

REPUBLIC OF ALBANIA

REPORT

Implementation of the

MADRID INTERNATIONAL PLAN OF ACTION ON  
AGEING

and its

REGIONAL IMPLEMENTATION STRATEGY

(MIPAA/RIS)

Fourth Review and Appraisal Cycle

2018-2022

September 2021

MINISTRY OF HEALTH AND SOCIAL PROTECTION

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## **Outline of the report on the follow-up to the Regional Implementation Strategy of the Madrid International Plan of Action on Ageing in Albania**

### **Part I Executive summary**

This is the fourth report of Albania on regard of Madrid Plan on Ageing with the participation of different stakeholders and using diverse sources of information. Besides, it was used a number of reports, studies and analyses on ageing, produced since 2017. The report was drafted by the technical group, set up with the Order of Minister of Health and Social Protection, no. 352, dated 27.07.2021, with representatives from all relevant actors; and consulted with the elderly associations and the non-governmental organizations, operating in the field.

Albania has made progress in protecting the rights, dignity, and independence of older people, as a national priority for more than 30 years. The Social Security Act was passed in 1993 to support the economic and general welfare of older adults. Then in 2011, the Law “*On the Mandatory Provision of the Healthcare in the Republic of Albania*” was adopted. 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 introduced in 2015 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.

These programs continue to form the cornerstones of the Albania system for supporting the health, economic security, and social wellbeing for thousand of seniors, individuals with disabilities, and their families. Because of these programs, thousand of older Albanian has lived more secure, healthier, and meaningful lives. Demographic and health data show that life expectancy of Albanians has continued to rise being among the highest among Western Balcans countries. Additionally, age-standardized mortality from most non- communicable diseases during the last ten years has started to decline. Health and social reforms has helped Albania to continue to be a country that has achieved “good health at low cost”, with a very high life expectancy given its level of economic development.

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 (under reviewing process, now for the period 2021-2025), as well as, in the new Social Inclusion Policy Document 2021-2025 (under the drafting process), and recently in the National Political Document on Aging, 2020–2024, and its action plan. Other examples are new laws such as Law No. 121/2016 on social care services and Law no. 22/2018 on Social Housing, which includes specifically older people.

The National Focal Point promotes the implementation and the follow-up of the Regional Implementation Strategy through social dialogue and the preparation/implementatation of the National Strategy for Old Persons.

The focal point of older adults and aging within the Albania Government is the Ministry of Health and Social Protection, the Social Care Development Program Unit runs the majority of aging issues.

The Albania Government promotes the human rights of older persons by calling attention to the needs of older people and how society should react in response to those needs, but also by highlighting the tremendous resource that older individuals represent to our communities and society. Older adults represent a wealth of knowledge and experience and contribute to the continued vitality of every sector of our local, state, and national communities and economies.

The new social care services reform is expected to increase access to good quality social care services for elderly. In 2021, the number of beneficiaries of the social care service centres was approximately 16,000 people, comparing to 11,000 in 2019. 65% of beneficiaries receive services intended for families in need, while the rest of the beneficiaries belong to the groups of "Children with disabilities" (9.6%), "Elderly" (5.5%), "Victims of domestic violence" (4.7%), "Adults with disabilities" (3.5%). 36 municipalities from 61 in total or almost 60% of the country's municipalities do not have services for the elderly.

#### Major Achievements

- Special emphasis is placed on the encouragement of NGOs and Local Authorities that operate social care programmes on a local level through subsidies and technical support. During 2020, within the financing program of the Social Fund, the Ministry has financed the establishment of four new services for this beneficiary category, out of 14 projects funded in total.
- In 2019, home service for the elderly is based upon the service standards adopted by the Albanian Government. For the first time, with the financial support from the Social Fund 2021, the provision of home assistance for the elderly in the apartment will be implemented by the Tirana Region, financed in the amount of 40% of the project, in the amount of 11.5 ml ALL. The target group includes elderly people without family support with socio-economic needs, which includes health care, food, socio-cultural activities and occupational therapy.
- Decision no. 864, dated 24.12.2019, of the Council of Ministers, the National Political Document on Aging, 2020–2024, and its action plan were approved. The Policy Document aims to support a better integration of older people in society, quality services for all, as well as a long, healthy and productive life for them.
- Healthy aging continues to be a primary focus of the Albania Government, both through advances to public health, and in increasing the access, affordability, and quality of healthcare for older persons. The Ministry has recently approved the Strategy for the development of primary health care services in Albania 2020-2025, which for the first time provides for the integration of social health service in primary health centers. The role of the nurse in the community is introduced for the first time, who will provide home health assistance, which reduces by 5% the hospitalization of cases with treatable diseases: hypertension, diabetes, asthma.
- Two new national plans on control of non-communicable diseases and cancers are in final stages of development. They will provide further guarantee for the Ministry of Health and

Social Protection to continue with cost-effective programs and sustain the health gains for the older adults.

- During management of the Covid-19 crises, Albania has been quick and effective in early interventions and prevented outbreaks in its residential institutions.

## Areas for Improvement

- ✚ As the number and proportion of older adults grows in Albania, the needs for services and supports for this population also continues to grow. Care and service providers for older adults must continually refine and enhance abilities to meet the needs of individuals with a person-centered approach. Many older adults who need services and supports wish to remain in their homes and communities, and while there has been great progress, there is much work to be done in expanding and improving community-based services and supports, including supports for families and caregivers. These programs can delay, reduce, or eliminate the reliance upon institutional residential services, a more expensive option.
- ✚ There is necessary to be taken steps to strengthen retirement security for older adults by creating new policies and programs to help more Albanians gain access to retirement investments.
- ✚ There is the need to establish Long-Term Care Services and Supports (LTSS) for older adults in the coming future years, as rehabilitation integrated health and social care services, insuring so the independent living in the community.
- ✚ As the number of older people with health-related needs grows, there remain gaps in coordinated and integrated care for them. Efforts have started to build a new model of integrated care and bring together all actors, including local governments.

## General information

*This section should contain brief information about the member State and the entities submitting the report, in particular:*

1. Country name- *Republic of Albania*
2. Name and contact details of the author(s) of the report  
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*Alban Ylli, Tirana University of Medicine and Albanian Association of Geriatrics*
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*Merita Xhafaj, General Director of Policies, Ministry of Health and Social Protection*
4. Name, reference, and date of adoption or status of preparation of national strategy, action plan or similar policy document on ageing  
*Decision no. 864, of 24.12.2019 “ On the adoption of the 2020-2024 national policy document on aging and the national action plan for its implementation*



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## 1. National ageing situation

Albania has a small population of around 3 million, which is ageing rapidly. The population of Albania, as of January 1st, 2019 numbered 2.862,427 inhabitants by suffering a decrease of 0.3 per cent compared with the figures of January 1st, 2018.

The fertility rate has declined from 2.97 in 1990 to 1.7 in 2017 (World Bank data) and is projected to decrease even further, whereas life expectancy has increased for both men and women. The trends for people to live longer and for families to have fewer children are changing the shape of the old-age dependency ratio (i.e. the population age 65 and over divided by the population ages 15–64 which represents the working population). This ratio has risen steadily, from 9.5% in 1992 to 18.48% in 2016 (World Bank data), and it is expected to increase even further. Life expectancy for the period 2016-2020 is 17.5 and 16.6 years for the age 65; also 6.8 and 6.3 at 80 years of age, approximately the same as the period 2011-2015.

In the last two decades, a specific demographic transformation took place: an increase of the percentage of the elderly 65 years of age and above that is accompanied with a decrease of the percentage of children and young people.

The continuous and widespread emigration accompanied by lower birth and death rates has had a very big influence in the structure of the population of Albania. The number of persons within the 15-64 years of age group has remained quite sustained in the period between the last two censuses, by falling from 1.96 million in 1989 to 1.90 million in 2011. On the other hand, for a population that is generally speaking suffering a contraction there is a sharp increase of the number of elderly persons of 65 years and above that goes, on first January 2021 more than 432 thousand people over 65 years old in the country compared to just above 318 thousand, in 2001. This is a clear indication of the complete transformation of society in only 20 years.

According to updated projections, the population of Albania by 2031 is calculated to be 2,745.996 inhabitants. This number is almost 36 thousand inhabitants less when compared to the number of population for the Population Projections 2011-2031. The difference in this number is a direct consequence of the low birth rates and the gender distribution of emigrants that does not correspond with the Population Projections' hypothesis for 2011-2031. By that year around 21% of Albanian population will be over 65 years old, which means that within less than 10 years, the proportion of older people to be similar to that of some Western European countries.

An Albanian 65 years old is expected to live on average 18 more years, and an 80 years old, 8 more years. It is estimated that around 50% of older people will live the remaining years with at least one chronic health problem, physic or mental. The need for appropriate long-term care is expected to steadily rise in Albania.

The growth at slow rates of the Index of Synthetic Fertility (ISF), accompanied by the coming of a reproduction age of generations of women fewer than the current ones will make it possible for the number of births not to sustain significant changes from 2019 through 2031. At the same time, the number of deaths will continue to increase, as a result of a population who is largely composed of

the elderly. These two changes will also bring about the decline of the natural additive of up to 3.2 thousand in 2031.

According to Income and Living Conditions Survey (SILC) data, in 2019 an estimated of 13.9% of elderly population (65 years old and over) are in at risk of poverty. In 2018 and 2017 this figure was respectively 14.0% and 13.4%. In 2019, the relative median at risk of poverty gap (depth of poverty) for the elderly population (65 years old and over) is 20.9%. In 2018 and 2017 this figure was respectively 24.2% and 20.7%.

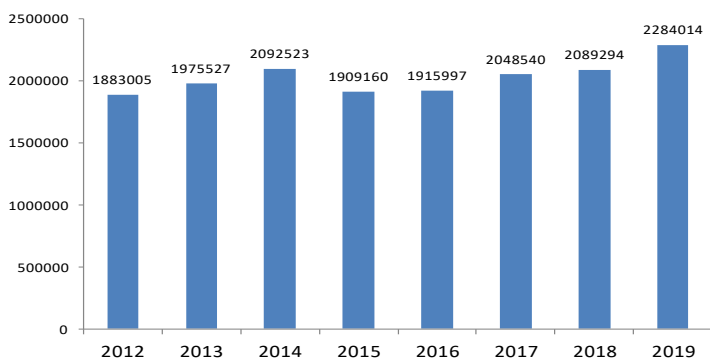
The most pressing issue for the elderly is the economic poverty that has been caused by the lack of or insufficiency of income. Despite the reform of the pension scheme, the system is faced with challenges associated with the demography and economy. The ratio of the dependency of ageing almost doubled from 8.6 per cent in 1989 to 16.7 per cent in 2011. By 2030 this ratio is expected to double into reaching the level of 32.9 per cent.

Around 30 per cent of the Albanian elderly live in apartment blocks, where an important impediment of movement for 80 per cent of them is the lack of the lift. For the majority, or 93 per cent of the elderly, they have access to friendly bathrooms, but only 76 per cent of them have into their homes.

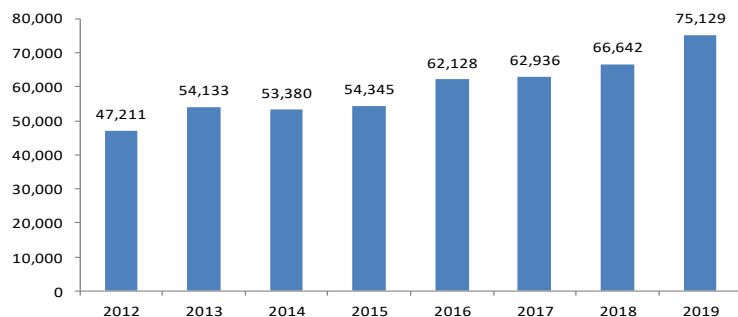
The health situation of the elderly is the second issue based on importance. The elderly suffers mostly from chronic diseases. They say that they cannot afford to buy the medicine and very often they are forced to buy them only partially, and mostly those who are reimbursed. On the other hand, the public system of healthcare is unprepared to meet the increased needs of the elderly.

During the year 2019 there were 2.284.014 visits in primary health care centres for persons over 60 years old. Compared to the year 2012, that indicator is 21% higher with around 400000 extra ambulatory visits in just 8 years. The increase is even higher for hospitalisations; during that same period, there is an increase of 60%, or 28000 more hospitalizations of 60 years old in 2019 compared to 2012. This trend demonstrates the scale of increasing burden demographic of ageing are putting over the public health care,

Ambulatory visits for persons over 60 years old. 2012-2019 (MHSP)



### Hospitalizations for persons over 60 yers old. 2012-2019 (MHSP)



During the lockdown following the declaration of state of emergency, municipalities were made responsible for identifying the vulnerable and lonely older people and providing basic services for them, including distribution of food/non-food packages and medicine, and pension.

