

IMPLEMENTATION OF NATIONAL STRATEGY



for People with Disabilities

Monitoring Report

Tirana, November 2007



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Prepared and published by Albanian Disability Rights Foundation

Working by: **Dr. Ariel ÇOMO**
Prof.As.Dr. Edlira HAXHIYMERI
Ark. Juli SHLLAKU
MA Livia NANO
Ph.D. Marita FLAGLER
Prof.As.Dr. Virxhil NANO

Edited by Ph. D. **Marita FLAGLER**

Translated by **Kastriot ZIFLA**
Brikena PLAKU

Design and layout **Grafika Elzana**

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For copies and more information contact:

Albanian Disability Rights Foundation
Rr. Andon Zako Çajupi, (Bogdani)
Pall 15, Kati 3- te,
Tirana, Albania,
Tel: 00 355 4 269 426
e-mail: adrf@albmail.com
www.adrf.org.al

Table of Contents

	Pages
List of Acronyms	8
Acknowledgement	9
I. OVERVIEW	10
Introduction	10
Executive Summary	10
Methodology	13
Legal Framework	15
General Situation of People with Disabilities in Albania	18
Diagnosing and Evaluation	19
II. MONITORING REPORTS	
A. Accessibility	21
B. Health Care	41
C. Social Services	63
D. Education	93
E. Employment and Vocational Training	113
III. SUMMARY OF RECOMMENDATIONS	134
IV. REFERENCES	137

Figures

Figure 1 Percentage of surveyed family members and individuals with a disability that perceive public buildings to be accessible.....	32
Figure 2 Percentage of surveyed family members and individuals with a disability that perceive streets, sidewalks and bridges to be accessible.....	33
Figure 3 Perceived accessibility of the city/town in general by all survey respondents.....	33
Figure 4 Perceived availability of reserved parking for people with disabilities by all survey respondents.....	34
Figure 5 Perceived accessibility of recreational space and buildings by all survey respondents.....	35
Figure 6 Perceived home accessibility of the total survey respondents.....	35
Figure 7 Comparison of responses regarding total lack of accessibility in various environments.....	36
Figure 8 Disability identification for neonates.....	55
Figure 9 Identification of the disability after one year of age.....	55
Figure 10 Degree of difficulty to get genetic testing done.....	56
Figure 11 Perception of the quality of the reception in hospitals and health centers..	57
Figure 12 Main problems faced by people with disabilities in health institutions.....	57
Figure 13 Percentage of parents reporting no child discrimination due to disability in medical institutions.....	57
Figure 14 Perceived helpfulness of family doctor.....	58
Figure 15 Reported degree of difficulty to obtain medications by individuals with a disability.....	58
Figure 16 Self-reported economic condition of participating families.....	59
Figure 17 Reported source of care and supervision during the day.....	59
Figure 18 Amount of money spent on medications.....	60
Figure 19 The amount of disability benefit that would meet the needs of PwD.....	60
Figure 20 Parents' satisfaction with their child's education.....	106
Figure 21 The status of IEP.....	107
Figure 22 Current educational setting is parent's first choice.....	108
Figure 23 Teacher's attitude towards inclusion.....	109
Figure 24 Essential aspects for working with a student with special needs.....	110
Figure 25 Number of people with disability employed in 2006 and over years in public and private sector/by city.....	128

Tables

Table 1	Number of People with Disabilities According to Category.....	19
Table 2	Perceived Accessibility of Public Buildings.....	32
Table 3	Perceived Accessibility of Streets, Sidewalks and Bridges.....	32
Table 4	Perceived Accessibility of Town/City in General.....	33
Table 5	Perceived Availability of Reserved Handicap Parking.....	34
Table 6	Perceived Accessibility of Recreational Space.....	34
Table 7	Perceived Home Accessibility.....	35
Table 8	Distribution of Survey Participants per Geographic Area.....	44
Table 9	Distribution of Disability Categories for the Children of Participating Parents.....	44
Table 10	Number of people with disability benefiting from the state payment scheme.....	69
Table 11	Number of beneficiaries of social welfare institutions.....	70
Table 12	Number of Beneficiaries' from payment schemas during the years 2005/2006.....	70
Table 13	Number of beneficiaries from services during the years 2005/2006...	71
Table 14	Perceived knowledge of social services legislation.....	73
Table 15	Degree of knowledge of the social services legislation by the parents...	73
Table 16	Level of education of parents of people with disabilities.....	74
Table 17	Degree of knowledge of the social services legislation by the parents according to region.....	74
Table 18	Percentage of the need of the social welfare centers for additional staff to work directly with people with disability.....	76
Table 19	Percentage of the specialized staff that works directly with people with disability.....	77
Table 20	The frequency of the training for professional staff members.....	77

Table 21	Percentage of the specialized staff in the non government care centers for people with disability.....	79
Table 22	The status of Individual Plan.....	79
Table 23	The frequency of social integrating activities in the community for people with disability in social welfare centers.....	80
Table 24	Plans to integrate children with disability in schools.....	81
Table 25	Professional training programs for people with disabilities in the social welfare centers.....	81
Table 26	Plans of the center for the employment of people with disabilities	82
Table 27	Individual Plans in the non governmental centers.....	82
Table 28	Individual Plans for the involvement of families.....	83
Table 29	Individual plans for the education of children with disabilities.....	83
Table 30	Individual programs for vocational training and employment of people with disabilities.....	83
Table 31	Number of people with disabilities interviewed.....	84
Table 32	Number of people interviewed by type of disability.....	84
Table 33	Enrollment of Students in Special Education Schools.....	100
Table 34	The Degree of Intellectual Disability.....	101
Table 35	Personnel Working in the Special Education Schools.....	102
Table 36	Geographic distribution of survey parents participants.....	106
Table 37	Parents' Evaluation of the Level of Help for the Special Education Student	107
Table 38	Planning for Social Integration.....	108
Table 39	Number of Interviewed parents.....	119
Table 40	Geographic Distribution of People with Disability	120
Table 41	Distribution by Disability Type.....	120
Table 42	Level of knowledge of the legislation among parents of people with disability..	121
Table 43	Knowledge of the law by public employers.....	122
Table 44	Knowledge of the law among private employers.....	122
Table 45	Orientation for employment.....	123
Table 46	Percentage of people with disability employed in your institution.....	125
Table 47	People with disabilities employed in the public sector	126
Table 48	Reason for employing people with disabilities.....	126

Table 49 Percentage of the request for employment of people with disabilities (by public employers).....	127
Table 50 Percentage of people with disability in private entities.....	127
Table 51 Number of declared employed people with disability	128
Table 52 Reason for employing people with disabilities (Private employers)	129
Table 53 Percentage of the request for employment of people with disabilities (by private employers).....	129
Table 54 Participation in vocational training courses.....	130

List of Acronyms

NSPWD	National Strategy for People with Disabilities
ADRF	Albanian Disability Rights Foundation
PwD	Person with Disabilities
NPO	Nonprofit Organization
MES	Ministry of Education and Science
MPWTT	Ministry of Public Works, Transport and Telecommunication
MH	Ministry of Health
MLSAEO	Ministry of Labor, Social Affairs and Equal Opportunities
SSS	State Social Service
NES	National Employment Service
SII	Social Insurances Institute
NCDI	National Council on Disability Issues
TS	Technical Secretariat of NCDI
WHO	World Health Organization
MCAAW	Medical Commission of Assessment of Ability to Work
MBAC	Medical Blindness Assessment Commission
ICPSD	Institute of City Planning Studies and Designs
NHB	National Housing Body
CTA	Council of Territory Adjustment
ED	Educational Directorate
IEP	Individual Educational Plan
RED	Regional Educational Directorate
DCM	Decision of Council of Ministries

Acknowledgement

The Albanian Disability Rights Foundation aims to promote equal opportunities for and protect the rights of people with disabilities, to improve their quality of life and that of their families, by focusing public attention on the observance of these rights in education, employment, services and social activities. This report is a compilation of studies monitoring the implementation of the National Strategy for People with Disabilities in broad-spectrum. This study is the result of months of work by ADRF, with support from many organizations and individuals.

ADRF thanks the United States Agency for International Development (USAID) for its financial support, and acknowledges the following individuals, who provided expertise on disability-related areas and wrote sections of this Report: Assistant Prof. Dr. Virxhil Nano; Assistant Prof. Dr. Edlira Haxhiymeri; Ph.D. Marita Flagler; Dr. Ariel Çomo; Arch. Juli Shllaku; MA. Livia Nano. ADRF also thanks the monitoring teams in Tiranë, Durrës, Shkodër, Vlorë, Elbasan and Korçë for collecting data and the representatives of local and central institutions for providing information.

ADRF owes a debt of gratitude to people with disabilities, their parents and caretakers, and to disabled persons' associations. The information these people provided painted a true portrait of the situation facing disabled people, a valuable contribution to the goal of bettering disabled peoples' lives and helping them integrate in Albanian society.

Blerta ÇANI
Executive Director, ADRF

OVERVIEW

Introduction

The Albanian Disability Rights Foundation promotes and protects the rights of people with disabilities by helping to improve the policy framework in the disability field and monitoring its implementation. ADRF played a key role in the National Strategy of People with Disabilities (or ‘The Strategy’), approved in January 2006, and continues to promote the Strategy’s implementation. People with disabilities in Albania face serious stigma, prejudices and barriers to the full exercise of their rights; this discrimination has deep roots and extends across society, but that has begun to change; fully implementing this Strategy helps to ensure these changes will continue.

ADRF monitored the Strategy’s implementation during 2006 in Tiranë, Shkodër, Durrës, Elbasan, Vlorë and Korçë. Sections of the Report were written by disability experts, who assessed the extent to which the Strategy had been implemented and civil society’s role in ensuring its implementation. Their analysis was based on surveys conducted in the six cities mentioned, and on interviews with staff of government and medical institutions responsible for implementation, as well as on direct observations. Local working groups (comprising a local coordinator and local experts in each field) collected data, which were analyzed by the experts, who in turn provided recommendations to the Government based on their analyses for improving disability policies and laws and implementation.

Executive Summary

This report summarizes data collected the first half of 2007 via a survey carried out in Tiranë, Shkodër, Durrës, Elbasan, Korçë and Vlorë. It aims, first, to evaluate the implementation of the Action Plan of National Strategy of People with Disabilities; second, to compare the situation of the Strategy’s intended beneficiaries – PwDs and their family members (caretakers) – with data from government institutions; and third, to recommend how to improve Strategy

implementation. The report contains 5 chapters; each analyzes achievements or deficiencies each Action Plan field. The report also assesses the state of health and social service benefits, environmental adaptability, education and employment of PwDs.

Among institutions responsible for implementing it, knowledge of the Strategy it is good, thanks to awareness-raising by organizations like ADRF. But implementation has been slow the two first years (2005-2006) and many of the Strategy's goals are unmet, with the result that disabled people remain excluded and discriminated against in all fields. This is because (1) the Strategy has not yet occupied the proper place in the work of responsible institutions, whose monitoring mechanisms are insufficient or missing; (2) budgetary provisions to implement the Strategy are inadequate; and (3) though disability legislation affords education, employment, health and social services for PwD, it lacks the mechanisms to make it applicable. Albania's disability legislation still leaves room for discrimination against persons with common disabilities. Medical diagnosis should be the first step in a truly inclusive process for disabled people, but it is infrequent, with only 15% of cases being assessed by the Medical Commission of Assessment of Ability to Work in 2006. That is very low.

Last year's steps towards increasing financial support to enlarged numbers of PwD beneficiaries have not translated into social services to them. The number and kinds of social services remain limited to the main cities; this does not allow PwD to get services they need as provided for in the Strategy. The Government in 2006, meanwhile, utilized the same institutions and services - 6 residential centers and 2 daily centers -- as in 2005 and have shown few new initiatives to support or establish services for PwD. Meanwhile, the services provided by NPOs rely on projects and thus are not secure and sustainable. The scope and quality of social services for disabled people is thus far from the required standards. A better quality of services requires more commitment on the part of professionals, assessments and continued inspection, training for professionals and responsibility for their observance. Medical-rehabilitating services for PwD are provided in environments that are not barrier free; the staffs lack proper qualifications and there are no standards or established protocols for services.

Registration of pupils with disabilities is on the rise, but participation of children with disabilities in public schools is not widespread. Data from Tiranë, Durrës, Elbasan, Korçë, Shkodër and Vlorë show that 172 children with disabilities are included in preschool, 214 pupils in compulsory (9 year) education, 108 pupils in secondary schools, 25 in the secondary profiled schools and 6 young people in the faculties. Due to pressure by parents, some children with moderate disabilities

attend ordinary schools. With years their progress becomes difficult, especially in the higher cycle of compulsory education. Many of them leave school without having finished the fourth grade. The general environment is replete with movement and communication barriers, in which the efforts for change are not at the required and expected level. MPWTT and the institutions under it fall short of the Strategy targets for 2006. Approximately 60% of people with disabilities of all kinds, report the lowest level of assessment – that the environment in general is – “not adapted at all”.

Employment of people with disabilities remains problematic in Albania. The number of employed PwD in public sector is 20, whereas in the private sector it is 24 people in the six monitored cities in 2006. People with disabilities rarely request employment in the employment offices or professional training centers. They and their family members ask these offices primarily for financial aid, not jobs. This fact shows that the policies have encouraged parasitism and reduced the ambition of people with disabilities for their life. Based on these findings, our report recommends actions for all analyzed and working programs of each responsible institution. These recommendations are for use on placing PwD of various categories under the same legal framework to protect their rights; organization and functioning of the full monitoring system for NSPWD implementation, with the proper structures and means; budgetary assessments and the deadlines for implementation of Action Plan measures; improvement of system for identification and assessment of PwD as a first step towards building a full integrating an inclusive process for PwD in social life and a larger inclusion of PwD and their family members in the process of relevant policies drafting and implementation.

Methodology

The methodology (detailed in www.adrf.org.al) is designed to compare real achievements in implementation of with results reported by government institutions; it is descriptive combining quantitative and qualitative data collected from primary and secondary sources. Secondary sources include reviews of literature (legal documents, reports and studies, etc) and primary source data comes from questionnaires used on target groups, structured or semi structured interviews (face-to-face or phone), focus groups and observations. The sample included Tiranë, Shkodër, Durrës, Elbasan, Korçë and Vlorë.

Data were collected in five fields: social services; health services, education, employment and building accessibility. Representatives of central and local government institutions and representatives of NGOs and people with disabilities and their family members participated in each field of this study. Collecting data from various sources and using various methods enhances data reliability. We use the intentional sample method to select the representatives of central and local institutions and services, the occasional sample method for selection of direct beneficiaries, people with disabilities and their family members. Questionnaires used for each field included the following:

1. *Education:* Questionnaire for MES, RED, Universities Faculties for teachers, psychology, teachers, NPO-s, parents and PwD.
2. *Employment:* Questionnaire for MLSAEO, NES, directors of regional employment offices, private employers, public employers, PwD and parents.
3. *Social services:* Questionnaire for MLSAEO, SSS, regional offices of social service, offices of social service and municipality, centers managed by the State, centers managed by NGO-s, parents and PwD.
4. *Health services:* Questionnaire for MH, MCDLA, hospital “Mother Teresa”, Tiranë Maternity (laboratory), Tiranë

Pediatric Hospital If (laboratory), Regional Offices of Social Insurances, PWD, parents.

5. *Accessibility:* Questionnaire for MPWTT, MES, MH, CEC, NBE, NES, Construction Police, Offices of City Planning in Municipality, PWD and their caretakers.

Interviewers: 6 local coordinators and 30 local experts in 5 Action Plan fields, in each district were involved in data collection. Experts in each field trained the local coordinators about their research methods and they gave to them the relevant guidelines for data collection in this field.

Duration of data collection: Primary data were collected in the period April-June 2007.

Statistical analysis: Survey data collected were analyzed on the basis of descriptive statistics with the statistical program SPSS. Since most variables were nominal or ordinal (and some interval), the *mode*, *median* percentages and frequencies were suitable for analysis (the average in the cases of interval variables). The variables were cross-tabulated by geographic districts included in the study and by the kind of disability. With regard to the questionnaires addressed to the people with disability and their family members, some variables were analyzed according the educational level, socioeconomic level, etc. Experts from each field wrote reports based on the tables with the acquired results, compared to the information collected from the central and local institutions.

Study limitations: During data collection we found that a real system for Strategy monitoring at the central government level is problematic. We observed discrepancies between data provided by central government institutions to those provided local government institutions; between the data provided by public institutions and those managed by NPO-s or private services. Most contacted service institutions collect and document data on disability irregularly and not periodically and some of them lack data. Regardless of the work in disability area, the absence of a true monitoring system makes it difficult to measure progress.

Legal Framework

Disability rights are enshrined in a wide range of national and international policies and a legal framework delineated below:

- The UN Convention on the Rights of Persons with Disabilities (December 2006) is designed to protect the rights of people with disabilities. The Convention overarching objective is to provide people with disabilities with the opportunity to exercise fully and equally their basic human rights and to promote respect for human dignity notwithstanding physical or mental disabilities.
- Albanian Constitution, Article 59, sections e) and f) of states "the government within its constitutional competencies and other means at its disposal and in compliance with private initiative aims at: e) taking care and helping the elderly, orphans and invalids, f) health rehabilitation, special education and integration of people with disabilities in society and continuous improvement of their living conditions. Although its language on disabilities is imprecise, mostly because of the time constraints under which those provisions were drafted, the Albanian Constitution does provide the necessary foundation to create more specific laws and regulations enumerated below.
- Law on "Social Assistance and Services" (No. 9355 of 03/10/2005) regulates the working and administration of social services in the communal and residential level and categorizes them based on their organization and working.
- Social Services Strategy (2005-2010), approved by Decision (No. 265 of 04/28/ 2005) of the Council of Ministers, defines how the decentralization process should enhance local government functions for establishing, managing and enriching the social services based on community needs.

- Social Services Standards approved by Decision (No. 658 of 10/17/2005) of the Council of Ministers defines the standards for social services that must be observed by all social services.
- Standards of Services of Social Protection for People with Disabilities approved by Decision (No. 822 of 12. 06. 2006) elaborate the general standards of social services to the level of people with disabilities in order to protect their rights and fulfill their needs.
- Law on Pre University Education – the Normative Dispositions of Education encourages the integration of students with disabilities in the educational system.
- Labor Code of the Republic of Albania approved by the Law No. 7961 of 07. 12. 1995 prohibits any kind of discrimination in hiring and training of concerned individuals.
- Law on Encouragement of Employment No. 7995 (of 09/29/1995) aims to establish general policies to support and provide freely chosen profitable employment.
- “Law for Vocational Education and Training in the Republic of Albania” No. 8872 of 03. 29. 2002 asserts and protects the citizens’ right to get vocational education and training regardless of their social status or health conditions.
- “Law on Care-Giving and Health Insurance” No. 7870 (of 10/13/1994) delineates the facilities that Government must provide for people with disabilities.
- “Law on Mental Health” No. 8092 states that people with disabilities are entitled to benefit even when they have mental health conditions.
- “Law on Health Service” No. 8167 (of 11/ 21/1996) enumerates the benefits not specifically for people with disabilities, but also for children with disabilities.
- “Urban and Architectural Rules and Norms for People with Disabilities” (Decision No. 401 of 06/25/2004) states that disability standards must be observed in new constructions.

- “Law on the Road Code of Republic of Albania” No. 7889 (of 07/22/1998) contains several articles that ensure movement safety for people with disabilities.
- “Law on Status of Labor Invalid No. 7889 (of 12/14/1994, amended) provides support in every respect for the invalids of labor.
- “Law on Status of the Paraplegics and Quadriplegics” No. 8626 (of 06/22/2000) provides support in every respect for paraplegics and quadriplegics.
- “Law on the Status of Blind Persons” No. 8098 (03/28/1996, amended) which provides support in every respect for the blind people

The National Strategy for People with Disability

- This document, approved by the Government of Albania on July 1, 2005, is the Albanian government’s foundational document for people with disabilities. It introduces the main goals and objectives of the government and other stakeholders for the suitability of environment, services, education, vocational training, employment, legislation and research for people with disabilities.

General Situation of People with Disabilities in Albania

Definition

In compliance with the UN and WHO terminology, Albania replaced the term “handicapped persons” with “people with disabilities” – a term that refers to people whose physical functions, mental capacity or psychological conditions tend to depart from the typical condition for a given age by more than six months, limiting their participation in social life (See “National Disability Strategy,” 2004).

According to the UN Convention for the Rights of Persons with Disabilities (December 2006), the latest definition of the term “persons with disabilities” includes those who have a long-term physical, mental, intellectual or sensory impairments, which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others (Article 1).

Statistics

Existing data and knowledge about people with disabilities in Albania is incomplete. The Albanian Government currently gathers and reports statistics on such things as: the numbers of people with disabilities, the main kinds of disabilities, the amount of payments given by the government, the kinds of supportive services offered by residential centers and services in communities, and the like. Statistics provided by the Albanian Government regarding numbers of persons with disabilities is as follows:

Table 1: Number of People with Disabilities According to Category

Type of Disability	Total	People with disabilities	Caregivers
Born with disability or becoming disabled from causes other than labor	61,141	53,000	8,141
Mental, sensory, physical disability	47,631	42,322	5,309
Blind	13,045	9,907	3,138
Paraplegic and quadriplegic	1,465	771	694
Invalids from labor	41,804	41,804	0
Total	102,945	94,804	8,141

Source: Ministry of Labor, Social Affairs and Equal Opportunity (MLSAEO) June 2007

Diagnosing and Evaluation

The Social Insurance Institute's Medical Commission of Assessment of Ability to Work, a body made up of Government physicians, evaluates disability on medical criteria defined in regulations approved by Ministry of Health and Ministry of Labor, Social Affairs and Equal Opportunity. The MCAAW works on two levels. Regional MCVAW is the first level, which operates within Social Insurance Regional Directorates in every city; the second level is the Superior MCAAW, which operates only in Tiranë. Each Regional MCAAW includes a physician from the social service. There are two different MCAAWs only in Tiranë. One of them assesses Social Insurance scheme beneficiaries; the other assesses State Social Service beneficiaries.

The assessment process for social benefits delivery (as invalidity pension or financial help for a disability) is complex. By law, the procedure begins at the hospital or the clinic of the caregiver (family doctor) clinic, where the patient/applicant is given a referral for MCVAW describing his or her health condition, which he then submits to the Regional MCVAW. After 30 days of submission, the Regional MCVAW commission renders a decision on the applicant's right for benefits. If the applicant does not agree with the decision, he or she has the right to appeal to the Superior MCVAW (based in Tiranë) within 30 days of Regional MCVAW decision announcement.

Pursuant to Article 35 of Law "On Social Insurance", the decision of the Superior MCVAW is irrevocable, but its decisions have in certain instances been appealed

to the court on the grounds that they are administrative acts, they can be subject to the Code of Administrative Procedures. The law on Social Insurance provides for the reevaluation of beneficiaries, a procedure usually carried out every year or in case of beneficiary's health condition change (e.g., when the disability category changes). The reevaluation is always done two months before the MCAAW's last decision expires. The new rules on delivery of social benefits may make reevaluation possible every three years.

Introduction

Studies conducted in Albania prior to the approval of the National Strategy on People with Disabilities (NSPWD) revealed lack accessibility of public and private buildings and civil infrastructure in general. The ADRF study of 1999¹ of the major public buildings in Tiranë determined that all of them were inaccessible. The CO-PLAN study² conducted after four years, in 2003, showed that no improvement had been made and the public environment, housing and the civil infrastructure were still inaccessible.

The Albanian legislation enacted prior to the approval of the NSPWD provided no provisions related to accessibility. Amendments to the Albanian legislation from the 90s have almost entirely circumvented alternatives for building an accessible environment.. The Law “On Town-Planning, No. 8405 of 17.09.1998, Revised,” which regulates all construction in the country, does not reflect any accessibility standards. The same thing can be said of other relevant laws such as: Law “On the Development of Areas with Touristic Priority No. 7665 of 21.01.1993, Amended Law “On the Construction Police, No. 8408 of 25.09.1998,” and Law “On Regulating Construction, No.8402 of 10.09.1998.”

The efforts of disability grassroots organizations led by ADRF to promote awareness on the need of legislating accessibility were successful in producing a legal package of architectonic standards for people with disabilities in cooperation with competent institutions. This legal package became part of the Town Planning Regulations.³

1. ADRF (1999). Problems Relating to the Accessibility of the Environment in Albania.

2. CO-PLAN (2003). Tirana-the Challenge of Urban Development.

3. Decision no. 401, dated 25 June 2004.

NSPWD has covered accessibility in the Intervention Area I: Life without Barriers (Accessibility) and in the Intervention Area V: Legislation. Stating that, “Accessibility is . . . a precondition to the full and equal enjoyment of civil rights and for the access of people with disabilities to all services on equal terms with all other citizens,” (p. 22 of the English translation), the three main steps to be taken to ensure it are identified as (a) removing barriers for participation in social, cultural and political life, (b) creating the necessary conditions to provide access to information, and (c) including the study of accessibility in the curricula of architecture, design, media communications and computer sciences.

