

# National Report on the Follow-Up to the Regional Implementation Strategy (RIS) of the Madrid International Plan of Action on Ageing (MIPAA) in Albania during the period 2012-16

## Executive summary

*Approximately 500 to 700 words (1-1.5 A4 pages, single-spaced).*

Please provide an executive summary according to the structure below:

☐ Methods used for this report; in particular, details of the bottom-up participatory approach used, if any

☐ Brief review of national progress in fulfilling (or lagging behind) the commitments of MIPAA/RIS. Include **three to five major achievements** since 2012 and **three to five important aspects to be improved in the future**

☐ Conclusion.

*This is the second report of Albania on regard of Madrid Plan on Ageing. For the first time, it is assured a high degree of participation from diverse sources and actors. Besides, using a number of reports, studies and analyses on ageing, produced since 2012 more than 20 stakeholders were invited to contribute with their information and experiences about progress and challenges during implementation of MIPAA/RIS. The instrument for stakeholders prepared by UNECE secretariat was translated into Albanian and discussed in two meetings with all relevant actors; one meeting dedicated to ministries and other state institutions and the other to non-governmental organizations.*

*Albanian population ageing is characterized by relatively late demographic transition and high emigration rate.*

*Albania has been acting in many areas since the Vienna Conference and its government has put ageing issues into its main priorities. A good example of it is the mainstreaming of ageing issues into the principal political document of the country such as strategy for development and integration 2015-2020, as well as, in the new Social Inclusion Policy Document 2016-2020. Other examples are new laws such as project law on social housing, which includes specifically older people.*

*The pension reform envisaged in new 2012 Government Program and carried out in 2014-15, led by Ministry of Welfare, was of particular significance for this reporting period. It takes the ageing of the population into account and will affect similarly those already over 65 and those who are currently younger. The harmonization of the pension system, the raising of the retirement age and years of contributions, as well as the establishment of social pensions provide a base for stabilization of the inter-generational contract for the future, while preparing for the gradual growth of those older people left outside of the system. Introduction of social pensions into this law was an answer, among other things, to the needs expressed by civil society groups during the long process for adopting a 'pensioner's status' law. Since 2015 there are more than 5 000 older people already benefiting from social pension. It is small, but can help many older people to stay out of poverty, especially women in rural areas. It is costing an estimated 0.025% of GDP.*

*The health reform is shifting the health system from focusing principally on traditional mother and child health problems to tackling of increasing chronic conditions and improving the access of all population categories to appropriate health care. It is already accepted that the ageing of society gives health prevention and early detection a decisive role in increasing the quality of life while at the same time containing medical costs. The new check-up program is an investment for a better quality for the later life of today adults, while it is being expanded to include the existing elderly, improving their access to basic healthcare. In the same time, there is a clear awareness to include specific services, tasks and recourses to the dedicated care for the elderly. The new package of services (2014) to be provided at primary health care in Albania includes 11 services of diagnoses and follow up and 15 services of prevention, information and counseling for older people s. Among interventions designed for the first time, are community and home care, psychological assistance and monitoring of possible abuse. Instead of focusing on expansive geriatric services, professional's associations and Ministry of Health are agreeing to integrate services for mature citizens into existing primary and secondary systems by improving standards and qualification of health workers. Two important health care regulations approved during the year 2014 by Council of Ministers of Albania will have direct impact on access to specialized health care for pensioners.*

*The new social services reform, which is underway ( a draft law is prepared and under discussion), is expected to increase access to good quality social services for older people*

*Since 2012, there is a dramatic increase in national and international surveys and publications on ageing in Albania. 'Population ageing: situation of older people in Albania', is the first report of its kind published in 2015 in Albania by INSTAT. 'International Mobility in Ageing Study-IMIAs', a follow-up survey carried out in a cohort of 65-75 years old during 2012-2016 has made possible publication of a number of international papers on ageing and for the first time, estimates of various forms of abuse (physical, emotional and financial) among elderly in Albania.*

*Better and more systematic coordination among public institutions, in the field of ageing remains a challenge to be addressed in the future in Albania, by identifying the most appropriate approaches or instruments. International experiences of national councils on ageing could be one of the models to be taken into consideration.*

*State agencies should find various ways to support all forms of care provision especially those based at family and community and help better regulation of the profession of caregivers for Older people. This will facilitate ageing in place, enabling older persons to continue living for as long as possible in their own environment and community.*

*Finally, taking into account relative low participation of older people in social life, efforts from all stakeholders to promote that participation should be given special importance. This could be achieved by supporting grass root activities of existing older people groups and networks in major urban areas, while gradually expanding to rural areas and focusing more on older women.*

## General information

### 1. Country name

*Republic of Albania*

### 3. Name and contact details of official national focal point on ageing

*Merita Xhafa,*

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*Ministry of Social welfare*

### 2. Name and contact details of the author(s) of the report

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### 4. Name, reference, and date of adoption or status of preparation of national strategy, action plan or similar policy document on ageing (please attach relevant documents in the annex).

*Policy document of social inclusion 2016-2020. January 2016. Published in issue 20 of Official Gazette 2016.*

## PART I

### 1. National ageing situation

*Approximately 500 words (1 A4 page, single-spaced, excluding annexes).*

1. Presentation of **demographic indicators** that could help better understand the country's development regarding the issues discussed

2. Presentation of **key quantitative social and economic indicators** and features that may help to bring into focus the issues treated and to permit quantitative analysis

3. Brief **description of the social, economic and political situation**, which may help to understand the context in which ageing-related issues are dealt with in your country.

*Albania is one of the last countries in Europe to experience effects of population ageing. The proportion of the population over 65 years of age in Albania rose from 5% 1990 to 11% during the last census (INSTAT-2011) and keeps growing. There are more than 370 000 people over 65 years old in the country compared to just above 230 000, in 2001. The rapid falling of birth rates, coupled with increasing life expectancy has been in the bases of this significant transformation of Albanian population demographics. Life expectancy for the period 2010-2014 is 17.2 years at 65 years of age and 7 at 80 years of age, a small improvement compared to the period 2005-2009.*

*Emigration is another substantial factor, which is not affecting only in boosting the ageing of the population but weakening the traditional support nets provided by families as well.*

*Emigration of younger members of the family is particularly high in Albania: one in two households has at least one member who has migrated within or outside the country (Albanian Demographic and Health Survey). 3.2 million Albanians live in Albania while approximately 1.5 million live abroad.*

*IMIAs (International Mobility in Ageing Study) study in Tirana indicate that, around 10% of older persons live totally alone, while 45% live only with their spouse. Nonetheless, younger generations, leaving earlier their home and working abroad remain a potential source of support for their older parents left alone, by sending remittances and at the moment of serious health problems, by covering expensive medical interventions.*

*According to LSMS 2012 data, an estimated 10 percent of elderly population was poor and cannot meet the basic standards of living. The 'depth of poverty' of the elderly poor was on average not very large and it implies that with limited means many poor elderly can be raised to a non-poor status. Mobile phone has expanded massively during recent years with an overwhelming majority of older people owning one, but computers and internet connection are not available to a large number of elderly, which constrains adequate access to information. Similarly, although private cars ownership is on increase, only one in five elderly possesses one, which can be a constraint in terms of physical mobility in areas where public transport is scarce. Around 30% of Albanian older people live in apartment blocks, where a major mobility constraint for 80% of them is lack of elevator. The large majority or 93 percent of older people has access to an improved type of sanitation, but only 76 percent had this toilet inside the own dwelling. This is typical in rural areas*

*The pension system in Albania although covers virtually all older people faces challenges related to demography and economy. There were only 1.1 contributors for 1 pension receiver in 2013. The old-age dependency ratio almost doubled from 8.6 percent in 1989 to 16.7 in 2011. In 2030, this ratio will have again doubled to 32.9 percent. In addition, only 58.4% of people at working age were contributors in 2012. The very recent law on pensions, which has introduced for the first time the social pensions, addresses some of those challenges as well (increased percentage of salary contribution to pension schemes, incentives for motivating contributions etc).*

*Economic growth of Albania came to almost a halt at 2012, but afterwards economy has shown signs of recovery with projected growth 3.2% for 2016. Unemployment of young people and informal economy remain a concern which can threaten the pension system and other social care schemes, although during the last three years, formal employment is on increase.*

*Some recent research (IMIAs) shows comparatively high levels of chronic illness, depression and avoidable disability in older people. LSMS, IMIAS confirm that disability, chronic diseases and depression are constantly higher among Albanian older women compared to men. Access to primary health care services is relatively good, while health insurance covers all basic drugs as well as all medical procedures except dental and optical care for older persons. Albania spends approximately US \$100 on health costs on every older person per year.*

## 2. Method

*Up to 500 words (1 A4 page, single-spaced, excluding annexes).*

**Quantitative information** can be taken from ongoing and new studies on ageing, both cross-sectional (assessing the impact of policies across several sectors) and longitudinal (observing a specific policy impact over a period of time).

