



The Albanian Response to the Millennium Development Goals

Prepared for the United Nation System in Albania by the
Human Development Promotion Center (HDPC)
Tirana, May 2002

Cover art:
Kel Marubi, *“The Bridge of Vizir” in Kukes, between 1890 and 1910*

Tim Scott
Editor of the English version

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This report is available electronically through the Internet World Wide Web, at :
[Http://www.undp.org.al](http://www.undp.org.al)

design & printing: Maluka shpk



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GLOSSARY OF ACRONYMS

ACA	Albanian Children's Alliance
AFPA	Albanian Family Planning Association
AIDS	Acquired Immune Deficiency Syndrome
CCA	Common Country Assessment
CEDAW	Convention on Elimination of Discrimination Against Women
CEP	Committee for Environmental protection
CEE	Central and Eastern Europe
DOTS	Directly Observed Treatment Short Course
EPI	Expanded Program of Immunization
FAO	Food Agriculture Organization
GDFP	General Directorate of Forests and Pastures
GDP	Gross Domestic Production
GPRS	Growth and Poverty Reduction Strategy
HDPC	Human Development promotion Center
HDI	Human Development Index
HIV	Human Immunodeficiency Virus
HPI	Human Poverty Index
IDD	Iodine Deficiency Disorders
INSTAT	National Institute for Statistics
IMF	International Monetary Fund
IFAW	Independent Forum of Albanian Women
IPH	Institute of Public health
KABP	Knowledge, Attitudes, beliefs and Practices
LCS	Living Condition Survey
LSMS	Living Standard Measurement Survey
MDGs	Millennium Development Goals
MICS	Multiple Indicator Cluster Survey
MMR	Maternal Mortality Rate
MoEn	Ministry of Environment
MoES	Ministry of Education and Science
MoH	Ministry of Health
MoIE	Ministry of Industry and Energy
MoF	Ministry of Finance
MTEF	Medium-Term Expenditure Framework
NAP	National AIDS Program
NEAP	National Environment Action Plan
NGO	Non Governmental Organization
NTP	National Tuberculosis Program
OECD	Organization for Economic Cooperation and Development
PPP	Purchasing Power Parity
SD	Standard Deviation
SME	Small and Medium Enterprises
STI	Sexually Transmitted Infections
TB	Tuberculosis
UN	United Nations
UNDP	United Nations Development Program
UNFPA	United Nation Population Fund
UNIDO	United Nations International Development Program
UNICEF	United Nations Children Fund
WB	World Bank
WHO	World Health Organization
WFP	World Food Program



Over the past decade Albania has initiated a comprehensive series of political, economic and social reforms. The Albanians and their Government are involved in a series of international and regional processes as they work towards their country's integration into the European Union. Albania is now an integral part of the global international cooperation and plays an active role in the Southeast European region through ongoing efforts to meet the obligations inherent to the international agreements. This progress has been noted by Albania's many international partners.

As part of these long-term growth and reform processes, Albania has begun to integrate the Millennium Development Goals into its national development frameworks. The National Social and Economic Development Strategy, recently prepared by the Government of Albania with the support of the World Bank and other donors, represents the most visible of these efforts to harmonize activities already foreseen within national sectoral strategies and targets set through the Millennium Development Goals. Additional measures must be taken in this regard now by all governmental institutions. The Albanian Government is committed to achieving the objectives set forth by the Millennium Development Goals and to integrating them fully into existing national development programs.

Regular monitoring and reporting on the progress made in achieving the Millennium Development Goals - through such activities as this report - represents an important step in efforts to raise the awareness of decision-makers, representatives of civil society and the general public, and thereby broaden participation in the MDG process. Greater dialog and more open policy debate is needed to prioritize interventions and better coordinate the internal and external resources required to achieve the MDGs. The Albanian Government is committed to creating and strengthening MDG reporting and implementation structures through cooperation with the United Nations Agencies, Bretton Woods Institutions, and other partners.

Although Albania still faces many challenges in its efforts to achieve the Millennium Development Goals, it is encouraged by the progress already achieved, and is determined to reach all MDG targets by 2015 working closely with both local and international stakeholders.

Artta Dade

Minister of Foreign Affairs



The recommendations flowing out of the UN global conferences of the last decade, which culminated in the Millennium Development Summit of September 2000, provide a strong basis for country lead development efforts. The Millennium Development Goals which have derived from this body of knowledge and experience, identify the key areas where efforts need to be focused and introduce numerical targets and quantifiable indicators to assess progress.

The United Nations agencies in Albania work individually and within their respective mandates on several of the MDG targets. As a group, the UN will complement the government's efforts to integrate the Millennium Development Goals in its national development strategies and will assist in fulfilling reporting obligations. It is also of crucial importance to raise public awareness and sensitize national stakeholders and the international donor community on the status of progress towards achieving these goals. Thus, the establishment of a follow-up and reporting mechanism will help the Albanian Government discharge its commitments in this respect. It will also contribute to better co-ordination of related international support.

The Millennium Development Goals are clear and time bound targets to achieve rapid and measurable improvements. This report, and the monitoring and follow-up mechanism it proposes to put in place, will help all stakeholders in determining future interventions in support of Albania's development.

Anna-Kristina Stjärnerklint
United Nations Resident Co-ordinator

INTRODUCTION

United Nations (UN) Global Summits and Conferences held throughout the 1990s have addressed global social, economic and environmental issues facing both developing and developed countries in the world today. The related Conventions and Declarations were synthesized in the Millennium Summit of September 2000, where 147 heads of the State and Government and 191 nations adopted a Millennium Declaration. Since then, the United Nations Development Program (UNDP) has worked with the World Bank (WB), International Monetary Fund (IMF), Organization for Economic Cooperation and Development (OECD), and other UN Departments, funds and programs to formulate a concise set of goals, numerical targets and quantifiable indicators. This set of goals is known as the Millennium Development Goals (MDGs), which include eight overall goals and related targets and indicators, selected to ensure a common assessment and understanding of the status of MDGs at global, regional and national levels. Most of the numerical targets are to be achieved over the 25-year period from 1990-2015. The MDGs do not in any way undercut agreements on other targets reached at the world summits and global conferences of the 1990s, and in fact are successful in incorporating most of the goals from these international events.

Reporting on and monitoring the progress of MDGs is an important process that helps to renew political commitment on the principal development goals, focus national development debates on specific priorities, and promote the inclusion of MDGs within the national and sector development strategies. It is essential to evaluate on a regular basis the progress of the country in fulfilling its main obligations towards different global declarations and conventions. Efforts to achieve the MDGs involve a national ownership process with specific approaches selected and developed according to the in-country situation as needed to guarantee successful implementation.

This Albanian Response to the MDGs Report, the first prepared for Albania, attempts to conduct a general situation analysis of activities conducted as follow-up to the Declarations and Conventions of the 1990s in which Albania is a party, with an emphasis on the MDGs. It is a comprehensive analytical effort to establish baselines for the most important related tasks for consideration by Albanian decision-makers, as well as the general public. It is designed to promote the active collaboration of UN Agencies and all other international agencies assisting Albania to achieve the MDGs. By taking into consideration all MDGs targets and indicators, the Report assesses their relevance to Albanian conditions, offers suggestions with respect to modifications or substitutions, and identifies the present status of achievement, gaps and main issues to be addressed further in order to achieve each objective. As the eighth MDG is defined globally, this report concentrates only on the first seven MDGs, as will future country reports. Each section of the Report also includes general information on the MDGs. Report annexes offer more specific information on the main Convention and Declarations of the 1990s and their relationships with the MDGs.

Although there is a low level of awareness among Albanian Government institutions of the obligations towards different declarations, treaties and conventions relating specifically to the MDGs, in many sector strategies and policy documents the defined objectives and targets, as well as target indicators, coincide to a large extent with the objectives, targets and indicators defined by the global conferences and summits. The GPRS, as the main national development strategic document of the Albanian Government, represents the most recent effort in this respect.

During preparation of this report, a high degree of willingness has been observed at all levels of the Government to improve MDG follow-up and fulfill all evaluation, monitoring and reporting requirements, not only for MDGs, but also for other conventions ratified by Albania. For this reason, special attention has been dedicated to the identification of the status and trends for each target and indicator, as well as for relevant policy documents linked with these issues.

Defining benchmarks for the MDGs is another issue addressed by this Report, which is necessary to facilitate future country reporting activities. This process also allows for a common assessment and understanding of the present situation and the targets and final indicators to be achieved in 2015 among all stakeholders, including the Albanian Government, UN Agencies and Bretton Woods Institutions, other international organizations in the country, civil society organizations, and others.

An overall evaluation is also made as to whether or not Albania will achieve each MDG target by 2015. This evaluation is based on an analysis of trends over the last decade for indicators linked to each MDG, as well as on the status of the current supportive environment. An evaluation is made for different elements of monitoring, such as policy and strategy response, legal framework, law enforcement, availability of financial resources, data availability and quality, monitoring and evaluation mechanisms, and awareness levels. These evaluations, combined with additional recommendations for improving follow-up activities, have been designed to assist all stakeholders in determining future interventions based on their individual mandates and responsibilities. According to this evaluation, there is a good chance that Albania can achieve the MDGs; however, for this to happen, improved policies, stronger institutions, and additional resources are required. It would be unrealistic to expect that Albania can meet the MDGs without such work and support.

This Report has been prepared with the contribution of all relevant Governmental institutions, UN Agencies, the World Bank, and Non-Governmental Organizations (NGOs). The UNDP Office in Tirana has provided special contribution and assistance to the Human Development Promotion Center throughout the process.

Goal 1 Eradicate extreme poverty and hunger

Target 1: Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day.

Target 2: Halve, between 1990 and 2015, the proportion of people who suffer from hunger.

Performance Summary:

Will development goal be reached?
Possibly – **Probably** – Unlikely – Lack of data

State of supportive environment:
Strong – Fair – Weak but improving – Weak

1. Status and Trends

Poverty was officially recognized in Albania only after 1991 and is considered a multidimensional phenomenon. In addition to limited basic livelihood elements, such as food, clothing, and housing, the poverty concept includes lack of hope, exclusion from economic and social life, an inability to support family and maintain social traditions, lack of adequate infrastructure, low security, low quality of health and limited education services¹. In addition to these characteristics, low or very low levels of personal income are also recognized as an important dimension of poverty in Albania.

① *Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day.*

Income Poverty

Although efforts to assess poverty in Albania have been pursued since 1993 through different surveys and studies, it is difficult to form a consistent multidimensional picture on the poverty situation and its trends in the country over the past ten years due to significant differences in studies' time-frames, methodologies, and geographical coverage. The common shortcoming of these surveys and studies has been that they are not always based on consumption. The poverty definition used is often based on international poverty lines of 1 and 2 USD per person a day at 1993 PPP rates, without identifying national poverty lines. Regardless of the methods used, however, the studies all conclude that income-poverty in Albania is very high.

Main Albanian Poverty Studies and Surveys

Household Budget Survey for Tirana, INSTAT, 1994.
Living Standard Measurement Survey (Tirana excluded), INSTAT, 1996.
Living Condition Survey, INSTAT, 1998.
Urban Household Budget, INSTAT, 2000.
Multiple Indicator Cluster Survey, INSTAT AND UNICEF, 2000.
Qualitative Poverty Assessment in 10 districts, World Bank, 2001.
Future plans
Results of the 2001 National Census, INSTAT, 2002.
Living Standard Measurement Survey, INSTAT 2002 and 2005.
LSMS in a smaller scale, INSTAT, yearly.

Living Condition Survey -1998

The sample covered the entire country, both urban and rural areas, but its precision was necessarily lower at such sub-national levels as the prefecture. The survey's analysis of income poverty is based on two levels of **relative poverty**, whereby 60 percent of the median income is used to identify "**the poor**" and 40% to identify "**the very poor**". The survey's **absolute poverty** definition is based on the World Bank's poverty lines of 1 and 2 USD per day per person^{*}. According to this definition, "**the poor**" are people with income of less than 2 USD per day and "**the very poor**" are considered people with income of less than 1 USD per day. On the basis of these relative and absolute definitions of the poverty line, two indicators were used to measure poverty: 1) the percentage of the population with income per capita that falls under the poverty line (incidence of poverty); and 2) the difference between income levels of the poor and the poverty line (gap or depth of poverty).

¹ World Bank, A Qualitative Assessment of Poverty in 10 Areas of Albania, Washington, DC, June 2001

* 1993 Purchasing Power Parity value

Accordance to the results of a 1993-1994 Family Budget Survey, which used an absolute poverty line of 1 USD a day per person, the poverty rate for the Tirana district was 26.2%². Some 12% of households had consumption levels below 50% of mean expenditures per unit consumption. Food budget shares were very high, with almost three-quarters of consumption expenditures going toward food items. In 1996, however, a WB study showed that about 90% of the total poor population of Albania lived in rural areas making, thus characterizing poverty more as a rural phenomenon.

A Living Condition Survey (LCS) carried out in 1998³, showed that 29.6% of Albanians were poor, whereas half of them lived in extreme poverty. This means that almost one out of every three Albanians, or some 917,000 people, were poor, with over 500,000 individuals falling in the extremely poor category. In absolute terms, 46.6% of the Albanians were below the poverty line of 2 USD per capita a day, while 17.4% were below the poverty line of 1 USD per capita a day.

Incidence of poverty by urban and rural areas, %

Incidence	Urban		Rural		Total	
	Extreme Poor	Poor	Extreme Poor	Poor	Extreme Poor	Poor
Relative poverty lines	9.7	17.2	20.1	36.8	16.2	29.6
Absolute poverty lines	10.4	30.3	21.5	56.3	17.4	46.6

Source: LCS 1998

According to the 1998 LCS, poverty is more widespread in rural areas where four out of five people are poor. The chances of being poor are about six times higher for employed people living in rural areas (32.6%) than for employed people living in urban areas (5.3%). Some 48% of people working in agriculture are poor, compared to only about 10% of people working in public and private

UNDP has developed comprehensive measures of poverty, such as the Human Development Index (HDI) and the Human Poverty Index (HPI). The 2002 National Human Development Report for Albania will for the first time include HDI and HPI values at national and sub-national levels in order to evaluate regional development disparities and accordingly help decision-makers to improve regional development policies.

sectors, as well as those who are self-employed. About 28% of the population in rural areas belong to the last quintile of income levels, while almost the same percentage of the population living in urban areas belongs to the first quintile of income levels. Income poverty is especially high in such prefectures as Kukes, Elbasan and Dibra, although at present it is difficult to provide a clear overview of sub-regional income disparities due to lack of disaggregated data.

Composition of major sources of income for poor/non-poor, %

	Poor	Non-poor	Total
Public, private or self-employed	10.31	40.03	32.63
Work in Agriculture	48.38	23.96	30.04
Pensions	21.05	26.27	24.97
Unemployment benefits	4.42	1.04	1.88
Other	15.84	8.71	10.48
Total	100.00	100.00	100.00

Source: LCS 1998

Inequality in the nationwide distribution of incomes is also very high in Albania. The Gini coefficient, which is used to measure such inequalities, is 0.43 without significant differences between rural and urban areas. It is one of the highest inequality levels for countries in the region. It is higher than the

² INSTAT, Family Budget Survey 1993-1994, Tirana, 1994

³ INSTAT, Results of Household Living Condition Survey October 1998, Tirana, July 2001.

consumption based Gini coefficient of 0.276 calculated in 1996 for the whole country, excluding Tirana. This is in accord with LCS findings that only 17% of households reported being able to meet needs without any difficulty on the basis of their regular income. The percentages are even lower in rural areas. Households declaring to be in very difficult financial situation had less than half the per capita income of those households whose income levels were sufficiently high to enable them to live comfortably.

Percentage of population with incomes falling in each quintile of national income levels

Quintile	Urban	Rural
1	13.1	27.9
2	15.7	25.2
3	20.2	20.8
4	23.7	15.0
5	27.3	11.2
Total	100.0	100.0

Source: LCS 1998

Studies have shown that there is a strong correlation between poverty and unemployment. More than half of all Albanian families in which the household head is unemployed are poor. Those who are employed have a smaller probability of falling into the poor category. Only 23% of families in which the household is employed are included in the poor category.

Pensioners account for about 20% of total income poor. This is because their main source of income is the retirement pension. Only a small number of pensioners are also supported by income from other sources⁴.

Studies have also shown that the main causes of poverty in urban areas include the inability to get a job and to generate income from it. Though unemployment has declined from about 27% in 1992 to 16.8% in 2000, it continues to remain high, especially long-term unemployment. In some cities, such as Berat, Shkoder and Lezha, it is significantly more than 20%. In rural areas, hidden unemployment and under-employment is in part an outcome

A UNDP-UNIDO SME project trained 10 national experts in advanced techniques of management and business administration. Consequently, 18 state and non-state production companies have been restructured based on recommendations provided under the project. These companies have progressively increased production and sales by up to 42%, competing successfully in both domestic and foreign markets. The Albanian Government also received assistance in the preparation of a National Strategy on SME Development, already approved and under implementation.

of the low rate of arable land per capita, the low quality of soil, and low levels of income generation opportunities outside of farming. High levels of unemployment and under-employment are also present in urban areas overpopulated as result of continuing high rates of internal rural-to-urban migration beginning in 1991.

A qualitative assessment of poverty conducted in 2001 that was based on a multidimensional poverty index identified four different social economic groups⁵. These groups include: (i) “very poor” families that cannot fulfill, qualitatively or quantitatively, their basic needs for food; (ii) “poor” families that can fulfill their needs for food, but cannot cover expenditures for clothing; (iii) “not poor” families that can fulfill their needs for food and clothing, but cannot cover all other household expenditures or afford to buy durable household goods; and (iv) “relatively well-to-do” families that can cover all the aforementioned expenditures and also buy cars and a second house. The first two groups cannot afford sufficient food and clothes in quantity or quality, and are under constant psychological

⁴ World Bank, VNICA, Tirana, February 2001

⁵ World Bank, A Qualitative assessment of Poverty in 10 Areas of Albania, Washington, DC, June 2001

stress. The other two groups may be considered poor in terms of economic and social exclusion, lack of security, poor infrastructure, and absence of formal institutions.

In an effort to address income poverty issues, the Albanian Government has established a system of social assistance. About 147,000 families lacking sufficient income levels to survive are provided a monthly subsidy. A large number of those households that receive this form of assistance reside in the North and Northeast, regions facing especially difficult poverty income.

2

Halve, between 1990 and 2015, the proportion of people who suffer from hunger.

Malnutrition

The common opinion of different experts in various government institutions, NGOs and international agencies is that there is no evidence of hunger in Albania. There is, however, evidence of malnutrition that affects in particular children under five years of age. Consequently, suggestions have been made that “*to halve, between 1990 and 2015, the proportion of people lacking balanced nutrition*” would represent a more appropriate target for Albania.

According to the Food Agriculture Organization (FAO) and the World Food Program⁶ (WFP), lack of food security in Albania is a result of the general economic situation of families, especially in rural areas, and not

The WB Albanian Forestry and Pasture Project is designed to reduce poverty and improve the food security of some of the poorest families in Albania. About 200 out of 315 communes have applied for participation in the project. Sixty communes were involved in 2001 and 50 others will participate in 2002. Some 5,000 villagers earned 900,000 USD in wages and 10,670 households (53,350 beneficiaries) received WFP food assistance in 2001.

due to a food supply shortage. The total supply of food in Albania is affected by limited areas of cultivation and by the timing of planting. This in turn is influenced by the timing and amount of rainfall, and by other agricultural challenges, such as pests and disease. Before 1990 about 70% of arable land was irrigated, permitting multiple crops per year. About half of this infrastructure, however, was damaged during the transition period. While some northern communities are dependent upon Government food aid in the winter, most farmers survive with small-scale subsistence agriculture. These farmers, however, cannot afford a varied and healthy diet. About half of the agriculture products consumed in Albania is imported to meet the needs of urban areas, especially cereal, oilseeds and sugar.

The available data concerning malnutrition in Albania is scarce, making efforts to evaluate the prevalence of malnutrition among different target groups difficult. Most studies have focused on children. Other at-risk groups, such as pregnant and breast-feeding women, the elderly and

According to a recently conducted urban household budget survey, consumption expenditure is estimated at 37,000 Lek per month or some 9,000 Lek per capita for an average urban household of 4 persons. Food remains the most important element in the urban household budget covering 49.2% of total consumption, but it is lower than the 67.7% coverage observed in 1993. These survey results, however, do not provide data on the cost of the basic food needs in urban and rural areas, and the gap between available income and the cost of basic foods recommended for minimum caloric intake levels. Such data is needed to monitor the level of nutrition at national and sub-national levels, especially with respect to rates of childhood malnutrition.

others, have been for the most part neglected. Those studies that have been conducted on malnutrition have been independently developed, using different methodologies and producing incomparable results. In 1991 the Pediatric Hospital of Tirana conducted a malnutrition study that focused on children between the ages of 0-3 in 11 districts. Based on the anthropometrics standards of the World Health Organization (WHO), the study revealed that about 1/3 of these children were

⁶ FAO, WFP, Special Report on Food Supply Assessment in Albania, Tirana 1999.

underweight, while 2% suffered from severe malnutrition. The greatest rate of severe malnutrition was observed in the 1-2 years age bracket. A second survey conducted in 1993 using the same age group and methodology revealed that 28% of children suffered from malnutrition. Of these children, 7% suffered from severe malnutrition, a percent higher than 1991 levels. The results of other child malnutrition surveys and studies carried out subsequently in the 1990s, however show a reduced rate of malnutrition in children aged 0-3⁷.