The program of support was carried out by social workers and voluntaries at the municipalities. In the re-opening phase protocols were envisaged to continue to protect the elderly while keeping the basic services for them. Grocery stores were recommended to provide door to door distribution of food and other essentials for lonely or frail older people.

Albania has been effective not allowing outbreaks in its residential institutions, isolating the residential care institutions for the elderly.



### 3. Method

In order to evaluate the implementation of MIPAA in Albania, the stakeholders were asked to contribute in the preparation of the report by providing in writing form material about the actions and priorities undertaken since 2018 for the implementation or the progress made in achieving the goals of the Vienna Declaration. The interinstitutional technical group was set up with the Order of Minister in charge for social policies (MoHSP) no. 352/July 2021, composed with representatives from Institute of Social Insurance, from State Social Services, Institute of Public Health, from Ministry of Finance and Economy.

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:

- 2015-2020 Development and Integration Strategy (under revision)
- 2015-2023 National Social Protection Strategy
- 2015-2020 Policy Document on Social Inclusion (under revision)
- 2020-2025 National Ageing Plan for Albania
- Social housing design and construction in albania- A Review of the Existing Norms and Proposed Guidelines- July 2019
- Active Ageing Index at the local level, European Commission, 2016
- Albania 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 2012-2016
- Study of the Socio-Economic Situation, Social Participation and the Health Condition of the Elderly in Albania, AAGG – MOSHA, 2017
- Demographic Indicators, INSTAT
- Analyses of the situation on services for older people in Albania. (final draft). August 2021.
- Demographic and Health challenges facing Albania in the 21<sup>st</sup> century. 2020
- Pension Scheme in Albania, Demography Magazine, 2016
- Population and Aging: The Situation of the Elderly in Albania, INSTAT, 2020
- Madrid International Plan of Action and Political Declaration, 2002

- Strategy and Action Plan of Ageing and Health, World Health Organization, 2017
- In addition, major policies and laws related to ageing, completed during the reporting period, were reviewed. Here are included Strategy of social protection and inclusion 2015-2023, 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'.

To assure a bottom-up approach and participation of all stakeholders, two meetings with them were organized, a package of documents was distributed to them via email.

The draft was consulted with the professionals associations and older people organizations, as well.

## Part II: 20 Years of MIPAA/RIS

Main actions and progress in implementation of MIPAA/RIS and the 2017 Lisbon Ministerial Declaration goals

### 1. Recognizing the potential of older persons

**1.1. What has been done to *empower individuals to realize their potential* for physical, mental and social well-being throughout their lives and to participate in and contribute to society according to their capacities, needs, and desires along the **RIS commitments 1, 2, 8, 9, and 10** and the goals of the **Lisbon Ministerial Declaration** ?**

- ❖ *developing and implementing socially responsible and future-oriented economic and financial strategies*
- ❖ *fostering effective consultations with, and involvement of, older persons and their representatives at the national, regional and local levels in designing policies*
- ❖ *promoting a positive image of older persons, acknowledging their contributions to society*
- ❖ *fostering work and volunteering of younger and older persons in intergenerational settings*
- ❖ *encouraging businesses, non-profit organizations and public enterprises to involve older persons as consumers in the planning and design of goods and services*
- ❖ *ensuring that older persons can attain and maintain their highest possible level of health and functional capacity by supporting the development of age-friendly environments and housing.*

The approval of policy document for the elderly 2020-2024, by Decision no. 864, of 24.12.2019, is one of the most important strategic document supporting inclusive activities covering all sectors, from health, social services, home assistance, inpatient service, rehabilitating services, review of pension schemes.

The goal of this Policy Document is to ensure that elderly persons are integrated better in society, they are provided with quality services, and that they enjoy a long, healthy and productive life.

Albania's Aging Plan is in line with the conclusions of the European Union for Life-Long Healthy Aging. It is the EU's Third Health Programme that identifies demographic changes as the key challenge for our region.

Through the implementation of this Plan, the Albanian Government aims at achieving one additional year of healthy life expectancy in the country, the halving of poverty in over-65-year-olds and full coverage of health and social care services for the elderly persons that need them.

During its implementation, the pension system and access to public transport for thousands of vulnerable elderly persons will be improved. Thousands of others will gain from the use of the new day centres and social activities co-organised by the government and the municipalities. There will also be more housing opportunities and residential centres for the elderly with special needs. In addition, tens of thousands of elderly persons will have new opportunities for better quality and integrated social and health care services.

The policy document was published for consultation on the official website of MoHSP: [www.shendetesia.gov.al](http://www.shendetesia.gov.al).

The Action Plan on Aging was consulted with experts in the field and civil society during the months of June-September 2019. The document was also consulted with donors, representatives of state institutions and representatives of pensioners associations.

The issues, such as the minimum living standard, increasing pensions, improving access to transport for the elderly, integration activities at the local level, support to families caring for elderly people with chronic illnesses and housing provisions were raised by the key stakeholders' groups during the consultations.

Furthermore, they have stressed that the government has to determine the minimum living standards in the country, which would then help define the level of different benefits for the elderly as well as for all other groups.

They have asked the government to consider developing the missing legal framework for Long-Term Care (hereby LTC) and to draft a law on improving the quality of life and addressing the needs of the elderly - setting up the institutional infrastructure and encouraging preparedness of society, while shifting towards a system that promotes independent living and active participation in social and economic life.

#### Labour market policies:

Due to the aging population and the growing needs of the labor market for labor force, the number of working retirees is increasing from year to year. Even in 2020, when the labor market ran into difficulties due to the pandemic COVID 19, especially in the second quarter of the year, the number of working pensioners increased by 1.2% compared to the first quarter, according to INSTAT data. In the second quarter of 2020, 64,218 people over the age of 64 were employed, or 769 more than in the first quarter.

The aging of the population, the increase in life expectancy and the large emigration of young people are integrating more and more people of retirement age into the labor market. This trend was also seen in the participation of people over the age of 64 in the labor force, which reached 15.6% in the second quarter with an increase of 1 percentage point compared to the first quarter. Since 2015, labor force participation of persons over 64 has doubled. To boost the desire to work over the age of 65, the government approved a reward scheme in 2018, which has not yet been implemented due to lack of the instruction of Minister of Finance approved. In the Decision of Council of Ministers was foreseen that for each working year, the working pensioner receive a supplement on the fixed pension of 2.4% per year.

Persons over the age of 50 and young persons were among the groups with the higher unemployment rates. Labor market data suggest that economic growth in Albania over the last four years has translated into significant improvements in the labor market. Job creation recovered from a sharp decline in 2013 and economic growth and employment began to run in parallel. Although the employment rate for people aged 15-64 in Albania increased from about 50 percent, at the end of 2013, to 59.5 percent in 2018, thus marking one of the highest ratios among the countries of the Western Balkans, it remains below the average of European Union countries.

The employment rate has improved significantly, especially among women (from 40 percent in 2013 to 52.4 percent in 2018). However, gender inequality remains problematic, with male employment rates being about 14 percent higher than female employment, potentially a reflection of cultural norms regarding family structure and limited child and elderly care options. In the first quarter 2021, the employment rate for the population aged 15-64 is 59.0%. During this quarter compared to the same quarter of 2020, the total number of employees decreased by 2.6%, while compared to the fourth quarter of 2020, this indicator decreased by 0.5%.

The government addressed this issue by developing and implementing employment and /or training incentive schemes, targeted towards the groups of population which evidently faced difficulties in accessing labour market, already foreseen in National Employment and Skills Strategy 2019-2023”<sup>1</sup>

The National Plan of Aging 2020-2025, takes into account that the transition from retirement to work becomes more flexible and individuals continue to work depending on personal needs and opportunities, while there are opportunities for lifelong learning, thus maintaining job skills in the long run. To implement this plan training courses will be opened for 1000 seniors across the country.

### Living conditions and security within the community

The quality of living conditions for older persons is an important prerequisite for prolonging healthy age. The elderly persons who lack sufficient monthly income are often constrained to make savings in terms of their household utilities, which affects the maintenance of healthy life habits, and thus, the prevention of acute and chronic diseases.

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<sup>1</sup> [https://financa.gov.al/wp-content/uploads/2020/10/Publikim\\_AL\\_Strategjia-Komb%C3%ABtare-p%C3%ABr-Pun%C3%ABsim-dhe-Aft%C3%ABsi-2019-2022.pdf](https://financa.gov.al/wp-content/uploads/2020/10/Publikim_AL_Strategjia-Komb%C3%ABtare-p%C3%ABr-Pun%C3%ABsim-dhe-Aft%C3%ABsi-2019-2022.pdf)

While several-member families do not have high household costs per member, these costs significantly increase for single-member households. Taking into account the trend of independent living among the elderly, the costs per person in such households are rarely high compared to their total income. This occurs more often in rural areas where income per household member is much lower than in urban areas.

Older persons with disability, or impaired walking capacity, face the problem of buildings without elevators, which complicate their social inclusion preventing the access to and exit from the apartments.

Older persons are also affected by planned robberies due to the estimated low level of self-defence they can have for the attacker. In rural areas, the main problem lies in the access to assistance services provided by the community (police, health and social protection) which are much more accessible in urban areas. This is particularly present in rural areas where houses are very remote and where such services either do not exist at all or are very rare.

In general, everyday life is very difficult for the older persons in rural areas where houses and facilities are remote due to insufficient road infrastructure, public transport, shops, cultural, sports and entertainment facilities and remote health care facilities.

Social housing: Law no. 22 “On Social Housing” was approved by the Parliament of Albania on 3 May 2018<sup>2</sup>. The law aims at creating opportunities for adequate and affordable housing for a safe, dignified and peaceful life, relying on the solvency of individuals and families in need of housing and in need of state aid. It intends to provide a tailored approach to the needs of people 9 Social Housing Design and Construction in Albania – A Review of the Existing Norms and Proposed Guidelines with disabilities, the elderly, children and other groups, by reducing the efforts of these groups to meet their specific housing needs. The law attempts to meet the obligations of harmonisation of national and international legislation regarding the right to adequate housing which in international law is enshrined in several legal instruments.

The social housing programs foreseen in the law include: 1. the Social Housing Rental Program; 2. program to enhance the conditions of existing dwellings or construction of new ones; 3. the Affordable Dwelling Unit program; 4. the Area Development program for Housing purposes; 5. the Temporary Shelter (accommodation) program; 6. the Specialized Housing program. The law, for the first time, foresees the creation of a specialized housing program, which comprises housing for people with special needs including the elderly, persons with disabilities, victims and potential victims of trafficking, victims of family violence, children without parental care or in state protection and who are prepared to move to independent life.

For elderly and persons with disabilities these buildings should be provided with the appropriate infrastructure for access, physiotherapy, medical care, first aid, communication, social services and community spaces.

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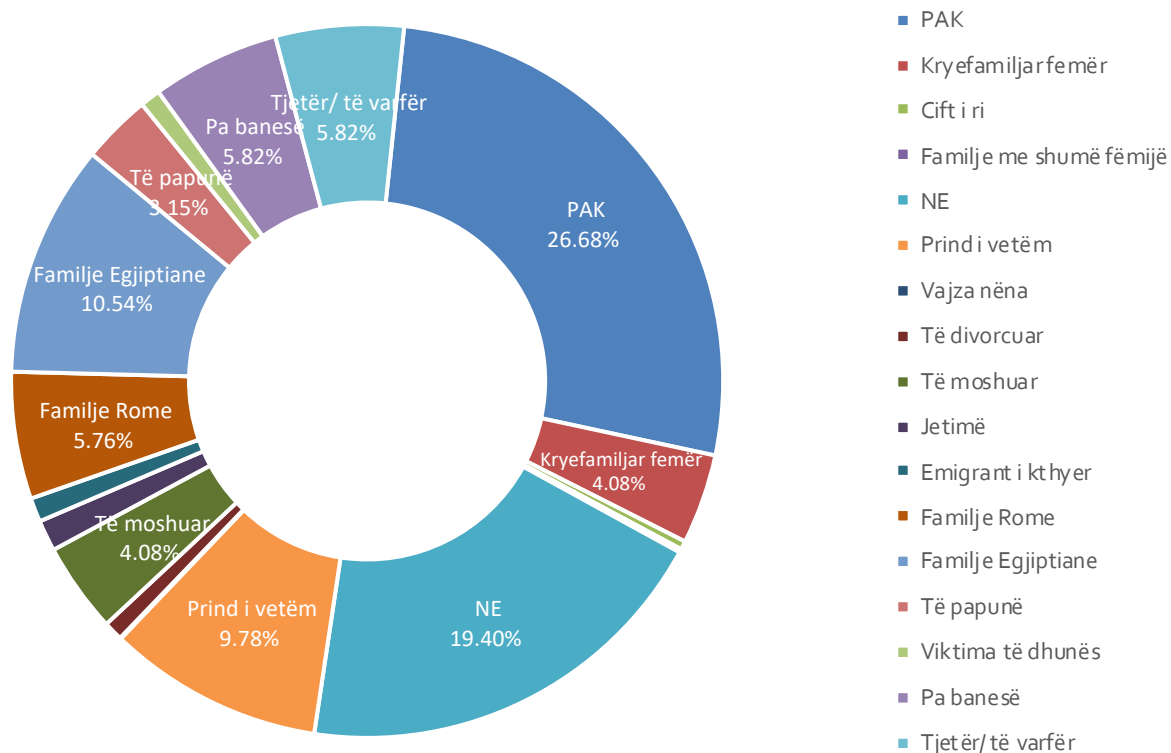
<sup>2</sup> file:///Users/cts/Downloads/Social%20Housing%20final.pdf

The law introduces the concepts of adequate housing which is considered to provide privacy and a safe, peaceful and dignified life for an individual or a family. It should provide sufficient living area, basic services within the house, safety and resistance, access to public services, access to employment, social, health, educational and community services. At the same time, adequate housing provides appropriate access to persons with disabilities, to the elderly and to children, by avoiding social segregation.