☑ **Qualitative information** can be obtained through a **bottom-up participatory approach or other available qualitative data from recent research** (preferably undertaken since 2012). If member States wish to conduct new qualitative research for the purpose of this report, the participatory approach may be a suitable tool, as it calls for the involvement of older persons in assessing the impact of policy actions on the quality of their lives.

In general, this section should refer to **interactions with the different stakeholders** – such as ministries, regional and local authorities, non-governmental organizations (NGOs), the private sector, social partners, academia and organizations representing the interests of older persons and of young persons – especially in the context of intergenerational relations – and on how these interactions contributed to the report. A short paragraph and/or figure of the network view that captures the overall process and stakeholders' roles could be included in this section. Part II of the guidelines could be used to ask all relevant stakeholders for a report on their actions in relation to the implementation of the four main goals of the Vienna Ministerial Declaration.

*To compile this report were used a number of published or unpublished reports and analyses along with scientific papers. Here is included a list of them:*

*'Population ageing: situation of older people in Albania', a report published in 2015 by INSTAT with support by UNFPA and Swiss Cooperation.*

*'Social profile of older people in Albania', the report survey carried out in 2015 by National Centre for Social Studies-NCSS, an NGO, supported by UNFPA.*

*Reports and scientific papers based on 'International Mobility in Ageing Study', a follow-up survey carried out in Tirana during 2012-2016 by Albanian Association of Geriatrics and Gerontology-AAGG, an NGO with support from University of Montreal.*

*'Capacities regarding advocacy for older people in Albania' an assessment of the existing capacities and resources of civil society organizations in Albania carried out by AAGG in 2016, with support of European Union*

*'Strategic planning for Movement of Organizations Supporting Healthy Ageing-MOSHA network' an analysis of priorities and plans for the older people organizations and other partners (government, media, etc) compiled in 2016 by the network.*

*Papers and reports on sociology and economy of ageing published in 'Demography' journal, a periodical publication by Demographers Association and supported by UNFPA.*

*In addition, major policies and laws related to ageing, completed during the period, were reviewed. Here are included 'Strategy of social protection and inclusion 2015-2020', 'National strategy for development and integration 2015-2020', 'Document of Pension Policies 2014', 'Law No. 104/2014 on some changes of social insurances in Republic of Albania', draft laws and Decisions of Council of Ministers, etc.*

*To assure a bottom-up approach and participation of all stakeholders, two meetings with them were organized, a package of documents were translated and distributed to them via email. This package contained the guidelines for stakeholders with Madrid International Plan of Action on Ageing and Regional Implementation Strategy (MIPAA/RIS) prepared by UNECE for third national evaluation and appraisal 2012-2017, a summary of MIPAA and previous evaluations and a summary of findings and recommendations report prepared by UNDESA/DSPD (Department of Economic and Social Affairs and Division for Social Policy and Development) fact gathering mission in Albania in 2011.*

*More than 20 public institutions, and organizations of civil society in the framework of MOSHA network were invited to contribute with information and experiences related to MIPAA/RIS in Albania during 2012-2016. MOSHA (Movement of Organizations Supporting Healthy Ageing) is a coordination instrument which combines older people associations, professional organisations and other civil society groups with interest in ageing issues. In this network are participating regularly government organisations, public service centres and academic institutions alike. Representatives of institutions and organizations were contacted via email and/or were physically met to discuss issues of progress of MIPAA/RIS in Albania and explain details of policies developed or measures and activities carried out. A list of institutions and other organizations invited to participate in the process is presented below.*

#### *Governmental institutions*

- 1. Ministry of Social Welfare and Youth*
- 2. Ministry of Health*
- 3. Institute of Health insurance*
- 4. Institute of Social Insurance*
- 5. National Office of Ombudsman*
- 6. INSTAT*
- 7. State inspectorate of work and social services*
- 8. Institute of Public Health*
- 9. Municipality of Greater Tirana*
- 10. Daily center of Tirana*

#### *Older people organizations/unions*

- 11. General Union of Albanian Pensioners*
- 12. National Union of Elderly Pensioners*
- 13. The association for Pensioners Integration*
- 14. Organization of War Veterans in Albania*

*Professionals associations*

- 15. Albanian Association of Geriatry Gerontology*
- 16. Albanian Association of Demographers*
- 17. Association of Journalists of Health and Social Issues*

*Other NGOs*

- 18. Albanian Society for all Ages Association (ASAG)*
- 19. Albanian Institute of Sociology*
- 20. Association for Life Quality (ALQU)*
- 21. Albanian Community Health Organization (ACHO)*
- 22. Resource center for Family Issues*



## Part II

### 1. National actions and progress in implementation of MIPAA/RIS

*Approximately 900-1,200 words for each of the four main goals of the Vienna Declaration, (2-3 A4 pages, single-spaced, excluding annexes).*

*This part of the report is expected to be divided into subsections. You should organize your reporting in terms of the four main goals of the Vienna Declaration and the corresponding commitments of RIS that are most relevant to your country (table)*

#### Section 1.1

##### Goal 1: Longer working life is encouraged and ability to work is maintained

*Some of the commitments related to this main goal of MIPAA/RIS are Commitment 1 (To mainstream ageing in all policy fields with the aim of bringing societies and economies into harmony with demographic change to achieve a society for all ages), Commitment 2 (To ensure full integration and participation of older persons in society), Commitment 3 (To promote equitable and sustainable economic growth in response to population ageing) and Commitment 5 (To enable labor markets to respond to the economic and social consequences of population ageing). Albania has taken some measures to progress in meeting these commitments.*

*The new national strategy for development and integration 2015-2020, which is the main national policy document and lays the Albania's roadmap towards integration to European Union, acknowledges the human resources and the society as whole as Albania's most important resource. Social insurance, focusing mostly on balancing work, social contributions and pensions, is one of the main components (along with education, health, employment, ect) of human development and social cohesion as described in the Strategy. In that same strategy, challenges related to ageing of Albanian society are underlined while isolated older people are included into the category of vulnerable groups.*

*It is too early to measure the effect of the implementation of the new strategy, but it remains a good example of mainstreaming ageing in principal policy documents of Albania.*

*During the year 2015, under the leadership of Ministry of Social welfare, with the participation of several other stakeholders, including civil society partners, and with the support of UNDP, it was developed the Social Inclusion Policy Document 2016-2020. The document is published in the 20<sup>th</sup> issue of Official Gazette 2016. In February 2016, its plan of action has been approved as well. It has taken many principles and targets from European Strategy against poverty and social exclusion. The strategy underlines the monitoring and reporting of measures. Age is mentioned there as a risk factor to be taken into consideration while 'aged women' are a specifically described category. **Following the policy document, Ministry of Social Welfare has prepared another more detailed instrument, the Strategy of Social Protection, describing action and measures for integrating vulnerable groups in the country.***

*To promote fair social participation and human rights for older people (among other groups considered vulnerable), the strategy envisages services of free legal assistance. Policies of social or affordable housing are one of main pillars of the strategy. The strategy states that safe and protected housing is one of the principal human rights. Government of Albania supports that right by means of specific programs including rented social apartments, low cost houses, and public land for construction. In addition, there are other measures, such as, subsidizing of hiring apartments, subsidizing of bank credits, small grants, immediate grants etc. Older people are among priority groups in that context. Following the approval of the strategy, the discussion on a new law on social housing just started this year. A project law is already developed under the leadership of Ministry of Infrastructure and it is planned to be approved within 2016.*

*Strategy introduces for the first time a standardized frame or metadata, describing detailed indicators of social exclusion for specific groups. These indicators will serve the monitoring the progress of the strategy towards better inclusion. For older people, there are over 30 indicators including rate of older people in risk of poverty, relative median income (50% and 70%), inequality in income, risk of poverty gap, employment rate of those 55-64 years old, dependency rate, life expectancy for different ages, inappropriate housing rate etc. For many indicators, a specific sex and space disaggregation is required. Indicators allow for monitoring the rate of inclusion of Roma people into pension schemes.*

*To promote and support healthy lifestyles and well-being in work, prevent and control non-communicable diseases, Ministry of Health has introduced in 2015, for the first time, a large program at primary health care services. The program which is financed by public money and is free for all people over 40 years old provides yearly check-up by means of tests and interviews for early detection of risky life style and metabolic risk factors as well as professional advice and/or specialized follow up. The program aims to preserve good physical and mental health, and good mobility, hoping also to contain costs of health care later in life. The program is designed correctly, projecting its health benefits to older people as well, but, initially, there were some controversies regarding the limitation of age group. Representatives of pensioner's organizations and MOSHA network advocated for inclusion of over 65 years old age categories in the program on grounds of health rights and after several discussions with Deputy Minister of Health this request was formally accepted. **A project Decision of Council of Ministers is prepared by Ministry of Health and** within the year 2016, the details of this enlargement of the program are expected to be finalized. Tens of thousands of older people are expected to directly benefit from it every year.*

