overcoming poverty, social isolation, alienation of vulnerable populations and creating conditions for raising children in a family environment. Funding of community expenditures for the implementation of all necessary measures is carried out based on those plans and programs. According to the annual national budget determined by the Budget Code of Ukraine, target budget programs were approved annually within the available budget resources and were based on annual local revenue forecasts. But for several years now, governments of all levels, including municipal, have shifted to mid-term planning and budgeting, which allows more flexibility in revenue and expenditure planning. Additionally, national level subventions and other financing schemes give municipalities access to additional resources for the improvement of local infrastructure and investment in education and health services development; however, these opportunities are as yet limited in the social services domain where the reforms began only recently.

\[4 \text{https://zakon.rada.gov.ua/laws/show/526-2017/\%D1%80Text}\]
The application of an integrated approach required a profound reform of the social protection system at the national level, combined with decentralization of powers to local self-governments. The reform has acquired an institutional dimension with the adoption of the Law of Ukraine “On Social Services” on January 1, 2020. Decentralization (through the Law of Local Self-Government adopted in 2020) enabled a transfer of functions for the provision of social services to municipalities and building horizontal (between national agencies/ ministries and their departments) and vertical (between local self-governments and state executive authorities) institutional relations.

The main tasks of the reform of the social services system under decentralization include:

› Increase the volume of services provided to the population at the level of the territorial community;
› Create conditions for reforming institutional care facilities;
› Solve the problem of accessibility to the services of the rural population through the creation of stronger rural territorial communities;
› Introduce a new quality of management system in territorial communities, focused on the needs of citizens;
› Increase the share of preventive social services and social work on early detection of difficult living situations of families and children.

There are a number of potential advantages and possibilities associated with the decentralization of the social services system. These are:

› Improved proximity to service consumers, the ability to respond more quickly to people’s needs and take local needs into account, creating more “sensitive” social services;
› Reduction of bureaucracy, improved communication between community leaders, executive staff and service providers;
› Improved capacity in strategic policy development, as all planning functions are concentrated in one local authority;
› Opportunity to review existing service delivery mechanisms to achieve economic and social efficiency, whereby communities have more freedom to choose how services are organized;
› Ability of communities to find the most effective ways to address the problems of families and children in difficult circumstances.

Although the statutory functions for the social protection and child protection systems are delegated to the local level, many local authorities have limited understanding and capacities. They are now responsible for the child protection/social protection services, including the organization of 17 types of social services based on local needs, including crises interventions, prevention of and response to violence against children and women, support of alternative family-based childcare modalities, etc. The most critical issues related to decentralization in child protection and care are the lack of a skillful social service workforce locally, arrangements for children at risk and those deprived of parental care, and organization of coordinated basic social services provision to at-risk families and families with children with disabilities in an integrated manner (also in line with inclusive education and other child-friendly approaches), as well as organization of family-type alternative child care.

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5 NO. Kretnovska, presentation “Increasing communities potential to develop social services: How quickly can the new management system be built?” at the UNICEF Conference “Quality Social Services for Families with Children”, 15-17 September, 2020
Reorganization of social services provision has additional dimensions and is more difficult in the East of Ukraine, affected by the conflict. As many as 3.4 million people, including half a million children, live in the most challenging circumstances, where armed conflict is still on-going, economic opportunities are very limited, and access to basic infrastructure (like water supply, sanitation, roads, electricity, etc.) is poor. In addition to displacement, the vulnerabilities of many children and their families have increased due to poverty, lack of proper housing, unemployment, and social exclusion. The demographic situation in rural areas of the region is a particular concern, due to intensive migration. Many families are under constant stress, and social problems only exacerbate it. Those who have found themselves in the situation of IDPs have difficulties re-integrating. The capacity of the host municipalities to provide quality services, especially social services, to one and a half million IDPs has been limited from the beginning of the conflict. As a result, the eastern regions of Ukraine are heavily dependent on international humanitarian assistance.

In Ukraine, households with children are the most vulnerable group, particularly in terms of monetary poverty. Income inequality is increasing, and the gap is widening, with expenditure of the richest being more than five times that of the poorest. In 2019, the absolute poverty rate of families with children was 47.3% (compared to 34.3% in families without children). In absolute terms, 3,470,222 Ukrainian children were below the national poverty line (UAH 3,661 or around US$100 per person per month) in 2019. In total, 13.6% of households with children were extremely poor, compared to 8% of households without children.

The Covid-19 pandemic has generated an additional burden on municipalities and made it more difficult to advance social services reform at the local level. Covid-19 had an impact on the overall child protection system, increasing risks of child poverty, inequity and inequality. Social services in this context became even more important and demanded both prevention and response measures. Overall the most vulnerable families in terms of socio-economic impact of Covid-19 are those who cannot diversify their income, including households with three or more children, single parents with children, households with children below three years of age and single pensioners above 65 years of age.

