Policy Brief:

Collection of Data on Children in Municipalities - Standards and Practice

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Background

Access to relevant, accurate and quality data remains one of the challenges in contemporary practice of all entities working in the field of child rights. Child rights practitioners often struggle to find data especially in small places and communities residing in the outskirts of urban settlements, neighbourhoods, and rural areas, but also in larger and more developed urban centers. Most of the available data exist for the national level, but those data are usually obtained using statistical and qualitative data collection methods with representative samples created for the national context, and do not provide for specific information on the level of municipality or community.

In this policy brief, the objective is to explore experiences and practices of the international organizations and national context and come up with proposed data collection system for municipalities, with reference to existing legislative and institutional framework. The aim is to assist municipalities to systematize data for children, and utilise them in the most effective manner, for planning, design, implementation, monitoring and evaluation of policies and programs for children. The idea is to adjust valuable experience of international organizations to the context and needs of municipalities with reference to existing national statistical system in Kosovo, and further utilise experience, practices, and resources available in municipalities, both with local institutions and civil society. The aim is to define key sectors of child rights in which data collection plays critical role, identify types of data and information needed, and propose the most appropriate methodology and tools for data collection and management, which will serve to local policy makers for programming in the field of children rights.

Fundamental Principles of Official Statistics

United Nations Statistical Commission (1994) adopted the United Nations Fundamental Principles of Official Statistics[1], which contain set of principles, that emphasize the need for appropriateness, accuracy, impartiality, legality, and prevention of abuse in production and utilisation of statistical information and data.

On the level of EU, the European Statistics Code of Practice[2] was adopted and promulgated in 2005 on the independence, integrity, and accountability of the national and Community statistical authorities. The Code is based on 15 principles referring to the institutional environment, statistical processes, and outputs. The 15 principles are: Professional Independence, Mandate for Data Collection, Adequacy or Resources, Commitment to Quality, Statistical Confidentiality, Impartiality and Objectivity, Sound Methodology and

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1   https://unstats.un.org/unsd/dnss/gp/FP-New-E.pdf
2   https://ec.europa.eu/eurostat/documents/3859598/5921861/KS-32-11-955-EN.PDF.pdf/5fa1ebc6-90bb-43fa-888f-dde032471e15?t=1414781827000

Appropriate Statistical Procedures, Non-excessive Burden on Respondents, Cost-effectiveness, Relevance, Accuracy and Reliability, Timeliness and Punctuality, Coherence and Comparability, and Accessibility and clarity.

In the national context of Germany, the credibility of federal statistics depends on the principles of neutrality (impartiality), objectivity (traceability) and scientific independence as well as legality (no survey without legal basis), functional concentration (statistics from one institution) and regional decentralisation (federalism). These principles are aligned with principles set in the Code of Practice for the national and community statistical authorities of the European Union.

In view of the above, there is high demand to official statistics to adhere to fundamental principles with respect of the highest level of ethical standards, confidentiality and data and privacy protection standards, and purposed exclusively to serve society and human wellbeing. It must enjoy full public trust and credibility based on its accuracy, reliability, objectivity, and integration of highest scientific standards.

UN Statistics

The UN Data, Open SDG Data Hub, SDG Indicators Global Database, UN Comtrade Database, National Accounts Statistics, Disability Statistics Database and Population Census Datasets are some of the most well-known data sources provided by UN.

The UN Data[3] platform contains 32 databases with more than 60 million records divided into the 16 thematic categories including Population, National accounts, Education, Labour market, Price and production indices, International merchandise trade, Energy, Crime, Gender, Nutrition and health, Science and technology, Finance, Environment, Communication, Tourism and transport and Development Assistance. For this policy brief, the most relevant categories are Education, Health and nutrition, and Gender. Under the Education, there are databases for Education at the primary, secondary and tertiary levels[4], Teaching staff at the primary, secondary and tertiary levels[5], and Public expenditure on education.

The database on Education at the primary, secondary and tertiary levels contains data for each country on enrolment in primary, lower secondary and upper secondary education levels including number of students enrolled (in thousands) and gross enrolment ratio by sex. The database for Teaching staff at the primary, secondary and tertiary levels contains data on the Proportion of teachers with minimum required qualifications (%) at the primary, lower secondary and upper secondary levels, for certain years in the period 2005 -2020. The database on Public expenditures on education contains data on public expenditure on education and access to computers, broken-down for each country/region by expenditure type (current expenditure, staff compensation, and capital expenditures), total government expenditure and percentage of GDP allocated for education. Specific data in the same database refer to access to computers by level of education (percent).