*Ministry of Health in collaboration with World Health Organization and civil society organizations, dedicated the World Health Day of 7<sup>th</sup> of April 2012 to Ageing and Health. A massive campaign, with participation of hundreds of older people and young people and large mass media coverage, was organized in Tirana. The campaign promoted the healthy lifestyle across the life-course to save lives, protect health and prevent disability and pain in older age. Other messages covered issues such as 'early detection of disease as well as prevention and care improve the wellbeing of older people' and 'caring for older populations, and supporting their participation in daily life, will prepare Albanian society to cope with the changing world'. Since then, each year Institute of Public Health and MOSHA network have organized smaller scale campaigns on healthy and active ageing. There are recent data showing a continuous decrease of smoking at men and women over 65 in Albania*

*At present, the transition from employment to retirement is abrupt, and strictly regulated, typically happening at 65 for men and 60 for women. According to IMIAS survey comparatively few Albanian older people continue to work for profit after retirement. One first attempt to make the transition to retirement more flexible, so the older individual could stay longer in the workforce, in accordance with his needs and aspirations, is the measure foreseen in the new Law of Higher Education of September 2015. By current year, instead of being 'sent to pension' automatically by unilateral decision of employer, professors in universities are allowed to negotiate that, allowing for more flexibility and longer years of employment.*

*In some other example of flexible retirement, occasionally, older teachers or older doctors fill in when there is need for experienced professionals, especially in towns outside Tirana.*

## **Section 1.2**

**Goal 2: Participation, non-discrimination and social inclusion of older persons are promoted**

*In addition to commitments 1, 2 and 8 (mentioned already in section 1.1) there are two other commitments related to goal 2; commitment 4: (To adjust social protection systems in response to demographic changes and their social and economic consequences) and commitment 6: (To promote life-long learning and adapt the educational system in order to meet the changing economic, social and demographic conditions). Some relevant policies, programs and other activities taken in Albania in connection to these commitments are described below.*

*The new national strategy for development and integration mentioned above, is only one in the list of several policies, strategies and laws which are laying the bases a historical reform being carried out since 2014 in Albania, which aims to adapt national pension systems to demographic changes and to address serious challenges, including short term un-sustainability, contributions versus benefits imbalances, rural- urban differences, and a growing proportion (although still small) of older people without any pension.*

*The objective of the government of Albania is to make pension's systems sustainable in long term and reliable for future generations, fulfilling in the same time, main objective of guaranteeing sufficient income for elderly. This will be achieved chiefly through increasing the size of contributions and the proportion of those who contribute, coordination with all agencies in fighting informality, increasing the number of years for contributions from 35 in 2015 to 37 in 2020, slightly increasing the age of pension (to reach 61 for females by 2020) and unifying the scheme for rural and urban pensions by 2018. Two important components of the reform are; first, the introduction, for the first time, of social pensions (in effect with the new law) for older people who didn't have any other source of income and second, assuring the pensions for migratory population of Albania by agreements with other countries in the region especially with states of European Union. The reform was led by Ministry of welfare and introduction of social pensions into it were an answer, among other things, to the needs expressed by civil society groups.*

*Since 2015 there are older people in Albania who are already benefiting from social pension. To get that pension a person must be at least 70 years old, be resident in Albania and not have other income. The typical categories of eligible older people benefiting from it are women who haven't been employed but have been engaged only in household work, Long term unemployed or those who have not been employed at all during their life, people living in rural areas being self-employed in their small farms but getting older can't use the land anymore as a source of income, people coming back from emigration without the necessary history of employment to allow them to profit from a the compulsory pension scheme. The social pension is very small (around 8 000 Albanian Lek and roughly half of the average urban pension in Albania) but it can help many older people to stay out of poverty, especially in women in rural areas. More than 5 000 older people are already benefiting from it. Its estimated cost in new system of pensions is around 450 000 000 Albanian Lek, or 0.025% of GDP.*

*Challenges remain in achieving long term success of the new policies especially those related to contributions increase. On the other hand, more should be done in the future to support labour markets to adapt to an ageing society.*

*Some 5-10 years ago the data on ageing in Albania were very scarce or almost lacking. Typically, health and demographic surveys of 2002 and 2009 focused only on younger adult populations 15-49 years old. Almost no national publications on demographic, health, social and economic situation of older people existed. One of the strong recommendations of the report prepared by UNDESA/ DSPD fact gathering mission in Albania in 2011 was the development of capacities for research, systematic data gathering and analyses on ageing in Albania. Since 2012, there is a dramatic increase in national and international surveys and publications on those topics. This increase has a direct link with intensification of non-governmental organizations activities and rise of awareness among state actors as well as UN support in the field.*

*The most important publication is 'Population ageing: situation of older people in Albania', a report published in 2015 by INSTAT with support by UNFPA and Swiss Cooperation. It analyses the most recent data disaggregating for age categories, based on national census and various surveys. More in depth analyses of health and social conditions of older people in Albania are based on 'International Mobility in Ageing Study-IMIAs', a follow-up survey carried out in a cohort of 65-75 years old in Tirana during 2012-2016 by AAGG and University of Tirana in collaboration with University of Montreal. A number of international papers on ageing have put Albania into the global map of research in this field. For the first time, this survey makes possible estimates of various forms of abuse (physical, emotional and financial) among elderly in Albania. Other specific surveys have been carried out as well; one of them is 'Social profile of older people in Albania', the report of the survey carried out in 2015 by National Centre for Social Studies-NCSS, an NGO, supported by UNFPA. The periodical 'The Demography' a publication of Association of Demographers, supported by UNFPA, since 2012, has dedicating more room to papers, reports and analyses on ageing issues.*

*To promote lifelong access to education and training among older people MOSHA network and the Union of Elderly Pensioners have carried out projects in 2012 and 2015: in 2012 AAGG and MOSHA network within the framework of a EU supported Project organized a course on computer, internet, email and social media utilization for a group of around 30 older people. In addition, network organized a number of workshops with representatives of older people organizations on issues such as legal assistance, project management and advocacy. In one of the workshops representatives Tirana Legal Aid*

*Society lectures on existing legal framework and encouraged older people to use all opportunities including legal assistance and information to avoid abuse and ensure their dignity and human rights. During 2015, Union of Elderly Pensioners has organized series of lectures on diseases and health in collaboration with University of Tirana.*

*Since 2012, each year, pensioner's organizations, and other associations focusing on ageing issues, often in collaboration with central or local government have organized systematic campaigns to promote the inclusion of older persons, in political and social life. Campaigns around 1<sup>st</sup> of October have been focusing mostly on advocacy activities to facilitate participation, in decision-making processes at all levels, both directly (encouraging hundreds of older people activists to be part of massive meetings and marches) and through civil society organizations and networks. In 2013 a meeting with parliamentary commission on social and health affairs was organized by MOSHA network, to push for a new draft- law on so called status of pensioners. The draft didn't become law, but with the new government after the elections, elements of it were included into the new law of pensions. Civil society associations (ASAG and Association for integration of older people), in a campaign during October 2015, met several stakeholders, including Head of country's Ombudsman Office to continue the advocacy for status of pensioners. Campaigns of 7<sup>th</sup> of April almost every year have been focused on encouraging older people associations to advocate for appropriate health services and health awareness. As a result of those campaigns Ministry of Health is adapting this year its new program of 'health check-up'. Activities have been part of international campaigns 'Age Demands Action'. The new project of MOSHA network, supported by EU, started in 2016 as part of a Western Balkan country's NGOs network and aims among others, to work with media on developing non-discriminatory images of older persons, and disseminating information about ageing as a natural phase in individual development. Activities have already started to involve older persons in the planning, implementation and evaluation of national media campaign to be carried out next year.*

*New administration of Greater Tirana Municipality, elected in 2013, has started a process of involving older people into discussions for development plans of the Municipality. A older citizen's council was set up with members from pensioner's organizations and older people activists. The first meeting of the senior citizen's council with Mayer of Tirana was organized in September 2015. There Mayer launched his ideas of a city friendly for people '8 to 80 years old'. In addition, new urban planning of Tirana established new standards that make new buildings more accessible to older persons. It remains to be seen if the obligation that each constructed building must be accessible to aged persons and persons with disabilities are put into force.*

*Even though there are activities illustrating participation of older people in social and political life, in 2012, IMIAS survey showed that only a very small proportion older people in Albania are part of an association or a club. This is especially true for Albanian older women.*