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5 Of these, 430,000 children live in communities within 20 km of the ‘contact line’ in the government-controlled area (GCA) and non-government-controlled areas (NGCA), while the others live in the larger conflict area. Some of the most vulnerable children live near the ‘contact line’. In the GCA alone, it is estimated that over 55,000 children live within 15 km of the contact line. In addition to dozens of ceasefire violations recorded every day by the Organization for Security and Co-operation in Europe (OSCE) Special Monitoring Mission along the ‘contact line’, these children are also exposed to mines and unexploded ordnance. In addition to displacement, the vulnerabilities of many children and their families increased due to poverty, lack of proper housing, unemployment, and social exclusion (UN OCHA, Ukrainian Humanitarian Needs Review, 2020).


While focusing on child protection, the “Jointly” project helps communities to strengthen social cohesion and organize a quality social service system capable of preventing and responding to life crises of vulnerable families with children. This includes: families who find themselves in difficult life circumstances; IDP families; low-income families; families raising a child with developmental delays, impairments and / or disabilities; families affected by violence; families who have a child at risk placed in a boarding school.

The child-centrism and continuum of social services is the main ideology of the project and takes conceptually new approaches. The continuum implies longevity, continuity and commonality, and includes the following sequential elements: prevention of difficult life circumstances/prophylaxis – early detection and registration of cases of children and families in need of professional intervention – referencing of families with children to various services depending on needs – service provision through case management, monitoring and evaluation (“closing the feedback loop”).

Scheme 2. Social services continuum

The idea is to shift focus to support families in identifying and addressing causes of their difficult life circumstances and working with a family (promoting a participatory approach) and with various agencies to prevent and overcome the crisis.

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10 N. Avetisyan, presentation “The importance of integrated social services for families with children in Ukraine” at the UNICEF Conference “Quality Social Services for Families with Children”, 15-17 September, 2020
Such integrity in work can be ensured by an integrated model of social protection at the community level, which includes the provision of services. An integrated model of the social protection system can be formed by combining human, material, financial and technological resources of the community to ensure access of vulnerable groups to good quality social services. According to best practice (both European¹¹ and those emerging in Ukraine¹²), an integrated approach includes not only the provision of social services based on the principle of ‘one-stop shop’, but also other interventions ensuring the continuum through strong referral pathways and an inter-disciplinary approach. Meanwhile, efforts are being made to ensure the “continuum of services” and an integrated approach through cross-sectoral coordination mechanisms at local level. Prerequisites for this are the existence of a single coordination and management of all these services in a given area, a single information system and performance indicators for all agencies involved.

The project main deliverable is the network of integrated social services established for children and families with children in the targeted municipalities of Eastern Ukraine. This includes both investment in “hardware” (physical infrastructure improvements) and “software” (organization, policies, knowledge and skills, systems). Following successfully proven global best practices, the project invested in abilities of municipalities to combine locally driven social services with monitoring of the use of cash transfers, to increase the number of front-line social workers, and ensure the proper infrastructure and working environment for them, along with capacity-building directed to a holistic and child-rights centered case management and social protection. Public awareness and demand generation for social services also became an important task of the projects call to decrease stigma and discrimination against vulnerable families with children, as well as to form regular demand for community-based social services.

The project consists of two components

- **Soft component**
  - Training of Case Management
  - Strengthening intersectoral cooperation
  - Support with development and budgeting of social services
  - Enhancing the communication skills of community members for social change and demand generation for social services
  - Documenting, scaling up best practices and developing recommendations on integrated community social services for internally displaced and other vulnerable families with children in Ukraine

- **Hard component**
  - Establishment of multifunctional/integrated centers for social services (renovation of selected premises according to the needs of communities)
  - Refurbishment of these centers

The project supported partner municipalities in implementing full cycle: from needs assessment, planning and budgeting social services provision, to implementing service provision in line with the integrated approach and with the inter-sectoral coordination and inter-agency cooperation mainstreamed throughout. This cycle of support is being repeated in the new project phase but with a focus on expanding the variety of social services provided by partner municipalities.

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[https://www.p4ec.org.ua/upload/education-library/1345183835.pdf?fbclid=IwAR2D7x2uJvEMBGk63e-QAcjwSNy88nWiJ5EUbAUi7afr
yQQMZzeWjVWYw](https://www.p4ec.org.ua/upload/education-library/1345183835.pdf?fbclid=IwAR2D7x2uJvEMBGk63e-QAcjwSNy88nWiJ5EUbAUi7afr
yQQMZzeWjVWYw)
[https://www.msp.gov.ua/content/krashchi-praktiki.html?PrintVersion](https://www.msp.gov.ua/content/krashchi-praktiki.html?PrintVersion)
Local commitment and cooperation was a key precondition for starting the process of introduction of social services for families with children in municipalities. Following the signing of the Memorandum of Understanding between the project and partner municipalities, in all municipalities coordination Working Groups (WG) were established at the municipal executive committee. The lead in establishing the WG was assumed either by the head of municipality or the agencies themselves. To enjoy authority, the WGs were institutionalized through Decrees of the Municipality Mayors.