Malnutrition in children aged 0-3, %

	1991	1993	1994	1996	1997
Malnutrition prevalence	28	28	18.4	14.6	7.4

Source: UNICEF, End Decade Review.

A Multiple Indicator Cluster Survey⁸ (MICS) was conducted in 2000 that provides data on the status of nourishment for children under age five in accordance with standard children height and weight tables⁹. According to this data almost one in seven children under age 5 in Albania is moderately underweight and 4.3% are classified as severely underweight. Almost one in three children are moderately stunted and 17.3% are classified as severely stunted. About 11.1% of children under age five are moderately undernourished and 3.6% are severely undernourished. Based on standard WHO determinations, the severity of malnutrition is considered “high” when stunting prevalence reaches 30%. When wasting prevalence reaches 10%, malnutrition levels among children in Albania are of immediate public health concern.

The study also revealed that the differences between malnourished children in rural and urban areas are not significant. An analysis of the three indicators used for the study shows that the rate of malnourishment for children aged 6-11 months is greater than for children of lower or higher ages.

Food-Assisted Activities

WFP is implementing an Emergency Operation project to alleviate poverty, promote food security of poor households in the northern prefectures of Albania, support unassisted and unemployed, village workers participating in the Forestry and Pasture Management activities*, vulnerable women in situations of distress, and build community assets through Food-for-Work projects. About 10,900 of the poorest Albanian households are receiving enough monthly food for a five-member family. This support is combined with voluntary labor contributions in communal activities, as well as environmental rehabilitation through communal forestry and pasture management activities in about 68 communes.

Percentage of children under age five severely or moderately undernourished

	Weight for age		Height for age		Weight for height	
	% below 2SD	% below 3SD	% below 2SD	% below 3SD	% below 2SD	% below 3SD
Male	15.3	4.8	34.1	19.8	11.9	4.8
Female	13.3	3.8	29.4	14.8	10.3	2.4
Urban	14.1	4.9	23.8	12.2	11.9	3.7
Rural	14.4	4.0	36.7	20.5	10.6	3.5
Total	14.3	4.3	31.7	17.3	11.1	3.6

Source: MICS 2000

Micronutrients also represent a nutrition problem requiring attention. Micronutrients deficiencies, especially iodine and iron, are considered more acute and severe in Albania than cases of general malnutrition. The Ministry of Health (MoH), with UNICEF support, is preparing a National

⁷ UNICEF, End Decade Assessment Review, Tirana, January 2001.

⁸ UNICEF, Multiple Indicator Cluster Survey Report, Tirana December 2000.

⁹ The standard used by the MICS is NCHS recommended by UNICEF and WHO.

* This is a component in the Albanian Forestry Project implemented by WB, WFP, FAO, MoAF, Local Government of Italy and Switzerland, SNV and AWAP.

Plan of Action on Iodine Deficiency Disorders (IDD). A Memorandum of Understanding between the MoH, Ministry of Industry and Energy (MoIE) and UNICEF for a achieving universal salt iodization and sustainable elimination of IDD has already been finalized.

2. Relevant Policy Documents

Growth and Poverty Reduction Strategy (GPRS): The GPRS is a comprehensive government strategy approved by the Albanian Government in November 2001, also called the National Strategy on Socio-Economic Development¹⁰. The GPRS considers a range of development issues, including poverty, and focuses on the role of the Government and other actors to solve them. Action Plans for the development of several sectors over the 2002-2004 period have been prepared. Several development objectives have been prioritized, including: maintaining growth rates, deepening macroeconomic stability and fiscal consolidation, promoting free enterprise, developing SMEs, promoting foreign direct investment, increasing levels of employment, and developing agriculture. A detailed Policy Monitoring Matrix has also been prepared¹¹ including targets related to the poverty gap ratio, unemployment rate, social protection system, and pensions. There are no medium- or long-term objectives foreseen in the GPRS, however, related specifically to the malnutrition of the population and underweight children.

Medium-Term Expenditure Framework (MTEF): The Government introduced a MTEF in 2001, which provided a strong framework for the preparation of the state budget for the 2002-2003 period. The new MTEF covers the period 2002-2004 and is based on detailed GPRS sector analyses and priorities. Resource projections have been developed, as well as all expenditures and allocations for each priority development objective. Relatively high levels of public investment for infrastructure and social protection have been incorporated in the MTEF as poverty-related strategic priorities.

Sector Strategies: Several sector development strategies have been prepared and adopted by the Government. A Green Strategy was prepared in 1997 establishing development priorities in the agriculture sector for the period 1998-2002. An SME Development Strategy was prepared through UNDP support and adopted by the Government in February 2001. Considering the importance of SME development, it provides global strategic objectives and related measures to be carried out to promote the creation of new businesses, encourage expansion of existing enterprises, and increase the efficiency of the private sector in order to promote employment. A detailed action plan included in this strategy is under implementation by the Government.

3. Benchmarks and Monitoring Capabilities

Targets and Indicators	Base year	Starting value		Final target	
Target 1: Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day					
<i>Indicator 1: Proportion of Population below 1 USD/day</i>	1998	17.4 %		8.7%	
Target 2: Halve, between 1990 and 2015, the proportion of people with no balanced nutrition (<i>reformulated</i>)					
<i>Indicator 2: Poverty gap ratio (incidence x depth of poverty)</i>	1998	6		3	
<i>Indicator 3: Share of poorest quintile in national consumption</i>	2002	To be defined		To be defined	
<i>Indicator 4: Prevalence of underweight children (under five years of age)</i>	2000	Moderate 11.1 %	Severe 3.6 %	Moderate 5.5 %	Severe 1.8 %
<i>Indicator 5: Proportion of population lacking balanced nutrition</i>	N/A	To be defined		To be defined	

¹⁰ This document is the outcome of the efforts of central government, local government, civil society and the private sector through WB assistance.

¹¹ The Policy Monitoring Matrix is related to the Poverty Reduction Strategy Credit committed by the WB for the three coming years.

Elements of Monitoring Capability	Valuation			
	Strong	Fair	Weak but improving	Weak
Policy and strategy response			✓	
Legal framework response		✓		
Law enforcement				✓
Financial resources availability				✓
Data collection capability				✓
Quality of the information				✓
Statistical follow up capability			✓	
Statistical analysis capability		✓		
Disaggregation level of data				✓
Monitoring and evaluation mechanisms			✓	
Public awareness				✓

4. Main Challenges and Recommendations

Establish Baselines: There is no universally accepted definition of poverty, in part because poverty is a broad concept not easily quantifiable. The adopted poverty line of 1 USD and 2 USD per day per capita to define the poor and extremely poor after taking into account different currency exchange rates may be a good standard for international comparisons; however, it does serve as the most useful indicator for nationally-based poverty monitoring and analysis. The multidimensional aspects of poverty are better captured at the national level through integrated indicators. This approach offers a strong set of monitoring tools with which to review and adjust poverty alleviation policies. In addition, determining national poverty lines based on local conditions allows for a more accurate analysis and in turn provide more opportunities for implementation of a targeted intervention approach. At the same time, however, it is difficult to establish baselines and assess the degree to which the MDG for eradicating poverty will be fulfilled by 2015. The Living Standard Measurement Survey¹² (LSMS) under implementation in 2002 will provide more accurate baseline figures on consumption-based poverty lines. Consequently, there will be a need to update the analysis on which existing strategic documents are based and to revise related measures.

Disaggregate Data and Adapt Regional Development Strategies: The Albanian experience shows that significant economic growth and impressive macroeconomic indicators are not sufficient to improve income and insure development and equity across all sectors of society. Despite the lack of sufficient data at the micro and meso levels, there is much evidence that large income disparities and inequalities exist in Albania. In order to identify the true causes of poverty and provide all stakeholders with the tools necessary to monitor trends and the impact of poverty alleviation policies, it is essential that assessments and poverty mappings take place at the micro, meso and macro levels. This disaggregated data approach will help to: identify income disparities and distorted income distribution at the sub-national level; select specific targets for different regions; prioritize interventions; and closely monitor progress towards the fulfillment of MDG targets by 2015.

Job Creation: Job creation represents an important component of income poverty solutions, yet this topic is not specifically addressed in existing strategic documents. The Government should prioritize this issue. Public-private partnerships designed to create more favorable environments for trade and investment should be pursued to create more jobs in the industrial, agricultural and service sectors. Special efforts are needed to create productive jobs through policies promoting efficient SME and, where required, labor-intensive industries. More detailed formulation of these

¹² The LSMS will be completed by September 2002 and is assisted by WB.

and other job creation strategies would be best facilitated through a Labor Force Survey. Such a survey is necessary given the current lack of existing disaggregated data for this field.

Increase Income in Rural Areas: Some 55% of Albanians live in rural areas, and agriculture still accounts for over 50% of GDP. For these reasons, the integrated development of rural areas requires more attention. The GPRS identifies increased production and incomes from agriculture, livestock and agro-processing, as well as the development of non-farm economy in rural areas as priority objectives; however, these goals are not translated into MTEF strategic priorities. The existing Green Strategy needs to be updated in accordance with recent economic developments, migration trends and currently available financial resources. Improved access to financial and credit services, especially for farmers, is also essential in efforts to increase rural incomes levels.

Address Food Security: The absence of hunger alone does not guarantee household food security. For this reason, the long-term answer to food security should be linked first of all to a sustainable increase of food productivity and equitable income distribution. To achieve this, appropriate technology and farming practices, sound policies and wide investment is necessary. Opportunities should be exploited for building partnerships and increasing capacity, both in public and private sectors. In order to track nutritional levels in Albania, it is necessary to calculate the cost of maintaining at least minimum-recommended caloric intakes. Additional survey data is then needed to assess the percentage of those that lack sufficient income to meet these basic minimum food expenditures. It is on the basis of these statistics that the baseline data for the proportion of population lacking balanced nutrition will be produced. With this data policy makers will be able to identify more effectively measures needed to decrease existing nutrition deficiencies. Concrete actions should be undertaken to strengthen food, nutrition and agricultural policies, and fair trade relations, with special attention to the strengthening of food security at all levels. Efforts should also focus on micronutrient supplementation and food fortification. Approval of the National Plan of Action on IDD represents the first concrete measure for such actions to be successful.

Financial Resources: There is a clear gap between the numerous and complex measures related to the poverty reduction activities foreseen in the GPRS and the financial resources available for their implementation. This is in part due to a lack of precise estimates of the associated costs for each priority action - there are no forecasts for necessary financing needed to achieve poverty reduction targets. This in turn is the result of limited local budget financing possibilities for priority public measures, the unclear development perspective of the private sector, and current lack of clearly defined commitments from international donors. For these reasons, a review of poverty reduction financial needs and available resources should be included among priority Government actions.

Goal 2 Achieve universal primary education

Target 3: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling.

Performance Summary:

Will development goal be reached?
Possibly – **Probably** – Unlikely – Lack of data

State of supportive environment:
Strong – Fair - **Weak but improving** – Weak

1. Status and Trends

The Albanian education system is facing important challenges. During the last decade there was a substantial drop in enrolment. In 2000, 19% fewer students attended school than during the 1989-1990 school year. Illiteracy is growing

State financing of the public education system has remained at 9-10% of public expenditures annually over the last ten years, or approximately 3-4% of GDP. Some 75% of this financing covers salaries. Only 9% is allocated for investment. Local government can commit only a small part of its resources for education. There has been an increase in funding from the private sector, mainly from parents and communities, but this amount remains small and is not included in official statistics.

especially in younger age groups and in areas where there is large-scale migration of the population. There is a physical deterioration of schools facilities. Despite efforts made for their rehabilitation, most buildings are still in a poor state, with important failures in lighting and heating. Larger urban areas also are facing a shortage of schools. The average number of students per class is 45-50.

There is a shortage of teachers with basic qualifications. This is due mainly to low teacher wages and the fact that many graduates in education seek employment elsewhere. Parents tend to pay for private courses in order to compensate for the lower quality of teaching. Discrepancies between urban and rural areas are increasing - rural families are subject to greater problems of education access and quality. Increasing the quality of education and improving education infrastructure continue to be two priority development objectives of the Albanian Government.

3

Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling.

Primary Education

Albania entered the transition period with high levels of participation in education. Schooling was free and the level of access to education was very high. This was reflected by high enrolment rates across all education levels. The gross enrolment rate for primary school in 1990 (then and now compulsory education) was 102.3%, which was and continues to be compulsory.

Enrolment rates for primary education, %

	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
Gross ER	102.3	97.8	94.2	95.2	96.6	96.0	95.6	92.1	92.1	89 ¹³	90 ¹⁴
Net ER	-	-	-	-	-	91	90	89	87	84	81

Source: Ministry of Education and Science and other sources

¹³ The calculation is made referring to the figure of enrolled pupils in the primary education in the End Decade Review, published by UNICEF in January 2001.

¹⁴ Albanian Government, GPRS, Tirana 2001.

Since 1990, total enrolment has been steadily declining. Relevant data available on this topic includes gross enrolment rates for the period 1990-1998 and net enrolment rates for the period 1995-2000. The lack of net enrolment rate data from 1990-1995 is in part due to significant internal and external migration and changing fertility rates in the immediate years following the last census of 1989. Nonetheless, there is sufficient data to show that enrolment rates in primary education have dropped year by year over the past decade with more and more children left outside the schools.

According to the Ministry of Education and Science (MoES), the drop-out rate of school children reached its peak in 1991-1992 at 6.31%, decreasing to 2.3% in 2001. Deep poverty in families is a major reason for school drop-outs. School boys are affected most by this socio-economic phenomenon, either remaining with their families to earn money or going abroad to work and send money home. For families with low incomes it is also difficult to purchase books and provide other conditions necessary for regular school attendance¹⁵. There are also several other reasons contributing to the ongoing problem of high drop-out rates, including: the inability of the state to enforce the law on mandatory education; internal and external migration; in some areas a reactivation of the blood feud; increased number of teachers without appropriate education levels; and low motivation of some teachers due to low salary levels¹⁶.

Rural areas have a much smaller percent of teachers with higher education than urban areas, especially at the basic education level: 44% versus 70% in 1998. As an incentive to work in rural areas, Albanian teachers can earn a bonus of up to 30%. Nonetheless, villages with no access to roads can attract qualified teachers only with great difficulty, as they may have to walk up to two miles in hard terrain to reach the school. School inspectors confirm that many teachers in rural and remote village schools lack both adequate subject matter knowledge and teaching skills.

“Hidden” drop-out is another important issue adversely affecting efforts to achieve universal primary education in Albania. This phenomenon occurs when students do not officially dropout of school – they still attend; however, they do not advance in any of their studies. According to a recent study¹⁷, the number of children that drop out from school is significantly less than the number of “hidden” drop-out students. It is estimated that in some regions, hidden drop-outs represent about one-third of the total number of children attending primary school.

Net Enrolment rate for different levels of education, %						
	1995	1996	1997	1998	1999	2000
Primary	91	90	89	87	84	81
<i>Female</i>	92	91	89	87	85	82
<i>Male</i>	90	90	89	86	84	80
Secondary	34	34	39	41	41	38
<i>Female</i>	34	33	37	38	39	34
<i>Male</i>	34	36	43	43	43	42
Tertiary	11	13	13	14	14	15
<i>Female</i>	11	12	12	15	16	16
<i>Male</i>	10	13	13	12	12	14

Source: Ministry of Education and Science

Basic Education

The compulsory level of primary education in Albania during the communist regime comprised first to eighth grades, frequently called basic education. According to the new Albanian Law on Pre-university System of Education this level of basic education continues to be compulsory. A

¹⁵ World Bank, Education in Albania, changing attitudes and expectations, 2000, Tirana

¹⁶ World Bank, Financing, Efficiency and Equity in Albanian Education, Tirana, 2000

¹⁷ Study on Hidden Dropout, “Education for All” Association, Tirana, December 2001.

study by UNICEF¹⁸ has calculated the relevant MDG indicator - the percentage of children entering first grade that eventually reach fifth grade for the year 2000. At the national level, about 82% of children who enter first grade eventually reach fifth grade. There are large urban-rural disparities, however, in the percentage of children who reach and complete fifth grade. Approximately 87% of urban children who enter first grade reach fifth grade, compared to only 77% percent of children in rural areas. Although this indicator should still be used for international comparisons, is not the most relevant for assessing the Albanian education system. A more useful national development indicator is the percentage of children entering first grade that eventually reach eighth grade.

Founded in 1999, the Albanian Children's Alliance (ACA) is a coalition of 150 government and civil society representatives of Albania's 36 districts who are working for the rights of Albanian children. The ACA is perhaps the first mass movement for social change in Albania, with a consensual management process based on widespread consultation and input. The mission statement of the ACA is to "advocate and mobilize for application of the convention on the Rights of the Child at the level of state and society." Major activities include lobbying for children's rights, mobilizing members in campaigns and providing technical inputs into national and regional policy-making. UNICEF, along with Plan International and Save the Children, has served as a major facilitator for the ACA. Its work is directed by its national assembly, which elects a Steering Committee. The Steering Committee is currently working to establish a monitoring mechanism throughout the country for the implementation status of children's rights.

Percentage of children entering first grade of primary school who eventually reach fifth grade

	% in 1st Grade reaching 2nd Grade	% in 2nd Grade reaching 3rd Grade	% in 3rdGrade reaching 4th Grade	% in 4th Grade reaching 5th Grade	% of those who enter primary school who reach 5th Grade
<i>Male</i>	91	92	93	93	84
<i>Female</i>	94	94	95	95	80
<i>Urban</i>	98	98	97	98	87
<i>Rural</i>	89	90	92	90	77
Total	93	93	94	94	82

Source: MICS 2000

Literacy Rate

The lack of comprehensive statistical data makes the calculation of Albanian illiteracy rates difficult. Several studies have been conducted over the past several years, however, which indicate that illiteracy prevails in some areas of the country due in part to the economic, demographic and social changes of the transition period. A 1998 study by UNICEF showed low levels of illiteracy in Albania among all those below 40 years of age¹⁹. The 1996 LSMS also shows low illiteracy rates in Albania²⁰. According to the 2000 MICS report, overall literacy is 87.7%. Out of this literate population, 85% are females, with 91% males. The literacy rate of 15-24 year-olds is roughly 93%.

Literacy Rates for Albanian Youth, %

Age	Male			Female			Total		
	Literate	Not known	Number	Literate	Not known	Number	Literate	Not known	Number
15-24	93.2	2.7	1580	93.3	0.8	1634	93.2	1.7	3214
Total	90.9	2.0	5585	84.7	1.8	5806	87.7	1.9	11391

Source: MICS Survey, 2000

¹⁸ UNICEF, MICS Report, 2000, Tirana

¹⁹ UNICEF, Situation Analysis, Tirana 1998

²⁰ The World bank, Financing, Efficiency and Equity in Albanian Education, Tirana, 2000

2. Relevant Policy Documents

Growth and Poverty Reduction Strategy. The GPRS identifies two main objectives for the education sector: (i) increasing attendance throughout the mandatory 8-year primary education system, especially among poorer and more remote areas of the country; and (ii) increasing the quality of teaching. It calls for levels of enrolment in the 8-year education system to increase from about 90% in 2000 to 94% in 2004 and to 100% by 2015 across all population groups and regions²¹. Increased attendance in the 8-grade system is to be achieved through greater enrollment of children from poor families, especially those in rural and suburban areas for which special programs and projects will be developed. In this regard, certain conditionalities are included in the Policy Monitoring Matrix for review by the Government and the WB. These include: calculation of gross enrollment rates for all education levels using data from the new census, setting five-year targets for grades 1-4, 5-8 and 9-12, and publishing annual data on progress in meeting these targets.

The United Nations Children Fund (UNICEF) will continue to support the education system through its Country Program 2001-2005. The UNICEF Education project is focused on reforms to improve the education system's ability to respond to the development needs of young people. The quality and substance of the primary education is addressed through the Global Education Initiative. This Initiative, introduced on a pilot basis in 1997, combines curriculum reform with the introduction of more interactive learning methods.