*An analysis was carried out by AAGG during 2016 regarding the profile of older people in civil society and opportunities of involvement of associations in advocacy and collaboration with public institutions. It shows that the expectation of many older people, based on tradition and former times, is that government must do more for them. Most of them are critic about the inefficiency and lack of respect from government institutions. Despite large numbers of declared members, advocacy capacities remain weak among those associations. Government institutions, on the other hand, underline the competing priorities (children, youth, disabled, Roma, women etc), rigidity of public institutions and the need for*

*more delegation of responsibilities in a democratic society. Government representatives mention that sometimes individual 'trouble makers' can undermine the mutual trust. Some other civil society associations believe in the hidden strengths of communities and the potential of collaboration between government, civil society organizations and even businesses. Older people are seen by most of members of the network as a cross cutting group, where there are vulnerable and isolated members of society as well as active contributors and people with experience and knowledge to support and change things. There is a clear need to connect those groups.*

### **Section 1.3**

#### **Goal 3: Dignity, health and independence in older age are promoted and safeguarded**

*The main commitment related to goal 3 in MIPAA/RIS is commitment 7 (to strive to ensure quality of life at all ages and maintain independent living including health and well-being*

*To fulfill that commitment, Albania has introduced new regulations, laws and new packages of services. After a 6 months' work in a technical working group, set up with order of Minister of Health and supported by UNFPA, the new package of services to be provide at all Albanian system of primary health care was approved in 2014 by a joint agreement of Minister of Health and Head of National Obligatory Health Insurance Fund. In the package was introduced a dedicated section (section 5) 'health care for the elderly'. It defines the Health Center 'friendly' to older people and requires the adaptation of skills and attitudes of personnel of Health Centers according to needs of older people (over 65 years old). The aim of the services is to reduce complications and maintain health. The package includes 11 services of diagnoses and follow up and 15 services of prevention, information and counseling for older people s. Among interventions designed for the first time, are community and home care, psychological assistance and monitoring of possible abuse.*

*During the year 2014 there were approved two important health care regulations by Council of Ministers of Albania with direct impact on access to specialized health care for pensioners. The first bylaw (308 date 21.05.2014) guarantees the provision of a number of hospital care packages for the pensioners. The newly regulated services include specialized cardiology examinations, heart surgery, dialyses and kidney transplant for kidney failure, cochlear implant for hearing loss etc, and can be accessed in health insurance contracted public and private hospitals alike without direct costs for pensioners. The other regulation by Council of Ministers the same year (955, date 29.12.2014) excludes pensioners from any direct payments for all first alternatives in the medicaments list*

*The new 'health card' which contains unique individual number and obligatory healthy insurance number, is distributed free of charge for pensioners and it doesn't need to be renovated each year. It has started to facilitate the access of older people into health center services or hospital services by minimizing the bureaucracy.*

*The analysis of Health Insurance Fund for the period 2012-2016 demonstrates that 70% of the total of prescriptions and 45-50% of total cost of medicament reimbursement go for older people.*

*New mobile mammography services introduced for the first time by January 2015 are drastically improving access to prevention care for women over 50 years old in small towns and villages of Albania. Almost 8000 women has already profited from it.*

*After introducing 'Geriatric care' as a specific matter in the curricula of the new faculty of Nursing and Medical Technology, in 2012, it was included in the teaching program of the new faculty of Public Health, part of Tirana University of Medicine.*

*It should be noted that although some clinical protocols exist in primary health care practice related to care for the elderly, doctors and nurses have very little training in the field and in one qualitative survey of 2013, older people often complain about poor communication and ethical issues with health care workers.*

*The need for more daily or residential centers for older people in Albania during the last 5 years is being met by an increase of public and non-public institutions. There is a rising trend of so called social business services for older people; among 18 residential centers, 12 are non-public and among 15 daily centers, 13 are non-public as well. There 1400 older people in total in residential centers in Albania. In addition, local governments in municipalities are playing a larger role, and there are already, 9 multidisciplinary centers, where vulnerable older people can find some infrastructure and other services (including hot meal, refreshments, library, recreation etc.) for spending daily time with dignity.*

*The reform of social services is underway and a new draft law is prepared by Ministry of Social Affairs. It regulates provision of services from third parties, introducing clear procurement procedures and quality standards. Besides, the reform aims at deinstitutionalization of older people with special needs, by developing alternative services, including community and family based interventions*

*Representatives of older people organisations were consulted in all stages of preparation of the new law of palliative care; first at Ministry of Health, where the draft was designed, and later at parliamentary commission (1<sup>st</sup> of October 2014) before the final parliamentary approval (16<sup>th</sup> of October the same year). For the first time in Albania there is a legal base to protect dignity and autonomy of patients, without prejudice, and to promote the quality of life without pain till the end. The law acknowledges all kinds of initiatives for providing palliative care, including NGOs and families and requires Ministry of health to support them in various forms. As an immediate result of the law, there are organised already 5 new services providing care at hospital and primary health care level in Tirana and in some major cities*

*While regulations are being improved and barriers to services are being addressed, important gaps remain in professional capacities and voluntary networks supporting older people. In this context, two projects, part of governmental and non-governmental programs are a good model in the field of provision of better care for older people which needs to be supported and expanded:*

*Caritas Albania, a NGO, since October 2012 is part of an international network in the regional project 'NET-AGE', an initiative supported by IPA program (European Union). Home care for the elderly is a main component of the project and is being piloted in Tirana by a multidisciplinary team of 5 (doctor, nurse and auxiliary nurse). They have already taken care for many disabled, sick, or lonely older people. The project is promoting voluntary work by young or older people who are involved in the support of vulnerable individuals in their communities. A number of meetings with civil society associations are trying to multiply the model in other communities and raise funds for such activities.*

*Another project aims to provide a longer-term answer in preparing the professional carers for frail older people. At present, even the carers who work at residential institutions for the elderly, with the exception of some nurses, don't have the proper qualification. Inappropriate care and abuse are the result of unprofessional care noted by some media reports. In Kamez, a town near Tirana, a new specialised professional school for training of carers is providing since 2013, a four years' program of qualification for carers for older people, in collaboration with Ministry of Social welfare and GIZ, a German organization. 50% of training is practice in real older people care settings. 'Sanus-mobile nursing', a NGO of professional carers, has created in 2015 a network of organizations and professionals specialized in care for older people and it is working in collaboration with Ministry of Social Welfare and Albanian Order of Nursing to better regulate and support the profession of older people carers.*

*Dementias are expected to be an increasing problem, threatening the quality of life of older people in Albania and putting a high pressure on the families. There are no specific or dedicated structures, neither systematic activities in that area, society is not yet aware about it, and many older people and families suffer in silence and don't take the necessary support.*

*There has been significant improvement during recent years, under 'Urban Renaissance' Program of urban infrastructure. Government grants are financing infrastructure programs presented by municipalities and 126 projects are already making a difference in numerous towns and villages in Albania, providing better public areas to live for older people (improved sidewalks, pedestrian areas, improved street lights, public parks etc). Nevertheless, infrastructure problems remain an important concern in Albania and cost to public transport is considered by many older people a substantial barrier in using services or simply moving through the city to socialise with other people. After some advocacy activities with Tirana Municipality there are plans for providing free access to public transport for certain more vulnerable older people categories.*

## **Section 1.4**

### **Goal 4: Intergenerational solidarity is maintained and enhanced**

*Commitments related to goal 4 in MIPAA/RIS are those 1, 4, 8, described in above sections and commitment 9 (to support families that provide care for older persons and promote intergenerational and intra-generational solidarity among their members).*

*The progress of Albania in meeting this goal and the related commitments could be divided in three dimensions; a) mainstreaming ageing and sanctioning intergenerational solidarity in laws and policies, b) designing public instruments to translate this in practice and c) creating the right environment for initiatives from civil society and communities.*

- a) Albania has followed the approach of mainstreaming ageing in its legislation and policies adjusting in the same time its social protection strategies to the populations ageing. In the*



*constitution of Albania (article 59) it is sanctioned the role of state in relation to older people. The latest social protection and inclusion strategy 2016-2020 integrate older people issues and sets monitoring targets about them. Other laws and regulations recently approved and described in other sections of this report (law of pensions, by laws of health care, etc), sanction principles of inter-generational solidarity in society.*

