

AT WHAT COST?

Financing of Specialised Services for
Gender-Based Violence Survivors in Albania



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Rights Come at a Cost

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CORE MESSAGE

Albania has significantly strengthened its legal framework on gender-based violence protection, but financing does not ensure its full implementation yet. The rights enshrined in law must be translated into costed services, dedicated budget lines, and adequate, sustainable, multi-year public funding. The main issue does not solely concern the amount spent, but whether the funds cover actual needs, quality standards, and the entire process of supporting survivors—from emergency protection to rehabilitation and sustainable reintegration.

Tirana, 2026

EXECUTIVE SUMMARY

This study analyses the financing and costing of specialized services for gender-based violence (GBV) prevention and addressing in Albania. It examines whether the legal, strategic, and budget frameworks are accompanied with adequate, sustainable, and traceable resources to ensure survivors' protection, rehabilitation, and reintegration, in compliance with the national legislation and the requirements of the Istanbul Convention.

The analysis covers the legal and strategic frameworks, public funding mechanisms, available spending for 2022–2024 and foreseen financial needs for 2026–2028. The cost estimate is based on the data on the six providers representing the main typologies of specialized services: the National Counselling Helpline for Women and Girls; the Lilium Crisis Management Centre for Sexual Violence Cases; one short-term emergency shelter; two long-term residential centres operated by civil society organizations; and one state-run residential centre.

Findings show that Albania has already established the key components of specialized services and has significantly strengthened the legal framework on protection against violence. However, financing mechanisms have not developed at the same pace. Financing remains fragmented across the central government budget, the Social Fund, local government budgets, and donor contributions, while several services lack dedicated budget lines and disaggregated data on allocations, disbursements, and actual expenditure.

The study does not provide an estimate of the general national cost because of the lack of complete, disaggregated, and verifiable data on all providers. In particular, the expenditures of emergency shelters at the municipality level are often included in the general budgets of social services, while the costs of Lilium Centre are integrated into the general budget of University Hospital Centre "Mother Teresa" (QSUT/UHCT). As a result, the estimates indicate the costs and financial needs of the six service providers reviewed and provide a methodological basis for the further development of a standardized costing system.

What the Study Shows and How the Estimate Should Be Interpreted

The study presents a structured analysis of the financing, expenditures, and financial needs of six selected providers of specialized services for gender-based violence. For each provider, the analysis examines available historical expenditures, financing arrangements, current capacity, demand for services, and the gaps that must be addressed to meet national standards and the requirements of the Istanbul Convention.

The estimate for 2026–2028 is carried out by combining two major components: a) basic expenditures necessary for service continuation and b) additional costs to close the identified gaps. The latter include, according to service typology: additional multidisciplinary staff, continuous operation, professional staff supervision, specialized healthcare, child services, legal support, interpreting and translation, transport, accessibility for disabled persons, security, data management, and support for reintegration after leaving the shelter.

In this regard, the study provides actual examples of how to calculate the cost of a specialized service based on standards, demand, and actual support package, not by relying only on historical expenditures or currently available funds. It also highlights the main factors determining the cost

and shows the gap between basic operation and necessary financing for the provision of a comprehensive, high-quality, accessible, and sustainable service.

However, the findings should be interpreted within the limitations of the sample and the available data. The six providers reviewed represent diverse service typologies and operate according to different institutional and financial models. Some are managed by civil society organizations and are financed primarily through donor projects; some receive partial support from the Social Fund or municipalities; whereas state services are financed from the public budget. Therefore, their cost structures are not fully comparable and cannot be used to calculate a sector-wide average.

The study does not provide an estimate of the general national cost of specialized services for GBV. Such a calculation is not possible at this stage, primarily because of the lack of disaggregated, standardized, and verifiable data across all service providers.

Although official documents highlight the presence of 13 emergency shelters at the municipality level, the information on their operational status, actual capacity, utilization level, beneficiary number, duration of stay, and package of provided services is incomplete.