Strategy for Decentralization and Local Autonomy: This document was approved in 1999 by the Albanian Government and foresees a number of immediate reforms that delegate more power from the central government to local authorities. Currently, the Albanian education system is very centralized. Some devolution was initiated in 1993 with the creation of Education Directorates at the district level as branches of the MoES. The Strategy is under implementation with the related legal and regulatory framework still under preparation.

National Strategy for Children 2001: This is another strategic document of the government that tackles the education sector from perspective of children's rights. It includes several main objectives and activities related to the education sector, but lack specific targets and indicators.

One of Albania's most urgent tasks is to teach young people the basic principles of an open and democratic society in order to help them participate in their country's development. Recent polls indicate that almost half of Albania's youth hope to emigrate to Europe or North America. To help reverse this trend Albanian National Television and UNICEF have launched a weekly TV news magazine, "Troç" (Straight Talk), that features the reports and opinions of youth. Every week Troç demonstrates to a national audience of young and old the importance of dialogue, open inquiry, debate and gathering facts objectively through the medium of television journalism. Troç is made up of video news packages filmed and written by 13-18 year olds in eight "Youth Video Bureaus" around the country. The sixty to seventy young reporters are in charge of story selection, research, filming, reporting, interviewing, scripting and narration. Eight adult facilitators guide and coordinate the after-school youth video work. Two professional television producers conduct in-service training, edit and compile raw footage, and voice tracks filed from the bureaus. A high level of youth participation – young people making decisions with adults facilitating – has been sustained. Many viewers, youth and adults, enjoy the fresh perspective and say Troç is the first socially responsible television show they have seen in Albania. In addition the show is known as the only national programme that offers a weekly perspective from all corners of the country.

3. Benchmarks and Monitoring Capabilities

Targets and Indicators	Base year	Starting value	Final target
Target 3: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling			
<i>Indicator 6: Net enrolment ratio in primary education</i>	1995	91%	100%
<i>Indicator 7: Percent of pupils starting 1st grade who reach 5th grade</i>	2000	82%	100%
<i>Indicator 8: Literacy rate of 15-24 year-olds</i>	2000	93.2%	100%

²¹ Albanian Government, GPRS, Tirana, 2001

Elements of Monitoring Capability	Valuation			
	Strong	Fair	Weak but improving	Weak
Policy and strategy response				✓
Legal framework response		✓		
Law enforcement				✓
Financial resources availability				✓
Data collection capability				✓
Quality of the information				✓
Statistical follow up capability			✓	
Statistical analysis capability		✓		
Disaggregation level of data				✓
Monitoring and evaluation mechanisms			✓	
Public awareness				✓

4. Main Challenges and Recommendations

Education Sector Strategy: There is not yet an overall policy for the education sector in Albania. There is a need to formulate and approve a strategy that is also linked and integrated with the Decentralization, GPRS and all other sectoral strategies. Special attention must be given to official and hidden school drop out rates, with particular focus on rural and remote areas. Factors influencing rural-urban differences in education access and quality must be identified as part of these development efforts. The Education Sector Strategy should be inclusive and participatory in order to ensure broad ownership and reduce the influence of political influences. As in the GPRS, full integration of the education-related MDG's must be ensured.

Credible Information: The information system of the education sector needs to be improved. Basic data and reporting standards need to be established, including requirements for making information on sector performance publicly available. In order to respond in time to such problems as drop-outs and illiteracy, studies must be conducted in the areas where these phenomena are more problematic and special programs prepared in order to integrate illiterate children into society.

Financial Resources: During the last ten years, public financing for education has comprised over 10% of total budget expenditures; however, its share of GDP remains low. Local government and community financial contributions are insignificant. As result, the education sector is facing financial difficulties that result in low performance and low quality. Proposals must be developed to increase targeted spending in the education sector at all levels and across all regions. In this regard, increasing the share of budget expenditures for education as reflected by percent of overall GDP should be considered as one of several priority measures to be taken by the Government.

Goal 3 Promote gender equality and empower women

Target 4: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education by 2015.

Performance Summary:

Will development goal be reached?

Possibly – Probably – Unlikely – Lack of data

State of supportive environment:

Strong – Fair - Weak but improving – Weak

1. Status and Trends

The population of Albania totals 3.08 million, of which 50.1% are women²². Some 57.5% of women population live in rural areas. Life expectancy is 76.4 years for women and 71.7 years for men. The average age of marriage has increased to 23 years for women and 28.1 years for men. These statistics in part reflect the higher mortality rate among men and a tradition of Albanian women marrying older men²³. Arranged marriages are still frequent in the country, especially in rural areas.

*After the fall of communism old and new traditions have appeared. The Code of clan-based law (Kanun) has been revitalized particularly in North-eastern regions. It includes some articles that discriminate against women and promote domestic violence. The trafficking of women and girls is a new phenomenon. Combating trafficking is one of the country's top priorities. The main causes of trafficking for prostitution include high poverty rates and a desire "to improve living standards quickly especially among the youth". There is no official data on numbers of Albanian prostitutes in other countries, but it is estimated that 15,000 are in Italy, 5,000 in Greece, and 100 in France****.

4

Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education by 2015.

Women and Education

Albania's education law guarantees both girls' and boys' equal access to education. Basic education is compulsory for all children of both sexes in Albania. No significant difference exists between the two sexes with respect to school attendance. The total number of students attending school during the 200-2001 academic year was 684,270, of whom 49.4% were girls.

Albanian families have traditionally valued education regardless of their economic status. Since 1990, however, there has been a noticeable decrease in the number of children who attend school. Nevertheless, gender equality in enrolment rates has been preserved. The net enrolment rate for both boys and girls in primary schools declined significantly in the 1990s, although it has increased in secondary and tertiary schools. Enrolment rates fell less for girls than for boys in secondary school, while in tertiary schools the reverse is true.

²² INSTAT, Preliminary results of the census 2001.

²³ INSTAT, Women and men in Albania, Tirana 2001

* KANUN allow the husband to beat his wife, he occurs no guilt and the parents may not make any claims on him because of the beating.

** Psychological social Center "The earth", through the trafficking in women VLORA, 2000.

**** UNDP, Human Development Report 2000, TIRANA.

The accuracy of these figures, however, is open to question. Calculating accurate enrolment rates requires good estimates of age cohorts, which has been difficult due to large population movements, new fertility patterns, and the lack of a national census since 1989. Despite these statistical difficulties, however, it is fairly certain that women represent about half of total enrolment for all levels of education and an even higher share of enrolment in primary and tertiary education²⁴.

Net enrolment rates for all levels of education, %²⁵

	1995	1996	1997	1998	1999	2000
Primary	91	90	89	87	84	81
<i>Ration F/M</i>	<i>1.022</i>	<i>1.011</i>	<i>1.000</i>	<i>1.011</i>	<i>1.011</i>	<i>1.025</i>
Secondary	34	34	39	41	41	38
<i>Ration F/M</i>	<i>1.000</i>	<i>0.916</i>	<i>0.860</i>	<i>0.883</i>	<i>0.906</i>	<i>0.809</i>
Tertiary	11	13	13	14	14	15
<i>Ration F/M</i>	<i>1.100</i>	<i>0.923</i>	<i>0.923</i>	<i>1.250</i>	<i>1.333</i>	<i>1.142</i>

Source: Ministry of Education and Science

Nonetheless, access to education has not been equal to all population groups. Students in rural areas and in some mountainous areas of the northern part of the country have less access to education than students in urban areas. It is difficult to pinpoint the reasons for lower basic education enrolment rates for girls in these areas. Although not as large a factor as for boys, insufficient family incomes force some to look for jobs or to help families in agriculture. Also, a reinforcement of traditional beliefs that girls should stay home may have encouraged some girls to drop out.

Women contribute significantly to all levels of the Albanian education system. During the 2000-2001 academic year, there were a total of 28,293 teachers in total in basic education, of which 63.2% were women. About 1,700 lecturers work in higher education, of whom 38.7% are women. Women are less represented at university teaching levels where only 13 out of 222 professors are women (5.8%) and 87 out of 288 assistant professors are women (30.2%).

Literacy Rate

There is a lack of official statistical data on literacy rates of the adult population. According to UNICEF²⁶ the literacy rate is about 88%, of which 85% are females and about 91% are males. The illiteracy rate is higher among the population living in rural areas. Literacy rates are nearly identical for males and females aged 15-24 years.

Literacy rate of 15-24 year-olds, %, 2000

Age	Male			Female			Total		
	Literate	Not known	Number	Literate	Not known	Number	Literate	Not known	Number
Total	90.9	2.0	5585	84.7	1.8	5806	87.7	1.9	11391
Urban	94.1	1.0	3310	91.8	0.8	3267	92.9	0.9	6577
Rural	86.4	3.4	2274	75.5	3.1	2539	80.7	3.2	4814
15-24	93.2	2.7	1580	93.3	0.8	1634	93.2	1.7	3214

Source: UNICEF²⁷

²⁴ The World Bank, Financing, efficiency and equity in Albanian Education, Tirana, March 2000

²⁵ The estimated indicators are approximate, but most likely lower than real figures. A more accurate estimation will be available by June 2002 after the final results of the 2001 population census.

²⁶ UNICEF, Multiple Indicator Cluster Survey Report, Tirana, December 2000.

²⁷ UNICEF, Multiple Indicator Cluster Survey Report, Tirana, December 2000.

Women in Wage Employment

At the end of 1989, Albanian women's rate of participation in the work force was one of the highest in Europe. During the last decade, however, women were among those first to lose their jobs. It has also been more difficult for women to find new jobs than for men. Occupations traditionally employing women no longer exist or jobs exist in reduced numbers. According to a recent survey 60% of employers prefer to hire men over women²⁸. These disadvantages are reflected by higher official unemployment rates for women compared to men.

Employment data

Year	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
Economically active population, total 1000s		1489	1347	1423	1309	1274	1301	1320	1305	1283
<i>Male</i>		782	760	814	775	764	794	803	791	754
<i>Female</i>		707	587	609	534	510	507	517	514	529
Active rate, total %			59	65	63	59	57	56	55	
<i>Male</i>			68	75	75	74	71	69	66	
<i>Female</i>			51	55	50	45	43	42	44	
Employment, total 1000s		1095	1046	1161	1138	1116	1170	1085	1065	1065
<i>Male</i>		588	601	673	684	676	684	676	661	641
<i>Female</i>		507	445	488	454	440	423	409	404	427
Registered Unemployment rate, %	9	27	22	18	13	12	15	18	18	16.8
<i>Male</i>	8	25	21	17	12	12	14	16	16	14.8
<i>Female</i>	11	28	24	20	15	14	17	21	21	19.3

Source: INSTAT, 2001

Age discrimination is another phenomenon that influences women's opportunities in the labour market. The possibility of pregnancy makes some women of childbearing age less preferred for hiring, while some women over the age of 35 are also sometimes deemed not suitable for a job. Often, jobs advertised in national newspapers reflect this bias²⁹. Women also face discrimination in career selection and advancement. Women with the same educational qualifications as men seldom occupy leading posts in either the public or private sectors. In 1997, 70% of employed women worked in agriculture on family farms, 20% worked in the public sector, and 10% in the private sector³⁰. The average salaries of women in all sectors and at all levels are only about 70% of men's salaries³¹.

The involvement of women in private businesses is low. Out of the total number of managers working in the private sector in 1994, 1996, and 1997, women represented only about 21%, 16.8% and 18%³², respectively. Women from the private sector also have greater difficulty accessing loans and receiving credit from banks, which prefer male clients over female. Despite these challenges, a

Women Rights in Laws

Albanian Constitution (1998) - provides that all citizens are equal before the law and affirms the principle of non-discrimination on grounds of gender, race, religion, ethnicity, etc.

Civil Code - recognizes the equal rights of women in all legal proceedings, such as the right to sue and to be sued.

Penal Code - protects women and men equally in all areas of life, health, property, and dignity. Women may be punished with the same penalties as men if they commit the same crimes.

Labor Code - recognizes the equal rights of men and women to work, to employment protection, to paid annual holidays and to equal pay for equal work. The formulations of articles in the Labor Code are based on international labor standards.

Family Code - recognizes the rights of both men and women to freely choose to marry and to divorce, as well as the rights and duties of men and women to the family for education and raising children.

micro-credit pilot project for women in rural areas established a successful Saving and Credit Union. The project demonstrates the high private business potential of women in agriculture³³.

²⁸ INSTAT, Living Conditions Survey, 1998.

²⁹ AFPA, IFAW, UNFPA, NGO Shadow Report on CEDAW, Tirana 2001

³⁰ The Center for Reproductive Law and Policy, The Women of the World, NY-USA, 2000

³¹ INSTAT, Household Living Condition Survey, October 1998. This figure is related only to the fact that women occupy lower positions than men, but there is no discrimination in the salary for the same post.

³² CEO, Draft Report on CEDAW, 2001, Tirana

³³ UNDP-financed project.

Women in Power

Women's participation in politics and decision-making remains low for a number of reasons. Existing policies and strategies of the government are not gender-oriented. The national media is also characterized by a masculine culture. There is often a discriminatory and non-supportive attitude towards women. Political tactics in Albania are particularly aggressive during elections. This deters many women from becoming involved. Recent statistics provide evidence that the share of women participating in decision-making processes and in politics is decreasing.

Women's Participation Status in March 2002

	Total	Females	%
Members of Parliament	140	8	5.7
Parliamentary Commissions ¹	13	-	0.0
Parliamentary Groups ¹	5	-	0.0
Ministers	19	2	10.5
Vice Ministers	23	1	4.3
Directors of Department/General Directors	171	41	24.0
Civil Servants	1,368	617	45.1
Members of Supreme Council of Justice	14	1	7.1
Heads of Constitutional and Supreme Court	2	0	0.0
Members of Supreme Court	11	5	45.4
Heads of Court of Appeals	24	12	50.0
Heads of First Degree Court	26	3	11.5
Judges	158	103	65.2

Source: HDPC based on different official publications and reports

The proportion of seats held by women in Parliament has decreased over the last ten years. Prior to the approval of the Electoral Law in 2000, efforts were made by a number of NGOs to promote political parties to introduce a quota of 30% for women participation as candidates for members of Parliament. This initiative failed. Nevertheless, about 40 women candidates that competed during the last Parliamentary elections held in 2001 demonstrated that they could face competition effectively. Although few women ran, the percentage of winning women out of total women candidates is high.

Women Participation in Parliament

Year	Male		Female		Total
	No.	%	No.	%	
1920-1970	598	93.7	40	6.3	638
1970	192	72.7	72	27.3	264
1974	167	66.8	83	33.2	250
1982	174	69.6	76	30.4	250
1990	169	67.6	81	32.4	250
1991	199	79.6	51	20.4	250
1992	131	93.6	9	6.4	140
1996	119	85.0	21	15.0	140
1997	144	92.9	11	7.1	155
2001	132	94.3	8	5.7	140

Source: INSTAT³⁴

Two of the current eight women members of Parliament are also Deputy Speakers. No woman has been selected as chair of a parliamentary commission. In the last two years three women have been appointed as Ambassadors for the Albanian diplomatic corps abroad³⁵. Two out of nineteen ministers of the existing Government are women, both high profile posts with the Ministry of Foreign Affairs (MoFA) and the Ministry of Economy (MoE).

³⁴ INSTAT, Women and Man in Albania, December 2001.

³⁵ AFPA, IFAW, UNFPA, NGO Shadow Report on CEDAW, Tirana, 2002

Despite these cases, the government has done very little to promote women into decision-making positions in the public

Legal reforms implemented in Albania over the last ten years on the whole have not resulted in more gender-sensitive legislation. Despite the existence of certain modern and non-discriminatory legislation related to gender, there is a gap in implementation. Legal provisions for women rights do not automatically guarantee equality between men and women.

sector. The implementation of the law on equality between women and men and the day-to-day running of institutions does not favor real participation of women in the decision-making. At present only 24% of the directors of departments or general directors in ministries and government institutions are women, although they represent 45.1% of the total number of civil servants. Women representation in decision-making processes at local levels of government is also low. Only one woman was elected the Head of Region (*Qarku*) out of 12 in total.

Elected Women in Local Authorities³⁶

	Elections for Local Government					
	1997			2000		
	Total	Females	%	Total	Females	%
Mayors	65	3	4.5	65	8	12.3
Heads of Communes	309	1	0.3	309	5	1.6
Secretaries of Municipality Councils	65	10	15.0	65	2	3.0
Secretaries of Commune Councils	309	14	4.5	309	7	2.3

Since 1990 there has been a trend for more and more women to be organized in independent organizations and associations. This is partly in response to the many difficulties of the transition period and the need to attract the attention of the government to vulnerable groups of population. Women NGOs are very active in the country. They have played a crucial role in drafting laws on abortion and NGOs, as well as lobbying Parliament for their adoption. Many women NGOs are actively participating in discussions revolving around the new Family Code.

2. Relevant Policy Documents

Platform for Women 1999-2000:

This is the only policy document approved by the Government related specifically to gender issues. The Platform places priority on interventions supporting equality in politics and decision-making processes,

Government Committee for Equal Opportunities (CEO). The CEO was established in 2001 by Government Decree based on the existing Committee on Women and Family. It reports directly to the Council of Ministers. The CEO is responsible for: implementation of government policies on women and family; coordination of programs to encourage gender equality at local and central levels; presentation of proposals for new laws and amendments regarding women and children's rights in compliance with international standards; and cooperation with NGOs in the field of women's and family rights. The CEO, however, lacks the human and financial resources to meet these requirements effectively.

the economy, health and other social issues. Although certain commitments have been defined for each of these areas, it lacks action plans and the financial and human resources necessary to achieve its objectives. As a result, the activities carried out to accomplish such commitments have met with only sporadic results.

3. Monitoring and Evaluation Capabilities Targets and Indicators	Base year	Starting value	Final target
Target 4: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education by 2015.			
Indicator 9: <i>Ratio of girls to boys in primary, secondary and tertiary education</i>	1995	1.02; 1.00; 1.10	1.0
Indicator 10: <i>Ratio of literate females to males aged 15-24 years</i>	2000	1.0	1.0
Indicator 11: <i>Share of women in wage employment in the non-agricultural sector</i>	To be defined	To be defined	To be defined
Indicator 12: <i>Proportion of seats held by women in national parliament</i>	2001	5.7%	30%

³⁶ Katro, J., Selimi, Y., Gjenderi dhe Statusi Ekonomik dhe Politik i gruas ne Shqiperi, Tirana, 2001

Elements of Monitoring Capability	Valuation			
	Strong	Fair	Weak but improving	Weak
Policy and strategy response			✓	
Legal framework response		✓		
Law enforcement				✓
Financial resources availability			✓	
Data collection capability		✓		
Quality of the information			✓	
Statistical follow up capability		✓		
Statistical analysis capability		✓		
Disaggregation level of data		✓		
Monitoring and evaluation mechanisms			✓	
Public awareness			✓	

4. Main Challenges and Recommendations

Government Strategy: There is a need to formulate a medium-term Government Strategy on Gender Mainstreaming. Gender principles must be integrated into other existing and future strategies and policies. To be successful, formulation of such a Mainstreaming Strategy should also identify institutional monitoring mechanisms and indicators for tracking its implementation.

Cooperation with NGOs: Individual women NGOs and their networks are particularly active and playing an important role in supporting women's rights. For this reason, government institutions should continue and expand their cooperation and coordination with these and other civil society groups. This will improve efforts to integrate gender issues in the national political agenda.

Gender Education: Mass media should be considered an extremely powerful instrument in advocating for women's rights. Representatives of the media should be educated on gender issues, as well as made more sensitive to problems of gender equality within mass media itself.

Target 5: Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate.

Performance Summary:

Will development goal be reached?
Possibly – **Probably** – Unlikely – Lack of data

State of supportive environment:
Strong – Fair - Weak but improving – **Weak**

1 Status and Trends

Child protection and development have constituted primary concerns for the Albanian Government. Under the Albanian Constitution, children, like all other citizens, enjoy equal rights before the law, as well as special rights to protection by the state. This is reflected clearly in related legal frameworks and Government strategies and programs under implementation. In addition, statistical indicators relating to the status of children are improving. In absolute terms, however the Albanian mortality rate for children under the age of five continues to be among the highest in Europe.

Infant Mortality

5 *Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate.*

There has been some debate surrounding the precise infant mortality rates for Albania. This is related to the current status of statistical information systems and standards of reporting³⁷. Albania adopted the standard infant mortality classification of the WHO in 1995. There is evidence to suggest, however, that some health personnel may still be underestimating the number of live births, classifying them instead as still-births, and as a result under-reporting cases of infant mortality. This example is indicative of problems with data accuracy throughout the Albanian health care sector.

	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
Under-five mortality rate (per 1000 live births)	41.5	44.5	46.9	49.7	44.7	37.0	30.6	22.9	22.2	18.6	33
Infant mortality rate	28.3	32.9	30.9	33.2	35.7	34.0	25.8	22.5	20.4	15.1	28

Source: IPH, the figures of 2000 are from MICS 2000.