The objectives of the national action plan that cover the issues related to accessibility have been formulated as follows:

- I.1. Ensure accessibility for people with disabilities through the gradual removal of existing architectonic, infrastructure and transport barriers and through preventing the creation of new accessibility barriers.
- I.2. Utilize modern technologies to gradually overcome communication and information barriers for people with disabilities.
- V.1. Ensure full equality for people with disabilities through improvements in the legislation on social services, education, *housing and telecommunication*.

Because these objectives are desirable rather than obligatory, no government report has been done on the status of the implementation of the National Action Plan in this area of intervention. This study is an effort to evaluate the progress achieved through central and local government data, field observations as well as the perception of people with disabilities, their family members and representatives of disability organizations.

Methodology

Design

Cross-sectional data were collected in Tiranë, Durrës, Elbasan, Vlorë, Shkodër and Korçë through structured written questionnaires, phone and in-person interviews, focus groups and field observations. Both quantitative and qualitative data were collected in all cases.

Informants and Participants

Information in regard to the implementation of the measures was provided by central and local government employees who collaborated with the evaluation

team. The central government employees were from the Ministry of Health, Ministry of Education, Ministry of Public Works, Transport and Telecommunications (MPWTT), Ministry of Labor, Social Protection and Equal Opportunities as well as the Central Election Commission. The local government employees worked for the municipalities of Tiranë, Shkodër, Elbasan, Durrës, Vlorë and Korçë.

Participants of the focus group were representatives of major national disability organizations who responded to the invitation of the evaluation team and experts in the field of housing and civil engineering.

The participants in the written survey were people with various disabilities (mobility, visual and hearing impairments as well as mild intellectual disabilities) over the age of 18 (n=83) and their family members (n=72), a total of 155 individuals. This was a convenience sample, made up mostly by members of the disability organizations. The participation in the survey was voluntary. To protect the identity of the participants, no identifying information was collected for the survey participants.

Materials

The data from the central and local government employees were collected primarily through structured written questionnaires, which contained specific questions that were related to each of the respective measures of the National Action Plan. The questionnaires were created by accessibility experts in prior work. The questions asked for the implementation status of various measures of the National Action Plan and challenges encountered as well as budgetary information.

The questionnaire for the people with disabilities and family members consisted of close-ended questions. A Likert scale of 3-5 categories was used to measure their perception of the environment accessibility in the civil infrastructure, public and recreational buildings and spaces, homes and the city in general.

Procedure

The data were collected by a team of local experts led by a national expert in the field of accessibility, equipped with an official authorization from the ADRF. To ensure inter-rater reliability, all experts were trained by the ADRF. Different forms were used to collect the information from the central and local government employees: by mail and email, phone interviews and in-person contacts. The level of cooperation varied, from some very cooperative employees to others who neglected to complete the questionnaires or did not agree for a phone or in-person interview. The client survey questionnaires were completed either by the person in

the presence of the local expert, or by the local expert who received the information through phone or in-person interviews.

Unstructured field observations were done in Tiranë, Elbasan, Shkodër, Durrës, Korçë and Vlorë mainly in the public infrastructure (streets and sidewalks), public buildings and private homes.

Focus groups were organized by the local and the national expert in all evaluation locations. They were used to gather information as well as validate the findings.

Results

The reporting of the results will be done in two sections. The first section provides information on the status of progress made in implementing the National Action Plan of the NSPWD by reporting the findings for each measure planned. The reader must be aware that due to unavailability of the information for some of the measures, the status of progress was difficult to evaluate. The second section of results will present the findings of the survey conducted with people with disabilities and family members on their perception of the situation of the existing barriers, architectural and otherwise, for people with disabilities.

Implementation of 2005-2006 Tasks, Preparation for 2007 Tasks

Area I: Accessibility

Measure 1.1. Accessible flats will be built and accessibility measures will be applied to 10% of the buildings constructed with the funds of the Housing Department.

Timeline: 2007-2014

Implementing institution: MPWTT

Findings

The Housing Department has no plans for the achievement of this measure. The fund of 360 million lek for new public housing does not specify funding that goes towards accessibility features.

Measure 1.2. Funds will be allocated to remove existing barriers in the roads and public infrastructure, public buildings, health institutions and state-owned buildings.

Timeline: 2007-2014

Implementing institution: (a) MPWTT; (b) local government

Findings

The MPWTT reports that no funding was allocated for the fiscal year 2005 -2006. Additionally, the Construction Police does not have a plan in place to identify existing physical barriers and propose modifications.

The Ministry of Health does not have an accessibility requirement for the health care centers. Currently, only 3 out of the existing 700 health care buildings in the country (i.e., 0.4%) are accessible. The Ministry of Health has written an Action Plan for 2007 for the implementation of NSPWD. As part of it an official document has been prepared and sent to the Psychiatric Hospital, and the Regional Hospitals. Additionally, all health departments have been instructed orally on their obligations to meet the requirements of the NSPWD.

For findings on the work of the local government please go to the following Measure 1.2.(a)

Measure 1.2.(a)

Public funding of new social and infrastructure projects will include funding for wheelchair accessibility in the implementation of the pilot project “An Accessible Tiranë.” The pilot project will be replicated in other municipalities in the country.

Timelines:

Tiranë: 2005-2007

Other municipalities: Starting in 2006

Implementing institutions: (a) MPWTT; (b) Tiranë Municipality (c) other municipalities

Findings

Tiranë

There is awareness among the leaders of Tiranë municipality on the importance of universal design and some steps have been taken towards improving accessibility. Ten (10) out of 80 km (i.e., 12.5%) of reconstructed sidewalks in the period 2005-2006 have accessibility features. Twenty of the 93 (i.e., 21.5%) new public housing projects at the total cost of 13 billion lek are reported to be partially wheelchair accessible, but none of the renovated buildings at the cost of 1.5 billion lek, have any accessibility features. All the 200 new building designs approved in 2006 are wheelchair accessible.

Durrës

The interviews with municipality employees indicated a low level of awareness on the need for disability accessibility features. No funding has been earmarked for

accessibility either in the new construction or renovation projects. None of the 10 renovated public buildings are accessible. Out of the 70 newly approved buildings for construction, only 25 (i.e., 35.7%) have accessibility features.

Korçë

None of the public funding for construction or renovations has been earmarked for accessibility modifications or features. Recently reconstructed 9 km of sidewalks at a cost of 1.5 billion lek are not wheelchair accessible.

Shkodër

The municipality reports that about 90% of the infrastructure (roads and streets) built in 2005-2006 are fully wheelchair accessible, and so are 15 % of the new buildings. Another 10% of the newly constructed buildings are partially accessible. No specific numbers were made available in all the three cases. Almost all the new housing projects approved in 2006 (55 of 56) are handicap accessible.

Vlorë

Due to lack of information on the NSPWD and trained personnel at the Municipality, nothing has been done to ensure handicap accessibility in the public buildings. No new funding has been earmarked for accessibility. None of the public or privately funded housing projects approved for 2007 provide accessibility.

Elbasan

The municipality employees interviewed showed some concern for the existing physical barriers in the city for people with disabilities. A fund has been earmarked for street and traffic signals. The monetary value of the fund was not made available.

Measure 1.2b. Accessibility modifications will be done to the main hospitals in Tiranë in the amount of 82.8 million lek.

Timelines: 2005-2010

Implementing institution: Ministry of Health

Findings

Field observations revealed that the accessibility modifications to the main hospitals in Tiranë are minor and accessibility of most of their environments is still a major issue. Lack of funding was identified as one major cause for the very modest progress.

- Measure 1.2c.** The hospitals at the regional and municipal level will provide an accessible environment adapted to the needs of people with disabilities.
- Timelines:** 2005-2007
- Implementing institution:** Local government

Findings

Ministry of Health

Nine (9) new hospital buildings at the total cost of 61.4 million lek will be partly accessible. None of the 126 buildings that are being renovated at the cost of 600.9 million lek will be wheelchair accessible. No funding for new construction or renovation has been earmarked towards accessibility. The 2007 Action Plan of the Ministry of Health has clear guidelines on accessibility for regional hospitals.

Local Government

Durrës Department of Public Health reports that 3 health care buildings are partially accessible. No data were reported from other municipalities surveyed.

- Measure 1.2ç.** Eight vocational training centers will become accessible for the training of people with disabilities by the State Employment Service.
- Timelines:** 2005-2007
- Implementing institutions:** (a) State Employment Service; (b) MoLSA

Findings

Two (2) of the vocational training centers have been partially made accessible with the installation of entrance ramps; however, the interior has not been modified and is still not accessible. Although 58.6 million lek have been awarded for the renovation of nine existing buildings, no funding has been earmarked for their accessibility.

- Measure 1.2d.** One hundred (100) schools and 90 day care centers (for children ages 3-6) will become accessible for people with disabilities.
- Timelines:** 2004 - 2014
- Implementing institution:** Ministry of Education and Sciences (MES)

Findings

MES

MES has no official information on the degree of the implementation of this measure. The construction of new schools and the renovation and modification of existing

school buildings is a responsibility of the local government. A fund of 460 million lek from the state budget financed the construction of 40 new school buildings; no specification was included in the budget for the physical accessibility.

Local Government

Tiranë City Department of Education reports that accessibility has been incorporated in all renovations and new constructions. No statistical data were provided on the number of day care centers (ages 3-6) and schools that are accessible. Durrës Department of Education reports that one of the school buildings is wheelchair accessible. No data were reported from other municipalities surveyed.

- Measure 1.2e.** Continuous efforts will be undertaken to ensure that polling stations become accessible for people with disabilities
- Timelines:** Starting in 2006
- Implementing institution:** (a) MPWTT; local government

Findings

MPWTT is not really involved in the polling stations. The Central Election Commission is responsible for them. According to reports from the latter, out of a total of 4.721 polling stations in the last elections (February 18, 2007) about 10 % (no exact number was given) happened to be in accessible school buildings or day care centers, about 75% (no exact number given) were on the ground floor, but only about 30% (no exact number given) provided accessible secret polling places. The voting ballots were also printed in Braille for people with visual impairments. The prefectures have the legal responsibility of ensuring the accessibility of polling stations. No action was taken by any of them in the last elections to enforce the accessibility guidelines provided by the Albanian legislation. No relevant information was provided by the surveyed municipalities.

- Measure 1.3.** Accessibility measures shall be applied to transport means starting from the urban transport in Tiranë and continuing with railway transport.
- Timelines:** Starting in 2007
- Implementing institution:** MPWTT

Findings

There are no plans on the ways of ensuring accessibility in public transportation by bus or train.

Measure 1.4. Acoustic signals and other signals suitable for people with disabilities applied to the urban infrastructure.

Timelines: Starting in 2007

Implementing institution: (a) MPWTT; (b) local government

Findings

The MPWTT has no plans in place.

The municipality of Elbasan has earmarked respective funding. No information is available from other municipalities.

Measure 2.1. Support for the creation of “talking books” and publications in Braille, which includes school curricula, technical, legal and artistic literature.

Timelines: Starting in 2005

Implementing institution: (a) NGOs; (b) Albanian Blind Association

Findings

The Albanian Association of Blind People operates 34 talking book and Braille mini-libraries in addition to the main talking book and Braille library in the National Rehabilitation Center for Blind People in Tiranë. The collection consists of 220 titles, which are school textbooks, fiction, selected scientific materials, the monthly publication of the newsletter “The Light of Sound”, the monthly publication of the related Albanian and international legislation, etc.

The Association also operates its printing house for Braille materials. It is estimated that about 300 people are Braille literate in Albania.

Measure 2.2. Access to public services is particularly supported for people with disabilities during communication with public administration

Timelines: Starting in 2005

Implementing institution: (a) NGOs

Findings

No information was made available.

Measure 2.3. Sign language will be included in visual media.

Timelines: Starting in 2005

Implementing institution: NGOs

Findings

The Albanian Association for the People with Hearing Impairments (ANAD) and ADRF contacted the Albanian Television Station (TVSH), but sign language was not included in any of the programs broadcast in 2004-2006.

Area V: Legislation

Objective 1. Ensure full equality for people with disabilities through improvements in the legislation on social services, education, housing and telecommunication.

Measure 1.4. Improvement of the construction-related legislation. Preparation of a new article in the basic law on construction on the removal of accessibility barriers.

Timelines: 2005

Implementing institution: MPWTT

Findings

An article on accessibility has been suggested for inclusion in the new bill on Urban Planning which is being drafted. The final version of the bill has not yet been prepared.

Measure 1.5. Improvement of the existing legislation on transport, aiming at the removal of the transport barriers

Timelines: 2006

Implementing institution: MPWTT

Findings

No new legislation was drafted and passed in 2005-2006

Measure 1.6. Preparation of technical standards for public transportation which include disability and accessibility measures.

Timelines: 2006

Implementing institution: MPWTT

Findings

The technical standards have not yet been prepared.

Measure 1.7. Amendments to the Road Code and technical specifications for the utilization of transport

vehicles to ensure disability mainstreaming.
Timelines: 2006
Implementing institution: MPWTT

Findings

The amendments to the Road Code have yet to be developed.

Measure 1.8. A manual will be prepared and published on the modifications of public infrastructure to ensure accessibility.
Timelines: 2005-2007
Implementing institution: MPWTT

Findings

The Department of Norms and Standards at MPWTT reports to have finished about 30% of the work on the manual.

Results of the Survey Conducted with People with Disabilities and Their Family Members

The following tables provide the results of the survey divided by respondent category (individuals with disabilities and family members of individuals with disabilities). As you will notice from the data provided in the tables, there is little variability in the responses between the two groups. However, individuals with disabilities, with one exception (see Table 6 on reserved parking) perceive the situation to be worse than the family members.

The pie charts illustrate the total responses for each response category for each survey question. As the figures show, most of the responses for each question indicate the perception of total lack of accessibility. However, a close study of the data reveals that in two areas, accessibility of public buildings (see Fig. 1) and home adaptations (see Fig. 6) about one in 6 and 8 respondents respectively report full or almost full accessibility. This is a welcome change. In addition, with the exception of one area, that of reserved parking (see Fig. 4), one in 5 up to one in 3 of the respondents believe that some accessibility features have been developed in various environment categories included in the survey. Please see the following tables and charts for more detailed information.

Table 2
Perceived Accessibility of Public Buildings*

Level of measurement	Percentage of family members	Percentage of individuals with a disability
Most of the buildings	4.3	0
Some of the buildings	17.1	14.8
Few of the buildings	40.0	33.3
None	38.6	51.9
Total	100.0	100.0

Note: * The question asked was: "Do you find all environments of public institutions wheelchair accessible?"

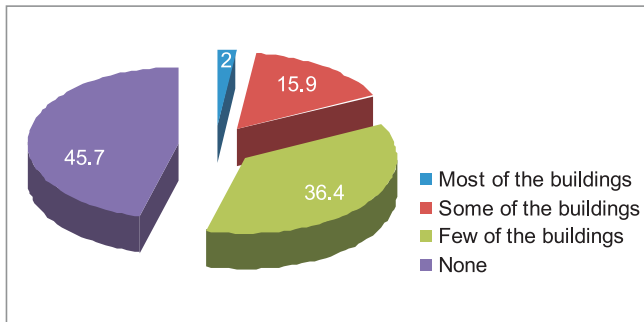


Fig. 1. Percentage of surveyed family members and individuals with a disability that perceive public buildings to be accessible.

Table 3
Perceived Accessibility of Streets, Sidewalks and Bridges*

Level of measurement	Percentage of family members	Percentage of individuals with a disability
Most of them	2.8	0
Some of them	5.6	8.6
Few of them	33.8	28.4
None of them	57.7	63.0
Total	100.0	100.0

Note: *Do you find streets, sidewalks and bridges wheelchair accessible?

Fig. 2. Percentage of surveyed family members and individuals with a disability that perceive streets, sidewalks and bridges to be accessible

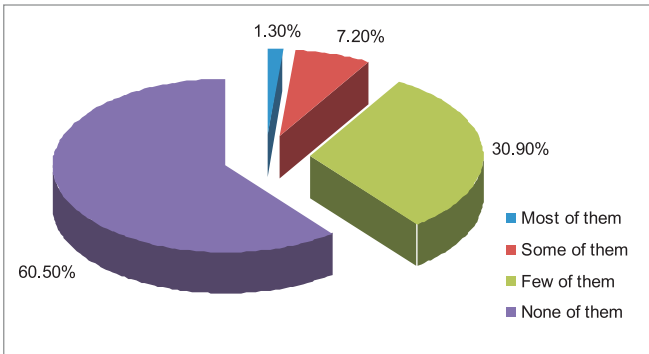


Table 4
Perceived Accessibility of Town/City in General*

Level of measurement	Percentage of family members	Percentage of individuals with a disability
All of the city/town	0	1.3
Most of the city/town	5.8	3.8
Some of the city/town	5.8	5.1
A little of the city/town	31.9	26.6
None of city/town	56.5	63.3
Total	100.0	100.0

Note: *The question was, “Can people with a disability go everywhere in their town/city?”

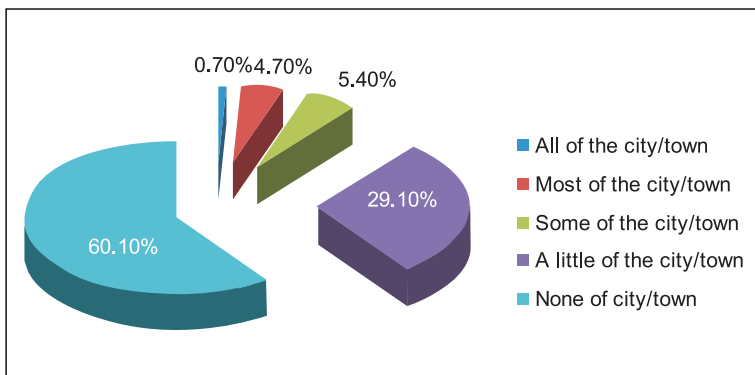


Fig.3. Perceived accessibility of the city/town in general by all survey respondents.

Table 5
Perceived Availability of Reserved Handicap Parking*

Level of measurement	Percentage of family members	Percentage of individuals with a disability
A few of them	4.2	7.6
None	95.8	94.0
Total	100	100

Note *:The question was, “Are there any reserved parking spaces for people with disabilities?”

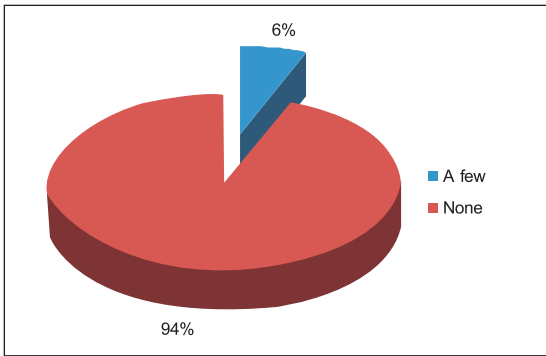


Fig. 4. Perceived availability of reserved parking for people with disabilities by all survey respondents.

Table 6
Perceived Accessibility of Recreational Space*

Level of measurement	Percentage of family members	Percentage of individuals with a disability
Some	4.2	2.5
A few	25.4	22.5
None	70.4	75.0
Total	100	100

Note: This includes theaters, outdoor and indoor stadiums, parks, sports and play grounds, etc. The question asked was, “Have people with disabilities been ensured accessibility and service in cultural buildings, parks, sports ground and other recreational spaces in town?”

Fig. 5. Perceived accessibility of recreational space and buildings by all survey respondents.

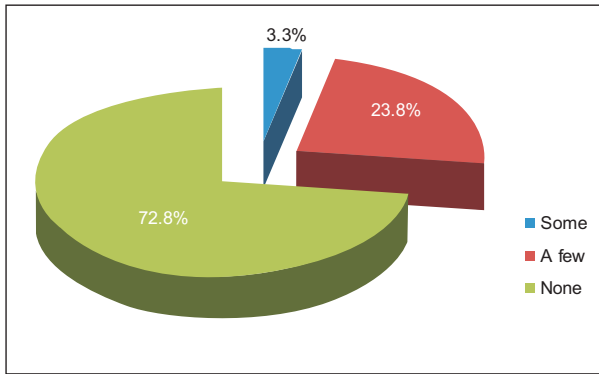


Table 7
Perceived Home Accessibility*

Level of measurement	Percentage of family members	Percentage of individuals with a disability
Fully	6.0	2.6
Mostly	9.0	9.0
Somewhat	6.0	9.0
A little	33.8	29.5
Not at all	43.3	50.0
Total	100	100

Note*: The question asked was, “To what degree is the house/apartment in which you live accessible?”

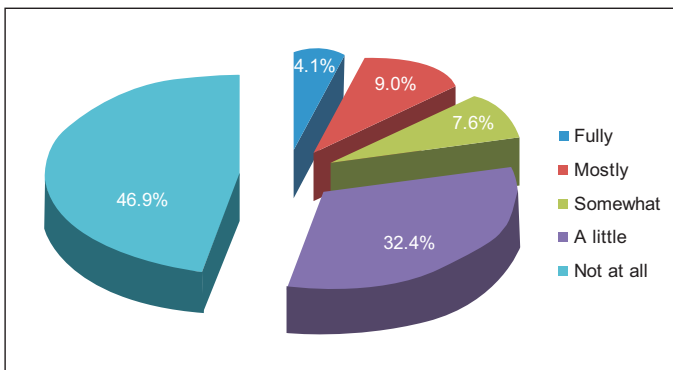


Fig. 6. Perceived home accessibility of the total survey respondents.

As Fig. 7 shows, the comparison of the responses of total respondents indicates that, while about half of the respondents believe that there is complete lack of accessibility in all public and private buildings and spaces, the three primary areas where intervention is urgent are, (a) reserved parking, (b) recreational space/buildings and (c) streets, sidewalks, bridges.

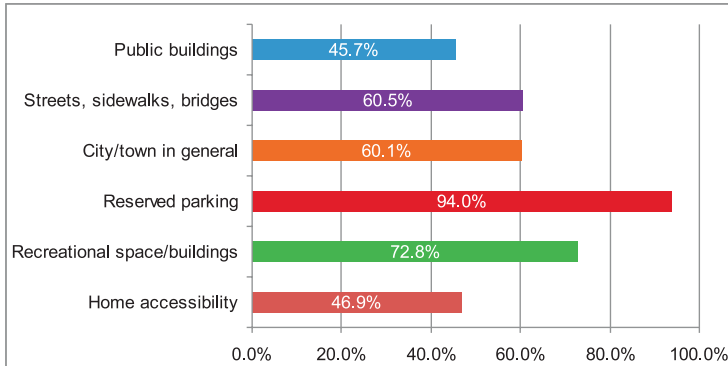


Fig.7. Comparison of responses regarding total lack of accessibility in various environments.

Site Survey Notes

The sites surveys included streets, public buildings, such as government buildings, health services, educational institutions and recreational buildings and spaces, as well as homes built with public and private funding. The site surveys were conducted in Tiranë, Shkodër, Korçë, Elbasan, Vlorë and Durrës. Almost all of the streets and sidewalks in the cities observed are not accessible. In most of the cases there are no ramps and the sidewalks contain various obstacles that make wheelchair use almost impossible. There are no street crossing signals for people with visual impairments and no reserved parking for people with disabilities. Additionally, none of the public transportation means are wheelchair accessible. However, there are a few signs of change. A few of the reconstructed sidewalks in Tiranë and Shkodër do have ramps.

All the public health care centers in Tiranë and the other cities are inaccessible. There are steps at the entrance and no elevators for the upper floors. All the educational buildings (k-12 and universities) are multi-story buildings and contain no elevators (the building of the College of Civil Engineering is no exception). Most of them have steps at the entrance. The renovated schools in Tiranë do have entrance ramps, but most of them do not meet the standards of Architectonic Rules for People with Disabilities. All cultural and recreational buildings and spaces are inaccessible. Some of them do contain a ramp at the entrance, but that

does not meet the standards of Architectonic Rules for People with Disabilities. None of the homes built with public funds have accessibility features. Very few of the homes built with private money do have accessibility features at the request of the owners. However, most of the modifications do not meet the standards of Architectonic Rules for People with Disabilities.

Identified Challenges

The interviews with central and local government employees, as well as the focus groups identified the following challenges for the implementation of the NSPWD in the area of accessibility:

1. There is no clear understanding of the specific responsibilities of the institutions of central and local government for the implementation of NSPWD in the area of accessibility.
2. Most of the central or local government institutions included in this study do not have a person/unit/division charged with the responsibility of ensuring the enforcement, implementation and/or monitoring of NSPWD in the area of accessibility. In a few cases this has been an added-on responsibility which has been regarded as an overload. Additionally, official disability accessibility data are not collected and/or reported.
3. Many of the construction experts lack basic knowledge regarding disability accessibility.
4. No funding has been requested and/or allocated for accessibility features.
5. NSPWD has identified international donors as a source of funding. The international aid offered in the field has not been consistent in the period under review (2005-2006).
6. People with disabilities and representatives of their organizations are not invited to participate in the decision making process and they are not included in the monitoring process either.

