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Context Analysis of Existing Social Services in Samtskhe-Javakheti and Kvemo Kartli Using a Human Rights-Based Approach

07/2022



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Brief Overview

The context analysis document assessed the legal framework and current practices related to the planning, implementation, and reporting of social services in Samtskhe-Javakheti (in the municipalities of Akhaltsikhe and Ninotsminda) and Kvemo Kartli (Bolnisi, Gardabani, Dmanisi, Tetritskaro, Marneuli, and Tsalka municipalities) using a human rights-based approach (HRBA).

The analysis document is based on the legal and institutional framework of human rights, which is recognized and shared by the Government of Georgia as part of its international obligations. The responsibility for implementing this framework lies with both central and local governments. The document analysed the central government's delegated programs in the field of social services in local municipalities, with both local and central governments being represented as duty-bearers according to the HRBA. Additionally, the attitude of civil society organizations, the Office of the State Minister of Georgia on Reconciliation and Civic Equality, and the public defender towards these programs were examined, with civil society organizations being represented as a rights-holder group. The context analysis also involved the results of a focus group and three in-depth interviews with rights-holder and duty-bearer groups, as well as the findings of a quantitative study conducted with the population of the target municipalities.

The context analysis presents main findings on the problems faced by rights-holder groups at the local level in realizing their rights and provides relevant recommendations to duty-bearer groups to improve the enforcement mechanisms for these rights.

Methodology

The purpose of the context analysis was to examine the legal and existing practices related to the provision of social services at the national and local levels of the country (in Samtskhe-Javakheti and Kvemo Kartli), based on the five main principles of the Human Rights Based Approach (HRBA). As part of the context analysis, international, national, and local legal documents pertaining to the basic principles of human rights were reviewed. Additionally, a focus group was conducted in the target municipalities to gain a better understanding of the existing practices, and relevant conclusions and recommendations were prepared based on the findings.

Human Rights Based Approach (HRBA)

The human rights-based approach (HRBA) is a conceptual framework developed on the basis of international human rights law, which can be used in advocacy, litigation, and the development of targeted programs¹. The HRBA approach allows for the identification of obligations, inequalities, vulnerabilities, and discriminatory approaches within both legal framework and existing practices. The fundamental working principles of the HRBA are founded on various human rights standards and principles, including the United Nations Universal Declaration of Human Rights² (1948), the Convention for the Protection of Human Rights and Fundamental Freedoms³ (1950) and the Charter of Fundamental Rights of the European Union⁴ (2000).

HRBA considers two main sides when developing policies:

- **Rights-holders** - groups of people (particularly those in vulnerable situations), and civil organizations that defend their interests, who should be informed of their rights, provided with appropriate opportunities to claim these rights, and protected from all forms of violence and discrimination in accordance with universally recognized human rights.
- **Duty-bearers** - state institutions, both central and local, that have the responsibility to respect, protect, and ensure the universally recognized human rights of individuals.

The human rights-based approach is based on five main working principles collectively known as PANEL (Participation, Accountability, Non-discrimination and Equality, Empowerment, Legality).

¹European Commission, Applying the Human Rights Based Approach to international partnerships, Brussels, 30.6.2021 - https://international-partnerships.ec.europa.eu/system/files/2021-07/swd-2021-human-right-based-approach_en.pdf

² Universal Declaration of Human Rights, UN General Assembly, 1948 - <https://www.un.org/en/about-us/universal-declaration-of-human-rights>

³ Convention for the Protection of Human Rights and Fundamental Freedoms, Council of Europe, 1950 - https://www.echr.coe.int/documents/convention_eng.pdf

⁴ Charter of Fundamental Rights of the European Union, Council of Europe, 2000 - https://www.europarl.europa.eu/charter/pdf/text_en.pdf

- **Participation** - People have the right to participate in decision-making, when these decisions directly affect their rights and well-being and/or to involve others who can help them make such decisions. Participation should be active, independent, informed, and accessible, including access to information that is presented in a form and language understandable to the target groups.
- **Accountability** - refers to the effective monitoring of human rights standards and the use of effective mechanisms to prevent human rights violations.
- **Non-discrimination and Equality** - All forms of discrimination, including those based on age, gender identity, sexual orientation, ethnicity, health status, economic status, or any other grounds, must be prohibited. Particular attention should be given to people in vulnerable situations who face additional barriers to realising their rights.
- **Empowerment** - Individuals and communities should understand their rights, and be fully supported to participate in the development of policy and practices, which are directly related to claiming their rights.
- **Legality** – the universally recognized human rights should be harmoniously linked in to national and international human rights law.

Qualitative Research

Focus group:

As part of the context analysis, one focus group was conducted with representatives of human rights groups, members of local public organizations.

The focus group took place on an online platform (Zoom) and was attended by representatives from five civil organizations. Audio and video recordings were made of the discussion. Prior to the start of the meeting, participants were briefed on the purpose and objectives of the research.

In-depth interviews:

As part of the context analysis, two in-depth interviews were conducted with the responsible parties, and one in-depth interview was conducted with a civil organization representing the interests of the rights-holder groups.

Audio and video recordings were made of all the in-depth interviews. Prior to the start of each meeting, respondents were briefed on the purpose and objectives of the research.

The tools used in the qualitative research and the list of participating organizations is available in the appendix.

Chapter 1. Analysis of a human rights-based approach in the context of social services based on international, national, and local legislation and existing practice

1.1. Identification of groups in need of social services, rights-holders and duty-bearers

Introduction

Social support is defined in different ways by different authors, but the starting point for all of them is the answer to the question: what is the role of society or the government in protecting and maintaining the individual's socio-economic status, and health?

Social support refers to various types of support, be it material, socio-emotional or informational, provided by people, as well as institutions to help a person to cope with stress.

The social support is directed towards a person under stress and informs them that they are not alone. It conveys the message that they are thought of, loved, cared for, and that they are involved in a network of relationships and mutual obligations with those around them.⁵

Social support can come from any state or local self-government body, as well as from people with whom we have contact, such as family members, friends, and colleagues, etc.

Social support is a service designed to enhance the social functioning of vulnerable individuals and/or groups by creating favourable conditions that allow them to realize their potential and achieve social integration. Social services focus on providing individual and social opportunities that are necessary for the realization of rights and potential. Factors such as disability, old age, single parenthood, declining health, unemployment, displacement, etc. can increase the risk of vulnerability.

Social services have two main directions:

- Meeting basic needs;
- Supporting development and potential realization.

Services aimed at meeting basic needs include care, maintenance, food subsidies, one-time social support services, and provision of hygiene and sanitation, among others.

⁵გერიგი, ზიმბარდო (2009) ფსიქოლოგია და ცხოვრება. თსუ, თბილისი (Richard Gerrig, Philip Zimbardo (2009), Psychology and Life, Tbilisi State University (TSU), Tbilisi)

Services focused on promoting opportunities and realizing potential include employment promotion, education and vocational training, social housing provision, labour market integration, and more.

The necessity to address basic needs and capacities mentioned above is emphasized by research findings that highlight social and economic challenges faced by respondents. Through focus groups conducted with residents of target municipalities, the main social and economic problems identified were unemployment, poverty, rising prices of essential products (such as food and medicine), and increasing utility bills. The research indicated that unemployment is one of the most pressing issues, particularly among young people. Additionally, some representatives of ethnic minorities noted that they have fewer employment opportunities compared to Georgians due to a low level of social integration. Given these realities, it is crucial for municipalities to develop employment promotion programs. Respondents suggest that potential employers should be contacted and employment forums organized, with a focus on achieving tangible results rather than just a formal process.

During the focus groups, participants identified the main sources of income as: labour remuneration from public and private employment, state social assistance, and informal employment. Socially vulnerable individuals participating in the discussions mentioned that due to the current economic situation, they often resort to informal employment, even if it is only for one-time jobs. This decision is driven by the risk that official employment could result in losing their socially vulnerable status and being left without a small but stable income.

Quantitative research data indicates that the population in the target regions is **economically vulnerable**, as indicated by both subjective perception and objective indicators such as family income. In particular, the majority (up to 70%) of respondents in Samtskhe-Javakheti and every second respondent in Kvemo Kartli reported using their income only for basic needs like food and clothing (see Table #1).

Table #1

Now, I'm going to share some descriptions. Please tell me which one best fits your family's situation? (regional context)	Samtskhe-Javakheti (N=600)	Kvemo Kartli (N=600)
We have enough money for food	37.7%	19.5%
We have enough money for food, but need to save or borrow money to buy clothes and shoes	31.2%	28.4%
We have enough money for food, basic clothing and shoes, but need to save or borrow money to buy nice clothes, a mobile phone, a vacuum cleaner and other household appliances	19.3%	34.9%
We have enough money for food, basic clothing and shoes, but need to save or borrow money to buy a car or an apartment	10.2%	12.3%

Now, I'm going to share some descriptions. Please tell me which one best fits your family's situation? (regional context)	Samtskhe-Javakheti (N=600)	Kvemo Kartli (N=600)
We can buy anything we want at any moment	0.8%	1.4%
I prefer not to answer / I find it difficult to answer	0.8%	3.5%

As for specific incomes, considering that the average family size in the Samtskhe-Javakheti and Kvemo Kartli regions is around four members (according to National Statistics Office data) and the subsistence minimum for a family of this size is approximately 340 GEL per month, we can conclude, based on the mean family incomes (determined at 1070 GEL in Samtskhe-Javakheti and at 893 GEL in Kvemo Kartli), that the majority of families in these target regions earn above the subsistence minimum, although their incomes do not reach the average level of economic well-being.

The results of the quantitative survey also revealed that there is a higher proportion of employed people (45%) in the population of Samtskhe-Javakheti compared to those employed in the population of Kvemo Kartli (35%) (Including those self-employed). Accordingly, the proportion of unemployed people is higher in Kvemo Kartli (21%) compared to Samtskhe-Javakheti (16%) (See table #2). It is worth noting that these unemployment figures are close to the 2021 data from the National Statistics Office (25% in Kvemo Kartli and 15% in Samtskhe-Javakheti).

Table #2

Respondent's primary employment (main activities) (regional context)	Samtskhe-Javakheti (N=600)	Kvemo Kartli (N=600)
Public sector employee	18.5%	15.1%
Private sector employee	12.7%	5.4%
Self-employed (employer)	3.4%	1.9%
Self-employed (entrepreneur, farmer, professional practitioner)	10.8%	12.2%
Pensioner	18.4%	17.5%
Being on maternity leave	0.1%	-
Homemaker	14.6%	22.7%
Student	3.9%	1.6%
Currently unemployed	15.6%	18.8%
Has never worked	0.6%	1.9%
Other	1.4%	-
I prefer not to answer	-	3%

Article 5 of the Georgian Constitution declares that Georgia is a social state that prioritizes promoting social justice, equality, and solidarity in society.⁶

Human Rights-Based Approach (HRBA) recognizes universal human rights and integrates them with a country's sustainable development goals and priorities. In line with HRBA principles, when identifying rights-holder and duty-bearer groups in the context of social

⁶ Constitution of Georgia, Article 5 <https://matsne.gov.ge/en/document/view/30346?publication=36>

services, attention should be given not only to existing legislation defining relevant groups but also to current case management practices.

Rights-Holders

Based on the principles of the human rights-based approach and the legal framework of Georgia, the **rights-holder groups** who are related to receiving social assistance and are vulnerable, along with **civil organizations** that promote their interests have been identified.

Rights-holder groups: (generally, this group includes people, the civil sector, however, due to the interests of the research, the emphasis is placed on people in vulnerable situations).

According to Article 2 of the Law of Georgia "On Social Assistance", the recipients of social assistance from the state are defined as persons permanently residing in Georgia on a legal basis - **persons in need of special care, poor families and homeless persons.**

1. The law defines the following vulnerable groups as **persons in need of special care as follows:**

1.1. orphans and children without parental care;

1.2. Persons with disabilities - a person who has been granted this status in accordance with the Law of Georgia "On Medical-Social Expertise";

1.3. Persons of full legal age with limited capabilities and without family care;

1.4. Persons without breadwinner - children of one or both deceased parents under the age of 18;

1.5. A street child – a minor living and/or working in the street, who has been identified as such by an authorized social worker, in accordance with the referral procedures of child protection.

2. A deprived (socially disadvantaged) family – a person or group of persons permanently residing in a separate place of residence, who lead joint household activities, and whose social and economic conditions are below the level determined by the Government of Georgia.

3. A homeless person – a person with no specific and permanent place of residence, and registered as homeless by a local self-government body. In line with Article 11 of the Georgian Constitution and the Law on the Elimination of All Forms of Discrimination, these vulnerable groups are also rights-holder groups.

4. Children - minors under 18, deemed a particularly vulnerable group within human rights protection. This group warrants special state care. Child welfare is regulated by the Georgian Constitution, the Convention on Children's Rights, and other internationally recognized legal acts.

5. Women - within the realm of human rights protection, women constitute a vulnerable group facing systematic discrimination and violence.

6. National minorities - The Council of Europe gives special consideration to national minorities in the scope of human rights protection. Since 2006, Georgia has adopted the "Framework Convention on the Protection of National Minorities". National minorities in Georgia are represented by religious and ethnic minorities.

6.1. **Religious minorities** - constituents of the Georgian population not affiliated with the Georgian Orthodox Church, such as followers of Islam (10.7%) and the Armenian Apostolic Church (2.9%)⁷.

6.2. **Ethnic minorities** - The largest ethnic minority communities in Georgia include Azerbaijanis (6.3%) and Armenians (4.5%). These groups predominantly reside in the Kvemo Kartli and Samtskhe-Javakheti regions, where they constitute the majority of the population. For instance, Armenians make up 50.5% of the population in Samtskhe-Javakheti, while 83.7% of the Marneuli municipality (Kvemo Kartli) is Azerbaijani. Overall, Azerbaijanis constitute 41.7% of the Kvemo Kartli region's population.⁸

At the same time, based on the in-depth interviews conducted as part of the baseline study on social services in Samtskhe-Javakheti and Kvemo Kartli⁹, the local self-government and the civil sector, considering the unique characteristics and existing practices of the region, identified the following rights-holder groups:

7. Eco-migrants - individuals affected by natural disasters, who are forced to leave their permanent place of residence¹⁰.

8. Elderly persons - according to the "Law of Georgia on State Pension" (2005), pension recipients who have reached 65 years (for men) or 60 years (for women)¹¹.

9. Internally Displaced Persons (IDPs) - individuals with unique needs due to forced displacement¹².

10. Multi-child parent – persons who have four or more biological and/or adopted children under 18 years of age¹³, and have an established status of multi-child parent¹⁴.

⁷ National Statistics Office of Georgia, "2014 General Population Census in Georgia"

⁸ National Statistics Office of Georgia, "2014 General Population Census in Georgia"

⁹ See the Report of the "Baseline Study"

¹⁰ Order N779 of November 13, 2013 of the Minister of Internally Displaced Persons from the Occupied Territories, Accommodation, and Refugees of Georgia "On Approving the Resettlement Criteria for Families Affected by Natural Events and Subject to Displacement and the Establishment of a Resettlement Regulatory Commission"

¹¹ Law of Georgia On State Pensions, 2005

¹² Law on Internally Displaced Persons from the Occupied Territories of Georgia, 2014

¹³ Civil code of Georgia, Article 1191², 1997

¹⁴ Ordinance of the Government of Georgia N517 "On determining the rules and conditions of social protection for parents with multiple children", 2018

11. A single parent – a person having the status of single mother or single father¹⁵, who has a child born out of wedlock under the age of 18, if no record of the other parent of the child has been entered into the birth record of the child. This also includes persons who adopted a child under the age of 18 while not in a registered marriage¹⁶.

12. Veterans - This includes World War II veterans and those granted equivalent status, veterans of combat operations carried out in foreign territories and their equivalents, veterans who fought for the territorial integrity, freedom, and independence of Georgia and their equivalents, and veterans of the defence forces¹⁷.

13. Groups in need of healthcare - those with chronic and congenital illnesses, oncological issues, disabilities, the elderly, and others.

14. A person having a status of a victim of domestic violence - a person whose constitutional rights and freedoms have been violated by way of negligence and/or physical, psychological, economic, and sexual violence, or coercion.¹⁸

15. Student - an individual enrolled in a higher educational institution pursuing an undergraduate, master's, graduate specialist, or doctoral degree.¹⁹

Beyond the rights-holder groups, civil society organizations advocating for these groups' interests, operating in the target regions, have been identified and participated in focus groups and/or in-depth interview processes.

According to the portal www.csogeorgia.org, there are 85 civil society organizations officially registered in Kvemo Kartli, and 84 in Samtskhe-Javakheti, each operating in diverse areas. Based on the portal, the sectors aimed at supporting vulnerable individuals were identified. Presented below is a table outlining the names of the organizations, their count, field of activity, and operational area (municipality). As indicated by the portal, an organization may operate in multiple sectors. The number of active organizations listed in the table by fields of activity doesn't represent unique organizations, as some might be listed under multiple fields (see table #3).