According to official statistical data, from 1991-1994 infant mortality rates increased before dropping to 15.1 deaths per 1000 live births in 1999. The under five-mortality rate is the most difficult figure to estimate because current health statistics in Albania are focused on the 1-4 age cohort. In general there are no major statistical differences in infant mortality rates between rural and urban areas. (In some rural areas, however, the indicators are twice as high as in urban areas³⁸.) Although greater disparities might be expected, according to the MoH this similarity in urban-rural rates could be due to the fact that more severe cases are often transferred to urban settings.

³⁷ This difference is especially related to the data for deaths occurred during the first 6 days.

³⁸ 1999, European Observatory on Health Care System, Albania

There is no official data for 2000 and 2001. Based on an indirect estimation technique (the Brass method), however, UNICEF has calculated figures for 2000³⁹. In general, the estimated values are significantly higher than official data for the years this available. Mortality cases are likely to be under-reported or not reported regularly. Under-reporting is likely to occur particularly in rural areas where according to official data about 55% of infant deaths occur at home, thus escaping the national health information system⁴⁰. Other reasons for differences in figures may also exist. For the purposes of this report, it should be stressed that data and trends should be treated with caution.

According to the Albanian Constitution:

- Children, juveniles, pregnant women and young mothers shall have the right to special protection by the state.
- Children born out of wedlock shall have equal rights as children born to a marriage.
- Every child shall have the right to protection from: violence, mistreatment, exploitation and use for labor - especially through the minimum age of child labor - which damage their health and morality or risk their lives or normal development.

According to the MoH and the Institute of Public Health (IPH)

analyses⁴¹, the principal causes of infant mortality include respiratory disease, congenital anomalies, diarrhea and infectious diseases. Respiratory diseases are the most common disease.

These diseases are often related to poor living conditions characterized by poor access to services, improper treatment by specialists, lack of facilities in emergency cases and educational level of the mothers. As such high infant and child mortality rates are closely correlated to poverty indicators. Poor living conditions and malnutrition increases the risks of child survival. The problems facing health care services in general also influence infant and child health care.

In order to decrease rates of child disease and mortality, the following objectives have been included in the National Strategy for Children:

- Continuous improvement of the quality of health service and care;
- Improvement of the level of health culture in families and society;
- Promotion of a healthy style of living and health protection;
- Enhancement of access to information and health education in child health, feeding, especially breast-feeding, personal hygiene and protection from accidents, traumas and any form of violence;
- Improvement of national mechanisms monitoring child health in Albania, i.e. systems for the collection and processing of data and information in the field of child and mothers health, and gender-oriented sharing and dissemination of this information.

Inequality in access to health

care is a concern that requires the attention of health authorities. This is especially true for rural areas. At the same time, however, there are areas with a favorable ratio of doctors per person that have higher mortality rates than rural areas with lower ratio. This suggests that higher mortality rates are not simply dependent on physical access to health care services, but also on general living conditions, the inability to afford care due to a system of informal payments, and the ineffectiveness of services received due to a lack of medical supplies, equipment and appropriate treatment modalities.

The Breast-feeding Program estimates that 70-80% of children are breast-fed during their first 3 months in rural areas, and 60-70% in urban areas. Although the percentage of breast-feeding mothers is high, breast-feeding is usually not exclusive and misconceptions about proper practices still exist. In May 1998 the MoH issued with UNICEF technical assistance a policy statement addressed to all health care facilities for the protection and promotion of breast-feeding.*

Mother's low education levels represent another factor influencing child health, particularly in terms of growth and feeding. In some rural areas, there is a traditional patriarchal view of childbirth. Often families prefer the first born to be a male child. Since the MoH does not desegregate statistics on infant death by gender, it is not known whether such cultural bias in favor of boys has any cause-effect relationship evidenced by higher mortality rates among girls. Breast-feeding is also a tradition in Albania, although breast-feeding practices are not always practiced properly. The reliability of official data on breast-feeding is questionable since it indicates an increase in the number of breast-feeding mothers, while informal evidence and experience generally suggests an opposite trend is prevalent.

³⁹ UNICEF, Situation Analysis 1998, Albania

⁴⁰ UNICEF, Albania End Decade Review, Tirana 2000.

⁴¹ UNICEF, Situation Analysis 1996, Albania

Child immunization

During the past decade the MoH has put considerable efforts into achieving good immunization coverage of children by maintaining cold chain conditions for vaccines across the country. After a drop in the early 1990s due to the budget crisis and civil unrest, immunization rates have improved, mainly through the direct assistance of international organizations. Starting from 1995 more than 90% of children have been reported to be immunized against a range of infectious diseases. Immunization rates against measles are at levels comparable to other countries in the region, although occasional outbreaks of measles cast some doubt on the validity of these statistics.

Child immunization against measles, %

	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
Percentage of 1-year-old children immunised against measles		80.5	87.0	76.2	81.2	91.0	91.7	95.1	89.0	91.0	92

Source: IPH

Nonetheless, the proportion of children immunized against measles and Rubella has increased. The coverage rate is high with about 900,000 children aged 1-15 vaccinated and some 335,000 women vaccinated by the end of 2001 out of 650,000 women of reproductive age targeted for immunization by the end of 2002. The mass immunization campaign has been evaluated overall as a success. The Hepatitis B and Haemophilus Influenzae vaccine program together with measles and rubella serve as the main focus immunization activities in the coming years. As part of the year 2000 catch up campaign against Measles and Rubella, the cold chain was upgraded in the whole country. Even when refrigerators are available, however, many health centers lack constant power supply, and refrigerators are not properly maintained, nor used exclusively for vaccines⁴². These deficiencies of the cold chain lower the effectiveness of the vaccination program. At present, the IPH is conducting a six-month survey assessing the efficiency of the cold chain and facilities' abilities to maintain proper temperatures of vaccines in six districts of the country in an effort to monitor all difficulties and obstacles influencing child immunization.

UNICEF is a leading partner of the Albanian Government in the programming and implementation of all measures related to child immunization. Interventions are made according to a well-integrated strategy designed to ensure good immunization coverage rates, active involve-

The Government has included in its programs the tracking of Rubella immunization coverage for women of childbearing age. This is a new initiative that began in 2001 and is being expanded this year with UNICEF assistance. The phasing and commitments for a program for 2002-2006 to cover the cost of EPI vaccines has been agreed between UNICEF and the Government. The program clearly outlines the related commitments of both parties. UNICEF confirms that female TT coverage is already quite high, over 90% of women of childbearing age. Therefore, priority has shifted to expand Rubella immunization coverage for women of childbearing age.

ment of all health professionals, strengthening of laboratory capacities, and improved immunization monitoring mechanisms. In response to the Global Alliance for Vaccines and Immunization (GAVI) initiative⁴³, the Albanian Government has committed to ensure vaccines for children for the period 2002-2005. According to an Agreement signed for this purpose between the Government and UNICEF in November 2001, purchase of the vaccines and related injection equipment will be co-financed by the state budget and UNICEF.

2. Relevant Policy Documents

National Strategy of Health System: This is a ten-year program (2000-2010), which identifies the main problems facing the public health sector, as well as related strategic interventions to be

⁴² UNICEF, Situation analysis 1998

⁴³ A global partnership assisting efforts to ensure that all children have equal access to immunization vaccines comprising WB, WHO, UNICEF, Governments, NGOs, etc.

financed by the state budget and international donor contributions. A National Environment Health Action Plan is also under preparation by the MoH with WHO assistance.

Growth and Poverty Reduction

Strategy: The GPRS identifies several health-related objectives: improved quality of and access to health care, improved health outcomes in maternal and child health, increased public knowledge of illness risks, etc. The GPRS also foresees specific measures related to a reduction of child mortality. Plans call for an expansion of mother and child consultancy networks through the supplying of equipment and staff training for the 2002-2004 period. To this end 90-100% of the population are to be covered with vaccinations

A national Strategy of Children has been prepared with an Action Plan including the following targets and indicators:

- *Decrease infant mortality to under 10 per 1,000 live births.*
- *Decrease the incidence of anemia from lack of iron in pregnant women from 45% to less than 25%*
- *Increase vaccination coverage of over 95% of children while ensuring effective, timely, complete immunization vaccines using cold chains, etc.*
- *Increase the percentage of mothers breast-feeding 4-6 month-old infants up to 90% and mothers breast-feeding infants up to one-year-old up to 60%.*
- *Decrease by 50% the number of deaths due to diarrheic diseases among children under 5 years of age.*
- *Decrease by 30% the number of deaths due to acute respiratory diseases among children under 5 and decrease the incidence of these diseases by 15%.*
- *Decrease by 50% the incidence of severe and less severe malnutrition among children up to 5 years of age.*

by 2004, including child immunization rates above 90%, female TT coverage rates over 90%, and a Rubella coverage rate for women 15-35 years (reproductive age) over 60%. Infant mortality rates are to be reduced by 15%. These and other health targets are reflected in a Policy Monitoring Matrix for review by the Government and WB, including indicators for child vaccination, reduction of iodine deficiency, vaccine independence, as well as measles and Rubella vaccination rates for women of childbearing age.

Integrated Management of Childhood Illnesses Program: This program is a joint initiative of the Albanian Government, UNICEF and WHO. It encompasses strategies for control and treatment of five major killers of children, including measles. The program is designed to strengthen case management and communication skills of first-level health workers, as well improve the organization and management of health services. In order to implement this program, a joint task force with representatives from the MoH and Department of Pediatrics has been established. A ministerial order has been issued to assign a core management team and implement the program.

National Measles Elimination and Congenital Rubella Syndrome Prevention Strategy: This document is being approved by the MoH and addresses issues of financial sustainability of the basic Expanded Program on Immunization (EPI) vaccines. The strategy is based on a model proposed by UNICEF. It outlines the progressive takeover over the next four years of the vaccine procurement process by the Albanian Government by establishing various structures and mechanisms.

National Plan of Action for Elimination of Measles and Prevention of Congenital Rubella Syndrome in Albania 2000-2007: The key activities included in this plan are: (i) organization of a catch up campaign for children 12 months-15 years; (ii) introduction of the second dose of a measles containing vaccine; (iii) vaccination of women of childbearing age against Measles and Rubella; (iv) vaccination of high risk groups with measles containing vaccine; and (v) strengthening of the national surveillance system for Measles and Rubella.

The National Plan of Action for Immunization Services 2001-2005: This document was elaborated by IPH and the MoH supported by the WHO and UNICEF. The plan identifies measures for prevention and control of vaccine preventable diseases.

3. Benchmarks and Monitoring Capabilities

Targets and Indicators	Base year	Starting value	Final target
Target 5: Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate			
Indicator 13: <i>Under five mortality rate</i>	2000	33	11
Indicator 14: <i>Infant mortality rate</i>	2000	28	9.4
Indicator 15: <i>Proportion of 1 year old children immunized against measles</i>	2000	92	97.3

Elements of Monitoring Capability	Valuation			
	Strong	Fair	Weak but improving	Weak
Policy and strategy response		✓		
Legal framework response		✓		
Law enforcement				✓
Financial resources availability			✓	
Data collection capability				✓
Quality of the information				✓
Statistical follow up capability			✓	
Statistical analysis capability			✓	
Disaggregation level of data				✓
Monitoring and evaluation mechanisms				✓
Public awareness			✓	

4. Main Challenges and Recommendations

General Progress of Reforms. Reducing child mortality rates cannot be addressed as an isolated issue. In Albania such effort requires a multidimensional socio-economic approach. The achievement of these targets is closely dependent on the general progress of reforms in Albania. Public Health is facing both inherited and new problems. The most serious of these involve dilapidated infrastructure, limited pharmaceutical and medical supplies, and poor financial incentives for health professionals. Although some progress has been made with respect to the rehabilitation of services, education, and creation of new health opportunities, lack of sufficient financial resources continues to prevent significant, sustainable reforms. Some of the factors influencing efforts to reduce child mortality are closely related to the economic development of the country and related efforts to reduce poverty, improve household living conditions, and develop infrastructure. Basic societal attitudes towards women and family also represent important factors.

Information System: The national information system on child mortality requires significant improvements. Standard of reporting and related information requirements should be reviewed according to WHO standards. Staff in charge of reporting should be clearly identified and well trained. The regularity of reporting also should be strengthening. Such a comprehensive and accurate national reporting system should be closely developed and implemented with the MoH.

Immunization Campaigns. In order to achieve a high coverage of immunization, an intensive campaign should be conducted throughout the country, especially in rural areas. Such an active campaign is especially needed due to the fact that the non-immunized population is often insufficiently informed of the need and importance of timely vaccination for infants and children. Vaccine distribution must reach all remote areas, whose inhabitants often lack immunizations. Strength-

ening routine immunization services, however, rather than immunization campaigns, is considered the most appropriate approach to achieve high immunization rates. Special emphasis should be placed at strengthening the routine immunization services considering coverage and quality of immunization service delivery. Achieving safety of immunization services is important to improve quality of immunization services. Some additional mopping up and outreach immunization sessions could be planned in areas with poor coverage compared to national coverage rates.

Public Education and Information: Public Health Programs, as well as related multi-media campaigns, especially throughout the school system, should place more emphasis on methods to prevent and avoid the major causes of mortality in Albania. Improvement of health care seeking behaviours on the population side is crucial to ensure timely seeking of medical assistance, reduce morbidity and mortality.

Target 6: Reduce by three-quarters, between 1990 and 2015, the maternal mortality rate.

Performance Summary:

Will development goal be reached?

Possibly – Probably – Unlikely – Lack of data

State of supportive environment:

Strong – Fair - Weak but improving – Weak

1. Status and Trends

Women in Albania represent 50.1% of the population. Although education levels and employment rates of women during the last decades under the communist regime increased significantly, many issues of gender equality were not formally accepted. During the last decade, however, important changes in traditional attitudes have occurred with respect to family planning and sexuality. In 1994 Albania was one of 183 countries that adopted the Action Plan of the Cairo International Population Development Conference. This Plan places women's health at the center of reproductive health services and attempts to integrate reproductive health services with primary health care. A Law on Reproductive Health, prepared with substantial UNFPA contribution, is already approved by the Albanian Parliament. It addresses maternal health and HIV/AIDS issues.

6

Reduce by three-quarters, between 1990 and 2015, the maternal mortality rate.

Maternal Mortality

After more than a 50% decrease in the Maternal Mortality Rate (MMR) from 1990-1993, the MMR more than doubled in 1994 to a rate even higher than in 1990. Since then the MMR once again has continued to decrease to nearly the same rate as recorded for 1993. There is no specific explanation for this sudden peak and decline in MMR beginning in 1994. Data related to maternal health care, however, faces the same problems of accuracy as for other statistics in the health sector. All analysis and figures, therefore, should be considered as approximate. Although the MMR in 2000 was more than 50% less than in 1990, it is still high compared to other European countries. In such northern areas as Tropoja, Hasi, Kukesi, the MMR is considerably higher than the national average. Despite the lack of data in rural areas, under-reporting also represents a monitoring challenge.

	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
Maternal mortality ratio (no. of maternal deaths per 100,000 live births)	37.7	29.7	25.2	16.2	40.2	33.3	27.8	27.5	21.6	15.5	18.0
Proportion of births attended by skilled health personnel	93.0	92.6	86.4	87.2	89.1	89.1	91.2	90.8	90.0	90.0	90.1
Abortions/100 live births	21.2	26.2	30.9	54.2	43.3	44.7	40.5	35.8	31.9	na	na
Total fertility rate	3.03	2.8	2.8	2.6	2.7	2.6	2.5	2.2	2.2	2.1	na

Source: Public Health Institute and MoH.

Abortions, hemorrhage, eclampsia, and complications from anesthesia and infections rank among the major causes of maternal mortality. Precise breakdowns of the causes of death are not available as the Albanian reporting system only records two categories, death during delivery and abortions.

The MMR indicator reflects maternal risk during pregnancy and after delivery. It is affected by such factors as general social-economical conditions, sanitary conditions before pregnancy, various complications during pregnancy and delivery, and the state and use of health service equipment for prenatal and obstetrical care. Other factors influencing the MMR include: limited physical access to health services in emergency cases due to a concentration of maternity care facilities in urban areas, remoteness and roughness of roads in remote and mountainous areas; poor quality of basic services; and overall unfavorable social conditions for women. Lack of professional personnel, especially in remote and rural areas, as well as lack of motivation, are also contributing factors to unsafe pregnancy and child delivery. Despite these challenges, however, there is reason to believe that these causes of maternal mortality are preventable with simple and cost effective interventions.

Prior to 1990, illegal abortions caused 55% of all maternal mortality incidents. In 1988, abortion became legal, but only in life-threatening situations. In 1991, 1992 and 1995 the grounds for abortion were broadened. Voluntary interruption of pregnancy was first legalized in 1991. In that year 20,269 abortions were officially recorded, which represented a ratio one abortion per 3.8 births.⁴⁴ The number of abortions increased until 1995 with a peak of 44.7 abortions per 100 live births, or 2.2 births per abortion. Since then official numbers have decreased. This decline, however, is questionable, as the number of abortions performed privately and therefore not reported is believed to be increasing⁴⁵. The highest abortion rates are among women between the ages of 25–34⁴⁶, who are most likely to be married and have children. These statistics offer evidence that abortions continue to be used as a common family planning method. At the same time, it is a commonly held view that after the liberalization of abortion and approval of the law on abortion, a decrease in maternal mortality was recorded, especially cases of mortality caused by abortion⁴⁷.

The Albanian Penal Code considers violence against pregnant women as a serious criminal act and provides life imprisonment for the murder of pregnant women.

A new Law on the Interruption of Pregnancy was adopted in 1995. This law permits abortions upon a woman's request up to 12 weeks from the presumed date of conception. A physician, in either a public or private health institution, must perform the abortion. Termination of pregnancy in cases of threat to the mother's life or health, or due to fatal impairment can be performed anytime during pregnancy if a specially convened commission of three physicians provides authorization. Similarly, terminations of pregnancy for social reasons or pregnancies caused by sexual assault are permitted up to 2 weeks before birth provided three specialists authorize the procedure. The counseling of pregnant women during this period is mandatory. The attending physician must inform women requesting an abortion about its health risks, state and non-state assistance available to families, mothers, and children, adoption alternatives, and clinics and hospitals that perform abortions. After this counseling, if a woman still wishes to obtain an abortion, she must reconfirm her request in writing and wait seven days before undergoing the procedure. When possible, the physician is encouraged to involve the husband or father in the decision. All women are entitled to post-abortion counseling regarding family planning services and contraception.

Maternal Health Care Services

The quality of antenatal, natal- and postnatal services is an important factor in efforts to prevent maternal mortality by detecting in time and treating potential pregnancy complications and risk factors. Health care services for pregnant women are provided by: the health personnel of village

⁴⁴ UNICEF, Children and Women Rights in Albania, Tirana 1998.

⁴⁵ MoH, Strategy of health 2000-2010, Draft

⁴⁶ Basic Health Facility Survey Report, International Medical Corps, Albania 1999

⁴⁷ AFPA, IFAW, UNFPA, NGO shadow Report, 2000, Albania

* AFPA, IFAW, UNFPA, NGO shadow Report, 2000, Albania

health centers (nurses, midwives and doctors), female counseling centers in cities (midwives and gynecological obstetric specialists), and district maternity centers. The high level of centralization, poor infrastructure and high costs of health services in

First Pre-Natal Visit*

In a recent survey, only 18% of women said they had made their first pre-natal care visit in the first three months of pregnancy. Another 45% reported their first check-up in the second trimester. A very high proportion, 37%, did not have a pre-natal check-up until their last three months of pregnancy when providing treatment for many health problems can be much more difficult.

Albania have resulted in decreased access to primary health care. According to a recent survey, problems of access and availability to health care centers is perceived as extremely difficult in rural areas. Some people have had to travel 20 km or farther to reach a health care center, where sometimes only a nurse is available. At the same time, some doctors and nurses also must spend a long time traveling to reach these centers. Many surveyed have also noted a lack of emergency centers⁴⁸.

Virtually all women in Albania receive some form of prenatal care, while 95% receive antenatal care from skilled personnel. Among those receiving antenatal care, less than 45% are attended by doctors, some 42% by nurses, and 8% by midwives. Prenatal care provided by health assistants is reported to be available in 98% of cases in urban areas, 93% of cases in rural areas. Still, there are often significant disparities between rural and urban areas. For example, women in Tirana are up to four times more likely than women in living in the small town of Kavaja to have had a gynecological checkup⁴⁹.