This programme allows LGUs to compete with each other aiming to obtain funds from the state budget in order to transform buildings they own in social houses or to improve the conditions of existing houses. In specific cases, when it is not possible or it is too expensive to improve the existing building conditions, new constructions are also possible. This programme refers mainly to buildings with high structural risk or buildings in need of necessary improvements.

One of the most important types of Social Housing Programmes is Rental Housing. The public social houses are built or bought from the Local Government Units (LGU). They can also derive from the housing area transferred to the Social Housing Fund by private investors. The status of Social Owner can be obtained both from public or private entities that fulfil the requirements of this law. The annual social rent cannot exceed the average market rent, the 3% of the construction cost or the 3% of the market value of the house. The rent subsidy amount can be up to 100% of the average rental value in the housing market. The maximum subsidy value is determined annually from the LGU. The elderly is prioritizing as one of categories to benefit from rent subventions.

*Beneficiaries Categories from Social Housing Programs for 2019-2021*



The Normative Act no. 9/December 2019 “For conducting the consequences of natural disaster”<sup>3</sup> stipulates that elderly people over 65 years old are considered as beneficiaries of reconstruction process programs to be compensated, not more than the value of the actual damage consisting of the loss of human life and / or the value of the property damage.

The government's plan for the elderly provides for certain more vulnerable older people categories to have free access in public transport through a special public subsidy scheme for transport companies. Previous experiences have shown that the use of public transport by the elderly significantly increases their integration into society and access to services. This model has started to be applied by the Municipality of Tirana and Korça, but it is in the first phase. For municipalities with more than 100,000 inhabitants, local authorities must apply subsidy models for socially retired seniors (recipients of social pension).

During the implementation of National Action Plan on ageing 2020-2024, the pensions and access to public transport for thousands of vulnerable elderly persons will be improved.

### Social protection

The structure of the financing mix in social protection has been stable over the past decade. However, deep reforms have been undertaken in each of the three main programmes (insurance, social assistance and disability) in recent years, with the aim of improving fiscal sustainability and the targeting of the programmes.

The means-tested social assistance cash benefit is the only family benefit in Albania, targeting households and special categories of individuals in need. It pays a flat amount, based on the household structure, and is capped at a maximum of ALL 9,000 (approximately EUR 70) for households of six or more members. The social assistance programme contributes to reducing poverty by a maximum of 0.8 percentage points.<sup>4</sup>

The number of jobseekers who are beneficiaries of social assistance (economic aid, hereby NE) has reached 22,167 persons registered in employment offices nationwide for the second quarter of 2019. These persons are only 12.9% of the total age group 15–64 years, which are beneficiaries of NE employable in 2019. Also, this number represents about 13.5% of the total number of unemployed jobseekers in the country, which is reported to be 164,704 people, for the same period. The majority, or 34% of the total unemployed beneficiary jobseekers of NE who are registered in the employment offices belong to the age group 50 years and older. About 14% belong to the age group 45-50 years, while 13% belong to the age group 40-44 years. Less than 40% of the total unemployed jobseekers, who benefit from NE registered in employment offices, belong to the age group 20–39, which is the most important force for the labor market. Only 1% of the total NE beneficiaries registered in the employment offices as unemployed jobseekers belong

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<sup>3</sup>file:///Users/cts/Desktop/Desktop/plani%20i%20moshimit/NECE\_MIPPA\_2018-2020/vendim-2019-12-24-882\_mekanimi%20i%20referimit%20per%

<sup>4</sup> In Davalos et al, World Bank (2018) Distributional impact of Albanian Fiscal System it is argued, based on the Household Budget Survey of 2015, that 53% of the poverty programme goes to the bottom (poorest) quintile, and 75% goes to the bottom 40% of the distribution. Leakage is low, with only 4% of spending going to the highest-earning household quintile.

to the age group 15–19 years. These reports that see the age group 20–39 years at levels of about 40% of the total and those over 40 years in about 60% of the total, are observed equally during 2018.

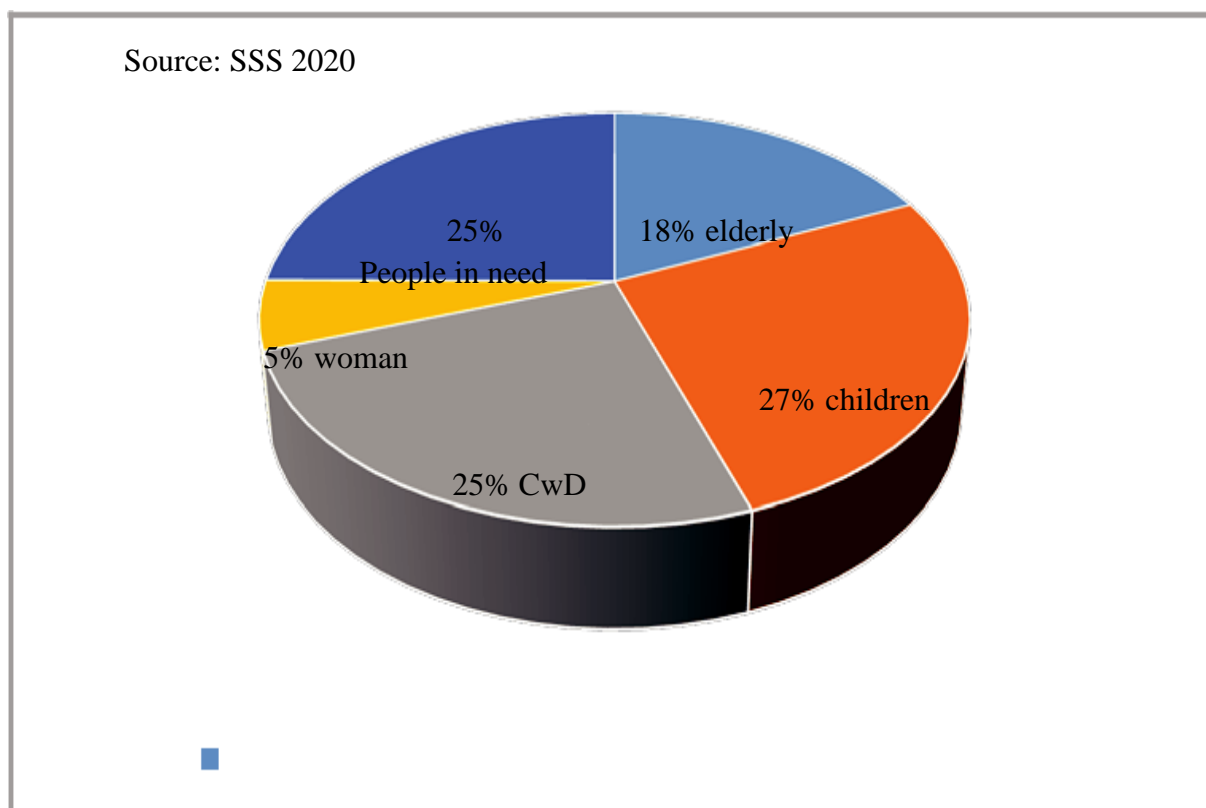
According to State Social Service (SSS) statistical data for the first quarter 2021, there are 9,921 male work invalids over the age of 65 and 9,917 female work invalids over 60 who in addition to the disability pension from the social insurance scheme also receive an additional payment from the social protection scheme.

3,695 disabled people (with mental/physical disability), aged 60+ benefit disability payments, in accordance with law 57/2019 "On social assistance". Disabled people are supported by a personal assistant when the Medical Commission on Determining Ability at Work (MCDA) assesses that they need personal care.

Persons who meet the conditions for benefiting from the status of blind and / or the status of paraplegic quadriplegic, who have become such at retirement age, benefit disability payment from the social protection program, as well as all the facilities provided by law No. 8626, dated 22.6.2000 "Status of paraplegic and tetraplegic invalid" amended and law No. 8098, dated 28.3.1996 "On the status of the blind", as amended.

The new social care services reform, is expected to increase access to good quality social care services for elderly. In 2021, the number of beneficiaries of the social care service centres was approximately 16,000 people, comparing to 11,000 in 2019. 65% of beneficiaries receive services intended for families in need, while the rest of the beneficiaries belong to the groups of "Children with disabilities" (9.6%), "Elderly" (5.5%), "Victims of domestic violence" (4.7%), "Adults with disabilities" (3.5%). 36 municipalities from 61 or almost 60% of the country's municipalities do not have services for the elderly.

### Social services by groups





During 2020, within the financing program of the Social Fund, the Ministry has financed the establishment of 2 projects on providing service to Day Care Centers for the Elderly (Roskovec, Prrenjas), out of 14 projects funded in total.

In 2019, home service for the elderly is based upon the service standards adopted by the Albanian Government. For the first time, with the financial support from the Social Fund 2021, the provision of home assistance for the elderly in the apartment will be implemented by the Tirana Region, financed in the amount of 40% of the project, in the amount of 11.5 ml ALL. The target group includes elderly people without family support with socio-economic needs, which includes health care, food, socio-cultural activities and occupational therapy.

The 2014 pension system reform strengthened the contributory principle of the system and reduced its redistribution features, in order to provide incentives for participation. Prior to the reform, the compressed size of the benefit – with little difference between the minimum and the maximum pension levels – led to a weak linkage between size of contributions and benefits, further undermining any incentive to participate. The pension replacement rate increased slightly, from 43.1% in 2014 to 46% in 2016 for urban old-age pensions; and decreased slightly, from 43.8% to 41.4%, for rural old-age pensions in the same years.

The new pension reform includes a gradual increase of the retirement age until it is equalized to 67 years old for both genders in 2056. Moreover, contribution years will increase as well, from 35 years to 40 years of mandatory contributions by 2025, in order to benefit a full old-age pension income. Another change includes the increase in the contribution rate for rural areas, with the purpose of equalising farmers' contribution levels with those in urban areas until 2018.

A social pension was introduced for the first time in 2015, to safeguard the interests of the elderly population in need. The social pension is equal to the minimum partial pension benefits at the minimum wage, for a contribution period of 15 years. Residents of Albania with income below the social benefit are eligible for the social pension. In 2015 and 2016, 1,775 and 2,415 persons, respectively, benefited from the social pension; total spending was ALL 99 million and ALL 140 million in 2015 and 2016 (709,000 and EUR 1 million), respectively. The maximum size of the social pension is higher than the average social assistance benefit for a four-member household; however, it remains precarious.

A common measure for assessing economic sustainability is the public expenditures on old age pension as a percentage of GDP. Expenditures on pensions account for 7.18% of GDP in Albania. As for fiscal sustainability, according to experts of the SII, the new scheme strengthens the link between contributions and benefits and will bring a quick reduction in pension scheme deficit. Prior to the reform, it was projected that the deficit would decrease from 1.6% of the GDP in 2015 to 1% in 2018, and it would reach a level of 0.4% in 2030 and 0% in 2043. After this year, the scheme swings from deficit to surplus until 2057.

There is an increase of civil society involvement in provision of care for vulnerable older people as well as in the efforts to improve their social inclusion. Civil society groups during last 5 years have organized more than 30 community workshops all over the country with the scope to inform older

people and encourage them to take an active role in the society (self help approaches, support groups and advocacy). Thousands of older women and men were reached by these activities throughout the country. Additionally, during the last 3 years there were supported around 15 community projects by older people organizations or other NGOs tackling ageing problems. The projects which encompassed initiatives in health care, community involvement, literacy improvement etc, were financed by EU, and carried out in collaboration with central and local government.