Discussion

As the evaluation of the status of the implementation for each measure revealed, the progress for the implementation of the NSPWD has been very slow. None of the measures that were to be completed by 2006 were fully implemented and little planning for the measures to be implemented beyond 2007 was described by those interviewed. Site surveys and the responses of the survey conducted with

people with disabilities and their family members confirmed that much more needs to be done to ensure the removal of architectonic and other barriers for people with disabilities and guarantee their participation in all aspects of life as it has been provided in the NSPWD.

Why were the measures of the national Action Plan of the NSPWD, a government approved document, not fully implemented by the central and local government institutions? This may be explained with reasons germane to the organization of the local and central government, lack of expertise as well as the awareness for the need of the community at large. The lack of checks and balances in the central and local government in Albania has produced a generally recognized atmosphere of lack of enforcement of government decisions in many fields. This situation is aggravated more due to the frequent changes of experts working for the local and central government which have produced loss of trained capacity. Additionally, the recent transfer of power from the central to the local government in the context of decentralization has yet to be accompanied by clear transfer of responsibilities. This is true of all responsibilities assigned to MPWTT, Ministry of Education and Sciences, and Ministry of Health.

Another major issue is related to the building experts. Most of them have insufficient knowledge of the international disability accessibility standards as little knowledge in the area is included in the curricula of the civil engineering programs of Tiranë University. Furthermore, many of the architects and builders are either not aware of the requirements of the Albanian legislation regarding accessibility or choose to ignore them in the cases when there are no administrative structures which control and enforce the implementation of the said rules. The third reason for the lack of the implementation of the National Action Plan of the NSPWD may be attributed to lack of any administrative unit/structure/employee at the local and central government structures that have been charged with the responsibility of ensuring the implementation and/or the monitoring of the implementation of the NAP of the SPWD. And, finally the community at large, has yet to recognize disability accessibility in the context of universal design as an issue that concerns everybody in the community which warrants a community response.

The work started in the municipalities of Tiranë, Durrës and Shkodër, as well as by the Ministries of Health and Education and Sciences to include accessibility features in some of the building and renovation projects is a hopeful indication for the wind of change. Many of the newly renovated sidewalks in Tiranë neighborhood streets and the ramps at the renovated schools, day care centers and kindergartens are good examples. So are the newly approved apartment buildings (built with public or private funding) in Tiranë, Durrës, and Shkodër which have accessibility

features. The initiative of the Ministry of Health to create an official document that delineates specific responsibilities for the implementation of the NSPWD is yet another example. The small budget earmarked for street signs for people with visual impairments in Elbasan is also a good start.

The little progress identified may also be attributed to the role played by various disability organizations at the local and national level. For example, in 2005, ADRF organized training workshops in Elbasan, Vlorë, Korçë, Durrës, Tirane, Shkodër, Lezhe, Pogradec, Berat and Fier with the topic, “Modification of the Physical Environment to Provide Accessibility.” The participants were representatives from the technical divisions of the local Council for the Regulation of the Territory as well as experts in the departments of construction and public transportation in regional and municipal government. The participants were provided knowledge on the Albanian legislation on disability accessibility and the legal packet “Urban and Architectonic Norms and Regulations for People with Disabilities.”

Recommendations

To ensure the implementation of the National Action Plan of the NSPWD according to its set deadlines the following measures are recommended to be taken:

- Review and update the NSPWD with new deadlines for the incomplete measures and more specific and updated responsibilities for all parties involved from the central and local government administration. Add the responsibility of government administration in all the cases where only NGOs have been charged with the implementation.
- Include people with disabilities in the process of the implementation, enforcement and monitoring at the central and local government.
- Specify responsibilities of various central and government structures involved in the implementation, enforcement and monitoring of the NSPWD as well as data collection and reporting, and build an accountability ladder. Train the people involved and prevent their removal.
- Earmark funds for disability accessibility in all government funded projects.
- Do not approve building designs that do not have disability accessibility features which meet the national standards.
- Develop a local and national databank of all public buildings on the level of their accessibility with a specification of all accessibility features.

Introduction

Albania has had for a long time a medical approach to disability, which is slowly taking on more social aspects. This new approach explains the lumping together in the Action Plan of the social and health care services. However, currently, public health care institutions such as the hospitals and polyclinics play a very important role in the daily life of many Albanians with a disability as they provide the only and major identification-habilitation-rehabilitation service and for this reason this part of the monitoring study will be solely devoted to health care. The National Strategy on People with Disabilities recognizes the paramount role of government structures on public health in the lives of people with disabilities by assigning them responsibilities for the implementation of 25 measures of the National Action Plan in the areas of accessibility, prevention, early identification and early intervention, disability certification, rehabilitation, social policies, research and disability related statistics. Ministry of Health, the Institute of Health Insurance and the departments of health of the local government have been charged with specific tasks which aim at ultimately improving the quality of life for people with disabilities.

The implementation of the NSPWD in the field of health care in the area of accessibility is guaranteed to ensure accessibility of all existing public health care buildings through the necessary modifications and the design of new buildings with all required accessibility features that meet the national standards. Prevention, early identification and early intervention are also objectives of the NSPWD, which are to be realized by improving the existing medical services and adding new ones as well as creating multidisciplinary services. The improvement of the process of the disability certification involves changes in the model used and revision of the criteria. The main developments are expected in the services of health care and

rehabilitation, both in the quality of care and the change in its philosophy. The intervention in the area of research and information system covers the conduct of epidemiological studies concerning prevalence and incidence of disabilities, creation of systems of data collection and reporting, as well as the identification and dissemination of best practices. The following are the objectives of the NSPWD that relate to health care:

Intervention Area II: Services

1. Prevention of Disability at the earliest possible stage through early detection, and treatment of the children aged 0-6 years.
2. Provision of coordinated health and social services by the public and non-public institutions for the people with disabilities in accordance with a shared philosophy of rehabilitation and integration.
3. Ensuring equal opportunities in the provision of basic health care services for people with disabilities.
4. Improvement of the rehabilitation services targeted at people with disabilities
5. Information on Assistive Technology and equipment of people with disabilities with the appropriate assistive technology.

Intervention Area V: Legislation and Research

1. Improved access and simplification of the procedures related to people with disabilities.
2. Ensuring relevant and updated information and data on number, typology and social situation of people with disability.
3. Support for the research programmes on the economic, social, and rehabilitation issues related to people with disabilities

The level of the achievement of these objectives in respect to the measures intended for their implementation in the National Action Plan will be one of the goals of this study. The other one will be the depiction of the current issues related to health care

services for people with disabilities from the perspective of the individuals with a disability and their family members. Both parts of the study are complementary and are intended to help the reader gain an understanding of the progress made in the period under review (2004-2006) and the challenges that have yet to be overcome to secure the full implementation of the NSPWD.

Methodology

Design

The first study is a program evaluation study, focused on the implementation of each measure of the National Action Plan. Both qualitative and quantitative data were collected cross-sectionally through written questionnaire as well as phone and in-person interviews with government employees. The second study is a written and oral survey, with mostly close-ended questions.

Informants and Participants

Most of the informants regarding the degree of implementation of the measures of the National Action Plan were government employees, experts in the Ministry of Health and Institute of Health Insurance who chose to collaborate with the evaluation team. The responses to the survey showed that there are no experts in the respective institutions who are responsible for the follow up, monitoring, or data collection on the implementation of the NSPWD.

Three hundred (300) individuals participated in the survey on the perception of the status of health care for people with disabilities; 50 of them (17%) were individuals with a disability, and the rest (n=250) were family members, mostly parents. The sample of parents had a good distribution from several cities of Albania (as Table 9 shows) and it had a good representation of various types of identified disabilities: intellectual disabilities, mental health, physical health, as well as visual and hearing impairments (see Table 10). The sample of individuals with a disability came only from three cities. Almost all the children (96.3%) and most of the participating individuals with a disability (79.2%) received the disability benefit or the invalidity pension. The survey participants were invited to participate by the local experts. Their participation was voluntary. To protect their identify no personal identifying information was collected in the survey.

Table 8
Distribution of Survey Participants per Geographic Area

District	Family Members		Individuals with a Disability		Total Respondents	
	Number	Percentage	Number	Percentage	Number	Percentage
Tiranë	34	13.6	26	52.0	60	20
Durrës	25	10.0			25	8
Korçë	76	30.4			76	25
Elbasan	40	16.0	20	40.0	60	20
Vlorë	37	14.8	4	8.0	41	14
Shkodër	38	15.2			38	13
Total	250	100.0	50	100	300	100

Table 9
Distribution of Disability Categories for the Children of Participating Parents

Disability Category	Frequency	Percentage
Intellectual disabilities	80	32.0%
Physical illness	38	15.2%
Hearing impairments	31	12.4%
Visual impairment	28	11.2%
Epilepsy	27	10.8%
Cerebral Palsy	20	8.0%
Mental Health	12	4.8%
Work Accidents	2	0.8%
Other	12	4.8%
Total	250	100%

Materials

Structured questionnaires were used to collect the data on the degree of the implementation of the National Action Plan. The questions asked for the degree of implementation as well as details on the work done.

The questionnaire for the people with disabilities and family members consisted of close-ended questions. A Likert scale of 3-5 categories was used to measure their perception of the issues in the health care. In some cases, different options were offered to choose from.

Procedure

The government employees were contacted by phone and in person interviews were set up. Additionally, they were given the written questionnaires in advance of the interview.

The survey with people with disabilities and their family members was conducted in several forms: some people completed the written questionnaire and returned it to the local expert, some were interviewed over the phone and others in person. In the latter cases the questionnaires were completed by the local expert. The data were entered and processed in SPSS.

Results

This part of the report will include the findings related to the implementation of the 2005-2006 measures of the Action Plan of the NSPWD measure per measure. As this study concerns health care in particular, only findings from health care institutions will be reported, although the NSPWD has assigned the responsibility to other government and public institutions in the country as well. The Ministry of Health, which is charged with the responsibility of implementing the National Action Plan measures that have been written in this section did not have any action plan for the period 2004-2006 and had not assigned the responsibility for the implementation, enforcement or monitoring of the NSPWD to any its departments/ divisions/ employees. As a result, it was difficult to receive complete official information on the implementation of most of the measures related to health care.

The second part of the results will present the perception of the status of health care for people with disabilities by people with disabilities and their family members. The results of both surveys are presented together through a narrative and are illustrated with graphs.

*Implementation of 2005-2006 Tasks, Preparation for 2007 Tasks**Intervention Area II: Services***Objective 1. Prevention of disability at the earliest possible stage through early detection, and treatment of the children aged 0-6 years.**

Measure 1.1. Establishment of inter-disciplinary teams for the drafting of programmes on early prevention of disability, identification of disability, and drafting of rehabilitation and reintegration programmes.

Timeline: Starting from 2004 - 2005

Implementing institution: (a) Ministry of Health, (b) Ministry of Labour and Social Affairs, (c) NGOs

Findings

A task force has been set up to work on the multidisciplinary assessment of children with developmental disabilities through a World Bank project. There are no programs in place for other disability categories due to insufficient funding and lack of expertise.

The Ministry of Health manages the National Center for Child Development and Rehabilitation in Tiranë (Kombinat). The Center has a number of multidisciplinary assessment teams. However, due to poor publicity, these teams are not fully utilized. Parents are generally unaware of their existence, or do not trust the effectiveness of services.

Measure 1.2 Establishment of the laboratory of molecular biochemistry and genetics for the pre-birth diagnostics in the gynecological hospital.

Timeline: Starting from 2004 - 2005

Implementing institution: Ministry of Health

Findings

The Molecular Biochemistry Lab and the Genetic Testing Lab are functioning. During 2004-2005 they met 25% of the need for the respective testing. The high cost of tests which are not covered by health insurance is the main obstacle to increased use.

Measure 1.3. Upgrading the genetics laboratory at the department of Pediatrics.

Timeline: Starting from 2004

Implementing institution: Ministry of Health

Findings

The Laboratory of Medical Genetics at the Children's Hospital was upgraded with new equipment at the cost of 100,000 Euros. Another similar laboratory was also upgraded at the Institute of Public Health at the cost of 200,000 Euros. The main problems these two labs are facing are related to inconsistencies in the availability of laboratory supplies.

Measure 1.4. Research on early prevention of disability. Preparation of information bulletins on early prevention.

Timeline: 2 times per year

Implementing institution: Ministry of Health

Findings

No studies have been conducted so far on the early prevention of disability.

The National Center for Child Development and Rehabilitation publishes the monthly bulletin "The Flowers of Life" which contains materials on the early prevention of disability. occasionally the monthly bulletin of the Department of Pediatrics at Tiranë University also publishes materials related to early prevention. No specification was made on the target audience and the number of copies circulated.

Objective 2. Provision of coordinated health and social services by the public and non-public institutions for the people with disabilities in accordance with a shared philosophy of rehabilitation and integration.

Measure 2.1 Provision of new services such as day care services, family and community-based services aimed at the integration of people with disabilities.

Timeline: 2005 - 2006 and continuous

Implementing institution: (a) Ministry of Health, (b) Ministry of Labour and Social Affairs / State Social Service, (c) Local Government Units

Findings

The Ministry of Health plays no part in the development of new integrated services for people with disabilities. The Ministry has not developed any pilot projects for such services.

Objective 3. Ensuring equal opportunities in the provision of basic health care services for people with disabilities

Measure 3.1 Review of the regulations on the provision and distribution of medical supplies to people with disabilities. A dedicated budget line will be established for people with disabilities

Timeline: 2004 - 2008

Implementing institution: (a) Ministry of Health, (b) Health Insurance Institute

Findings

The regulations for the provision and distribution of prescribed medications and medical supplies for people with disabilities have not yet been reviewed. The Institute of Health Insurance reimburses the expenses for a number of items. The reimbursement scheme is found inadequate by people with disabilities.

Measure 3.2. Review of the curricula of the family doctor. Inclusion of programmes on disability in the family doctor's curricula.

Timeline: Yearly

Implementing institution: (a) Ministry of Health, (b) Health Insurance Institute

Findings

The curriculum for the preparation of the family doctor has not been reviewed to include knowledge on working with people with permanent disabilities. Additionally, the job description for the family doctor prepared by the Health Insurance Institute does not contain any specific provisions related to the treatment of people with disabilities.

Measure 3.3 Analysis of the options to provide extended services for people with severe disabilities.

Timeline: Yearly

Implementing institution: Health Insurance Institute

Findings

The Health Insurance Institute has not conducted any study on the options of providing extended services to people with multiple disabilities.

Objective 4: Improvement of the rehabilitation services targeted at people with disabilities

- Measure 4.1.** Approval and implementation of a national programme for the establishment and functioning of rehabilitation services, which will gradually cover the whole territory of the Republic of Albania.
- Timeline:** Special Planning, 2005-2015
- Implementing institution:** Ministry of Health

Findings

The Ministry of Health has prepared a national strategy for the rehabilitative services which is accompanied by an action plan. The ministry is working towards its implementation in two directions: opening new centers and training the personnel who will work there, and securing the necessary funding in collaboration with potential donors.

- Measure 4.2.** Establishment of an accreditation system for the centers of early care, rehabilitation centers and training centers.
- Timeline:** Starting from 2005 -
- Implementing institution:** (a) Ministry of Health, (b) Ministry of Labour and Social Affairs

Findings

The National Center of Quality, Safety, and Accreditation of Health Institutions opened in Tiranë in March 2006. This Center has not yet created any health care standards for the accreditation of the centers for early intervention, rehabilitation or training.

- Measure 4.3.** Establishment of the vertical structures including local government units that will deal with people with disabilities at the central, regional and local level
- Timeline:** Starting from 2004
- Implementing institution:** (a) Ministry of Health, (b) Ministry of Local Government, (c) Ministry of Labour and Social Affairs, (d) Ministry of Education

Findings

The Ministry of Health has an information system which is functional from the bottom

up, and a dissemination system which is functional from the top down. However, this system has not yet been used for issues pertaining to people with disabilities.

Objective 5. Provide information to people with disabilities, their family members, experts, and caregivers on assistive technology that may be used by people with disabilities. Meet their needs with assistive technology equipment.

Measure 5.1. Provision of people with disabilities with the most suitable means and tools to enable them to benefit at the fullest extent from the public education and public health and integrated services

Timeline: Starting from 2005 –

Implementing institution: (a) Ministry of Health, (b) Ministry of Labour and Social Affairs/ State Social Service, (c) Ministry of Education, (d) NGOs

Findings

No information was provided by Ministry of Health on how its institutions have been involved in the implementation of this measure.

Measure 5.2. Support for the publication of leaflets and information materials on modern approaches towards disability.

Timeline: Starting from 2005 -

Implementing institution: (a) Ministry of Health, (b) Ministry of Labour and Social Affairs,/State Social Service, (c) Ministry of Education, (d) NGOs

Findings

Very limited support has been offered by the Ministry of Health for the publication of modern approaches to disabilities. Some bulletins of the institutions under the Ministry of Health have published some relevant materials. No specification was made on the number of pages published, the intended audience or the budget earmarked for the implementation of this measure.

Measure 5.3. Support for the establishment of the specialized information and resource centers dealing with disability so as to encourage well-distributed and harmonised public-private information coverage for Albania

Timeline: Starting from 2005 -
Implementing institution: (a) Ministry of Health, (b) Ministry of Labour and Social Affairs/ State Social Service, (c) Ministry of Education, (d) NGOs

Findings

The Ministry of Health has not supported the starting of any specialized research and information /or dissemination centers on disabilities.

Objective 6. Adequate service provision through local government units in compliance with the local government law and in line with the overall state policies on disability

Measure 6.1. Establishment of the vertical structures with the inclusion of the local government units in the social service provision with a focus on disability.

Timeline: Starting from 2005 -
Implementing institution: (a) Ministry of Health, (b) Ministry of Labour and Social Affairs/ State Social Service, (c) Ministry of Education, (d) NGOs

Findings

The Ministry of Health is not part of any vertical structures with the local government for the provision of services to people with disabilities.

Measure 6.2. Community treatment to replace residential treatment gradually. Training will be provided for the caretakers of the persons with hearing impairments and for the blind.

Timeline: Starting from 2005 -
Implementing institution: (a) Ministry of Health, (b) Ministry of Labour and Social Affairs/ State Social Service.

Findings

The Ministry of Health has not been involved in the transition process from residential institutions to community care. Additionally, none of its institutions has supported or initiates the training of caregivers of people with visual or hearing impairments.

Measure 6. 3. Day care centers will become primary service centers

Timeline: 2010
Implementing institution: (a) Ministry of Health, (b) Ministry of Labour and Social Affairs/ State Social Service

Findings

The Ministry of Health has no plans in place for its involvement in the implementation of this measure.

Area of Intervention V. Legislation and Research

Objective 1. Ensure full equality for people with disabilities through improvements in the legislation on social services, education, housing and telecommunication.

Measure 1.2. Preparation of a comparative study on the disability-related legislation
Timeline: 2005 - 2006
Implementing institution: (a) Ministry of Health, (b) Ministry of Labour and Social Affairs, (c) MPWTT

Findings

Neither the Ministry of Health, nor the institutions under it have participated in any study of the legislation on people with disabilities.

Objective 2. Improved access and simplification of the procedures related to people with disabilities.

Measure 2.1. Simplified procedures regarding the equipment of children with disabilities with teaching materials, exclusion from taxes, lower VAT.
Timeline: 2006
Implementing institution: (a) Ministry of Education, (b) Ministry of Health/ Social Insurance Institute.

Finding

The Ministry of Health has not been involved in the implementation of this measure.

Objective 3 Ensuring relevant and updated information and data on the number, typology and social situation of people with disability.

Measure 3.1. Collection and update of statistical data on people with disabilities

Timeline: Starting from 2006

Implementing institution: (a) Ministry of Labour and Social Affairs, (b) Ministry of Health, (c) Ministry of Interior, (d) local government Units, (e) NGOs.

Findings

The Ministry of Health collects data on the diagnoses provided by the commissions that determine the ability for work, but no other data related to people with disabilities.

Measure 3.2. Periodical studies on people with disabilities, their needs and the disability related services

Timeline: Yearly

Implementing institution: (a) Ministry of Labour and Social Affairs, (b) Ministry of Health, (c) INSTAT, (d) Ministry of Local Government/ local government units

Findings

No periodical studies on the needs of people with disabilities have been conducted by the Ministry of Health or any of its institutions. The needs of people with disabilities were not included in the Annual Reports of the Ministry of Health.

Objective 4. Support for the research programmes on the economic, social, and rehabilitation issues related to people with disabilities

Measure 4.2. Studies on the types of disabilities, distribution patterns and measures to prevent them.

Timeline: 2005 - 2015

Implementing institution: Ministry of Health

Findings

No study has been conducted so far.

Measure 4.4. Publication of the list of disabilities by categories in Albania.

Timeline: starting from 2005
Implementing institution; (a) Ministry of Labour and Social Affairs, (b) Ministry of Health, (c) Ministry of Local Government, (d) NGOs.

Findings

No list of the categories of disabilities has been published so far.

Results of the Survey Conducted with People with Disabilities and Their Family Members

As stated previously, two different surveys were conducted, one with individuals with disabilities and the other one with family members of individuals with a disability, mostly parents. The responses to questions are grouped thematically: (a) *disability medical identification and certification*, (b) *treatment of people with disabilities in hospitals, health care centers and at their own home*, and (c) *economic hardship caused by the disability in the family*. The results of both surveys are reported in a complementary fashion to give the reader a good understanding of the issues from both perspectives and they are illustrated with graphs.

Disability Medical Identification and Certification

About one third of the parents (33.9%) reported that their child was diagnosed with a disability at birth or immediately after. The early identification occurred most frequently in the hospital where the child was born (48.2%) or in the Children's Hospital (32.5%). As Fig.8 shows, the Mother and Child Centers and the family doctor played a smaller role. For the other two thirds of the parents, the disability identification occurred mostly when their children were two years old, with a mean age of 5 years. The disability was mostly identified in the Children's Hospitals (37.9%) and by the family doctor (14.7%). Please see Fig. 9 for the values of the other categories.

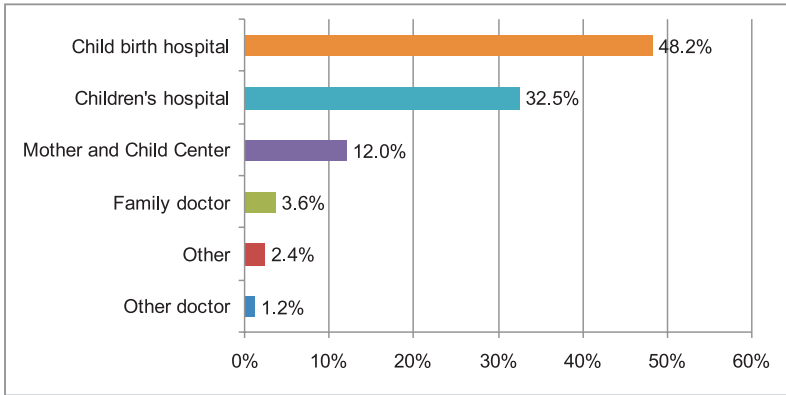


Fig. 8. Disability identification for neonates.

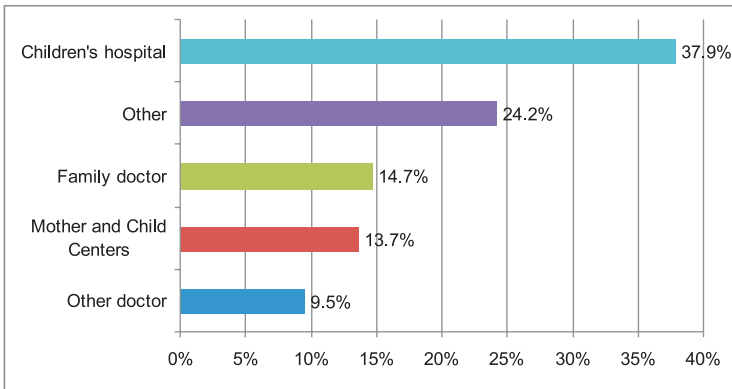


Fig. 9. Identification of the disability after one year of age

The process of getting the right diagnosis is reported to be complex. Almost half of the parents (n=102, 42.1%) report that they had to see 2-4 doctors, and almost one in five of them (n=45, 18.6 %) reported that they had to see more than four doctors. Only one in five parents (n=48, 22.6%) reported that they had to do genetic testing as part of diagnosis for their child. Most of them (n=40, 85.1%) were able to do it. Responding to the question whether it had been difficult to get it done, only six of them (15%) said that it has been a little or not at all difficult. The others reported various degrees of difficulty, as illustrated in Fig. 10.

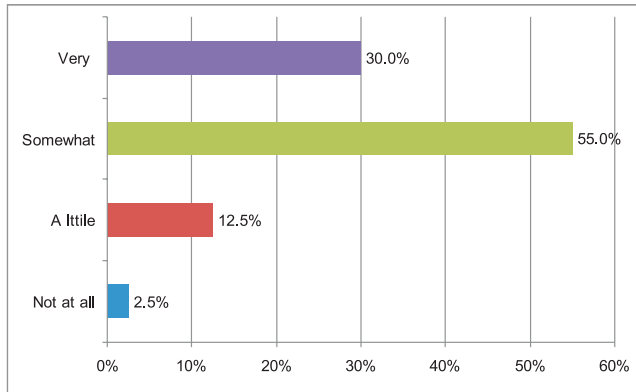


Fig. 10. Degree of difficulty to get genetic testing done.