In the category Health and nutrition, there are two databases including health personnel[6] and health expenditure[7]. The database for health personnel contains data on total number of physicians, dentists, pharmacists and midwives/nurses in each country, and the number of these professionals per 1,000 population.

3   http://data.un.org/
4   http://data.un.org/_Docs/SYB/PDFs/SYB66_309_202310_Education.pdf
5   http://data.un.org/_Docs/SYB/PDFs/SYB66_309_202310_Education.pdf
6   http://data.un.org/_Docs/SYB/PDFs/SYB66_154_202310_Health%20Personnel.pdf
7   http://data.un.org/_Docs/SYB/PDFs/SYB66_325_202310_Expenditure%20on%20health.pdf

In the category Gender, there are two databases including Seats held by women in national parliament[8], and Ratio of girls to boys in primary, secondary and tertiary levels[9].

The UN data also have database of country profiles with four categories including General information, Social indicators, Economic indicators, and Environment and infrastructure indicators. Social indicators contain data on life expectancy at birth, infant mortality rate, government expenditures on health and education, the primary, lower and upper secondary education gross enrolment ratio, and number of physicians per 1,000 population.

The UN Disability Statistics Database contains comprehensive international repository on disability statistics which is compiled from national population and housing census. The data are presented by country and could be filtered based on a selected topic including types of disability, literacy status, school attendance, educational attainment, activity status (current or usual), main status in employment, main occupation, living arrangements, main source of drinking water supply, and type of toilet.

European Statistical System

Eurostat[10] is the European Union's statistical agency, responsible for developing, producing, and disseminating European statistics. It is placed with Directorate-General of the EU Commission in Luxembourg.

The EUROSTAT database contains datasets on General and regional statistics, Economy and finance, Population and social conditions, Industry, trade and services, Agriculture, forestry and fisheries, International trade, Transport, Environment and energy, Science, technology and digital society. It also contains datasets on cross cutting topics including Quality of life, Migrant integration and children in migration, Economic globalisation indicators, Equality (age and gender), Quality of employment, Agri-environmental indicators, Climate change, Skills-related statistics, and Youth.

Under the Youth, there are datasets on different aspects including contextual indicators, youth participation in society, employment and entrepreneurship, youth and digital world, education and training, health and wellbeing, and social inclusion.

Datasets on Education and training include specific data collections such as on Young people by educational attainment level, sex and age[11], Early leavers from education and training by sex and labour status[12], Population aged 30-34 with tertiary educational attainment level by sex[13], Pupils by education level and number of modern foreign languages studied with absolute numbers and % of pupils by number of languages studied[14], Participation rate in non-formal education and training by sex and age[15], and Share of mobile students from abroad enrolled by education level, sex and country of origin[16].

For illustration, in the database on Young people by educational attainment level, sex and age, there are data on less than primary, primary and lower secondary education (ISCED levels 0-2), upper secondary, post-secondary non-tertiary and tertiary education (ISCED levels 3-8), upper secondary and post-second-

8   http://data.un.org/_Docs/SYB/PDFs/SYB66_317_202310_Seats%20held%20by%20women%20in%20Parliament.pdf
9   http://data.un.org/_Docs/SYB/PDFs/SYB66_319_202310_Ratio%20of%20girls%20to%20boys%20in%20education.pdf
10   https://ec.europa.eu/eurostat/web/main/home
11   https://ec.europa.eu/eurostat/databrowser/product/view/yth_demo_040
12   https://ec.europa.eu/eurostat/databrowser/product/view/edat_lfse_14
13   https://ec.europa.eu/eurostat/databrowser/product/view/yth_educ_020
14   https://ec.europa.eu/eurostat/databrowser/product/view/educ_uoe_lang02$dv_1125
15   https://ec.europa.eu/eurostat/databrowser/product/view/yth_educ_060
16   https://ec.europa.eu/eurostat/databrowser/product/view/educ_uoe_mobs03$dv_1126

ary non-tertiary education (ISCED levels 3 and 4), upper secondary and post-secondary non-tertiary education (ISCED levels 3 and 4), general, upper secondary and post-secondary non-tertiary education (ISCED levels 3 and 4) – vocational, and tertiary education (ISCED levels 5-8).