According to the table, organizations focusing on issues related to youth and children, as well as self-governance and community development, are present across all six target-municipalities of Kvemo Kartli. As per the portal, only four organizations dedicated to social issues have been identified across three target-municipalities (Tsalka, Gardabani, and

¹⁵ Civil code of Georgia, Article 1191¹, 1997

¹⁶ Order of Minister of Justice of Georgia from June 16, 2015, N 79/N01-18/5 "On Approving the Procedure for Determining the Status of a Single Parent and Processing Relevant Individual Data"

¹⁷ Law of Georgia on Veterans of War and Defence Forces, 1995

¹⁸ Law of Georgia on Elimination of Violence against Women and/or Domestic Violence, and Protection and Support of Victims of such Violence, 2017

¹⁹ Law of Georgia on Higher Education, 2004

Bolnisi), whereas no organizations devoted to healthcare issues exist in any municipality. In the two target-municipalities of Samtskhe-Javakheti, Akhaltsikhe is home to significantly more active organizations (33) compared to Ninotsminda (4). Notably, in Ninotsminda, no organizations have been identified that work on the issues of refugees and IDPs, self-governance and community development, or social and healthcare issues (see table #3).

Table #3

Region	Municipality	Field	Number of organizations	Organization Name
Kvemo Kartli	Gardabani	Human rights	2	1. Union of Young Azeris of Georgia 2. Kasumlo (Qasimli) Youth Centre
	Marneuli			
Kvemo Kartli	Tetritskaro	Youth and children	36	1. Tetritskaro Youth Centre 2. Georgian Civil Society Association
	Tsalka			1. Legal Society for Tolerant Goals (LS4TG) 2. Educational Centre "Gumbati"
	Gardabani			1. The Civil Organizations "New Initiative in Kvemo Kartli" 2. Vakhtangisi Solidarity Centre 3. Vector 4. Nazarlo Community Centre 5. Georgia Red Cross Society
	Dmanisi			1. Association Lore 2. Save the Culture, Youth Club 3. Organization "Dmanisi" 4. Organization "The First European" 5. Organization "Successful Woman - Strong Society"
	Marneuli			1. Algeti Community Centre 2. Youth Development Centre 3. Education and Development Centre 4. Democratic Union "Dove" 5. Network of Centres for Civic Engagement 6. Marneuli Youth Centre 7. Molaoghli Community Centre 8. The Azeri Women's Union of Georgia 9. Union of Young Azeris of Georgia 10. Organization "Tolerance" 11. Khuldara Community Centre
	Bolnisi			1. Youth Vision Caucasus 2. Bolnisi Language House 3. Bolnisi Adult Education Centre 4. Organization "Mothers" 5. Georgia Red Cross Society 6. Kvemo Kartli Public Information Centre 7. Kvemo Kartli Women's organization of "Unity"

Region	Municipality	Field	Number of organizations	Organization Name
				8. Kvemo Kartli Women's Association "Women's World" 9. Organization "Opportunities Without Boundaries"
Kvemo Kartli	Tetritskaro	Gender	18	1. Tetritskaro Youth Centre
	Dmanisi			1. Save the Culture, Youth Club 2. Organization "Successful woman - strong society"
	Tsalka			1. Tsalka "Women's Room"
	Marneuli			1. Youth Development Centre 2. Education and Development Centre 3. Democratic Union "Dove" 4. Marneuli Youth Centre 5. Marneuli Women's Democratic Society 6. The Azeri Women's Union of Georgia 7. Union of Young Azeris of Georgia 8. Anti-violence network of Georgia 9. Khuldara Community Centre
	Bolnisi			1. Association "Women's Council of Disveli" 2. Bolnisi Language House 3. Studs Terkel Women's Union of Georgia 4. Kvemo Kartli Women's Association "Women's World" 5. Kvemo Kartli Women's Organization "Unity"
Kvemo Kartli	Tetritskaro	Refugees and displaced persons	3	1. Koda Community Education Centre
	Gardabani			1. Lelashkha Construction
	Marneuli			1. Shaumiani Community Education Centre
Kvemo Kartli	Tetritskaro	Environment	12	1. Tetritskaro Youth Centre 2. Community fund Kodori 2013 3. Civil Society Association of Georgia
	Dmanisi			1. Association Lore 2. Organization "Dmanisi"
	Tsalka			1. Tsalka Local Action Group (LAG)
	Marneuli			1. Democratic Union "Dove" 2. Marneuli Youth Centre

Region	Municipality	Field	Number of organizations	Organization Name
	Bolnisi			1. Association "Women's Council of Disveli" 2. Community organization "Karimera" 3. Kvemo Kartli Public Information Centre 4. Kvemo Kartli Women's Organization "Unity"
Kvemo Kartli	Tsalka	Self-government and community development	33	1. Organization "New Gumbati" 2. Berta 2013 3. Educational Centre "Gumbati" 4. Organization "Sakdrioni" 5. Tsalka "Women's Room"
	Gardabani			1. Organization "New initiatives in Kvemo Kartli" 2. Organization "Gamarjveba" 3. Organization "Garejeli" 4. Vector 5. Organization "Imedi Krtsanisi" 6. Organization "Friendship " 7. Georgia Red Cross Society
	Dmanisi			1. Save the Culture, Youth Club 2. Organization "Dmanisi" 3. Organization "The First European"
	Tetritskaro			1. Tetritskaro Local Action Group (LAG) 2. Organization " Iraga 2013 " 3. Civil Society Association of Georgia
	Marneuli			1. Agmamaghlo Community centre 2. Education and Development Centre 3. Democratic Union "Dove" 4. Network of Centres for Civic Engagement 5. Marneuli Women's Democratic Society 6. Molaoghli Community Centre 7. The Azeri Women's Union of Georgia 8. Kvemo Kartli Development Institute 9. Khuldara Community Centre
	Bolnisi			1. Youth Vision Caucasus 2. Bolnisi Language House 3. Georgia Red Cross Association 4. Studs Terkel Women's Union of Georgia 5. Kvemo Kartli Women's Association "Women's World" 6. Kvemo Kartli Women's Organization "Unity"
Kvemo Kartli	Tsalka	Social issues	4	1. Tsalka Local Action Group (LAG)
	Gardabani			1. Georgia Red Cross Society
	Bolnisi			1. Georgia Red Cross Society 2. Organization "Opportunities without boundaries"

Region	Municipality	Field	Number of organizations	Organization Name
Kvemo Kartli		Healthcare	0	
Samtskh e- Javakheti	Akhaltzikhe	Human rights	12	1. Youth for Javakheti Development 2. Akhaltsikhe Youth Center 3. Union of Democrat Meskhs 4. Union Green Cross 5. Transparency International - Georgia (TI) 6. Association of Civil Initiatives 7. Center promoting the formation of civil society 8. Samtskhe-Javakheti Regional Association " Tolerant" 9. Organization "Women's Hope" 10. National Anti-Violence Centre
	Ninotsminda			1. Organization "Charter of Peace" 2. Samtskhe-Javakheti Consumers' Union
Samtskh e- Javakheti	Akhaltzikhe	Youth and children	12	1. Organization "Youth for Javakheti Development" 2. Akhaltsikhe Youth Centre 3. Akhaltsikhe Adult Education Centre 4. Organization "Union of Democrat Meskhs " 5. Network of Centres for Civic Engagement 6. Union "Future" 7. Association "Green House" 8. Samtskhe-Javakheti Regional Association " Tolerant " 9. Georgian Business Development Centre 10. Organization "Progress"
	Ninotsminda			1. Ninotsminda Youth Center 2. Women's Organization - Union "Paros"
Samtskh e- Javakheti	Akhaltzikhe	Gender	6	1. Association of Civil Initiatives 2. Samtskhe - Javakheti Women's Democratic Society 3. Samtskhe-Javakheti Regional Environmental Union "Ekodakha" 4. National anti-violence network 5. Organization "Progress"
	Ninotsminda			1. Women's Organization - Union "Paros"

Region	Municipality	Field	Number of organizations	Organization Name
Samtskh e- Javakheti	Akhaltzikhe	Refugees and displaced persons	2	1. Samtskhe-Javakheti Regional Association " Tolerant "
	Ninotsminda			2. United Nations Humanitarian Union Association "Katharsis"
Samtskh e- Javakheti	Akhaltzikhe	Environment	7	1. Association of biological farmers "Elkana"
				2. Union for the promotion of environmental protection and sustainable development
	Ninotsminda			3. Union "World"
				4. Akhaltsikhe Centre for Public Development
				5. Association of Civil Initiatives
				6. Samtskhe-Javakheti Regional Environmental Union "Ekodakha"
				1. Women's Organization - Union "Paros"
Samtskh e- Javakheti	Akhaltzikhe	Self-government and community development	15	1. Akhaltsikhe Adult Education Center
				2. Organization "Background"
	Ninotsminda			3. Union of Democrat Meskhs
				4. Network of Centres for Civic Engagement
				5. Organization "Ivlita 21 "
				6. Union "Tkemlana"
				7. Union "World"
				8. Regional Development Association
				9. Akhaltsikhe Public Development Centre
				10. Community Union "Abatkhevi"
				11. Community Union "Hope 2009"
				12. Community Union "Tskruti's Hope"
				13. Community organization "Argo"
				14. Community organization "Heart of the Sun"
				15. Centre for the promotion of formation of civil society
Samtskh e- Javakheti	Akhaltzikhe	Social issues	5	1. Green House Association
				2. International Humanitarian Union Association "Katharsis"
	Ninotsminda			3. Community Union "Kruti Imedi"
				4. "Together we can do it" charity fund
				5. "Talita Kumi " organization

Region	Municipality	Field	Number of organizations	Organization Name
Samtskh e- Javakheti	Akhaltzikhe	Healthcare	5	1. Association "Green House" 2. The International Humanitarian Union Catharsis 3. Samtskhe-Javakheti Women's Democratic Society 4. Organization "Talita Kum" 5. Organization "Progress"
	Ninotsminda			

In the quantitative component of the baseline study conducted under the project's framework, the vast majority of respondents (94%) lack information about civil organizations in their municipality (91% in Samtskhe-Javakheti and 96% in Kvemo Kartli). This finding is corroborated by the results from the focus groups. Residents of Kvemo Kartli have heard about organizations advocating for women's rights, as early marriage of women is a prevalent issue in the region. Respondents primarily have information about organizations that provide material support to needy families, offer Georgian language courses, legal services, etc., to ethnic minorities.

The survey revealed that respondents who were informed about these organizations did not utilize any services offered by civil society organizations in the past year, primarily due to a lack of need for such services. On the other hand, it was found that the informed respondents mostly utilize social services, although it's notable that the respondents from Kvemo Kartli did not have such experience (see table #4).

Table #4

Which services provided by civil society organizations have you benefitted from during the past one year? (regional context)	Samtskhe-Javakheti (N=53)	Kvemo Kartli (N=18)
Social services	25.5%	-
Health services	1.7%	-
Projects aimed at integrating persons with disabilities	3.1%	-
Projects aimed at integrating ethnic minority representatives	1.7%	5.4%
Projects aimed at engaging the elderly in socio-cultural activities	-	5.4%
Projects aimed at empowering women	-	10.9%
I have not benefitted from any services	57.7%	74.4%
I prefer not to answer / I find it difficult to answer	10.3%	3.8%

Considering that those informed about the civil society organizations acknowledge the alignment between the activities of these organizations and the demands/needs of the citizens, they are largely satisfied (73%) with the work of these organizations within their municipality (89% in Samtskhe-Javakheti and 58% in Kvemo Kartli) (see Table #5).

Table #5

In general, how satisfied are you with the work of civil society organizations in your municipality? (Regional context)	Samtskhe-Javakheti (N=53)	Kvemo Kartli (N=18)
Very dissatisfied	1.4%	6%
More dissatisfied than satisfied	-	6.7%
Equally satisfied and dissatisfied	8.8%	57.9%
More satisfied than dissatisfied	51.4%	18.7%
Very satisfied	36.8%	10.7%
I prefer not to answer / I find it difficult to answer	1.7%	

Participants from the focus groups, comprising residents of the target municipalities, generally view the activities of civil society organizations positively. However, representatives of ethnic minorities have pointed out certain negatives, noting a lack of trust in some organizations due to perceptions that they view the Azeri community, based on its religious identity, as "backward". Additionally, some respondents mentioned that a portion of the population perceives civil society organizations as opposing the government, which discourages them from collaborating with these organizations. According to the focus group participants, public organizations should primarily aim to address the problems of the local population. They emphasized the importance of these organizations enhancing their work with municipal mayors and councils, offering them innovative ideas and solutions to overcome existing challenges.

As part of the context analysis, a focus group was conducted with the organizations listed below:

Tolerance and Diversity Institute (TDI), working with ethnic and religious minorities, as well as migrants. The organization conducts educational activities, researches and analyses state policy concerning minority protection.

Democracy Research Institute, focusing on the protection of human rights. It carries out educational activities, elaborates policy documents, advocates for human rights protection, and monitors elections at all levels.

Young Lawyers Association, working on all aspects of human rights protection. It is involved in educational activities, has experience conducting court proceedings both in Georgia and internationally, monitors elections at all levels, and elaborates policy documents as well as alternative reports.

SAPARI, working on issues related to human rights, violence, and discrimination, with a special focus on women and children among ethnic minorities in target regions. Its activities involve education and advocacy, including the practice of court proceedings.

Social Justice Centre, left-wing organization, operating in the realms of human rights and social justice, addressing issues of social policy, equality, justice, and democracy.

Accessible Environment for All, working on issues related to the rights of persons with disabilities. It is engaged in educational and advocacy activities.

Duty bearers

Within the scope of the current analysis, the following duty bearer parties/institutional structures have been identified:

Central level structures:

Central level structures:

The Government of Georgia is the supreme body of executive power that implements the domestic and foreign policies of the country. The government is held accountable to the Parliament of Georgia.²⁰

Interagency Human Rights Council – This institution, established by the Government of Georgia, is tasked with implementing and developing a unified state policy, an action plan, and overseeing the coordination of its execution in the area of human rights protection.²¹

Parliament of Georgia is the supreme representative body of the country that exercises legislative power, defines the main directions of the country's domestic and foreign policies, and controls the activities of the Government of Georgia within the scope established by the Constitution of Georgia.

The Human Rights Protection and Civil Integration Committee of the Parliament of Georgia prepares legislative projects within its competences, promotes the implementation of decisions made by the Parliament of Georgia, monitors other bodies accountable to the Government of Georgia and the Parliament. Within its competence, the committee participates in determining the main directions of health, social protection, labour and employment policies. Also, the aim of the committee is to promote the solution of the issues of population health, social protection, labour employment, protection of mothers and children, family development, elderly, displaced persons, veterans and disabled persons.

The Healthcare and Social Issues Committee of the Parliament of Georgia is responsible for preparing legislative projects within its remit. It promotes the implementation of the Parliament of Georgia's decisions and oversees bodies accountable to both the Government of Georgia and the Parliament.

²⁰ The Law of Georgia on the Structure, Powers and Rules of Operation of the Government of Georgia, 2004

²¹ Ordinance of the Government of Georgia N551, December 13, 2016 – On Establishing an Interagency Human Rights Council and Approving its Statute

The Environmental Protection and Natural Resources Committee of the Parliament of Georgia - Within its scope of authority, the committee is responsible for the preliminary preparation of legislative issues. It facilitates the implementation of the Parliament's decisions and supervises other bodies accountable to the Government of Georgia and the Parliament. The committee primarily operates in the field of environmental protection and natural resource management.

The Permanent Parliamentary Council for Gender Equality - contributes to the determination of the main directions of the state policy in the field of gender, promotion of the creation and development of the legislative base, discussion and approval of the relevant strategy, control of the activities of the bodies accountable to the Parliament of Georgia on the issue of gender equality, raising awareness of gender equality and measures supporting women's empowerment to conduct.

The Regional Policy and Self-Government Committee of the Parliament of Georgia - within the scope of its competence, studies the needs of municipalities, prepares relevant bills and conclusions, and submits them to the Parliament for consideration. It also oversees the implementation of normative acts adopted by the Parliament, analyses judicial practice, and ensures elimination of relevant legislative gaps. The committee is empowered to appoint thematic study groups to study specific issues.

Ministry of Internally Displaced persons from the Occupied Territories, Labour, Health and Social Affairs of Georgia is an executive government institution, which governs and formulates state policy in the fields of labour, health, and social protection of internally displaced persons (IDPs) from the occupied territories.²²

The Agency for State Care and Assistance for the (Statutory) Victims of Human Trafficking is a Legal Entity of Public Law (LEPL), subject to the state control of the Ministry of Internally Displaced Persons from the Occupied Territories, Labour, Health and Social Affairs of Georgia. The agency's goals are: is to promote the implementation of state policy for the protection and assistance of victims of human trafficking and violence against women. It ensures the functions of central and local care-giving bodies and oversees the state policy of guardianship, care, support, adoption, and foster care. The agency focuses on creating decent living conditions for persons with disabilities, older persons and children without parental care.²³

The Office of the State Minister of Georgia for Reconciliation and Civic Equality - the scope of the office's activities includes addressing issues related to the reintegration of conflict-affected regions within Georgia's territory. Additionally, the office is tasked with

²² Ordinance of the Government of Georgia N473, September 14, 2018 "On Approval of the Regulations of the Ministry of Labour, Health and Social Protection for IDPs from the Occupied Territories of Georgia".