With respect to Municipality budgets, emergency shelter expenditure is not foreseen under dedicated lines. The costs of staff, food, security, utility services, maintenance, and direct support to beneficiaries are often included in broader social services budgets. This makes it impossible to determine the actual cost of each shelter and calculate reliable costs per bed, per bed-night, or per beneficiary.

The Lilium centre presents an additional limitation. Its operational costs are integrated into the general budget of University Hospital centre “Mother Teresa” and are not reported under a dedicated cost centre. Therefore, the study was able to identify only certain additional needs and costs but not the complete cost of service operation.

Furthermore, in-kind contributions are not financially calculated in a consistent manner. The buildings made available by municipalities or public institutions, rent payment, utility services, maintenance, equipment, and administrative support comprise actual resources for service operation. The inability to monetize them results in an underestimate of the full cost of service provision and limits provider comparison.

Moreover, the data on the number of beneficiaries are not always comparable. Providers may report cases, persons, phone calls, counselling sessions, referrals, or residential stays. Without standardized information on bed-nights, intervention duration, case complexity, services received, and number of accompanying children, the total budget cannot simply be divided by the reported number of beneficiaries to generate a “cost per beneficiary”.

Therefore, the calculations made in the study should be understood as indicative costs for the providers reviewed and as examples of the implementation of a costing methodology. They provide an important basis for cost component identification, financial needs planning, and common standard development. The next step should be the collection of complete data from all providers, the verification of capacities and service use, the monetization of in-kind contributions, and the application of a unified methodology. Only after these conditions are satisfied can the calculation of the national cost be carried out reliably.

Main Study Conclusions:

- ✓ **There is a visible gap between guaranteed rights and the financing necessary for their implementation.** The legal framework foresees a broad package of services for survivors' protection, rehabilitation, and reintegration. However, such obligations are yet to be systematically translated into costed standards, unit costs, clear financial responsibilities, and dedicated budget lines.
- ✓ **The public financing of specialized services remains fragmented, partial, and not always traceable.** Resources are allocated among the central budget, Social Fund, transfers, and local budgets. For many services, public financing covers only certain staff salaries or limited operating expenses, without covering the full costs of service delivery, direct support, and reintegration.
- ✓ **Service sustainability is heavily dependent on civil society organizations and donor funding.** Specialized organizations, especially women's organizations, deliver a significant part of services and cover major gaps in the public system. However, their financing is primarily based on short-term projects, which limits staff retention, service quality investments, and multi-year planning.
- ✓ **Operating a specialized service requires far more than merely providing physical accommodation.** The main cost factors include multidisciplinary staff, 24-hour operation, individual case management, professional staff supervision, specialized healthcare, legal aid, child services, transport, security, and accessibility. Reintegration, including transitional housing, employment, and support after leaving, constitutes one of the least financed components.
- ✓ **The lack of standardized data hinders costing and needs-based planning.** There is no consistent gathering of information on capacity, service use, beneficiary number and profile, intervention duration, bed-nights, services received, and outcomes. As a result, it is difficult to calculate unit costs, estimate the demand, and assess financing adequacy.
- ✓ **Gender responsive budgeting is not fully integrated into GBV service financing.** Despite being established as a legal and procedural obligation, budgets are still primarily drafted on the basis of historical expenditures and available funds. The link between needs assessment, resource allocation, expenditure, and survivor outcomes remains weak.
- ✓ **Geographical coverage and service capacity are still insufficient and unequal.** Specialized services are concentrated in a limited number of areas, while women and girls in rural or remote areas face greater barriers. The operational status and actual capacity of municipal emergency shelters are not documented in a comprehensive and verifiable manner.
- ✓ **A shift is needed from project-based funding to sustainable service financing.** Specialized services should be integrated into the Medium-Term Budget Program through dedicated lines, program-based funding, and multi-year agreements. Financing should be linked to standards, actual demand, quality, accessibility, and outcomes achieved for survivors and their children.