The experience showed a need to strike a balance between ensuring involvement of all key stakeholders and keeping the size of the WG optimal. The identification and prioritization of community needs, planning and establishing interagency cooperation in the social domain in the framework of the WGs was typically driven by the executive management, and included the heads of departments responsible for strategic and financial planning, and other relevant municipal departments or specialists delegated by them. Naturally, the most proactive in organizing and providing social services to children and families was the municipal structural unit for social protection, but the involvement of agencies such as children’s services, education, culture, health, juvenile police unit, etc. was equally important. Other stakeholders were: council members, key experts in the social sphere, key service providers, relevant CSOs and organizations representing interests of beneficiaries of services, etc.

The Working Group Terms of Reference were focused on strategic issues. The typical list of strategic issues considered by WGs included: identification of social needs of the community and priority services for development; elaboration of recommendations for community development strategy and targeted social programs; facilitating inter-departmental cooperation in identifying children and families in need of services and appropriate responding; making recommendations and comments on decisions and regulations of local self-government related to social services; monitoring the process of implementation of relevant decisions. These were also the WGs that initiated and supervised the process and used the results of the social needs assessment in partner municipalities.

The practice of establishing WGs for needs assessment was included in the draft new national policy on community-based social service needs assessment. This was an important impact of the “Jointly” project at the national level.13
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**Step: Development of the order (protocol) of interdepartmental (intersectoral) interaction**

Local level regulation of interdepartmental interaction was an effective instrument for overcoming silos and securing cooperation during early identification of children and families in difficult life circumstances, as well as for future rendering of social services to them.

Based on the analysis of the existing legal framework for interagency cooperation, in particular for the detection and emergency response in cases of child safety risks, all municipalities developed draft procedures for interdepartmental interaction; some went as far as elaborating regulations on interaction. Adoption of the Decree on Interdepartmental/Intersectoral Cooperation allowed silos to be overcome in the functioning of agencies during needs assessment, planning and service provision, and minimized differences in understanding of social services by different agencies. The agencies included in such cooperation arrangements in partner municipalities were usually: local executives; institutions involved in education, health care, social protection; structural sub-divisions of rayon state administrations; social service centers and other social service providers; juvenile police; institutions providing legal aid; courts, prosecutor’s offices, probation authorities; services for victims of domestic violence and gender-based violence.

**Step: Defining Needs Assessment Frame**

Clearly defining a framework for needs analysis, methods, capacities and roles of different actors was crucial for effective needs assessment.

The process of assessing the needs of the population in social services implied collection, generalization and analysis of information on vulnerable groups, individuals and families in difficult life circumstances, and their needs for social services. Moreover, the mapping of existing social service providers was applied. The assessment results then informed planning and management decisions on the organization of social services.

All partner municipalities stress the importance of analyzing different dimensions during the needs assessment process:

- The state of social services provision, including the legal framework for social services at the national, sub-national and local levels; community development strategy in terms of social development goals, child protection and development of social services; administrative, financial and infrastructural capacity of the community to provide social services, information about social service providers and their capabilities, etc.

- Determining the needs of the community in social services based on socio-demographic data on vulnerable groups and people in difficult life circumstances; information about social service providers and data on the provision of social services to their recipients (the number of actual and potential recipients of social services with the distribution of subgroups of recipients in need of different social services, results of assessment of family/individual needs in social services).

Needs were identified on both short-term/annual basis (in line with the Law of Ukraine “On Social Services”) and more comprehensively for three years to inform the mid-term targeted programming and budgeting process.

Representatives of various departments of the executive committee, educational institutions, health care, CSOs, etc., who work with families and children and possess information about vulnerable groups were included into this work. In larger municipalities (e.g. Mariupol), the identification of needs in social services was organized separately in each district of the city, with responsible groups set up in each city district.
Needs identification had to rely on multiple information sources. The members of the WG had to collect information from different sources. It so happened that some indicator data received from different agencies differed, and that some agencies were reluctant to reveal the real picture. In such cases information had to be cross-checked and carefully verified, including through experts’ involvement.

Availability of human capacity of municipalities to conduct needs assessment was essential. When identifying needs, most municipalities faced a shortage of social work specialists (e.g. newly created ones like Bakhmut or Bilokurakynye) and insufficient analytical capacity to process the collected information. This was also due to the fact that most municipalities never prioritized funding social service provision. Social work specialists were instrumental in helping with the collection and analysis of data on families with children in need of assistance. This deficit was compensated for by training, but also by extensive guidance and external expert support provided by the project, including sociologists and analysts. Due to extensive reliance on external support and staff turnover some municipalities do not yet feel themselves fit for repeating the needs assessment exercise on their own. At the same time, due to the advantages of involving external experts at a higher professional level and objectivity, tapping into outside assistance is being considered by the municipalities.

Added value of using qualitative data in needs assessment was confirmed by all partner municipalities. According to the formal procedure, the administrative data available in the community is the main method of determining needs. However, the administrative data provides only quantitative information that is already on the radar of the structural unit for social protection and other institutions, but does not reflect on potential recipients, unmet needs, existing barriers to accessing services in the community, etc. To address this shortcoming, the new procedure additionally suggests the use of sociological methods of information collection, such as surveys. However, partner municipalities still have limited capacities to conduct mid-term and annual needs assessments in line with the new legislative provisions. They either need to outsource the social service needs assessment or invest further in additional training of own staff.