An evaluation of pensioner's associations and other NGOs working with older people showed that there is a change in the interest in the topic of the social inclusion of the older people in Albania in recent years. MOSHA network (a network of pensioners associations and other NGOs with interest in aging field) activities and the media involvement have clearly contributed to that, alongside other stakeholders and partners. However, still much needs to be done for improving the capacities and involvement of civil society organizations in care provision or support for vulnerable older people. MOSHA network in Albania is comprised of NGOs that are coordinated by the older people. Their activities are well recognized by the stakeholders in the system as members of the network use different channels to communicate with general public and various system actors. Some of the organizations have grown in membership which is the indication of the increase in awareness for representation among older people.

[\(https://mosha-network.org/\)](https://mosha-network.org/)

The voluntary inclusion in activities to aid the elderly or all the other society layers in need is one of the best ways to show the community's commitment of everybody in the intergenerational dialogue and aids a society of all ages. However, there is a stigma to the voluntary contributions in society.

Five years after the adoption of Law 45/2016 "On Volunteerism", CSOs and institutions responsible for its implementation still face difficulties in its implementation. The main problem identified is the lack of accurate knowledge, understanding and implementation of the law in practice. Although it is positive that there is a law regulating volunteering, the sub-legal framework is not yet complete and enabling for many CSOs that focus on volunteering. In accordance with the "Law on Volunteering", in 2018 the bylaws regulating volunteering were approved. Order no. 229/2018 "On the format and content of the Volunteer Card" and Order 300/2018 "On the format and content of the Volunteer Contract Register". In 2018, the Council of Ministers approved the "Code of Ethics for Volunteers".

*Best practices:* Tirana is the first and only city to have established a programme on structured volunteering. The Beyond Barriers Association, with the collaboration of the South Eastern European Youth Network (SEEYN), through the financial support of Instruments for Pre-Accession (IPA) Funds, established the Local Volunteer Service of Tirana. The programme run by Beyond Barriers is the first known form of structured volunteer work that exists in Albania. The Local Action Plan for Youth 2018-2020 in the Municipality of Tirana defines as one of its main priorities the development of culture and volunteerism - the creation of the Youth Corps (Municipality of Tirana, 2020).

During earthquake and pandemic situation, Municipalities were made responsible for identifying the vulnerable and lonely older people and providing basic services for them, including distribution of food/non-food packages and medicine, and pension. This was done to minimize the need for the elderly to get out for essential activities.

The Municipality of Shkodra has a positive practice, as it has compiled a database, which is also posted on the website [shkodrarinore.gov.al](http://shkodrarinore.gov.al). Currently, we are at the end of drafting the form to become part of the group of volunteers of the city, so that in case of civil emergencies, etc., we have a database ready and request availability from them.

The program of support, during pandemic situation, was carried out by social workers and voluntaries at the municipalities. The total number of families assisted during the pandemic is 73,287. Tirana (15,801) has the largest number of assisted families. In the remaining eleven regions, the average number of assisted families ranges from 5,900 to only around 2,200 (Durrës). Overall, 68.8% of assistance was provided to families in need, whereas 31.2% was provided to the elderly.

The community and social service delivery center brings a series of very positive and impactful practices, especially in Tirana, Berat and Vlora. These centers not only understand the value of volunteering, strive to have some procedures and standards in management, but also include volunteers from both the community and the very close cooperation they have built with civil society organizations. And either these centers are subordinated to the municipalities, their approach remains more open to volunteerism due to the nature of the services they provide and the very close connection they have with the community.

There were volunteers at the community-based centers at local level. Physiotherapy students from Spain have come to Albania and are attached to a certain organization. They have more than a year to provide the service and help both the physiotherapist and the beneficiaries to get the service better. They have often come even at the time of the earthquake and pandemic. (The community centers of the municipality of Tirana: "Multidisciplinary Center", "Community Center Together", "Gonxhe Bojaxhi", "Shelter") 2021)<sup>5</sup>

The specific Objective 5 of the Policy Document aims to ensure the recognition and evaluation from the state of the voluntary contributions for a society of all ages. The positive attitudes related to ageing need be formed at a young age. It is also important that the focus of the attention not be directed simply to the understanding of the needs of the elderly by the young people. The elderly need to be explained the interests of the young people and challenges that they need to face. There is a need to promote the voluntarism and intergenerational interaction to preserve the traditional atmosphere of understanding and respect between generations. To overcome this issue, there is a need to target the formal recognition of voluntary activities, especially those of the young people aiding the elderly.

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<sup>5</sup> [https://pvnalbania.org/wp-content/uploads/2021/06/Vullnetarizmi-ne-Shqiperi\\_-Studimi-Kombetar-1.pdf](https://pvnalbania.org/wp-content/uploads/2021/06/Vullnetarizmi-ne-Shqiperi_-Studimi-Kombetar-1.pdf)

## Equal opportunity and gender mainstreaming

According to the labour force survey, women are less likely to participate in the labour market. Men employment in the 15-64 years old population has been relatively stable, while women's participation in the labour market in 2017 has increased to 57.7% compare to 50.1% in 2013<sup>6</sup>. Employment rate for the population aged 15-64 is 64.3% for men and 50.3% for women<sup>7</sup>. In addition, domestic violence remains a challenge in spite of some progress. There is a strong need to increase efforts in the provision of protective, rehabilitation and reintegration services and accessibility for victims/ survivors of violence and in particular by the most vulnerable groups of women such as: women suffering domestic violence, women with disabilities, women from Roma and Egyptian communities and women in rural areas.

Civil society organizations in the area of gender equality, gender based violence have been very active in played an important role in monitoring implementation of CEDAW recommendations, Istanbul Convention and the European Charter for equality of women and men in local life. An important contribution by civil society organizations is given in the legislative process of drafting the Law on Free Legal Aid, Law on Social Housing, and monitoring of EU Gender Action Plan II and drafting the new Gender Strategy 2021-2030, already approved with DCM No.400, dated 30.06.2021<sup>8</sup>, through the consultation process with CSOs: <https://www.konsultimipublik.gov.al/Konsultime/Detaje/347>

Coordination with the CSOs is organised as a response to earthquake consequences and COVID 19 crisis response in identifying key issues in respective sectors and impact on women and men and the most at risk groups coping with new vulnerabilities caused by the two crises.

### **1.2. Please also reflect on your country's participation in the relevant global/UN-wide campaigns:**

**1.2.1.** *Does your country take part in a [Global Campaign to Combat Ageism](#) led by the World Health Organization (WHO)? Do the activities in your country contribute to the endeavours of this WHO-led campaign? Which ones? Did your participation in the campaign contribute to the implementation of the MIPAA/RIS in your country? Which measures have been set in this context?*

During the last two years, Albania has taken part in the Global Campaign to Combat Ageism, through initiatives led by civil society and supported by government.

During 2020, AAGG in the frame of MOSHA initiated a campaign against ageism with a focus of ageism in health care. 4 focus groups with representatives of older people were organized, a leaflet about ageism and its specifics in Albanian society was prepared, 11 health centres were involved, and a number of meetings with policy makers and other actors were carried out. Most concerning

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<sup>6</sup> Men and Women in Albania 2018. INSTAT

<sup>7</sup> Men and Women in Albania 2018. INSTAT

<sup>8</sup> <https://qbz.gov.al/eli/fz/2021/112>

issues identified were: a) older people being considered as second-hand clients by health care providers because of their perceived inability to tip for the services, b) insufficient time dedicated to diagnoses and counselling about multipathologies, and c) poor communication with older people who have hearing problems or health literacy problems. Additionally, leaders from pensioners organizations prepared communications briefings for media representatives and worked to raise the awareness about ageism in general society.

In June 2021, a campaign was organized by pensioners organizations in the international day against elderly abuse. It was carried out in collaboration with social care services, local government, MOSHA network, UNFPA, and other stakeholders. The campaign was used to present data about ageism and elderly abuse in Albania, as well as addressing of these issues in the new National Plan of Ageing.

**1.2.2.** *Does your country take part in the United Nations **Open-ended Working Group on Ageing (OEWG-A)** for the purpose of strengthening the protection of the human rights of older persons? Do the activities in your country contribute to the endeavours of the OEWG-A? Which ones? Do national policies ensure protection of the human rights of older people in your country? **Do you see any legal gaps?***

Albania participates in the UN OEWG-A, with its civil society organizations (AAGG is registered as participant for two years) and central government representatives from MHSP.

The national policies that ensure protection of the human rights of older people are as follow:

- ✓ 2020-2024 National Plan of Ageing
- ✓ 2015-2020 Development and Integration Strategy (under revision)
- ✓ 2015-2023 National Social Protection Strategy
- ✓ 2015-2020 Policy Document on Social Inclusion (under revision)
- ✓ 2020-2025 Primary Health Care Strategy
- ✓ 2021-2030 Health Care Strategy (ongoing drafting process)

An analysis of the existing laws and decisions shows that “the elderly” are not treated as an excluded group or a group in need, especially “according to the criteria of the need for healthcare and social services”.

According to the “criteria of the need for healthcare and social services”, Law No. 121/2016, “On Social Services in the Republic of Albania”, determines that the category of “the elderly in need” enjoys the right to benefit from the monetary assistance and social services. Other laws treat the elderly just like the other members of society. In terms of the monetary assistance, that is determined based on the income, despite age, social services may benefit only those elderly individuals that have been identified as persons in need, for different reasons, such as, lonely elderly, elderly without income, elderly without support.

*1.3 Highlight in a nutshell the **most important policy achievement during the last 20 years** to contribute to empowering individuals to realize their potential for physical, mental and social well-being throughout their lives and to participate in and contribute to society.*

- i. The 2020-2024 national policy document on aging and the national action plan for its implementation was adopted
- ii. The social pension reform is “one of the best reforms in the world, precisely what was needed for a country that aspires EU integration” – evaluated by World Bank expert mission (2017)
- iii. For the first time the law on voluntarism was adopted by the Albania Parliament
- iv. The social program on social housing was launched, in 2018, accompanied with some special subsidy schemes
- v. The government's plan for the elderly provides for certain more vulnerable older people categories to have free access in public transport through a special public subsidy scheme for transport companies.
- vi. 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.
- vii. The new social care services reform, is expected to increase access to good quality social care services for elderly.
- viii. Albania has mainstreaming ageing issues into the principal political document of the country such as strategy for development and integration 2015-2020 (under revision and extension periode), the Social Protection Strategy 2015-2023, as well as, in the Social Inclusion Policy Document 2016-2020 (under revision and extension periode).

## 2. Encouraging longer working life and ability to work

**2.1. Which measures have been implemented to recognizing the potential embedded in the employment of older workers and developing labour market strategies to promote maximum participation opportunities for workers of all ages along the *RIS commitments 3, 4, 5, 6, 8 and 10* and the goals of the *Lisbon Declaration*?**

- ❖ *promoting lifelong learning opportunities*
- ❖ *fight unemployment at all ages, reducing financial inequalities and poverty, taking up measures to reduce the gender pay gap*
- ❖ *encouraging employers to value the experience of, and to retain and hire, older workers*
- ❖ *providing incentives for longer working life opportunities and more flexible retirement choices*
- ❖ *planning and implementing pension reforms, that take into account the increasing longevity and the extension of working lives*
- ❖ *facilitating the reconciliation of employment and care work.*

Upgrading workers' skills is a key element in improving their employment perspectives. Especially older persons will be more likely to find a job or retain their jobs and extend their working lives. To this end, training programs are implemented for older age groups of the labour force.

In particular the specific objective 4, of Ageing National Policy Document 2020-2024 aim to provide a motivating environment at work for the individuals before their retirement and to stimulate the long-life learning process.

The immediate termination of work relations creates the potential of an economic, social and health crisis for the elderly person. The elderly is among one of the most endangered groups in the labour market, especially when there is an accumulation of factors, such as low education, disabilities, insufficient adaptation in the new conditions. Often the concept of long-life learning combines education with work activities and assists in the flexibility of the elderly individual towards the labour market or the adaptation towards the technological changes. The long-life learning process creates the conditions for qualification and social self-sufficiency according to the individual interests outside of the traditional school system.

It is necessary for the transition from work to retirement to become more flexible and that the individuals carry on working depending on the needs and personal opportunities, while there are opportunities for long life education by preserving this way the work skills for a long time.

The amount of contributions determines the system of benefits and is financed by them, the number of contributors evidences the indicator of coverage with elements of social insurance, both of the current labor force and of the elderly population in the future, being a key element of avoidance or old age poverty reduction.

In 2018, there were about 217 thousand more contributors than in 2013, with a significant tendency towards growth, as their number at the end of 2018 reached 778,111 people.

The low participation of the village population in the social insurance scheme remains a concern. In order to encourage the increase of the potential number of contributors in the village, in 2014 an amnesty of arrears was implemented. This brought an increase in the number of contributors by over 60 thousand people, an unstable increase, as in the years 2015 - 2018, the number of contributors remained at the level of about 59 thousand people. Problems in increasing the number of contributors in the village are also reflected in the volume of accumulated income, as well as in a high deficit of the village scheme.