Some of datasets for Youth - Health and wellbeing, and Social inclusion are listed below:

Datasets on Health and Wellbeing
• Daily smokers of cigarettes by sex, age and educational attainment level,
• Daily smokers of cigarettes by sex, age and income quintile
• Body mass index (BMI) by sex, age and educational attainment level
• Frequency of alcohol consumption by sex, age and educational attainment level
• Daily consumption of fruit and vegetables by sex, age and educational attainment level
• Time spent on health-enhancing (non-work-related) aerobic physical activity by sex, age and educational attainment level
• Causes of death - crude death rate by NUTS 2 region of residence
• Self-reported unmet needs for medical examination by sex, age, main reason declared and income quintile
• Self-perceived health by sex, age and income quintile
• People having a long-standing illness or health problem, by sex, age and income quintile
• Self-perceived long-standing limitations in usual activities due to health problem by sex, age and income quintile

Datasets on Social inclusion
• Persons at risk of poverty or social exclusion by age and sex
• Persons at risk of poverty or social exclusion by group of country of birth (population aged 18 and over)
• At-risk-of-poverty rate by poverty threshold, age and sex - EU-SILC and ECHP surveys
• At-risk-of-poverty rate by group of country of birth (population aged 18 and over)
• Material and social deprivation rate by age, sex and educational attainment level
• Material and social deprivation rate by age, sex and group of country of birth

Kosovo Statistical Agency (KAS)

Kosovo Agency of Statistics (KAS) is the primary producer of official statistics in Kosovo, responsible for collecting, processing, and publishing data, as well as coordinating the Statistical System of Kosovo. International organizations including UNICEF, UNDP and other supported KAS in development of its capacities over the years. The web site of the agency contains data categorised under different sectors including also categories relevant for this brief such as Data for children, Education and Health and welfare.

Under the Data for children, there are information on culture and recreational activities, education, health, justice, labour market, migration, population and social protection. In the field of education external user of KAS data platform can explore data on education for children with special needs, information on the social status of children in public and private education. Regarding the data on education of children with special needs, the external user can obtain data on pupils in resource centres/special schools by gender and group/grade, pupils with special needs in regular classes, and data on pupils disaggregated by grade and type of impairment. Regarding the information on social status of children, there are data on social and family status of pupils disaggregated by gender and level of education.

Regarding the public education, data that could be obtained are shown in the table bellow:

•   Number of children in preschool education (0 to <5 years of age) by gender
•   Number of pupils in vocational schools and gymnasiums by gender and type of school
•   Number of children in preschool education by ethnicity
•   Number of children in pre-primary education by ethnicity
•   Number of children in pre-school and pre-primary education by ethnicity
•   Number of pupils in primary and lower secondary education by ethnicity
•   Number of pupils in upper secondary education by ethnicity

Under the category for health, the information could be obtained for number of malignant and benign diseases according to age group, and number of births in public hospitals in Kosovo (at this stage data exist for the period 2016-2020).

In the area of Justice for children, some of the information that could be obtained are given in the table bellow:

•   Number of accused persons and the manner of selection of juvenile charges under the Basic Courts
•   Number of juvenile offenders accused in the Basic Courts (Department of Juveniles) according to the indictment and gender
•   Number of juvenile offenders accused in Basic Courts according to nationality
•   Juveniles convicted by gender by years
•   Number of juvenile convicts in the Courts Fundamentals by sex and nationality
•   Juveniles convicted by Basic Courts, the type of sentence and the measures imposed
•   Juvenile convicts by type of offense, and gender, in Basic Courts
•   Juvenile convicts by type of offense, and nationality in Basic Courts
•   Juvenile convicts by type of offense and type of sentence in Basic Courts
•   Juvenile Criminal Cases in the Court of Appeals (judicial review) by case status
•   Juvenile criminal cases in Basic Courts (judicial review) by case status
•   Criminal cases for minors in the Basic Courts (preliminary proceedings) according to the status of the case

The data under category Labour market include information on Youth Not in education, employment or training (NEET) by sex, age 15-24.