Prior to 1990, pregnant women received compulsory health care attention. The antenatal schedule included between 10 and 14 compulsory visits by a midwife or obstetrician who paid her own visit to the house even in the most remote areas. Today no reliable data exists on the number of antenatal visits

Gynaecological Examination**

Recent survey data suggests that only 42% of women, irrespective of age, have ever had a gynaecological examination. Slightly more than 60% of those who have had an examination were in the 26-40 year-old age group. There was a clear tapering off in the frequency of these examinations after the age 35, when women are in fact at highest risk of gynaecologically-related health problems.

conducted. Reportedly many women attend their first visit very late during pregnancy. Official data indicates that the number of prenatal visits has diminished. In 1994, pregnant women had on average 5.2 visits (including pre and post natal), out of which 38% were made by physicians. According to MoH data, women tend to go for their first pregnancy check-up rather late in the process, often only in the 20th week of pregnancy.

The government endorses a human rights approach to the provision of reproductive health services. Ideally, such an approach enables individuals and couples to make informed choices concerning the number and timing of their children, as well as promotes gender equality and women's rights to good health. Many women, however, have limited access to information and

According to the Albanian Labor Code, a woman is entitled to maternity leave provided she has been included in the social insurance scheme for the last 12 months and has been employed with an employment contract from the initial moment of pregnancy until the beginning of maternity leave. Maternity leave benefits are provided for one year, including a minimum of 35 days before delivery and 42 days after delivery. Women carrying more than one child during pregnancy are entitled to 390 days leave, including a minimum of 60 days before delivery and 42 days after delivery. An employed woman receives during maternity leave 80 percent of the average daily payment for the period before delivery and 50 percent of the average daily payment for 150 days after delivery, based on previous year's average salary.

services regarding their reproductive health rights, particularly in rural areas where family planning

⁴⁸ IBF. Public Perception on the Health Care System. Tirana, July 2000.

⁴⁹ UNICEF, MICS, Tirana, 2000

* ICMH, ALBANIA KABP Survey, TIRANA 2000

** ICMH, ALBANIA KABP Survey, TIRANA 2000

is often considered to be a male's choice. Some sexual education is provided to students beginning in the fifth grade; however, no additional education is provided in high school. Promoting improved reproductive health constitutes an important focus for UNICEF, UNFPA and other partners in Albania. Their support is being extended, inter alia, to capacity building of health personnel, development of an effective system of emergency obstetric care, educational activities targeting current and future mothers, and establishment of pilot community-level mother support groups with an emphasis on underserved areas.

Primary health care for family planning is present in all districts of Albania. Family planning services are also offered in each maternity hospital where a part-time family planning center is staffed by an OB/GYN and a midwife. Family planning services are also integrated in the operations of all mother counseling centers across the country. According to MoH data, in 2000 there were 97 family planning centers, out of which 81 were based in mother counseling centers and 16 served near maternity hospitals. Despite their availability, the number of men and adolescents taking advantage of family planning services is low. This reflects in part existing social difficulties and cultural barriers. The family planning centers operating within the public sector are not used to their full potential. Only 15-20 clients visit the centers per day due to in some cases the poor quality of services, low levels of information, education and communication, as well as a lack of privacy and confidentiality. The Government, however, is not the sole provider of family planning services. Local and international NGOs are also providing significant contributions within the same area.

Women's Nutrition

There is limited data available regarding women's nutrition. It is known that relatively high poverty rates have a direct negative impact particularly on women and females of reproductive age. Also, the average Albanian diet is considered poor in quality and quantity. Fruit and vegetable consumption is lower in comparison with most other European countries.

	1990	1991	1992	1993	1994	1995	1996	1997	1998
Percentage of children with low birth weight⁵⁰	6.5	7.0	6.7	6.8	8.3	9.3	6.9	7.4	7.0

Source: MoH

The percentage of children with low birth weights is also an indicator of poor women's nutrition. According to the MoH, 7% of newborns in 1998 had low birth weights. This value has remained relatively constant

UNICEF is implementing a 2001-2005 project focused on nutrition-related care and practices. Iron and other micronutrient deficiencies are addressed primarily through development of targeted supplementation strategies for young women. Breastfeeding promotion efforts are focused on establishing mother-to-mother support groups and monitoring implementation of the law on breast-milk substitutes. Training of health personnel, and improvement of health referral and information systems are also addressed under a safe motherhood subproject included in the Maternal and Child Health project.

since 1990. Some of the factors that tend to contribute to underweight births are most likely related more to poor social and economic factors rather than to low levels of obstetric care. Comprehensive studies, on the correlation between poor nutrition, low weight birth and infant mortality rates have not yet been conducted by Albanian institutions.

Proportion of Births Attended by Skilled Personnel

In 1990, up to 93% of all births took place in maternity hospitals or health centers, with only 7% occurring at home. Since 1990, especially in rural areas, the number of home deliveries has increased

⁵⁰ UNICEF, End Decade Review, 2000

to about 10%⁵¹. Among deliveries that occur in health facilities, 20% take place in rural health centers and 80% in maternity wards or district hospitals⁵². The number of births attended by skilled personnel has also decreased since 1990. This can be explained by reduced access to health services and the poor conditions of delivery wards, especially in rural health centers. These centers often lack running water and heating systems. In winter especially electricity is available only a few hours per day. In urban areas doctors attended 71.5% of births, with nurses attending 20.2%. This is in contrast to the 26.8% and 56.8% attendance of doctor and nurses, respectively, in rural areas⁵³. Although deliveries are officially free of charge, it is very often necessary to pay under-the-table fees for delivery services, with the understanding that the more one pays, the better the services.

2. Relevant Policy Documents

National Health System Strategy: A national policy for the health sector was produced in 1993⁵⁴. In 1996, the MoH in cooperation with WHO prepared a policy working paper setting out medium-term reform options. In May 2000 a National Strategy of Health 2000-2010 was finalized with WHO assistance that placed a priority on improving maternal and child health. The Strategy, however, is still in a draft form. Concrete strategic interventions to improve women’s health have not yet been formulated to achieve its overall objectives.

Primary Health Care Policy: This document was adopted in 1997⁵⁵ and aims to offer accessible and affordable health care to all people. It is based on the Cairo Program of Action, adopted at the International Population and Development Conference. Improving maternal and child health is identified as one of its priority development objective. It called for a reduction of the maternal mortality ratio to 25 per 100,000 live births by 2000. This objective has been achieved.

Growth and Poverty Reduction Strategy: According to the GPRS, maternal and child health services are to be improved as part of efforts to reduce mother and infant mortality rates by 15% in 2004. Priority measures foreseen to achieve these goals over the 2002-2004 period include an expansion of mother and child counseling networks. Working conditions will be improved in these networks by supplying necessary equipment and training staff. There are plans to increase allocations for public health, operation and maintenance, and staff salaries at a percentage of GDP closer to European averages. These financial objectives are also included in the 2002-2004 MTEF.

3. Benchmarks and Monitoring Capabilities

Targets and Indicators	Base year	Starting value	Final target
Target 6: Reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio.			
<i>Indicator 16: Maternal mortality ratio</i>	1990	37.7%	9.42%
<i>Indicator 17: Proportion of births attended by skilled health personnel</i>	2000	90.1%	97.52%

⁵¹ World Health Organization, National Conference of Public Health, Albania, 1999

⁵² UNICEF, Situation analyses, 1998

⁵³ ICMH, Albania KABP Survey. Tirana, October 2000

⁵⁴ European Observatory, Health Care System in Transition-Albania, 1999.

⁵⁵ Women of the World Laws and Policies affecting their reproductive rights, Center for Reproductive Law and Policy, 2000

Elements of Monitoring Capability	Valuation			
	Strong	Fair	Weak but improving	Weak
Policy and strategy response			✓	
Legal framework response		✓		
Law enforcement			✓	
Financial resources availability				✓
Data collection capability				✓
Quality of the information				✓
Statistical follow up capability			✓	
Statistical analysis capability		✓		
Disaggregation level of data				✓
Monitoring and evaluation mechanisms			✓	
Public awareness			✓	

4. Main Challenges and Recommendations

Identify Specific Interventions: As a part of general reproductive health services, maternal health should be considered as a sequence of stages. The National Health System Strategy includes global provisions for maternal health services in the context of primary health care. Essential to the success of maternal and neonatal interventions is a shift in norms and behaviours. These include: greater allocation of resources for women’s health by policy-makers, changed health-provider activities, greater community and family support, and better health behaviour by women themselves. There is an urgent need to identify specific interventions related to each stage, establishing or updating national policies, standards and regulatory mechanisms for safe motherhood, and developing sustainable systems for their implementation. These interventions should involve safe motherhood care, including effective delivery assistance, especially for obstetric emergencies prenatal care, maternal nutrition programs, and referral services for pregnancy, childbirth, abortion complications, post-natal care, and family planning. The improvement of existing legislation represents a priority measure, including new provisions for the abortion law that shorten the current waiting period.

Improve Information System: The current status of the health information system is problematic and represents a significant obstacle to the identification of priority actions and monitoring of progress, especially with respect to safe motherhood issues. Introducing simple registries for antenatal care, delivery care and neonatal care will improve standard reporting systems and allow for the periodic estimation of essential indicators. These indicators need to be regularly analyzed and used to update needs assessments and corresponding action plans. The unification of official information systems and sources must also be addressed, possibly by placing the MoH at its center.

Disaggregate Information: The availability of information only at the national level allows for limited opportunities to pursue regional interventions in Albania. Additional regional analysis based on disaggregated maternal health indicators would allow for the formulation of better targeted programs addressing specific priorities and undertaking more efficient actions in each region.

Public Education: More education and information must be made available to the public on the use and value of prenatal care, maternal nutrition, and referral services for pregnancy, childbirth, abortion complications, post-natal care and family planning. More public education is required

to encourage women to take a proactive attitude on maternal health issues. Programmes and education to engage men's support for maternal health and safe motherhood should also be developed.

Financial Resources In spite of plans to increase funds allocated for public health by the state budget, current progress in the health sector of Albania is largely dependent on foreign financial resources. The availability of external and internal resources for continuation of reforms is not guaranteed. In addition, successful promotion of prenatal care can ironically create greater demand than the services can currently cover. Although additional funds are still needed, greater attention must also be focused on developing more financially sustainable systems of maternal health care.

Goal 6 Combat hiv/aids, malaria and other diseases

Target 7: Have halted by 2015, and begun to reverse, the spread of HIV/AIDS

Target 8: Have halted by 2005, and begun to reverse, the incidence of malaria and other diseases

Performance Summary:

Will development goal be reached?

Possibly – Probably – Unlikely – Lack of data

State of supportive environment:

Strong – Fair - **Weak but improving** – Weak

1. Status and Trends

Documented cases of Sexually Transmitted Infections (STIs) are limited in Albania. Nevertheless, Albania is considered a country at high risk for STIs in part due to the relatively young age of its population, an increase in internal and external migration, and a related increase in prostitution. Other factors that must be addressed in dealing with STIs in Albania include: lack of an adequate legal and regulatory framework, especially relating to legislation and guidelines on the prevention, treatment and reporting of STI cases; lack of adequate information and education about STIs among the population, especially at-risk groups; and an inefficient health service that lacks the technical resources to deal with STIs, such as care management protocols and referral systems.

7

Have halted by 2015, and begun to reverse, the spread of HIV/AIDS

HIV/AIDS Prevalence

Efforts to prevent HIV/AIDS in Albania started prior to 1990 with the establishment of the first HIV/AIDS diagnostic laboratory in the Institute of Public Health in Tirana. Surveys over the years 1988-1992 showed no diagnosed cases of HIV⁵⁶. The first AIDS in Albania was diagnosed in May 1993, but the assumed starting year of the epidemic is 1991-1992. After the first case was diagnosed, a counseling unit was established in the IPH.

There are in total 72 officially diagnosed sero-positive cases in Albania and an additional 15 cases of AIDS, 58 of which are living in the country. As a result, Albania is currently ranked among countries with a low prevalence rate of HIV/AIDS, i.e. a percentage of infected population less than 0.1%. Increasing rates of infection, however, are disturbing, especially considering that the number of infected persons in 2001 was five times more than figures reported in 1999.

HIV/AIDS Prevalence

	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	Total
HIV	-	2	9	12	7	3	5	4	10	20	72
AIDS	-	-	1	4	3	2	1	-	4	-	15

Source: Institute of Public Health

About 80% of infected persons belonging to the 20-40 age group are men. The predominant mode of transmission to date, up to 90% of all documented cases, has been sexual, including heterosexual and homo-bisexual transmission. HIV has been transmitted through infected blood only in three cases, the last of which was reported in 1996. The HIV prevalence rate among 15-24 year-old pregnant

⁵⁶ UNICEF, End Decade Review, Tirana, 2000

women is less than 0.0001%, with only one case reported in 1996. Four children have been orphaned by HIV/AIDS. HIV/AIDS is developing fastest among the mobile population, mainly Albanian emigrants working abroad. According to the IPH, about 80% of cases have contracted the virus outside the country. Available treatment opportunities for people with HIV/AIDS are limited.

HIV testing is done on a voluntary basis. It is offered anonymously and free of charge with the exception of citizens following health procedures for legal migration to such countries as the United States and Canada, who are required to undergo testing and pay a marginal fee. Serological HIV diagnostic tests

Main Albanian Laws on STIs

A **1990 Government Decree** adopted WHO AIDS Policy, according to which HIV testing was voluntary with the only exception of screening blood donations.

A **1992 Government Decree** first introduced HIV/AIDS and STIs in the Albanian legislation within the context of family planning. The MoH was designated as the government authority to direct district commissions on the prevention and combating of AIDS. It calls for all blood donors to be screened for HIV any time they donate blood, as well as additional control measures related to notification, registration, reporting and mandatory treatment.

Law No. 7761 was approved in October 1993 "On preventing and fighting communicable diseases".

A **1993 Government Decree** established the National AIDS Commission.

A **2000 Government Decree** established a National Inter-ministerial Committee
A **2000 Law** "On the prevention of HIV/AIDS infection in the Republic of Albania" is the only specific law on HIV/AIDS.

are regularly performed at IPH and at the Blood Collection and Preservation Center. A relatively large proportion of people who are tested do not return to get their results due to fear of having the disease, fear that their privacy will be violated, or for other reasons⁵⁷.

In order to monitor the HIV/AIDS situation a sentinel surveillance system was established in 1998-1999. Sentinel surveillance centers are located in Tirana (National Center of Blood Transfusion, Toxicological Clinic, Hematological Clinic in the Pediatric Hospital, and Maternity Hospital), as well as two NGOs in Vlora, Action Plus and Women's Shelter. Monitored groups include drug users, sexual workers and blood donors. Recently sero-surveys were performed in children aged 5-15 in the Tirana District. In all district blood banks, laboratories have been established to test donated blood for the presence of antibodies to HIV, Hepatitis B and C, and Syphilis.

Public awareness of HIV/AIDS has increased continuously, but still is not sufficient. Television is consistently the main source of public information. Radio stations are the second most important, with newspapers and friends tied at

According to a recent survey, less than a third of responders mentioned HIV/AIDS as one of the main health problems currently facing Albania. The majority of these fall into the 21-25 year old age group. Although over 90% of women polled know about the AIDS virus, only about 25% of them have correct information on the three main ways of avoiding contracting HIV, most of them from urban areas. Only about 22% of those surveyed were aware of the places where the HIV tests can be taken. Communication about HIV/AIDS with family is relatively low in all age groups. In the youngest group of 15-20 year-olds, only 32% said they had spoken with family at least once or twice about the disease.*

the third. In 1992 the MoH and MoES were charged to develop sex education curricula including formal and informal courses. In 1993, the first sex education classes were held in schools for children 14 years and older. In 1994, the program was extended to the entire country. At present, sex education consists of nine hours of sex education per school year with six hours devoted to information about the prevention of HIV/AIDS and STIs. Most Albanians accept the teaching of sex education classes in schools.

Contraceptive Prevalence Rate

⁵⁷ UNICEF, Multiple Indicator Cluster Survey Report, Tirana, December 2000.

* ICMH, ALBANIA KABP Survey, TIRANA 2000. The total sample was 1500 people spread over 12 prefectures.

The use of contraceptives remains low in Albania. Although a significant increase was noticed during the past ten years, coverage remains limited. Some of the main reasons such low contraceptive prevalence rates include cultural and traditional practices, and inadequate education and information, especially among women and younger age groups.

Contraceptive Coverage of Women of Reproductive Age Contraceptive Prevalence Rate (%)	1993	1994	1996	1998	1999	2000
	4.96	8.27	10.9	11.6	10.9	11.8

Source: MoH

Contraceptive prevalence rates in Albania are tied closely with women's education levels. The percentage of women using any method of contraception rises from 11% among those with primary education to 18% among women with secondary education, and 25% among women with higher education.

By order of the MoH, contraceptives have been distributed freely since 1996 in all public health centers. A social marketing campaign has been launched across the country. Contraceptives are also available also in all pharmacies at an affordable price. The availability of contraceptives in rural areas is limited, where they are not affordable for women living under minimum-wage levels.

The Use of Condoms*

Although family planning is not widespread, knowledge about condoms is good. Over 82% of men surveyed say they know what a condom is. This is particularly evident in the 15-30 year-old age group. Only 33% of men, however, say they have ever used one, almost two-thirds of whom were in the 21-30 year-old age group. This suggests that the popularity of condoms is a relatively recent phenomenon. Men who have completed high school and lived in main urban areas were far more likely than others to use condoms. Even so, only 9% of them said that they had used one the last time they had sex. The price of condoms is clearly not an issue. Some 74% who purchase condoms say the price is reasonable, while 23% describe it as low. There is a clear preference for two particular brands of condoms. About 20% of men referred to their quality. Another 27% said they liked them because they were easy to find. Some 36% said that good advertising had brought these two brands to their attention. The UNFPA is one of the main actors that has been successful in bringing condoms into the country in both public and private sectors, and non-traditional outlets.

HIV/AIDS/STI prevention in young people through condom social marketing and peer education activities is one of the major strategic approaches of UNFPA support to the MoH in the field of Reproductive Health**. Some of the key results achieved with UNFPA support include: the training of peer educators on HIV/AIDS/STDs (88 completed peer education seminars across Albania with 3,135 participants), drug abuse and contraceptive methods; the provision of new condom packs; offering more information on HIV prevention; increased sales of 1.26 million condoms in 2001; and the organization of such special awareness events in Tirana as the Summer Party rave, a Halloween Party, and World AIDS Day rock concert with as many as 3,750 attendees.

8 *Have halted by 2015, and begun to reverse, the incidence of malaria and other major diseases.*

Malaria

Malaria has for the most part not been present in Albania for more than 25 years, although there is always a small risk for its re-introduction. Some factors increasing the chances of new malaria cases include the presence of anophle mosquitoes along the Albanian coast. The potential for reactivation is also influenced by the mobility of the population abroad, in particular to areas where malaria is present in its endemic form, as well as cases imported by visitors coming into the country from these areas. Nonetheless, only one case of malaria has been identified recently in Albania in 1997, which was imported. Given the virtual absence of malaria cases and mortalities in Albania for such a long period, the respective MDG target addressing malaria is not relevant to Albanian conditions.

* ICMH, ALBANIA KABP Survey, TIRANA 2000
 ** UNFPA, PROGRAM Review, February 2002

Tuberculosis

Tuberculosis (TB) represents a growing global health threat, particularly due to its link with HIV/AIDS⁵⁸. The incidence of tuberculosis in Albania has remained nearly constant over the past ten years. The number of deaths associated with TB declined over the same period. TB immunization rates increased annually until 1997, after which there has been a decrease. Health authorities agree, however, that low TB rates are in part related with an underestimation of cases due to deficiencies in the current epidemiological monitoring system. Not all districts send regular reports to the IPH and when they do data might not reflect the health status of the population accurately⁵⁹. No cases have been detected and cured under the Directly Observed Treatment Short Course (DOTS)⁶⁰ program to date because these have been implemented only on a pilot basis. Despite measures taken by the MoH, TB prevention systems are poor. There is a lack of proper methods for diagnosis, lack of information about patient treatments, and poor communication between responsible medical centers.

Main indicators for tuberculosis

	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
Tuberculosis incidence (new cases per 100,000 population)	20.0	19.5	16.7	20.0	17.0	20.3	21.54	19.95	20.40	20.26	21.50
No. of deaths from TB					38	16	33	19	21	19	16
Tuberculosis Immunization rate (% of children under one-year-old)				82.4	81.2	96.7	94.3	93.7	87.0	83.0	n.a

Source: The figures for 1990-1995 are from UNICEF⁶¹ and the rest from the IPH

Syphilis and gonorrhoea

Before the early 1990s, syphilis was declared nearly eradicated both in Albania and in the surrounding region. Laboratories and facilities for the diagnosis and treatment of STIs were closed. Syphilis, however, is now fast re-emerging in many countries, including Albania. This increase may be attributed in part to the collapse of STI systems for the tracking, notification and treatment of infected persons and their partners⁶².

