



06/11/08

RAP/RCha/AL/IV(2008)

REVISED EUROPEAN SOCIAL CHARTER

4th National Report on the implementation of
the European Social Charter (revised)

submitted by

THE GOVERNMENT OF ALBANIA

(Articles 3 and 11
for the period 01/01/2005 – 31/12/2007)

Report registered by the Secretariat on 31 October 2008

Republic of Albania

**Report for the article 3 and article 11 of
European Social Charter**

Article 3

The right to safe and healthy working conditions

With a view to ensuring the effective exercise of the right to safe and healthy working conditions, the Parties undertake, in consultation with employers' and workers' organisations:

Article 3

Regarding safety and health at work, the Ministry of Health and the Ministry of Labour, Social Affairs and Equal Opportunities have jointly drafted and have contributed for the approval of the Decision of the Council of the Ministers No. 742, dated November 6th, 2003 “On some changes and amendments to the Decision of the Council of the Ministers No. 692, dated December 13th, 2001 “On special measures of safety and protection of health””. As a result, actually every enterprise employing more than a certain number of employees is obliged to employ a doctor, licensed by the Ministry of Health, to dedicate his / her work to the enterprise.

10 enterprises' doctors have been granted licenses until now by the Ministry of Health to provide medical service for employees in the enterprise.

A Decision of the Council of the Ministers No. 396, dated June 28th, 2007 “On the definition of professional diseases” has also been approved.

The basic legislation consists in the:

- Labour Code;
- Law on the mental health;
- Law No. 9952, dated July 14th, 2008 “On the prevention of HIV/AIDS in Albania”;
- Law No. 9973, dated July 28th, 2008 “On some changes and amendments to Law No. 8025, dated November 9th, 1995 “On the protection from ionising radiation””;
- Decision of the Council of the Ministers (DCM) No. 742, dated November 6th, 2003 “On some changes and amendments to the Decision of the Council of the Ministers No. 692, dated December 13th, 2001 “On special measures of safety and protection of health” and to the Decision of the Council of the Ministers No. 396, dated June 28th, 2007 “On the definition of professional diseases””.

Article 3, paragraphs 1 – 4

Please explain how the authorities have consulted organisations of employees and employers on the measures which require the application of each paragraph of article 3 (procedures and level of consultations, their content and frequency.

Paragraph 1

... to formulate, implement and periodically review a coherent national policy on occupational safety, occupational health and the working environment. The primary aim of this policy shall be to improve occupational safety and health and to prevent accidents and injury to health arising out of, linked with or occurring in the course of work, particularly by minimising the causes of hazards inherent in the working environment;

Please describe the policies in the field of safety, health at work and work environment, as well as the measures taken to improve safety and health at work and to prevent risks to health and safety. Please describe also the measures for the implementation of such policies as well as the procedures for review and evaluation.

Answer:

The priority of national policies on safety and health at work is reflected in the restructuring of the State Labour Inspectorate (ISHP), the starting of the work for drafting the National Strategy on Safety and Health at Work, and starting of the work for drafting the Law on Safety and Health at Work. The Directorate for Safety and Health at Work at the State Labour Inspectorate has been reorganised and empowered. Now it has two sectors; the Sector for the Prevention of Accidents and the Sector of Dangerous Substances and Professional Diseases. The inspection of work has been actually oriented towards the control of the conditions of safety and health at work for all employees. Different agreements have been concluded with the Institute of Public Health, with the Sanitary Inspectorate and with the Environment Inspectorate, which shall further ensure the collaboration between institutions.

Article 3, paragraph 2

... to issue safety and health regulations;

Question A.

Please list the legislative or administrative acts in power to protect the physical and mental health of the employees by clearly stating:

- a) the material scope of implementation (risk covered, as well as measures ensured for prevention and protection);**
- b) the personal scope of implementation (on any legal status, for those employed and those not, as well as any sector of activity including in houses or housekeeping staff).**

Please state the rules established to ensure that employees under specific work contracts enjoy the same protection measures same as other employees in the workplace.