Legal Framework: Expansion of Rights and Implementation Costing Gaps

Albania has significantly strengthened its legal framework on gender equality and protection from violence against women. Law No. 64/2025 "On Gender Equality" and Law No. 11/2026 "On the

Prevention and Protection from Violence Against Women and Domestic Violence” establish a broader and more integrated standard than the previous framework. Jointly, these laws require that guaranteed rights and services be accompanied with financial planning, sufficient human resources, quality standards, measurable indicators, and monitoring mechanisms.

Law No. 64/2025 establishes gender responsive budgeting as an obligation on central and local institutions throughout the budget cycle: from program planning and drafting to implementation, monitoring, evaluation, and auditing thereof. With respect to violence against women, this means that institutions should not report only the current amount of spending. They should assess the actual needs for services, expected number of beneficiaries, type and intensity of support, territorial coverage, minimum quality standard, unit cost, financing source, and the gap between needs and real allocation.

Law No. 11/2026 significantly broadens the scope of protection by including various forms of violence against women in both private and public life, including physical, psychological, sexual, and economic violence, technology-facilitated violence, sexual harassment, and violence against women in politics and electoral processes. The law establishes a victim-centred approach and requires that services be free of charge, prompt, easily accessible, confidential, and tailored to individual needs.

The support package is not limited to emergency intervention. It includes individual and risk assessments, information and referral, immediate protection, safe accommodation, health and psychosocial care, legal aid, economic support, child services, rehabilitation, reintegration, long-term housing, and employment assistance. The law further sets forth obligations related to the functioning of Coordinated Referral Mechanisms, training of professionals, data collection, cross-institutional coordination, and outcome monitoring.

However, the expansion of rights is yet to be accompanied with a complete implementation costing. Laws establish what must be guaranteed, but do not sufficiently provide for the following:

- ✓ minimum costed package for each service typology;
- ✓ cost standards for units, bed, bed-night, or service package;
- ✓ number and composition of the staff required for continuous operation;
- ✓ differentiated costs for children and groups facing multiple barriers;
- ✓ division of financial responsibilities across central institutions and municipalities;
- ✓ financing mechanism of specialized civil society organizations;
- ✓ budget source for every new obligation or expanded standard;
- ✓ method of identifying and tracking expenses to the service and beneficiary;
- ✓ indicators that link financing to quality, access and results achieved.

This is the main gap of the current framework: although the legal standard has expanded, the financial architecture needed for its implementation is incomplete. There is a risk that new obligations will be treated as formal institutional responsibilities, without being accompanied by the relevant personnel, infrastructure and funds. This risk is particularly high at the local level, where municipalities have significant responsibilities for emergency sheltering, Coordinated Referral Mechanisms, social services, and reintegration, but capacities and financial opportunities vary considerably.

The gender impact assessment required for new legal and programmatic interventions should also be accompanied by a comprehensive financial assessment. When a law establishes a new service, expands the categories of beneficiary, or sets higher standards, the initial costs, annual operating expenses, additional personnel, infrastructure investments, training, and the impact on central and local budgets must be identified. Without such an analysis, the impact assessments risk remains a formal exercise, while law implementation relies on temporary reallocations or donor funding.

Another gap is related to existing bylaws and standards, some of which were drafted before the adoption of new legislation. These should be reviewed and harmonized to reflect the broader scope of protection, the victim-centred approach, new forms of violence, and the needs of different groups. Harmonization should encompass not only procedures but also staffing standards, accessibility, security, confidentiality, services for children, and support provided after leaving the shelter.

Law enforcement also entails institutional costs that often remain invisible in budgets. Risk assessment requires trained professionals, dedicated time, standardized instruments, confidential environments, and secure data storage. The Coordinated Referral Mechanism requires local coordinators, professional case management, inter-institutional communication, transportation, documentation and monitoring. Moreover, the training of police, prosecutors, judges, healthcare professionals and social workers requires regular funding rather than sporadic project-based activities.