²³ Ordinance of the Government of Georgia N58, January 29, 2020 "On approval of the statute of the public law legal entity - the Agency for State Care and Assistance for the (Statutory) Victims of Human Trafficking".

resolving, preventing, and facilitating the resolution of conflicts arising on religious, ethnic, political, or other bases within these regions.²⁴

The public Defender's Office of Georgia - In order to provide state guarantees for protecting human rights and freedoms, the Public Defender of Georgia shall monitor to determine that state and local self-government authorities, public institutions and officials protect and respect the rights and freedoms recognised by the State for every person in the territory of Georgia and under its jurisdiction, irrespective of race, skin colour, sex, language, religion, political or other opinions, national, ethnic and social affiliation, origin, property and social status, place of residence or other characteristics.²⁵

Local level structures:

Local self-government of Georgia – is the right and ability of citizens of Georgia, based on the legislation of Georgia, in accordance with the interests of local population, to solve issues of local importance.²⁶ The municipalities of Akhaltsikhe, Ninotsminda, Bolnisi, Gardabani, Dmanisi, Tetritskaro, Marneuli and Tsalka are discussed within the context analysis.

1.2. Georgia's obligations towards rights-bearing groups in the international context

Georgia's obligations in relation to human rights are primarily determined by the Constitution of Georgia. According to this constitution, international agreements carry greater normative value than any other legal act.²⁷ As a result, international human rights treaties ratified in Georgia have direct application.

In terms of human rights protection, Georgia is a signatory to the following key international conventions:

- [Universal Declaration of Human Rights of 1948](#) (in relation to Georgia, in force since January 15, 1998);
- [European Convention for the Protection of Human Rights and Fundamental Freedoms of November 4, 1950](#) (in relation to Georgia, in force since April 27, 1999);
- [International Covenant on Civil and Political Rights of December 16, 1966](#) (in relation to Georgia, in force since August 3, 1994);
- [December 16, 1966 economic, social and International Covenant on Cultural Rights](#) (in relation to Georgia, in force since August 3, 1994);
- [1966 International Convention on the Elimination of All Forms of Racial Discrimination](#) (in relation to Georgia, in force since July 2, 1999);

²⁴ Ordinance of the Government of Georgia N23, February 8, 2008 “on the establishment of the office of the State Minister of Georgia for reintegration issues and approval of the statute”.

²⁵ [Organic Law of Georgia on the Public Defender of Georgia, Article 3, 1996](#)

²⁶ [Organic Law of Georgia Local Self-Government Code, Article 2, 2014](#)

²⁷ Article 4 (5) of the Constitution of Georgia; Organic law of Georgia on normative acts.

- [Convention on the Elimination of All Forms of Discrimination against Women](#), of December 18, 1979. In relation to Georgia, valid since November 25, 1994);
- [Convention on the Status of Refugees of July 28, 1951](#) (in relation to Georgia, in force since November 7, 1999);
- [European Social Charter of 1961](#) (in relation to Georgia, valid since October 1, 2005);
- [Convention on the Elimination of All Forms of Discrimination against Women of December 18, 1979](#) (in relation to Georgia, in force since September 22, 1994);
- [1984 Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment](#) (in relation to Georgia, in force since November 25, 1994)
- [1989 Convention on the Rights of the Child](#) (in relation to Georgia, in force since July 2, 1994);
- [Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict, 2000](#) (in relation to Georgia, in force since September 3, 2010);
- [Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography, 2000](#) (in relation to Georgia, valid from July 28, 2005);
- [Framework Convention on the Protection of National Minorities of February 1, 1995](#) (in relation to Georgia, valid since 2006);
- [Beijing Declaration and Action Platform of 1995](#), which refers to the topic of equality and the issue of increasing women's rights (in relation to Georgia, valid since 2000);
- [2007 Convention on the Rights of Persons with Disabilities](#) (in relation to Georgia, valid since 2014) ;
- [Convention on the Prevention and Suppression of Violence against Women and Domestic Violence of May 11, 2011](#) (in relation to Georgia, in force since September 1, 2017).

The primary responsibility for implementing the aforementioned international obligations lies with the central government. This is manifested in the refinement of the relevant policy and legal framework. Within the responsibility of local self-government, there exist several directions, which will be elaborated upon in the following chapter.

1.3. Georgia's National Legislative Framework Pertaining to Rights-holder groups

Chapter Two of the Georgian Constitution is dedicated to fundamental human rights and the obligations of state bodies, including local authorities, in the enforcement of these rights.

Although the implementation of obligations derived from the signing of international agreements primarily falls under the purview of the central government, local governments also shoulder the responsibility for respecting, promoting, and enforcing universally recognized human rights, since local government bodies represent official public agencies performing state functions.

In 2014, the Parliament of Georgia approved *The National Strategy for the Protection of Human Rights in Georgia for 2014-2020* (hereinafter referred to as the "National Human Rights Strategy "). This National Human Rights Strategy is enacted through an action plan. As part of the research, the Human Rights Action Plan for 2018-2020 and the priority areas relating to local self-government authorities outlined in this plan were used. It should be

noted that on September 5, 2022, the Parliament of Georgia approved *The National Strategy for the Protection of Human Rights in Georgia for 2022-2023*.

Below are listed only those identified areas that intersect with the responsibilities of local self-government bodies:²⁸

- Gender equality and women's empowerment;
- Children's rights;
- Rights of national/ethnic minorities and promotion of their integration;
- Rights of persons with disabilities;
- Rights of displaced persons.

In addition, beyond what is mandated by the Local Self-Government Code, local government bodies have specific obligations, the fulfilment of which is guided by various laws of Georgia. For instance, the 2014 Law of Georgia "On the Elimination of All Forms of Discrimination" is applicable to all public agencies in Georgia.

Women

In 2010, Georgia adopted a special law "On Gender Equality." According to Article 13 of the Law, municipalities are obliged to:

- Establish Municipal Gender Equality Councils at the local level.
- Designate a public servant responsible for gender-related issues and coordinate appropriate measures within the municipality.
- Carry out activities in a manner that identifies and eliminates any form of discrimination.
- Eliminate gender-based discrimination in budgets.

Children

In 2019, the Code on the Rights of the Child was adopted, encompassing numerous aspects pertaining to child welfare and development. The Code stipulates a broad array of obligations for local authorities, with the following being of particular significance:

- The obligation to establish municipal child protection and support services;
- The responsibility to develop and implement programs in social, healthcare, education, social inclusion, and other areas within its jurisdiction or delegated powers.

Persons with disabilities

In 2020, Georgia adopted the Law "On Persons with Disabilities", and in 2021, the Georgian Parliament ratified the Optional Protocol of the UN Convention on the Rights of Persons with

²⁸ The National Human Rights Strategy and Action Plan of Georgia are available on the website of the Secretariat of Human Rights: [http://myrights.gov.ge/en/Policy%20 Documents/](http://myrights.gov.ge/en/Policy%20Documents/)

Disabilities. The same year, the Government of Georgia established the Interagency Coordination Committee on the Rights of Persons with Disabilities.

Within the framework of the obligations defined by the UN Convention on the Rights of Persons with Disabilities and the law, local self-government bodies are tasked with the following responsibilities towards persons with disabilities:

- Development and provision of personal assistant services by 2025;
- Promotion of independent living for persons with disabilities, encouragement of their participation in decision-making processes, and development of social services;
- Utilization of social services within the scope of delegated powers.

In addition to the aforementioned responsibilities, it is common practice for municipalities to establish Municipal Councils on Persons with Disabilities. These councils aim to identify community needs at the local level and promote the development of targeted programs in response to these needs.

National minorities

The Government of Georgia, under the guidance and coordination of the Office of the State Minister of Georgia for Reconciliation and Civil Equality, has developed the "2021-2030 State Strategy for Civil Equality and Integration and Action Plan". The strategy defines the following priority areas:

Support for the state language and integration;

- Access to quality education;
- Equality, civic, and political participation;
- Social and economic integration;
- Intercultural dialogue.

The target municipalities covered in this context analysis fall within the strategy's purview, as they are areas with particularly concentrated national minority populations.

IDPs

The 2014 Law of Georgia " On Internally Displaced Persons from the Occupied Territories of Georgia" delineates both the individuals who hold this status and the obligations of local municipalities towards them. The responsibilities of local municipalities include:

- Provision of long-term housing;
- Establishing guarantees for the protection of the rights of displaced persons.

1.4. Existing social services in Georgia at the central and local level for rights-holder groups

In line with the international obligations assumed by Georgia and the national legal framework, the Government of Georgia is engaged in the execution of programs at both central and local levels, aimed at promoting the fulfilment of the rights of vulnerable groups.

Central Social Services

The Law of Georgia "On Social Assistance" defines "social assistance" as any monetary or non-monetary allowance intended for persons in need of special care, for deprived families or homeless persons. "Social service" is defined as activities intended to meet specific needs of persons in need of special care, deprived families or homeless persons by means of nonmonetary social assistance, in particular, social services.

The Government of Georgia offers three distinct categories of monetary social aid:

- Old-age pension, primarily aimed at supporting the elderly population;
- Social package, designed to assist orphans, persons with disabilities, victims of political repression, and those who have lost a family member in armed conflicts;
- Targeted social assistance, with target households being evaluated based on socio-economic criteria. Contrary to the universal nature of the Old-age pension and Social package, eligibility for Targeted social assistance hinges on factors such as the household's geographic location, income level, material assets, and the presence of vulnerable individuals within the household, among other considerations.

Also, the Government of Georgia provides social services within the framework of its "2022 State Program for Social Rehabilitation and Childcare". The program consists of components designed for social rehabilitation and childcare.

The rights-holder groups of the '2022 State Program of Social Rehabilitation' include persons with disabilities (including veterans and children) and the elderly. The objective of the program is to enhance the physical and social well-being of these target groups and facilitate their integration into society. It consists of sub-programmes that offer one-time services and/or products, as well as systemic services.

Provision of one-time service /product - these sub-programmes, specifically designed for the aforementioned purpose, envisage the one-time provision of services or products. More specifically, these sub-programmes include:

1. Sub-Program for supplying support items - This sub-program offers diverse types of assistance, typically in the form of a voucher. The frequency and eligibility for re-issuance are determined by specific regulations, with the voucher generally being dispensed once every few years. Service providers for this sub-program are predominantly located in the capital, hence individuals seeking its benefits often have to travel to Tbilisi from outlying regions. This sub-program comprises the following components:
 - 1.1. Promotion of wheelchair provision and employment opportunities for individuals with disabilities;

- 1.2. Provision of prosthetic-orthopedic devices;
- 1.3. Provision of hearing aids;
- 1.4. Implementation of video conferencing capabilities for individuals with hearing impairments, using technical devices, such as smartphones;
- 1.5. Provision of mobility aids, including various types of crutches and walking frames;
- 1.6. Provision of canes for the visually impaired;
- 1.7. Provision of eyeglasses
2. Sub-Program for promotion of rehabilitation of war participants - within the framework of the mentioned sub-program, relevant services are received once, no more than 300 GEL, individual treatment-prophylactic and rehabilitation course financing.

Sub-program for Systematic Services - under the umbrella of the specially designed sub-programs for this objective, the provision of long-term services based on specific needs are envisaged. To effectively execute these sub-programs, it's vital to have service provider organizations registered within the target municipalities. These organizations are responsible for catering to the needs of the target groups, based on a predetermined quota (quantity). Specifically, these sub-programs include:

1. Sub-programme for Provision of Day Care Centres for People Over 18 Years of Age - This sub-programme aims to offer daily services (excluding non-working days) focused on the development of relevant skills and the promotion of integration. Among the target municipalities examined, only the Marneuli municipality hosts a service provider organization that caters to 8 beneficiaries. The said service provider is an NGO "Child, Family, Society", an organization registered in Tbilisi with a representation in the region.
2. Subprogram for supporting the communication of deaf people - This sub-program entails provision of 10 sign language interpreters to serve 8 regions. The Kvemo Kartli region has its dedicated interpreter, while the Samtskhe-Javakheti region currently lacks such a service. Instead, it is served by the Shida Kartli sign language interpreter.
3. Sub-program for Provision of Services in Community Organizations - In the target regions of the research of this specific sub-program, there are currently no relevant registered service provider organizations. The components of this sub-program are as follows:
 - 3.1. Component for providing community services to the elderly and individuals with disabilities;
 - 3.2. Component for supporting the provision of services that foster family-type independent living for persons with disabilities

On the other hand, the target groups entitled to the benefits of the "2022 State Program for Child Care and Youth Support" are as follows: *children with disabilities, children deprived of familial care, those who are socially vulnerable, homeless and at risk of abandonment, families with children in crisis, and young adults aged 18-21 who are living in or transitioning*

out of state care. The primary objective of this program is to enhance the physical and social well-being of children, facilitate their integration into society, and promote their independence. The program content comprises long-term, rehabilitation-oriented services with both systemic non-municipal and municipal focuses.

Systemic non-municipal services (the service provider does not need to be registered at the municipal or regional level to ensure service effectiveness). These specifically-designed sub-programs consider the provision of long-term services based on identified needs. It is not mandatory for the sub-program implementer to be registered in the target municipalities or regions. The specific sub-programs include:

1. Mother and Child Shelter Sub-program - provides shelter for mothers and children who meet the program criteria. Service providing organizations are registered in only 3 municipalities across Georgia, with the target municipality not included in this list.
2. Foster Care Sub-program - a program of foster families for children who meet the program criteria. Families from all municipalities of Georgia, including the target municipalities, are involved in this program.
3. Sub-program of Specialized Family-Type Services for Children with Severe and Profound Disabilities or Health Problems - offers 24-hour family-type services for children who meet the program criteria. The mentioned service provider is registered in 2 municipalities of Georgia.
4. Reintegration Sub-program for Children Deprived of Care - aims to facilitate the return of children under 18 years of age to their biological families and reintegrate those currently residing in state care institutions or in foster care. The program is implemented across all municipalities of Georgia.
5. Service Sub-program of the Long-Term Paediatric Care Medical-Social Center - targeted at children with severe and profound disabilities and health problems residing in the Tbilisi Baby House (Orphanage). Due to the specifics of the program, its service provider is registered only in Tbilisi.

Systemic Municipal Services (to ensure the effectiveness of the service, it is required that service providers be registered at the municipal or regional level) - the provision of long-term services based on needs is considered within the framework of the sub-programs created for this purpose. Essentially, for the successful execution of these sub-programs, it is necessary to have a service provider organization registered in the target municipality, serving a predetermined quota (quantity) of target groups. The sole exception is the sub-program of assistance to families with children in crisis, in which food vouchers are issued. It's worth noting that the organizations operating in the target municipalities are mostly registered in Tbilisi and have a considerable amount of experience. These organizations have often established branches in the aforementioned municipalities years later. In such cases, registering as a service provider becomes relatively easier, as experienced organizations typically already fulfil a number of requisite criteria, which subsequently reduces operating costs. The downside of this practice is that only those social services that have management experience with a service provider registered in Tbilisi are developed, and the social services supply chain remains disconnected. Running the full supply chain is primarily the focus of local service provider organizations, as these service providers are often community

members themselves. Local service providers require more financial and resource support to operate the service, which unfortunately is not currently funded by either central or local government. The systemic municipal service sub-programs include:

1. Sub-program of Assistance to Families with Children in a Crisis Situation - provides a yearly food voucher worth 600 GEL for each qualifying family.
2. Sub-program for Promoting Early Childhood Development - targets children aged 0-7 years who receive 8 individual visits every month. Only 2 municipalities from the target research municipalities participate in this program.
3. Registered Service Provider Sub-program - The number of visits to Marneuli is set at 336 visits (approximately 42 target children, with the NGO "Child, Family, Society" and "Union of Kindergartens in the Territory of Marneuli Municipality" providing the service), while the Akhaltsikhe Municipality is assigned 160 visits (around 20 target children, with NGO - "Portage Association of Georgia" as the service provider).
4. Child Rehabilitation/Habilitation Sub-program - focuses on individual rehabilitation, consisting of 8 courses per year. Each course includes a 10-day rehabilitation session. The registered supplier of the mentioned sub-program is only established in the Marneuli municipality.
5. Sub-program for Provision of Day Care Center Services - is a daily service (excluding non-working days) designed for the development of relevant skills and promotion of integration. Only Marneuli and Bolnisi municipalities from the target research municipalities have a service provider organization. The Marneuli Municipality serves 19 children with disabilities aged 6-18 (service provider - NGO "Child, Family Society"), while Bolnisi Municipality caters to 39 children with disabilities aged 6-18 (service provider - Association "Anika").
6. Sub-program for Providing Services in Small Family-Type Homes - This program targets children aged 6-18 who could not be adopted, placed in foster care, or reintegrated into their biological family. No service provider organizations for this program are located in the target municipalities.
7. Homeless Children's Shelter Subprogram - provides a mobile group service for homeless children under 18 years of age. Organizations providing services within the framework of the mentioned program are registered in only 4 municipalities of Georgia. None of the target research municipalities host a service provider organization.
8. Sub-program for Providing Residential Care for Children with Severe and Profound Developmental Delays - registered organizations providing this service exist only in 5 municipalities of Georgia. None of the target municipalities have an organization of this profile.
9. Sub-program of Support for Young People Aged 18-21 who Have Left State Care - provides support for the independent living of young people identified based on specific criteria. The service providers for this program are only registered in Tbilisi.