In order to be eligible for the disability benefit or the invalidity pension, the individuals with a disability need to be examined by a board of doctors, called the Medical Commission that Determines the Ability for Work. For more than half of the family members with a disability ($n=148$, 63.2%) the process of medical certification was lengthy. They were able to become eligible for the disability benefit more than two years after being diagnosed. Only about one in seven (14.5%) reported they were found eligible for the disability benefit less than one year after the correct diagnosis. More than half (55%) of the surveyed people with disabilities stated that they need to go through the procedures of the Medical Commission that Determines the Ability for Work every year, although their disability is permanent.

*Treatment of People with Disabilities in Hospitals, Health Care Centers
and at their Own Home*

Medical care plays an important part in the lives of people with disabilities that were involved in the survey. The family members reported that 90.3% of their children were followed regularly by the Mother and Child Centers, 89.2 % saw a doctor or a dentist regularly and 46.4% had been hospitalized. Almost half of the individuals with a disability that participated in the survey stated that their treatment in hospitals and doctor's/dentist's offices was fair, with only 8% of them considering it good or very good (see Fig.11). However, only one in 20 of the family members reported any notable differences in treatment for their family members with a disability due to the disability as Fig. 13 illustrates. The number is higher from the point of view of people with disabilities, one in eleven of whom report negative attitudes by medical personnel (see Fig. 12). The major problems reported are needing to give money for better service (70%) and lack of accessibility (61%).

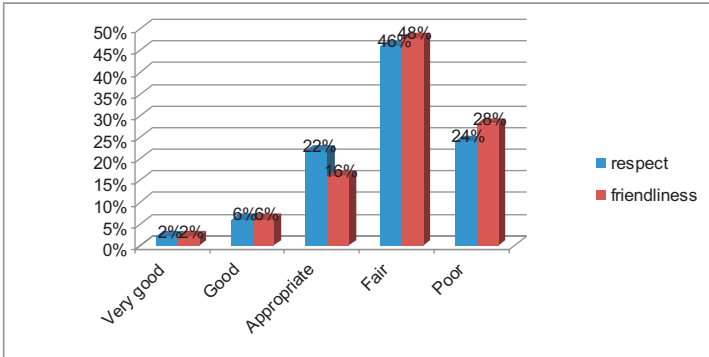


Fig.11. Perception of the quality of the reception in hospitals and health centers.

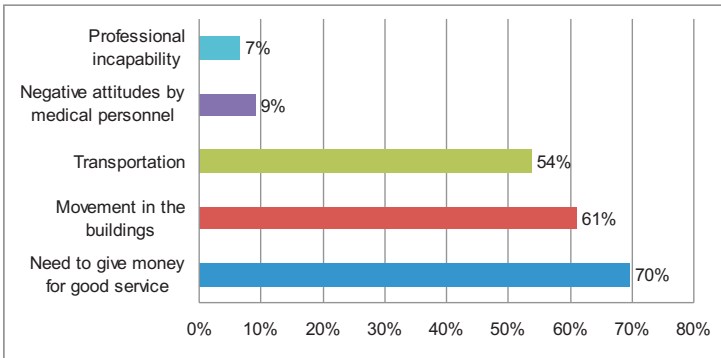


Fig. 12. Main problems faced by people with disabilities in health institutions

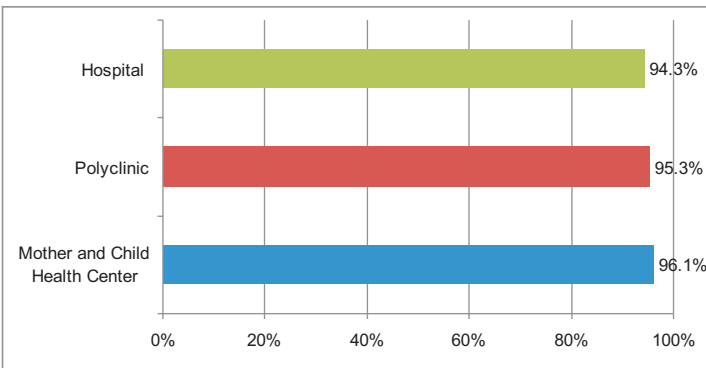


Fig.13. Percentage of parents reporting no child discrimination due to disability in medical institutions.

One in six people with disabilities that participated in the survey (17.4%) reported to have been seen by a doctor or a nurse in their own home, although all people with disabilities are entitled to. Generally, people with disabilities are unhappy with the service of the family doctor, with 78% of them (i.e., about four in five individuals) reporting that the family doctor had not been helpful at all (see Fig. 14).

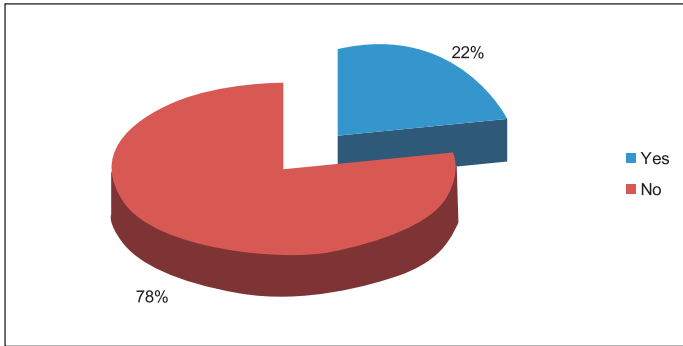


Fig. 14. Perceived helpfulness of family doctor.

Half of the family members with a disability of the family survey respondents (59.1%) are on medication, which, according to the responses of 63.3% of individuals with disabilities are easy to obtain. However, this is not true for about one in nine of the respondents (12.2%) who encounter many difficulties (see Fig. 15).

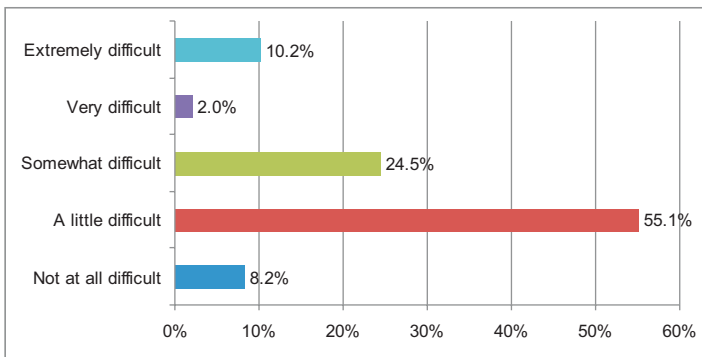


Fig.15. Reported degree of difficulty to obtain medications by individuals with a disability.

Economic Hardship Caused by the Disability in the Family

Families that have a member with a disability experience economic hardships; only about one in five families who participated in the survey (19.1%) reported their economic condition to be good or very good (see Fig. 16), the others live in poverty. Half of them (52%) acknowledged the disability of the family member as the main cause of their poor economic condition. Two are the main reasons recognized by the survey: (a) high number of non-working mothers for caregiving reasons (56.3%, see Fig. 17) and medications which are paid for from the family budget for 90.9% of the respondents. About one in four (23%, see Fig. 18) pay 2,000-3,000 lek per month (more than one fourth of the disability benefit). To meet all the needs of the member with a disability, the disability benefit should be doubled for 11.5% of the family members, tripled for 31.2% of them, quadrupled for 26.5% and more than quadrupled for 28.6% (see Fig. 19).

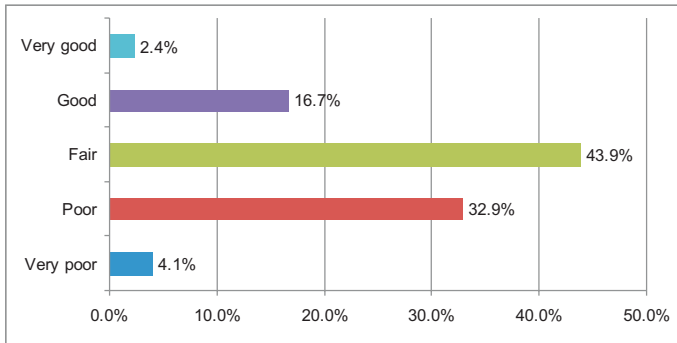


Fig. 16. Self reported economic condition of participating families.

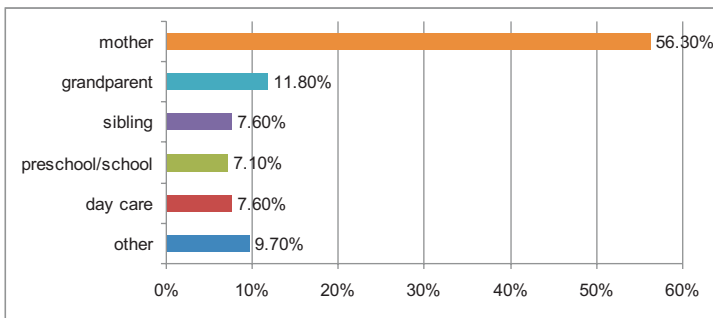


Fig. 17. Reported source of care and supervision during the day

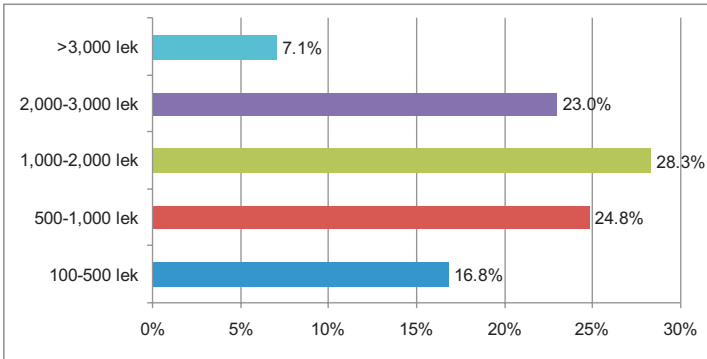


Fig.18. Amount of money spent on medications.

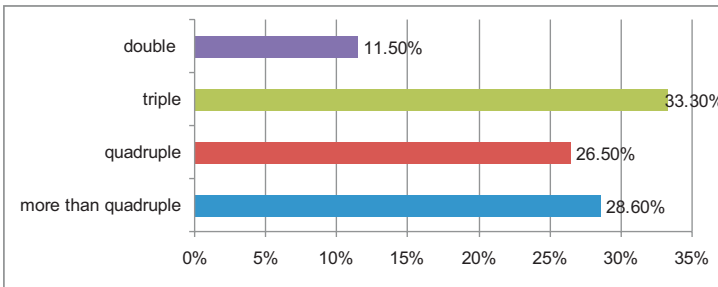


Fig. 19. The amount of disability benefit that would meet the needs of PwD.

Discussion

In general, the results show a picture very similar to the pre-Strategy era in regard to health care services in Albania for people with disabilities. The only exception is the improvement of prevention and early identification services through appropriate testing. The current Medical and Rehabilitation package of services does not reflect the measures that were to be implemented in 2004-2006. The medical and rehabilitation services continue to be offered in inaccessible environments, by inadequately prepared staff, and without specific established standards and protocols. Rehabilitative and mental health services for children and adolescents are almost inexistent. Although the medical personnel show real interest in receiving more training to update their approach to assessment, diagnoses and treatment of people with disabilities in a multidisciplinary approach, very little has been done to start the process, something which was admitted by the experts of the Ministry who completed the questionnaires. Lack of financial resources remains the main

governmental excuse for not having implemented most of the measures of the National Action Plan of the NSPWD, but issues of lack of organization also need to be taken into account. Very probably, lack of clarity on the division of responsibilities of different actors is the main source of the inaction of the Ministry of Health for many of the measures of the National Action Plan. The 2007 Action Plan of the Ministry of Health will hopefully improve the situation in the near future.

The results of the survey of the parents and individuals with a disability show the importance health care has in the lives of people with disabilities on account of the lack of multi-disciplinary community services, as well as the challenges families and individuals encounter in ensuring good quality services: Difficulty in getting genetic testing, inefficiency of family doctors, few medical services in the home while the health care centers (both polyclinic and hospitals) are inaccessible, difficulty in finding the right medications and wide-spread corruption of medical personnel that require money to provide the service they are supposed to provide for free. or a small fee. The medical commissions which assess the ability to work are obsolete, as their main goal is to certify the disability without providing guidance on the services needed. Furthermore, the current rules and regulations require people to have their permanent disabilities certified annually, which increases the number of barriers to people with disabilities. The cost of having a family member with a disability is high and it has a negative impact on the economic situation of most families that have a member with a disability who live in poverty. As the government disability benefit only covers less than half of the needs of the individuals, and there are no adequate supportive services, family continues to carry a major burden of care without appropriate support from the government.

The surveys also showed that generally speaking, stigma against people with disabilities is not considered as a factor that has an impact on the quality of services that people receive. Accessibility, transportation, limited financial resources and the corruption of the health system are the true issues people with disabilities face daily. The implementation of the National Action Plan will address many of these factors.

Recommendations

In order to implement all the health-related measures of the National Act Plan, make up for lost time and successfully plan in advance for future measures we propose the following recommendations to the Ministry of Health, as the main responsible government institution:

- Make the necessary changes to the National Action Plan to reflect new deadlines for measures that have not been completed and redistribute responsibilities.
- Perform a rapid cost evaluation for the full implementation of the National Action Plan of the NSPWD and include the cost for each year in the Ministry budget.
- Start a task force to draft the amendments for internal regulations of health institutions in the country.
- Conduct a training needs assessment study for health professionals in the field of medical-rehabilitation services.
- Involve the Institute of Public Health and other research institutions in designing and implementing needed research and public dissemination of information.
- Initiate a thorough revision of Disability Assessment Criteria on the basis of already existing principles shaped in World Health Organization Documents, and taking a leadership role in the needed reform of Disability Assessment Process (involving especially the Ministry of Social Protection and Ministry of Finance, besides others).
- Review and update the division of responsibilities for the implementation of the National Action Plan taking into account the current decentralization process in Albania.

Introduction

Services for disabled people are improving but still fall far short of NSPWD objectives. This NSPWD monitoring survey reveals notable discrepancies between the views of disabled recipients and those of service providers on the quality of social services. Providers tend to focus on their achievements, whereas beneficiaries emphasize the difficulties with and limitations of the services they get. Evaluating disability services has not been easy due to the scarcity of information and records about the situation of disabled people. More time will be needed before the National Strategy and Services Standards for disabled people are respected by all parties involved in the disability field.

In general, higher numbers of disabled received a wider range of services as required by law,⁴ but the quality of services provided to disabled people is still seen as problematic. Progress towards upholding standards for service quality established in 2006 is slow and will require more time, training and financial resources. While disabled people and their families tended to see the intervention in legal framework, new laws and standards protecting disabled persons as positive steps, they still find fault with social services. They consider disability benefits inadequate and cite such problems as their inability to pay for care, the inadequacy of the home services for disabled persons, the low quality of information and orientation, the need for treatment under individual programs, as well as the need to train service personnel and upgrade the institutional environments.

The social service situation requires an urgent rethinking of the Action Plan, in order to ensure that it is properly implemented, it calls for more pressure on institutions responsible for its implementation with the aim of meeting standards, improving the

4. Law no 9355 date March 10 2005 on "Social Help and Services

regulation of the services, diversifying the array of services offered to the disabled people based on the community needs, continuous improvement of the service centers professional capacities as well as engagement of the disabled people in the community life.

Summary

Social services for the disabled have improved and while the standards for those services have not yet been achieved, there is reason for optimism. As one of the main elements of state social services, the services for disabled persons operate now all over the country and include programs such as payment for the disabled and their care takers, services provided through social institutions and residential and community services. These services were set up to function in compliance with laws and policies prepared by a number of parties interested in the rights of disabled people. This chapter tracks the implementation of the National Disability Strategy as it relates to services as well as the achievement of its objectives in order to encourage its implementation and consequently improve the quality of the lives of disabled people and those of their families.

Based on international conventions ratified by Parliament as well as on the Constitution, Albania's legal framework recognizing and protecting the rights of disabled people is considered to be complete. Seen as a singular achievement in the disability field, this legal framework was the product of years of collaboration among the disabled and their families, non-profit organizations and officials. That collaboration raised public awareness about the needs and rights of the disabled.

Article 25 of the Albanian Constitution guarantees the basic rights and freedoms of the disabled people. Article 59, section e) and f) of the Albanian constitution state "the government within its constitutional competencies an other means in its disposal as well as in compliance with the private initiative aims at: e) taking care and helping the elderly, orphans and invalids, f) health rehabilitation, special education and integration in society of disabled people as well as continuous improvement of their living conditions. Although its language on disabilities is imprecise, mostly because of the time constrains under which those provisions were drafted, the Albanian Constitution does provide the necessary foundation to create more specific laws and regulations.

Social services for disabled people are established in the following laws and policies:

The Law on "Social Assistance and Services" (no. 9355 date 03. 10. 2005) regulates the functioning and administration of social services at the communal and residential level and categorizes them based on their organization and functioning.

The Social Services Standards approved by Decision no. 658 date 10. 17. 2005 of the Council of Ministers defines the standards for the social services that must be respected by all social services.

The Standards for Services and Care-Giving to Disabled Persons approved by Decision no 822 date 12. 06. 2006 elaborates the general standards of the social services for the disabled people in order to protect their rights and fulfill their needs.

The Social Services Strategy (2005- 2010), approved by Decision no. 265 date 04. 28. 2005 of the Council of Ministers, defines how the decentralization process should enhance local government functions for establishing, managing and enriching the social services based upon community needs.

The National Disability Strategy (2005 - 2010) defines concrete objectives for the provision of services for disabled people according to age groups. The main objectives of this strategy are enumerated below:

- Provision of services for the disabled people in compliance with their age groups by public and private responsible institutions as well as fulfillment of disabled people needs for rehabilitation and integration in the family and society life.
- Service distribution under the local government care in compliance with the law on local government functioning, social policies and disabled people needs.
- Disabled people, their families, experts and care takers informing on the technology advancement and the usage of new inventions with the aim of fulfilling every disabled person needs.
- Establishment of residential centers, community based and home services, which later will be the main services for the disabled people
- Continuous training of personnel of service centers and parents of people with disability on disabled people treatment

The following steps need to be taken to fulfill the above-mentioned objectives

- Provision of new care taking services
- Experimenting with new services and of course controlling of these services to make sure they are effective. Upon reassurance that the services are effective, they should be distributed all over the community
- Drafting of regulations and standards for the disabled people services emphasizing disabled people's right to get the proper services be respected and treated with dignity as well as assisted to preserve and enhance their abilities.

- Reviewing of residential public institutions' regulations and rules about old and very sick disabled people who are not provided for a caretaker at home.
- Establishment or adaptation of structures from the center to the base, including local government organs, to treat and offer social services to disabled people.
- Training of caretakers as a service alternative for the disabled people.
- Encouraging and subvention of informing and orienting publications for the disabled people.
- Promotion of temporary/respite care service centers instead of residential ones.

Methodology

The methodology used to evaluate the work done by all the actors involved in the disability field and the services offered to disabled people in Albania, contains the following elements:

1. Analysis of laws and policies concerning social services offered to disabled people, which express the government's and society's attitude toward this social group.
2. Interviews with groups of interest's representatives, such as disabled people, their parents and families, central and local government officials, as well as leaders of public and private service centers that work with the disabled people.
3. Comparing the current status of social services for the disabled to the legal standards and the objectives of the National Disability Strategy.
4. Identifying problems and drafting the necessary recommendations.

The data for this monitoring effort was gathered in mid 2007 with the aim of evaluating the 2006 situation. We emphasize that knowledge on disabled people is generally insufficient. Current data collected in the disability area are limited to the numbers of disabled persons, the cash they receive as disability payment and the services provided to them by residential and community centers. Generally, only the number of disabled people is recorded without identification of their age and education. In most of the cases, the only exact data is disabled people grouping according to the kind of their disability.

Results

NSPWD Action plan Implementation related to social services in central institutions representatives' point of view.

Although incomplete, the data allow us to evaluate achievements and problems in achieving the NSPWD objectives and the degree to which the action plan was implemented from the service recipients and providers point of view. Data below are reported by the Albanian Ministry of Labor, Social Affairs and Equal Opportunities or MLSAEO. MLSAEO cites several policies which aimed at improving the living conditions of the disabled and to complement and enforce the Law on Social Assistance and Services and the NSPWD Action Plan. Among these was the establishment of the National Disability Council (NDC) – headed by the vice Prime Minister and including the Ministers of Labor, Education and Science, Health, Justice, Public Issues as well as representatives of some non governmental organizations -- to oversee the implementation of the NDS.

A technical secretariat to support the NDC, at the Ministry of Labor, comprises three members, one of which is a disabled person. Although the technical secretariat has established contact with all line ministries, it has managed to establish contacts with the regional offices in only 10% of the cases. During 2005, in fact, only half the ministries submitted information about the implementation of the National Disability Strategy to the secretariat. The secretariat has not managed to establish a vertical relationship between itself and local government institutions and regional offices. Our results show that the relationship between MLSAEO and the secretariat is indeed not good. The secretariat remains under Equal Opportunities directory supervision when it should have direct communication with the ministers, because the secretariat is a supporting structure of the NDC. This shows that the secretariat has to occupy a higher place in the institution hierarchy. Legal documents (statute, regulations, etc) under which NDC and its secretariat will function have not been drafted yet. The government has not allocated a budget for the secretariat, therefore it can not even fulfill its basic needs in order to achieve its objectives. Supporting policies and new law enforcement have improved disabled peoples' living conditions in several ways.

Firstly, beginning in 2006 mental or physical disabled people regardless of age are entitled to get disability payment provided they get clearance from the Medical Commission of Assessment of Ability to Work.

This enlarged the number of beneficiaries for those categories of people who became such after 21 of age from causes not related to labor and did not receive this payment until 2006

Secondly, during 2006 all paraplegic and quadriplegic people in spite of the original cause of their disease started to be entitled to MCAAW evaluation. This policy has enabled 500 – 600 other paraplegic and quadriplegic people to benefit the disability payment.

Thirdly, Range of paid caretakers is enlarged. Before, only an initial group of disabled families living on social assistance were entitled to the payment; now, an estimated 7,000 to 10,000 people are anticipated to receive 8,000 Lek per month

Fourthly, From 1 September 2006 the payment of people with disabilities and their caretakers was raised from 6,800 Lek on September 1 2006).

Fifthly, the people with disabilities attending secondary education will now get 16,000 Lek instead of the normal disability payment (that is double) while they are studying full time. This payment also includes indexing.

Sixthly, people with disabilities attending university or post university studies either part or full time will get 24 000 Lek/month including indexing , double that of the normal disability payment.

Seventhly, for the first time, the law provides for differentiated pay for families with more than one disabled member. These families will get 150% of the normal caretaker pay.

Eighthly, The law provides now for an additional allowance of 9,000 Lek per month for paraplegic and quadriplegic invalids, which is to be used for special hygiene and sanitation issues.

Ninthly, A draft regulation that provides for a full disability payment for labor invalids, who suffer from professional diseases, (3,000 Lek/month) is under Government consideration.

Tenthly, Social Service Standards for disabled people were drafted with the aim of improving the quality of social services provided for disabled people.

All the NDS's objectives for 2006 were covered by sufficient funds. 7.2 billion Lek were spent on the NDS implementation during 2006. 8.2 billion leke are planed to be used for the implementation of the strategy for 2007.

Eight other community service centers are being established with the World Bank financing. They will be ready to function in 2007.

The number of disabled beneficiaries in 2006 has changed as the following Table shows:

Table 10
Number of people with disability benefiting from the state payment scheme

	Year 2005		Year 2006	
	The number of beneficiaries	Payment per person	The number of beneficiaries	Payment per person
Disability payment	50292	6800	53000	8000
Caretakers	8241	6800	9141	8000
Disability scheme (invalidity)	35000	3000 lek per month 2000 lek per month	44500	3000 lek per month 2000 lek per month

Results of the Survey Conducted in the local level

This survey was carried out in six main Albanian cities; Tiranë, Korçë, Elbasan, Vlorë, Shkodër and Durrës.⁵ Collecting survey data in Albania is difficult for several reasons, not the least of which is that Albanians are not accustomed to communicating through surveys. It is also hard to collect opinions from interested individuals and groups absent reference points for the evaluation of services. However, the data collected by means of this survey should suffice to evaluate the situation and derive conclusions that can inform recommendations for improving services for disabled people.

1- Establishment of new social protection centers, like day care, home care, shelters, aiming to enable people with disability to stay close to a family environment, as well as piloting of new services people with disability.

Improving services to disabled persons is a main goal of the National Disability Strategy, along with the expansion of beneficiaries of these services all over the country. The following table shows recent Albanian Government data on the number of service centers and consequently the number of beneficiaries for 2006 compared to 2005.

5. Data received from Durrës are not complete. Some of the survey questions did not receive responses because interviewees from this city claim that there are no specialized services offered by Non Profit Organizations for the disabled in this city.