Cases of Syphilis and Gonorrhoea

	1990	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001
Syphilis	-	-	-	-	3	3	17	36	30	14	20
Gonorrhoea	130	98	14	52	20	11	7	5	11	na	na

Source: Institute of Public Health

The first new case of syphilis was detected in 1995 in the Communicable Diseases Clinic. Despite the low total number of reported cases, according to data provided by the IPH incidences of syphilis in 1999 were ten times higher than in 1996. The rate of reported gonorrhoea infection over the same period has decreased. Real figures for syphilis and gonorrhoea are expected to be higher⁶³. For many years infection rates for these diseases have been either under-reported or did not appear at all in official statistics because most STI cases in Albania have not been registered and reported. There is a lack of a standardized form for STI reporting and of a sentinel surveillance system.

⁵⁸ UNICEF, A Decade of Transition, Regional Monitoring Report, 2000, Florence, Italy

⁵⁹ UNICEF, Situation Analysis 1998, Tirana

⁶⁰ DOTS: Directly Observed Treatment Short-Course

⁶¹ UNICEF, A Decade of Transition, Florence 2001.

⁶² UNICEF, Women in Transition-Regional Monitoring report, 1999, Florence, Italy

⁶³ MoH, Draft Strategy on health, 2000, Tirana

2. Relevant Policy Documents

National Tuberculosis Program (NTP): The NTP is based on the implementation of a WHO-recommended strategy for tuberculosis control, namely the DOTS. The goal of the program is to reduce morbidity and mortality rates and reduce the risk of developing multi-drug TB. The implementation of the NTP started in 2000. The MoH is the responsible national governmental agency for its implementation, in close collaboration with the WHO.

National Health System Strategy: This is a ten-year draft program (2000-2010) that recognizes the issues involved in STIs and HIV/AIDS in Albania. Through a series of general measures designed to reform the health sector, it supports efforts to improve the situation for STI prevention and treatment. The related Action Plan is under preparation by the MoH and WHO and includes concrete measures to combat STIs and HIV/AIDS, and to extend DOTS across the country.

Growth and Poverty Reduction

Strategy: The GPRS prioritizes the improvement of health indicators through specific interventions in the health sector, particularly the limitation and prevention of infective diseases, tuberculosis, STIs, etc. The GPRS Policy Monitoring Matrix calls for the Government to

The UN Theme Group on HIV/AIDS in Albania was established in 1997. It consists of six agencies: UNFPA, UNDP, UNICEF, WHO, UNDCP and the WB. The Group is currently chaired by the WHO. The purpose of Group is to coordinate the UN Country Team's response to the global HIV/AIDS problem and assist the Government to define and implement a National Policy against HIV/AIDS. The Group focusses on advocacy for promotion of HIV/AIDS as a governmental and donor priority, and the raising of national awareness regarding HIV/AIDS through various activities.

prepare by June 2002 an action plan for expanding DOTS for TB control, and to prepare by June 2003 a three-year National Action Plan for priority public health interventions, HIV/AIDS prevention, TB control programs and the elimination of iodine deficiency disorders. A special indicator is also included for increasing public knowledge and identification of high-risk behaviors contributing to major health problems related to chronic diseases and exposure to HIV/AIDS and STIs.

National AIDS Program (NAP): The NAP represents an action plan for the IPH approved by the MoH, which establishes a basis for cooperation between different government institutions. It is linked to certain line ministries, although cooperation to date has been sporadic. Limited resources (both financial and human) have been concentrated on the more classical aspects of HIV/AIDS, such as safe blood supply and surveillance. The NAP's establishment of sentinel surveillance was a success, but it is threatened due to lack of resources and low commitments from decision-makers.

6. Benchmarks and Monitoring Capabilities			
Targets and Indicators	Base year	Starting value	Final target
Target 7: Have halted by 2015, and begun to reverse, the spread of HIV/AIDS.			
<i>Indicator 18: HIV prevalence among 15-24 year-old pregnant women</i>	1996	1 case	0 case
<i>Indicator 19: Contraceptive prevalence rate</i>	2000	11.8%	<i>To be defined</i>
<i>Indicator 20: Number of children orphaned by HIV/AIDS</i>	1996	4 cases	0
Target 8: Have halted by 2015, and begun to reverse, the incidence of malaria and other major diseases			
<i>Indicator 21: Prevalence and death rates associated with malaria</i>	1975	0	0
<i>Indicator 22: Proportion of population in malaria risk areas using effective malaria prevention and treatment measures</i>	n.a	n.a	n.a.
<i>Indicator 23: Proportion of TB cases detected and cured under DOTS</i>	2000	21.5	10

Elements of Monitoring Capability	Valuation			
	Strong	Fair	Weak but improving	Weak
Policy and strategy response			✓	
Legal framework response				✓
Law enforcement				✓
Financial resources availability				✓
Data collection capability				✓
Quality of the information				✓
Statistical follow up capability			✓	
Statistical analysis capability		✓		
Disaggregation level of data			✓	
Monitoring and evaluation mechanisms				✓
Public awareness			✓	

4. Main Challenges and Recommendations

Specific Action Plans: The existing general strategic documents for the development of the health sector in Albania, GPRS included, need to be translated into more specific action plans, addressing specific issues related to HIV/AIDS and other STIs, giving priority to prevention programs through education and health promotion. Priority measures to be addressed by such action plans include: an HIV/AIDS test, contraception, medical and psychological treatment of infected persons, infected pregnant women, infected orphaned children, health monitoring of returned emigrants, sentinel surveillance, and public education. In order to combat STIs involving HIV/AIDS, quick actions must be followed by the government to target such high-risk groups as drug users and sex workers through information campaigns and by lowering the cost of safer behaviours, updating the existing NAP taking into consideration specific international commitments of the Government⁶⁴. Attention must also be given to other diseases, including malaria, that, while not presently relevant for Albania, might become more problematic in the future.

Capacity Building: There is an urgent need to improve the relevant health information systems, quality of data and its analysis through close collaboration between the different Departments of the MoH, its Statistical Department, the IPH, and NGOs involved in family planning issues. Coordinated WHO, UNFPA, UNICEF and WB support is essential for such actions to be successful. Implementation of the NAP and expansion of DOTS across the country also require additional human and financial resources. These activities would benefit from more systematic commitment by all stakeholders and increased coordination by the MoH.

Unified Analysis and Coordinated Interventions: A large number of government agencies, institutions, local and international NGOs, bilateral and multilateral development organizations and programmes are active in the field of STI prevention. Most of their analyses and interventions are not well co-ordinated. As result, each intervention has often used its own data and approaches, and focused on different selected locations and issues. Due to lack of coordination at the national level, there is a lack of unified analysis and full coverage of the country has not yet been achieved. This applies most directly to the more remote and rural areas where interventions are often needed most.

⁶⁴ Detailed measures and related targets are included in the Declaration of Commitment on HIV/AIDS of the UN Special Session "Global Crisis-Global Action", New York, June 2001.

Public Information and Education: Family planning and related STI prevention measures involve new cultural challenges for Albania. Information about STIs is more limited in rural areas and the suburbs of the cities inhabited by migrants from the same remote, rural areas. As a result, STI issues need to be better addressed through education campaigns aimed particularly at young people and focusing on practical means of prevention, especially in rural areas. Information, education and communication in languages most understood by communities aimed at reducing risk-behavior and encouraging responsible sexual behavior should be considered priority actions for the Government and NGOs. Given the relatively large percentage of people who watch television on a daily basis, more systematic programming of health information is required. Albanian youth are interested in learning about STI risks. There is a constant demand for HIV/AIDS education for all age groups. The peer education program in schools has been well received. More sessions and more in-depth information is now required. Promoting and encouraging the involvement of local communities in making people aware of such diseases should also be considered as part of future interventions.

Goal 7 Environment and sustainable development

Target 9 Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources.

Target 10 Halve, by 2015, the proportion of people without sustainable access to safe drinking water.

Target 11 By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers.

Performance Summary:

Will development goal be reached?
*Possibly – Probably – **Unlikely** – Lack of data*

State of supportive environment:
*Strong – Fair - Weak but improving – **Weak***

1 Status and Trends

Environmental degradation is a serious concern in Albania. For over four decades economic policies were focused on meeting only production targets, without consideration of their environmental impact. As a result, natural resources were seen as “goods-without-owner” and used as if they were in infinite. Changes since 1991 have not led to significant environmental improvements. A number of new challenges have arisen, in addition to inherited problems.

9

Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources.

Institutional and Legal Framework

The Albanian Government has progressively become aware of its important role with respect to environmental issues. For the first time in Albania, a Committee of Environmental Protection (CEP), reporting to the Ministry of Health, was established in 1991 as a regulatory and co-ordination body for environmental legislation and environmental impact assessment. A network of 12 Regional Environmental Agencies was created at prefecture level in 1993, to be in charge of environmental impact assessment. In January 1998, the CEP was transformed into the National Environmental Agency, an independent structure reporting directly to the Council of Ministers. In September 2001, the Government established the country’s first Ministry of Environment (MoEn). There still does not exist, however, a clear understanding of MoEn roles and responsibilities. Key environmental decisions continue to be made beyond MoEn control and communication and cooperation among government institutions remain weak. At local levels, the Regional Environmental Agencies possess weak legislative authority and inadequate resources.

Main Albanian Environmental Laws

Law on Environment Protection, 1993, amended in 1998, under revision
Law on the Forest Service Police, 1992
Law on the Forest Revenue, 1993
Law on City Planning, 1993 and amended in 1998
Law on Plant Protection Service, 1993
Law on the Development of Areas with Tourism Priority, 1993
Law on Fishing and Aquaculture, 1995
Law on Pastures and Meadows, 1995
Law on Protection by Ionic Radiation, 1995
Law on Water Resources, 1996
Law on Water Supply and Sanitation Sector Regulation, 1996
Law on Public Waste Removal, 1996
Law on Adherence to Basel Convention, 1997
Law on Oil and Gas Processing, Transport and Trade, 1999

Albania has introduced new legislation for environmental protection, starting in 1993 when a framework Law on Environmental Protection was adopted that established the basic rules and structures for monitoring, control and licensing. New environmental principles were introduced

in the new Constitution adopted in October 1998, recognizing a “healthy and ecologically suitable environment for the present and future generations” among other Government policies⁶⁵. A number of Government Decisions and Regulations have been developed, as well. The main challenges, however, are not linked to legislation, but to their limited implementation and enforcement. This is due both to a general lack of respect for the law, as well as to the low priority of environmental issues within the Government and society in general. Awareness of environmental preservation and protection is changing only slowly. Practical mechanisms for enforcement are incomplete.

The most important international Conventions and Protocols have been signed and adopted by Albania. There are still, however, at least 11 Protocols and Agreements not yet signed, which are already adopted by most of the other Balkan countries⁶⁶.

Land Area Covered by Forests

According to available statistics⁶⁷, Albania covers a total area of 28,748 km², out of which about 37% are covered by forests, 25% by agricultural land, 15% by pasture and meadows, and 23% by other land and lakes⁶⁸. The total forest area in 2000 was estimated at 0.991 million ha⁶⁹, compared to 1.069 million ha in 1990. This represents a forest cover change in the last ten years of about – 8%, compared to a reported growth of about + 4% from 1980 to 1990⁷⁰. The general volume of standing wood material in forests is estimated at 80 million m³, or about 81 m³/ha. Productive forests in 2000, however, represented 82.86% of the total forest area⁷¹, compared with 87.28% in 1993⁷². This is due to a general tendency of national environmental policies to increase non-productive forest areas. The high forests, which represent about 80% of the standing stock, are managed according to traditional methods with thinning and clear cuts aimed at value production. Regeneration is achieved naturally by leaving seed trees or, when seed trees are not present, through replanting.

Exploitation of Forests, thousands m ³	1997	1998	1999	2000
Construction Timber	383	163	95.3	77.5
Fire Wood	322	89	213.4	146.4
Total	705	252	308.7	223.9

Source: Operational Data of GDFP

The general transition process in Albania has had a negative affected on the forestry sector. Over last ten years, forests have been over-utilized. Financial resources for a good management have been limited. There has been insufficient control over such illegal activities as woodcutting without criteria, overgrazing, and occupation of forest and pasture lands. The greatest damage to forests occurred in 1997, which coincides with a period of general political destabilization and lack of public order. According to official data, the annual capacity of forest exploitation significantly decreased after 1997. This data, however, does not capture much of the illegal logging that has continued to occur driven by commercial interests and poverty, especially in more rural areas.

⁶⁵ Albanian Constitution, Tirana, October 21, 1998

⁶⁶ European Commission, The Regional Environmental Reconstruction Program for South Eastern Europe, Hungary, September 2001.

⁶⁷ Most of the data are operational because the last forest fund inventory for Albania was held in 1985.

⁶⁸ IDA, Preparation of a Forest Cover Map and Reconnaissance Forest Inventory of Albania, May 1995.

⁶⁹ FAO, Global Forest Resources Assessment, Rome, 2001.

⁷⁰ INSTAT, Statistical Yearbook of Albania, Tirana, 1991.

⁷¹ MoE, State of Environment Report 1999-2000, Tirana, February 2002

⁷² FAO and WB, Integrated Forest Management Project, Tirana, February 1994.

Total energy sources in Albania in 1999⁷³ comprised some 1,808 Ktoe⁷⁴. Of this fuel wood was the important part at about 256 Ktoe, followed by hydro-energy and crude oil. In terms of energy consumption, crude oil and petroleum products are more dominant, followed by electricity and fuel wood. Total energy consumption for 1999 corresponds to Albanian GDP of 3,640.5 million USD, meaning that for every dollar GDP there is 2.01 Ktoe energy consumption. Consumption equals roughly 0.5 Toe per capita. Wood is the predominant fuel for households needs, covering about 68% of rural household energy needs for heating and cooking during the winter and about 53% during the summer. Fuel wood satisfies 79% of the total heating needs of rural households. The average annual consumption of fuel wood per rural households was estimated to be 4.3 m³ in 2000. Based on this estimation, 1.6 million m³ of fuel wood were consumed by rural households during 2000⁷⁵. Opportunities to control such consumption rates are limited. Fire control is weak, as well. Forest and pasture fires have increased over past several years. Burned forest surface in 2000 was about 10 times greater than figures reported in 1990.

Forests and Pasture Fires

Description	1983-1992* (average per year)	1993-1996** (average per year)	1997	1998	1999	2000
Number of cases	-	406	840	601	628	913
Forest cover surface (ha)	-	-	7200	3704	4900	1230
Burned forest surface (ha)	345	500	2900	680	689	3676
Burned pastures (ha)	-	-	7000	3283	2910	828

Source: State of Environment Report 1997-1998 and 1999-2000 (*WB, **FAO).

Public investment in reforestation and rehabilitation has increased significantly recently. Total investments in 2000 were about 2.6 times more than in 1999. As result, reforested and rehabilitated surfaces increased over the same period by about 3 and 3.3 times respectively.

The ongoing Communal Forestry and Pasture Management Project, part of the WFP, WB, FAO, Italian Government and GDFP Albanian Forestry joint-Project, aims to increase the participation of workers and villagers in communal forestry activities and to support the transfer of forests and pasture user rights to communes. The project has increased the interest and awareness of the local governments and villagers to protect forests and pastures, rehabilitated 3,300 ha of thinning forest, built some 5,000 m³ of erosion control works, and increased forest area by 250 ha.

The number of seedlings planted increased 3.2 times⁷⁶. Despite this commitment and increased government attention to the forest sector, total financing is still largely insufficient to achieve the necessary objectives in this sector.

Protected Areas

Relative to its size, Albania contains a significant richness of biological diversity. It plays host to 30% of European plant species and 42% of European mammals⁷⁷. A variety of wetlands, lagoons and large lakes also provides critical winter habitat for many migratory birds.

A network system of protected areas in accordance with the International Union on Conservation of Nature was established for the first time in 1992. The total surface of protected areas has increased significantly over the last decade. In 2000, for example, protected areas represented about 5.8% of total country surface. This compares to 3.79% of country surface in 1998.

⁷³ National Energy Agency, Tirana, September 2001.

⁷⁴ Ktoe = Kilo Ton of Oil equivalent

⁷⁵ GDFP, Illegal Logging Independent Study, Tirana, October 2001.

⁷⁶ MoE, State of Environment Report 1999-2000, Tirana, February 2002

⁷⁷ UNEP, Post-Conflict Environmental Assessment in Albania, Geneva, November 2000.

Existing System of Protected Areas

Categories	Surface by years in ha		
	1998	1999	2000
Strictly protected areas	14,500	14,500	14,500
National parks	52,860	53,940	56,440
Nature Monuments	4,360	4,650	4,700
Managed areas	42,960	42,948	42,898
Protected landscapes	29,550	29,873	29,873
Protected resource areas	18,245	18,200	18,200
Total	107,455	164,111	166,611

Source: State of the Environment Report 1997-1998 and 199-2000.

Although progress has been made, the size of current protected areas remains insufficient to ensure effective conservation of the country's biological diversity. In addition, the biological integrity of existing protected areas has been compromised due to illegal hunting, fishing and wood collection. Monitoring and enforcement is inadequate. Comprehensive management plans do not exist.

Atmospheric Pollution

The quality of Albania's air has not been fully assessed. By law, urban centers must monitor sulfur dioxide (SO₂) and nitrogen oxide (NO_x). In practice, however, monitoring across the country is neither consistent nor comprehensive.

In the past, major sources of air pollution included industries involved with chromium smelting, copper, cast-iron and steel metallurgy, and thermo-electric production. Since 1992, however, many of these industries have closed. At

present, major sources of air pollution include oil extraction and refining, domestic heating, cement production and unregulated garbage burning. Transportation is an additional contributor to air pollution. Over the last decade there has been a rapid increase in the number of vehicles in Albania⁷⁸. Some 885 of these vehicles have been manufactured before 1993 and about 78% consume diesel fuel. This results in a significant increase in air pollution, particularly in large urban areas where the number of cars is greatest.

Emissions of direct green house gases into the atmosphere were calculated for the first time in Albania in 1999 according to IPCC standards taking 1994 as a base-line year. According to these calculations, CO₂ is the main green house gas emitted in Albania.

Emission of green house gases in 1994

Gas	Emission in CO ₂ equivalent	%
CO ₂	4,611.33	65.33
CH ₄	2,152.92	30.49
N ₂ O	295.68	4.18

Source: State of Environment Report 1999-2000

Conservation of Wetland and Coastal Ecosystems in the Mediterranean Region is a component of a Mediterranean regional initiative involving Albania, Egypt, Lebanon, Morocco, the Palestinian Authority and Tunisia financed through UNDP by GEF and the Albanian Government. The overall objective of the 5-year project is to ensure sustainable management and biological diversity of coastal areas and wetlands in five project sites in Albania through the development of adequate legal and regulatory frameworks, implementation of various priority actions, capacity-building, and development of a regional network. During its first 3 years, the project has:

- Improved the environmental legislative framework;
- Prepared a site diagnostic report, which identifies eco-biological values and data necessary for effective monitoring and effective biological conservation;
- Designed a national framework for training needs in different fields of natural resources management;
- Increased awareness of national and local public stakeholders, local authorities and central government by publishing a newsletter, conducting round tables and seminars at the local level, and preparing environmental spots for local television programming;
- Implemented such priority actions as rehabilitation of the Soda Channel in Narta Lagoon, rehabilitation and cleaning up of the Soda Forest Area in Vbra, and tree planting in Orkum i.

The project also calls for formulation of a National Wetlands Strategy.

⁷⁸ The total number of vehicles in 2000 was about 10 times more than in 1990 (INSTAT).

About 63% of CO₂ emissions are attributed to the energy and transport sector. Another 33% is produced by forests and changes in land use. In terms of CO₂ equivalents, about 44% of CO₂ emissions are from the energy and transport sectors, with some 27% from agriculture.

Sector contribution to CO₂ emissions, Gg-1994

Sector	CO ₂	CH ₄	N ₂ O	CO ₂ Equivalent
Energy and transport	2,902.94	8.16	0.099	3,107.03
Industrial processing	198.71	0.00	0.036	209.01
Agriculture	0.00	79.74	0.666	1915.06
Forest and land use	1,509.68	0.68	0.005	1525.27
Landfill and sewerage	0.00	13.94	0.152	339.65
Solvents	0.00	0.00	0.000	0.00
Total	4,611.33	102.52	0.958	7,061.45

Source: State of Environment Report 1999-2000

Because of its low levels of CO₂ emissions, Albania has no direct obligation to implement immediate reduction measures. Nonetheless, the MoEn conducted a reduction scenario in 2002 using the Greenhouse Gas Costing Model. A number of measures related to the introduction of new technologies, especially in energy and transport sectors, have been recommended in accordance with this scenario for the 2002-2020 period.