Municipalities found it quite challenging to organize surveys on their own with respect to all principles of credibility and objectivity. Such surveys involved both service providers and beneficiaries and imply an ability to use sociologically solid approaches to sampling and inquiry (especially when participatory methods are applied, like FGD), efficient data processing, and neutrality of survey administrators for avoiding prejudice and pressure.

Lack of unified information systems at national and local levels seriously hinders the needs assessment process. This refers to information on the assessment of family needs, social benefits, services, etc.). There is no developed system of municipal statistics yet, including in the social domain. Moreover, some groups of children are frequently excluded from the data systems in Ukraine (like children with disabilities, children living in institutions, Roma children or child victims or witnesses of violence) and there are no official statistics of children living in the NGCA in Donetsk and Luhansk oblasts.

14 While social workers serve as simply care providers, social work specialists have the function of case-managers.
Another challenge is securing transparency and participatory review of results of assessment of needs of the population in social services with the community.

The approaches used by municipalities varied from simply publishing assessment results on the website, to open council sessions and public hearings. However, they were often limited to only presenting general results of assessment then searching for feedback, which is especially problematic on the background of community unawareness of their entitlements to access services, and of services that can be made available.

As a result of comprehensive needs assessment and establishing inter-agency cooperation across the partner municipalities:

- 12 partner municipalities conducted comprehensive assessments of the social needs of IDP and vulnerable host families with children
- All 12 municipalities are implementing inter-sectoral protocols among social services addressing IDP and vulnerable host families with children
- 284 social service providers (social, health, and education professionals) have developed capacities to design and implement protocols of cooperation

Stage 2: PLANNING AND BUDGETING SOCIAL SERVICES

Step: Translating needs assessment results into strategies and targeted programs

It was important to ensure continuity between needs assessment outcomes by the WG and strategic decision-making.

The partner municipalities kept the composition of the WG involved in developing the target program basically the same as the one working on needs assessment. Many recognize that the engagement of the finance unit was especially important for understanding the specifics of programs budgeting. Representatives of the structural units involved in socio-economic development and investment, along with lawyers, were instrumental for feeding results of assessments into elaborating proposals for municipal strategic plans (in most municipalities the social part of the earlier developed mid-term plans needed updating), and for ensuring the awareness and willingness of local council members (relevant thematic commissions) to advocate for and approve a more prominent place for social services in municipal strategic plans, programs and budget.

Relevance and feasibility of implementation of measures elaborated in a targeted social program depends on the level of involvement of all actors engaged in social services in a municipality.

This was ensured through requesting all interested structures (and in the first place social service providers) to make proposals to the target program based on needs assessment and their knowledge of the situation. Moreover, improvement of social services in most municipalities had structural and regulatory implications (e.g. establishment of new departments, set-up of social services/ rehabilitation centers or new structures within existing centers, introduction of new social workers, development of local level regulations for (re)organization of social institutions work, etc.) that had to be well-coordinated.
Quality of the targeted programs and their implementation progress depends on the quality of all program elements.
The partner municipalities learned to plan analytically and with the use of result-based principles. Although some recognize that the quality of their programs can be further improved, most programs have clearly defined goals that meet SMART criteria, are specific, measurable, agreed on by all parties involved in the implementation, set realistic measures and time frame, and indicate necessary resources. Good quality programs include a mix of quantitative and qualitative indicators related to costs, products, efficiency and quality of social services provision, as well as elaborating on monitoring measures.

Step: Ensuring link between targeted programs and funding

When allocating local budget expenditures, the question of priorities always arises, which implies a need to advocate effectively for social programs.
All municipalities have many competing priorities and it is the task of the WG to convince the municipal legislative and executive to pay adequate attention to funding targeted social programs. From project experience, the following criteria help to advocate for social programs: quantitative dimension of needs resulting from proper needs assessment; the urgency of the service (the need to implement the service in the community “here and now” capacity (infrastructure, personnel, financial) to ensure needed service delivery; potential impact of the service on strengthening the economic capacity of municipality, improve social cohesion and security.

Although requirements of state standards for the provision of services and guidelines for the calculation of social services are available, most partner municipalities find the calculation of services a challenging task.
A clear understanding of costs of social services is important for taking strategic decisions of service budgeting and provision in each municipality (which services to provide and how, which to purchase in neighboring municipalities and which to outsource), as well as for further services’ financial management (ordering and tendering social services; preparation of budget requests by public service providers/ budget users; public procurement of social services at the expense of budget funds).

Rigid sector-based public finance management system hinders application of an integrated approach to social services delivery.
The existing system does not allow for joint (inter-sectoral) budget programs and funding the integration of social, educational, medical and legal services, which is essential for a certain category of children and families. Also, in municipalities, each structural unit can finance only activities of its own institutions. The experience shows that this limitation requires attention; it is beyond the capacity of municipal authorities to solve and requires a national level solution.