Additionally, the state administers a healthcare program that encompasses two sub-programs. Owing to their preventive focus and content, these sub-programs relate to the programs financed by local municipalities as part of their social assistance initiatives.²⁹

1. Maternal and Child Health Sub-program - facilitates the monitoring of pregnant women for genetic pathologies, hepatitis B and C, HIV/AIDS, and syphilis, providing appropriate medical services if these conditions are detected. Additionally, it involves preventing mother-to-child transmission of hepatitis B, providing medication to pregnant women, conducting new-born hearing diagnostics, and screening children for hypothyroidism, phenylketonuria, hyperphenylalaninemia, and cystic fibrosis. Medical institutions with the relevant state licenses implement this sub-program. These institutions have a full presence in the target municipalities - Akhaltsikhe, Ninotsminda, Bolnisi, Gardabani, Dmanisi, Tetritskaro, Marneuli, and Tsalka.
2. Disease Early Detection and Screening Sub-program - This program provides cancer screening and retinopathy of prematurity, prevention of mild and moderate mental retardation in children aged 1-6 years (through early diagnosis), diagnosis and supervision of epilepsy, and bio-monitoring of lead content in children's blood. The service providers for this sub-program operate only at the central level in Tbilisi (with only epilepsy diagnosis and supervision available also in Kutaisi).

The aforementioned sub-programs are preventive in nature and primarily focus on the early screening of mothers and children. This approach reduces the risk factors that often contribute to a person's disability status, generally aggravates an individual's health condition, and makes them more likely to seek various forms of social assistance.

The central government's social and health programs, as described above, often lack a registered service provider at the local level. While the reasons may vary slightly depending on the specifics of the target municipality, there are some common barriers, namely:

The standards required for registration as a current social and health service provider (service delivery standards) are often unattainable for local stakeholders. These standards typically require infrastructure (an adapted environment) and relevant qualified specialists (such as occupational therapists, speech therapists, rehabilitologists, behavioural therapists, psychiatrists, etc.) which are often difficult to find in the region.

Meeting these criteria requires financial resources to train and employ environmental specialists. Regrettably, state programs cover the ongoing costs necessary for the service (often the funds earmarked for the program cover only 60% of the actual costs, as in the day care centre program), and organizations must find co-financing from local public and private structures. The initial capital needed to start the service is sought by interested parties themselves, which requires a separate skill set. Furthermore, local and international donors who usually prioritize already experienced organizations, often do not provide the targeted grants necessary for the start of the service. All of this hinders the registration of local

²⁹ Oedinance of the Government of Georgia N4, January 12, 2022 on the approval of state healthcare programs for 2022

organizations as providers of these services. Consequently, branches of experienced organizations registered in Tbilisi operate in the regions, as they have more human and financial resources, or access to similar resources, compared to local organizations.

Regulation of social assistance in municipalities and types of assistance

In the target municipalities of the study (generally as an established practice), the types and amounts of social assistance are determined by the city council through its own resolution on budget approval. The method of providing social assistance is also regulated by the resolution of the City Council (specifically, the resolution on approving the method of providing social assistance from the budget). Both documents are approved annually, and almost simultaneously.

In instances of program funding exhaustion and/or other special cases, a significant portion of social assistance is disbursed from the municipality's budget reserve fund. This fund is created to finance unforeseen expenses in the municipal budget. The volume of the reserve fund does not exceed 2% of the total volume of allocations provided for in the annual budget. Expenses financed from this fund include:

- Remedial work relating to situations caused by natural disasters; also, remediation of threats that endanger human health and life;
- Urgent operational, medicinal, or medical research expenses that are not financed by the budget, or the corresponding program funding in the budget has been exhausted;
- Costs associated with the restoration of various engineering infrastructures;
- Organization of sports, cultural, and educational events;
- Funding of other expenses that are not provided for by the local budget and are not prohibited by law.

The rule of providing social assistance in municipalities

There are different practices of providing social assistance across different municipalities.

Rule 1. Commission or Council recommendation – decision is taken by Mayor (Tsalka, Marneuli, Gardabani, Bolnisi, Tetrtskaro)

All applications for social assistance submitted to the City Hall of a municipality, along with the attached documentation, are forwarded to municipality City Hall's Social Issues Review Commission. The commission is tasked with studying and preparing a conclusion on the provision of social assistance. The commission is primarily staffed by civil servants of the City Hall. However, to ensure the protection of public principles, representatives of interested mass media and public organizations may participate in the commission's discussions of social assistance provision. The participation of the Sakrebulo members and representatives of the Social Service Agency is also anticipated.

Social assistance is provided based on the commission's conclusion, in accordance with the individual legal act issued by the municipality's mayor.

Monetary assistance will be credited to the applicant's personal bank account. In the case of non-monetary social assistance, the aid will be reimbursed in the form of a transfer to the relevant medical institution's bank account.

Rule 2. Decision-maker - working group (Akhaltsikhe)

The decision to provide social assistance to citizens is made by a working group formed by the mayor of the municipality, specifically for targeted social assistance. The group is considered authorized if at least two-thirds of the voting members are present at the session. This working group comprises civil servants from the City Hall.

Rule 3. Recommendation by the relevant department of the City Hall – decision taken by the mayor (Ninotsminda, Dmanisi)

Applications for social assistance received at the municipal City Hall are reviewed by the Administrative, Healthcare and Social Security Service of the City Hall. The decision to provide social assistance is made on a case-by-case basis, following a comprehensive review of each specific situation. If all the necessary documentation is complete, the decision is finalized through an individual administrative-legal act issued by the mayor.

Criteria for assessing the results of social assistance programs in municipalities

To evaluate the results of budgetary programs, the municipality's 2022 program budget includes relevant objectives and outcomes. However, these criteria tend to be somewhat broad and lack specific indicators.

For example, in the description of one of the sub-programs of Akhaltsikhe municipality, an objective is defined - financial support for the elderly, and providing monthly financial assistance to orphaned children.

As for the expected outcomes, they are described as follows: support and financial assistance for families, improving the social situation of the program's target groups and their families, reducing costs for beneficiaries, promoting greater social integration of families, ensuring a dignified old age for the elderly, and providing guardianship and care for orphaned children.

The outcome of one of Ninotsminda municipality's programs, which offers one-time monetary assistance for needy families, is described as follows: preferential environment created for the needy population within the scope of possibilities, number of participating beneficiaries, satisfied population.

One of the main indicators for evaluating the social and healthcare programs of Gardabani municipality is the number of citizens participating in the program, with the outcome being the assistance received by the specific program's beneficiaries.

The examples provided above serve to illustrate that it's practically impossible to assess the results achieved by the program/sub-program. During the course of the research, we

attempted to verify the existence of result-oriented evaluation reports for social support programs catering the population in all targeted municipalities by requesting public information. As it appears, municipalities only maintain records of quantitative data - for instance, the number of beneficiaries who have received assistance, and the expenditure from the budget on various programs. However, there are no intermediate and final evaluation reports for social programs, nor are there appropriate recommendations to enhance programs based on these reports. Similar reports and recommendations are neither available in practice nor as public information, leading us to believe that such documents do not actually exist.

*Budget financing of social assistance programs in municipalities*³⁰

1. The budget revenues for Akhaltsikhe Municipality amount to 25,996,100 GEL, out of which 1,342,300 GEL is allocated to the social assistance program, representing 5.16% of the budget.
2. Ninotsminda Municipality's budget revenues amount to 11,512,900 GEL, with 555,000 GEL dedicated to the social assistance program, accounting for 4.82% of the budget.
3. Bolnisi Municipality has budget revenues of 34,404,800 GEL, and 1,892,000 GEL is used for the social assistance program, which is 5.5% of the budget.
4. Gardabani Municipality's budget revenues total 39,239,500 GEL, of which 3,292,900 GEL is designated for the social assistance program, constituting 8.4% of the budget.
5. Dmanisi Municipality has budget revenues amounting to 18,565,800 GEL, with 575,000 GEL utilized for the social assistance program, making up 3% of the budget.
6. The budgetary revenues of Tetrtskaro Municipality amount to 18,705,000 GEL, out of which 485,500 GEL is used for social assistance program, equating to 2.6% of the budget.
7. The budget revenues of Marneuli Municipality amount to 46,330,700 GEL, of which 2,246,600 GEL is spent on the social assistance program, comprising 4.8% of the budget.
8. Tsalka Municipality's budgetary revenues amount to 11,469,100 GEL, of which 500,000 GEL is used for the social assistance program, making up 4.35% of the budget.

The combined revenues of the eight target municipalities total 206,223,900 GEL, out of which 10,889,300 GEL is allocated to social support programs. This equates to an average of 5.28% of the budget. This is less than half of the corresponding figure for Tbilisi Municipality, which, out of an income of 1,379,987,100 GEL, allocates 145,776,100 GEL to social programs, equivalent to 10.56% of the income.

³⁰Data are calculated as of May 29, 2022.

It's impossible to ascertain the demand for the municipality's social programs, as municipalities do not maintain such statistics. As a result, a balance between the demand and supply of social support cannot be established. The closest estimation to this data can be obtained by recalculating the funds allocated to social programs on a per capita basis. According to the aforementioned data, there is a significant difference across municipalities. For instance, in Marneuli municipality, the allocation is 20.9 GEL per inhabitant, whereas in Gardabani it's twice as much at 41.5 GEL. In Tbilisi, this figure is even higher at 121.4 GEL (145,776,100 GEL spread across 1,200,000 inhabitants).

Any substantial inequality in social provision contradicts the principles of a welfare state. According to Article 5, Section 3 of the Constitution of Georgia, **"the state shall take care of the equitable socio-economic and demographic development in the entire territory of the country"**. Furthermore, Article 9, Section 5 of the European Charter on Local Self-Government stipulates: **"the protection of financially weaker local authorities calls for the institution of financial equalisation procedures or equivalent measures which are designed to correct the effects of the unequal distribution of potential sources of finance and of the financial burden"**. These provisions necessitate the state to establish a minimum standard of social security that will be equally accessible to residents of all municipalities (see Table #6).

Table #6

Municipality	Funds allocated for social programs (GEL)	Population number (2022)	Amount per capita (GEL)
1. Akhaltsikhe	1,342,300	39,100	34.3
2. Ninotsminda	555,000	17,900	31
3. Bolnisi	1,892,000	55,900	33.8
4. Gardabani	3,292,900	79 300	41.5
5. Dmanisi	575,000	20,900	27.5
6. Tetritskaro	485,500	22,500	21.5
7. Marneuli	2,246,600	107,500	20.9
8. Tsalka	500,000	19,600	25.5

2. Prioritization of Social Assistance Categories in the Budgets of Target Municipalities Based on Issues

Tsalka municipality has a single program called "Social protection program for the sick", which is divided into two categories: monetary and non-monetary assistance. The program, which is allocated 653,000 GEL, primarily includes the following categories:

- One-time monetary assistance to various vulnerable groups (including socially disadvantaged individuals, orphans, families in need, families of war veterans, etc.);
- Financing of funeral services;

- Monetary support for orphanages and shelters;
- Provision of monetary gifts and one-time monetary assistance on holidays;
- Reimbursement of the cost of emergency medical services and medicines.

More than 80% of the program's funding is used for one-time monetary assistance to various vulnerable groups and the reimbursement of emergency medical services and medicine costs.

The social protection budget program of Akhaltsikhe Municipality is funded with 1,552,300 GEL, with the primary allocations as follows:

- Financing of population medical services - 732,900 GEL (47.2%) ;
- Social assistance for persons with disabilities - 211,000 GEL (13.5%);
- Akhaltsikhe Municipality House of Charity - 193,000 GEL (12.4%) ;
- Social assistance to internally displaced persons, refugees and the extremely needy - 155,300 GEL (10%).

The social security program of Ninotsminda Municipality is funded with 575,000 GEL, with the following priorities:

- Costs of treatment for the socially vulnerable population - 210,000 GEL (36.5%);
- Social protection of families and children - 100,000 GEL (17.4%);
- One-time monetary assistance for needy families - 100,000 GEL (17.4%).

The social security program of Marneuli Municipality is funded with 2,210,000 GEL, with the following priorities:

- Social protection of the sick - 1,600,000 GEL (72.3%);
- Social protection of families and children - 605,000 (27.3%).

Social protection budget program of Gardabani Municipality is funded with 3 577 000 GEL, with the priority allocations as follows:

- Health protection program - 875,000 GEL (24.5%);
- Assistance program for socially vulnerable families - 718,000 GEL (20%);
- One-time monetary assistance program - 521,000 GEL (14.5%);
- Support of the therapeutic centre - 300,000 GEL (8.3%);
- Medical service program for the socially vulnerable - 290,000 GEL (8%).

The social protection budget program of Dmanisi Municipality is funded with 725,000 GEL, with the priority allocations as follows:

- Municipal program of medical inpatient and outpatient assistance for the socially vulnerable population - 300,000 GEL (41.3%);
- Social protection of the population with severe diagnoses and different social strata (social protection of the sick) - 200,000 GEL (27.5%);
- Financial support for people suffering from malignant tumors and hepatitis C - 135,200 GEL (18.6%).

The social protection budget program of Bolnisi Municipality is funded with 4 162 370 GEL, with the priority allocations as follows:

- Municipal transportation allowance - 748,000 GEL (18%);
- Compensation for damages caused by natural disasters - 728,000 (17.5%);
- Medical insurance program - 713,000 GEL (17.1%);
- NGO "House of Charity of Bolnisi Municipality" - 657,200 GEL (15.8%);
- Assistance to disabled persons - 445,000 GEL (10.7%);
- One-time aid - 260,000 (6.2%);
- Provision of medicines for the sick - 200,000 GEL (4.8%).

The budgetary program of social protection of Tetrtskaro Municipality is funded with 896,500 GEL, with the main allocations as follows:

- Assistance to persons with disabilities; one-time assistance for medical provision for the municipality's population, and maternity assistance - 335,000 GEL (37.3%);
- Social protection for the elderly, provided by NGO "Tetrtskaro Centre of Preschool Education and Aid to the Socially Unprotected Members of Community" - 278,600 GEL (31%);
- Social protection for orphans, families, and children, provided by the "Red Cross" – 150,000 GEL (16.7%).

An analysis of these budget programs reveals that the expenditures for social assistance programs are primarily directed towards two areas - providing medical services for the population and offering one-time monetary/non-monetary aid for vulnerable groups. These groups predominantly include children, the elderly, and needy families.

Social and healthcare programs of municipalities

In the majority of the targeted municipalities, social support encompasses affairs related to the determination and provision of healthcare and social assistance, the various forms of healthcare and social assistance, and the guiding principles for their determination and delivery.

The analysis of the legal acts approved by the councils of the target municipalities of the research reveals quite a diversity of social assistance forms available. Considering the nature of the assistance, it can be conditionally grouped into the following categories:

- I. **Monetary one-time assistance** - a monetary benefit given directly to the rights-holder group once a year or once;
- II. **Non-monetary one-time assistance** - a one-time benefit provided to the rights-holder group (in the form of services or products);
- III. **Monetary systemic (monthly, quarterly) assistance** - a monetary transfer issued directly to the rights-bearing group, characterized by systemic disbursement;
- IV. **Non-monetary systemic assistance (monthly, quarterly, seasonal)** - systemic benefits (services, firewood or utility bill vouchers) provided to the rights-holder group.

The table below (Table #6) presents an analysis of the types of social and healthcare services provided by the eight target municipalities, with regard to their rights-holder groups. There are 106 different types of assistance across these eight municipalities. Over 64% of this assistance is focused on one-time monetary aid (Type I assistance). The second most common type of aid for municipalities is systemic non-monetary aid (Type IV assistance) - 22%. This is followed by one-time non-monetary aid (9%), with systemic monetary aid representing the smallest percentage - 4%. Notably, Tsalka municipality only offers one-time assistance, with none of its programs being systemic in nature. If we combine Type I and Type II assistance, which are similar in nature, 74% of municipal aid is one-time aid, aimed at temporarily meeting the basic needs of vulnerable people. Conversely, only 24% of municipal resources are directed towards development and potential realization, exhibiting a systemic character (see Table #7).

The management of monetary and non-monetary one-time assistance requires fewer administrative resources from the municipality. These programs cover a broad segment of the population, unlike targeted and systemic programs, which cater to a predefined group of beneficiaries with a set number of recipients. Additionally, targeted systemic programs require skilled personnel and demand more administrative resources for effective implementation and monitoring.