Under the category Population, there are subcategories on Births, Deaths, and Population projection. For subcategory Births, data could be obtained for livebirths according to the permanent place of mother's residence in the municipality, gender, marital status of parents and the place where child was born, livebirths occurring in Kosovo and outside Kosovo, and other criteria including the average age of mother, month of child birth, gender, etc. There also data on children born dead by mother's permanent place of residence in municipality and education, born dead by mother's age and birth order of the child, born dead by month and gender, etc. In the subcategory Deaths, there are information on infant mortality by disease group, by age, municipality, gender, marital status and education level of mother, etc.

Under the category social protection available data include information on pensions scheme for families with children with special needs/disabilities by municipality (age 0-18), number of abandoned children by municipality, number of children placed in family housing/SOS villages by municipality, number of children in the family reunion by municipality, number of children removed from family housing and accommodated with relatives by municipality, etc.

Current Situation on Access to Data for Children in Target Municipalities

Data on children are not systematically collected in municipalities, they are rather scattered with different sources, mainly with education, health and social protection institutions, but kept separately with limited or no access for outsiders. These institutions don't have regular coordination and cooperation and don't sufficiently apply integrated service delivery which will require regular exchange of data through multi-sectoral approach. In some cases, data are not stored in electronic databases, but kept in hard copies in archives. This is particularly case for the individual health files.

As a reference, in 2020, NGO Domovik produced policy brief on **Advancing public policies for children based on data collected**. The research conducted for this purpose underlines that public policy options are not based on data and their analysis. The key policy recommendations in this brief include the need for improved cooperation of public institutions with civil society organizations, with the aim of exchanging data, knowledge, skills, and other resources, to advance child rights.

NGO Domovik further produced an instrument/matrix for systematic data collection and analyses in different areas of child rights including Policies and regulations, Education, Health care, Social protection, Juvenile justice and Child-responsive governance. This matrix was further used in two consecutive assessments of child rights in municipalities Zvecan, Zubin Potok and Leposavic. The tool uses a cluster of indicators to measure different aspects of the implementation of child rights in target municipalities. The matrix identified several fields for evaluation and defined respective indicators for each of them. Specific questionnaires were developed for representatives of different institutional stakeholders to support data collection process.

Regarding data for children, Kosovo benefitted from the UNICEF Multiple Indicator Cluster Survey (MICS) in 2014 and 2020. Data collection methods included face to face interviews, observations, anthropometric measurements, water quality testing, reading and numeracy assessments. For children under 5 years old, the information collected included birth registration, early childhood development, child discipline, child functioning, breastfeeding and dietary intake, and immunisation. For children 5-17, data collected include areas of child labour, child discipline, child functioning, parental involvement, and foundational learning skills. Data disaggregation was made based on area of residence, sex, age, education, wealth quintile, ethnicity, migration status and disability status.

Policy Recommendation on Establishment of Municipal Data and Knowledge for Children Management System

The responsibility for coordination of data collection and management locally is recommended to be given to the municipal Team for the Rights of the Child. The multisector composition of the team shall include representatives of all critical sectors for the protection of child rights, and their responsibility will be to liaise with all relevant data collection sources in each responsible institution and service provider. The Municipal Team for the Rights of the Child needs to support establishment of the central Database for Children, and categorise data by sector, as presented in the previous elaboration. The recommendation will

be to start with main categories including health and nutrition, education, and social protection, and see what sub-categories should be made for each category. In a later stage, other categories could be included, as well.

In this context, Domovik developed very useful tool Child Right Monitoring Framework in Municipalities, which include several categories of data and can guide the Team in structuring the database.

For the reference, in the category Health and nutrition, the subcategories in the tool include Nutrition, Immunization, Maternal, newborn and child health, Health system, and Adolescents' physical, mental and reproductive health. Representative of the municipal department of health in the Team for the Right of the Child should be assigned with responsibility for data collection in this sector. In this context, the cooperation with all relevant health care service providers, NGOs and international organizations is crucial and strongly recommended.

Under each subcategory, there could be further division of datasets, based on different criteria. In the subcategory Nutrition, data could be obtained from the paediatric unit of the hospital or family medicine center, which must have its own list of children by age, and key nutrition parameters followed up on annual basis. Alternative sources of data could be nurseries and kindergartens if the systematic examination of these children is done in cooperation between early education and health facilities. Data should be disaggregated by age, educational and socio-economic status of mothers, geographic area of residence, and other information that can serve for future assistance programs. Data on families, beneficiaries of the food support programs, should be obtained from centers for social welfare and municipal departments for social issues. Data on affirmative actions in promoting breastfeeding should be collected from the family medicine centres, paediatric units of hospitals, and through interviews and surveys with infants' mothers.