Financial capacity of municipalities to provide social services had to be thoroughly assessed.
Such assessment included analysis of income and expenditure. Where the income was higher, municipalities could invest in social services development; where the difference between income and expenditure was small or close to zero, municipalities faced a need to either identify costs that could be reduced or plan other sources of funding. Most partner municipalities managed to increase social expenditure due to a general increase in revenues resulting from fiscal decentralization and a shift of priorities. However, their ability to maintain this commitment in the context of the Covid-19 impact on the budget is still to be seen.
Another important aspect taken into consideration during the analysis was the amount of funds spent on social protection per person in each municipality. This can serve as a basis for comparison with the costs of other services in a given municipality, or with social services in neighboring municipalities. Some municipalities had purchased certain social services through outsourcing to neighboring municipalities (e.g. Chmyrivka municipality purchased the service of rehabilitation for children with disabilities from neighboring Starobilsk municipality and some consultancy services from local branches of INGO “SOS Children’s Villages”).

Ability of most partner municipalities to invest own resources into improvement of social services (especially the infrastructural part) is very limited. There are very few available mechanisms of funding social services improvement from the national budget (such as subventions in education or health sectors). Besides, dependence of some municipalities on single revenue sources/ one flagship enterprise (e.g. electricity production station in Mykolayivka) makes their budget and ability to dedicate funds to the social sphere a subject to the economic activity of this enterprise. Potential additional sources of funding available to municipalities include: social entrepreneurship, funds of philanthropists and donors, involvement of CSOs, along with mobilization of international grants and technical assistance. Due to the conflict impact, the East of Ukraine has been enjoying the active attention of the international assistance community trying to ensure a “nexus” between provision of humanitarian aid and development type of assistance.

Securing adequate funding to social services development is more problematic in the municipalities along the division/ front line. Municipalities like Sartana have been established under the special military-civic administration appointed by the President of Ukraine rather than under the elected local self-government. The delayed appointment of the administration, together with multiple competing basic needs and the unpredictability of their public budget expenditure, have significantly influenced the dynamic of their cooperation and engagement into the project.

Step: Undertaking (re)structuring measures.

The process of needs assessment revealed a number of structural and institutional shortcomings in the partner municipalities, which implied a need to plan and budget some (re)structuring. Such shortcomings included: absence of an official structural unit for social protection in the structure of the executive; deficit of specialists, including social workers; low educational level and qualifications of employees in the social sphere; overload of social workers; ineffective personnel management, etc. Moreover, the newly formed municipalities (such as Mykolayevka or Bilokurakyn) completely lacked key structures and staff, and required considerable resources to create new services from scratch, while the municipalities that inherited district-level structures (Bakhmut, Belovodsk, Novopskov, Troitske) found it challenging to change the approach and working culture in those. The challenge is to overcome the historically determined unwillingness to interact.

Municipalities formed from scratch seem to be more receptive and inclined to embrace the integrated approach to social service provision. Municipalities that had social institutions prior to the communities amalgamation process and/or inherited social institutions were less open to restructuring ideas compared to those that were newly formed.
To meet all needs identified requires a considerable increase of social workers and their ability to reach out in rural areas.

Given that one social worker can support up to ten complex cases of vulnerable families / individuals simultaneously, the number of them needed to meet the needs of vulnerable families identified by the needs assessment had to be considerably increased. Along with case management they are expected to provide one-time social counseling, representation, mediation and other social services. Also, social workers with specific skills are needed to support families with children deprived of parental care. Along with needs, when forming the staff list, some municipalities had to take into account the remoteness of villages and mobility constraints of social workers (poor roads, lack of public transport, etc.). The outreach issue was addressed by creating remote work places for social workers (e.g. often with the idea to have one social worker based in each village administration unit – so called "starostat") or providing social workers with transportation means.

As a result of planning and budgeting:

- 10 municipalities upgraded their strategic development plans, in which the parts related to development of social protection, social services and the protection of children were better elaborated and were based on actual needs assessment
- 92 representatives from partner municipalities have developed capacities to plan community social services in response to the social needs of IDP and vulnerable host families with children
- 12 partner municipalities elaborated their targeted social programs addressing issues concerning services for IDP and vulnerable host families with children
- 10 municipalities managed to support implementation of their social programs with actual budget funding
- All partner municipalities have undergone basic (re)structuring, as a result of which 4 municipalities set up children’s services, 3 municipalities established children’s commissions under local council executive committees, 3 municipalities founded communal enterprises to provide services to vulnerable families with children. Additionally, 16 new positions of social work specialists in 7 communities, 6 new positions of psychologists, and 1 new position of deputy for social issues have been introduced
- All 12 municipalities have established social services centers reconstructed and equipped by UNICEF and staffed and funded by municipalities
- In one municipality a building was purchased with budget funds in order to organize a center for the provision of integrated social services
Partner municipalities report that case management is an effective social work tool for providing integrated services.

It is considered to be an effective instrument to ensure a complex approach to provision of social support to vulnerable families with children based on needs assessment and with full respect to human rights and human dignity.

The main principles of case management – complexity, interdisciplinary and interdepartmental interaction, cooperation of the specialist and the recipient of services, individual approach in work with the recipient of services and confidentiality.