Table #7

Rights-holder groups	Municipalities							
	Samtskhe-Javakheti		Kvemo Kartli					
	Akhalikhe	Ninotsinda	Bolnisi	Gardabani	Dmanisi	Tetritskaro	Marneuli	Tsalika
1. Persons in need of special care								
1.1. Orphans and children without parental care	I, IV	I	I	I		III	I, II	I, II
1.2. Persons with disabilities	I, IV	I	I, III, IV	I	I, IV	I, II	I, II	I
1.3. Person of full legal age with limited capabilities and without family care								
1.4. Persons without breadwinner	I, IV	I	I		II		II	I
1.5. Street children								
2. Deprived (socially disadvantaged) families	I, II	I		I, IV		I, II, IV	I, II	I
3. Homeless persons	IV	I, IV	IV	IV	I	I		I
4. Children	I, IV	I	I	I, IV		I, IV	I	I
5. Women								
6. National minorities								
6.1. Religious minorities								
6.2. Ethnic minorities								
7. Eco-migrants								
8. The elderly	I		I	I		I	I	I

Rights-holder groups	Municipalities							
	Samtskhe-Javakheti		Kvemo Kartli					
	Akhalikhe	Ninotsinda	Bolnisi	Gardabani	Dmanisi	Tetritskaro	Marnauli	Tsalika
9. IDPs	IV			I, IV		I	I	
10. Large families	I	I	I	I, IV		I		I
11. Single parent	IV	I		I	I	I	I	
12. Veterans	I	I	I	I		I, II	I	I
13. Groups in need of healthcare	I, IV		I, IV	I, IV	I, IV	I, IV	I, IV	
14. A person with the status of a victim of violence		III	I, IV			I		
15. Students		I	III	I			I	

As part of the baseline study, the population's needs in the areas of social services and healthcare were identified. The quantitative survey revealed that a large majority of respondents (81%) do not utilize municipal **social services** (88% in Samtskhe-Javakheti and 75% in Kvemo Kartli). The rate of non-use for state (central) services is significantly lower (26%; 24% in Samtskhe-Javakheti and 29% in Kvemo Kartli). Among the municipal social services mentioned by the study participants, a noticeable portion of beneficiaries were recipients of one-time assistance (either monetary or other forms) (6%), and those participating in the support program for socially vulnerable children and newborns (4%). As for the state (central) services, the beneficiaries were predominantly recipients of the old-age pension (29%), state medical insurance (20%), and utility subsidies (18%). (See Tables #8, #9). Respondents typically receive any form of assistance (both municipal and central) on time, and thus, they generally express satisfaction with the services provided (an average of 63% satisfaction with municipal services, and 70% satisfaction with state or central services).

Table #8

Do you or any of your family members benefit from any of the following municipal social services? (regional perspective)	Samtskhe-Javakheti (N=600)	Kvemo Kartli (N=600)
No, none	87.8%	74.9%
One-time (monetary or other) social assistance	3%	9.6%
Provision of shelter for homeless persons (social housing)	-	0.1%
Social support for large families/single parents	1.7%	5.4%
Support program for socially vulnerable children and newborns	4.8%	3.9%
Assistance to persons with disabilities	2%	1.2%
Free transportation	-	0.6%
Free meal program	0.3%	-
Housekeeping program	-	-
Assistance to victims of various types of violence	-	-
Assistance to internally displaced persons and combatants (veterans) and their families from the occupied territories of Georgia	0.3%	1.6%

Do you or any of your family members benefit from any of the following municipal social services? (regional perspective)	Samtskhe-Javakheti (N=600)	Kvemo Kartli (N=600)
Support to persons affected by natural disasters and in difficult living conditions	-	0.1%
Funeral assistance	-	0.5%
Encouragement to newly married families	-	0.1%
Access to education of socially vulnerable families during online learning	-	1.3%
Support to students and athletes	-	0.5%
other	0.1%	0.2%

Table #9

Do you or any of your family members benefit from any of the state (central) social services listed below (regional perspective)	Samtskhe-Javakheti (N=600)	Kvemo Kartli (N=600)
None	23.9%	29.1%
Old-age pension	29.2%	28.8%
Disability Pension (including for children)	3.7%	3.6%
Day care centres for persons with disabilities	-	0.3%
Survivor's pension (for loss of breadwinner)	0.1%	0.4%
War veterans' pension	1.3%	1%
Assistance for internally displaced persons	0.2%	1.1%
State medical insurance	21.1%	18.6%
Social assistance for elder orphans	0.2%	0.4%
Subsidies for utilities	20.1%	15.8%
Vouchers for social services (e.g.: Health Care Centre Voucher, Early Intervention Voucher, Food Voucher, etc.)	0.1%	0.7%
Early Childhood Development Program	-	0.1%
Children's rehabilitation/habilitation program	0.1%	-
Other	-	0.1%

In the field of social initiatives, feedback from focus group discussions emphasized that the coronavirus pandemic has created a need for social programs aimed at enhancing the motivation of students from vulnerable families to pursue education. Such programs could involve the provision of textbooks or other essential resources. The role of municipalities in promoting vocational and higher education was highlighted in focus-groups. In particular, it was suggested that municipalities should offer support to outstanding and motivated young individuals. This support could include co-financing their education, offering housing assistance, or providing other forms of aid/support.

In the context of the quantitative research conducted, a significant majority of respondents reported that they do not utilize either municipal (89%: Samtskhe-Javakheti 94%, Kvemo

Kartli - 85%) or state (central) (54%: Samtskhe-Javakheti - 61%, Kvemo Kartli - 47%) **healthcare services**. Among the municipal services cited by the survey participants, the provision of free medications stood out (7%). As for state services, the most commonly mentioned were the village doctor (19%) and emergency care (14%) (see Table #10, #11). Respondents generally receive health services in a timely manner and express satisfaction with the services provided, both at the municipal (average satisfaction rate - 65%) and state (central) level (average satisfaction rate - 72%). However, the registration procedures for rehabilitation and mental health services for children with autism spectrum disorder were identified as complicated, with these services receiving a low satisfaction rate from respondents.

Table #10

Do you or any of your family members benefit from any of the municipal healthcare services listed below? (regional perspective)	Samtskhe-Javakheti (N=600)	Kvemo Kartli (N=600)
No, none	93.9%	85%
Provision of free medicines	3.8%	9.4%
Rehabilitation services for children with autism spectrum disorders	0.4%	0.1%
Support for individuals with various chronic diseases (e.g. cancer, kidney failure, leukaemia, etc.).	-	1.3%
Financing of expensive diagnostic procedure (e.g. computed tomography, esophagogastroduodenoscopy, coronary angiography, breast cancer genetic research, etc.)	0.5%	1.7%
Medical assistance for disabled and socially vulnerable individuals	0.9%	0.4%
Other	0.5%	2%

Table # 11

Do you or any of your family members benefit from any of the state (central) healthcare services listed below? (regional perspective)	Samtskhe-Javakheti (N=600)	Kvemo Kartli (N=600)
No, none	60.7%	46.6%
Early detection and disease screening	0.1%	0.9%
Immunization (scheduled vaccinations)	7.1%	11.7%
Tuberculosis management	0.1%	-
HIV/AIDS management	-	0.1%
Maternal and child health (treatment for high-risk pregnancies, childbirth and postpartum care, early detection of genetic pathologies, newborn hearing screening, provision of medications to pregnant women, etc.)	-	1.2%
Treatment for patients with drug addiction	-	-
Mental health services	0.7%	0.7%
Diabetes management	0.7%	1.8%
Emergency urgent care	11.5%	15.3%
Village doctor services	17.5%	20.4%
Provision of medications for the treatment of chronic diseases	1.4%	1.4
other	0.1%	-

The qualitative component of the baseline study revealed that both access to consultations with qualified medical specialists and the availability of medicines pose challenges. There is a crucial need to expand the list of covered medicines and fund critically important medicines for individuals with health issues. In-depth interviews revealed that, despite healthcare services receiving the largest share of Bolnisi municipality's total budget, this amount is insufficient to meet the needs of the population fully—it does not adequately cover the costs of operations and the subsequent provision of necessary medicines. The focus groups conducted in both regions revealed that the dissatisfaction with municipal health services largely stems from the lack of financing for postoperative rehabilitation, resulting in substantial out-of-pocket costs for the population. According to representatives from local government, the improvement of existing social and healthcare services could be achievable through an increase in the budget.

Within the context of the baseline study, it was revealed that state services are more accessible to ethnic Georgians than to ethnic minority representatives. A key barrier to equal access is the lack of information due to language differences. This issue is more frequently encountered by the older generation, who often have limited or no proficiency in the Georgian language. In this respect, the “1+4 educational program” is seen as a positive initiative, as it helps more young people from ethnic minorities learn the Georgian language.

Table #12

Rights-holder groups	Municipalities							
	Samtskhe-Javakheti		Kvemo Kartli					
	Akhaltse	Ninotsminda	Bolnisi	Gardabani	Dmanisi	Tetritskaro	Marneuli	Tsalka
1. Persons in need of special care								
1.1. Orphans and children without parental care	Non-monetary systemic assistance and Monetary one-time assistance	Monetary one-time assistance	Monetary one-time assistance	Monetary one-time assistance		Monetary systemic assistance	Monetary one-time assistance and Non-monetary one-time assistance	Monetary one-time assistance and Non-monetary one-time assistance
1.2. Persons with disabilities	Non-monetary systemic assistance and Monetary one-time assistance	Monetary one-time assistance	Non-monetary systemic assistance, Monetary one-time assistance and Monetary systemic assistance	Monetary one-time assistance	Non-monetary systemic assistance, and Monetary one-time assistance	Monetary one-time assistance, and Non-monetary one-time assistance	Monetary one-time assistance, and Non-monetary one-time assistance	Monetary one-time assistance
1.3. Persons of full legal age with limited capabilities and without family care								

Rights-holder groups	Municipalities							
	Samtskhe-Javakheti		Kvemo Kartli					
	Akhaltsekh e	Ninotsminda	Bolnisi	Gardabani	Dmanisi	Tetritskaro	Marneuli	Tsalka
1.4. Persons without breadwinner	Non-monetary systemic assistance, and Monetary one-time assistance	Monetary one-time assistance	Monetary one-time assistance		Non-monetary one-time assistance		Non-monetary one-time assistance	Monetary one-time assistance
1.5. A street child								
2. A deprived family	Non-monetary one-time assistance	Monetary one-time assistance		Non-monetary systemic assistance, and Monetary one-time assistance		Monetary one-time assistance, and Non-monetary one-time assistance	Monetary one-time assistance, and Non-monetary one-time assistance	Monetary one-time assistance
3. A homeless person	Non-monetary systemic assistance	Monetary one-time assistance, and Non-monetary systemic assistance	Non-monetary systemic assistance	Non-monetary systemic assistance	Monetary one-time assistance	Monetary one-time assistance		Monetary one-time assistance

Rights-holder groups	Municipalities							
	Samtskhe-Javakheti		Kvemo Kartli					
	Akhaltsekh e	Ninotsminda	Bolnisi	Gardabani	Dmanisi	Tetritskaro	Marneuli	Tsalka
4. Children	Monetary one-time assistance, and Non-monetary systemic assistance	Monetary one-time assistance	Monetary systemic assistance	Monetary one-time assistance, and Non-monetary systemic assistance		Monetary one-time assistance, and Non-monetary systemic assistance	Monetary one-time assistance	Monetary one-time assistance
5. Women								
6. National minorities								
6.1. Religious minorities								
6.2. Ethnic minorities								
7. Eco-migrants								
8. Elderly persons	Monetary one-time assistance		Monetary one-time assistance	Monetary one-time assistance		Monetary one-time assistance	Monetary one-time assistance	Monetary one-time assistance
9. Internally displaced persons (IDPs)	Non-monetary systemic assistance			Non-monetary systemic assistance and Monetary one-time assistance		Monetary one-time assistance	Monetary one-time assistance	

Rights-holder groups	Municipalities							
	Samtskhe-Javakheti		Kvemo Kartli					
	Akhaltsekh e	Ninotsminda	Bolnisi	Gardabani	Dmanisi	Tetritskaro	Marneuli	Tsalka
10. Multi-child parent	Monetary one-time assistance	Monetary one-time assistance	Monetary one-time assistance	Non-monetary systemic assistance and Monetary one-time assistance		Monetary one-time assistance		Monetary one-time assistance
11. A single parent	Non-monetary systemic assistance	Monetary one-time assistance		Monetary one-time assistance	Monetary one-time assistance	Monetary one-time assistance	Monetary one-time assistance	
12. Veterans	Monetary one-time assistance	Monetary one-time assistance	Monetary one-time assistance	Monetary one-time assistance		Non-monetary one-time assistance, and Monetary one-time assistance	Monetary one-time assistance	Monetary one-time assistance
13. Groups in need of healthcare	Monetary one-time assistance, and Non-monetary systemic assistance		Monetary one-time assistance, and Non-monetary systemic assistance	Monetary one-time assistance, and Non-monetary systemic assistance	Monetary one-time assistance, and Non-monetary systemic assistance	Monetary one-time assistance, and Non-monetary systemic assistance	Monetary one-time assistance, and Non-monetary systemic assistance	

Rights-holder groups	Municipalities							
	Samtskhe-Javakheti		Kvemo Kartli					
	Akhaltsekh e	Ninotsminda	Bolnisi	Gardabani	Dmanisi	Tetritskaro	Marneuli	Tsalka
14. Beneficiaries of the general category of socially vulnerable	Monetary one-time assistance					Non-monetary systemic assistance		
15. A person having a status of a victim of domestic violence		Monetary systemic assistance	Monetary one-time assistance, and Non-monetary systemic assistance			Monetary one-time assistance		

1.5. Analysis of current legislation and practices, taking into account the five main working principles of the human rights-based approach

The human rights-based approach is guided by five core working principles, which serve as a tool for evaluating enforcement of existing legislation in practice. When evaluating existing practices, the starting point, according to this approach, is the people themselves—the rights-holder groups directly affected by the law and the processes related to its enforcement.

- **Participation**

Legislation acknowledges the following five forms of citizen participation in the decision-making process at the local level:

- ✓ A General Assembly of a settlement;
- ✓ A petition;
- ✓ The council of civil advisors;
- ✓ Participation in the sessions of the municipality Sakrebulo and the sessions of its commission;
- ✓ Hearing reports on the work performed by the Gambgebeli/Mayor of the municipality and by a member of the municipality Sakrebulo.³¹

All five forms are relevant, enabling both municipalities and specific interest groups to customize social assistance programs to their beneficiaries. Moreover, additional forms of participation can be utilized, such as good participation practices like the establishment of a Civic Advisory Council to the Mayor focusing on social issues. This council would primarily consist of representatives from social program beneficiaries and advocates for their rights. While this mechanism has been successfully implemented in various municipalities, the target municipalities in this study are not among them. The Mayor's Council on social issues would encompass representatives from all beneficiary categories who receive and/or could potentially receive social assistance from municipal programs. This mechanism could be used to analyze existing social programs and to create new ones.

In the target municipalities, two advisory council instruments with a social focus are currently functioning: the Municipal Council on Persons with Disabilities and the Municipal Gender Equality Council. In addition, the 'Women's Room' serves as another mechanism, specifically designed to provide additional services.

Municipal Gender Equality Council

The Gender Equality Council was established in accordance with the Law of Georgia on Gender Equality. Its primary aim is to ensure that there is no discrimination in any aspect of public life; create proper conditions for realisation of equal rights, freedoms and opportunities

³¹Organic Law of Georgia, Code of Local Self-Government – Article 85

for men and women; prevent and eliminate any discrimination. Under the aforementioned law, the municipality was granted the following powers:

- The municipal Sakrebulo shall establish a Municipal Gender Equality Council to ensure systematic work on the gender-related issues within the municipality and the coordinated collaboration with the Standing Parliamentary Council on Gender Equality established by the Parliament of Georgia;
- A municipality mayor shall designate a public servant responsible for the gender-related issues in an appropriate City Hall to study gender equality issues, to plan relevant activities and to coordinate appropriate measures within the municipality.
- The budget of municipalities, priorities of social and economic development, municipal programmes and plans shall be developed in such a way that any form of discrimination is excluded.³²

Based on the analysis of publicly available information from the municipalities, additional requested public data, the findings of research conducted by the Office of the Public Defender, and information from the portal www.lsgindex.org,

Based on the requested public information proactively published by the municipalities, the findings of the research conducted by the Public Defender's Office³³ and the analysis of the information from the portal www.lsgindex.org, it was revealed that:

- Gender Equality Councils have been established in all target municipalities. These councils regularly hold meetings and approve relevant strategies and action plans.
- The budgets of the municipalities do not include financial resources dedicated to the implementation of gender equality action plans.
- Despite the work of the Gender Equality Councils, there are no budget programs or sub-programs addressing gender equality issues in the budgets of the target municipalities.
- The Gender Equality Councils do not participate in either policy planning or municipal service delivery.
- Despite the support from various donor organizations, the 2022 budgets in the target municipalities are not "gender sensitive".