- b) Ministries of Social Welfare and Ministry of Health are two main ministries to channel public funds and other resources in dedicated institutions and services, as well as to set standards and monitor them. Health care services for older people are being more appropriate and more accessible for older people since 2012 because of new regulations and adaptation of health packages at primary health care and hospital level. In social care field, there is trend of delegating more responsibility from Central government level to Local government level; Most of Albania's 61 municipalities have some structure and recourses for monitoring vulnerability of their senior citizens and providing some support for them. Nonetheless, there are a lot of gaps and it seems that those resources at Municipality level are not enough to cover all competing needs of several social groups at risk, and vulnerable older people are not the main priority among of them.*
- c) Although interventions undertaken by non-governmental associations still remain patchy and focus mostly in Tirana and other main urban centres, there is a trend for more coordination and there are noteworthy actions, which could serve as a positive example to be replicated and systemized. Most of awareness raising campaigns organized by the network of older people organisations has put together groups of older people activists and young students. The most recent case is the activity organised with students of Faculty of Medicine and about 100 older people from Albanian Association of Pensioners at 6 of June 2016.*

*Some other examples are listed below:*

*One of the most important objectives of the IPA project Dialogue of Civil Society Organizations on Problems of the Elderly in Western Balkans, which has been implemented in Albania, along with other neighbour countries of western Balkan, was to develop self-help groups. These groups aimed to motivate and empower the elderly to independently resolve their own problems, which they have identified themselves. Within that project some 13 self-help groups have been created, gathering around them more than 100 active older people. In addition, voluntary work in communities have been promoted with inclusion of dozens of students working together with Municipality social workers in identifying isolated older people and providing some basic services for them.*

*Caritas project in Tirana has, in the same way, sustained community work by groups of professionals providing models of home care for about 50 frail older people.*

*The network of organizations and professionals with interest in care for older people catalysed by 'Sanus-mobile nursing' is another model of young people and older people working together with a common goal; promoting the support for families of disabled older people, by providing in the same time better opportunities for work for younger professionals*

*While state can't play an important role in addressing recreational needs of older people, besides building parks and supporting daily centres, there are a number of successful examples of private businesses collaborating with pensioner organisations providing them free venues and food for celebrations and parties or free travel to in country touristic attractions. Since 2012, every year, all four main pensioner organizations in the country have reported several recreational activities for their member supported by private partners.*

*Besides yearly campaigns of public awareness about inclusion of older people and intergenerational solidarity, two important events were organized during 2014; first, on April, was a international conference on ageing (Burning needs of Ageing in Albanian society) organised by ASAG, AAGG, and Tirana Municipality in collaboration with European Federation of Older People –EURAG, an international non-for profit organization, and with participation of 14 European countries. UNFPA supported the conference. Second, on November, was the congress of carers for older people where 25 organisations and institutions participated. It was organized by Sanus and GIZ. In both events, solidarity of society towards older people was tackled in presentations and discussions.*

*Gender is becoming an important issue in Albania. There is law and a national strategy about gender equality. As result, there are tangible outcomes; The number of women in Parliament grew from 16.4% in 2009 to 20.7% in 2014; the number of women in municipal councils grew from 12.2% in 2011 to 35% in 2015 Women mayors grew from 4.6% in 2011 to 14,7% in 2015. However, data about gender issues among older people in Albania remain sporadic. For the first time, there are some data provided by local research about older women violence. IMIAS demonstrate that 6% of older women in Tirana has received physical violence from their partner while 12% of them report to have received psychological violence. Similar figures are reported by older women about abuse from other family members. Another visible problem is difference4s in participation of older women compared to older men in society; qualitative survey of 2013 noted that there are 5 times more men than women participating in associations, daily centers or other community groups. In answering this situation, state institutions are making efforts to include gender in social policy documents together with ageing, while some civil society groups try to focus more on older women in their campaigns and projects.*

## **Section 1.5**

### **Regional cooperation**

*The commitment 10 is about promoting the implementation and follow-up of the regional implementation strategy through regional co-operation.*

*Government of Albania has been collaborating with UN agencies in the process of meeting MIPPA/RIS commitments and achieving its goals. Following a joint mission of Department of Economic and Social Affairs (DESA) and Division for Social Policy and Development (DSPD) in 2011 in Albania, after the request from Ministry of Social welfare and in collaboration with UNFPA Albania, DESA was involved in supporting Albanian government with recommendations and direct involvement such as organization in 2012 of a workshop with public institutions and civil society organizations about the draft law of older people ('status of pensioners'). Later, DESA encouraged and assisted the designation of a project proposal on strengthening the capacities in civil society and improving awareness and access to*

*information on ageing in Albania. Although unsuccessful the project designed by AAGG and ASAG, provided an opportunity for working together and identifying priority areas for further intervention. Furthermore, some of the recommendations of DESA mission were the catalyst for later developments especially the large research and analyses of data which produced the first publication of INSTAT in the field of ageing.*

*There are already some examples of regional networks of civil society organizations which use the MIPAA/RIS as a basis for their platforms and coordinate their efforts to achieve progress in international scale: AAGG and MOSHA network are part of a southeast European network of organizations from Serbia, Macedonia, Montenegro, Bosnia-Herzegovina and Austria under the project Taking Action on Social Inclusion of Older People, supported by European Union. It is part of a larger network focusing on campaigns of awareness and advocacy on ageing, coordinated by Help Age, an important British nongovernmental organization.*

*In another regional network, Caritas Albania, with 13 partners from 6 countries of Adriatic region, including Italy, are implementing the project 'NET-AGE', an initiative supported by IPA program (European Union). The project aims to promote regional social development encouraging networking of relevant public volunteering stakeholders to boost innovation in the delivering social-health-care services for ageing people. It also aims to improve the coordination among public and private stakeholders to overcome obstacles in the field of elderly assistance.*

## **2. Conclusions and priorities for the future**

*Up to 1,000 words (no more than two A4 pages).*

*This final section should contain an overall summary of the findings, future challenges and opportunities related to ageing; recommendations for future actions to be taken; and policy adjustments. Identify priorities for further policy research and indicate your country's requests, needs and wishes with regard to the work of international organizations in the field of ageing.*

*This is the second report of Albania on regard of Madrid Plan on Ageing. The first one has been prepared for the first round of evaluation and appraisal and Leon Conference in 2007. For the first time, it is assured a high degree of participation from diverse sources and actors. The contributions received for this report demonstrate that Albania has been acting in many policy areas since the Vienna Conference in 2012. The two rounds of report on the implementation of the targets on ageing in ECE Region and the Vienna document, gave to Albania the opportunity to assess the achievements made since and to anticipate more intense networking and cooperation in the future.*

*Albania's demographic transition occurred relatively later compared to other ECE region industrialized countries, but the projected acceleration of population ageing coupled with a high emigration rate has made imperative to put ageing issues into priorities of government. The stagnation of economic growth of 2009 and the gradual decrease of remittances made the demographic and social challenges more evident. Nevertheless, in spite of challenges that Albania is currently facing, its government has been committed to progressively move towards the goals agreed in the area of ageing.*

*The pension reform envisaged in new 2012 Government Program and carried out in 2014-15 was of particular significance for this reporting period. It takes the ageing of the population into account and will affect similarly those already over 65 and those who are currently younger. The harmonization of the pension system, the raising of the retirement age as well as the establishment of social pensions provide a base for stabilization of the inter-generational contract for the future, while preparing for the gradual growth of those older people left outside of the system.*

*Albania has mainstreaming ageing issues into the principal political document of the country such as strategy for development and integration 2015-2020, as well as, in the new Social Inclusion Policy Document 2016-2020.*

*Ministry of Social Welfare is aware that burning ageing issues cannot be addressed just by building more residential care centers. It needs a whole society approach, multi-sectorial collaboration and acting at different levels, equally, national and local governments. There is a need for support of local government and other non-governmental initiatives in the process of decentralization. On the other hand, understanding that the national infrastructure on ageing is underdeveloped, more coordination and monitoring capacities at central level is needed.*

*While pension reform would need the continuation of measures taken by government of improving the rule of law into economy, future innovative measures to support the labour market for older employees will be needed along with the raising of retirement age.*

*Participation and inclusion of older people into social life will be better monitored by standardized targets and indicators included in the new social inclusion strategy, but to see real change and accelerate the progress, Ministry of Social Welfare and Municipalities should systematically catalyze and support initiatives, participation and voluntarism by active older citizens, recognizing their expertise in life after employment. Younger generations should be guided to collaborate more in older people focused community programs. This will serve to give thousands of older people lives meaning and at the same time it will benefit the population as a whole.*

*The health reform is shifting the health system from focusing principally on traditional mother and child health problems to tackling of increasing chronic conditions and improving the access of all population categories to appropriate health care. It is already accepted that the ageing of society gives health prevention and early detection a decisive role in increasing the quality of life while at the same time containing medical costs. The check-up program is in investment for a better quality for the later life of today adults, while it is being expanded to include the existing elderly, improving their access to basic healthcare. In the same time, there is a clear awareness to include specific services, tasks and recourses to the dedicated care for the elderly. Instead of focusing on expansive geriatric services, professional's associations and Ministry of Health are agreeing to integrate services for mature citizens into existing primary and secondary systems by improving standards and qualification of health workers.*