Albania is a country with high emigration, but due to the acquired rights, which are related to the periods of work before the 1990s, the number of pensioners in relation to the active population is large and continues to grow.

Projections show an increase in the number of old age pensions in relation to the resident population. In 2018 they reached 14.4% against 22.1% which is the total number of pensioners to the resident population.

The Europe 2020 strategy aims at achieving a smart and sustainable inclusive growth, with high employment, productivity and social cohesion rates. This strategy has set certain goals that should be achieved in the EU until 2020, i.e., 75 % employment rate for all citizens aged between 20-64 and at least 20 million less people at risk of poverty and social exclusion.

Active ageing policy is an important part of the Europe 2020 strategy aiming inter alia at creating more job opportunities for the elderly citizens of the European Union.

The Government of Albania taking into account the objectives of Europe 2020 Strategy, has foreseen implementing a wide package of policies in order to achieve active ageing by increasing employment rates of older people, i.e., policies to boost labour demand for these people, policies to boost labour supply for this age group and continuing vocational training and life long learning policies for older workers or unemployed persons. (Refer to Ageing Action Document, attached bellow).

The most important measures planned and implemented during the period 2018-2021, based on National Employment and Skills Strategy 2015-2023 are the following:

**Active Labour Market Programmes (ALMPs) were re-conceptualized and diversified** based on the individual-centred approach. Three already existing ALMPs (wage subsidy, on-the-job training and the internship programme) were revised with regards to criteria for unemployed jobseekers and employers alike, as well as regarding procedures and additional benefits for registered unemployed jobseekers with additional vulnerabilities (single parents, people with disabilities, Roma & Egyptians). Two new programmes, the Self-Employment Programme and the Community Employment Programme were introduced based on prior pilots and experience from other EU countries. The Self-Employment Programme (SEP) targets registered unemployed



jobseekers who have a viable business idea and supports with grants. CEP training combined with work opportunities, may also provide valuable community services in locations of disadvantage, including individual +55, given the priority mother single.

The programmes include:

- (1) On-the-job Training, which targets jobseekers who do not have any qualifications, and trains them at the workplace, providing a subsidy for the duration of 4 months period for all types of professions, based on an approved training plan, and supervised by a trainer of the employer
- (2) Wage-subsidy, which is a one-year subsidized employment contract, where the needs of the jobseekers are matched to the profile of the employers, the wage is defined based on the market salary rate, and the duration of the subsidy is defined based on the vulnerabilities of the jobseeker
- (3) Internship programme, which ensures quick transition to the labour market of the recent graduates, in the same of similar area of study of recent graduates, for a duration of 6 months
- (4) Self-Employment Programme, which is a start your business programmes that provides financial grant and support for unemployed jobseekers, who have a proven, viable and marketable business idea and plan;
- (5) Community employment, which is a programme with a clear focus on workforce training and is designed to place the work experience offered near the labour market, and in line with the local employment opportunities, implemented in partnership with community and NGO/voluntary organizations
- (6) Active labour market programme to support the labour market reintegration of workers that self-declare to have been informally employed and laid-off as result of the COVID-19 pandemic. This programme subsidizes 12 months of social and health insurance contributions of workers and employers
- (7) Active labour market programme to support the labour market reintegration of formal workers laid-off as result of the COVID-19 pandemic until June 23, 2020. Wage subsidies (aligned to the minimum wage) for 2-4 months and social insurance contributions for 4-8 months are provided to employers willing to hire recently laid-off workers.

### **Subsidization program for social enterprises in order to recruit for full-time employment unemployed persons over 50**

This program aims at creating new full-time jobs, by recruiting highly disadvantaged unemployed persons aged over 50, for, at least 24 months, based on Decision of Council of Ministers No. 56/2018 “**On determining specific categories of disadvantaged groups**”;

The financial support program is targeted to social enterprises based on Decision No.789/2018 **“On the establishment of the fund for support of social enterprises and support forms through subsidiaries for social enterprises”**

For an enterprise to be eligible to participate in the program, the created job should represent a clear increase number of the employee’s representatives of disadvantaged groups, including unemployment person over 50.

The subsidy for New jobs created for individuals from the marginalized groups is for each new job vacancy, these social enterprises can benefit up to 100,000 ALL, which should be used for work tools, raw materials, and consumables. The subsidy is conditioned by the employment of individuals from marginalized groups with a contract duration not less than two years.

The subsidy for Social and Health Insurance of social enterprise’ employees belonging to disadvantaged groups – Social enterprises can receive annual funding up to 100% of the social and health insurance, provided that the duration of the employment contract is not less than two years.

***2.2. Which special measures did your country set to close the gender pay and pension gap as well to take into account the special situation of older women?***

Gender gaps in economic opportunities include low labor force participation, high levels of informality, gender segregation, and low access to productive inputs. The overall activity rate for the population aged 15 to 64 steadily increased over the period 2013-2019. However, women’s labor force participation (61.6 percent) is lower than men’s (77.6 percent), with a persistent average gender gap of 18 percentage points. Occupational stereotypes limit women’s choices, with women working predominantly in sectors such as health and social work, education, manufacturing, and agriculture, which are characterized by lower salaries. Agriculture remains the primary sector employing women, with 41.6 percent women compared to 32.3 percent men.

Stereotypical gender roles and the country’s unmet child care need significantly contribute to women’s inactivity rates. Women carry out 96 of domestic chores and remain out of the labor force mostly because they perform unpaid care work at home (18.0 percent of women compared to just 1 percent of men), or are attending school (22.3 percent female versus 28.1 percent male students/pupils). In 2019, informal employment in Albania as a percentage of total non-agricultural employment was 35.6 percent for men and 21.8 percent for women, showing a reduction of 4.8 percent for men but just 2.2 percent for women since 2015.<sup>17</sup> When informal employment in agriculture is included, the rate of informality in Albania is 61.0 percent, representing more than half of the employed population.<sup>9</sup>

In 2019, the unemployment rate for men aged 15-64 was 12.2 percent versus 11.8 percent for women. Overall, the unemployment rate declined for both women and men compared to the

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<sup>9</sup> ILO (2018). *Women and Men in the Informal Economy: A Statistical Picture*. Geneva: ILO. Available at [https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/documents/publication/wcms\\_626831.pdf](https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/documents/publication/wcms_626831.pdf);

previous year, yet decreased for men by almost one percentage point, while for women only by 0.5 percentage points.

The proportion of women protected by state insurance or social security was found to have increased significantly for women, namely from 26 percent to 46 percent, while for men, the increase was only modest, from 34 percent to 37 percent.<sup>10</sup> Yet, public social protection expenditure (excluding health) on people of working age was only 0.2 percent of national GDP, compared to the EU-28 average of 28.1 percent.<sup>11</sup>

The gender pays gap (GPG) - calculated for the formal sector - was 10.7 percent in 2018, and 10.1 in 2019 in favor of men. In comparison with the EU-28 average, Albania's GPG is significantly lower, which can be explained as a result of women's lower participation in the labor market and the persistent labor participation gender gap. GPG is highest in sectors where women are concentrated, reflecting the impact of horizontal segregation on women's wages. The concentration of women in the informal economy and in just a few sectors limits economic growth at a time when Albania needs to increase productivity and diversify its sectors of employment, in particular toward science, information and communication, and entrepreneurship.<sup>12</sup>

Therefore, in order to improve old-age pension prospects for women, the primary measures that are useful here are those which improve participation in the workforce and close the wage gaps.

**2.3. Highlight in a nutshell the most important achievement during the last 20 years in recognizing the potential embedded in the employment of older workers and developing labour market strategies to promote maximum participation opportunities for workers of all ages? Give some recommendations for future action (what is planned/needs to be done).**

The continuous improvement of the pension system and the harmonization of the pension system following the European and international standards, 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.

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<sup>10</sup> INSTAT (2018). Albania Demographic and Health Survey 2017-2018. See:

<http://www.instat.gov.al/en/publications/books/2018/albania-demographic-and-health-survey-2017-2018/>

<sup>11</sup> INSTAT (2020). "Women and Men in Albania". See: <http://www.instat.gov.al/en/publications/books/2020/women-and-men-in-albania-2020/>

<sup>12</sup> INSTAT (2020). Women and Men in Albania 2020.

### 3. Ensuring ageing with dignity

**3.1. Which measures have been contributing to *protecting older persons' enjoyment of all human rights and dignity, promoting their autonomy, self-determination and participation in society*, and making sure that no law, policy or programme leaves room for discrimination of any kind along *RIS commitments 7, 8, 9 and 10* and the goals of the *Lisbon Declaration*?**

- ❖ *protecting older persons' enjoyment of all human rights and dignity, promoting their autonomy, self-determination and participation in society,*
- ❖ *supporting the necessary infrastructure and assistance to prevent all types of abuse and violence against older persons,*
- ❖ *fostering the development of innovative methods and services as well as user- and age-friendly technology and products,*
- ❖ *raising quality standards for integrated social and long-term care and health services and continuously adapting the status, training and working conditions of professional care workers,*
- ❖ *supporting research on individual and population ageing processes to better address emerging needs in ageing societies,*
- ❖ *promoting the participation of both persons with dementia and/or mental and behavioural disorders and their informal carers in social and community life,*
- ❖ *respecting the self-determination, independence and dignity of older persons, especially, but not limited to, towards the end of life.*

Usually, upon retirement, there is an increased risk of the disruption of the social connections of the elderly and a decrease in their involvement in the social, cultural and economic activities. These constitute important danger factors in terms of the health and welfare of the elderly. On the other hand, isolation reduces the contribution of the elderly in society. The municipalities are the right governmental level that may provide a series of social activities that would promote the participation of the elderly in society, that would avoid the isolation for many of them and would increase their contribution in the community life.

To ensure for wider participation of the elderly in the community life to reduce the level of loneliness and social isolation among them, the local government should include, in drafting of local plans, policies in support of the elderly, especially of women, in the decision-making process.

Other measures, already foreseen in the *National Action Plan on Ageing (NAPA) 2020- 2024*, are, as follow:

- the systematic offering of cultural and social activities with the inclusion of the lonely elderly individuals by the municipalities (tour visits in Albanian cities, literary and music competitions, commemorations of distinguished persons, etc.).
- application of the reduced tariffs for the elderly over 65 years of age for the artistic or

sports events provided by the municipality itself or other public or private agencies in the territory of the municipality.

The social system responsible for care provision to the elderly people is represented by an insignificant number of public and private institutions providing institutionalized care for the elderly, mainly for those living in Tirana and in a few other major cities. The Albanian culture is based on strong family links with the elderly being cared for by the close family; however, the current models promote working further away from home, in towns or abroad which starts to pose a challenge for families and their elders.

The *social care services sector* has undergone a reform which is almost being finalised since there is: 1. a National Social Protection Strategy (2020-2023) defining the development directions of this sector; 2. an almost complete legal framework including the Law 121/2016 on Social Care Services in the Republic of Albania and its bylaws regulating the scope, tasks, responsibilities, procedures and financing modalities of the sector; 3. a set of tools and mechanisms for the implementation of the policy and legal framework, such as guidelines for establishing social care plans and the social fund; and 4. practices/models of implementation of these policies and pieces of legislation.

The Law defines as “Family-based services are social care services that are provided in the family to elderly and persons with disabilities, for whom it is impossible to receive daily community or residential services, and who are incapable of taking care of themselves and cannot be helped by family members or caregiver/personal assistant”.

The services in family include:

- rehabilitation services, development, psychological or legal counseling, as the case may be;
- distribution of ready meals at house;
- provision of medicines, according to the prescription of the doctor or other services of a medical nature;
- personal hygiene;
- fulfilling other daily needs, according to the cases’ assessment, on a case by case basis.

The focus should be primarily on developing the comprehensive model of the horizontally integrated home care services for elderly dependent persons.

These demographic changes have triggered government efforts to develop the LTC system. In Albania, there is no official definition of long-term care (LTC). Provisions on LTC can be found in different laws, such as those related to healthcare, social care and social insurance.

By the end of 2024, the *National Action Plan on Ageing (NAPA) 2020- 2024* aims to ensure a conducive environment that supports and assists older women and men to integrate into society, while preserving human dignity, regardless of their health status or functional autonomy. The social and healthcare system is expected to be a municipal system, guaranteeing quality services for all elderly people in need of care. The NAPA also anticipates greater focus on prevention, through increased disease awareness and the reduction of inequalities in the treatment of older people’s needs.

The implementation of the NAPA includes regulation of the caregivers’ profession and aims to

facilitate labour market access for informal caregivers aged 50 years or above. Support for adequate standards, care protocols for medical staff and nurses as well as training in LTC are envisaged. About 100,000 older people will benefit from the provision of integrated social-health services (Ministry of Health and Social Protection [MoHSP], 2020). Responsibility for the implementation of the action plan lies with the MoHSP as well as its subordinated agencies, such as the Institute for Public Health, State Social Services and Healthcare Services. Local governments are expected to play an essential role in establishing and administering community social services in cooperation with the central government institutions.