The United Nations Development Program (UNDP), The Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ), and other donors provide informational, consultative, and expert assistance to the Gender Equality Councils of the target municipalities. However, the municipalities' budget programs for the current year do not include relevant measures that would contribute to the achievement of gender equality goals.

³² Law of Georgia on Gender Equality, Article 13

³³ <https://ombudsman.ge/res/docs/2020061711084253805.pdf>

Rights of Persons with Disabilities and Council of Persons with Disabilities

In 2020, the Parliament of Georgia adopted the Law 'On the Rights of Persons with Disabilities.' Article 35 of this law outlines specific obligations for the municipalities of Georgia in the field of protection of the rights of persons with disabilities. In particular, municipal bodies/agencies are obliged to:

- Within their competence, develop and implement programmes supporting the independent life, and social inclusion programmes with the involvement, of persons with disabilities, and to take into account their individual needs;
- Ensure the full participation of persons with disabilities in social, political, social, economic, cultural and sporting life at a local level;
- Ensure the participation of persons with disabilities in the process of the development of programmes/projects for relevant activities for the exercise of powers granted by law at all stages of the elaboration and making of decisions;
- Promote the activities of local organisations for persons with disabilities, in which persons with disabilities and/or their legal representatives constitute the majority of both the members of the organisation and the governing/decision-making bodies thereof, who work to improve the quality of the independent life of persons with disabilities;
- Promote the introduction and development of information, consulting and supporting services for the independent life of persons with disabilities, together with other establishments/organisations with relevant functions, who work in the territory of the respective municipality.

The authority of the municipality is regulated by the higher-ranking Organic Law of Georgia "Local Self-Government Code", in which the obligations of the municipalities pertinent to the persons with disabilities are defined only in relation to adapting the environment. The rest of the obligations defined by the law are typically viewed as delegated powers, even though they are not accompanied by appropriate financial resources from the central budget. These circumstances do not provide municipalities with the legal and financial capabilities needed to fulfil the law's requirements.

Municipal Coordination-advisory Councils on Persons with Disabilities have been established in the target municipalities. These councils are primarily staffed by civil servants from the municipality mayor's office and are led by deputy mayors. While these councils hold regular meetings and discuss various initiatives, the target group - persons with disabilities - are less involved in the process of developing municipal budget programs and policy documents.

A significant portion of participants in the Baseline Study survey (39%) expressed dissatisfaction with the planning of their settlement (Kvemo Kartli - 43%, Samtskhe-Javakheti - 35%). It appears that the needs of people with disabilities were not adequately addressed in settlement planning, as according to 56% of respondents, there is either no environment adapted for people with disabilities, or they are unaware if such an environment exists (Samtskhe-Javakheti - 62%, Kvemo Kartli - 50%). The lack of ramps, buildings not adapted for accessibility, and transportation issues for wheelchair users are among the noted problems.

The aforementioned information was confirmed by the residents of all eight municipalities within the focus groups conducted. They believe that public facilities/spaces are not adapted for persons with disabilities. Some respondents noted that while some newly built public institutions have been adapted for people with limited mobility, they are unsure to what extent the adaptation complies with existing standards, as they have not seen any person with disabilities using these facilities.

" Women's room"

"'Women's Room' is the name of a municipal service aimed at activating and empowering women. The project comprises several services: a library, computer and internet services, evening classes, a children's corner, special training programs, and educational activities. It serves as a resource for providing information and services to women, as well as encouraging women's participation in local decision-making. Within the 'Women's Room', there is also an initiative for the professional and economic empowerment of women and girls. Located in the municipality's administrative building, the 'Women's Room' serves women residing in the municipality's settlements. The project is implemented with financial support from USAID, in partnership with the International Center on Conflict and Negotiation (ICCN) and Mercy Corps."

Women's Rooms' have been established in all target municipalities of the research: Dmanisi, Tsalka, Tetritskaro, Ninotsminda, Bolnisi, Marneuli, Gardabani, and Akhaltsikhe. This service was initially set up in 2015-2016 and continues to function successfully.

As of 2022, in all municipalities, the contract that regulated the relationship between the municipality and the donor organization has expired.

'Women's Rooms' play a crucial role as a service area and a tool for women's empowerment, fostering potential participation in the decision-making process. The current situation is as follows:

- A space is allocated for the 'Women's Room' in the municipalities and is properly equipped. However, there are exceptions, such as in Gardabani, where the room was closed and no longer has the appropriate space due to technical issues at the City Hall, not because of the service's inefficiency;
- In each municipality, the qualifications of the 'Women's Room' manager are appropriate (maintained through training provided by donors).
 - The managers of the 'Women's Room' demonstrate high levels of motivation;
 - The 'Women's Room' managers work in coordination with various departments of the Municipality City Hall;
 - With the support and involvement of the 'Women's Room' manager, numerous projects for the economic empowerment of women have been prepared and implemented;
 - The 'Women's Room' contributes to raising public awareness on gender equality in the municipality and supports vulnerable groups;
 - A union of 'Women's Rooms' across Georgia has been formed, which aids in identifying common problems in municipalities, coordinating solutions, and implementing joint projects.

There are significant challenges that require an urgent response:

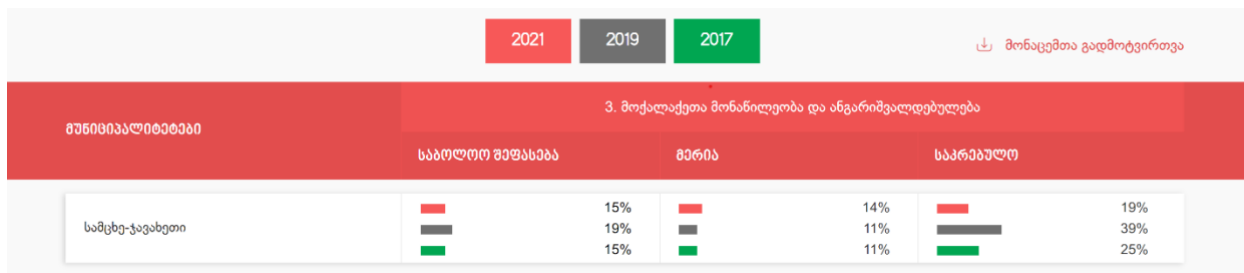
- Municipalities still do not fully comprehend the role of local self-government in promoting gender equality. Notably, Mercy Corps Georgia has developed the guidelines for the implementation of gender equality policy by local governments within the Alliances Lesser Caucasus Programme in Georgia (ALCP), financed by the Swiss Agency for Development and Cooperation (SDC),
- The awareness of City Hall and City Council officials regarding gender equality issues is still low, hindering the adoption of decisions that promote gender equality;
- Civil servants of the City Hall, representatives of NGOs and employees of the office of Sakrebulo require training on gender equality issues;
- The 'Women's Room' has no status within the structure of the City Hall and is not regulated by a City Hall legal act. As a result, it's often perceived as merely a part of the City Hall structure and a municipal service;
- The employment status of 'Women's Room' managers varies across municipalities - some are professional civil servants (in the municipalities of the Autonomous Republic of Adjara and Kakheti), while others are employed under labour contracts (in the municipalities of the Kvemo Kartli region);
- In order to make a decision regarding the "women's room", the heads of the municipalities are waiting for instructions/recommendations from the central government, despite the fact that the self-government is independent and can determine the status of the "women's room" on its own;
- Attitudes towards the 'Women's Room' among City Hall officials and civil servants are mixed: the services offered by the 'Women's Room' are generally accepted and supported, but its name sometimes attracts skepticism;
- Accountability of the "Women's Room" manager in the City Hall is not provided, and there is no system in place to evaluate the manager's performance by relevant supervisor.
-
- the existing human resources are not enough for the effective provision of services by the "Women's Room" - only one person is employed;
- Lack of budget funds dedicated to gender equality poses a challenge for effectively implementing the activities outlined in the 'Women's Room' action plan.

Additional tools for citizen participation

The municipality's forms of participation are not limited to those stipulated by the code. Both the Mayor and the City Council have the authority to introduce forms of participation that do not conflict with existing legislation.

In 2017, with financial support from the Open Society Foundation (Georgia) the Local Self-Government Index (www.lsgndex.org) was developed by the Centre for Consultation and Training (CTC), the Institute for the Development of Freedom of Information (IDFI), and the Center for the Development of Governance Systems (MSDC). This index evaluates the transparency, citizen participation mechanisms, and practices of all self-governing bodies. The data from the index shows that participation and transparency indicators in the target regions (Samtskhe-Javakheti and Kvemo Kartli) are significantly lower than the overall national indicator. The latter is already quite low, standing at 24% in the component of citizen participation and transparency (see Figure #1, #2, #3).

Picture #1 - Samtskhe-Javakheti



Picture #2 - Kvemo Kartli

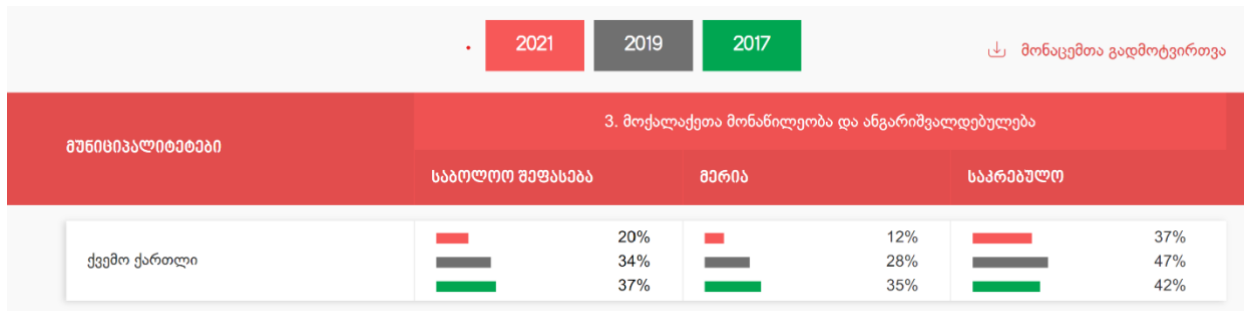
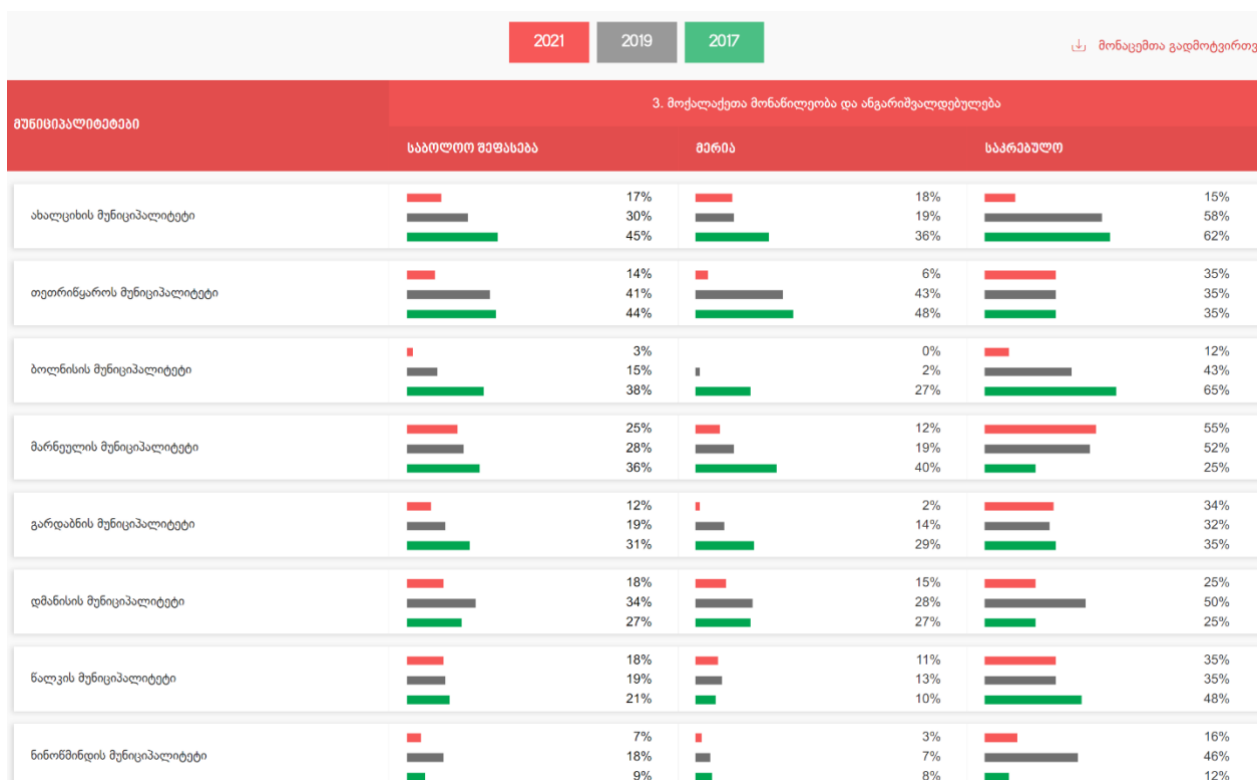


Figure #3 – 8 target municipalities



From the focus group discussions conducted with civil society organizations as part of the baseline study and context analysis of existing social services in Samtskhe-Javakheti and Kvemo Kartli, the main barriers to participation identified are as follows:

- ✓ The population is not provided with information in a language they understand. A significant number of citizens do not even speak the state language at a conversational level.
 - *" Teaching the Georgian language in kindergartens is problematic, it is either not taught at all or not taught properly due to staffing issues it is either not taught at all or not taught properly due to staffing issues" (focus group record, representative of a civil society organization).*
- ✓ Information and decision-making processes are not transparent;
 - *"Municipalities do not possess information about the specific needs of certain groups or how to meet these needs, including overcoming barriers to allow for integration and reintegration into society, and for these groups to enjoy the benefits that the rest of us take for granted. This lack of information leads to fragmented social activities conditioned by incorrect approaches" (focus group record, representative of a civil society organization).*
- ✓ Women are a particularly discriminated group in the participation process, considering the existing religious and ethnic context;
 - *" No one ever meets women." News, information in general, is received only from men. As a rule, men decide who women will vote for in elections " (focus group record, representative of a civil society organization).*
- ✓ Low level of general education;
- ✓ There is no connection between the service provider and the population/community receiving the service;
- ✓ The procedures for holding the General Assembly of a settlement are overly complex and formalized. As a result, the government does not effectively utilize this tool for citizen participation in decision-making, nor does it offer citizens tangible leverage in this process, although all target municipalities have approved the statute of the general assembly.
- ✓ Difficult social and economic background, which conditions the demotivation of citizens;
 - *Many families have been torn apart due to social issues. Many women lack education and thus have to leave their children at the father's house because a woman who is a victim of violence often returns to her biological parent."*
 - *"Last year, we assessed the needs of about 30 villages in the Ninotsminda-Akhalkalaki municipality. The majority of these needs were related to social issues. Specifically, they were concerned with roads, natural gas, drinking and irrigation water, and communication with local self-government." (Excerpt from a focus group discussion, representative of a civil society organization).*
- ✓ A complete lack of information about the forms and mechanisms of citizen participation;
 - *I would like to say individuals with disabilities often find it challenging to communicate with local self-government. Their applications or any form of requests they make are often not taken seriously." (focus group record, civil society organization representative).*

The findings of the baseline study highlight a low rate of public participation in local-level decision-making, which aligns with the aforementioned reasons. According to 40% of survey respondents, citizens do not participate in local self-government decision-making (Kvemo Kartli - 53%, Samtskhe-Javakheti - 27%) (see table #13).

Table #13

To what extent do citizens participate in the decision-making process at the local self-government level? (regional context)	Samtskhe-Javakheti (N=600)	Kvemo Kartli (N=600)
They do not participate at all	7.6%	26.6%
Their non-participation is more than their participation	19%	26.8%
Equally - Their participation and non-participation are about equal	19.2%	17.7%
Their participation is more than their non-participation	24.4%	11.2%
They fully participate	9.6%	1.9%
I Prefer Not to Answer / I Find it Difficult to Answer	20%	15.8%

The survey revealed that, according to 27% of respondents, there is no connection between local-level decision-making and the population's needs (Samtskhe-Javakheti - 16%, Kvemo Kartli - 37%). Every third respondent indicated that there are generally no measures aimed at increasing the involvement of ethnic minority representatives in local government decision-making. According to the population, it is important to organize more frequent meetings with citizens, allocate more funds to solve municipal problems, and keep the public informed about current processes.

The survey revealed that communication between the population and local self-government bodies is limited: a majority of respondents (82%) had not contacted them in the last two years to address a specific issue (Samtskhe-Javakheti - 84%, Kvemo Kartli - 80%). Those with the opposite experience reported communication on the following issues: improvement of conditions for various social/vulnerable groups (disabled, children, elderly, homeless, internally displaced persons), infrastructural problems (gas supply, water supply, electricity, etc.), social issues (social assistance, unemployment, etc.), and health care-related issues (see Table #14). Notably, 40% of respondents reported that self-government had not resolved any of their problems (Samtskhe-Javakheti - 36%, Kvemo Kartli - 42%).