Accessibility should likewise be treated as part of the minimum standards rather than an optional expense. Ensuring access for women and girls with disabilities requires physical adaptation of facilities, information in accessible formats, sign language interpretation, assistive devices, adapted transportation and trained personnel. Women in rural areas, Roma and Egyptian women, migrants, older women, and women with dependent children may also require additional resources for equal access to services.

Children accompanying their mothers to shelters should not be regarded merely as accompanying persons. They are direct beneficiaries who need individual assessment, psychological support, healthcare, continuing education, transportation, daily childcare and child-friendly environments. The costs associated with these services should be identified separately rather than being included within overall accommodation costs.

Finally, the legal framework requires funding across the entire continuum of support, from identification and reporting to emergency protection, shelter, healthcare, legal aid, rehabilitation, and social and economic reintegration. Funding a bed, a salary, or a formal institutional structure alone does not constitute full implementation of the law. Implementation requires an integrated package of services supported by the resources necessary to deliver them consistently and to a good standard of quality.

For this reason, it is necessary to draft a financial implementation plan for the new legislation, that would:

- ✓ harmonize bylaws and service standards;
- ✓ determine the minimum package for each type of service;
- ✓ calculate both initial and recurring costs;
- ✓ establish unit cost standards;
- ✓ determine minimum personnel and capacities;
- ✓ clearly define financial responsibilities between central and local government;
- ✓ establish dedicated and traceable budget lines;
- ✓ integrate costs into the Medium-Term Budget Program and local budgets;
- ✓ ensure sustainable funding for specialized civil society providers;
- ✓ link allocations and expenditures to indicators of access, quality and results.

Only by linking legal entitlements, service standards, costs, institutional responsibilities and budgetary sources can the real funding gap be measured and the effective implementation of the new legal framework be ensured.

What Does the Financing Analysis Show?

The analysis shows that Albania has made progress in integrating gender-responsive budgeting into the Medium-Term Budget Program. The number of budget programs with gender equality-related objectives or requirements has increased from 48 in the 2023–2025 MTBP to 81 in the 2026–2028 MTBP. In the 2025–2027 MTBP, planned expenditures under gender-responsive budgeting accounted for 10.8% of total planned expenditures.

This expansion shows that the gender perspective is being included in a greater number of public programs. However, the expenditures identified as part of gender-responsive budgeting cover different areas of gender equality and do not fully represent funding for preventing and addressing gender-based violence.

Funding for GBV are distributed among several sectors and programs: Social Welfare, health, justice, order and security, legal aid, housing, employment and local government. As a result, there is still no consolidated overview that clearly shows how much is planned, allocated, disbursed and spent for each type of service.

Public funding is provided through the state budget, the Social Fund, transfers to local government, and municipal budgets. These resources are supplemented by donor funding and contributions from civil society organizations themselves. For many providers, public support covers only a portion of salaries or operating expenses, while significant components of the service are funded through projects of limited duration.

This funding structure creates a gap between the cost of operating existing services and the cost necessary to fully meet standards. Budgets are largely built on historical expenditures and available funds, while real demand, necessary capacity, quality standards, and outcomes for survivors are not yet systematically included in the planning process.

Table 1. Main issues and their impact on sustainable financing and service delivery

Main issues	Impact on service financing and delivery
Annual and project-based funding	Limits multi-year planning, maintaining specialized staff, and ensuring uninterrupted services
Lack of dedicated budget lines	Makes it difficult to identify funds allocated and spent for each service
Planning based on historical costs	The budget reflects existing capacities and not necessarily the demand or standard that must be met.
Partial financing of the service package	Some salaries and basic expenses are covered, while reintegration, childcare, transportation and specialized services remain partially funded.
Financially unrecorded in-kind contributions	Buildings, utilities, maintenance and administrative support are not always reflected in the full cost

Main issues	Impact on service financing and delivery
Non-standardized financial and administrative data	Makes it difficult to calculate demand, unit cost, and the gap between need and funding
Dependence on donor funding	Increases uncertainty about the continuity, expansion and sustainability of services

Concrete Example of the Cost of a Residential Shelter: "Vatra" Center

The costing of the "Vatra" Psychosocial centre presents a concrete example of the resources required to operate a long-term residential shelter. The analysis distinguishes between:

1. the basic budget for the continued operation of the service;
2. the additional costs for filling identified gaps;
3. the full budget required to deliver a more sustainable and comprehensive package.