The table below,(No. 11) presents most recent figures of Ministry of Labor, Social Affairs and Equal Opportunities on the number of public centers of social protection, and the number of people, beneficiaries of these services in the year 2006 compared to the year 2005.

Table 11
Number of beneficiaries of social welfare institutions

Kind of service	Number of centers in 2005	Number beneficiaries in 2005	Budget (in million leks) allocated by MLSIEO for disabled people in 2005	Number of centers in 2006	Number of beneficiaries in 2006	Budget (in million leks) allocated by MLSIEO for disabled people in 2005
Complete residential service	6	305	109	6	355	120
Day care centers	2	60	10	2	66	12
Community services in collaboration with the World Bank	-	-	-	8	240	560 000\$

As shown in Table 11 and interviews with managers of regional services and municipalities involved in the study, the year 2006 marked an increase in the number of beneficiaries and in the amount they received as provided for by the law on "Social Assistance and Services" No. 9355 of 10.03.2005.

Table 12
Number of Beneficiaries' from payment schemes during the years 2005/2006

	Disability allowance		Invalidity pension	
	Beneficiaries in 2005	Beneficiaries in 2006	Beneficiaries in 2005	Beneficiaries in 2006
Korçë	4012	4323	3170	3607
Tirane	7523	8199	7962	9557
Shkodër	5588	5846	3110	3263
On average	5707	6122	4747	5475

The question WAS “What is the Increase in number of beneficiaries Compared To A Year Ago⁶”

As shown in Table 12 the number of beneficiaries has grown in all cites and for all disability categories. The beneficiaries’ number has increased more in Tiranë, because the population number is bigger and the possibility to get in touch with the responsible institutions is greater. However, the increase in beneficiaries does not satisfy either the public’s demand for more and higher quality services or the commitment to fulfill NDS objectives. An assessment of the number of people with disability, beneficiaries of social protection institutions, day care and community centers compared to a year ago, offer the data presented in Table 13.

Table 13
Number of beneficiaries from services during the years 2005/2006

	Complete residential service		Day centers		Community services	
	Beneficiaries 2005	Beneficiaries 2006	Beneficiaries 2005	Beneficiaries in 2006	Beneficiaries in 2005	Number of beneficiaries in 2006
Korçë	64	65	69	71	98	98
Tirane	46	48	170	204	17 800	18 150
Shkodër	261	263	15	15	0	0
Durrës	136	166	190	314	165	165
Total	507	542	444	604	18 063	18 423

The question was “ How Did Number of Beneficiaries Change by Service Category?”

Table 13 figures do not show a substantial increase in beneficiaries of the different services offered by residential institutions, day care centers and community services. They show a clear trend towards community services, the most widely used of the service categories. Tiranë offers more community services compared to the other cities, whereas in Shkodër these kinds of service continue to be absent. The figures provided by the institutions and social services regional directories do not reflect the real conditions in which disabled people live. The later demand more community based services as we will explain in a special chapter of this material. The 18,432

6. Cities that do not appear in the above table did not respond to the survey question

disabled people that are reportedly benefiting from community services certainly seems high, but the figure has yet to be corroborated.

*2. Improvement of quality of services for disabled people based
on disabled peoples' service standards.*

Evaluation of the service quality is based on the degree to which the social services standards have been respected as well as the fulfillment of other service components such as knowledge on disability legislation, the level of disability allowance, the level of payment of care taker, the multidisciplinary personnel professional level, continuous training of staff that work in the service centers and disabled people families, treatment of disabled people according to individual multidisciplinary programs, improvement of the service centers' physical and material conditions so that they are accessible to all disabled people in spite of their disability category, etc.

The standards of the Social Assistance Services for the disabled people have been approved by the council of ministers decision no 822, date 6.12.2006. These standards guarantee the provision of qualitative services for the disabled people, but they were not fully recognized and implemented by service providers at the time this monitoring was conducted, because of the short period of time at their disposal. Different interest groups give different information on each of these components that contribute in the service quality improvement.

2.1. Knowing the legislation

Initial point to provision of quality services in compliance with the needs of disabled relays with knowledge on legislation. Social regional services in the cities' municipalities declare that they know the legislation quite well. However, people think that NDS and the service standards for the disabled people will need more time to turn into the leading documents of the Albanian service providers for disabled people.

The directors of public service centers for disabled people seem to know little about the legislation about disability. In most cases, they think of themselves as law's implementers and yet they show little interest in knowing the legislation. That fact is corroborated by the following table compiled with the answers provided by public service center directors.

Table 14
Perceived knowledge of social services legislation

	Cities					Total
	Tirane	Korçë	Elbasan	Vlorë	Shkodër	
Completely	25.0%	100.0%	100.0%	100.0%	60.0%	64.3%
Partially	75.0%				40.0%	35.7%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100%

The question was “Do Center Directors Know the Legislation on Services that Should be Offered to Disabled People? In Tiranë, 75% of directors claim to know the legislation only partially, while in Shkodër only 40% of them have only partial information. The claim made by directors in Vlorë, Korca and Elbasan to know the legislation completely remains to be proven. [Table 14]

Directors of centers managed by Non Profit Organizations know the legislation on disability very well, because NPOs’ mission is disability rights protection and lobbying for the implementation and improvement of this legislation. These people not only know the exiting legislation well, but in many cases contribute to its drafting. Table 15 shows that knowledge among parents of disabled persons about the legislation on social services for the PWD is lacking. In more than 50% of the cases, parents of people with disability claimed to have no knowledge of the legislation about social assistance and services for disabled people.

Table 15
Degree of knowledge of the social services legislation by the parents

Degree of knowledge of legislation	Percentage
Completely	3.1 %
Partially	43.0 %
Not at all	53.9 %
Total	100.0 %

With the offered figures, Table 16 demonstrates that the increase of elementary education to higher education is accompanied by a sensitive increase of parental knowledge about the legislation and a total fall of lack of information on it. Knowledge of law by parents comprises the basis for an orientation towards the services and the benefits for children with disabilities.

Table 16
Level of education of parents of people with disabilities

	Parental educational level				Total
	Elementary school	Grade school	High school	College	
Completely	3.0%		1.3%	30.8%	3.3%
Partially	24.2%	40.3%	53.9%	38.5%	42.9%
Not at all	72.7%	59.7%	44.7%	30.8%	53.8%
Total	100.0%	100.0%	100.0%	100.0%	100.0%

Table 17
Degree of knowledge of the social services legislation by the parents according to region

	Where Parent Lives		Total
	City	Village	
Completely	4.4%	2.8%	3.1%
Partially	45.6%	37.5%	43.2%
Not at all	50.0%	62.5%	53.6%
Total	100.0%	100.0%	100.0%

Table 17 shows that the parents of disabled children who live in villages possess a lesser degree of knowledge of the law than do those who live in cities. Over 62% of parents that live in villages do not know the legislation at all and consequently benefit less from it. The situation is aggravated more if we consider the difficulties these people have to access even the services they know about.

2.2. Provided services; the employed professionals; personnel training

Regional social services directors gave the following answers, when asked about the quantity and quality of services for disabled provided in their cities:

- In Korçë, Shkodër and Durrës the provided services completely fulfill disabled needs, whereas in Tiranë, these services only partially fulfill disabled peoples' needs.

- According to the social services directors, Shkodër is the only city in which the services provided fulfill disabled families needs, whereas in Tiranë, Durrës and Korçë the existing services only partially fulfill disabled families needs.
- In 2006, Standards for Social Services for People with Disability were compiled. Before this, provision of social services for people with disability was guided by Social Services Standards approved by the council of ministers decision no 658 date October 10 2005. In many cities there have also operated inspecting programs about these services. However, realization of social services standards for people with disability remains problematic. It is closely related to the service institutions financial and human resources. These institutions' current budget is limited and their personnel's training falls far behind the professional demands. Some of the service centers lack qualified specialists and even when these centers do have specialists, they are not continuously trained. Although training programs exist, they do not seem to have been reflected by the local government, only Shkodër and Durrës do have training programs in the local government level. In Korçë and Tirane there are no such programs.
- Although efficient service provision for the disabled in every region is one of the NDS objectives, and strategic plans have been drafted to achieve this objective, in reality the process has been very slow. In many cities, disabled people have not begun to receive the most basic services.

Directors of government-managed social service centers were interviewed for this monitoring effort in six important Albanian urban centers: Tiranë, Korçë, Elbasan, Vlorë, Shkodër and Durrës. Monitoring process included all public centers, operational in these cities, more specifically, 4 in Tiranë, 4 in Korca, 1 in Elbasan, 2 in Vlorë and none in Durrës.

The reality reflected by figures and information that center directors provide doesn't always coincide with the above mentioned data given by the general regional and local directors. The number of disabled people treated in these centers varies according to capacities in terms of human resources as well as physical buildings. ⁷The public centers mentioned above serve not only the respective city populations, but the whole region and in some cases the whole Albanian territory.

Of 16 public social service centers all over the country, 4 are city centers, 3 are regional centers, and 9 are national centers. Therefore, the number of customers that receive services from these centers does not represent the number of treated clients for that given city.

The number of qualified social services centers' specialists is inferior to the number of disabled people they serve. The proportion between disabled people and qualified specialists that serve them varies depending on the institution, number of beneficiaries as well as the cities where these services are provided, but in all of the cases the ratio is one specialist for 10 disabled beneficiaries to 1 specialist for 5 disabled beneficiaries. Only in Vlorë the ratio is 1 specialist for 1 disabled beneficiary.

We asked directors of service services centers in all the cities under monitoring if they needed more personnel to improve the quality of their service for the disabled and the directors of Tiranë, Korca, Vlorë and Korçë (respectively 25%, 75%, 100% and 100%) gave a positive answer. The directors of social service institutions in Elbasan answered that they did not need any more personnel. [Table 18]

Table 18
Percentage of the need of the social welfare centers for additional staff to work directly with people with disability

Response	City					Total
	Tirane	Korçë	Elbasan	Vlorë	Shkodër	
Yes	25.0%	75.0%		100.0%	100.0%	66.7%
No	75.0%	25.0%	100.0%			33.3%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

When asked about their staff qualifications to work with disabled people in their centers, different institutions directors responded differently. About half of them said their existing staff was qualified; the other half admitted they needed qualified staffs to work directly with disabled people. All the Elbasan and Vlorë directors declared that their staffs are professional, a finding that is at odds with the finding that center directors still seek qualified personnel. [read the following table no.19]

Table 19
Percentage of the specialized staff that works directly with people with disability

Response	City					Total
	Tirane	Korçë	Elbasan	Vlorë	Shkodër	
Yes	50.0%	33.3%	100.0%	100.0%	40.0%	53.3%
No	50.0%	66.7%			60.0%	46.7%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Continuous training of professional staff is generally a big problem. The survey shows that 50% of professional staffs are never trained on the services they offer. Only 11% of them are trained every month, 11 % every 3 months and 30% every 2 months. [Table 20]

Table 20
The frequency of the training for professional staff members

Response	Cities				Total
	Tirane	Elbasan	Vlorë	Shkodër	
Every months	50.0%				11.1%
Every 2 months			100.0%	25.0%	33.3%
Every 3 months				25.0%	11.1%
Never	50.0%	100.0%		50.0%	44.4%
Total	100.0%	100.0%	100.0%	100.0%	100.0%

Staff training on knowledge on disability rights is also problematic. About 33% of the staff that serves the disabled is never trained on this issue, 44% of them are trained every 3 months and only 22% of them are trained every 2 months. Continuous training of the public service centers is becoming part of these institutions' policies, but has yet to become routine. Staff training staff on how to work with disabled people and their families, meanwhile, does appear to have become part of the training program; 33% of these institutions do this every month, 11% every 2 months, 22% every 3 months, whereas about 33 do nothing in this direction. About 77% of the service centers have concrete plans about the preservation of the relationships with the disabled family members. Only 23% of the centers lack this kind of programs.

Directors and specialists of twenty-seven (27) private social services centers' in six cities were interviewed for this survey. These centers were distributed as follows: Tiranë 7, Durrësi 1, Elbasani 6, Vlorë 5, Shkodër 6 and Korca 2 social services centers. All active in direct services provision for disabled people, these centers treat disabled people in their residences and in the disabled own homes and provide assistance for the disabled families, contribute in disabled people integration in community through education, professional training and employment, lobby for disabled people rights protection, etc.

Private service centers seem to be treating more disabled people than public ones, but this conclusion warrants further research. Data are available at www.adrf.org.al. Private service centers are usually set up by donor agencies and other foreign contributors, which is why they usually offer higher quality services than public ones. Private Service centers satisfy disabled people needs in 80% of the cases. The remaining 20% is not satisfied mainly because of limited or lack of financial means.

Disabled people treated in these centers are in 70% of the cases selected based on a set of criteria. Diagnosis is the criterion respected in 70% of the cases, age in 50% of the cases, economical situation in 43% of the cases and only in 9% of the cases residency is the criterion used to select clients to be treated by the service center.

Private service centers are financed by the government in 35% of the cases, donor agencies in 50% of the cases and disabled people family members in only 15% of the cases. These centers' budget varies according to the donor. Even the daily allowance differs depending on the sponsor.

That half of the private service centers are financed by donor agencies makes them insecure and unreliable (the services they offer depend on donor financing). Government's increased support for NPO-managed private service centers is a sign of a government will to fulfill an obligation to diversify services provided for disabled people.

Private Service centers, unlike their public counterparts, seem to do better in hiring specialized staffs. Some of the reasons why private centers directors have managed in absorbing young professionals who are driven by career ambitions might have been: better pay, better quality of work in general and lack of political influences. Table 21 below shows the professional level of the private center staffs, by city.

Table 21
Percentage of the specialized staff in the non governmental care centers for people with disability

	Cities					Total
	Tirane	Korçë	Elbasan	Vlorë	Shkodër	
Yes	100.0%	100.0%	83.3%	40.0%	83.3%	79.2%
No			16.7%	60.0%	16.7%	20.8%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Table 21 shows that on the average, 80% of the staffs of service centers managed by NPOs consist of genuine specialists in their field. Our analysis of the composition of the staffs reveals that many of the employees are professionals with degrees in the appropriate fields: psychologists, social workers, nurses, physicians, special nursery governesses, teachers, animators, physical therapists, craft instructors as well as volunteers who are usually family members of disabled people or students interested in disability. Private Service centers tend to have more diversified staffs than the public ones. Consequently, private centers offer more service possibilities for disabled people.

2.3. Programs for individual treatment and integration in community of disabled people.

Service quality is one of the service centers institutions' main objectives. Based on this objective, specialists are drafting individualized programs for disabled treatment. Disabled people treatment based on individualized programs drafted by multidisciplinary teams is one of the standards required by legal and political documents on disability. 67% of the public service centers work on individualized programs. Only 34% of them have not started applying this practice. Records show that individual programs are totally applied in Elbasan's and Vlorë's institutions. They prevail in Tirane and Korçë, but should start being used in Shkodër and Durrës. [Table 22]

Table 22
The status of Individual Plan

Response	Cities					Total
	Tirane	Korçë	Elbasan	Vlorë	Shkodër	
Yes	75.0%	75.0%	100.0%	100.0%	40.0%	66.7%
No	25.0%	25.0%			60.0%	33.3%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Individual programs have become part of the working practice for very sick persons.

Although this is not true for every case, the results of this monitoring effort show that about 50% of the public service centers work on individual programs for very sick disabled people also. These individual programs are usually prepared by multidisciplinary teams and only in rare cases by one specialist alone. The services centers multidisciplinary teams evaluate on regular bases disabled peoples' progress in 75% of the cases. Only 25% of these centers do not check their clients' progress.

Integration of people in community life is one of the most concrete and measurable objectives of these centers' work. Disabled peoples' integration is achieved through social activities, education, professional training and employment. Table 23 below shows how the commitment in achieving this objective varies among cities.

Table 23
The frequency of social integrating activities in the community for people with disability in social welfare centers

Response	Cities					Total
	Tiranë	Korçë	Elbasan	Vlorë	Shkodër	
Always	33.3%	50.0%	100.0%	50.0%	20.0%	38.5%
Often		50.0%		50.0%	20.0%	23.1%
Sometimes	66.7%				20.0%	23.1%
Never					40.0%	15.4%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

The data presented above show that almost 50% of the service centers only occasionally or never organize integrating activities for the people with disability that attend them. On the average 23% of the centers often, organize these kinds of activities. Elbasan reports the highest figures of integrating activities organized, whereas Shkodër and Tiranë seem to be slow in motivating disabled people to participate in social activities. Planning of integrating activities for disabled people in public service centers is still a nascent practice. [Table 24]

Table 24
Plans to integrate children with disability in schools

Response	Cities					Total
	Tirane	Korçë	Elbasan	Vlorë	Shkodër	
There is a plan that is not being implemented.	50.0%			50.0%		18.2%
There is a plan that is being implemented.	50.0%	100.0%	100.0%	50.0%	50.0%	63.6%
There is no plan					50.0%	18.2%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

In this case Table 25 shows a serious commitment of public centers services to integrate the center's disabled people in schools.

Table 25
Professional training programs for people with disabilities in the social welfare centers

Response	Cities					Total
	Tiranë	Korçë	Elbasan	Vlorë	Shkodër	
There is a plan that is not being implemented.				100%		10.0%
There is a plan that is being implemented	100.0%	100.0%	100.0%		25.0%	60.0%
There is no plan					75.0%	30.0%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

The situation seems to be positive regarding professional training programs for disabled people in public service centers. Although this information does not seem to be reflected in reality regarding disabled employment, the fact that these service centers do at least have training programs could be seen as positive, the first step to changing practices related to disabled peoples' training and employment. Implementation of training and employment programs prepared by specialists remains an important goal. [Table 25]

Table 26
Plans of the center for the employment of people with disabilities

	Cities					Total
	Tirane	Korçë	Elbasan	Vlorë	Shkodër	
Yes, is being implemented			100.0%	100.0%	25.0%	37.5%
There is no program	100.0%	100.0%			75.0%	62.5%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Table 26 shows that public centers in Tiranë and Korca do not have any employment programs for disabled people. Shkodër is also in a bad situation. Still, while figures show an improvement in public service center efforts to integrate disabled people, about 40% of them have not yet started to embrace the philosophy of integrating disabled people in community. Even if they have accepted this philosophy, they have not begun to make it part of their work.

More than 60% of Private Service centers (managed by NPOs) use individual programs to work with the disabled people. The same percentage applies to programs about working with disabled people families. The tables below show figures regarding the use of individualized programs with disabled families. [Tables 27, 28]

Table 27
Individual Plans in the non governmental centers

	Cities					Total
	Tirane	Korçë	Elbasan	Vlorë	Shkodër	
Yes	100.0%	100.0%	33.3%		80.0%	63.2%
No			66.7%	100.0%	20.0%	36.8%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Service centers for disabled people managed by NPOs in Vlorë seem not to have started practicing individualized programs to work with disabled people.

Table 28
Individual Plans for the involvement of families

	Cities					Total
	Tirane	Korçë	Elbasan	Vlorë	Shkodër	
Yes	66.7%		50.0%	50.0%	80.0%	60.0%
No	33.3%	100.0%	50.0%	50.0%	20.0%	40.0%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Table 28 shows that in Korca individual programs about working with the disabled families are missing, whereas in Elbasan and Vlorë only half of the social service centers use these programs. Working with disabled people should be intensified so that parents and family members of disabled people start being aware of disabled peoples' abilities and possibilities for integration and independence. Only in this way they can contribute and fulfill their needs as well as participate in their treatment.

Table 29
Individual plans for the education of children with disabilities

Response						Total
	Tiranë	Korçë	Elbasan	Vlorë	Shkodër	
Yes	66.7%	100.0%	60.0%			42.1%
No	33.3%		40.0%	100.0%	100.0%	57.9%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Although a lot is being done about disabled people education and employment, figures showing the achievement of this objective through employment are very low.

Table 30
Individual programs for vocational training and employment of people with disabilities

Response					Total
	Tiranë	Elbasan	Vlorë	Shkodër	
Yes	50.0%	25.0%		20.0%	26.3%
No	50.0%	75.0%	100.0%	80.0%	73.7%
Total	100.0%	100.0%	100.0%	100.0%	100.0%

Comparing tables 29 and 30 reveals that over 40% private centers have programs for disabled people education, but only 26% of them have programs for their vocational training and employment. The situation is a little better in Tirane, but even in the capital the number of disabled people being treated in social service centers managed by NPOs remains far from the objectives and expectations. Centers in Shkodër and Vlorë have not yet started to work on individual programs for disabled people education and employment. This shows the low quality of service disabled people receive from these centers; this certainly does not advance the goals of disabled people employment and integration in society.

2.4. Evaluation of quality of services in centers managed by the government and NPOs, from disabled people, parents and other family members

In order for this monitoring effort to be as objective as possible, its methodology included interviews with disabled people, their parents and family members about the quality and variety of social services offered by public and private centers. For this reason, 195 disabled people from all the cities under this monitoring, were interviewed as shown in tables below.

Table 31

Number of people with disabilities interviewed

City	Number of Disabled in Sample
Tirane	27
Durrës	28
Korçë	39
Elbasan	30
Vlorë	31
Shkodër	40
Total	195

Table 32

Number of people interviewed by type of disability

Type of disability	Percentage
Physical	35.1
Mental	26.8
Does not see	21.1
Does not talk/hear	17.0
Total	100.0

The disabled people interviewed for this effort represent 81% of urban and 18.1% rural population. 59.3% of them were males and 40.7% females. Interviewees had

different levels of education: 38.5% of them had finished only elementary school, 44.7% grade school, 11.8% high school and 5% of them had a college degree. 6.7 of them were employed and 93.3% were unemployed.

Disabled people who were interviewed had different kinds of disabilities therefore; they expressed the needs of different disability groups. Table 32 shows in percentage different categories of people with disability that were part of this study. 86.2% of the interviewed disabled people received the disability allowance/ pension and 13.8 of them did not. In most of the cases, they received 8000 leks as their disability payment. Only a few receive higher or lower payments.

When asked why they did not receive the disability payment, they did not hesitate to reveal that they have never asked for it, that they did not know where to go. Some asked for it, but have had no success in receiving it, and they did not visit government institutions because they doubted the law would be enforced.

The survey shows that disability payment is almost the same for all kinds of disabilities. 89.5% of disabled people who live in cities receive disability payment and only 71.4 of those who live in villages receive it. Most parents of disabled people do not benefit the caretaker's payments (64.5% of them do not get this payment and only the remaining 35.5% get it). Although, during 2006 a higher number of caretaker's payment is reported, the figure is still low compared to the need for it. Receiving the caretaker's payment by disabled people parents seems to depend on their children's disability type. If their children have physical disabilities, parents get caretaker pay in 60% of the cases, whereas if they have mental disabilities, parents get caretaker pay only in 4.1% of the cases. Parents of mentally disabled children are the most discriminated group in terms of caretaker's payments. Many disabled people declare that they attend different social service centers where they receive different services. It is evident that a considerable number of the disabled attend special schools, mental health centers where they receive psycho-social services, resource centers where they receive orientating information to fulfill their needs as well as juridical assistance and support to employment. A few disabled do not expect or receive any services or support at all. They manage with family support and personal connections.

Asked about individualized treatment programs, 38.5% of the disabled answered that they have been treated on such programs, whereas 61.5% said they were not. When the answers of this group of disabled persons are compared to the information received by social institutions, they do not correspond. According to the institutions' directors' or specialists' declarations 60% of disabled people are treated on individual programs, whereas only 40% of them are not. The instance

of involvement of disabled people in the devising of individualized programs for themselves is low. In most of the cases these programs are prepared by one specialist at the service center and in only in a few cases by multidisciplinary teams.

Disabled people claim that in 81.5% of the cases they have not received any training for employment by the centers they attend, though there are discrepancies between the claims of disabled people and information from public or private service centers directors and specialists. The number of disabled who have received training for employment is low for all disability groups, but the worst case is the blind; no blind person is reported to have received any training for employment. Only 2% of disabled people declare they are satisfied with their disability pension. 40% think the pension they get is only acceptable, whereas 58% of the disabled consider their disability pension insufficient. Only 9.5% of disabled people are satisfied with the quality of social services they get, 52.5% of them are slightly satisfied, whereas 38% are dissatisfied.

Disabled people think that legislation about disability has significantly improved, but believe supporting policies should be complemented and strengthened. They also think that social services they receive should improve and disability payment should increase. What is more important, informing and training opportunities for disabled people should increase, because it would increase their chances of integration in society. Data from this survey, in summary, show that services for the disabled have not significantly improved over the past year. Parents of disabled children have opinions similar to those of the disabled themselves.⁸ In 83% of the cases, parents claim their children benefited from the disability payment. For those children who did not benefit from disability payment, their parents report lack of trust in government's institutions, lack of information, lengthy application procedures and other differentiating criteria such as living on social assistance, as reasons why their children were denied disability payment.

Only 25% of parents of disabled children benefit from the caretaker payment. It seems that this benefit does not depend on disabled children parents' education, employment and residency. The only factor that seems to affect the caretaker pay benefit is their children's type of disability. Parents of blind children receive caretaker pay in 64% of the cases, while parents of mentally disabled children do not receive this pay in 89% of the cases. Mute and deaf disabled children parents do not report receiving this payment ever.