Table # 14

In the last 2 years, what issue(s) have you addressed to the local government? (regional context)	Samtskhe-Javakheti (N=98)	Kvemo Kartli (N=117)
Improving the environment related to different social/vulnerable groups (disabled, children, elderly, homeless, internally displaced persons)	15.2%	12.4%
Infrastructure problems (gas supply, water supply, electricity, etc.)	27.6%	16.8%
Improvement of the territory (removal of waste, landscaping, etc.)	5.8%	9.4%
Social issues (social assistance, unemployment, etc.)	33.1%	23.5%
Issues related to health services	15.3%	22.8%
House/land registration	1%	6.3%
Other	1.3%	8.9%
I Prefer Not to Answer / I Find it Difficult to Answer	0.8%	-

Moreover, over the past year, the majority of respondents (57%) did not participate in any civic/public activities, particularly in Samtskhe-Javakheti (65%), compared to Kvemo Kartli (50%). Focus group discussions revealed that the main reason for the population's lack of involvement in local government implementation is the lack of information about their rights, specifically how and in what ways they can participate. According to some discussion participants, public participation tends to be purely formal and it's difficult to exert real influence. Consequently, the population is caught in a cycle of nihilism, which discourages engagement. The socio-economic status of vulnerable respondents, long distances to reach the centre, language barriers, and a low level of integration all pose obstacles to participation. Similar reasons for non-participation in civic/public activities were identified in the quantitative component of the survey: lack of time (21%), and the feeling that the respondent's activities wouldn't make any difference (Samtskhe-Javakheti - 24%, Kvemo Kartli - 24%) (see Table #15). It's important to note that, according to both local government and civil society organization members, meetings of the General Assembly of a Settlement should become the primary platform for communication with the population.

Table #15

Why do you think you have not participated in any civic activities in the last 1 year? (regional context)	Samtskhe-Javakheti (N=384)	Kvemo Kartli (N=302)
Due to a lack of time	16.3%	26.5%
I felt that my actions wouldn't bring about any change.	24%	23.8%
I don't have sufficient information about my rights	17.5%	8.8%
I believe that it's the local government's responsibility to address these issues	20.7%	25.2%
I believe that non-governmental organizations should take care of these issues	4%	1%
I believe that non-governmental organizations should address these issues		
Other	1.8%	0.9%
I Prefer Not to Answer / I Find it Difficult to Answer	15.7%	13.9%

The interview with the representative of the Public Defender was insightful. They echoed the sentiments of CSO representatives, indicating that the language barrier hinders participation

and also highlighted the low level of integration between different ethnic groups. Additionally, the lack or absence of communication channels between municipalities and the population was identified as a problem. Social programs are established not through participation but through lobbying by influential and active interest groups. Municipalities are making efforts to rectify the situation, but these measures are insufficient, and institutional changes are necessary. These changes include functional modifications of the relevant service in the City Hall (social service) and enhancing their roles in evaluating social programs. Increasing the efficiency of councils working on social issues is also crucial, which is significantly related to increase in the representation of program beneficiaries and their rights-bearers on such councils. Moreover, it is vital to increase the number of ethnic minority representatives in local self-government bodies and advisory councils. These proposed institutional changes will significantly impact the effectiveness of the councils of persons with disabilities and gender equality in the municipalities.

The representative of the Department of Civic Equality at the Office of the State Minister of Georgia, with whom an in-depth interview was conducted, identifies the language barrier as the main hindering factor to reconciliation and civil equality. In the representative's opinion, *"consultative/advisory councils formed within the office of the Governor in the Kvemo Kartli and Kakheti regions, which have been functioning since 2017 and include both local self-government representatives and non-governmental organizations, provide an excellent platform for communication."* However, it should be noted that this platform primarily brings together the Governor, the mayors of all relevant municipalities, the chairman and deputy Chairman of the municipal Sakrebulo, and does not necessarily facilitate citizen participation. However, the representative believes that *"active citizens are indeed involved. While it may not be all citizens, those who are interested in current issues actively participate. We often travel to the regions, meet with villagers, have meetings with local self-governments, and in many instances, formats that allow citizen participation are implemented, giving them an opportunity to express their opinions."*

➤ **Accountability**

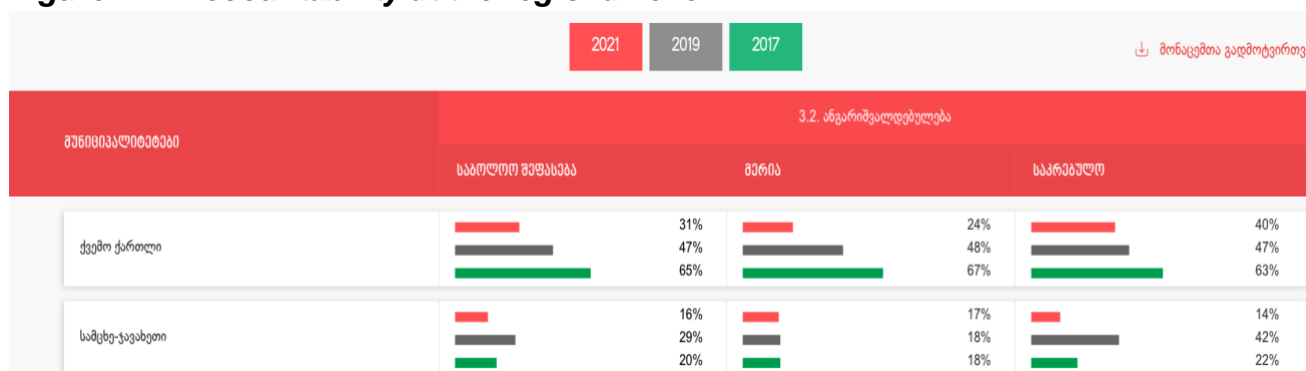
The Gamgebeli/Mayor of a municipality and members of a municipality Sakrebulo are obliged, under the respective resolution of the municipality Sakrebulo, to hold public meetings with the constituents of the municipality and deliver a report to them on the work performed and answer questions put by the municipality constituents during the discussion of the report.

A constituent registered in the territory of a municipality has the right to attend, without any limitation, the discussion of the public report of the Gamgebeli/Mayor and of a member of the municipality Sakrebulo.

Relevant municipal bodies are obliged to ensure the publication of reports, provided for by the Law, on the work performed by the municipality Gamgebeli/Mayor and by a member of the municipality Sakrebulo.³⁴

As highlighted by representatives of local civil society organizations in focus groups, *'the plans are quite ambitious and well conceived, but the municipal bodies fail to report on their implementation at all. The purpose of the Gender Equality Council's existence isn't apparent, as it's not visible what they are doing.'* The same is confirmed by the local self-governance index - www.lsgindex.org. In reality, the requirements of the Code are not adhered to, and elected individuals in municipalities fail to meet even the minimum requirements for accountability. In Shida Kartli's municipalities, only 31% of the stipulated requirements by the accountability law and good practice were met in 2021, a stark drop compared to 2017 (65%). In the municipalities of the Samtskhe-Javakheti region, the fulfilment rate is even lower, standing at 16% (see Figure #4).

Figure #4 - Accountability at the regional level



Also, there is an issue of expenditure duplication in municipalities – identical programs that are implemented by the state at the central level are also funded. For instance, the Marneuli municipality finances the purchase of wheelchairs for severely disabled individuals, even though a similar program is already implemented by the central government in the form of voucher financing

- **Non- discrimination**

At the legislative level in Georgia, numerous laws have been enacted which prohibit all forms of discrimination by public officials at either the central or local level during proceedings. Additionally, the Government of Georgia has adopted further laws aimed specifically at certain vulnerable groups (women, children, national minorities, persons with disabilities) with the goal of eliminating all forms of violence and discrimination.

According to the Public Defender's 2021 report, titled "Compliance of Social and Healthcare Programs of Self-Governing Bodies with the Principle of Equality", there are numerous instances of discrimination within the social and healthcare programs of local municipalities.

³⁴ Organic Law of Georgia, Local Self-Government Code – Article 88

This discrimination serves to reinforce stereotypes against specific groups and/or places certain groups of people in unequal conditions.

Within social and healthcare programs implemented by local governments, the use of terms that encourage discrimination and reinforce stigma is evident. For example, terms such as "epileptic", "Parkinson's", "autism", "cerebral palsy" (Bolnisi municipality), "wheelchair-bound" (Gardabani municipality), "deaf" (Bolnisi municipality), "handicapped" (Gardabani municipality), "gluten disease" (Dmanisi municipality), and others, are used. The use of these incorrect terms contributes to the deepening of existing stigmas against the mentioned groups.

Furthermore, it constitutes a discriminatory attitude to allocate funds unevenly among equally vulnerable groups based on arbitrary ranking. For instance, this can be seen when comparing individuals with severe disabilities and those who are blind, who also fall under the category of severe disabilities. Blindness is merely one diagnosis among many. The status of an individual should also be determined based on factors such as their degree of overall limitation. However, an unjustified disparity can be seen in the distribution of funds in municipalities like Bolnisi and Dmanisi, where blind individuals are given priority.

Instances of gender-based discrimination can also be found in local self-government programs. For example, financial support is exclusively directed to single mothers, thereby excluding single fathers from receiving corresponding benefits (Marneuli Municipality).

Furthermore, it is discriminatory that in many instances a vulnerable group benefiting from one program is unable to benefit from another municipal program. This approach fails to take into account the multiple aspects of human vulnerability, thereby impeding the full realization of rights (Gardabani and Tetrtskaro municipalities).

Upon analysing municipal programs, it becomes evident that numerous potentially vulnerable interest groups, who may require social assistance, are simply overlooked. As noted by a participant in a focus group conducted with local civil society organization representatives, municipal programs tend to only consider the interests of those groups that are active and wield some influence at the local level. The absence of a robust institutional mechanism at the municipal level for various interest groups to voice their needs heightens the risk of the programs becoming discriminatory.

- **Empowerment**

Municipalities, either as mandated by law or as an embodiment of good practice, have established municipal councils for persons with disabilities, civic advisory councils of the Mayor, and 'women's rooms'. However, these structures are seen as ineffective, as indicated by the majority of respondents involved in the quantitative component of the research. Notably, the Local Self-Government Index (www.lsgindex.org) shows that as of 2021, in eight

target municipalities, there was zero percent utilization of additional participation mechanisms beyond those required by law. The situation is almost identical with regards to initiatives submitted by the Civic Advisory Council to the Mayor, as well as mandatory submission of strategic documents by the Mayor to the Civic Advisory Council, with the partial exception of Akhaltsikhe Municipality. According to a focus group conducted with local civil society organization representatives, it appears that these councils exist mainly formally: “We are aware that there are gender and disability councils in local municipalities, but their activities are inadequate to be effective. For instance, women who have been victims of violence often reach out to us. Sometimes, their problems can be resolved simply by providing information about the existence of shelters and various services. The municipal councils could be more engaged and proactive in this respect, ensuring the inclusion of women and persons with disabilities in various services. In the case of persons with disabilities, the council's effectiveness has been particularly compromised over the last two years. The pandemic prevented the holding of regular meetings, and adequate provisions were not made for remote organization.”

- **Legality**

The conditions for accessing social and healthcare programs provided by local self-governments, in many instances, contradict the provisions of Article 33 of the Constitution of Georgia. This article asserts that Citizens of other states and stateless persons living in Georgia shall have rights and obligations equal to those of citizens of Georgia.

Similarly, according to Article 25, Clause 2 of the Law of Georgia “On the Legal Status of Aliens and Stateless Persons”, all aliens in Georgia shall be equal before the law.

Additionally, Article 31 of the same law stipulates that aliens permanently residing in Georgia shall enjoy the same rights to assistance, pension, and other forms of social security as the citizens of Georgia. Yet, most municipal program records stipulate that the person applying for the program must be a citizen of Georgia or a person registered in the specified municipality before the given deadline.

According to findings from focus groups and in-depth interviews conducted as part of our research, this issue poses a particular problem for Meskhs residing in Samtskhe-Javakheti - *“Meskhs living in Samtskhe-Javakheti cannot be classified as an ethnic minority because they are, in fact, Georgians. The repatriation process commenced following specific commitments, but their situation is quite complicated. They struggle to acquire citizenship due to language barriers, as they do not know the state language well enough to pass the citizenship test. Even with simplified procedures that were introduced, many could not obtain citizenship within the given timeframe. This statelessness further complicates their access to services. Many health and education programs are linked to citizenship, and thus they have to pay higher fees for these services. Ultimately, all these challenges may force these repatriated individuals to leave Georgia again.”*

Within the scope of focus groups of the baseline study, the impact of the coronavirus pandemic on local government activities was evaluated. It was revealed that vulnerable individuals received one-time assistance, such as monetary assistance, provision of food products, etc. Therefore, the respondents were generally satisfied with the attention shown by the local government during this period. However, according to some respondents, the assistance provided by the government did not adequately address the needs that arose during the pandemic.

As part of the quantitative aspect of our baseline study, a survey revealed that 39% of respondents are satisfied with the work of self-governing bodies (48% in Samtskhe-Javakheti and 30% in Kvemo Kartli) (see table #16). Nonetheless, issues were identified related to employees' level of qualification, nepotism, and passive communication with the public.

Table # 16

In general, how satisfied are you with the work of local self-government bodies? (regional context)	Samtskhe-Javakheti (N=600)	Kvemo Kartli (N=600)
Very dissatisfied	3.7%	10.9%
More dissatisfied than satisfied	10.7%	24.7%
Equally satisfied and dissatisfied	36%	30.5%
More satisfied than dissatisfied	37.1%	17.7%
Very satisfied	10.4%	12.5%
I prefer not to answer	2%	3.8%

According to the regression model, the respondents who express greater satisfaction with the municipality's actions are: a) those residing in urban areas; b) those belonging to the older age group; c) those who have sought assistance from the local self-government concerning healthcare services in the past two years; d) those who have attended a community meeting in the past one year.

Chapter 2. Evaluation of existing utility infrastructure in target municipalities

The population involved in the quantitative component of the baseline study evaluated the state of the municipal infrastructure in the municipality/settlement. Although focus group participants acknowledged improvements in utility and road infrastructure in recent years, a malfunctioning irrigation water system remains a significant issue for those engaged in agriculture. In most settlements, the centralized irrigation system is non-operational (72%) (85% in Samtskhe-Javakheti, 67% in Kvemo Kartli). Additionally, Kvemo Kartli faces drinking water issues during summer, and a disorganized sewage system poses ecological risks to some settlements. A majority of quantitative study respondents (65%) report the absence of a central sewage system (52% in Samtskhe-Javakheti, 78% in Kvemo Kartli).

The majority of survey participants (97%) have access to electricity 24 hours a day (98% in Samtskhe-Javakheti, 93% in Kvemo Kartli), with satisfactory capacity in both winter and other seasons. The central gas pipeline primarily serves the surveyed settlements (79% in Samtskhe-Javakheti, 88% in Kvemo Kartli). Overall, 78% of respondents express satisfaction with the gas supply service (See Table #17).

Table #17

How satisfied are you with the gas supply (meaning both central gas supply and gas cylinders)? (regional context)	Samtskhe-Javakheti (N=567)	Kvemo Kartli (N=579)
Very dissatisfied	4.5%	5.1%
More dissatisfied than satisfied	9.2%	4.7%
Equally satisfied and dissatisfied	7.5%	11.8%
More satisfied than dissatisfied	29.4%	22.1%
Very satisfied	49%	55.9%
I prefer not to answer	0.3%	0.4%

Over half (53%) of the participants in the quantitative study rely on tap water in their homes (58% in Samtskhe-Javakheti, 48% in Kvemo Kartli) for their household water needs, with more than a tenth using water from the water company's common tap situated outside their residences. According to respondents, drinking water is mostly available continuously (62% in Samtskhe-Javakheti, 41% in Kvemo Kartli) and is generally of good quality (41%). The amount of water received for household use was deemed sufficient, and the water fee, affordable.

A significant portion of the participants in the quantitative study reported that their **streets were regularly cleaned** and **waste disposed of**, with this practice occurring almost daily. Samtskhe-Javakheti, with 48% reporting regular street cleaning, stands out compared to Kvemo Kartli (20%). Consequently, the majority of respondents (an average of 74%) express satisfaction with these utility services.

Chapter 3. Climate change and health problems caused by it

The majority of respondents (71%) of the baseline study's survey demonstrate awareness of climate change (74% in Samtskhe-Javakheti and 68% in Kvemo Kartli). A significant portion of these respondents have observed environmental changes in the form of increased frequency of droughts, rains, and winds. In Kvemo Kartli, droughts are most prevalent (27%), while in Samtskhe-Javakheti, it's wind frequency (24%).

The majority of respondents do not believe that climate change leads to adverse health-related effects such as the proliferation of various infections, emergence or spread of viral diseases, increase in cancer rates, or increased mortality. However, approximately one in three respondents attribute an increase in heart disease (32%) and stroke (31%) to the negative impacts of a changing climate (See Table #18).