In 2024, "Vatra" Centre supported 166 survivors and 54 children. The support provided included housing and residential services, case management, psychosocial counselling, legal and medical support, rehabilitation, training, employment, and reintegration. Therefore, the Centre's costing includes not only accommodation, but the entire package of protection and support.

1. Base Budget for 2026

The estimated base budget for 2026 is ALL 54,871,176. It includes staff salaries and contributions, the rehabilitation and reintegration program, operating expenses and capital base investments.

Table 2. Estimated basic budget for 2026, by budget item

Budget item	Value for 2026	Weight in base budget
Salary and social and health insurance contributions	ALL 22,700,560	41.4%
Rehabilitation and reintegration	ALL 23,517,196	42.9%
Operating expenses	ALL 8,313,120	15.2%
Capital expenses	ALL 340,300	0.6%
Total base budget	ALL 54,871,176	100%

The majority of the base budget is related to personnel and the rehabilitation and reintegration program. Together, these two components account for about 84% of the operating cost. This reflects the intensive nature of a residential service, where support must be continuous, individualized and multidisciplinary.

2. Additional Costs for Strengthening the Service

For 2026, additional costs amounting to ALL 19,670,964 have been identified. These resources are intended to strengthen case management, service quality, staff well-being, accessibility, and support for the safe reintegration of beneficiaries.

Table 3. Additional costs anticipated for strengthening the service during 2026

Additional component	Basis of calculation	Cost for 2026
Three additional case managers	ALL 119,124 per month × 12 months × 3 employees	ALL 4,288,464
Professional supervision and staff well-being	Group supervision and psychological support for staff	ALL 1,360,000
Interpretation and translation services	Services to ensure access for foreign beneficiaries	ALL 1,500,000
Rental support after leaving the shelter	ALL 25,000 per month × 6 months × 50 beneficiaries	ALL 7,500,000
Legal documentation and notary expenses	Support for obtaining the necessary documents	ALL 52,500
Transportation for foreign beneficiaries	ALL 120,000 × 40 cases	ALL 4,800,000
Accessibility adjustments	One-time capital investment	ALL 170,000
Total additional costs		ALL 19,670,964

The largest additional component is rental support after leaving the shelter, amounting to ALL 7.5 million. This measure aims to create a transitional period of safety and prevent survivors from returning to violent environments due to lack of housing or income.

Other significant costs relate to transportation, the addition of case managers, and the professional well-being of staff. These components directly impact continuity of care, coordination with institutions, and follow-up of cases after leaving the shelter.

3. Full Estimated Budget for the Period 2026–2028

The full budget is calculated by adding the costs identified for strengthening the service to the base operating budget.

Table 4. Base budget, additional costs, and full estimated budget for the period 2026–2028

Year	Base budget	Additional costs	Full budget
2026	ALL 54,871,176	ALL 19,670,964	ALL 74,542,140
2027	ALL 59,287,708	ALL 15,973,125	ALL 75,260,833
2028	ALL 59,719,795	ALL 16,771,781	ALL 76,491,576
Total 2026–2028	ALL 173,878,679	ALL 52,415,870	ALL 226,294,549

For 2026, strengthening the service package requires approximately ALL 19.7 million in addition to the base budget. This represents an increase of about 35.9%. The total budget needed amounts to approximately ALL 74.5 million.

In the full 2026 budget:

- salaries and contributions account for about 36.2%;
- rehabilitation and reintegration account for about 31.5%;
- operating expenses account for about 31.6%;
- capital expenditures account for less than 1%.