8. Parents' sample characteristics: Of the 201 parents surveyed in all six cities included in this monitoring, 71% of them live in cities and 29% in villages. 55% of them are males and 45% females. 34% are employed and 66% unemployed.

The main factors preventing parents from receiving caretaker's payment seem to relate to lack of information, no interest on their part, work relationships and complicated applying procedures in order to get it. The results of parent interviews find only 22.6% of them have been trained to care for their disabled children during 2006. These trainings were offered by service centers managed by non-for profit organizations such as "God Loves Albania", ADRF, "Help Life" as well as community centers for mental health. Either parents, who in 74% of the cases have not participated in these trainings, were not invited or they could not make it because of their family obligations. In half of the cases, parents declared that their children benefit more by day centers, 18.5 % of them declare that their children benefit more by residential centers and 31.5% by community service. Only 4% of parents consider as sufficient the support their children get from the government. The rest think that government's support is either acceptable or insufficient. These opinions do not seem to be affected by parents' education, employment, residence or their children kind of disability.

When asked about the quality of services their children got in services centers, disabled children parents in 13.5% of the cases seem to pronounce that they are satisfied, whereas 86% of them seem to pronounce that they are either somewhat satisfied or not satisfied. Physically disabled children parents seem to have the highest level of dissatisfaction (about 48% of them). Parents of deaf and mute children have the highest level of satisfaction with social services (45% of cases). Employed parents seem to appreciate more the quality of services provided for their children, because these services enable them to work. On the other hand, the more educated disabled people parents, the higher their requests for qualitative services for their children. Parents appreciate improvements of legislation on disability, policies, services and payments for disabled people, but they insist on their further improvement.

2.5. Infrastructural improvement of all institutions that provide services for people with disability to enable all the people to receive the necessary services in barrier free constructed buildings.

Service center achievements for disabled peoples' rehabilitation are closely connected to not only human resources and staff qualifications, but also their financial and infrastructure resources that they possess. Public service center directors usually claim that they do not have sufficient budgets to fulfill disabled peoples' needs providing different kinds of qualitative services according to the approved standards.

Efforts to provide services under difficult financial conditions always affect the services quality. Service center infrastructure (equipments, rehabilitating and accommodating space, and accessibility) is reportedly insufficient in 50% of the cases. A serious initiative of the Social State Service(SSS) and local government institutions would help turn these centers into genuine treating and rehabilitating centers for disabled people. The cost of infrastructure standards fulfillment seems to be costly and not very easy affordable.

To understand better the infrastructure situation, refer to the Annex attached to this document.

Conclusions

Regarding service policies and legislation we came to the following conclusions:

- There are huge discrepancies in the evaluation of social services for disabled people between different parties involved in the disability field such as: policy makers, policy implementers, providers and beneficiaries of social services.
- Despite differences in evaluation as well as real achievements in this field, services for disabled people remain problematic.
- The quantity and quality of services is still limited and concentrated in the min urban areas. This does not offer to all the disabled the opportunity to get every service they need as provide by the NDS. The government social service system continues to function through the same institutions and kinds of services as years ago. Services provided by NPOs depend on project funding and consequently are not reliable/ sustainable over the longer term. Whereas, local government shows little or no initiative at all to set up or support any kind of institution that provides services for the disabled people.
- Social services quality fall far behind the required standards. Although, it is done a lot in establishing the social services standards, higher level of professionals' commitment, continuous evaluations and inspections, specialists' training and responsibility in respecting these standards is needed so that social services meet these standards.

- Both public and private social services institutions for disabled people do not fulfill the infrastructure criteria and also lack the material assents needed in order for the services they provide to meet the standards.
- Although, multidisciplinary teams have started to be established in social service institutions, there are still cases when the disabled are unprofessionally examined and treated by only one specialist.
- Disabled people do not feel part of plans and programs about their treatment drafting.
- Albanian citizens have not yet been freed from discriminating prejudices against disabled people. Public and private institutions have to work more to raise public awareness on disabled people needs in order to solve this problem.
- Although disability payment was increased last year, it is insufficient to meet even the minimal disabled people's needs.
- Caretaker's payment although being paid to more parents, has not yet achieved the necessary level.
- Disabled people need more information, education, professional training, as well as other services that help them integrate in community and improve the quality of their lives.
- Although, training programs in regional and local level exist, they are not part of the institutions' working practice yet.
- Disabled people professional training does not fulfill their needs for employment.
- Home service for disabled people is insufficient. Just a few families receive this service, although a great number of families need this kind of service.
- Application procedures for disability payment are too long lasting and complex.
- The projects for NDS objectives' achievement in the framework of decentralization need concrete governmental support.

- National Disability Council is considered a very important achievement in the process of NSPWD implementation. However, the fact that this Council was delayed in starting to function brought about delays in the monitoring network construction from central to local level. The monitoring network construction delay is also related to the technical secretariat functioning, which now does not have the necessary support of the institution it subordinates from. The NDC lacks Ministry of Finance representation, which causes problems in all the processes that are related to implementation of the NDS. Civil society representation in this council is another problem, as the only civil society representatives are disability organizations. Other institutions operating in the disability field are not represented. This makes disability seem like an isolated problem that concerns only disabled people; in fact, it concerns the whole society. The technical secretariat is a NDC support instrument. Its slow progress (information on NSPWD implementation is spotty, the council has held only one meeting, it has no statute yet, etc) is a direct result of the fact that the secretariat is subordinate to a directory of MLSAEO instead of collaborating with and urging the institution's leaders and vice Prime Minister. This secretariat has other problems when it comes to establishing institutions in the local government which fall outside the MLSAEO jurisdiction. Its work becomes even more difficult, because it lacks proper infrastructure, qualified staff as well as financial support.

Recommendations

The conclusions share one common feature: they all show a low level of implementation of the NSPWD what calls for immediate intervention. Our recommendations therefore focus on improving two main areas of implementation:

- a) Increase of quantity and quality of the social services for disabled people with the aim of increasing the number of disabled beneficiaries all over the country; and
- b) Improve services provided to the disabled people according to the approved standards.

These recommendations can be carried out by undertaking the following measures:

- Reviewing the action plan in order to make the NSPWD objectives more concrete.

- Diversifying and enriching the social services responding to the disabled people different categories in different parts of the country.
- Introduction of the local government institutions to the disabled people needs as well as demanding of civil society cooperation and assistance to in establish new service centers wherever they are missing.
- Putting more pressure on private and public institutions towards application of standards.
- Intensification of the inspections on service centers
- Strengthening multidisciplinary teams that evaluate and treat disabled people
- Improvement of the professional structure of the service centers staffs including in them specialists such as social workers, psychologists, doctors, and educators.
- Encouraging local business to support social service centers for disabled people
- Intensifying efforts for service provision in service centers focusing on multifaceted education.
- Intensification of the efforts to professionally train and employ disabled people, who are clients of the service centers
- Improvement of the infrastructure of institutions that offer residential and day care services.
- Improvement of home and family services as one of the most important alternatives for disabled people integration.
- Improvement of monitoring structures:
 - Reviewing and improvement of the NDC structure making it more inclusive.
 - Drafting of the necessary documents for the NDC functioning

- o Establishment of all the structures in central and local level
- o Capacity building of all the above mentioned structures
- o Enhance the Technical Secretariat credibility by increasing its representation and also positioning it at least in the vice Prime Minister's office.
- o Provision of normal working conditions for the Technical Secretariat
- o Increase the secretariat's capacities.
- o Provision of a special budget for the functioning of the NDC.

Introduction

It is an unquestionable fact that the state of educational services which support the people with disabilities has changed considerably in the recent years. Our educational system now is more open for children and young people who have special needs. Important changes have occurred in the legal aspect as well. Pursuant to the Constitution of the Republic of Albania, article 57, every child or young person enjoys the right to education. The nine year school education is compulsory. Every citizen of the Republic of Albania, every individual with a disability has the right to be educated in public and private schools in all levels of education. Law No 7952 of 21.06.1995 “*On Pre-University Educational System*” specifies it in Article 3, by providing that, “The citizens of the Republic of Albania enjoy equal rights to be educated in all levels of education that law provides for, regardless of social status, nationality, language, sex, religion, race, political beliefs, *health condition*, and economic level.” Article 39.2 expands on the education of special needs students by stating that, “Using the special forms and methods, special public education aims at guaranteeing the fullest development of possibilities of people who present physical, mental or emotional disabilities, in accordance with their needs and the requirements for a dignified life.”

Furthermore, Article 57.2 of the Normative Provisions for Pre-University Education explains that, “The education of special needs students is realized in two forms: (a) through mainstreaming in neighborhood schools, and (b) in special public schools or classes. In order to encourage the education of education of students with special needs in mainstream school Normative Provisions for Pre-University Education have provided the following measures: (a) decreasing the number of regular students in classes which integrated students with special needs; (b) decreasing the teaching load for the teachers who teach students with special needs in regular classes, (c) giving extra pay to teachers who work with students with special needs.

The NSPWD marks a qualitative step in our educational system. The improvement of the living conditions of people with disabilities

is now placed in a clear perspective which moves the disability paradigm from the medical model into the socially inclusive one. Based on human rights, the NSPWD unfolds as its major goal the participation of people with disabilities in all spheres of life, in conformity with international conventions already ratified by our country.

The objectives of the NSPWD in the field of education are spread over four intervention areas: (a) accessibility, (b) services, (c) education, employment, vocational training and (d) legislation and research. This study will present the education–related findings in the area of education only. Four are the objectives of the National Action Plan⁹:

Objective 3. Improvement of the inclusive education schemes aimed at a full integration of children with disabilities in the Albanian public schools.

Objective 4. Improvement of the teaching process in the special schools

Objective 5. Gradual establishment and extension of integrated schools and kindergartens

Objective 6. Establishment and gradual extension of psycho-pedagogic and psycho-social services in the integrated schools and kindergartens.

The goal of this evaluation study is to show the progress done in achieving the above objectives through the implementation of the measures of National Action Plan as well as the perception of parents and teachers on the work done in special education and general education schools with students with special needs.

Methodology

Design

This is a quantitative-qualitative program evaluation study conducted cross-sectionally. The data were collected from surveys (written and oral), interviews and study of documents. The focus of the study was the degree of the implementation of each educationally–related measures of the National Action Plan as well as the status of special education (segregated and integrated) as perceived by main stakeholders: parents and teachers.

9. The English version of the official translation of the National Action Plan has been preserved in the objectives.

Informants and Participants

Experts from the Ministry of Education, the Institute of Curricula and Educational Standards and the Regional Departments of Education of Tiranë, Vlorë, Shkodër, Korçë, Elbasan, and Durrës were the main informants on the work that is being done for the implementation of the measures of the National Action Plan. Their participation in this evaluation was voluntary and not an officially charged responsibility.

The parents (n=211) and the teachers (n= 77) were a convenience sample from Tiranë, Vlorë, Shkodër, Korçë, Elbasan, and Durrës, who were recruited to participate in this program evaluation by the ADRF local experts. The parents had children with special needs who were students in special education schools or inclusive setting. The teachers were also from special education schools or inclusive settings. The participation of parents and teachers was voluntary. No indentifying personal information was collected from the participants in order to protect their identity.

Materials

The information on the implementation of the measures of the National Action Plan was collected with structured written questionnaires. The questionnaires contained questions related to the stage of the implementation of specific measures, asked for specifications on the work done, difficulties encountered in the process, the degree to which the work done reflected international standards, whether there was an action plan with specific deadlines for the measure, whether there was a task force or an expert charged with its follow-up and whether there was earmarked budget for the measure. The questionnaires were prepared by a group of experts and reflected the responsibilities assigned by the National Action Plan.

The questionnaires for parents and teachers consisted mostly of close-ended questions with multiple-choice, either in the form of a Likert scale or a range of options. There was an open-ended question at the end in the form of a wish-list.

Procedure

A team of local experts, who were equipped with an official authorization from ADRF collected the data. The local experts were trained by the ADRF to ensure inter-rater reliability. The experts from the Ministry of Education, the Institute of Curricula and Educational Standards and the Regional Departments of Education were contacted by phone, email and in-person. They completed the written questionnaire and responded to additional questions. Generally the experts

collaborated well with the evaluation team. However, in many cases their answers were too general and did not provide the necessary details such as the deadlines, names of people in the task forces, the value of the earmarked budget etc. The parents and the teachers completed the written questionnaires either in the presence of the member of the evaluation team or by themselves. In some cases the members of the evaluation team completed the questionnaire during the oral survey.

All completed questionnaires were collected by ADRF; the quantitative data were entered in SPSS and descriptive statistics were calculated. The qualitative data were aggregated.

Results

The results of the evaluation study on the degree of implementation of the National Action Plan in the field of education are presented in two sections in the form of findings. The first section consists of the report of the work done for each measure according to the area of intervention and respective objective. Timelines and responsible institutions have also been spelled out to provide the context for the measure. In the cases where the responsibilities have been spread over different institutions, only the work of the educational institutions has been reported.

The second part of this section will provide the data from the surveys with parents and teachers, illustrated with tables and charts.

Implementation of 2005-2006 Tasks, Preparation for 2007 Tasks

Area Intervention III: Education, Employment and Vocational Training¹⁰

Objective 3. Improvement of the inclusive education schemes aimed at a full integration of children with disabilities in the Albanian public schools.

Measure 3.1. Establishment of a new integrative school curriculum
Timelines: 2004-2006
Responsible institutions: Ministry of Education

Findings

The level of implementation for this measure is in the range 70-99%. The Curricula and Standards Institute (which is under the Ministry of Education) has drafted the

10. Only the measures related to education will be covered.

new curricula and has approved the new textbooks for grades 1, 2, 3, 4, 6, 7, 8. Work is in progress for the curricula and textbooks for grades 5 and 9. The experts of the Ministry of Education are of the opinion that the new curricula reflect contemporary international standards partially. An action plan is in place and responsibilities have been assigned to experts to make sure this measure is fully implemented.

The new curriculum gives the compulsory education teachers a new alternative, offering them the possibility to use 15–20 % of classes in any given school year to meet the needs of their students. In addition, the new curriculum offers explanations regarding the effective methods and techniques that the teachers may use in the teaching and educational process. Tangible improvements have also been made in smoothing the transition from the elementary cycle to the secondary cycle.

In order to facilitate the teacher's work, the Curricula and Standards Institute has prepared 120 pages of materials and brochures to help the teacher, such as "*A Package to Help the Teachers in Support of Inclusive Processes*" and a number of articles in various bulletins of the Institute.

The specialists of the Ministry of Education consider 50%-60% of the work for an inclusive curriculum done. However, improvements for inclusive curricula entail more profound changes. The maximum of what has been achieved is the effort to help and orient the teacher to be more selective and receptive towards students who encounter difficulties. Moreover, compulsory education textbooks do not yet have new concepts to favor inclusive processes. Additionally, the new curriculum that favors the inclusive processes does not offer clear guidelines or indications for the integrating organizations and processes. Hence, for students with special needs to be successfully integrated, they need to have an Individual Education Plan (IEP).

In 2006, Tiranë National Training Center in cooperation with the association "Save the Children" organized a number of training activities focused on the inclusion of students with special needs in mainstream education in seven regions of the country. The participants (n=322) were teachers, school principals and experts from the divisions of training and inspection in the departments of education.

Measure 3.2.

Preparation of a package with practical guidelines, didactical materials and standards for the public schools.

Timelines:

2004-2006

Responsible institutions:

(a) Ministry of Education; (b) Departments of Education

Findings

A package with practical guidelines, didactical materials and standards for the public schools has been prepared by the Ministry of Education, but not yet published. It is the opinion of the experts of the Ministry of Education that this package fully meets international contemporary standards. A fund of 500,000 lek has been earmarked for this project.

The Curricula and Standards Institute (under the Ministry of Education) has prepared a 60 page material for teachers with practical guidelines for the implementation of the new curricula.

Measure 3.3.	Drafting of a normative act on the individual educational plan (IEP), admission rules for students with special needs and their assessment procedures.
Timelines:	2004-2006
Responsible institutions:	(a) Ministry of Education, (b) Departments of Education

Findings

The Ministry of Education has been working on the Normative Act, which is being tested in some inclusive schools of the country. In the opinion of its experts this act partially reflects contemporary international standards.

Many, but not all students who receive special education in the schools for students with intellectual disabilities and the Institutes for Students with Hearing and Visual Impairments have IEPs. The parent does not play an active role in every case. Many schools do not have a multidisciplinary team as some of them do not even have a psychologist. There is no speech therapist at the Institute for Students with Hearing Impairments. All the special education schools have admission criteria which need to be reviewed. The process of assessment is not multidisciplinary and it does not reflect the inclusive needs of the students.

Measure 3.4.	Creating resource rooms in schools to work specifically with students with special needs.
Timelines:	Starting from 2004
Responsible institutions:	(a) Ministry of Education, (b) Departments of Education

Findings

According to the information provided by the Ministry of Education, resource rooms for students with special needs have been set up in 46 educational institutions (schools and kindergarten). The Ministry of Education has an action plan to increase this number. No information was provided by the Ministry of Education on the cost of this project. The completed questionnaires from the Regional Departments of Education of Korçë, Elbasan, Vlorë, Shkodër and Tiranë show that these environments have yet not been created in any of the schools of these cities. Some of the excuses provided are: “there is no budget”, “there are no guidelines from the Ministry of Education on this,” “there are no specialized teachers,” “it is not our priority,” etc.

Measure 3.5.	Improvements in the legal provisions on the teachers’ workload and their financial treatment.
Timelines:	2005– 2006
Responsible institutions:	(a) Ministry of Education, (b) Departments of Education

Findings

The Ministry of Education has started work on this measure by gathering input from the Regional Departments of Education. The ministry has an action plan with defined responsibilities in place.

Measure 3.6.	Preparation of bulletins and resource materials and readers for teachers and parents.
Timelines:	starting from 2005
Responsible institutions:	(a) Ministry of Education, (b) Departments of Education

Findings

Four bulletins with a total of 120 pages have been prepared at the cost of 120,000lek. For 2007, 500,000 lek have been earmarked for the implementation of this measure.

Measure 3.7.	The registration of the children with disabilities is treated as a priority
Timelines:	starting from 2005
Responsible institutions:	(a) Ministry of Education, (b) Departments of Education

Findings

The data provided by the Departments of Education for the 6 major cities of the country: Tiranë, Durrës, Elbasan, Korçë, Shkodër and Vlorë, show that 172 children with special needs (ages 3-6) have been included in kindergarten, 214 students with special needs in the mandatory 9-year education, 108 students with special needs in high schools, 39 in the vocational schools and 6 in the university.

In the school year 2005-2006, there were 676 students who attended the special education schools in the country with an overrepresentation of males (65%). Table 33 breaks the data down per school, disability category and gender.

Table 33
Enrollment of Students in Special Education Schools

School name	City	Disability Category	Females	Males	Total
The School for Students with Mild Mental Retardation	Vlorë	Intellectual and physical	20	71	91
"Zëra Jete" ("Voice of Life")	Elbasan	Intellectual and physical	23	47	70
"Liri Gero"	Fier	Intellectual and physical	10	17	27
"Luigj Gurakuqi"	Tiranë	Intellectual and physical	36	50	86
Institute For Children with Visual Impairments	Tiranë	Vision impairments	17	41	58
Institute for Children with Hearing Impairments	Tiranë	Hearing impairments	50	89	139
"3 Dhjetori" ("The 3 rd of December")	Shkodër	Intellectual and physical	48	36	84
The School for Students with Mental Retardation	Korçë	Intellectual and physical	5	25	30
The School for Students with Mild Mental Retardation	Durrës	Intellectual and physical	29	62	91
Total			238	438	676

Most of the students in special education schools are children with intellectual disabilities (68.6%). Less than one third (29%) are students with severe intellectual disabilities. Table 34 summarizes the data from all schools per severity of the intellectual disability.

Table 34
The Degree of Intellectual Disability

Schools	Mild	Moderate	Severe	Total
L.Gurakuqi" (Tiranë)	30	39	17	86
The School for Students with Mild Mental Retardation (Durrës)	31	32	28	91
"Zëra Jete" (Elbasan)	15	33	22	70
The School for Students with Mild Mental Retardation (Vlorë)	30	35	26	91
The School for Students with Mental Retardation (Korçë)	11	10	21	42
"3 Dhjetori" (Shkodër)	40	24	20	84
Total	157	173	134	464

Objective 4. Improvement of the teaching process in the special schools

Measure 4.1. Preparation and implementation of special integrative programmes for students with a disability.

Timelines: starting from 2005

Responsible institutions: (a) Ministry of Education

Findings

New curricula have been prepared for special education schools, which contain integrating activities for students with special needs. The teaching personnel (teachers and educators) have received training for the implementation of the new curricula. However, the data from Table 35 reveal that the organizational structure of special educational school is heavily skewed towards staff who are not directly involved in the students' educational program. This structure may create issues for the implementation of inclusive programs.

Table 35
Personnel Working in the Special Education Schools

Special Education Schools	Teachers	Educators	Other administrative staff	Percentage of administrative staff
L.Gurakuqi" (Tiranë)	12	9	11	52.4 %
The School for Students with Mild Mental Retardation (Durrës)	10	10	5	25%
"Zëra Jete" (Elbasan)	12	8	3	15%
The School for Students with Mild Mental Retardation (Vlorë)	13	8	6	28.6%
The School for Students with Mental Retardation (Korçë)	7	-	-	0%
"3 Dhjetori" (Shkodër)	25	-	10	40%
Institute for Children with Visual Impairments*	14	7	20	95.2%
Institute for Children with Hearing Impairments*	19	13	40	125%
Total	112	55	95	56.9%

*Note: These institutes are boarding schools.

Inclusive activities in the community require transportation. Most of the special education schools have no means of transportation. The few schools that have received donated vehicles by foreign donors, have not received any funding for vehicle maintenance and other related expenses.

The third issue is related to the level of education students receive in the schools for students with intellectual disabilities and the Institute for Students with Hearing Impairments. The school curriculum for the nine years of mandatory education only contains the studies for grades 1-4 in regular schools. This means that at the end of nine years of education, the students cannot attend regular high school, as they miss the knowledge gained by general education students in the grades 5-9. Last, but not least, the students from special education schools (with the exception of the students from the Institute for Students with Visual Impairments) are not able to attend classes with their peers in mainstream schools due to differences in their level of knowledge.

Measure 4.2.

Support for the provision of transport services for students with disabilities from rural areas.

Timelines:

starting from 2005

Responsible institutions: (a) Ministry of Education, (b) Departments of Education, (c) local government units

Findings

Out of 661 pupils who attended special education schools in various cities, 33% (n=218) were from rural areas. No information was provided by the Ministry of Education on the extent of the implementation of this measure and help provided for students from rural areas. The interviews with the local experts revealed that no work has been done for the implementation of this measure. The family continues to be the main provider of transportation.

Measure 4.3. Provision of special programmes for those categories of children with disabilities presently not covered with services

Timelines: starting from 2005

Responsible institutions: (a) Ministry of Education, (b) Departments of Education, (c) local government units

Findings

No new programs have been created for students with other special needs, such as autism, multiple disabilities, etc. although there is an increased demand for them.

Objective 5. Gradual establishment and extension of integrated schools and kindergartens

Measure 5.1. Piloting of 12 integrated schools and 12 integrated kindergartens in 6 regional centres.

Timelines: starting from 2005

Responsible institutions: (a) Ministry of Education, (b) local government units

Findings

Students with special needs have been integrated in more than 12 schools and 12 kindergartens. According to the reports from the Ministry of Education, at the end of 2006, there were 21 inclusive kindergartens (for children ages 3-6), where 89 children with special needs were integrated. Additionally, 375 students with special needs were included in 25 schools in Tirane, Berat, Elbasan, Korçë, Shkodër and Gjirokaster. However, no information was provided by the Ministry of Education on the names of the schools that are part of the pilot project, the status of the piloted inclusive schools and kindergartens, the number of students that have been included in mainstream education, the support for these students, the training of teachers and the support for them, and the process of data collection and dissemination.

Additionally, no data were provided on the students' disabilities, the number of special education teachers and the aides that were involved in the educational process of students with special needs, nor of any other professionals. The Ministry of Education reports that all these schools are treated as demonstration projects, which, when consolidated, will be replicated to other areas. Too little information was provided on the nature of inclusion in these schools which creates difficulty for a professional judgment on the effectiveness of these practices.

Measure 5.2.	Establishment of 90 integrated schools and 90 integrated kindergartens in Albania
Timelines:	2006-2014
Responsible institutions:	(a) Ministry of Education, (b) local government units

Findings

As the results of 5.1. show, good progress has been made towards the implementation of this measure.

Objective 6. Establishment and gradual extension of psycho-pedagogic and psycho-social services in the integrated schools and kindergartens.

Measure 6.1.	Special structures of psycho-pedagogic and psycho-social services will be created in the integrated schools and kindergartens consisting of 1 psychologists, 1 social worker, and 2-3 teachers (part-time) starting from the bigger towns in Albania.
Timelines:	starting from 2005
Responsible institutions:	(a) Ministry of Education

Findings

Currently, 140 psychologists and 32 social workers with Bachelor's degrees have been hired in the Albanian educational system. No data are available on the nature of their involvement with the students with disabilities that have been included in mainstream kindergartens and schools.