The establishment of this Integrated Health & Social Care Services Network is based on the fulfillment of two major strategic objectives, the **decentralization** of health services through the extension and enrichment of the existing network of services closer to the community and the **deinstitutionalization**, by reducing the number of hospital beds and the establishment and strengthen of rehabilitation community health & social care services ensuring independent living.

Integration of social and health care into the MoHSP provides an excellent opportunity to take a step further inpatient support and care integration. The recent approval of the *Strategy on Development of Primary Health Care Services*, covering the period 2020-2025, could be a lucky and fortunate momentum, as this document provides, for a comprehensive and logic framework on how to pilot and expand the home-based care services by integrating them with social component and providing fundamental resources (human and financial) on this topic.

*The new National Health Strategy 2021-2030* foreseen specific objectives with their actions and interventions, generated by all care providers within the framework of a person's life as a (i) strengthen community care; (ii) strengthen integrated long-term care; (iii) strengthen and expand rehabilitation services.

Rehabilitation describes specialized health and social care dedicated to improving, maintaining or restoring physical strength, cognition and mobility with maximized results. Typically, rehabilitation helps people gain greater independence after illness.

**3.2. Highlight in a nutshell the most important achievement during the last 20 years to protecting older persons' enjoyment of all human rights and to raising quality standards for integrated social and long-term care and health services as well as adapting the status, training and working conditions of professional care workers. Give some recommendations for future action (what is planned/needs to be done).**

Albanian Government has taken/will take into account in ageing issues and policies the following:

- ✓ The rights of the elderly for social and healthcare services according to the needs and despite the income.
- ✓ The approximation of the service closer to the client, including old age
- ✓ The guaranteeing of the right to benefit and selection of the alternative of the service.
- ✓ Providing multi-disciplinary services, aiming at the reintegration and/or improvement of the life quality for the elderly.
- ✓ The distribution of responsibilities among the different actors of society. The strengthening of municipalities to carry out their responsibilities.

### Part III: Healthy and Active Ageing in a Sustainable World

#### *1. Contribution of ageing-related policies to the implementation of the 2030 Agenda and its Sustainable Development Goals*

##### ***1.1. Has your country already submitted voluntary national report(s) (VNR) to the High-Level Political Forum (HLPF) on the implementation of the SDGs? Please briefly report on whether and how the population ageing and older persons' issues were addressed in your country's VNR(s).***

Albania has already submitted the Voluntary National Review on Sustainable Development Goals to the High-Level Political Forum in 2018<sup>13</sup>. This Report is an important document that highlights the progress that Albania has made in implementing the Sustainable Development Goals for the period 2015–2017.

SDG era in Albania started based on a long and successful experience of eradicating extreme poverty and reducing the risk of social exclusion, ensuring high quality basic universal education and promoting gender equality and empowerment of women.

The Voluntary National Review elaborates upon the country's people-centred efforts to leave no one behind, focusing on two important aspect of the theme relevant to building resilient societies: women empowerment and social inclusion. The principle "Leave no one behind" is broadly reflected in all the main dimensions of the social policy in Albania, helping the country build resilience and protect citizens against the risks of livelihood shocks, with the most notable contribution in the areas of social inclusion.

Albania is fully committed to the protection and promotion of all human rights. The fight against marginalisation is a main pillar of its policies and strategies.

The ageing issues are addressed in the principal political documents, such as Strategy for Development and Integration 2015-2020 (under reviewing process, now for the period 2021-2025), as well as, in the new Social Inclusion Policy Document 2021-2025 (under the drafting process), and recently in the National Political Document on Aging, 2020–2024, and its action plan. Other examples are new laws such as Law No. 121/2016 on social care services and Law no. 22/2018 on Social Housing, which includes specifically older people.

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<sup>13</sup> <https://sustainabledevelopment.un.org/memberstates/albania>

**1.2. Within the national political planning are there any established links between ageing issues and the 2030 Agenda (a mapping of the connections between MIPAA/RIS and the SDGs that shows areas for policy integration is available on the UNECE website)?**

The National Action Plan on Ageing was drafted according to European ageing issues and the 2030 Agenda.

The Action Plan is also in line with the health strategic objectives of the European Union “Together for Health: A Strategic approach for the EU 2008-2013” that emphasized the need for health promotion during all of the life stages, while the population is growing older. This element has also been underlined in the Conclusions of the EU Council “Healthy ageing during the whole cycle of life” (2012/C 396/02), while the Third Health Program of EU identifies the demographic changes as a main challenge for the region.

**1.3. Given the information reported about MIPAA/RIS implementation, what are the most relevant SDGs which could be nourished by current policy measures (specify which measures)? Were they or will they be included in your country’s VNR(s)? Describe 1–3 good practice examples.**

The policies and specific objectives of the Action Plan are also in line with some of the Sustainable Development Goals (SDGs):

Goal 1. Eradication of poverty everywhere and all forms.

Goal 3. Providing a healthy life and promotion of welfare for all and of all ages.

Goal 4. Providing a comprehensive education and creation of opportunities to learn during the lifetime for all.

Goal 5. Reaching the gender equality and strengthening of women.

Goal 8. Promoting sustainable and comprehensive economic growth, employment and work for all.

Goal 11. Safe and sustainable cities for all.

1.

Following the approval of the document of National Plan on Ageing and with support from the program ‘No one left behind’ (UN and Swiss Cooperation), all but one country municipalities have developed Local Social Plans with detailed action plans and budgets. ‘Ageing’ is one of the priorities supported with earmarked budget in 39 out of 60 municipalities. In 17 municipalities, although ‘ageing’ is recognised as a priority, it is not supported by dedicated funds. Only in 4 municipalities ‘Ageing’ is not among priorities.

The work with municipalities and implementation of their plans is underway. Ministry of Health and Social Protection and local governments are committed to work together in carrying out local



plans on ageing and implementing the national plan. UNFPA is providing support and expertise and within 2021 it is expected to progress with the following:

- Piloting of integrated care packages in three selected municipalities of the country.
- Other municipalities with some capacities, identified and involved in the process
- Package of the integrated health and social services approved at the national level

2.

With a decree of Albanian Government (No 352, dt 12.6.2018) is approved an improved and broader package of essential health services to be provided at primary health care centres. In the package, there is included ‘health care for the elderly’, where the health centre is depicted as ‘friendly’ for the older people. There are 12 services related to the diagnoses and the following up, as well as 17 services for the prevention and counselling. The services included in the package are comprehensive and aim at a longer and healthy life for the older people. They include home care, psychological assistance and screening for potential abuse.

3.

The check up program which was set up in 2015 in Albania, includes older people. It is fully financed by the budget of Ministry and it is provided for free at the point of care for all users (irrespective of their health insurance status). The program which aims at preventing cardiovascular accidents or other serious non infectious diseases at later life, has been used by tens of thousands of older people every year. Data suggest that awareness about risk factors or silent health problems (such as diabetes or hypertension) is increased while, prevalence of serious hypertension has decreased.

The analyse focusing on health vulnerability, was carried out for the first time in Albania in 2018. The analyse identified a priority list of vulnerable groups relevant for Albania and older people were ranked as most important among them based on size of the category, needs and access to care.

<b>At-risk groups for health vulnerability identified in the Albanian context</b>	<b>Criteria</b>	<b>Most vulnerable sub-groups: at least one criterion</b>
Older people	<ul style="list-style-type: none"> <li>• Aged 65years and above</li> <li>• Retired</li> </ul>	<ul style="list-style-type: none"> <li>• Social pension only</li> <li>• Living alone (including widowed)</li> <li>• Loss of functional abilities/lack of autonomy</li> </ul>
Disabled	<ul style="list-style-type: none"> <li>• Under the disability assistance scheme</li> </ul>	<ul style="list-style-type: none"> <li>• Women</li> <li>• Living alone</li> <li>• Continuous need of assistance/care</li> </ul>
Sick people	<ul style="list-style-type: none"> <li>• At least 2 diagnosed chronic conditions</li> </ul>	<ul style="list-style-type: none"> <li>• Unemployed</li> <li>• Homeless</li> </ul>
Poor people	<ul style="list-style-type: none"> <li>• Under the social assistance scheme</li> </ul>	<ul style="list-style-type: none"> <li>• Homeless</li> <li>• Social assistance</li> </ul>
Women	<ul style="list-style-type: none"> <li>• Females aged &gt;18 years</li> </ul>	<ul style="list-style-type: none"> <li>• Head of family</li> <li>• Unemployed</li> <li>• Homeless</li> <li>• Victims of violence/abuse</li> <li>• Victims of trafficking</li> </ul>
Children	<ul style="list-style-type: none"> <li>• Age 0-18 years</li> </ul>	<ul style="list-style-type: none"> <li>• Orphans</li> <li>• Child labor</li> <li>• Victims of trafficking</li> </ul>
Roma and Egyptian community	<ul style="list-style-type: none"> <li>• Self declared Roma and/or Egyptian</li> </ul>	<ul style="list-style-type: none"> <li>• Roma/Egyptian</li> <li>• Women</li> </ul>

Under Section 3.1 of the Ageing National Action Plan, the SDG respective reference has also been provided for each of the specific objectives of the primary policies

Primary Policy	Specific Objectives for each Policy (and connection with the respective SDG)
<b>I. Protection and Social Inclusion</b>	<ul style="list-style-type: none"> <li>• Support for the poorer elderly through guaranteeing of the living minimum and the gradual improvement of the lowest pensions. (SDG 1, 3)</li> <li>• Increase of public transport access for the poorer elderly. (SDG 11, 3)</li> <li>• Wider participation of the elderly in community life. (SDG 11, 3)</li> <li>• Prolongation of life at work and preservation of work skills. Promotion of learning through the whole life. (SDG 4, 8)</li> <li>• Promotion of voluntary work and intergenerational cooperation. (SDG 11, 3)</li> </ul>
<b>II. Integrated Social and Health Services</b>	<ul style="list-style-type: none"> <li>• Integration of health services with the social ones and continuous care for the vulnerable elderly. (SDG 3)</li> <li>• Expansion of services in community centres and the creation of apartment models as a community. (SDG 3, 11)</li> <li>• Strengthening home assistance. (SDG 3, 5)</li> <li>• Increase of geriatric and gerontological capacities for the health professionals and social carers. (SDG 3)</li> </ul>
<b>III. Health/Welfare Promotion and Raising the Awareness of Society</b>	<ul style="list-style-type: none"> <li>• Promotion of a healthy life, prevention of invalidity diseases for the elderly. (SDG 3)</li> <li>• Improvement of the ageing image and fighting of every form of prejudice and discrimination. (SDG 3)</li> <li>• Improvement of information and monitoring of health/welfare of the elderly. (SDG 3)</li> </ul>

## 2. Lessons learnt from managing the consequences and impacts for older people in emergency situations: the COVID-19 pandemic

*In May 2020, the United Nations Secretary-General launched a Policy Brief: ‘The impact of COVID-19 on older persons’ with four key priorities for Member States’ action:*

- ❖ *Ensure that difficult health-care decisions affecting older people are guided by a commitment to dignity and the right to health.*
- ❖ *Strengthen social inclusion and solidarity during physical distancing.*
- ❖ *Fully integrate a focus on older persons into the socio-economic and humanitarian response to COVID-19.*
- ❖ *Expand participation by older persons, share good practices and harness knowledge and data.*

*Please describe briefly the main measures that have been set **in your country** to **protect older persons** and to address the four focus areas as outlined above. Please also indicate if and how policy approaches have changed, in light of the lessons learned since the start of the pandemic.*

**2.1 How were older people affected by Covid-19 in your country?** Was there a higher share of hospitalisation and rate of deaths among older people in 2020 than for population in general and in relation to previous long-term observations?

**2.2 What has been done to ensure that difficult health-care decisions affecting older people are guided by a commitment to dignity and the right to health?** Please reflect on the recommendations of the Secretary-General's Policy Brief, when applicable, and briefly describe the main challenges and 3 - 5 good practices.

**2.3 What has been done to strengthen social inclusion and solidarity during physical distancing?** Please reflect on the recommendations of the Secretary-General's Policy Brief, when applicable, and briefly describe the main challenges and 3 - 5 good practices.

**2.4 What has been done to fully integrate a focus on older persons into the socio-economic and humanitarian response to COVID-19?** Please reflect on the recommendations of the Secretary-General's Policy Brief, when applicable, and briefly describe the main challenges and 3 - 5 good practices.

**2.5 What has been done to expand participation by older persons, share good practices and harness knowledge and data?** Please reflect on the recommendations of the Secretary-General's Policy Brief, when applicable, and briefly describe the main challenges and 3 - 5 good practices.