This structure shows that a residential shelter is more than just a safe environment for accommodation. It is a complex service that requires multidisciplinary staff, ongoing case management, psychosocial and legal support, healthcare, transportation, documentation, support for children, and concrete reintegration measures.

Costing of the "Vatra" Centre is based on this formula: Base operating cost + gap-filling costs = full budget required to provide the service.

This model could serve as a basis for developing a more standardized methodology for shelters. Its implementation at the national level should be based on data regarding licensed and actual capacity, number of overnight stays, level of utilization, number of women and children supported, complexity of cases, services provided and reintegration outcomes.

Overview of estimated costs for the six providers

Estimates for the period 2026–2028 include basic expenses and additional costs necessary to strengthen services, according to the needs identified for each provider.

Table 5. Estimated costs by provider and service typology for the period 2026–2028

Service provider and typology	2026	2027	2028
National Counselling Line for Women and Girls	ALL 44.8 million	ALL 46.0 million	ALL 48.0 million
Lilium Centre for cases of sexual violence	ALL 6.39 million	ALL 2.02 million	ALL 1.91 million
"Gruaja tek Gruaja" – short-term emergency shelter	ALL 14.5 million	ALL 14.7 million	ALL 15.5 million
"Vatra" Centre - long-term residential shelter	ALL 74.5 million	ALL 75.2 million	ALL 76.5 million
"Different & Equal" – long-term residential centre	ALL 50.0 million	ALL 51.1 million	ALL 52.0 million
National State Centre – long-term residential centre	ALL 29.2 million	ALL 30.6 million	ALL 32.1 million

For Lilium Centre, the figures represent the additional costs identified for expanding facilities, accessibility, case management, training, professional supervision, and interpretation services. The Centre's routine operating expenses are covered within the overall budget of the QSUT/TUHC. Differences among service providers reflect the varying nature and intensity of the services they deliver. The counselling helpline provides nationwide coverage and operates remotely 24/7; Lilium Centre delivers specialized interventions for cases of sexual violence; the short-term shelter focuses on emergency protection; while the long-term centres provide accommodation, rehabilitation, and reintegration services for women and children over an extended period.

Overall, the analysis shows that staff, ongoing operations, direct support, and reintegration constitute the principal cost components. Consequently, financial planning should be based on the type, standard, and intensity of the service, ensuring that financing covers the full package of protection services required, rather than only accommodation or minimum operating expenses.

What needs to change?

The findings indicate that improving financing requires not only increasing funding, but also changing the way services are planned, costed, financed, and monitored. Albania should transition from a system that relies primarily on historical expenditure patterns and short-term projects to a financing model based on rights, standards, actual demands, and measurable outcomes.

1. Costing should become a mandatory component of budget planning

The Ministry of Health and Social Welfare, the State Social Service, the Ministry of Finance, and municipalities should adopt and implement a unified methodology for costing specialized services for GBV. The methodology should be used by state institutions, municipalities, and contracted organizations responsible for delivering these services.

For each service type, a minimum package of services should be established, including:

- the service standard and intensity;
- the number and profile of required staff;
- continuous operation and 24/7 availability;
- licensed capacity and expected utilization level;
- direct support for women and children;
- rehabilitation and reintegration;
- administrative, operational, and capital costs;
- accessibility, data security and protection.

Costing should distinguish between fixed operating costs, costs that vary according to the number and needs of beneficiaries, and one-off investments. Facilities, rent, utilities, maintenance, equipment, and in-kind administrative support should be financially valued to ensure that the full cost of service delivery is accurately reflected.

Any new law, bylaw, standard, or program that expands rights and services should be accompanied by a financial impact assessment. The assessment should identify initial costs, annual operating expenses, additional staff, investments in infrastructure and impact on central and local government budgets.

2. Establishing a sustainable, multi-year public financing system

Specialized services should be fully integrated into the Medium-Term Budget Program and annual budgets. For this purpose, dedicated budget products, codes, and budget lines should be established for:

- emergency shelter;
- long-term residential centres;
- helplines;
- services for cases of sexual violence;
- rehabilitation and reintegration;
- specialized services for children;
- support after leaving the shelter.