Measure 6.2.	Establishment of 7 psycho-pedagogic centres in order to provide for national coverage
Timelines:	starting from 2005
Responsible institutions:	(a) Ministry of Education

Findings

No psycho-pedagogical centers have been opened.

Intervention Area IV: Capacity Building

No objectives and measures of the National Action Plan are related to education in this intervention area. However, steps were taken in the period under review that are worthy of reporting in this context, as they are intricately linked with the achievement of the objectives of the National Action Plan in the field of education.

The first development concerns the inclusion of courses related to the education of students with special needs in the curriculum of teacher preparation majors of various universities in the country which are taken by 880 students annually. Such courses include, but are not limited to:

- Psycho Pedagogical Basis of Special Education
- Speech Therapy
- Educating Students with Special Needs
- Psychology of Rehabilitation of People with Special Needs
- Inclusionary processes in general education schools.

The second major development has to do with the graduation of the very first 60 special education teachers from Vlorë University, in a joint Albanian-Swiss project.

Results of the Survey Conducted with Parents and Teachers

Opinions and Experiences of Parents Who Have Children with Disabilities

Parents of students with special needs (n= 211) from Tiranë, Durrës, Korca, Elbasan, Vlorë and Shkodër participated in a written, close-ended survey. Most of the parents (n= 151, 71%) had children who were students in special education institutions and the rest (n=57, 29%) are parents of students with special needs (30 with intellectual disabilities, 4 with visual impairments, and 7 with hearing impairments), who are integrated in regular schools. Tiranë was underrepresented in this survey, and Korca was overrepresented.

Table 36
Geographic distribution of survey parents participants

City	Number of Survey Participants	Percentage of Survey Participants
Korca	64	30.3%
Tiranë	36	17.1%
Elbasan	32	15.2%
Vlorë	31	14.7%
Shkodër	27	12.8%
Durrës	21	10.0%
Total	211	100%

As Fig. 20 shows, parents of students with special needs are pleased with the quality of education of their children: a total of 79.9% of them reported that they were “satisfied” or “very satisfied”. The parents of integrated settings school students are slightly less satisfied than the parents of special education schools (one in twelve versus one in sixteen).

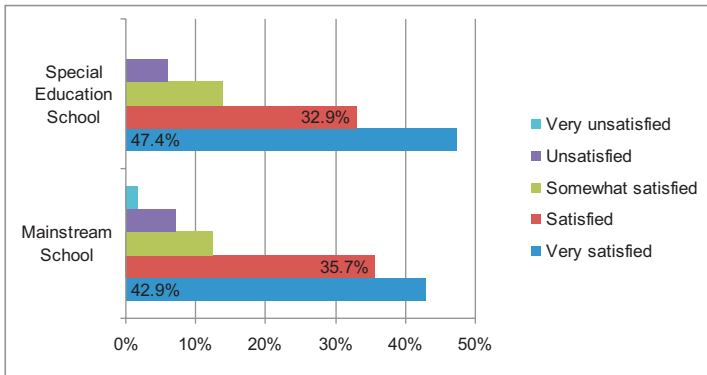


Fig. 20 Parents' satisfaction with their child's education.

The reason of the parents' satisfaction with the educational process of their child with special needs is related to the perceived degree of help the student is receiving in school. Table 37 shows that almost seven out of every ten parents (67.5% believe that the school is helping their child very much). More parents of integrated students (3.7%) than those of special education schools (.7%) are unhappy with the help the student is receiving.

Table 37
Parents’ Evaluation of the Level of Help for the Special Education Student.

	Gen. Ed. Schools	Sp. Ed. Schools	Total
Very much	68.5%	67.1%	67.5%
Somewhat	22.2%	24.3%	23.8%
A little	5.6%	7.9%	7.3%
Not at all	3.7%	.7%	1.5%
Total	100.0%	100.0%	100.0%

*Note: The statement was, “The degree the institution caring for my son/daughter is helping him/her.”

The Individual Education Plan (IEP) has become part of the work with the student with special needs for 68.5% of the integrated students and 71.3% of the special education students as Fig. 21 shows. However, it is regrettable that about one in five students still do not having a functional IEP.

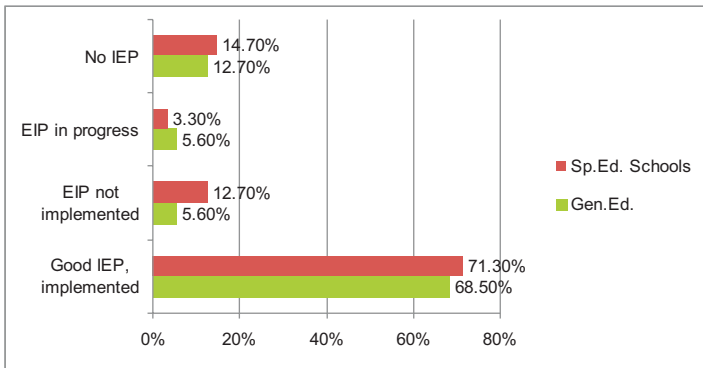


Fig. 21 The status of IEP.

Efforts are being made for the integration of students with special needs in social activities; with one in every two students having a good plan that is being implemented. The results are reported to be higher for students in special education schools (60.3%) than for students in general education schools (49.1%). However, it is disappointing that 50.9% of parents, whose children attend the general education school and 39.7% of parents whose children attend special education school report that their children are not involved in any planned social activities.

Table 38
Planning for Social Integration

	Gen. Ed. Schools	Sp. Ed. Schools	Total
Good plan, implemented	49.1%	60.3%	57.3%
Plan not implemented	5.7%	11.0%	9.5%
Planning in progress	11.3%	8.2%	9.0%
No plan	34.0%	20.5%	24.1%
Total	100.0%	100.0%	100.0%

As Fig.22 illustrates, more parents of special education school students (71%) than parents of the general education school students (54.7%) consider the current educational setting of their child as their first choice. This may be explained with the lack of specialized support for students with special needs that have been integrated in regular education schools and with lack of parent awareness of the benefits of integration for their children. However, almost one third of the surveyed parents of special education school students (28.7%) would like to have their children integrated in general education schools.

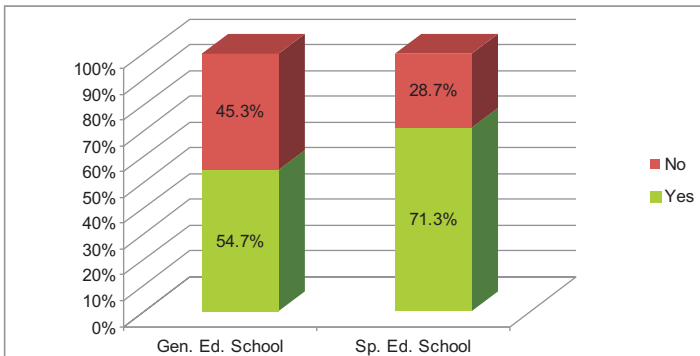


Fig. 22 Current educational setting is parent's first choice.

Asked on other educational services that would be beneficial for their children the parents gave the following wish list:

- Better work with the IEP.
- More opportunities for integrated social activities and participation in cultural, sport and art events.

- Transition planning for the students who graduate from special education schools.
- Opportunities to attend high schools for special education school students
- Physical therapy and speech therapy services.
- Offer vocational training while in school.
- Have special education teachers support integrated student in general education classes.
- Smaller classes (with 20-25 students instead of 45-50)

Opinions and Experiences of Teachers of General Education

The survey participants were 86 general education teachers, most of whom (n=79, 91.8%) have worked or are working with special education students (children with intellectual and physical disabilities, behavior disorders, chronic illness, speech impairment, and visual and hearing impairments). They were from Tiranë (n=12, 14 %), Durrës (n=12, 14%), Korca (n=12, 14%), Elbasan (n=11, 13%) Vlorë (n=19, 22 %) and Shkodër (n=20, 23%).

Only half of the teachers are welcoming and open to having students with special needs in their classes as Fig 23 shows. A quarter of the teachers surveyed (25.2%) are opposed to the idea. This is not surprising; these teachers have no received little knowledge and training on how to work with students with special needs. Furthermore, if they have students with special needs they receive almost no support from special education teachers and aides, or other experts who are nonexistent in most of the Albanian schools.

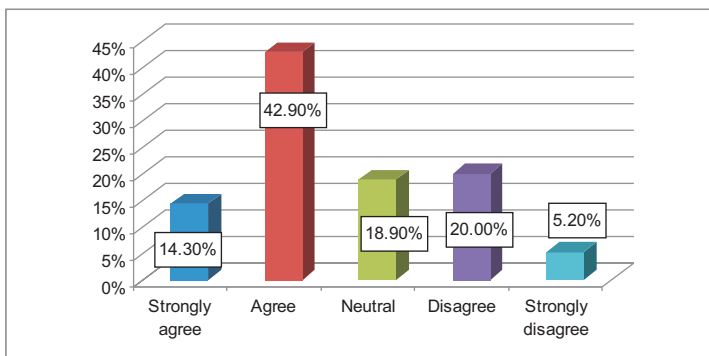


Fig. 23 Teacher's attitude towards inclusion

Asked on what was essential for teachers who work with a student with special needs, most of them (63.6%) identified caring for the student and 61.6% recognized the desire to work with the student. Fewer teachers (34.7%) checked the professional training option. This may be explained with the status of inclusive education in Albania; the focus is on making it happen and not the quality and effectiveness of work. Fig. 24 illustrates the findings.

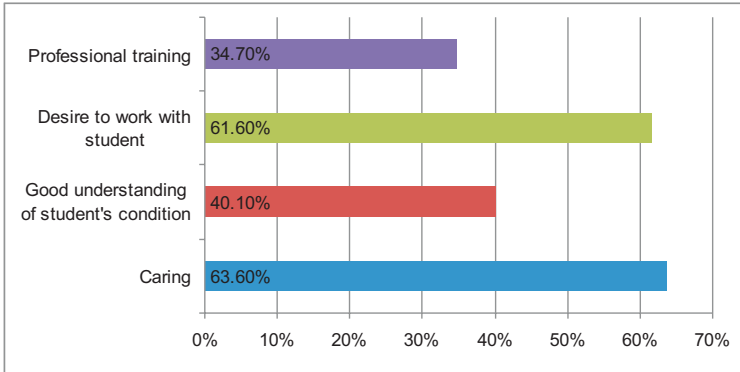


Fig. 24 Essential aspects for working with a student with special needs.

Most of the teachers (71%) believe “The teacher’s work with students with special needs should be individualized and support his/her strengths,” whereas 29% of them believe that they should focus on student’s needs and try to eliminate his/her gaps in knowledge. Asked on the kind of remuneration for their work with a student with special needs, 81.1% of the teachers chose an annual fixed wage supplement, whereas the others (18.9%) were open to other options.

Discussion

The results of the evaluation of the work for the measures of the National Action Plan in the field of education and the responses of parents and teachers in their respective surveys, show that although, most of the measures which were to be completed by 2006 were not accomplished. There has been some noticeable progress towards the accomplishment of the objectives of the National Action Plan which seek the inclusion of students with special needs in regular education.. Some of the achievements are the development of the background by creating a curriculum that indents inclusion, including knowledge on the education of students with special needs in the teacher education curriculum, and providing training to teachers

in major cities of the country. The graduation of the first 60 special education teachers is also a leap forward. The inclusion of children with special needs in 21 kindergartens and 25 schools is another major attainment. Furthermore, assigning 140 psychologists and 32 social workers in various schools in major cities of the country is another step in the right direction. Most of parents are pleased with the education their child with a disability receives in a general education school and most of teachers are welcoming. Progress has also been done in the special education schools, where most of the students have IEPs, there are clear admission procedures and the new curricula have elements of integration in the community.

Some of the issues that need attention to ensure effective inclusion in regular education schools, besides the measures for which the deadlines have not been met, regard the new curriculum, teacher training, support for teachers, data collection and dissemination of best practices. Regardless of the improvements made, the new curriculum is far from being inclusive. It lacks flexibility and does not provide enough guidance to the teachers on how to modify the material for exceptional students, with disabilities or gifted. Regular training of teachers for effective ways of working with students with special needs has been missing. The incentives for teachers to work with students with special needs have not been put into operation for all teachers. There are no administrative structures to encourage, support and supervise inclusive education in the Ministry of Education and the Regional Departments of Education. The data regarding inclusion are incomplete at best. Not all students have IEPs and for many of them the assessment is not multidisciplinary.

Special education schools continue to have many issues, which impair the effectiveness of the efforts for the integration of students with special needs. One main issue is the curriculum which needs to be revised to allow for the integration at the student in regular education. The other issue is lack of multidisciplinary assessment teams and lack of needed professionals such as physical therapists, speech therapist and others. Many of the teachers need training on contemporary functional methods. Transportation of students continues to be a problem and so is their better participation in community events.

Recommendations

- Make the necessary changes in the National Action Plan to reflect the missed deadlines and set new timelines. Reorganize and specify the responsibilities of the educational institutions at the central and local government to carry out the measures of the National Action Plan on Time.
- It is imperative to improve the Public Education Normative Provisions without delay. The improvements need to include responses to the issues related to the role of the departments of education for inclusive and special as well as teacher incentives and compensations.
- Treat the schools where students have been integrated as pilot schools and plan data collection and dissemination of best practices in these schools.
- All special institutions should experience a powerful process of change to provide inclusive experiences and opportunities for social inclusions outside the school with peers. Increase of practical activities and programming should also be a priority.
- The Ministry of Education and the departments of education need to set up a task force that will prepare programs for the training of teachers who are involved in teaching students with special needs in regular education. Teachers of special education schools may be used as a resource.

Introduction

Employment for disabled people is still a problem in Albania. Although Albanian legislation, which has improved through the years, protects the rights of disabled people to get vocational training and employment, this research shows that this legislation is little known by actors working in this field and, unfortunately, enforced even less. There are no sanctions and enforcement mechanisms that ensure that laws protecting employment rights for disabled people are properly implemented. The number of the disabled persons who were employed during 2006 is quite low. Disabled people very rarely seek employment by the employment offices or training by the vocational training centers. Generally, disabled people and their families ask financial support from these institutions. This is evidence that the policies used up to now have encouraged parasitism and discouraged disabled people's ambitions.

The governmental scheme to encourage the employment of disabled persons has not succeeded. Disabled people seek employment without the intervention of the employment office. They feel discriminated against by the majority of employers, because tend to employ disabled people mostly as a charitable act or based on disabled peoples' professional skills and only seldom because they are obliged by the law. Vocational training for disabled people is almost non existent. Most disabled people lack the necessary information and orientation. Even in the best of circumstances they have the information but fail to receive the service, because the institutions lack inadequate infrastructure. The employment offices do not possess annual data on the employment of disabled people employment; they have no records of the exact number of the disabled persons employed or of their employers. Without this information, it is difficult to analyze or draw conclusions from their work. There is no

record of the budget used for training and employment of disabled people for the year 2006.

Under these circumstances, there is an urgent need to evaluate current employment programs. It is necessary to improve the training and increase the employment of disabled people by setting up controlling mechanisms, collaborating with interested and active professionals in this field, enhancing the supportive and rehabilitating services at the community level and increasing the budget to support this category of people. It is interesting that in all the interviews and questionnaires conducted for this monitoring process, there are discrepancies between those who provided and those who received declarations. This is clear evidence of the acute problems that exist in the disabled peoples' service sector.

In the evaluation of the National Strategy implementation, ADRF has also paid attention to the degree to which disabled people's rights are respected in employment procedures. The evaluation process was carried out based on a methodology composed by the following instruments:

1. Knowledge and study of legal package and political documents for employment and professional training of people with disabilities that express the state and society attitude towards this social group.
2. Information collection by the questionnaires and the interviews conducted in six Albanian cities: Tiranë, Durrës, Korca, Shkodër, Elbasan and Vlorë.
Private and governmental employers, people with disabilities as well as parents of the disabled people were interviewed on the grounds of this evaluation. Officials of the central and local government were also interviewed, including those who make the employment policies as well as those who implement these policies.
Community services and centers representatives were interviewed and gave their opinion on people with disabilities.
3. The current services situation comparison for employment and professional training towards people with disabilities with National Strategy targets on people with disabilities.
4. Identification of issues and drafting recommendations.

Albania is going through a period of high unemployment caused by different economic, social, political and cultural factors. The situation is even worse for disabled people due to cultural barriers, inappropriate infrastructure, lack of information on the relevant legislation and the opportunities it affords disabled persons, as well as lack of services and facilities in different areas of the country.

Legislation

The Albanian legal framework, improved through the years, states and protects disabled peoples' interests as they relate to vocational training and employment.

The Albanian Republic Constitution, Chapter IV on "The economic, social and cultural rights" article 49, section 1 and 2 states that:

1. *Everyone has the right to make a living by having a legal job that he/she has willingly chosen or accepted. He/she is free to choose his/her profession, the place of work as well as the professional qualification system.*
2. *The employed person is entitled to social security as a right of employment*

Chapter V "Social Objectives", Article 59 1st paragraph states that "the state, within its constitutional competences and by means at its disposal and in a manner complementing private initiative, must assure:

- a) *Employment under equal conditions of all individuals able to work*
- b) *Health rehabilitation, special education and integration of disabled people in society as well as continuous improvement of their living conditions*

Albanian Republic Labor Code, approved by the law no 7961, date 12.7.1995, amended by the law no 8085 date 13.03.1996 and law no 9125 date 29.07.2003 prohibits any kind of discrimination in hiring or education of the disabled people.

Article 9 in paragraph 1 and 2 delineates that:

1. *Any kind of discrimination in education and employment is prohibited*
2. *The term "discrimination" is understood to refer to any kind of differentiation, exclusion or preference based on the race, color, sex, age, religion, political standing, nationality, social status, family relations, mental or physical disabilities that threatens any individual's right to be equal in terms of education and employment*

Article 20, paragraph 1, section (b) guarantees the right of disabled persons to enter into contracts in working relationships. It also affirms that (c) disabled persons can expressly or by silent consent authorize their legal representatives to do so. Article 101 protects against night work for children less than 18 years of age and disabled people provided medical evidence. The Labor Code generally defines the employer's obligation to adapt the working environment to the working process.

The law on “The Encouragement of Employment” no 7995, date 29.9.1995 amended by the law no 8444, date 21.01.1995, law no 8862, date 7.03.2002 and law no 9570, date 3.07.2006 aims at the definition of the general policies that ensure gainful and freely chosen employment. Professional education, employment and career counseling are all employment offices’ duties. These offices operate all over the country under a central authority.

Chapter II on the State Employment Policies, Article 4 enumerates the state’s role in providing employment for citizens who seek it. Some of the elements that ensure the success of employment encouragement policies include (b) professional training and (c) Professional rehabilitation as well as support for disabled people seeking employment.

Chapter IV of the same law includes dispositions for disabled peoples’ employment. Article 14 guarantees the right to professional training in compliance with their possibilities. It also establishes that specialized institutions have an obligation to create an environment and facilities conducive to adequate professional training.

Article 15 states employers’ obligation to hire disabled people. It also clearly expresses the State Labor Inspectorate to make sure this obligation is fulfilled. Article 16 provides for stimuli to encourage the employment of disabled persons. Subventions to the employers in order to improve the working place and exclusion from the taxes to be paid for the disabled employees are among the stimuli the law provides. The law also requires every employer who does not hire disabled people to transfer into the State Labor Inspectorate account the amount of money equal to a disabled person’s minimal payment. The law on “Education and Vocational Training in the Albanian Republic” no. 8872, date 29.3.2002 guarantees a citizen’s right to education and vocational training despite social status or health conditions. Article 7 of the law delineates the foundation of special schools or classrooms as well as special qualifications for the personnel meant to work with disabled people. Article 5 of the same law lists the groups of beneficiaries that require professional rehabilitation, among them “disabled people, mothers of many children, individuals less than 18 years old.

National Strategy on People With Disability

The main political document of the Albanian government concerning disabled people, which also includes their right to employment is the National Disability Strategy approved by the Council of Ministers by decision no 8 date 7. 01. 2005. This document introduces the government’s and other interested actors’ main goals and objectives in the realm of disabled people employment.

The strategy's Objective

- Provide education and training opportunities to increase the individual capacity of people with disabilities to get employment.
- Enable people with disabilities to lead the development of their own training and employment goals, and to participate in the development of support options to achieve those goals.
- Educate employers about the abilities and capacities of people with disabilities.
- Provide information about career options, ways to generate income, and assistance available for people with disabilities.
- Find ways for the reasonable adjustment of working places in accordance with the needs of people with disabilities
- Improve prevention in working places to avoid the development and aggravation of disabilities.
- Investigate longer-term incentives to increase training, employment and development opportunities for people with disabilities.
- Encourage the development of a range of employment options recognizing the diverse needs of people with disabilities.
- Ensure people with disabilities have the same employment conditions, rights and entitlements as everyone else has, including minimum wage provisions for work of comparable productivity.
- Provide communication services, resources and flexible workplace options.
- Ensure that the needs of people with disabilities are taken into account in developing more flexible income support benefits, to make access to work and training easier.
- Review income support provisions to ensure they provide an adequate standard of living.

The above-mentioned objectives are to be fulfilled through a work plan which is part of the strategy's implementation.

The work plan includes:

1. Study on the employment situation of people with disability, recommendations on employment options of people with disability in Albania.
2. Support for the creation of protected employment for people with disability and support for the transport of people with disabilities to their work-places.

3. Reform of the benefits and pensions' schemes for people with disabilities so as to avoid conflicts with the active employment policies.
4. Effective implementation of legislation on employment of people with disability and provision of targeted vocational training /counseling to enable people with disability to compete on equal terms in the labor market
5. Reform of the vocational training system aimed at the inclusion of people with disability in the vocational training programs.
6. Provide employment, career counseling and other supportive services to people with disability in collaboration with the employers

The above-mentioned objectives/action plan fulfillment is the object of this analysis.

Results

Implementation of the National Strategy on People with Disability (NSPWD) action plan from the responsible central institutions' point of view.

We will proceed with the summarized evaluation of the Ministry of Labor, Social Issues and Equal Opportunities representative. Although the ministry's representative is positive about the strategy's action plan, our data show that even though the strategy is known by most of the interested actors, there is no awareness about its implementation and consequently it is not implemented. The study on the employment of people with disability is in progress. The sooner this study is over, the sooner all the actors involved in the disability sphere will become aware of the law on the Employment Encouragement and start acting.

There are no records of the disabled people employment, because currently there is no law that requires it. There are established no suitable work places for the disabled people. None of the interviewed subjects has invested any money or received any financial support from the government to adapt work conditions to the disabled people. The MLSAEO and vocational training centers surroundings and buildings in three cities (Elbasan, Fier, Tirane) have been adapted for the disabled people during the year 2006. However, this is next to nothing if compared to the disabled people need to turn every institution, office or service offering center into source of support. During the year 2006, the vocational training centers have offered no special training for their staffs, due to lack of funds. All the organized trainings have been financed only by donor agencies. Although organization of information campaigns on training and employment of the disabled people is one of the

obligations of the NSPWD action plan, there was generally noticed lack of financing for these events.

There have been no penalties and other coercive mechanisms to enforce the law on disabled people employment. In this respect the responsible offices efforts are minimal. The discussion of the council of ministers decision on “definition of the sanctions and punishment for the employers who do not employ disabled people” is in progress. Finally, though legislation framework is complete, its enforcement is not a priority of the responsible authorities; no funds appear to have been allocated by the government for disabled peoples’ employment legislation for the year 2006. The monitoring working group did not manage to get any exact figure of the budget provided by the government for the NSPWD action plan implementation for the year 2006.

The situation’s analysis based on the monitoring data

The analyzed data enable an objective evaluation of work done for the fulfillment of NSPWD action plan objectives during the year 2006. It also allows for a comparison with the information received by different actor of this field.

174 parents of people with disability were interviewed in this monitoring effort, 81% of which live in towns, 19% in villages. Of this sample, 12% have finished only elementary school, 35% only grade school, and 47% a high school. Only 6% of the respondents have completed undergraduate school. Of the total sample, 35% of the interviewees were employed and 65% of them unemployed.

Geographic distribution of interviewees.

Table 39

Number of Interviewed parents

City	Parents of PWD
Tirane	21
Durrës	20
Korçë	40
Elbasan	30
Vlorë	23
Shkodër	40
Total	174

Disabled individuals who were interviewed about their employment situation numbered 192, 59% of whom were males and 41% females, 23% had finished only elementary school, 56% a grade school, 15% a high school, while about 6% had completed undergraduate studies. The geographic distribution of disabled persons and distribution by type of disability is listed in Tables 40 and 41 below:

Table 40
Geographic Distribution of People with Disability

City	Number Disabled Persons
Tirane	26
Durrës	26
Korçë	39
Elbasan	29
Vlorë	32
Shkodër	40
Total	192

Table 41
Distribution by Disability Type

Kind of disability	Percentage
physical	34.9
mental	27.6
blind	22.9
mute/deaf	14.6
Total	100.0

There were interviewed 50 private and 47 public subjects situated almost proportionately in all the towns involved in the study as well as the 6 heads of employment offices in these cities. The Ministry of Labor Social Affairs and Equal Opportunity's representative was object of this interviews series in order to confront all actors' opinions and evaluations.