Case management in partner municipalities was seen as a way of organizing the provision of social services, in which the appointed specialist (social worker, social manager) assesses the needs of the family / person, refers the family/ person to relevant service providers, plans to work with the case involving the necessary specialists and family members, organizes and coordinates the process of providing social services involved (members of the interdisciplinary teams set up for complex cases), monitors and evaluates the effectiveness of services provided, encourages/ empowers family/ individual, involves family members and the social environment in interaction and independence in the process of overcoming difficult life circumstances. The basis of the case is the orientation of each member of the interdisciplinary team to improve the situation in the family, with the aim to develop the potential of the recipient of services and activate the resources of the immediate environment and the community to overcome difficult life circumstances and restore its full functioning. The idea is not to solve problems of the person, but rather motivate him/her to change their behavior and improve their own state (social, psychological, economic, etc.).

Extensive training, targeting all key stakeholders was instrumental in making them believe that an integrated approach through case management to the provision of social services is optimal for the protection of children’s rights and the prevention of social orphanhood.

Ensuring a comprehensive solution to family problems and provision of social services based on case management technology may involve a wide range of services for improving family or individual well-being, including social benefits, educational services, health care, juvenile offending prevention, employment and others. Training and awareness-building that involves management along with specialists of all relevant structures is mentioned as crucial by partner municipalities for their further engagement. However, turnover of both management and staff in those structures calls for continued investments in capacity-building.
Step: Securing inter-agency cooperation and unified approaches

The implementation of a case management approach requires single coordination and management of all relevant services, and in a municipality requires local level regulation and modification of internal procedures and processes of involved agencies.

Complexity of service provision through case management is being ensured through the creation of inter-disciplinary teams and coordinated redirection of service recipients. The inter-agency cooperation in the process of case management in all partner municipalities was regulated through the Decree on Inter-Agency Interaction formally approved by municipal councils. The practice shows, however, that the Decree had more binding implications for social structures and institutions; their effective application in local health, education and security structures still needs further commitment of their management, awareness-building on the benefits of the integrated approach and adjustment of internal regulations, processes and protocols. The current advancement of inter-agency cooperation still relies to a large extent on inter-personal relations rather than an established system of rules and procedures.

Some existing structural limitations of institutions involved in social service provision but having different vertical subordination still need to be eliminated.

Reorganization of services at local level around the recipient requires flexibility of service providers. Some services can be provided on the basis of institutions subordinate to the structural units related to education, health, culture, etc. For instance, some integrated rehabilitation centers now have adequate premises, staff and equipment, but as health care structures they have no right to provide social support services to families with children with disabilities. Another example is when arrangements are made with centers for medical rehabilitation and palliative care to provide a temporary respite service for parents from families in difficult circumstances or with hospitals to provide refuge for domestic violence victims. These arrangements are temporary and not sustainable as those service providers are neither motivated nor paid adequately for these services. At the same time, in some cases the project managed to overcome these limitations: in Drujivka a social worker was hired by the rehabilitation center (a part of the health system) and began providing case-management services; in Mariupol case management and counseling is launched by Mariupol Inclusive and Resource Center (a part of the education system).

A single window approach is reported to be very efficient and supportive of effective case management and integrated service provision.

Municipalities that had multiple structures managed to switch to social service provision on the principle of a single window. In smaller municipalities, potentially inclusive education centers or social rehabilitation centers (that often have good premises and are well equipped) could carry out the “front-desk” function if full and efficient integration of the services is an ultimate goal.

Common information systems and performance indicators for all agencies involved is another important precondition for effective case management.

There is no common pool of information on the assessment of vulnerable family needs, their social benefits, services, nor on children with disabilities, children living in institutions, Roma children or child victims or witnesses of violence.
The Ukrainian network for children's rights demonstrated the value of cooperation between local self-governments and CSOs through the “Jointly” project, but establishing a functional longer-term partnership between public and non-governmental sectors for the provision of social services is the challenge that lies ahead.

The cooperation under the project managed to shift relation between CSOs and social institutions in partner municipalities from competition to collaboration. However, experiences where CSOs are formally involved in social service provision by municipalities through municipal programs and budget are limited to single cases (e.g. Chmyrivka.). Some CSOs find it difficult to compete with social structures in which expenses are subsidized by municipal budgets, although they acknowledge the prospects and need for further advancing the role of CSOs in the market of social services provision at the local level. There are very few credible studies of social and economic (cost-benefits) advantages of the CSOs engagement in the social domain in Ukraine.

**Step: Expanding services menu**

Case management has already proven to be an efficient and effective solution to addressing the needs of vulnerable families with children through the flexible provision of a combination of services.

Thus, the combination of services provided to families with children by partner municipalities was expanded to include: social work, day care centers, early intervention services, temporary assistance for needy families (e.g. family support services, parent training, counselling, etc.), for families with children with disabilities, or early intervention services for families with young children where early child developmental delays are being registered. The introduction of new services in all cases was also possible thanks to infrastructure improvements supported by the “Jointly” project (e.g. renovation and refurbishing of 12 social centers in 12 municipalities), as well as project investments in training staff.