Lack of consistent and comprehensive monitoring using standard methodologies to calculate gaseous releases in the air represents an important shortcoming in the evaluation of atmospheric pollution caused by SO₂ and NO_x. According to official data, however, neither the 24-hour limit values, nor the limit values for a given moment are exceeded in Albania. Average monthly SO₂ values reported in 2000 are less than 35 microgramm/m³, with NO_x values less than 55 microgramm/m³. The norm is 150 microgramm/m³ during a 24-hour period, and 500 microgramm/m³ peak value for any given moment. Despite these relatively low levels, however, NO_x and SO₂ values doubled between 1998 and 2000, and between 1996 and 2000, respectively⁷⁹.

The Global Environmental Facility Small Grants Programme (GEF/SGP), funded by GEF and implemented by UNOPS in cooperation with UNDP as an executing agency, offers financial support to environmental NGO's and CBO's for environmental issues in Albania in order to achieve global environmental benefits through community-level actions to conserve biodiversity, protect international waters and reduce the likelihood of adverse climate change. About 50 projects, 26 of which are on-going, were financed under this program. Clean and Green is an UNDP project providing support to the municipalities on solid waste management and cleaning of illegal dump-sites, promoting also employment of unskilled workers.

- 10 *Halve, by 2015, the proportion of people without sustainable access to safe drinking water.*

Basic Household Infrastructure

Some 63% of Albanians live in their own house, while 95% of all houses are privatized and 80% of people living in their own house are located in areas of fewer than 10,000 inhabitants. Almost two-thirds of private houses have gardens. The average family has two rooms to live in with an average living space of 62m² or 14.6m² per person with two people sharing a room⁸⁰.

⁷⁹ MoE, State of Environment Report 1999-2000, Tirana, February 2002.

⁸⁰ UNDP, National Human Development Report 2000, Tirana, March 2001.

Distribution of households by running water supply and zones

Water Supply	Zones with more than 10,000 inhabitants		Zones with less than 10,000 inhabitants		Country	
	Total	%	Total	%	Total	%
Yes, permanently	34,757	4.7	86,094	11.7	120,851	16.5
Yes, with schedule	199,772	27.2	138,311	18.9	338,083	46.1
No	13,748	1.9	260,577	35.5	274,325	37.4
Total	248,277	33.9	484,982	66.1	733,259	100.0

Source: Results of Household Living Condition Survey-1998.

In Albania 96.7% of the population has access to safe drinking water⁸¹ from the following types of supply: piped water, public tap, bore-hole/tube-well, protected well, and protected spring or rainwater. About 34.7% of households, which represents about one-third of the population, did not have access to running water supply in 1998⁸². A majority of this population lives in zones with less than 10,000 inhabitants. Cuts of water supplies very frequent. Families in urban areas often have running water for only a few hours a day. As a result, one family out of two is forced to buy a water deposit. These deposits, however, are supplied with water by means of electrical pumps. Given frequent power outages, even with such deposits lack of water is still a problem.

Water quality needs to be improved, especially the quality of water supplied by wells. A study of household wells has shown that 73% are contaminated with high bacteria levels⁸³. Lack of proper disinfecting with hiplochlorite nitrate and calcium represents another challenge. In rural areas, disinfecting is usually non-existent. When chlorinating systems do exist, they tend to be manual models that do not ensure the consistent required dosages of disinfecting agents.

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By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers.

Some 90% of the population of Albania is living in households with sanitary means of extra disposal, including flush toilets connected to sewage systems or septic tanks, other flush toilets, improved pit latrines, and traditional pit latrines. More than 14% of the rural population uses open pits as toilet facilities. Roughly 55% of households do not have a WC inside the house.

Percentage of population using sanitary means of extra disposal

Type of toilet facility	Urban area	Rural area	Total
Flush sewerage system	94.8	36.6	58.0
Pour flush latrine	3.3	38.6	25.6
Improved pit latrines	0.4	2.8	1.9
Traditional pit latrine	0.4	6.5	4.3
Open pit	0.8	14.3	9.3
Missing	0.4	1.2	0.9
Total	100.0	100.0	100.0

The water sector faces significant threats. Rampant construction, urban migration, and illegal connections are exacerbating the system's problems, particularly in city suburbs. In addition, infiltration from parallel sewer lines causes periodic cross-contamination of the supply. A study of the pipes in the city of Tirana found about 24,000 points of infiltration. There are only three drinking water plants in the country. As revealed by data from epidemiological studies, diarrhea is transmitted primarily through contaminated water, accounting for about 56% of cases. By comparison, some 30% of diarrhea cases areas are caused by food transmission¹.

⁸¹ UNICEF, Multiple Indicator Cluster Survey Report, Tirana, December 2000.

⁸² INSTAT, Results of Household Living Condition Survey-1998, Tirana, July 2001.

⁸³ UNICEF, End Decade Assessment Review, January 2001

⁸⁴ UNICEF, End Decade Assessment Review, January 2001.

In 1997, WHO drinking water quality standards were updated. Monitoring is now conducted in Albania against fifteen physical and chemical parameters. Pesticides, heavy metals, persistent organic pollutants and hydrocarbons, however, are not monitored systematically. Public investment committed during the last decade in urban zones for the water sector (water supply and sewerage) totals about 390 MUSD⁸⁵, from which the Albanian Government finances about 30%. This represents about the half of total estimated funds needed to address water sector problems.

2. Relevant Policy Documents

National Environment Action Plan (NEAP): The NEAP was adopted in 1994 and updated in 2001. It is considered the main official document identifying government policies for environmental issues. The NEAP identifies the need to address first the economic, legal and institutional framework governing environmental management in Albania. It defines tasks for Ministries and other institutions whose activity has an impact on the environment. These include a range of organizational, administrative, legal and technical measures, such as: the establishment of a legal framework, introduction of economic incentives, prevention of erosion and soil rehabilitation, reforestation, reductions in industrial and urban pollution, good management of natural resources, investments for environment, and the development of information and public awareness strategies.

Government Strategy for Illegal Logging Reduction: This Strategy was prepared by General Directorate of Forestry and Pastures with the support of FAO technical assistance. It has been approved by the Ministry of Agriculture and Food. It represents a legal instrument for developing and implementing an action plan to reduce illegal exploitation of national forest resources. Implementation of the strategy began with the establishment of a high level Inter-Ministerial Task Force for Forest Resource Protection in November 2000 comprised of representatives of eleven related government institutions.

National Water Strategy: This Strategy was drafted in 1996. It defines short, medium and long-term priorities for sustainable water management, as well as necessary institutional structures for NEAP implementation in the water sector. The Government has not yet adopted this strategy.

A ***National Waste Strategy*** was adopted in 1996. The Strategy sets out short and long-term objectives for solid waste management. The short-term strategy is to develop a landfill system for municipal waste throughout the country over the next 5-10 years. Over the long-term, more sophisticated methods of waste management are to be developed. Waste separation, recycling, waste reduction and composing policies are also to be developed over the long-term.

A ***National Biodiversity Strategy and Action Plan*** was adopted in 2000 and defines priorities and necessary changes for implementation of the Conventions on Biological Diversity. This strategy would increase the protected areas to approximately 15 percent of Albanian's territory. It would also give priority to local scientific research in biodiversity, which is currently in limited supply, and the creation of action plans for ecosystems, habitats and species. This strategy reflects the obligations quite well, yet the Action Plan is not very detailed and lack of clear cost plan.

A ***National Environment Health Action Plan*** was adopted in 1999. The Plan identifies specific objectives for: the improvement of environmental health issue information systems; assessment of environmental hazards related to health; completion of effective control mechanism; establishment of economic and financial instruments to promote the improvement of

⁸⁵MoECT, External Assistance by Sectors, January 2002

environmental health; strengthening of environmental health services; and increasing public information and awareness

Targets and Indicators	Base year	Starting value	Final target
3. Benchmarks and Monitoring Capabilities			
Target 9: Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources.			
Indicator 25: <i>Proportion of land area covered by forest</i>	1990	37 %	<i>To be defined</i>
Indicator 26: <i>Land area protected to maintain biological diversity</i>	1998	107,455 ha	<i>To be defined</i>
Indicator 27: <i>GDP per unit of energy use (as proxy for energy efficiency)</i>	2002	<i>To be defined</i>	<i>To be defined</i>
Indicator 28: <i>Carbon dioxide emissions (per capita)</i>	1994	4,611.33 Gg	<i>To be defined</i>
Target 10: Halve, by 2015, the proportion of people without sustainable access to safe drinking water			
Indicator 29: <i>Proportion of population with sustainable access to an improved water source</i>	1998	65.3%	83%
Target 11: By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers			
Indicator 30: <i>Proportion of people with access to improved sanitation</i>	1998	89.8	94.7%

Elements of Monitoring Capability	Valuation			
	Strong	Fair	Weak but improving	Weak
Policy and strategy response		✓		
Legal framework response		✓		
Law enforcement				✓
Financial resources availability				✓
Data collection capability				✓
Quality of the information				✓
Statistical follow up capability			✓	
Statistical analysis capability		✓		
Disaggregation level of data				✓
Monitoring and evaluation mechanisms				✓
Public awareness				✓

4. Main Challenges and Recommendations

Strengthening institutions: Among the many environmental problems facing Albanian authorities and decision makers, strengthening of institutions and law enforcement are perhaps the most critical. There is a need to strengthen policy level functions, as well as to establish appropriate levels of authority over all activities with an environmental impact. A clear attribution of the responsibilities of all involved ministries and government institutions, and their efficient and formalized coordination also represent short-term priorities. More responsibility, implementation power and resources should be allocated to local levels, especially related for such environmental issues as waste management, clean drinking water, air pollution, waste water, and environmental protection. The establishment of a credible environmental monitoring system and an effective inspectorate also represent important long-term national priority measures to be undertaken.

Developing a legal framework: The existing legal framework still needs to be developed further. This is especially important with respect to improvements of legislation on urban air quality control, protected areas, biodiversity protection, definitions for air pollution standards. There is

a need also to improve the existing regulatory framework for licensing systems, simplification of environmental enforcement procedures, and the strengthening of mandatory inspection tasks.

Sector strategies formulation: Although considerable steps have already been undertaken in developing sector policies and strategies, additional efforts are needed to prepare and adopt strategic measures and action plans. These efforts must address such pressing issues as: the monitoring of air and water quality, reduction of CO₂ emissions, management of water resources, rural water supply strategies, registration of water resources, preparation of a forest cover map and reconnaissance forest inventory, fair forests protection, and management of protected areas. In addition, it is necessary to identify final environmental targets across all indicators and incorporate their partial values into existing national strategies in order to ensure regular policy monitoring and revision.

Financial Resources: Successful implementation of strategic measures and action plans is closely related to the availability of financial resources, which at present are limited. The total budget for implementation of the NEAP is estimated at \$250 million. In 2002, state financing for environmental projects was about \$0.5 million, or some 3 times more than in 1999. The estimated total international donor commitment for environmental projects for the period 2001-2005 is about \$32.2 million⁸⁶. As such, implementation of the majority of foreseen measures is largely dependent on international financing. In order to fill the existing gap in financial resources, a greater commitment by the government is needed to sensitize international donors to this topic, and to promote private sector contributions, as well as to increase its own share of financial contributions.

Public Awareness: Government institutions, non-governmental organizations and the private sector must do more to promote public awareness and understanding of environmental issues. Government institutions should promote legal instruments and other measures to ensure public participation in decision-making on environmental issues, such increasing public access to information.

⁸⁶ Ministry of Economy, External Assistance by Sector, Tirana, January 2002.

STATUS OF MDG FOLLOW-UP AND REPORTING

Low Knowledge of MDGs

The Albanian public administration, including its decision-making levels, is in general not familiar with the MDGs, other international Conventions to which Albania is a state party, or most UN International Conferences and Summits held during the 1990s. Their knowledge is incomplete and sporadic. There are several factors contributing to this information problem:

- (i) The Albanian Constitution recognizes that ratified international instruments prevail in the event of conflicts with any national laws, which represents an important step in efforts to comply with international conventions. Such general norms, however, require additional legislation providing for official translation of international agreements into the Albanian language, as well as for their wide national dissemination. During the last decade, for most Conventions to which Albania is a state party, only the ratification instrument has been published without the text of the document published in the Official Journal. From this it can be assumed that the knowledge of the courts, national officials, members of parliament, mass media and the public at large is limited.
- (ii) The political Declarations of various UN Summits and Conferences that do not require Parliamentary approval have often remained the property of individuals. There does not exist any official procedure for governmental institutions to publish, distribute or disseminate such documents to all relevant institutions. Although mass media also represents an important tool that has been used sporadically to provide simple information on Summits, its value is limited.
- (iii) Most of the Conventions require inputs from different national institutions and organizations that themselves are lacking adequate information systems and expertise. Conventions containing multi-sectoral obligations require coordinating mechanisms among different Government institutions and other stakeholders; however, most of these mechanisms are not yet in place. This situation is further aggravated by weak institutional memory within public administration systems.

As a result, there is no comprehensive national database of all Conventions and Declarations to which Albania is party. There are no administrative mechanisms to inform different levels of the public administration about its formal obligations to these agreements. No reporting has been made for any of the ratified Conventions or for the MDGs starting in 2002. Legislative gaps must be filled and new, more complete regulatory framework must be prepared and approved.

Relevance of MDG Targets and Indicators

This report has noted that some MDG indicators are less relevant to the Albanian context. In other instances, it has been difficult to establish benchmarks due to lack of information. It is imperative for all relevant indicators to be systematically reviewed and adjusted so that they remain accurate and accountable. Effective monitoring systems must be established. This report represents only a preliminary effort to define benchmarks and analyze indicators' status and relevance.

The identification of indicators at the national level represents an important tool in efforts to monitor country progress, identify efficient interventions, and prioritize financial resources. Nevertheless, lack of indicators at local levels, especially those related to poverty, health, and

education, disguises regional disparities that are of most significance for many issues addressed by the MDGs, Conventions and Summits. As a result, building institutional structures and sustainable capacities at the local level to collect, analyze, monitor and disseminate data for awareness and planning purposes is essential. Disaggregation of information and establishment of specific targets at regional and local levels will assist efforts to better prioritize interventions and promote the preparation of regional development strategies currently lacking in Albania. This represents an important factor with respect to reducing the time and cost of fulfilling the MDGs.

Integrating MDGs into Development Strategies

It is important that the MDGs become truly national goals and are used to increase the coherence and consistency of national policies and programs. MDG issues should be integrated into the formulation, implementation, monitoring and evaluation of all policies and programs relating to issues of sustainable development at national and local levels. Current and future development strategies must realistically reflect the short-, medium- and long-term implications of the MDG targets and indicators, and their consequences for the growth and development of the country.

In this respect a positive sign was shown during the drafting process of the National Strategy for Socio-Economic Development⁸⁷ that harmonized 2002-2004 development priorities with some of the long-term targets of the MDG indicators, especially for health and education. Other indicators, especially those involving malnutrition, underweight children, gender equality, and empowerment of women, also need to be translated into relative targets and measures within this strategy and other national strategies. In addition, more specific action plans must be prepared and related financial requirements identified so that additional funds can be mobilized to support Government activities. In this way, international and civil society organizations can better plan and coordinate complementary interventions, resources and expertise. Completion of a general cost evaluation analysis would be useful to provide more accurate answers to financial ability of Albania to reach the MDG, identify funding gaps and better prioritize proposals for international financial support.

Improved Data Collection and Analysis

Comprehensive, reliable, timely, nationally relevant and internationally comparable data on MDG indicators is not currently available in Albania. There is at present no single source of information that could serve for all MDG indicators. Information is spread across several different official national sources and other involved development organizations for various indicators. As such, the current system is not able to monitor the MDGs and requires systemic, fundamental improvements.

While there has been marked progress, the current status of the information system, especially in the health and environment sectors, has many limitations that represent significant obstacles in identifying priority actions and monitoring progress for key MDGs indicators. Data collection methodologies must be updated. Clear reporting responsibilities of the different Government line ministries and other institutions involved must be assigned. The quality of baseline data must be improved. The establishment of Management Information Systems in the MoE, MoH, MoEn, Ministries of Finance and Ministry of Local Government represents an urgent priority.

Existing standards for data reporting should be reviewed taking into consideration MDG information requirements. Quantitative and qualitative data needs to be regularly analyzed to assess MDG progress. Decision-makers, Government institutions, individuals, and other

⁸⁷ The GPRS – also known as PRSPs in many other countries.

stakeholders should have complete access, on a no-cost basis, to the data and findings, including those of other countries and international agencies. Interaction between data-users and data-providers should be promoted in order to respond better to the needs of policy-makers and beneficiaries.

There is a need to establish an MDG data collection and monitoring unit. The unit would collect all possible information from both officially and non-official sources. This unit also be responsible for setting up a national MDG database providing baseline data used to measure MDG progress and put under the disposal of the MDG reporting structure. Such a unit would be placed most practically within or as a part of the existing GPRS (PRSP) structure. Because the GPRS monitoring unit is not yet operating at its full planned capacity, and the MDG first reporting process is to commence this year, a temporary unit should be established until the necessary institutional conditions are in place.

Follow-up and Reporting

Follow-up to MDG implementation must be viewed as part of an integrated effort to implement other national and sector strategies based on participatory stakeholder processes. MDG-specific follow-up and reporting, however, are nonetheless also necessary in order to track progress, strengthen coordination among stakeholders, help focus the national debate on specific development priorities, and thus better enable the country to fulfill all its international commitments.

The Government structure in charge of follow-up and reporting on the implementation of Conventions is presumed to be the existing UN Department in the Ministry of Foreign Affairs in cooperation with all related line Ministries. An inter-ministerial Task Force was established to assist the UN Department in May 2000 by Order of the Prime Minister. The Task Force is chaired by a representative from the Ministry of Foreign Affairs, with the participation of representatives from different ministries and Government institutions. To date, however, no reports have been submitted.

Previous efforts to prepare a report on human rights treaties, supported by UNDP technical assistance and training for Task Force members, was not finalized. A draft report on CEDAW⁸⁸ was prepared in 2001 by the Committee for Equal Opportunities and has recently been submitted to the Ministry of Foreign Affairs in accordance with Government reporting procedures to the General Secretary of United Nations. An NGO SHADOW report on CEDAW⁸⁹ was also finalized in March 2002 by two local women organizations supported by UNFPA that reviews the status of women's rights in Albania.

Strong political commitment to improve follow-up and reporting process was demonstrated clearly by the Ministry of Foreign Affairs during the preparation of this report. This renewed commitment should be supported and reflected in a series of concrete measures:

- (i) Increase the capacity of UN Department staff, which at present has limited human resources and insufficient technical capabilities to coordinate the follow-up and reporting process;
- (ii) Establish a data base of all Conventions to which Albania is party and identify the Ministries and other Government institutions involved;

⁸⁸ CEO, Draft Report on CEDAW, 2001, Tirana Convention on the Elimination of all forms of Discrimination Against Women

⁸⁹ AFPA, IFAW, UNFPA, NGO Shadow Report on CEDAW, Tirana 2001

- (iii) Improve the existing legal framework on follow-up to and reporting on international Treaties and Agreements, enhancing the authority of the Ministry of Foreign Affairs in this process by clarifying its role, authority and responsibilities, as well as identifying the corresponding responsibility of other line Ministries.
- (iv) Prepare a Government Decree for the establishment of an inter-ministerial Task Force to coordinate the reporting process, including motivation incentives for its members. The Decree should specify relations between the Task Force and proposed MDG Unit.
- (v) Advocate for MDG focal points in Parliament and the Office of the Prime Minister.

The meetings of the Task Force should be open to representatives of the UN Agencies, Bretton Woods Institutions and civil society organizations. It is also important to promote external follow-up and reporting systems to analyze MDG progress in parallel to the work of the Government. This will allow for more transparent analyses and will encourage public debate on MDG progress. These efforts would be supported by preparation of draft thematic reports for specific goals and targets.

Information Strategy on MDGs

Greater public knowledge, understanding and commitment at all levels are vital to the achievement of the MDGs. A coordinated strategic approach to information, education and communication should be adopted in order to maximize the impact of various information activities, both modern and traditional, which may be undertaken by various actors to cover a range of audiences. The overall objective of such a campaign is not only to transmit simple messages needed for advocacy, but also to promote more active participation by the public in the implementation and monitoring of MDG policies and their results. These efforts require the following specific actions:

- (i) Increase informedness of public administration on a regular basis at all its levels in order to: raise its awareness on sector targets and indicators, involve it during MDG follow-up and the implementation, and integrate MDGs further into other sector strategies. In this way, policy-makers in particular will be in a better position to take decisions involving all MDG targets.
- (ii) Provide public education in both urban and rural areas in order to increase awareness of general targets to be fulfilled by Albania, and to increase levels of accountability, political commitment, and implementation results achieved by Government institutions.
- (iii) Increase media education through specific training programs in order to: establish the necessary capacity for transparent monitoring of MDG progress, sensitize Government institutions, and open national debates on specific development priorities and actions.
- (iv) Promote increased electronic network discussion and information in order to facilitate communication between MDG stakeholders and encourage participation in MDGs debates.