- Protection of health and safety at work is regulated through the following legislation:

- Constitution of the Republic of Albania;
- Labour Code of the Republic of Albania;
- Law no. 9634, dated October 30th, 2006 “On the Inspection at Work and the State Labour Inspectorate”;

- Decision of the Council of the Ministers no. 100, dated February 03rd, 2008 “On dangerous substances”;
- Decision of the Council of the Ministers no. 445, dated June 26th, 2003 “On marine inspection”;
- Decision of the Council of the Ministers no. 788, dated December 14th, 2005 "On the determination of accidents at work or due to work”;
- Decision of the Council of the Ministers no. 461, dated July 22nd, 1998 "On the record held by the employer on accidents at work and professional diseases”;
- Decision of the Council of the Ministers no. 692, dated December 13th, 2001 “On special measures of safety and hygiene at work”;
- Decision of the Council of the Ministers no. 205, dated May 9th, 2002 “On the definition of easy jobs for minors”;
- Decision of the Council of the Ministers no. 207, dated May 9th, 2002 “On the definition of hard or dangerous jobs”;
- Decision of the Council of the Ministers no. 742, dated November 6th, 2003 “On some changes and amendments to the Decision of the Council of the Ministers no. 692, dated December 13th, 2001 “On special measures of safety and hygiene at work prior that the enterprise starts functioning”;
- Decision of the Council of the Ministers no. 513, dated July 30th, 2004 “On the classification of the activities and documentation and procedure for granting permission from the labour inspector, prior that the enterprise starts functioning”;
- Decision of the Council of the Ministers no. 164, dated March 22nd, 2007 “On the cooperation between the State Labour Inspectorate and the Ministry of Interior”;
- Decision of the Council of the Ministers no. 169, dated March 28th, 2007 “On the procedure of issuing the inspection act and its elements”;
- Decision of the Council of the Ministers no. 457, dated 22.8.1998 “On the approval of the statute of the Inspectorate”;
- Decision of the Council of the Ministers no. 419, dated August 4th, 2000 “On dangerous items”.

This legislation is applied for all employees, in whatever sector or activity.

Question B.

Please specify the specific measures taken to ensure the health and the protection of employees engaged in dangerous works.

Answer:

Continuous controls, in cooperation with the analogue institutions, have been carried out in those enterprises whose work presents danger for the life of the employees.

Article 3, paragraph 2

With a view to ensuring the effective exercise of the right to safe and healthy working conditions, the Parties undertake, in consultation with employers' and workers' organisations: ... to issue safety and health regulations;

The actual labour Legislation does not make any difference regarding medical service in the workplace for employees who work part time.

The actual labour Legislation presents gaps and does not foresee any special treatment for the category of the self – employed. The treatment of this category shall be included in the new draft law on safety and health at work. Under this actual legislation and with the actual resources, it is impossible for the State Labour Inspectorate to obtain such information.

There are no centres in Albania which offer qualifications to the category of employees working at home.

Article 3, paragraph 3

With a view to ensuring the effective exercise of the right to safe and healthy working conditions, the Parties undertake, in consultation with employers' and workers' organisations: ... to provide for the enforcement of such regulations by measures of supervision;

The Minister of Labour, Social Affairs and Equal Opportunities heads the National Labour Council which the highest institution of tripartite dialogue. The National Labour Council is organised in a number of commissions. The General Director of the State Labour Inspectorate is the head of the Tripartite Commission on Safety and Health at Work. It is the case to clarify that there are several inspectorates operating in Albania such as: the Environment Inspectorate, Inspectorate of Vessels under Pressure, Sanitary Inspectorate, Mines' Inspectorate, etc. each of these Inspectorates operates as per its legal bases and is responsible to monitor the safety and health at work in the sector of economy it covers.

The State Labour Inspectorate operates based on Law no. 9634, dated October 30th, 2006 “On the Inspection at Work and the State Labour Inspectorate”. The number of employees of the State Labour Inspectorate is actually 167. Out of these, 26 are based at the central directorate and 141 others in the regional directorates of the State Labour Inspectorate (as inspectors, controllers, accountants, etc).

Article 13 of the abovementioned law expressively states that: “The labour inspectors and controllers, provided with their legitimacy card by the Minister of Labour, are authorized to enter in the working premises of any entity without prior notification, at any time during day or night”. If there are violations of the rules of safety at work, the labour inspectors and controllers, in accordance with article 35, order the immediate suspension of work.