In the framework of a case management, tasks and services are defined based on personal/ family needs assessment.

In the context of child protection these are usually related to: supporting the family/ individual to mobilize their own resources to solve their problems; develop sufficient parental potential to identify the child's needs and meet them; restore family functions to overcome difficult life circumstances or minimize the negative impact; develop parent and child competencies to ensure their successful functioning in society; provide other assistance in the process of overcoming difficult life circumstances.

**Step: Applying case management**

Case management has universal application and multiple advantages.

The advantages of applying case management, as reported by partner municipalities, include the following: inter-agency coordination and pooling of resources allowing to simplify decision-making and more efficient development of the recipient's ability to overcome difficult life circumstances; it allows compliance of services volume and intensity with the real needs of the recipient; due to its flexibility, case management can be used to work with different situations and families, including orphans and children deprived of parental care, IDPs, persons with disabilities, elderly people, people living with HIV, those released from prisons, victims of domestic violence, alcohol abusers and drug addicts, etc.
Systematic application of the case management approach requires training and supervision.
Initial training and supervision were provided in the framework of the “Jointly” project, but partner municipalities fear that they cannot yet draw on such support outside of the project. Training and retraining, and development of professional competencies of social managers and social workers is a mandate of Regional Centres for Social Work. Although representatives of these departments were involved in training provided by the project, they are not yet in a position to ensure such support to municipal social workers on their own.

Switching to provision of some social services in on-line mode requires better guidance and quality assurance.
Procedures and protocols for the provision of some social services (like social support - sotsialnoye soprovozdeniye) are not adjusted to on-line mode and their effective provision requires more active supervision and coaching.

The current planning and budgeting system does not yet support the application of case management technology.
Even within the social sector there is a poor link between social services provision, on one side, and social protection system and administrative services, on the other. Also, those social workers or managers who manage social cases cannot monitor the use of social subsidies by the beneficiary family.

As a result of introducing the case management approach:

- Increased awareness of the integrated approach and interface between key players, including through training of 284 social workforce and other sectors representatives
- Social needs of 15,111 beneficiaries from 12 partner municipalities were assessed
- 958 development plans were elaborated for IDP and vulnerable families in 12 partner municipalities
- Better/more frequent cases identification practice and quicker and better coordinated response reported by all 12 partner municipalities
Human Stories

Story of a displaced family getting out of difficult life circumstances

In 2016, Natalya, moved from Sverdlovsk (NGCA, Luhansk region) to Novopskov (GCA, Luhansk region) in search of a better life as, due to hostilities in her city at that time, there was no work and the young woman’s life had become very difficult. She had no relatives in Novopskov, was forced to rent a house and found it difficult to find a job. She later married and her husband, a private entrepreneur, joined her. In 2017 their boy was born, and the husband stopped working. With the birth of the child, the grandmother moved in with the couple and the costs of supporting her fell on them. The fact that the grandmother’s passport was marked as invalid complicated the situation.

The woman says: “Conflicts over lack of funds in the family were constant. With my mother-in-law we had a very different understanding regarding the life and upbringing of the baby. With my husband we had a relationship crisis and were on the verge of a divorce.”

In December 2019, the woman applied to the Center for Social Services and claimed for the child the status of a child affected by hostilities and armed conflicts.

When the needs assessment was conducted, it became clear that the family had difficult life circumstances and needed social support.

Following the needs assessment, a social worker, jointly with the family, drew up a plan with the needs of each family member addressed. All family members were also involved in the implementation of the plan.

The social worker explains: “The family was in difficult life circumstances due to poverty combined with the IDP status. Furthermore, the absence of their own housing and a permanent job explains the low parental potential (lack of a well-established family model and the distribution of roles in the family). Thus, the family needed a comprehensive social service – social support, including: explanatory work on the systematic care of the child; formation of skills of responsible parenting; consultation on improving family relations; explanatory work on budget planning and housekeeping; assistance in employment of able-bodied family members; and social integration of the child”.

Social assistance to the family led to positive outcomes. The father of the family was registered at the Novopskovsky district employment center, and received four months of unemployment benefits, after which he found stable official employment, which allows him to support the family. The grandmother obtained a new passport along with the IDP status and relevant financial assistance. The family members managed to improve emotional ties. Now the mother-in-law and the daughter-in-law jointly manage the family affairs. The family currently lives in a house where they pay for utilities and can purchase it in installments. The child is enrolled in and attending a kindergarten near the house.

16 In some stories the names of people were changed to protect confidentiality
The story of six siblings who returned from the street to their family

Dima, Kiril, Sergiy, Nadya, Lyuba and Vasyl were known in their community as “children living on the street”. They basically lived on the street and the boys were causing trouble until they were identified as potential beneficiaries of social services during the needs assessment. The children were placed with a foster family for six months.

According to the social worker, the mother could not care less about children. The mother worked as a cleaner in the cafeteria but lost her job several times. The family lived in a two-room barracks. The children had not been properly fed since the father died.