Like everywhere in the world the older people have been suffering disproportionately from the Covid 19 pandemic. The risk for have been many times higher among elderly compared to younger adults. This is especially true when observing the data about serious disease, hospitalization and especially deaths. 15% of deaths are in the age group 50-59 and 66% are over 60 years old. Although, during 2021, there is an increase in the infection rate of younger age categories and there are reported more deaths among younger people, still the older age remains the most affected by the pandemic.

Albania has been effective not allowing outbreaks in its residential institutions. As soon as first COVID-19 cases were confirmed, Ministr of Health and Social issued an order to isolate the residential care institutions for the elderly. It was not possible to visit the homecare for the elderly without a special permission. Specific guidelines were issued for preventing the infection among community dwelling elderly. During the lockdowns municipalities were made responsible for identifying the vulnerable and lonely older people and providing basic services for them, including distribution of food and medicines. This was done to minimize the need for the elderly to get out for essential activities. The program of support was carried out by social workers and voluntaries at the municipalities

In the reopening phase protocols, it was envisaged to continue to protect the elderly while keeping the basic services for them. Grocery stores were recommended to provide door to door distribution of food and other essentials for lonely or frail older people. The recomandations were followed during the first weeksof the reopening phase in the late spring of 2020.

The Covid-19 health crises in Albania is coupled with the November 2019 earthquake emergency which left without homes almost 20,000 people. Many of them, including vulnerable sick, elderly, disabled etc, were still living in temporary structures when the pandemic started. On 26<sup>th</sup> of November 2019, central western area of Albania was hit by a strong earthquake, the most powerful recorded in the country during the last 50 years. 51 people died and more than 20 000 houses/apartments are heavily damaged. Most affected areas were in Durres, Lezhe and Tirana regions, urban and rural. Among damaged buildings were health and social institutions. Government has started a longterm project to assure all those in need with new homes, but it has been delayed by pandemic. Most of affected families are living in apartments hired by municipalities. Many, especially in rural areas, were arranged in family tents, set up near their destroyed houses.

The bulk of support program during 2020 pandemic was carried out by social workers and voluntaries at the municipalities. Almost one third of the assistance was provided to the elderly. The total number of families assisted during the pandemic was almost 75 000, with Tirana having the largest number of assisted families (around 16000).

Apart of municipalities, other organizations have contributed in supporting those most vulnerable, especially the elderly;

1.

Hundreds of families have been assisted with food parcels and hot meals, cooked and distributed door to door by voluntaries of Red Cross Albania. Red Cross has also provided cash for categories in need. Around 2000 families have been part of the scheme and having an elderly at home was one of the criteria of vulnerability

2.

Other civil society organizations raised funds and organized projects for supporting older vulnerable people. Asociation of Geriatry within MOSHA network and with support from HAI especially targeted older people who were affected by the November Earthquake 2019. Hundreds of families in most hit areas of Tirana, Durres and Kruje were supported by voluntaries by means of home visits, health checks, sanitary aid and food packages.

3.

In 2021 other interventions have been initiated by civil society organizations. Since March, Albanian Red Cross and AAGG have set up 5 centres for socio psychological support of elderly and people with special needs in the contex of covid 19 crises. Hundreds of vulnerable older people are being supported every month. More aid in the form of food/sanitary parcels and cash is expected to be distributed in the near future. The initiatives are financed by EU programs.

### 3. Activities in preparation and implementation of the WHO Decade of Healthy Ageing 2020 – 2030

- 3.1.** Is your country preparing (or already has) a **National Action Plan** (or similar) **for the implementation of the WHO Decade of Healthy Ageing 2020 – 2030**? If yes, please briefly describe main actions foreseen.
- 3.2.** Would your country agree to report on the implementation of the WHO Decade of Healthy Ageing 2020 – 2030 in the framework of the next national reviews and appraisals of MIPAA/RIS?

The preparation of the National report for MIPAA, and the instrument have triggered interest in involving formally Albania in the WHO Decade of Healthy Ageing 2020 – 2030. Contacts with WHO country office have started and ideas are being discussed for a national action plan in line with the new National Plan of Ageing.

## Conclusions and priorities for the future

*This final part 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 needed. It should cover both progress towards the Lisbon Ministerial Declaration goals and, in a nutshell, major achievements over the twenty years of MIPAA/RIS. Please identify also 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.*

There is still a great deal of work to be done in expanding, strengthening, and financially sustaining the system of home and community-based services that older adults want and need. As more and more evidence mounts on the cost effectiveness of these approaches, we hope to witness the expansion of this approach in Albania.

Similarly, the Albania and the rest of the globe has ongoing work to do in shifting focus from treatment of diseases and injury toward prevention and a focus on healthy behaviors, environments, and institutions. Prevention improves people's quality of life and saves money, but is often not a focus of systems in the Albania and abroad.

The human rights of older people must be a focus for the global community as we face this century of massive demographic change and growing older adult populations.

State agencies at central and local level, 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.

The focus should be primarily on developing the comprehensive model of the horizontally integrated home care services for elderly dependent persons.

Additional services could then be added for specific patient groups, especially for advanced stages of the diseases/ for dependent patients such as:

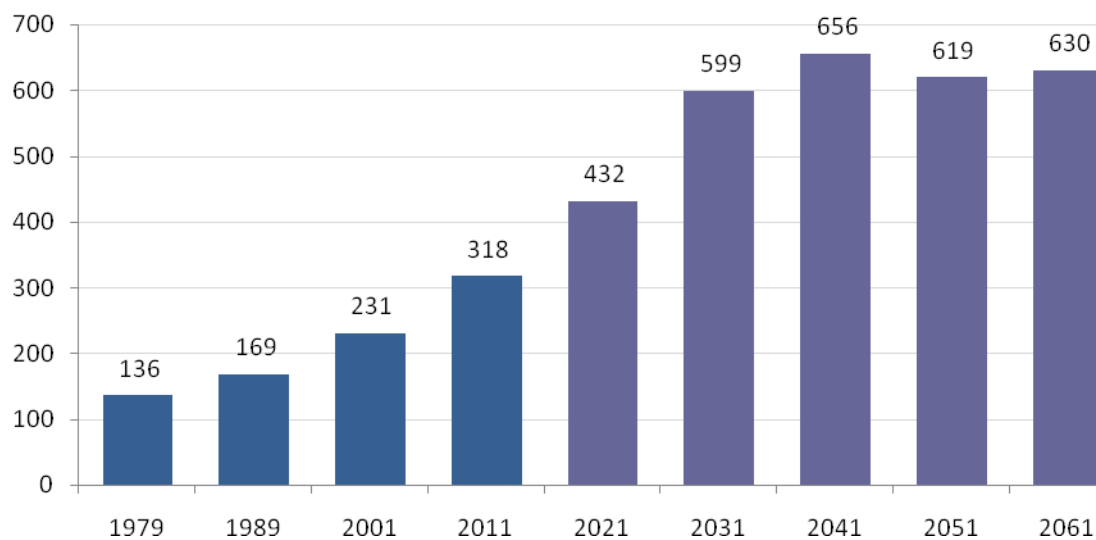
- Home based monitoring and control of High Blood Pressure,
- Home based monitoring and control of diabetes,
- Home based monitoring of Chronic Pulmonary disease,
- Home based Palliative services for terminal illnesses,
- Home based monitoring and control of chronically mental ill.

It is crucial that caregivers are acknowledged and supported, while also ensuring that care provided to older adults is centered on their needs and wishes. The challenges facing both informal and formal caregivers around the globe are massive, complex, and frequently overlooked. Major shifts will need to be made in how older adults are cared for, and an important place to start is acknowledging the hidden caregiving economy.

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.

## Annexes- STATISTICAL DATAS

### Population 65 and over in Albania, 1979-2061 (in thousands)



Source: INSTAT, Censuses 1979-2011, population on first January 2021 and projections for 2031-2061

Source <sup>14</sup>	Year	Population 65+
Census	1979	136
Census	1989	169
Census	2001	231
Census	2011	318
Population 1 <sup>st</sup> January	2021	432
Projection	2031	599
Projection	2041	656
Projection	2051	619
Projection	2061	630

<sup>14</sup> [http://databaza.instat.gov.al/pxweb/sq/DST/START\\_Projeksionet/Projek02/?rxid=f3c8fd61-c571-46d2-aa56-01fcefa7b7a0](http://databaza.instat.gov.al/pxweb/sq/DST/START_Projeksionet/Projek02/?rxid=f3c8fd61-c571-46d2-aa56-01fcefa7b7a0)

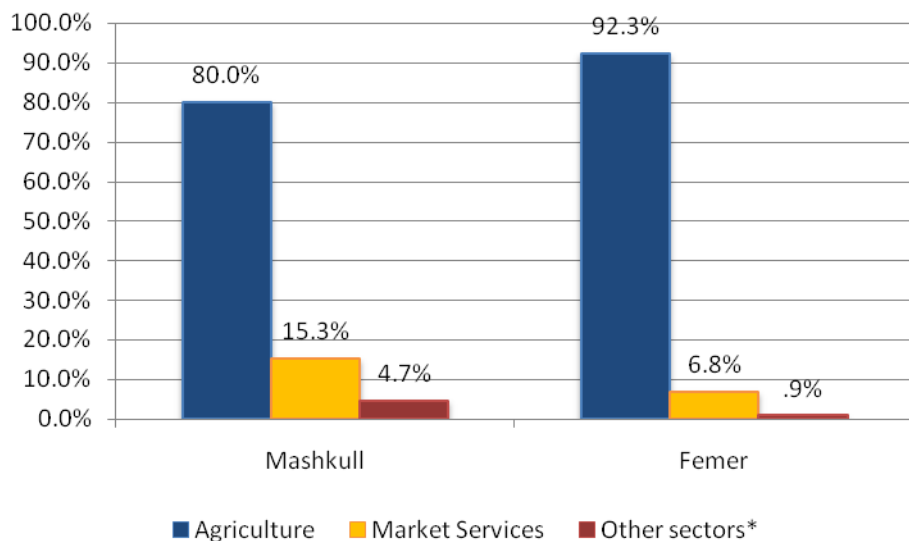
### Employment rates distributed by age groups and sex. 2020

Sex	Age group	Employment rate (%)
	Total	52.5
	15-24	26.3
Total	25-54	73.6
	55-64	60.3
	65+	14.9
	Total	59.2
	15-24	31.4
Men	25-54	79.9
	55-64	73.2
	65+	18.5
	Total	46.1
	15-24	21.1
Women	25-54	67.6
	55-64	47.5
	65+	11.5