Partnerships with the Non-Governmental Sector

NGOs in Albania are increasingly making important contributions to areas related to the MDGs, especially to education, gender equality, family planning, combating HIV/AIDS, and environmental issues. They are often recognized for their innovative and responsive program designs and implementation, including grass-roots participation. Nevertheless, many NGOs also need to be sensitized to the MDGs and provided justification to include the MDGs as part of their own program goals. Government institutions should facilitate the contribution of NGOs in efforts to achieve MDG targets by promoting their involvement in their decision-making processes and policy implementation. NGOs could also offer parallel, independent monitoring and evaluation of MDG progress. Creation of a special Civil Society forum for MDGs would represent a useful initiative to increase awareness and to promote the debate on MDG-related issues, as well as to advocate transparency for the use of external aid in a pro-poor manner.

Adopting a Sub-Regional Approach

The EU Stabilization and Association process and Stability Pact initiatives represent a common set of challenges for many Balkan countries. Some progress has been made over the past several years as part of these and other development frameworks to increase levels of communication between governmental institutions, civil society, and the private sector. This work has also involved promotion of a conceptual framework of integration, in positive contrast to the culture of division that many countries in the past have demonstrated. Although each country is faced by its own unique set of development challenges, at the same time, many of these countries also are striving to achieve several common development objectives. In this context, establishment of an MDG sub-regional forum could be useful to promote the exchange of experiences between countries and to help foster increased dialogue between experts and civil society representatives.

Coordination of Interventions

Better coordination between all UN Agencies and Bretton Woods Institutions in Albania is needed to support Albanian efforts to achieve MDGs targets. In spite of the common objectives of many projects, international interventions in some cases are fragmented and burdened by a more short-term assistance approach. Some project offices have a limited mandate that prevents their coordination with other programs on a long-term strategic level. MDG support requires not only day-to-day coordination of activities, but also a more long-term strategic coordination. The latest Common Country Assessment⁹⁰ can be used to improve cooperation and to unify the vision of UN and other international agencies. A donor mechanism to coordinate interventions and discuss MDG progress on a regular basis should be established to further support Albanian MDG activities.

Specific technical support is also needed to implement all recommendations mentioned above, as well as others that may arise during future MDG and Convention follow-up and reporting. Technical assistance is required particularly in efforts to: identify indicators at national and sub-national levels, desegregate indicators, improve data collection and analysis methodologies and systems, establish a database of Conventions and Declarations, support the UN Department in the Ministry of Foreign Affairs and related Task Forces, promote NGOs to contribute to MDG issues, promote forums of dialogue at country and sub-regional level, and prepare and implement a comprehensive public information and awareness strategy. The role of the UNDP in the above issues could be of a crucial importance.

⁹⁰ UN Country Team and Government of Albania in collaboration with The Albanian Center for Economic Research - The Common Country Assessment (under publication).

ALBANIA AT A GLANCE

Located in the Balkan Peninsula, Albania covers 28,748 square kilometers. Its population of about 3 million is young compared with other European countries, with an average age of 28.6 years. The population growth rate is estimated at 0.9% per year. Life expectancy is 76.4 years for women and 71.7 years for men. About 57.9% of the population lives in rural areas. The country is divided into 12 regions, which in turn are divided into 36 districts, 65 municipalities and 309 communes.

After the Second World War, Albania became an isolated totalitarian state. The country opened up in the early 1990s, moving towards more democratic forms of governance and a market driven economy. During the same period, it has experienced the highest levels of migration and emigration of its population over the last century. In the early years of its transition, Albania made many achievements included major stabilization efforts and wide-ranging structural reforms. Almost all agricultural land and small enterprises were privatized, almost all price controls were abolished, the exchange rate was unified and floated, and trade and payments regimes were liberalized. These economic reforms were supported by massive external aid, which together with large inflows of private transfers from abroad, helped stabilize the exchange rate, reduce the current account deficit, and rebuild foreign exchange reserves. Despite these advances, efforts to develop a state with the capacity necessary to govern effectively faced many challenges, including fragile national stability.

A major state crisis broke out in Albania in early 1997, when the collapse of financial pyramid schemes led to social unrest and a burst of violence, which quickly turned into armed insurrection. This crisis interrupted the process of economic transition and recovery and eroded most of the transition achievements. Albania was forced to restart its recovery and growth over the last three years. Gross Domestic Production (GDP) growth now is on average about 7% per year, with the same level of increase expected for the next several years. The construction and services sectors contribute most to this growth. Inflation is low, at a level of about 2-4% per year. The currency is stable and budgetary revenues are growing, accompanied by increasing public investment.

Despite the fact that economic growth has been steady, it has not led to a substantial improvement in the lives of Albanians. Albania continues to be one of the poorest countries in Europe with high and growing income disparities. Albanians remain poor, with limited income and inadequate living conditions. Poverty has mostly affected rural areas, especially the remote regions of the country. The progress of the country continues to be largely dependent on flows of external assistance.

The transition of Albania to a democracy and market driven economy has been more difficult than initially expected by Albanians. Nevertheless, the country is working hard to build a modern state and improve the situation caused by both the legacy of the past regime and other internal developments, as well as a general lack of stability in the Balkan region over the past ten years. Albania has done much to support transition reforms and consider European integration its major long-term objective. In 2001 Albania joined the World Trade Organization, marking an important step towards the institutionalization of the country's trade relations. Negotiations for an Association and Stabilization Agreement are expected to start soon. The main medium-term development objectives of the country are included in a National Strategy for Socio-Economic Development launched in November 2001, also known as the Growth and Poverty Reduction Strategy (GPRS), and serving as the central planning document of the Albanian Government.

MDGS AND GLOBAL CONFERENCES AND CONVENTIONS

No.	GLOBAL CONFERENCES AND CONVENTIONS	MILLENNIUM DEVELOPMENT GOALS					
		1 Eradicate poverty and hunger	2 Universal primary education	3 Gender equality and empower women	4 Reduce child mortality	5 Improve maternal health	6 HIV/AIDS, malaria and other diseases
1	International Convention on Economic, Social and Cultural Rights, Dec. 1966	✓	✓	✓			
2	International Covenant on Civil and Political Rights, Dec. 1966	✓		✓			
3	Convention on the Elimination of all forms of discrimination against women, Dec. 1979		✓	✓		✓	
4	World Summit for Children, New York 1990	✓	✓		✓	✓	
5	World Conference on Education for All, Jomtien 1990	✓	✓		✓		
6	International Conference on Nutrition, Rome 1992	✓			✓		✓
7	UN Conference on Environment and Development, Rio De Janeiro, 1992						
8	The World Conference on Human Rights, Vienna 1993	✓		✓		✓	
9	The International Conference on Population and Development, Cairo 1994	✓	✓	✓	✓	✓	✓
10	International Convention on Elimination of All forms of Racial Discrimination		✓	✓			
11	World Summit for Social Development, Copenhagen, 1995	✓	✓	✓			
12	World Conference on Women, Beijing 1995		✓	✓		✓	
13	World Food Summit, Rome, 1996	✓					
14	UN Conference on Human Settlements, Istanbul 1996						
15	World Conference on Ministers responsible for Youth, Lisbon 1998	✓	✓	✓			
16	Declaration on the guiding principles of Drug Demand Reduction	✓					✓

Annex 3

SUMMARY OF RELATED INTERNATIONAL CONVENTIONS AND DECLARATIONS

International Convention on Economic, Social and Cultural Rights

The International Convention on Economic, Social and Cultural rights was adopted and opened for signature and ratification on December 16, 1966 and entered into force on January 3, 1976. The states parties to the Convention and those that have ratified it committed to promoting realization of the self-determination of people through a free determination of their political status and free pursuit of their economic, social and cultural development. They also undertook to ensure the recognition of the right of all to an adequate standard of living, the right of everyone to be free from hunger, and the right to social security, education, and employment.

To achieve these goals, the State Parties agreed to implement, individually and through international cooperation, several measures, including specific programs. As a follow-up process they were to submit reports on measures adopted and progress made. The reports were to be submitted in stages according to the program established by the Economic and Social Council and indicate factors and difficulties affecting the degree of fulfillment of obligations under the Convention.

International Convention on Civil and Political Rights

The International Convention on Civil and Political Rights was adopted by the General Assembly on December 16, 1966 and came into effect March 23, 1976. Its state parties also adopted the Optional Protocol to this Convention. The Second Optional Protocol to this Convention to abolish the death penalty was adopted and proclaimed by the General Assembly on December 15, 1989.

Each state party to the Convention and its Protocols undertook to respect and ensure for all individuals within its territory and subject to its jurisdiction the rights recognized by this Covenant, such as the right of every human being to life protected by law; the right of everyone to liberty and security of person, liberty of movement, and freedom to choose his residence; the right to freedom of thought, conscience, and religion; and the right to equality before the courts and tribunals and the law. In cases where these rights are not already provided for by existing legislative or other measures, each state party is to undertake to take the necessary steps in accordance with its constitutional processes and with the provision of the Convention to adopt such laws or other measures as may be necessary to give effect to the rights recognized in the Convention. To follow up progress achieved, a Human Rights Committee was to established consisting of 18 members. Each state party is to submit reports on the measures adopted and its progress made.

World Summit for Children, New York, 1990

On September 30, 1990, the World Summit, assembled in New York, adopted a Declaration on the Survival, Protection and Development of Children and a Plan of Action for implementing the Declaration. Governments committed themselves to a 10-point program to protect the rights of children and to improve their lives. The Declaration embraced a range of issues, including: ratification and implementation of the Convention on the Rights of the Child; actions aimed at enhancing the health of children; promotion of lower infant and child mortality; programs for a reduction in illiteracy and provision of educational opportunities for all children; improving prenatal care; and addressing the special needs of children separated from their families. Governments also committed to protecting children from all forms of physical or mental violence

and ensuring a standard of living adequate for their physical, mental, spiritual, moral and social development.

World Conference on Education for All, Jomtien, 1990

The World Conference on Education for All, held in Jomtien, Thailand, in March 1990, adopted the World Declaration on Education for All and the Framework for Action to meet Basic Learning Needs. These documents were products of a wide and systematic consultation process, which took place under the auspices of UNDP, UNFPA, UNESCO, UNICEF and the World Bank. Participants concluded that similar co-operation was required for follow-up. These documents represent an international consensus on an “expanded vision of basic education”, broader than primary schooling. It involves expanding early childhood education, improving knowledge assimilation, reducing male-female literacy gaps, expanding education opportunities for youth and adults, and using all communication channels to promote knowledge, skills and values for better living.

International Conference on Nutrition, Rome, 1992

World Food Summit, Rome, 1996

The first International Conference on Nutrition was organized in December 1992, in Rome, and was jointly sponsored by FAO and WHO. The key issue at the Conference was the nutritional well-being of the world's population, especially children and women. The delegations pledged to make all efforts to eliminate famine, starvation-related deaths, and nutritional deficiency. They also promised to reduce substantially widespread chronic hunger, undernourishment – especially among children, women and the elderly – diet-related communicable and non-communicable diseases, and inadequate sanitation and poor hygiene, including unsafe drinking water. The Conference unanimously adopted a World Declaration and Plan of Action for Nutrition, which contained policy guidelines committing governments to “incorporate nutritional objectives, considerations and components into development policies and programs, protect consumers through improved food quality and safety, prevent and manage infectious diseases, care for socio-economically deprived people and nutritionally vulnerable groups, and assess, analyze and monitor nutritional situations.”

In 1996 these commitments were reaffirmed at the World Food Summit in the Rome Declaration on World Food Security, which emphasized the need to achieve food security. The Declaration states: “Attaining food security is a complex task for which the primary responsibility rests with individual governments. They have to develop an enabling environment and have policies that ensure peace, as well as social, political and economic stability and equity, and gender equality.”

United Nations Conference on Environment and Development, Rio de Janeiro, 1992

The formal 12-day Conference of Government delegations, called the UN Conference on Environment and Development (UNCED), also known as the Earth Summit, was convened in Rio de Janeiro, Brazil, in 1992, to explore the reciprocal relationship between development and the environment. The Conference ended with a two-day Summit gathering a large number of ministers and heads of state, the true “Earth Summit”. The intergovernmental UNCED process yielded five documents that were signed by heads of state. The most important of which include:

- (i) The “Rio Declaration”, a statement of broad principles to guide national conduct on environmental protection and development; a statement on forest principles; and
- (ii) “Agenda 21”, a document presenting detailed work plans for sustainable development, including goals, responsibilities, and funding estimates – a master framework for international co-operation to achieve sustainable development. The program aims to balance environmental protection and economic growth, and these dual aims better integrated into operations of the UN system. Agenda 21 is the only document signed at UNCED that attempts to embrace the entire environment and development agenda. It lists goals and priorities regarding a dozen major issues related to resources, environment, social, legal, financial and institutional aspects.

The World Conference on Human Rights, Vienna, 1993

The World Conference on Human Rights reaffirmed the commitment of all States to fulfill their obligations to promote universal respect for, and observance and protection of all human rights and fundamental freedoms, in accordance with the Charter of the UN, other instruments relating to human rights, and international law. The Conference while emphasizing the universal nature of these rights and freedoms, and the fact that enhancement of international cooperation in the field of human rights is essential to fully meet the goals of the UN, also stressed that their protection and promotion is first the responsibility of Governments. Therefore, while it was acknowledged that there is a “need for States and international organizations, in co-operation with non-governmental organizations to create favorable conditions at national, regional and international levels, to ensure the full and effective enjoyment of human rights”, the Conference placed the main responsibility on states to lead the implementation of the human rights agenda.

The International Conference on Population and Development, Cairo, 1994

The International Conference on Population and Development followed and built on previous international conferences and “therefore, the implementation of its Program of Action at all levels must be viewed as part of an integrated follow-up effort to those conferences.” As in the case of other social development programs, experience has shown that “the many facets of population relate to many facets of development.” The Conference emphasized the integration of population concerns into development strategies, planning, decision-making and resource allocation at all levels and regions. As a natural consequence, the same document invited all specialized agencies and related organizations of the UN System “to strengthen and adjust their activities, programs and medium term strategies, as appropriate, to take into account follow-up actions to the Conference”.

International Convention on the Elimination of All Forms of Racial Discrimination

This Convention was adopted by the General Assembly on December 25, 1965 and entered into force January 4, 1969. State parties to this Convention pledged themselves to take joint and separate action to promote and encourage universal respect for and observance of human rights and fundamental freedoms for all, without distinction as to race, sex, language, or religion. In this context, the state parties condemned racial discrimination and undertook to pursue by all means and without delay a policy of eliminating racial discrimination in all its forms and promoting understanding among all races. A Committee on the Elimination of Racial Discrimination consisting of eighteen experts elected by states parties from among their nationals will be established. The Committee reports annually through the Secretary General to the General Assembly of the UN on its activities. It may make suggestions and general recommendations based on analysis of the reports and information received from the states parties.

World Summit for Social Development, Copenhagen, 1995

At the World Summit for Social Development, held in March 1995 in Copenhagen, Governments adopted a Declaration and Program of Action representing “a new consensus on the need to put people at the center of development”. The assembly of world leaders pledged to set as their overriding objectives the fight against poverty, full employment and the fostering of stable, safe and just societies. The main topics of the Social Summit were poverty eradication and support for productive employment and social integration. The essence of this UN World Summit lies in the fact that equal value is assigned to social and economic development. In a ten-point declaration, politicians committed themselves to redesign the economic, cultural, legal and political conditions in such a way that poverty can be overcome, sustainable development can be supported and social security can be made possible – both in industrialized and developing countries. The importance and role of civil society in planning and implementing social development was

particularly stressed, and the greater participation of women in political, economic, social and cultural life was acknowledged to represent an important step forward in social development. Governments were also requested to develop and implement national strategies to combat poverty. The Declaration signed by the World leaders contains ten commitments, including the following to:

- Eradicate absolute poverty by a target date to be set by each country;
- Support full employment as a basic policy goal;
- Promote social integration based on the enhancement and protection of all human rights;
- Ensure that structural adjustment programs include social development goals;
- Create “an economic, political, social, cultural, and legal environment that will enable people to achieve social development”.
- Attain universal and equitable access to education and primary health care; and
- Strengthen co-operation for social development through the UN.

World Conference on Women, Beijing, 1995

The Beijing Fourth Conference on Women adopted by consensus a Declaration and a Platform of Action with an agenda for women’s empowerment. The Platform of Action calls upon Governments, the international community, and civil society to take strategic action in 12 critical areas of concern. Some of these areas of concern include:

- The persistent and increasing burden of poverty on women;
- Inequalities and inadequacies in and unequal access to education and training, as well as to healthcare and related services;
- Violence against women;
- Inequality between men and women in the sharing of power and decision-making at all levels

In each critical area of concern, the problem is diagnosed and more than 50 strategic objectives are proposed with concrete actions to be taken by various actors in order to achieve these objectives. The Declaration of the Conference addresses three principles: the empowerment of women; the promotion and protection of the human rights of women and the reaffirmation of women’s rights as human rights; and the promotion of gender equality.

UN Conference on Human Settlements, Istanbul, 1996

In the Istanbul Declaration on Human Settlements, the Heads of States and Governments and the official delegations of countries assembled at the UN Conference on Human Settlements (Habitat II), in June 1996, endorsed the “universal goals of ensuring adequate shelter for all and making human settlements safer, healthier and more livable, equitable, sustainable and productive. The two major topics of the Conference were adequate shelter for all and sustainable development for human settlements in an urbanizing world, as inspired by the Charter of the UN. The Conference aimed at reaffirming existing and forging new partnerships for action at the international, national and local levels to improve the living environment. The delegates committed to the objectives, principles and recommendations contained in the Habitat Agenda, and pledged their mutual support for its implementation. States are committed to make the mobilization at national and international levels of adequate funds to implement the Habitat Agenda.

World Conference on Ministers Responsible for Youth, Lisbon, 1998

The commitments emerging from the World Conference on Ministers Responsible for Youth, Lisbon, August 1998, were made with a clear and explicit regard to the recommendations arising from the other major UN Conferences. These included the World Summit for Children, the

United Nations Conference on Environment and Development, the World Summit for Social Development, the fourth World Conference on Women, the second UN Conference on Human Settlements (Habitat II), and the World Conference on Education for All.

Recognizing that the formulation and implementation of strategies, policies, programs and projects in favor of young women and young men are the responsibility of each state and should take into account the economic, social and environmental diversity of conditions in each country, the participants committed to actions in several key areas, including:

- National policy: ensuring that national youth policy formulation, implementation and follow-up processes receive commitment from the highest political levels;
- Development: promoting access of young women and young men to land, credit, technologies and information, thereby enhancing the opportunities and development resources of young people living in rural and remote communities;
- Education: promoting education in all its aspects, namely formal and non-formal education, as well as functional literacy and training for young women and young men, and life-long learning, thereby facilitating the integration of youth into labor markets;
- Civic education and participation: promoting education, training in democratic processes and the spirit of citizenship and civic responsibility of young women and young men;
- Health: promoting equal health development for young women and young men, and preventing and responding to health problems by creating safe and supportive environments, and providing and building skills and access to health services.

Declaration on the Guiding Principles of Drug Demand Reduction

The 20th Session of the General Assembly adopted a Declaration on the Guiding Principles of Drug Demand Reduction. State members of the United Nations undertook the declaration to direct their drug actions, pledge sustained political, social, health and educational commitment to invest in demand reduction programs; agree to promote international cooperation in order to control supply and reduce demand and adopt measures aiming at eliminating or reducing illicit demand for narcotic drugs and psychotropic substances. Formulation of demand reduction components of national and international drug control strategies are guided by the following principles:

- There shall be a balanced approach between demand reduction and supply reduction, each reinforcing the other, in an integrating fashion to solve the drug problem;
- Demand reduction policies shall: aim at preventing the use of drugs and at reducing the adverse consequences of drug abuse; provide for and encourage active and coordinated participation of individuals at the community level, both generally and in situations of particular risks; be sensitive to culture and gender; develop and sustain more supportive environments.

Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment

This convention was adopted by the General Assembly in December 1984 and came into force in June 1987. It emphasizes that recognition of equal and inalienable rights of all members of the human family is the foundation of freedom, justice, and peace in the world. In this respect any act of torture or other cruel, inhuman or degrading treatment or punishment is an offense to human dignity and shall be condemned as a denial of the purposes of the Charter of the UN and as a violation of the human rights and fundamental freedoms proclaimed in the Universal Declaration of Human Rights. State party signatories of this convention agreed to take effective legislative, administrative, judicial and other measures to prevent acts of torture, and other acts of cruel, inhuman or degrading treatment or punishment. They also committed to ensure that all acts of torture be treated as offenses under criminal law punishable by appropriate penalties taking into account their grave nature. A ten-member Committee against Torture representing state parties has been established.