Knowledge of the Law

Work for disabled peoples' training, employment and integration should start with knowledge of the relevant legislation by all interested and active parties. Based on the interviewees' answers on the information they had about the law on "the Encouragement of Employment", it came out that only 5% of parents and 10% of disabled people have full knowledge of that law. Table 42 shows that the answers that prevail are *partly or not at all*.

Table 42**Level of knowledge of the legislation among parents and people with disability**

Level	Parents	Disabled people	Total
Completely	4.6%	9.9%	7.4%
Partly	58.4%	54.7%	56.4%
Not at all	37.0%	35.4%	36.2%
Total	100.0%	100.0%	100.0%

The degree of knowledge of employment legislation related to persons with disabilities is generally similar among the disabled people and their parents; they pass information to each other. This means that if one party lacks the information, the other one will likely lack it, too. Even on the rare occasions that this information exists, its source is Non-Profit Organizations (NPOs) that operate in the area of disability rights, media or other disabled people. It is noteworthy the fact that public institutions are never mentioned as source of information on the existing legislation, although this is one of their duties.

The knowledge level among the employers community on the concerned law is relatively higher in cities such Tiranë, Elbasan and Vlorë. In other cities like Durrës and Shkodër partial knowledge prevails, and in other cities such as Korca there exists no knowledge at all. Table 43 shows the knowledge level on the "Employment Encouragement" law among the community of public employers according to the cities.

Table 43
Knowledge of the law by public employers

Level	City						Total
	Tirane	Durrës	Korçë	Elbasan	Vlorë	Shkodër	
completely	85.7%	28.6%	14.3%	71.4%	57.1%	14.3%	45.2%
partially	14.3%	71.4%	14.3%	28.6%	28.6%	71.4%	38.1%
Not at all			71.4%		14.3%	14.3%	16.7%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

The situation is even worse among the private employers, as Table 44 shows in cities like Durrës, Korçë and Vlorë no employer knows the law completely. In Korca, no employer claimed to have any information on the “Law on Employment Encouragement.(see Table 44). Partial knowledge or no knowledge is prevalent in all cities regarding employers.

Table 44
Knowledge of the law among private employers

Level	City						Total
	Tirane	Durrës	Korçë	Elbasan	Vlorë	Shkodër	
Complete	60.0%			42.9%		71.4%	31.1%
Partial	40.0%	42.9%		57.1%	28.6%	28.6%	33.3%
Not at all		57.1%	100.0%		71.4%		35.6%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Information on the law seemed to come from the usual sources: official journals, employment offices and organizations that work to protect disabled peoples’ rights. All (100%) of the heads of employment offices in the six cities included in the ADRF monitoring declared that they had heard of the National Disability Strategy and of legislation on the employment of disabled persons; all believed that the legislation was not enforceable due to he lack of implementing regulations.

In addition, almost none the public and private employers expressed enthusiasm about the application of this legislation in Albania. Their suggestions about the incentives the state should give employers so that they hire disabled people shows

a lack of understanding of the relevant legislation, which includes incentives for employer support (Article 16). All the directors of employment offices expressed their good will to employ disabled people, but did not profess to see any practical possibilities for the application of the law without penalties for failure to abide by the law and in the absence of a budget to support its application.

Disabled people employment

The survey found that 75% of the disabled people want to be employed. Despite their desire to find jobs during 2006, they did not seek employment from the regional employing offices or other public institutions. Disabled people appear to fear discrimination, prejudice, rejection, being treated with indifference, or they are afraid of the prospect of not being able to adapt to working conditions. In most cases, disabled people seek employment by the private employers using personal connections.

Table 45

Orientation for employment

[Sample of respondents includes both disabled persons and parents]

Questionnaire addressed to the disabled people or their parents

Information resource	Parents	Disabled people
Employment office	38.8%	37.5%
Municipality/Commune	21.2%	39.6%
NGO	30.0%	11.5%
Private employer	92.1%	70.1%
Public employer	17.8%	10.5%

All the employment offices in the six cities involved in monitoring have very low figures of disabled people registered as jobseekers. There is a discrepancy between answers given by disabled people and the employment offices' records. Although disabled people's parents claim their children mostly seek jobs, employment offices claim that they (disabled persons) generally ask for cash instead of employment by these offices. Survey data show that in 2006, registered disabled jobseekers included 273 persons in Durrës, 22 in Elbasan, 6 in Tirane and none in Vlorë, Shkodër and Korçë. In Vlorë 230 disabled persons presented themselves to the employment office, but they were looking for financial help instead of employment. When asked about the employment offices role in connecting disabled jobseekers with businesses

or public institutions, disabled people answered that except for Tiranë's office the other ones were doing little or nothing at all.

In about 60% of the cases, disabled people or their families received no answer or were simply left to wait. Only 20% of parents and 15% of disabled jobseekers received positive answer, 25% of parents and disabled jobseekers received negative answers at their first appearance at the employment office. In most cases, the negative response was justified by the lack of vacancies, improper infrastructure, or the presumed inability of disabled people to adapt to the job, etc. This attitude is a direct result of the lack of information about the legal obligation to hire disabled people and reflects societal stereotypes and prejudices towards the disabled. The few disabled people hired by public and private institutions seem to be result of charity, not because of any legal requirement.

Article 15 of the law on "Employment Encouragement" states that:

"... Every employer is obliged to hire one disabled person for every 25 employers..."The law provides for incentives in case it is obeyed and punishments in case it is not obeyed. If employers obey the law they get financial support from the government in order to create the necessary working environment for disabled people and they are also exempted from paying taxes. If employers do not obey the law, they are obliged to pay the salary for every disabled person they did not employ. (See page 2 and 3).

Since punishment is never imposed to employers who fail to obey the law, the law is not, in reality, being enforced. Disabled parents declare that their children's employment is important not only for economic reasons, but most of all for the health and emotional well-being of their children. Most interviewees (parents and children) declare that employment has significantly improved disabled peoples' communication skills. When asked what kind of support would be more favorable to them; disability pension or employment 50% answered that they would be in favor of a combination of both, which suggests that simple support schemes would tend to be unsuccessful, because they encourage dependence and thwart ambition for a better life among disabled people.

The fact that a considerable number of disabled people and their parents prefer work, contradicts information given by employment offices, which claim that disabled people and their families look mostly for cash instead of jobs when they visit the offices.

The disabled peoples' employment picture is negative in both private and public sectors. Although all public employers claim to employ disabled people, compared to the disabled people interviewees their number is minimal. If we compare the

general number of a given institution's employers to the disabled employees, it would be clear that the number of the latter is insignificant and far below the legal standard. Worse, the figures cited by employers and employment offices can not be disproved to be true; there are no continuous official records. [Table 46]

Table 46
Percentage of people with disability employed in your institution

Response							Total
	Tirane	Durrës	Korçë	Elbasan	Vlorë	Shkodër	
Yes					71.4%	71.4%	90.5%
No	100.0%	100.0%	100.0%	100.0%	28.6%	28.6%	9.5%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Only a few institutions in Vlorë and Shkodër admitted to not having disabled employees. The number of employed disabled people for the year 2006 is generally low or zero in some cases. Based on the data gathered from the employment offices in Durrës, Tirane, Vlorë and Korçë there were no disabled people employed for the year 2006. In Tirane and Korçë 25%, Shkodër 43%, Vlorë 14% of the interviewed subjects employed disabled people during 2006.

In absolute terms, this means that during several years in 47 interviewed subjects there were employed 150 disabled people (i.e. 3 disabled people for each subject). During 2006, there were employed 20 disabled people (i.e. 1 disabled person for every 4 respondents). Shkodër seems to have improved in 2006 by employing 13 disabled people whether Durrës records the biggest number of disabled people employment during several years that is 67. Figures show that the situation is very bad and there is little hope for employment of disabled people if things will keep on moving at the same rate.

Table 47
People with disabilities employed in the public sector¹¹

Cities	Public Sector	
	Disabled people employed in 2006	Total number of employed disabled people
Korçë	3	24
Durrës	0	67
Tirane	1	17
Shkodër	13	20
Elbasan	2	15
Vlorë	1	7
Total	20	150

Table 47 shows that the general number of people with disabilities employed in public entities is 20.

Table 48
Reason for employing people with disabilities

Reason	Percentage
Ability to work	86.7
Legal obligation	6.7
Charity	6.7
Total	100.0

The question was “What is Your considerations when you employ disabled people?”

The interviewees admit that their personal connections to the disabled people and their families have been more effective than relationships with the employment offices and NGOs. This fact seems to be directly connected to the small number of disabled people who go to the employment offices or institutions of local government to seek employment. It appears the law is not functioning at all as intended.

11. Albanian law requires disabled persons employed in the public sector to work no more than 6 hours/day

Table 49
Percentage of the request for employment of people with disabilities
(public employers as respondents)

Resource	City						Total
	Tirane	Durrës	Korçë	Elbasan	Vlorë	Shkodër	
The disabled person	85.7%	57.1%	100.0%	83.3%	100.0%	100.0%	85.3%
The disabled person's family	14.3%	14.3%		16.7%			8.8%
The employment office		14.3%					2.9%
NGO		14.3%					2.9%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

The question was “Where has the request to employ a disabled person come from?”

The employment situation in the private sector is no better than the public sector.

Table 50
Percentage of people with disability in private entities

Response	City						Total
	Tirane	Durrës	Korçë	Elbasan	Vlorë	Shkodër	
Yes	60.0%	28.6%	100.0%	100.0%	57.1%	100.0%	73.3%
No	40.0%	71.4%			42.9%		26.7%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

100% of the interviewed private entities in Korçë, Elbasan and Shkodër declare that they have disabled employees in their institutions. In Durrës and Vlorë the percentage is lower. In absolute figures, the situation is as follows:

Table 51
Number of declared employed people with disability

City	Private sector	
	Total number of employed disabled people	Disabled people employed in 2006
Korçë	12	4
Durrës	7	4
Tirane	15	5
Shkodër	27	10
Elbasan	28	1
Vlorë	5	1
Total	34	24

The private sector, which has grown and developed in the post communist period, has not been able to fulfill disabled peoples' needs for employment, because this period has served as consolidation time for private businesses. But the employment rate for 2006 (24 disabled people) is promising compared to the public sector, which has employed only 20 disabled persons. Figure 25 compares the total disabled persons employed over the years with those employed in 2006 in both the private and public sector.

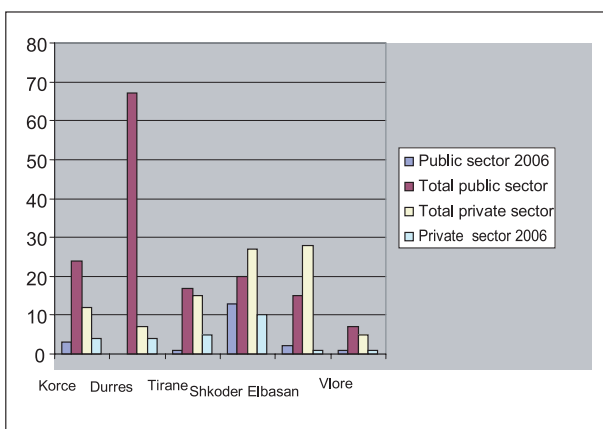


Fig. 25 Number of people with disability employed in 2006 and over years in public and private sector/by City

Private sector employers cite different reasons for hiring disabled people. Slightly more than one-third (34%) of private as opposed to 6% public employers hired disabled people out of a sense of charity. Even in the private sector, the hiring of disabled people because of an awareness of the legal requirement remains at low levels, about 19% of the cases. It is understandable that the low level of knowledge on the law is reflected in the low level of implementing it.

Table 52
Reason for employing people with disabilities
(Private employers)

Reason	Percentage
Ability to work	46.9
Legal obligation	18.8
Charity	34.4
Total	100.0

Table 53
Percentage of the request for employment of people with disabilities
(by private employers)

	District						Total
	Tirane	Durrës	Korçë	Elbasan	Vlorë	Shkodër	
The disabled person	40.0%		83.3%	85.7%	100.0%	14.3%	57.1%
Disabled person's family	60.0%	100.0%	16.7%			71.4%	35.7%
Employment office				14.3%		14.3%	7.1%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

The question was “From where has the request to employ a disabled person come?”

Table 53 shows that also in the case of private employers, family and personal connections are the main channels that lead to the employment of disabled people. In Vlorë and Durrës in 100% of the cases, the request for disabled people employment has come from the disabled people themselves or their families. In Tirane, the requests are about the same proportion, but in none of the cases, has the request

come from the employment offices. Although in very small percentages, in Shkodër and Elbasan, it seems that requests are received from the responsible institutions, which are appointed by the law to encourage disabled people employment. Even in the case of private employers, disabled people are employed at reduced working hours whenever they are employed.

The employment offices in six cities under monitoring possess no records of the number of employed disabled people in either private or public institutions. Because of this fact, it is impossible to compare the results in different years.

The employment offices appear to have failed to fulfill their duty assigned to them by the National Disability Strategy in area of employment for people with disability. Figures on employment of PWD through the employment offices are as following: In several years in Tranë there are only 3 employed people, but no one during the year 2006. In Shkodër there are no records for the past years, but it was employed a disabled person during the year 2006. In Elbasan there are no record of the past years, but there employed 2 persons during the year 2006. Whereas in Korçë, Durrës and Vlorë there are no records of the past years and there were no employed disabled people during the year 2006. The employment offices in Tirane, Elbasan and Vlorë collaborate with civil society actors in the area of training and employment for disabled people, whereas in Durrës. Shkodër and Korçë this collaboration does not exist.

Vocational training of disabled people

The lack of enforcement of the law on “Employment Encouragement” is also affected by the lack of vocational training for disabled people.

Table 54
Participation in vocational training courses

Response	Parents	Disabled People	Total
Yes	8.2%	8.8%	8.5%
No	91.8%	91.2%	91.5%
Total	100.0%	100.0%	100.0%

The question was “Have you/your child ever attended any vocational training course?”

As Table 54 figures show, parents and people with disabilities accept that 90 % of them lack this kind of training.

Even the few cases of disabled people vocational trainings, the courses have been offered by civil society organizations or realized by the interested people themselves. The prevailing vocational courses are tailoring, hairdressing, computer and watches and other repairing services. The vocational training centers in the cities under monitoring have had very few disabled attendees. Only in Elbasan were there recorded attendees; 4 disabled people attended vocational training courses in 2006.

Disabled peoples' vocational training is regulated by the law on "Employment Encouragement and Vocational Training" no 8872 date 29.03.2002. This law stipulates special schools and courses to train the personnel that will work with disabled people as well as disabled people themselves so that they acquire job skills. One of the obstacles that keep disabled people from attending vocational courses is the unsuitability of the offices and buildings where these services are offered. Low attendance of disabled people in vocational training courses seems to have been also affected by a lack of orientation, lack of proper responsibility of the employment offices. The low level of work done in Korçë, Shkodër and Vlorë is justified by the authorities with disabled people lack of interest in receiving training or employment.

It is very difficult for the employment offices to organize information campaigns for disabled people training and employment. Funds for these kinds of activities do not exist or in the best occasion, they are very limited. Consequently, there are organized only two information campaigns in Tirane, one in Durrës and one in Elbasan. The other cities have not managed to organize similar campaigns.

Conclusions

The employment situation for disabled people in Albania remains problematic. The implementation of the NSPWD action plan has been below the expected level regarding vocational training and employment of disabled people, for the year 2006.

- Despite the existing laws and policies in area of vocational training and employment for people with disability, progress in this respect is set back by the lack of legal culture, prejudice and indifference in treating the disabled people.

- Disabled people and their families are not informed about the support and provisions offered by the law on their vocational training and employment.
- Although, public entities pretend they know the law on ‘Employment Encouragement’, they do not implement it. The situation is even worse in the case of private sector, because there the law and its obligations are ignored. The responsible authorities have not raised employers’ awareness about the law and sanctions in case it is not enforced.
- There also remains unresolved the issues related to supportive systems for the businesses that employ disabled people. Loans or grants in support of such businesses would be a great positive step that would help to change the situation.
- The vocational training centers in other districts than Tiranë do not have disabled people as their priorities yet. The number of disabled people trained by these centers is extremely low.
- Employment offices and vocational training centers do not have trained specialists to work with disabled people. In the best of the cases, they have only received general training.
- Employment offices do not have exact records on the number of disabled jobseekers and they are not able to connect the jobseekers to possible employers.
- There are huge discrepancies in the evaluation of the up to date work for the implementation of the NSPWD by different actors. The biggest discrepancies are noticed between the provider and receivers of these services.

Recommendations

Based on our evaluation of the employment situation of people with disability, aiming at improving their living conditions through employment opportunities, we recommend:

- Albanian Government should evaluate the existing employment encouraging programs and conclude about their worthiness based on that evaluation. This should be done with the aim of improving these programs in order so that they could be used to offer equal employment opportunities to disabled people
- The government should provide for the creation of checking mechanisms on the enforcement of law on Employment Encouragement, as well as enforcing penalties and sanctions if the law is not obeyed.
- The government and other interested actors in the disability field should provide through laws and regulations professional/vocational rehabilitation for disabled people.
- Collaboration among authorities and responsible institutions for the law enforcement should be enhanced.
- Local government through the decentralization process should increase its support for the organizations and businesses that operate in the disability field.
- Local government institutions through employment offices should intensify their work with the disabled people and their families so that the latter know the current legal framework and its provisions for the employment of disabled people.
- Central and local government should allocate funds to support the implementation of the NSPWD action plan.
- There should be worked harder in order to enhance collaboration with the organizations and associations that work with and for disabled people.

Recommendations For a Stimulating Policy

I. Introduction

The study on monitoring implementation of the National Strategy on People with Disability, covering the period 2004-2006, highlights commitments to partial fulfillment of responsibilities deriving from this document of the Albanian Government, the most important one in the disability field. Results show an increased awareness of central and local governmental institutions on the this legal framework and its binding obligations for its implementation.

It's important to highlight the initiation of the process of establishment of the structure that would monitor implementation of the NSPWD(The National Council and its Technical Secretariat supporting the work of the council are created). Attempts have started to implement the measures foreseen in the action plan, aiming at a barrier free built environment, in the designing stage of CTA in the cities where monitoring took place.

The process of designing a new school curricula, favoring inclusive education is in progress; inclusive kindergartens and schools are at a piloting stage in main cities, center of regional subdivisions where Universities are situated. There is a budget planning at an increasing tendency for financial support, mainly offered in cash to people with disability. It should be pointed out the active role of disability NPO, as influential in stimulating governmental institutions in central and local level, to take over responsibilities for implementation of the NSPWD. Monitoring results depict meanwhile, noticeable shortcomings related to implementation of the Action Plan as well as to the monitoring process itself..

It results that there is lack of data and information in relation with the implementation of the NSPWD, at the same time the collected information speaks out for very slow progress in implementing foreseen measures of the Action Plan, the number of measures realized or partially realized is very low, compared to those that are not realized at all; NSPWD still continue to lack defined budgets for implementation of its Action Plan, consequently the institutions justify themselves for no annual financial budget planning; non implementation is evident also in cases when for certain measures there has been a budget projection.

The process of establishment of the monitoring structure is hold on and it's not extended in all line ministries, not to think of being established in local level as requested by the NSPWD. There is not yet any planning for identification and proper assessment of persons with disability and the creation of new regional structures for multidisciplinary (physical, medical and social) disability assessment . Health care for persons with disability is still difficult to be accessed in the required parameters; there is no effort to enable accessible transport; very slow progress to ensure alternative social services; non implementation of measures in the area of inclusive education does not allow that integration of children with disability in public schools become a massive process. Among major causes that influence in the non enforcement of the NSPWD, the following could be pointed out:

(a) lack of strategic planning, budget planning, lack of specific structures within the institutions responsible for implementation of the NSPWD; (b) lack of proper consideration of disability issues by responsible institutions; (c) political changes that very often dictate attitudinal changes towards existing policies; (d) decentralization process is associated with uncertainties related to responsibilities, especially in cases when for certain measures of the action plan, there are many actors responsible.

II Recommendations

The monitoring study identified series of achievements as well as shortcomings, that are presented by each of the strategy intervention field, analyzed in this survey. Results call for a set of specific recommendations in each of the strategy fields. This closing summary of recommendations attract the attention towards changes that influence directly in stimulating implementation of the NSPWD and more concretely they would require:

1. Review the document of NSPWD, by making the necessary changes and adapting:
 - timelines for measures in the Action Plan, in order to enforce realistic implementation,
 - clarification and regrouping of responsibilities of implementing actors,
 - defining budget for each measure and each responsible actor/institution, when foreseen more then one
 - Review and reformulation of measures in each of the intervention field, as well as review of intervention fields.
2. Establishment of the complete monitoring structure
 - establishment of the monitoring structure in horizontal and vertical system
 - creating capacities of the monitoring structure
 - increasing to a higher representation level the monitoring structure, by placing the Technical Secretariat office of the National Council, in the institution of Council of Ministers.
3. Organize a system of collecting, preserving, distributing disability data/ create a complete data-base that could be regularly updated.
4. Plan and realize scientific studies related to specific disability issues, that would support and contribute to strategic planning and policies.
Increase and empower the role of people with disability and their family members as participants in decision making processes, as a precondition to facilitate and ensure efficiency in all processes.

References

1. Albanian Constitution.
2. Albanian National Strategy on People with Disability, (Decision No 8 of 01/07/2005)
3. 2010: A Europe Accessible by All, Report by EC Expert Group on Accessibility, October 2003.
4. Study- Problems Relating to Built Environment Accessibility in Albania, ADRF,1999.
5. Study-Tirana - The Challenge of Urban Development, CO-PLAN, 2003.
6. UN Convention on the Rights of People with Disability , 2006
7. Urban and Architectural Rules and Norms for People with Disabilities” (Decision No. 401 of 06/25/2004)
8. Law on Urban Planning, No 8405, of 09/17/1998, amended with Law No 8453, of 02/04/1999, amended by law No 8991 of 01/23/2003.
9. Law on Development of priority Areas in Tourism, of 01/21/1993, amended by Law No 8163 of 11/07/1996, amended by law No 8368 of 07/09/1998, amended by Law No 8591 of 03/28/2000.
10. Law on Construction Police, No 8408, of 09/25/1998
11. Law on Control and Discipline in Construction, No 8402, of 09/10/1998
12. Carlson M. *Child rights and mental health*. Child and Adolescent Clinics, North America, 2002, 10(4): 825-839

13. Community-Based Rehabilitation and the Health Care Referral Services, WHO, 1994
14. World Health Organization Assessment Instrument for Mental Health Systems. Geneva. World Health Organization, 2005
15. UN Convention on the Rights of the Child, Geneva 1990
16. UN Standard Rules on the Equalization of Opportunities for Persons with Disabilities, 1993
17. World Health Organization, International Classification of Impairments, Disabilities, and Handicaps: A manual of classification relating to the consequences of disease, Geneva, WHO, 1980
18. Law on Economic assistance and Social services , No 9355 of 03/10/2005
19. Law on Mental Health, No 8092 of 03/21/1996
20. Social Services Strategy
21. Council of Ministers decision no 307 date 24.05.1994 on “Social Services“
22. Council of Ministers decision no 542 date 27.07.2005 on “The statute of State Social Service“
23. Council of Ministers decision no 563 date 12.08.2005 on “Definition of the district responsibilities in distributing social services“
24. Council of Ministers decision no 564 date 12.08.2005 on “Licensing of the Social Services Providers“
25. Council of Ministers decision no 658 date 17.10.2005 on “Approving of the Social Services Standards”
26. Council of Ministers decision no 822 date 6.12.2006 “Social Services Standards for disabled people”.
27. Observance of rights of people with mental disabilities, Observation Report, publication of Albanian Disability Rights Foundation. Tirana, December 2006.
28. Disability in Albania, Annual Report 2006, published by National Disability Observatory. Tirana 2006.

29. "I Am Like You", Observation on the situation of children with disabilities in Albania, Clos. A , Nano. V, Ikonomi. E, publication of Save the Children. Tirana, 2003.
30. Albanian School towards Integrating Processes. Nano. V. Publication of Albanian Disability Rights Foundation. Tirana, 2002.
31. One School for All "EFA 2000. No.32, p. 2. Bulletin published by UNESCO
32. Special educational needs: Curriculum issues (discussion paper) NCCA, 1999
33. Code of Labor for the Republic of Albania approved by the law no 7961, date 12.7.1995;
34. The law on "Employment Encouraging" no 7995, date 29.9.1995;
35. The law on "Vocational training in the Republic of Albania" no 8872 date 29.3.2002;
36. The law on "Social Assistance and Services" no 9355, date 10.03.2005;
37. The Employment Services Strategy approved in May 2006;
38. Vocational Training Strategy;
39. Social Services Strategy;
40. National Vocational Training and Employment Strategy approved by the decision of the Council of Ministers no 67 date 10.01.2003;
41. The Legal Package on Disability ,ADRF, 2006