These budget lines should enable tracking of funds from planning and allocation through disbursement, actual expenditure, and the results achieved.

The Social Fund should gradually transition from annual project-based financing to programmatic and multi-year financing. Financing should ensure service continuity, the retention of specialized staff, and

the planning of investments, without requiring service providers to submit annual applications to cover the same basic needs.

Specialized civil society organizations should be financed through multi-year service delivery agreements. Their selection and financing should be based on experience, specialization, compliance with standards, quality, capacity, and outcomes. The necessary administrative costs for service operation should be recognized as a legitimate component of financing.

Furthermore, the division of responsibilities between central and local government should also be clearly defined. Every service mandated by law should be linked to the responsible institution, the source of financing, and the mechanism for covering its costs. This is particularly important for municipalities with more limited fiscal and administrative capacities.

3. Financing the entire support pathway for the survivor

Financing should encompass the entire continuity of support services, from identification and risk assessment through emergency protection, rehabilitation, and long-term reintegration. Financing accommodation or a limited number of staff positions is not sufficient to guarantee a comprehensive service.

Budgets should include:

- multidisciplinary staff and continuous 24/7 operation;
- individual assessment, case management, and case follow-up;
- psychological, psychosocial, health, and legal support;
- ongoing, accredited training for professionals;
- professional supervision and psychological support for staff;
- transport, documentation, and immediate assistance;
- translation and interpreting services;
- physical and digital security;
- adaptation of facilities and services for persons with disabilities.

Dedicated budget lines should be established for children accompanying their mothers. These should cover individual assessment, psychological support, healthcare, continuity of education, transport, food, daily care, and developmental activities. Children should be treated as direct beneficiaries and not merely as accompanying persons.

Reintegration should be recognized and financed as an integral component of the service. The budget should cover transitional rent, social housing, vocational training, employment mediation, childcare, and post-exit follow-up after leaving the shelter. Without these measures, protection remains temporary, increasing the risk that survivors may return to unsafe environments due to economic hardship.

4. Improving the capacity and territorial coverage of services

Planning should be based on a comprehensive assessment of existing capacities and unmet demands in each territory. For municipal emergency shelters, the following should be documented in a standardized manner:

- operational status;
- licensed capacity and actual capacity;
- number of available places;
- utilization rate;
- number of accepted and unmet cases;

- duration of stay;
- services provided;
- expenses by category.

Capacity expansion should be directed towards areas with the highest demand and the most inadequate service coverage. In addition to population size, planning should take into account referral patterns, distance from services, rural areas, and the needs of women facing multiple and intersecting forms of discrimination.

Capacities can be expanded through the establishment of public services, inter-municipal cooperation, and multi-year contracting of specialized organizations. Any expansion should be accompanied by financing for staff, equipment, transport, accessibility, and safety, rather than merely the provision of a building.

5. Linking financial data to services and outcomes

REVALB and case management systems should use standardized definitions, indicators, and procedures. For each service, the following information should be recorded:

- capacity and level of utilization;
- number and profile of beneficiaries;
- overnight stays and duration of intervention;
- number of children supported;
- types and intensity of services received;
- cases that were not accepted due to lack of capacity;
- post-exit support;
- rehabilitation and reintegration outcomes.

Data should be disaggregated by age, disability, ethnicity, place of residence, and other vulnerability factors, while ensuring confidentiality and the protection of personal data.

Financial reporting should, for each service, provide a comparison between the planned budget, approved allocation, funds disbursed, and actual expenditure. This information should be linked to data on coverage, quality, and outcomes, so that it is possible to assess not only how much has been spent, but also what has been achieved.

Key indicators should include the utilization rate, continuity of care, response time, rejected cases, housing stability, employment, support for children, return to unsafe environments, and retention of specialized staff.