Dima, the youngest (four years old), could hardly speak as he was rarely spoken to; he just managed to use gestures for communicating his modest wishes. None of the siblings had gone to a kindergarten. At the time they came to the foster family, four of them had been enrolled into a school which they rarely attended. The children always looked dirty, had fleas and worn out clothes, and other children preferred to stay away from them.

As a result of the received assistance and the foster family support, the children learned various life skills, from basic personal hygiene to making friends at school.

They are now regularly attending school and the youngest, after three months of active socialization in the foster family and logopedic classes at the social rehabilitation center, has learned to express himself verbally and has enrolled at the kindergarten.

Elena, the foster parent says “The whole community took part in supporting the integration of children – from the school and social rehabilitation center that were important for education and socialization of children, to local authorities whose support was essential for various administrative issues, securing the children’s mother’s employment and subsidies for their free meals at school”.

The mother and her current partner were given an opportunity to upgrade their living conditions and rent a large flat. Now, after six months with the foster family, the children are reunited with their mother, though maintain close contacts with the foster parents who helped to integrate them into their community.
4. LESSONS AND WAYS FORWARD

4.1 GENERAL LESSONS LEARNED

The experience of the “Jointly” project has demonstrated several important lessons which can inform further work on promoting the integrated approach to social services delivery at both municipal and national levels in Ukraine, as well as highlight important success factors and preconditions for actors investing in social service provision improvements in the region of the former Soviet Union and Eastern Europe.

These lessons include:

1. Integrated service provision is an effective approach for meeting the needs of vulnerable children and their families. The decentralization and social sector reforms widen opportunities for its implementation. However, the application of its key principles of complexity, inter-disciplinarity and inter-departmental interaction, family/child-centered approach requires an adequate national and local regulatory environment, as well as political will, change of attitude and working culture at the local level.

2. For improving service quality and access, the importance of widening the services menu according to the social service needs assessment and capital investments in infrastructure improvement should not be underestimated.

3. Reorganization of social services has structural implications that need to be well understood, effectively planned, and budgeted by municipalities. The experience demonstrates that even small municipalities are capable of organizing social services effectively, despite a limited own resources base. Their stable political commitment, combined with capacity-building and external investments can help make it a success. However, positive gains are more difficult to secure in municipalities heavily affected by conflict, which have multiple competing priorities related to meeting essential humanitarian and basic development needs.

4. The quality of planning social services improvement and further plans implementation depends to a large extent on the quality of planning inputs, including awareness of real needs and data from different sources and service providers.

5. Working on the “supply” and “demand” side of the social services provision equilibrium is fundamental for improving services quality and access, whereby “supply” means the ability of local governments and service providers to manage and provide services in an integrated manner, and “demand” means communities’ and people’s awareness about services availability and their right and ability to draw on them when needed.

6. The CSOs emerge as important actors in advancing the integrated approach to social services to vulnerable children and their families, and their potential is growing to engage in actual service provision at the local level, although formally it remains underutilized.

7. On the background of growing positive experiences with reforming social service provision for vulnerable children and their families at the local level, there is a need for effective advocacy for an improved regulatory environment at the national level, informed by data and practices in the field.

8. Case-management is an effective tool for meeting the needs of vulnerable families with children. Continuum of service provision is a crucial factor for an effective community-based social services with all stages available including: early identification; assessment and registration; referral and service purchasing; provisions; case review; prevention.
4.2 RECOMMENDATIONS

Based on the experience and lessons generated by the “Jointly” project some recommendations can be provided to local and national stakeholders.

For municipalities and agencies supporting them at the local level the following can be recommended:

› Actively engage in reforming social services provision in line with the new Law of Ukraine on Social Services;
› Adopt local level regulations in support of the integrated approach and overcoming silos in the provision of services to vulnerable families;
› Invest in structural adjustments and infrastructure for improving quality and access to social services provision, including for a reach out to rural areas;
› Invest in capacity-building and human resources of all agencies involved in the service provision chain for their effective engagement and cooperation in all three steps: mid-term and annual needs assessment (including data management and the use of qualitative data); planning and budgeting of service provision; and actual provision of services through the case management approach;
› To advance the case management approach attention needs to be given to:
  - awareness-building on its value and advantages across all agencies involved, firstly targeting their management;
  - creation of inter-disciplinary teams and coordination of a referral system (including a single window approach);
  - adjustment of internal procedures and protocols;
  - common information system and performance indicators;
  - calculation of costs of services;
  - guidance and quality assurance in cases of on-line services provision during the pandemic.
› Pilot and suggest models of CSOs involvement in social service provision.

For ensuring a supportive national level environment the following can be recommended:

› Promote unified information and data systems, including guidance on developing municipal statistics;
› Eliminate structural limitations of institutions with vertical subordination involved in social service provision;
› Promote the integrated approach to planning and budgeting;
› Generate evidence on social and economic (cost-benefits) advantages of the integrated approach to social services provision, including the CSOs engagement;
› Promote the instrument of social order/ social contracting (sotsialniy zakaz) for more active involvement of CSOs into social service provision funded from the public budget;
› Improve the image, recognition and attractiveness of the social worker profession.