*In local community services, the new package of care for elderly should be monitored with participation of older people themselves and home visits should be promoted for those isolated and disabled. In a combination of financial, social and health measures, family care should be recognized and supported.*

*It should be underlined that information and research on ageing issues since 2012 has been significantly intensified in Albania. Various methodologies and prospective are being implied allowing for robust*

*analyses and identification of social and health priorities. What remain, is systematically gathering data and producing standardized indicators at national level.*

*The apparent improvement during recent years, under 'Urban Renaissance' Program of urban infrastructure are providing numerous towns and villages in Albania with better places to live for older people, with better sidewalks, pedestrian areas and public parks. To better address isolation and poor mobility and to improve access to social life, this program needs to be gradually followed in the future by measures such as free or low cost public busses for senior citizens.*

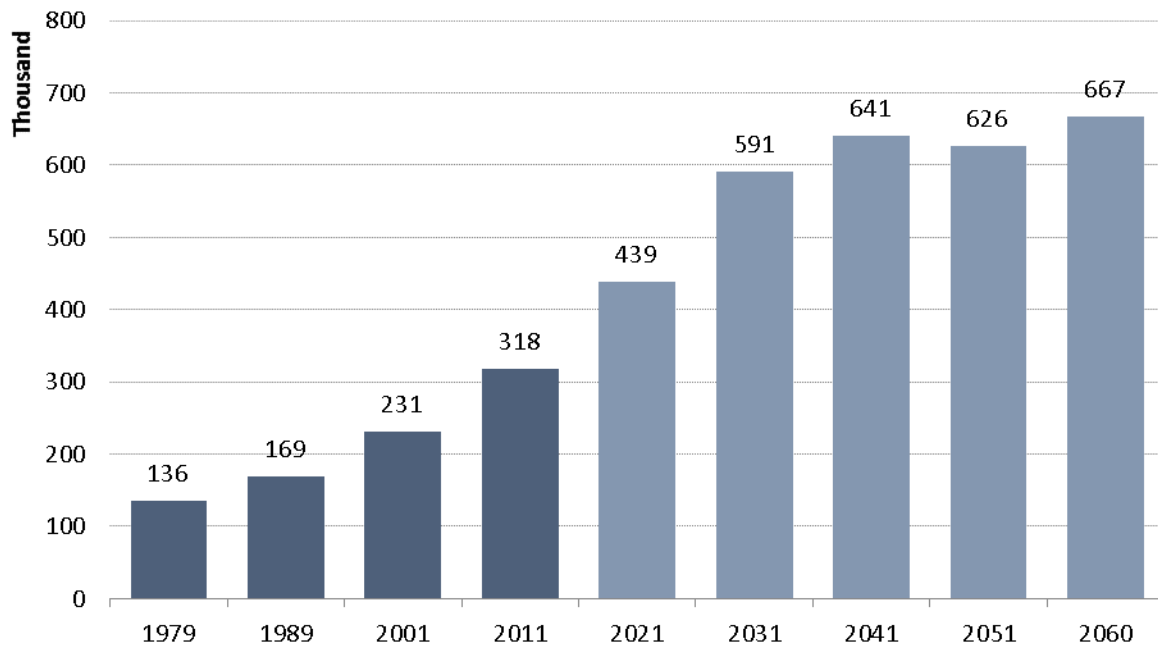
*Smaller families and older parents left alone by emigrating younger members of the family are an increasing issue in Albania. Besides vulnerability risks, it can be seen as an indicator of urbanization, and independent life, and by threatening traditional support networks, it serves as an engine for innovation in care provision in society. Younger people following job opportunities can still provide some support for older parents with special needs, if affordable services exist. State agencies should find various ways to support all forms of care provision especially those based at family and community and help better regulation of the profession of carers for Older people. This will facilitate ageing in place, enabling older persons to continue living for as long as possible in their own environment and community.*

*Albanian has experienced systematic small scale campaigns of advocacy on ageing during these years with participation of hundreds of older activists and pensioner's organizations. There are plans to make those campaigns more effective by improving communication and analytical skills of those associations and involving more media professionals and local governments. There is already a strategic plan prepared by civil society network in this field. In addition, more efforts should be oriented to education of different categories of society, especially young people on healthy ageing as part of the life course while also informing older persons on challenges of the younger generations. This would require a better collaboration with Ministry of Education and Sports and other education agencies*

*Finally, to improve awareness about positive views of ageing and to sustain the work towards a society for all ages, Albania will continue to require participation in coordinated international effort with exchange of experiences and systematic networking.*

## Annexes

### Population over 65 in Albania, 1979-2060 (in thousands)



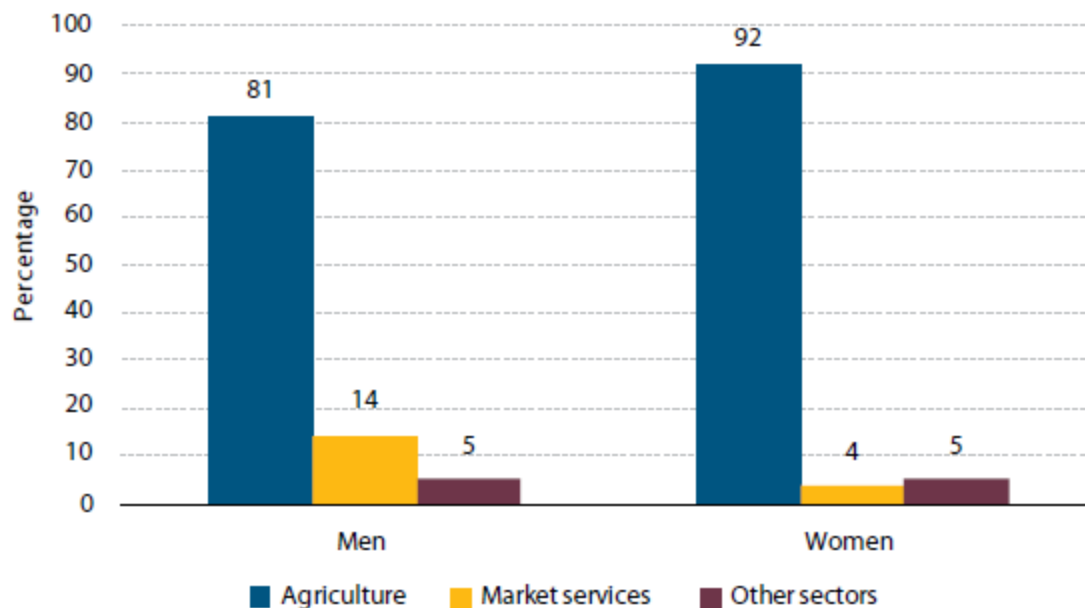
INSTAT: Censuses 1979-2011 and projections

### Employment rates distributed by age groups and sex. 2013

Sex	Age group	Employment rate (%)
Total	Total	53
	15-24	28
	25-54	76
	55-64	58
	65+	11
Men	Total	62
	15-24	37
	25-54	86
	55-64	71
	65+	15
Women	Total	44
	15-24	20
	25-54	66
	55-64	44
	65+	8