6. Strengthening monitoring, transparency, and accountability

Relevant institutions should regularly report on the financing and outcomes of specialized services. Reporting should include public funding, donor contributions, and in-kind support, in order to provide a comprehensive overview of the resources utilized.

Monitoring should not be limited to administrative and financial oversight. It should assess compliance with standards, accessibility, quality, safety, continuity, and outcomes for women and children. Periodic independent assessments should also be conducted and used to review standard costs, improve quality, and guide future allocations.

Conclusions

Albania has established an important legal and institutional foundation for protecting women and girls from violence. The new laws expand rights, services, and institutional responsibilities, while gender-responsive budgeting provides the mechanism for rendering these obligations into concrete programs and allocations.

However, the financing system has not yet been fully aligned with the new legal standard. Funding remains fragmented across institutions and levels of government, is often planned based on historical expenditure patterns, and relies on short-term projects. For many services, there are no dedicated budget lines, standard unit costs, or a clear allocation of financial responsibilities.

The example of the “Vatra” Center illustrates this gap in concrete terms. The core budget for 2026, provided at ALL 54.9 million only supports the existing operations. An additional ALL 19.7 million is needed to strengthen case management, professional staff supervision, interpretation services, transport, accessibility, and reintegration. The total estimated budget therefore reaches approximately ALL 74.5 million.

This example indicates that the cost of a shelter is not determined solely by the number of beds or accommodation expenses. It depends on the service standard, 24/7 operation, team composition, number and profile of beneficiaries, duration and intensity of support, services for children, and reintegration measures. Thus, funding should be based on a defined service package and the actual cost of delivering it.

Immediate steps

The Ministry of Health and Social Welfare, the State Social Service, the Ministry of Finance, municipalities, and specialized organizations should develop a joint process to:

- align bylaws and standards with the new laws;
- determine the minimum package for each type of service;
- validate and approve the unified costing methodology;
- complete and standardize financial and administrative data;
- clarify central and local financial responsibilities;
- establish dedicated budget lines;
- integrate costs into the Medium-Term Budget Program and local budgets;
- establish multi-year mechanisms for financing specialized service providers;
- link allocations and expenditures to quality, coverage, and outcome indicators.

Through this approach, the link between legal entitlement, standards, costs, allocation, expenditure, and outcomes can become clear, measurable, and monitorable. This is essential for building a sustainable and accountable system that guarantees survivors and their children effective protection, recovery, and genuine opportunities for an independent life.

Methodology Note

The study used a combined approach, based on the principles of gender-responsive budgeting and the unit costing methodology, adapted to Albania’s legal, institutional, and budgetary framework. The analysis combined a review of legislation, policies, budget documents, and administrative data with information collected from institutions and service providers. It assessed the funds required, planned, approved, disbursed, and spent during the 2022–2024 period, as well as the financial needs for 2026–2028. The costing included staff, 24/7 operations, infrastructure, equipment, security, accessibility, direct support, services for children, case management, rehabilitation, and reintegration. The results present estimates of the financial needs for the specialized services analysed and do not represent the overall economic and social cost of gender-based violence or approved budget allocations.

About GADC

The Gender Alliance for Development Centre (GADC), established in 1995, is one of the longest-standing organizations in Albania working to promote gender equality and protect the rights of women and girls. For more than three decades, GADC has advanced work in gender-responsive budgeting, prevention of violence against women, women's economic empowerment, protection of labour rights, and promoting women's participation in decision-making.

GADC has developed consolidated expertise in research, monitoring public policies and budgets, capacity building, and evidence-based advocacy. The organization works with central and local government institutions, civil society organizations, and international partners to improve legislation, public policies, financing mechanisms, and services for women and girls.

Through this study, GADC brings together its expertise in gender-responsive budgeting with its long-standing commitment to addressing violence against women. The study aims to strengthen the link between guaranteed rights, service standards, and the financial resources required, supporting the development of a more sustainable, transparent, and accountable system for the protection, rehabilitation, and reintegration of survivors of gender-based violence.