Data collection in the subcategory Immunization implies keeping the accurate immunization record of each child. The record must be kept also for the children that were not included in immunization due to any reason. The primarily responsibility for data collection is with paediatric/immunization units in the hospital, public health institute and family medicine center.

Under the subcategory on Maternal, newborn and child health, the primarily source of data for this indicator is paediatric unit of the hospital, gynaecologic unit of the hospital, and if possible, cross checked with municipal civil registry office.

For the assessment of the qualitative aspects of the access to health care, under the category Health system, data shall be obtained from the health facilities, from municipal health department or from the ministry of health. The disaggregation of collected data could be made per geographic area (urban/rural), and communities covered (majority/minority).

In the category Education, there are subcategories on Education system, Education access and participation, Learning and quality skills, Leisure and culture. Representative of the municipal department of education in the Team for the Rights of the Child bears the responsibility for data collection in this sector. Data for reporting on relevant indicators shall be collected from municipal education departments, line ministries, schools, and in the meetings and focus groups with teachers, parents, and children. For the Education ac-

cess and participation, data shall be collected from municipal education departments, kindergartens, from educators and parents as well as from teachers and children attending preparatory pre-school program. Disaggregation of data should be made by age, sex, disability, geographic area (urban/rural), and communities covered (majority/minority).

For the children in primary and secondary education, the main data sources include schools, municipal education departments, village councils, children and parents. The same as above, disaggregation of data should be made based on age, sex, disability, geographic area (urban/rural), and communities covered (majority/minority).

In the subcategory Learning and quality skills, data must be obtained in close cooperation with schools and kindergartens which need to conduct testing of children, but also in communication with line ministry and municipal education department. For all indicators in this subcategory data should be disaggregated by age, sex, ethnicity, family income quintile, and disability.

In the category Social protection, the recommended subcategories are combination of two domains, Family environment and protection, and Poverty, and they include Violence against women and children, Children without parental care, Justice for children, Child marriage and harmful practices, Child exploitation, Social protection system, and Child poverty and material deprivation. The responsibility for data collection is assigned to representative of the municipal department for social issues. For most of indicators in this subcategory, data should be collected and cross checked with CSWs, police, prosecution, health facilities, shelters, and NGOs.

For the category Children without parental care, data should be collected from CSWs, NGOs, municipal departments for social issues, and line ministries, through bilateral meetings with stakeholders and families. Data should be disaggregated by gender, age, ethnicity, and disability.

The most reliable data sources under Justice for children include police, prosecution, courts (judges or juvenile judges), CSWs, detention (rehabilitation) centers, probation service, and others. Disaggregation of data could be made by gender, age at time of diversion, ethnicity, geographic origin, category of offence, type of diversion programme, age at time of release, category of aftercare, etc.