Source: INSTAT, Labour Force Survey

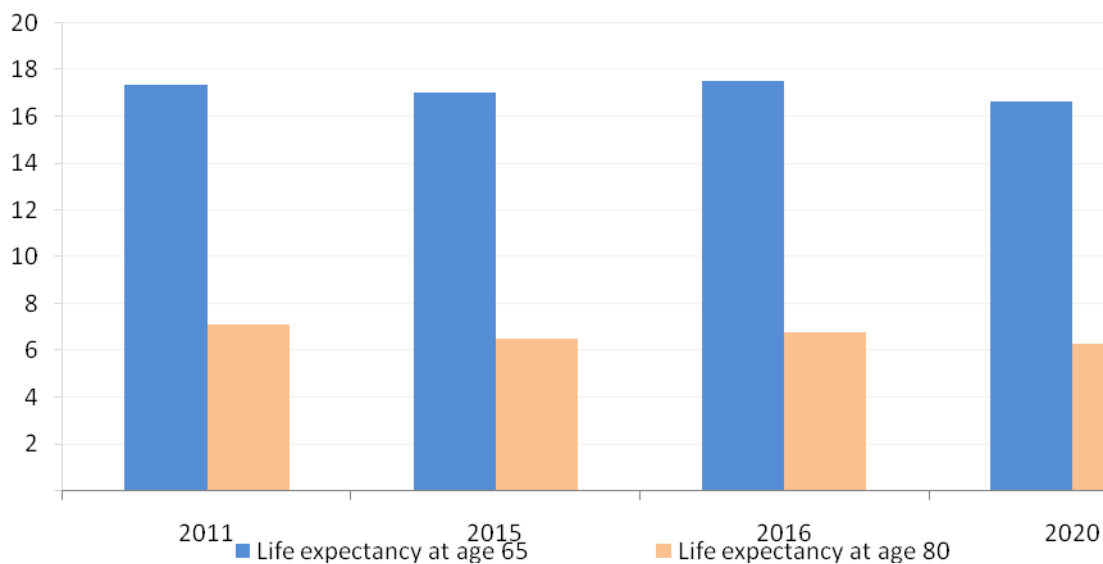


**Working population over 65 years old by sex and by sector of work 2020**



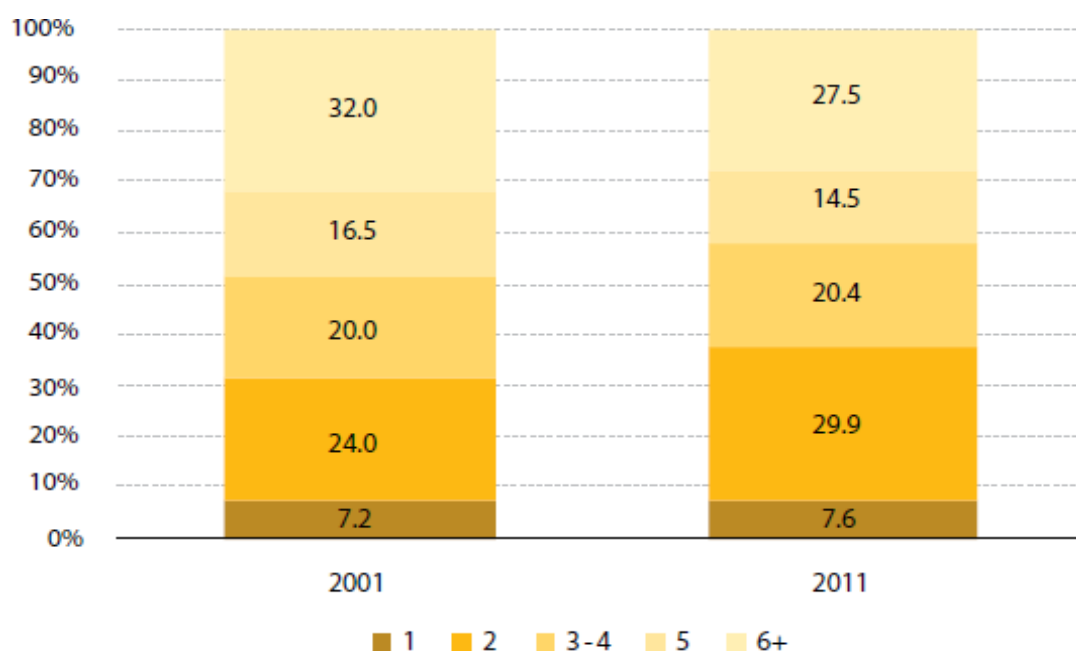
*INSTAT: Labour Force Survey 2020*

**Life expectancy at ages 65 and 80 in 2011-2015 and 2016-2020 (in years)**



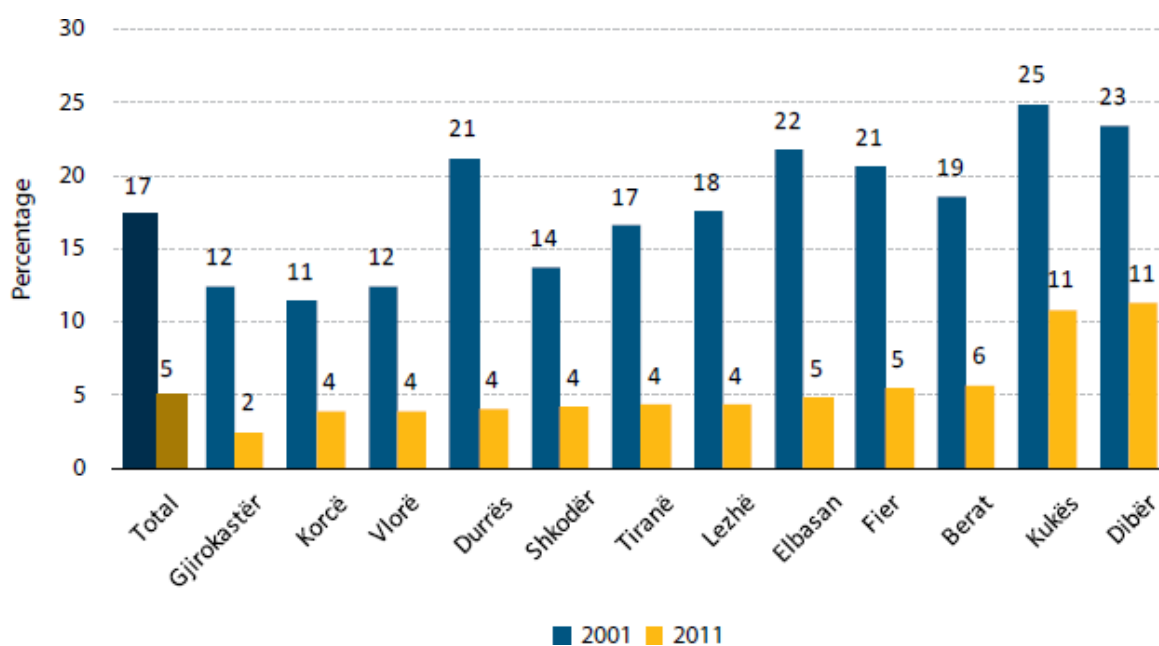
*INSTAT: ageing of population: situation of older people in Albania*

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



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

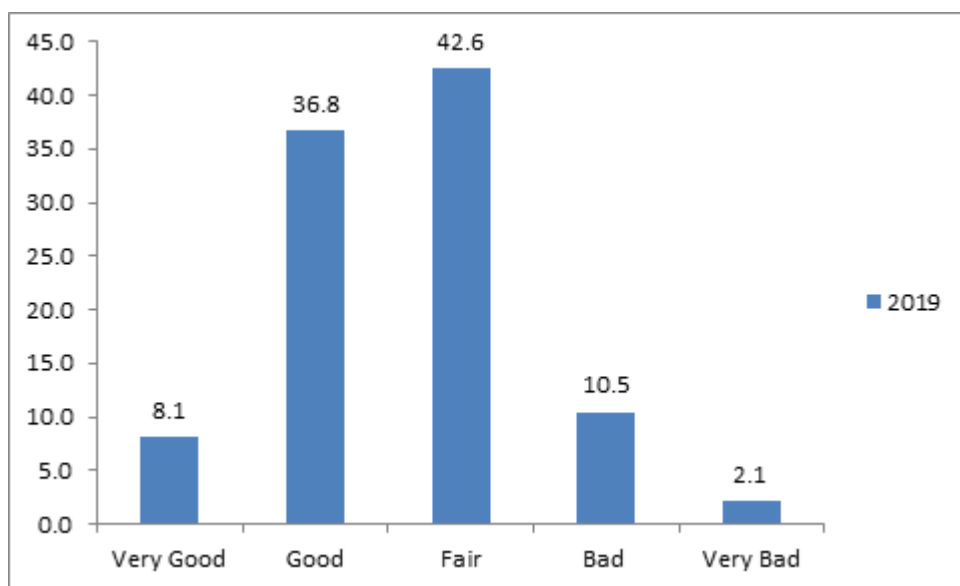
## Percentage of elderly population over 65 years old living in an overcrowded dwelling by regions (2001-2011)



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

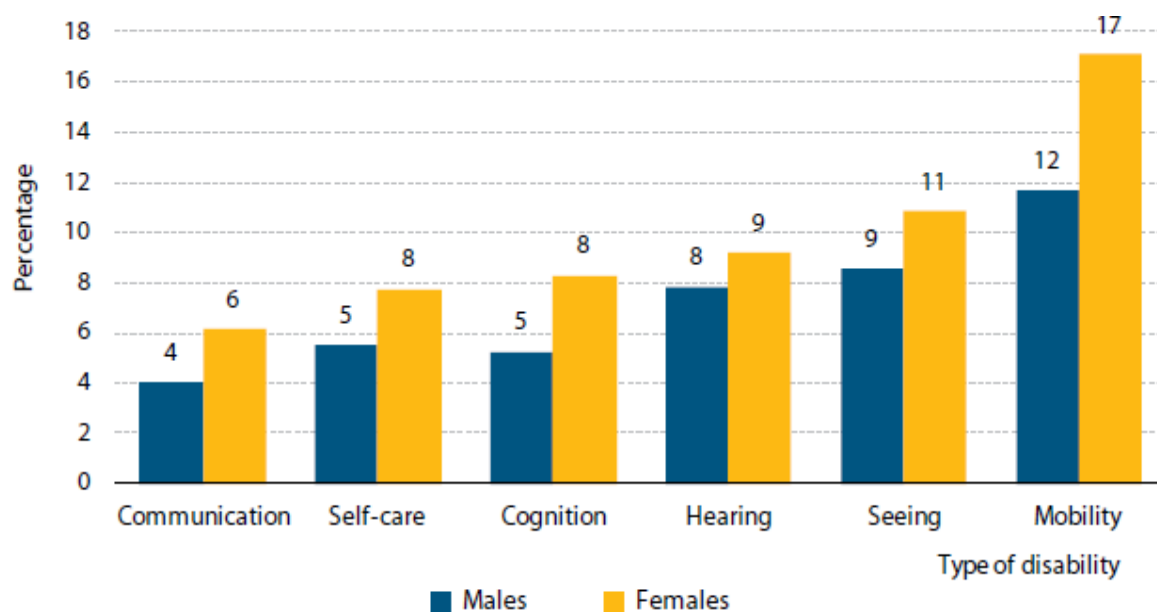
<sup>15</sup> <https://statswiki.unece.org/display/AAI/Active+Ageing+Index+Home>

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



INSTAT: Income and Living Conditions Survey (SILC), 2019

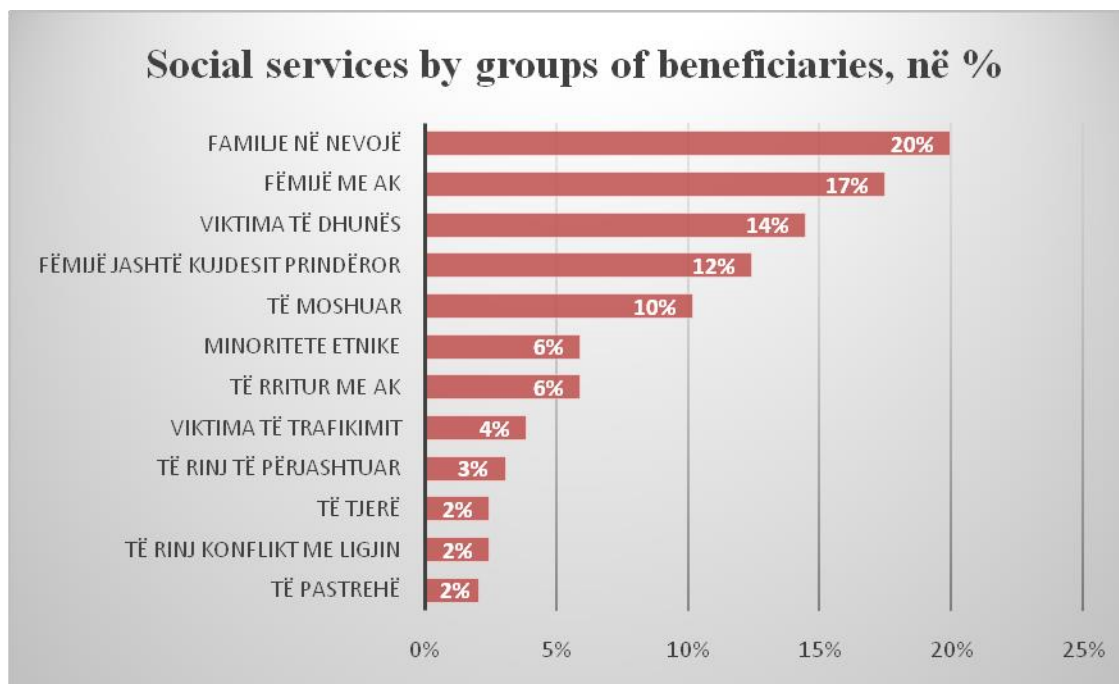
### Different types of disability among elderly by sex (prevalence in %)



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

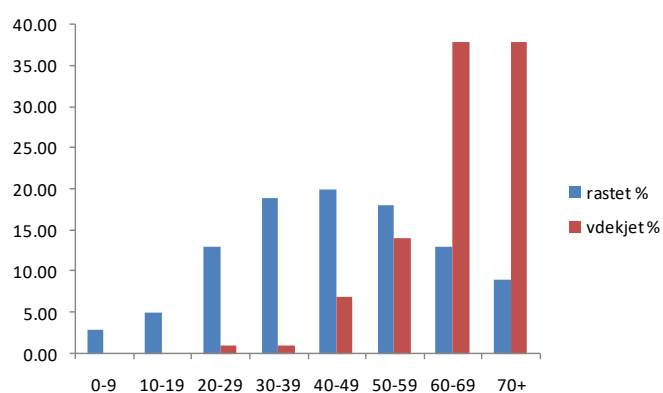
<sup>15</sup> <https://statswiki.unece.org/display/AAI/Active+Ageing+Index+Home>

### Social services by groups of beneficiaries, në %



Source: Administrative data, Social services offices in the municipalities, June 2021

### Distribution of COVID-19 cases and deaths according to age groups (%)



<sup>15</sup> <https://statswiki.unece.org/display/AAI/Active+Ageing+Index+Home>