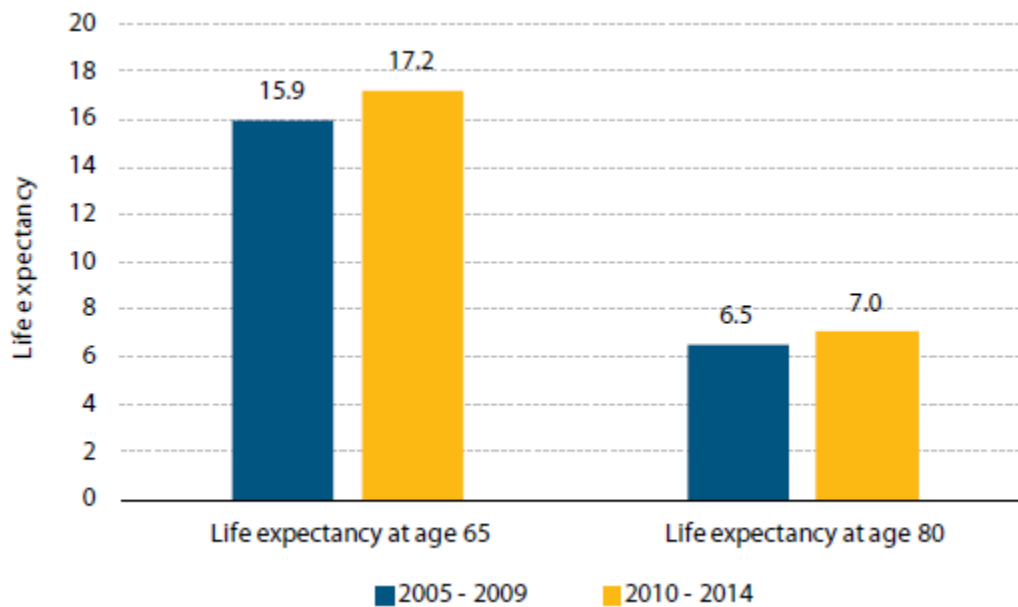
INSTAT: Labour Force Survey 2013

### Working population over 65 years old by sex and by sector of work



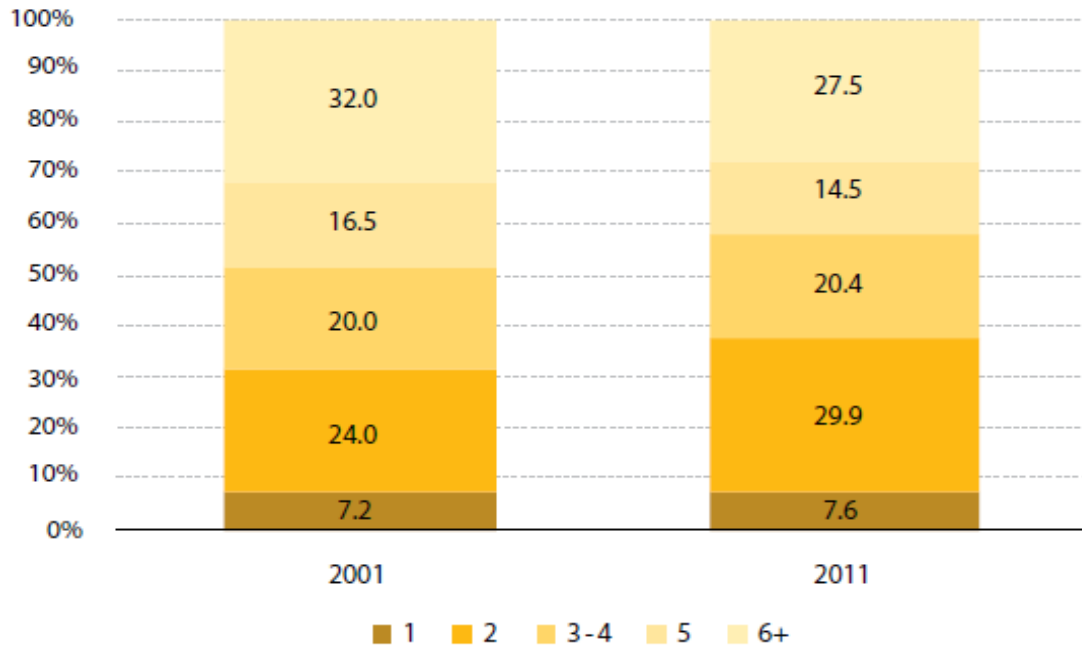
INSTAT: Labour Force Survey 2013

### Life expectancy at ages 65 and 80 in 2005-2009 and 2010-2014 (in years)



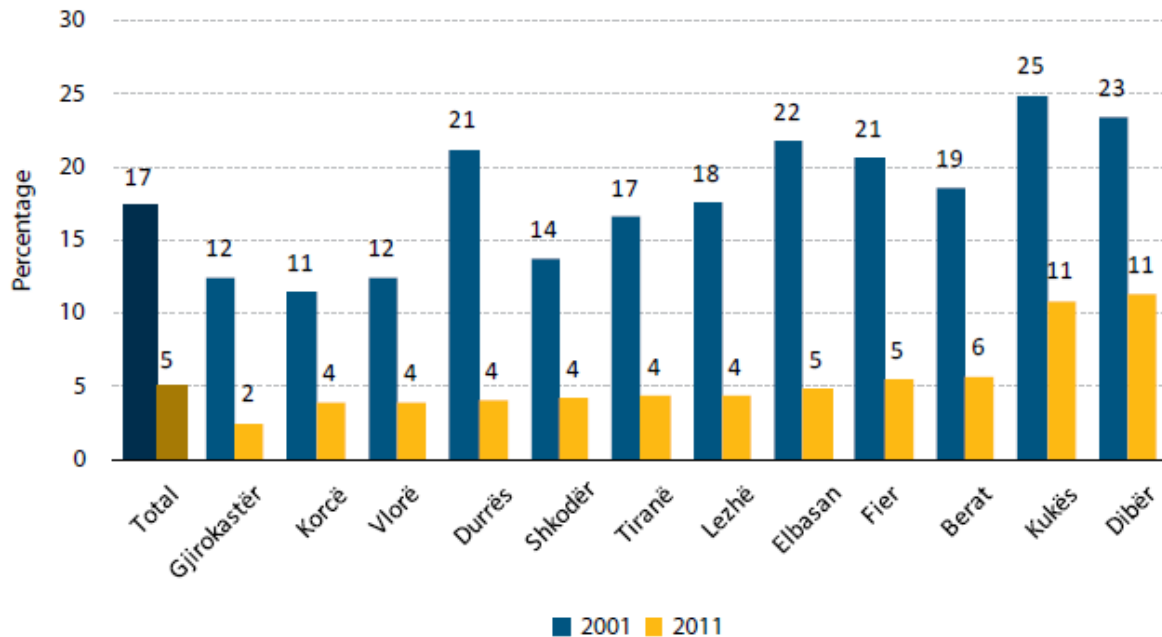
INSTAT: ageing of population: situation of older people in Albania

### Elderly population 65 and over by census year and by household size



INSTAT: ageing of population: situation of older people in Albania

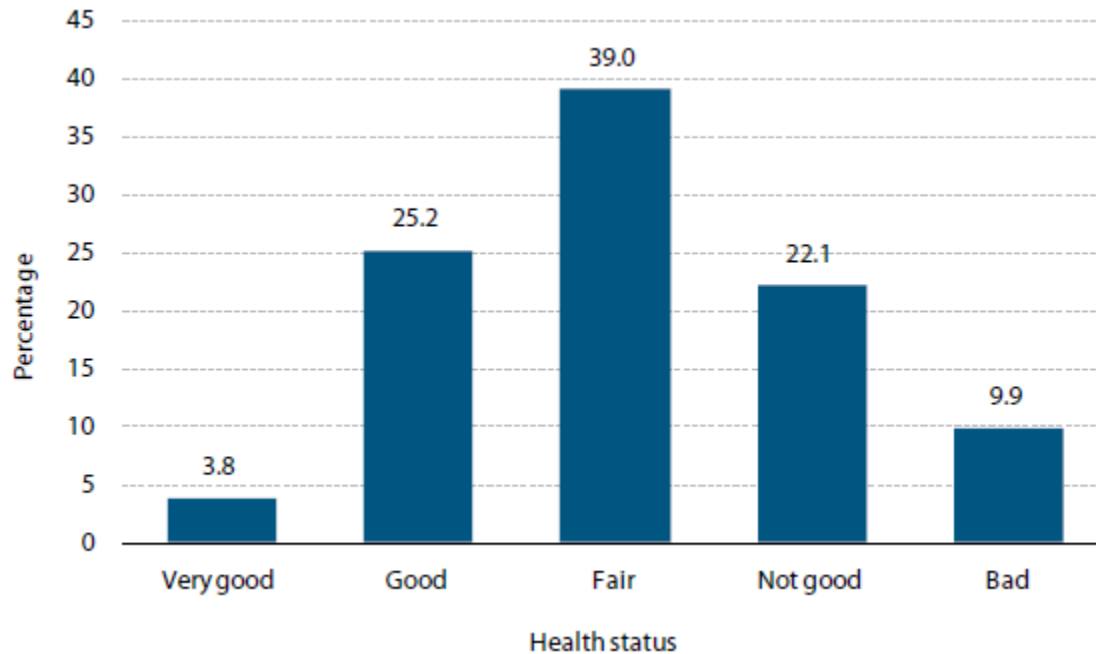
### Percentage of elderly population over 65 years old living in an overcrowded dwelling by regions (2001-2011)