For the subcategory Child exploitation data collection sources include labour inspections, CSWs, NGOs, police, prosecution, and desk review of available documentation. Disaggregation of data should be made by gender, age, ethnicity, and types of sexual violence (rapes, sexual exploitation)-, and type of labour exploitation.
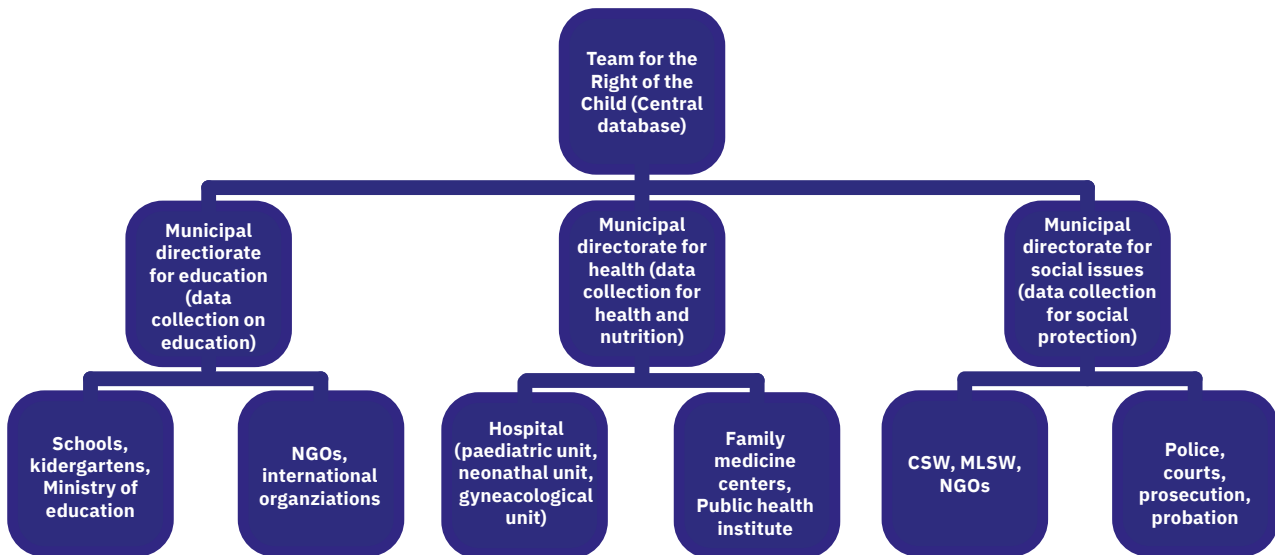
In the subcategory Social protection systems, relevant data should be collected in cooperation with CSWs, municipal departments for social issues, line ministries, by organizing bilateral and multilateral meetings or focus groups. Data disaggregation shall be made by age, gender, ethnicity, disability, geographic area, and communities (majority/minority).

Under the subcategory Child poverty and material deprivation, data should be obtained from the relevant municipal departments, line ministries, centers for social welfare, Red Cross, NGOs and other relevant institutions and organizations. The disaggregation shall be made by age,0 gender, ethnicity, geographic areas,

and communities.

The outlines of the proposed model could be adjusted and enriched with new proposals and ideas of the Team. It needs to have clearly defined roles and responsibilities for data collection of all participants in the system with allocation of adequate human, technical and budgetary resources.

In the below organigram, the basic structure of the data collection system in municipality as described above is shown:

Methods of data collection, processing and storage

The primarily data source are administrative records which exist with relevant institutions on local and central level, and may contain census and household data, cadastral data, civil registry data, schools' data on pupils and teachers, kindergarten's data on beneficiary children, lists of users of different services with centres for social welfare, archiving offices in municipalities, tax payers data, voter registers, records in courts' registries, health care files for individual children, immunization records, community nursing reports, etc.

For certain type of data, the Team will need to conduct surveys with different target groups of respondents. Two critical aspects for surveys are development of the questionnaire for each target group, and sampling.

The method of conducting the surveys include face-to-face interviews, computer assisted telephone interviews (CATI), and distribution of electronic questionnaires. Regarding the electronic questionnaires, there are many open-source forms and templates online that can be used such as Google forms[17], SurveyMonkey[18], Microsoft forms[19] and others. One of the most well-known software solutions for data processing and analyses of results of surveys is SPSS software[20], initially known as Statistical Software for Social Sciences, now renamed as Statistical Product and Service Solutions.

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17   https://docs.google.com/forms/?authuser=0
18   https://uk.surveymonkey.com/sign-up/?ut_source=homepage&ut_source3=hero-typing-effect
19   https://go.microsoft.com/fwlink/?linkid=2247238&clcid=0x809&culture=en-gb&country=gb
20   https://www.ibm.com/account/reg/signup?formid=urx-19774

Interviews with stakeholders and beneficiaries could be structured, unstructured or semi-structured.

Focus group meetings and discussions with key stakeholders and beneficiaries in the relevant sectors are frequently used qualitative research method and data collection technique. For the focus group meetings, usually the topics are prepared in advance to guide discussion and help in obtaining desired data and information.

Direct or indirect observation is data collection technique that involves watching and recording of the behaviour, actions, or events of people, objects, in their natural setting.

Desk research is methodology of collecting and analysing information from available secondary sources including documents, reports, academic publications and other materials available online or in libraries.

Collected data and information should be stored in the central municipal Database for Children data, and categorised under different sectors and subcategories under each sector. The database could be made in accordance with existing capacities and resources, starting from simple tables and Excel sheets, or developed in Access, which is integrated with Microsoft Office package.