Table #18

In your opinion, does climate/environmental change in your place of residence (city/municipal center/township/rural) cause any of the following adverse health effects? (Regional perspective)		It does not cause at all	2	3	4	unequivocally causes	I prefer not to answer / I find it difficult to answer
The spread of various types of infections, transmitted by insects and invertebrates, such as malaria among others.	Samtskhe-Javakheti (N=448)	28.8 %	27.9 %	16%	6.7%	9.7%	11%
	Kvemo Kartli (N=412)	31.6 %	26.2 %	17.6 %	6.1%	6.4%	12%
Origin/distribution of viral diseases (influenza, hepatitis C, chicken pox, etc.)	Samtskhe-Javakheti (N=448)	24.9 %	20.6 %	20.6 %	7.4%	15%	11.4 %
	Kvemo Kartli (N=412)	25.5 %	27.2 %	22.1 %	7.1%	7.1%	11%
Increase in heart disease cases caused by a negatively changed environment (polluted water, air, food, high heat, etc.)	Samtskhe-Javakheti (N=448)	16.2 %	15.7 %	28.8 %	14.8 %	17.8 %	6.7%
	Kvemo Kartli (N=412)	13.7 %	19.6 %	28.4 %	19.6 %	11.5 %	7.3%
Increase in stroke cases caused by a negatively changed environment (polluted water, air, food, high heat, etc.)	Samtskhe-Javakheti (N=448)	15.2 %	17%	26.6 %	17.2 %	15.2 %	8.7%
	Kvemo Kartli (N=412)	12.5 %	16.2 %	30.9 %	19.9 %	10.3 %	10.3 %

In your opinion, does climate/environmental change in your place of residence (city/municipal center/township/rural) cause any of the following adverse health effects? (Regional perspective)		It does not cause at all	2	3	4	unequivocally causes	I prefer not to answer / I find it difficult to answer
Increase in cancer cases caused by a negatively changed environment (polluted water, air, food, high heat, etc.)	Samtskhe-Javakheti (N=448)	19.3 %	19.5 %	24.7 %	12.1 %	15.7 %	8.7%
	Kvemo Kartli (N=412)	11.1 %	12.3 %	39.1 %	15.2 %	8.4%	14%
Increase in mortality rates	Samtskhe-Javakheti (N=448)	18.2 %	24.5 %	19.6 %	13.5 %	12.8 %	11.5 %
	Kvemo Kartli (N=412)	12.5 %	13.7 %	34.3 %	14.2 %	9.3%	15.9 %

The majority of respondents (60%) view climate change as a significant issue for their region (49% in Samtskhe-Javakheti and 72% in Kvemo Kartli). Conversely, it's worth noting that about one in five individuals interviewed in Samtskhe-Javakheti perceive environmental changes as insignificant.

Chapter 4. Main Findings and Recommendations³⁵

Findings

- Social protection of the population is a form of discretionary power of the municipality (with the exception of providing shelter to homeless individuals), implying that local self-governments are not directly obligated to ensure social protection of the population. This scenario places vulnerable groups at a disadvantage, hindering the effective protection of their rights and interests.
- The 8 target municipalities, on average, spend 4.82% of their revenues to social assistance programs.³⁶ Primarily, these resources are dedicated to categories of population's medical support and one-time social assistance.
- The main approach of social assistance predominantly consists of one-time monetary assistance rather than focusing on the development of systemic support mechanisms.
- The service providers for the Sub-Program for supplying support items are predominantly located in the capital, hence individuals seeking its benefits often have to travel to Tbilisi from the regions.
- Direct target groups of social assistance are not women and national minorities;
- Tsalka municipality is the only municipality having all of its existing social programs as one-time monetary or non-monetary assistance.
- In many instances, municipal social programs are discriminatory, according to the program record, with discriminatory terms used. Without any justification one specific group is often favoured over another, even when they are in essentially identical circumstances.
- Municipal social programs often duplicate central social programs, with local regional specifics not reflected. For instance, municipalities co-finance medications or medical procedures for people with health issues, which are already largely funded by the central government. As a result, the needs of other vulnerable individuals are less studied and suitable programs are not developed.
- Central social programs are fragmented in target municipalities due to inadequate staff or resources necessary to achieve the programs' set minimum standards.
- The service providers for the central social programmes are primarily experienced organizations registered in Tbilisi, which have opened branches in the target municipalities. In fact, local organizations show no interest in registering as providers of central social programs, mainly due to the lack of necessary financial and human resources.
- It's impossible to establish a cause-and-effect relationship between the form of social assistance and its outcome from social assistance programs.

³⁵ The findings listed below apply to all target municipalities. Instances where a finding pertains to a specific municipality are distinctly indicated in the text.

³⁶ Data are calculated as of May 29, 2022.

- Social assistance is provided to selective interest groups and specific groups (persons with disabilities, people with healthcare issues, homeless and poor individuals, children) are favoured without appropriate justification.
- Effective mechanisms for the participation of program beneficiaries and civil society organizations representing their interests are not considered in the decision-making process during the drafting of social assistance programs.
- Evaluation of municipal budget programs reveals that, in some cases, indicators and criteria for measuring program results are either not defined or are too general. Municipalities do not measure and/or publicize the final results of the programs;
- The decision-making process for social assistance is not based on a predetermined methodology, and/or the methodology is too general, only describing the parties involved in the decision-making process.
- In the advisory councils for vulnerable groups, a large majority are again civil servants from City Hall, with these councils being led by high political officials of the municipality. Beneficiaries of social assistance programs and organizations defending their rights are underrepresented.
- Municipalities do not recognize the obligation to create organizational and material-technical conditions towards citizen participation and transparency (including online petition, remote information service about social programs tailored to the user, the possibility of remote application submission, proactively informing beneficiaries during budget project review through mayor's representatives' offices, and enabling their direct participation in sessions, etc.). They also ignore the obligation to have a budget program that supports citizen participation, which would create more opportunities for the participation of vulnerable interest groups.

Recommendations

5 main working principles of human rights-based approach	Recommendations
Participation	<ul style="list-style-type: none"> • Develop a methodology for mainstreaming human rights and participation tools into local programs and budgets; • Municipal social and health services should be developed based on research and analysis of local needs, while creating suitable conditions to ensure effective participation of rights-holder groups; • Allocate appropriate resources to various councils in local municipalities to effectively implement the plans and activities developed by the councils;
Accountability	<ul style="list-style-type: none"> • Enhance cooperation between municipalities and the Public Defender's Office to establish an effective mechanism of accountability. • Increase the involvement of relevant parliamentary committees and councils in monitoring the implementation of the accountability mechanism in local self-governments.
Non-discrimination and Equality	<ul style="list-style-type: none"> • According to the requirements stated in the Law of Georgia "On Elimination of All Forms of Discrimination," to provide training for local self-government personnel responsible for program development aimed at eliminating discriminatory practices. Additionally, staff members should receive training on identifying the needs of vulnerable individuals and establishing priorities to ensure that during the allocation of finances and other resources, there is no discriminatory treatment or bias against any particular group.
Empowerment	<ul style="list-style-type: none"> • To initiate, at the local level, pilot projects, which will be aimed at the empowerment of ethnic and religious minorities as well as women; • To establish additional legal and practical safeguards within the policy and budget planning-implementation process, in order to enhance the capacity and participation of civic advisory councils; • To allocate the necessary resources, such as finances and space, to meet the program standards and initiate the service, in order to develop central social programs at the municipal level;
Legality	<ul style="list-style-type: none"> • The Local Self-Government Code should be harmonized with the Constitution of Georgia, relevant Georgian laws (e.g., On the Elimination of All Forms of Discrimination), and international agreements.

Annex #1 List of organizations participating in the focus group:

- Social Justice Centre (SJC);
- Association of Young Lawyers of Georgia (GYLA) ;
- Democracy Research Institute (DRI) ;
- Accessible Environment for Everyone (AEE);
- Union "Sapari";
- Tolerance and Diversity Institute (TDI) .

Annex #2 Tools Used in Qualitative Research

Baseline study and Context Analysis of Existing Social Services in Samtskhe-Javakheti and Kvemo Kartli

An In-Depth Interview Tool

(for Representatives of the Office of the Public Defender and the Office of the Georgian State Minister for Reconciliation and Civil Equality)

Hello, my name is _____ (interviewer's first and last name), and I represent the Institute for Social Research and Analysis, a research organization. Our organization aims to examine the activities of local self-government and civil society organizations in two municipalities of Samtskhe-Javakheti (Akhaltzikhe and Ninotsminda) and six municipalities of Kvemo Kartli (Marneuli, Dmanisi, Bolnisi, Tsalka, Tetritskaro, and Gardabani). Additionally, we will analyse the accessibility of various services to the population, including vulnerable groups, and their involvement in local processes. This research has been commissioned by the Caucasus Environmental Non-Governmental Organizations Network (CENN).

The interview will last approximately one hour, and it will be recorded to ensure all valuable information pertinent to the research is included in the final analytical report. Your privacy will be protected, and the records will not be made public.

Thank you very much for participating in the research.

- Please introduce yourself. Tell us your name, which organization you represent, and your position and duties.

Section 1. Vulnerable groups

1. Please identify the types/categories of vulnerable groups in Georgia.
 - ✓ Why do you consider this/these group(s) the most vulnerable?
 - ✓ What do you think are the most important challenges facing these groups? why?
 - ✓ Which rights of which vulnerable groups are mainly violated?

Section 2. Municipal/Central Services

2. What kinds of social programs/services are mainly available for the vulnerable groups you mentioned at the central, regional, and local levels?
3. In your knowledge, how affordable is access to municipal services considering the needs of the local population, including vulnerable groups? Which services require improvement in the municipality/region?
4. Please discuss the key barriers (if any) that local people, including members of vulnerable groups, face in accessing various social services, health services, educational services, utilities, employment, etc. during the process of receiving/searching.
5. In your opinion, which rights of vulnerable groups do the central and municipal programs contribute to realizing?
6. How adequately do existing social and health services meet the needs of vulnerable groups? Why do you think so?
7. According to you, what impact has the pandemic had on vulnerable groups in terms of receiving services? What actions did regional/local governments and civil society organizations take?

Section 3. Improving Accessibility

8. In your opinion, are social and health services equally accessible to vulnerable and non-vulnerable groups? Please discuss specific issues. If there is inequality, what effective steps should be taken?
9. Please evaluate the local authority's communication strategy on services for vulnerable groups.
10. In your opinion, what factors should be taken into account when developing health and social programs so that the services offered are perfectly suited to the needs of beneficiaries, including vulnerable groups?
11. How can existing services/programmes/policies be improved to enhance the effectiveness and efficiency of services that ensures the well-being of vulnerable groups and other local communities more effective?

Section 4. Involvement of citizens, including vulnerable groups, in the implementation of local government

12. In your opinion, which forms of participation in the implementation of local self-government are the most common? why
13. In your opinion, how effective is citizen involvement in solving existing problems, especially in relation to vulnerable groups?
14. What do you think are the main reasons why citizens refuse to participate in the implementation of local self-government?
15. What do you think could encourage and further support community involvement in decision-making and advocacy on important issues related to social services?

Section 5. Evaluation of activities of civil society organizations in relation to vulnerable groups

16. In your opinion, what has been the role of civil society organizations in the process of improving and increasing access to necessary services for the population, including vulnerable groups?
17. In which main areas have civil society organizations made a significant contribution to the development of social services? Can you provide specific examples?
18. How do you believe civil society organizations benefit vulnerable groups? Are there any potential negative aspects in their work?

Section 6: Evaluation of the activities of the Public Defender's Office in relation to vulnerable groups *(Note: this section is applicable only to the representative of the Public Defender's Office)*

19. What has been the role of the Public Defender's Office in the process of improving and increasing access to necessary services for the population, including vulnerable groups?
20. In which main areas has the Office of the Public Defender made a significant contribution in terms of increasing the availability of social services? Can you provide specific examples?
21. In your opinion, what more can the Office of the Public Defender do to further increase access to social services for vulnerable groups?

Section 7. Evaluation of the activities of the Office of the State Minister for Reconciliation and Civil Equality of Georgia in relation to vulnerable groups. *(Note: this section is applicable only to the representative of the Office of the State Minister for Reconciliation and Civil Equality of Georgia)*

22. What has been the role of the Office of the State Minister of Georgia for Reconciliation and Civil Equality in the process of improving and increasing access to necessary services for the population, including vulnerable groups?
23. In which main areas has the Office of the State Minister of Georgia for Reconciliation and Civil Equality made a significant contribution to increasing the availability of social services? Can you provide specific examples?
24. In your opinion, what more can the Office of the State Minister of Georgia do in matters of reconciliation and civil equality to further increase access to social services for vulnerable groups?

- At the end of the interview, is there anything you would like to add to the topics we discussed?

Goodbye. Thank you very much!

Baseline Study and Context Analysis of Existing Social Services in Samtskhe-Javakheti and Kvemo Kartli

Focus group tool for representatives of civil society organizations working on human rights and providing social services

Hello, my name is _____ (interviewer's first and last name), and I represent the Institute for Social Research and Analysis, a research organization. Our organization aims to examine the activities of local self-government and civil society organizations in two municipalities of Samtskhe-Javakheti (Akhaltsikhe and Ninotsminda) and six municipalities of Kvemo Kartli (Marneuli, Dmanisi, Bolnisi, Tsalka, Tetritskaro, and Gardabani). Additionally, we will analyse the accessibility of various services to the population, including vulnerable groups, and their involvement in local processes. This research has been commissioned by the Caucasus Environmental Non-Governmental Organizations Network (CENN).

The discussion will last approximately 1 hour and 30 minutes and it will be recorded to ensure all valuable information pertinent to the research is included in the final analytical report. The confidentiality of the respondents will be protected and the records will not be made public.

Thank you for participating in the research!

Introduction - Getting to Know the Discussion Participants:

Please provide us with some general information about yourself.

- What is your name?
- Which organization do you represent?
- Where is your organization geographically located?
- What issues or topics does your organization focus on?
- What is your position and what duties do you perform?

Part 1: Evaluation of Social and Health Services

1. How would you rate the state policy regarding vulnerable groups (such as individuals with disabilities, ethnic minorities, the elderly, socially disadvantaged, etc.)?
2. What challenges and gaps exist in social services, healthcare services, infrastructure programs, educational services, utility services, etc., in the policy documents, guidelines, or action plans developed in these fields?
3. In your opinion, what steps should be taken to address the existing deficiencies?
4. Do you believe that social and health services are equally accessible to vulnerable and non-vulnerable groups? Please discuss specific gaps in both the central and municipal programs. In your opinion, what effective steps should be taken to address any inequalities?
5. Based on your knowledge, how do local and central governments plan, implement, and evaluate their services? Are there any service standards that guide them? How is service quality assessed/measured?
6. Please evaluate the local authority's communication strategy with respect to services for vulnerable groups.
7. In your opinion, what factors should be considered when developing health and social programs to ensure the services offered best meet the needs of beneficiaries, including vulnerable groups?

8. How adequately do existing social and health services respond to the needs of vulnerable groups? Why do you think so?
9. Based on your knowledge, what impact has the pandemic had on vulnerable groups (such as individuals with disabilities, ethnic minorities, etc.) in terms of receiving services? What have regional/local governments and civil society organizations done in response?
10. In your understanding, how accessible are existing social and health services for the beneficiaries?
11. Please discuss the key barriers (if any) that locals, including members of vulnerable groups, face when searching for and accessing various social services, health services, educational services, utilities, employment, etc.
12. How can existing services/programs/policies be improved to make services that provide/protect the well-being of vulnerable groups and other local communities more effective and efficient?

Part 2: Citizen Participation, including Vulnerable Groups, in Local Government Implementation

13. What forms of participation in local self-government implementation do you believe are most common? Why do you think that is?
14. How effective, in your opinion, is citizen involvement in addressing existing challenges, particularly those related to vulnerable groups
15. What do you think are the main reasons why citizens refrain from participating in local self-government implementation?
16. What measures, in your opinion, could encourage and further support community involvement in decision-making and advocacy on crucial issues related to social services?

Part 3: Evaluation of the Activities of Civil Society Organizations in Relation to Vulnerable Groups

17. How do civil society organizations (CSOs) plan, implement, and evaluate services/activities in your opinion?
 18. What criteria do service-providing CSOs use to select priority target groups and issues?
 19. What forms of interaction do service-providing CSOs use when communicating with local populations? How effective are the existing methods of communication? What other methods could be considered?
 20. What has been/is the role of civil society organizations in improving and increasing access to the services required by the population?
 21. In which main areas have civil society organizations made a significant contribution to the development of social services?
 22. Could you provide specific examples of this?
 23. How, in your opinion, do civil society organizations benefit vulnerable groups? Conversely, are there any negative aspects to their work?
- At the end of the discussion, is there anything else you would like to add to the topics we have discussed?
 - Goodbye, and thank you very much!



**Context Analysis of
Existing Social Services in
Samtskhe-Javakheti and
Kvemo Kartli Using a Human
Rights-Based Approach**