INSTAT: ageing of population: situation of older people in Albania

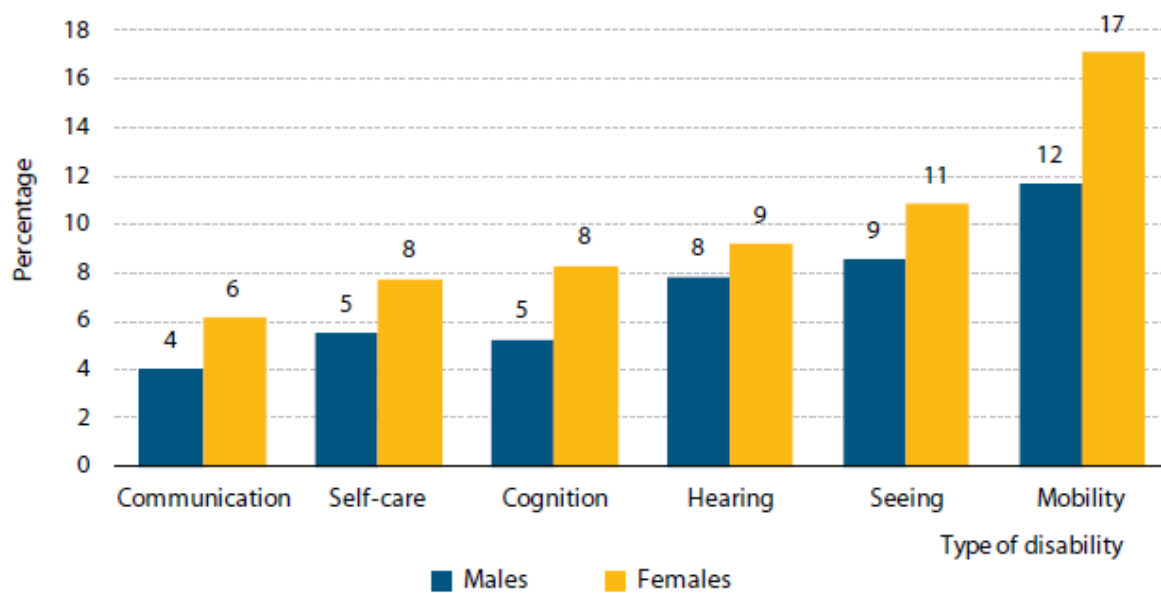


### Self-perceived health status among people over 65 years old



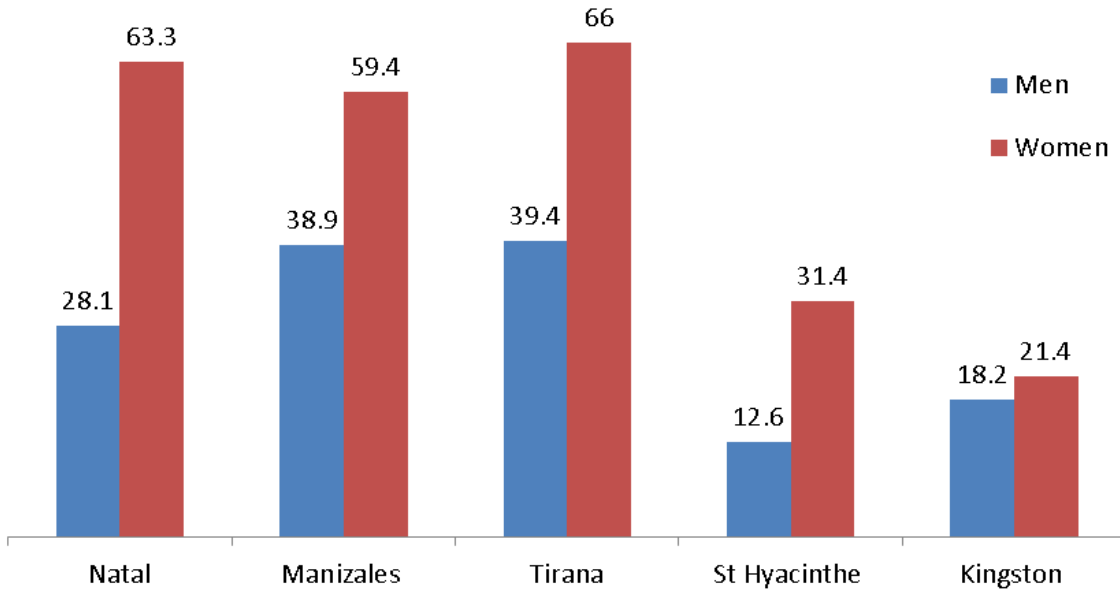
*Social and health situation of older people in Albania 2010. Public Health Reviews.*

### Different types of disability among elderly by sex (prevalence in %)



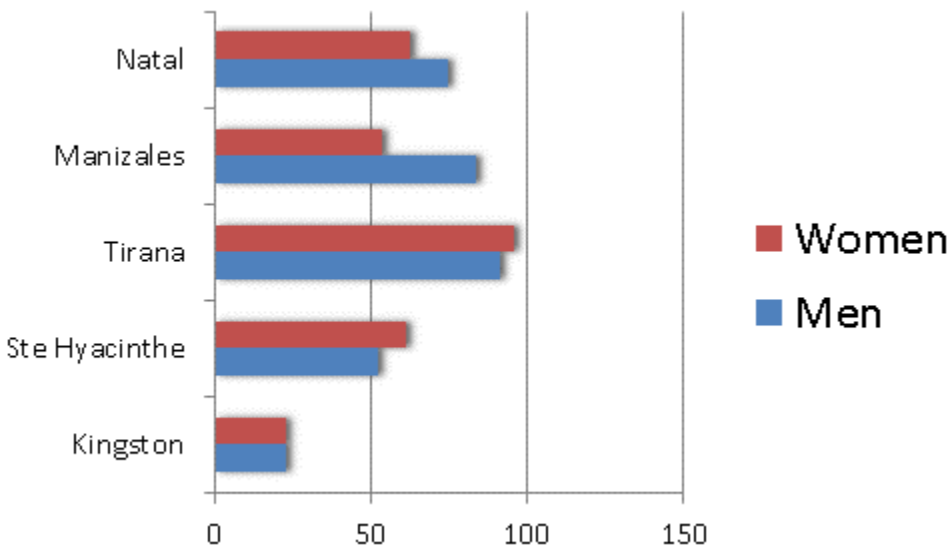
*INSTAT: ageing of population: situation of older people in Albania*

**Prevalence of reduced mobility among people over 65 years old in Tirana and 4 other study sites (Brazil, Colombia and Canada)**



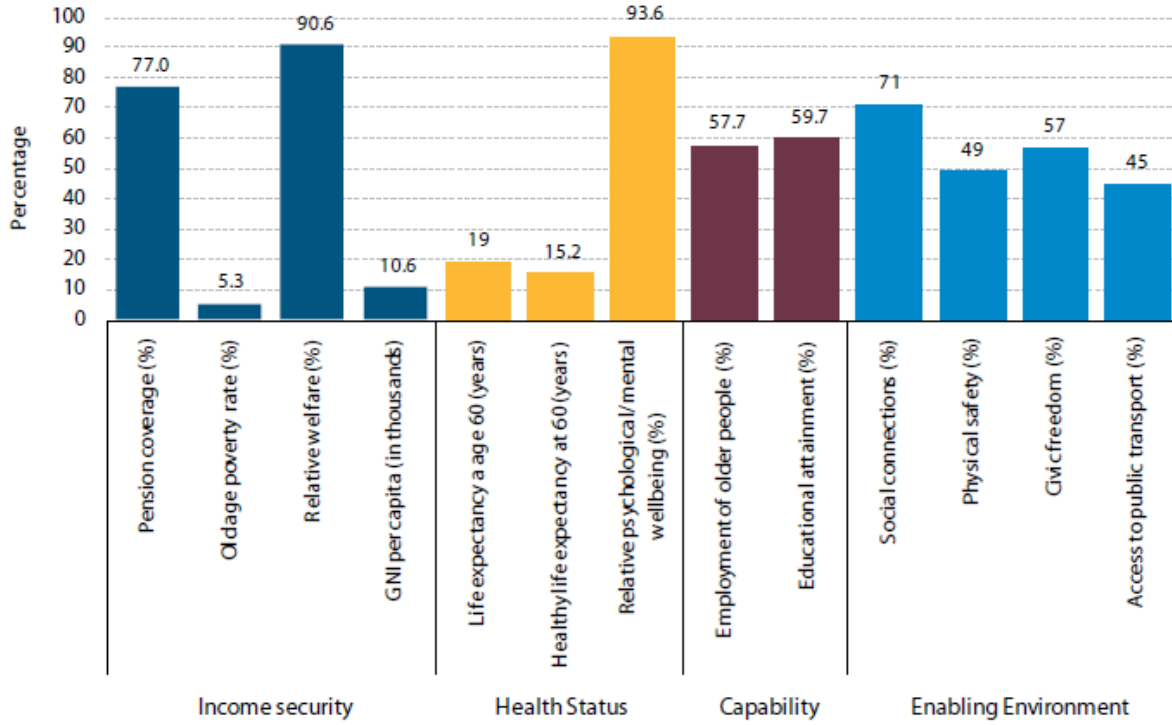
IMIAS 2012

**Percentage of older people 65-75 years old who are no member of any association or club. Tirana and 4 other study sites (Brazil, Colombia and Canada)**



IMIAS 2012

## Global Agewatch indicators for Albania 2014



Agewatch report 2014