We point out that 8905 private entities employing 111792 employees and 71 State owned entities employing 15713 employees have undergone inspections in 2007. In total, 8976 entities employing 127505 employees have undergone inspections in 2007.

In all the inspections that are carried out by the labour inspectors and controllers, the elements of safety and health at workplace are also checked. For each inspection carried out at a certain entity, the labour inspector is obliged to fulfil the basic inspection form and the act of inspection in each category of their checklist. 2/3 of the categories of the basic inspection form are regarding elements of safety and health at work.

A total of 277 fines, for an amount of 44299060 leks were given during 2007 for violations of the provisions on safety and health at work.

During the period January – March 2008, the labour inspectors have suspended the work in two companies; the Steel Factory of Elbasan and a construction company in the town of Kruja. After the entry into force of the new law “On the Inspection at Work and the State Labour Inspectorate”, the level of fines has been increased for more than 50% of the provisions on safety and health at work. It starts at the level of 30 – 50 times the minimal wage, here considering that the minimal wage itself has increased from 1400 leks to 1600 leks. Also the strength of activity of the labour inspectors against violations of provisions of safety and health at work has increased.

Article 3, paragraph 3

... to provide for the enforcement of such regulations by measures of supervision;

Question B

Please describe the system of civil and penal sanctions which guarantees the application of the rules on health and protection and which provides the information on the possible breaches?

- a. number of breaches;**
- b. sectors in which they have been identified;**
- c. measures that have been taken including those of legal nature.**

Answer:

Law no. 9634, dated October 30th, 2006 “On the Inspection at Work and the State Labour Inspectorate”, in the case of breaches of the provisions on health and safety at work, foresees the immediate suspension of the activity as well as a fine which amounts up to 50 times the minimal wage foreseen by decision of the Council of the Ministers.

Referring to 2007, 277 violations were noticed and as a consequence 277 fines were given for an amount of 44.299.060 leks. The violations were noticed mostly in the

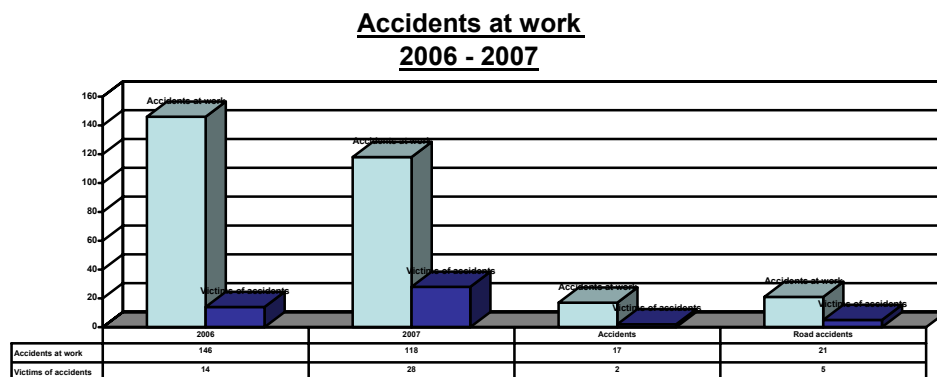
construction sector – almost 35 %, in manufacturing enterprises – almost 33,6 %, while almost 22 % were noticed in the commerce sector.

One of the measures taken consisted in increasing the awareness of the social partners through organising seminars and round tables on issues of safety and health at work, and also the collaboration with the analogue institutions for the improvement of working conditions and the prevention of accidents at work and professional diseases.

Article 3, paragraph 3, question C

According to statistics from INSTAT, the active labour force is 1373000. 1188000 is the number of those employed in both State and private sectors. 18 % are employed in the State sector. 25 % are employed in the agricultural sector.

110 cases of accidents at work occurred during 2007. 118 employees were victims of these accidents. 28 of these victims lost their lives. The comparison is made with 2006 when 146 cases of employees who were victims of accidents were recorded. 14 of them lost their lives. Accidents occurred in 2006 and 2007 are presented in a comparative way in the graphics below.



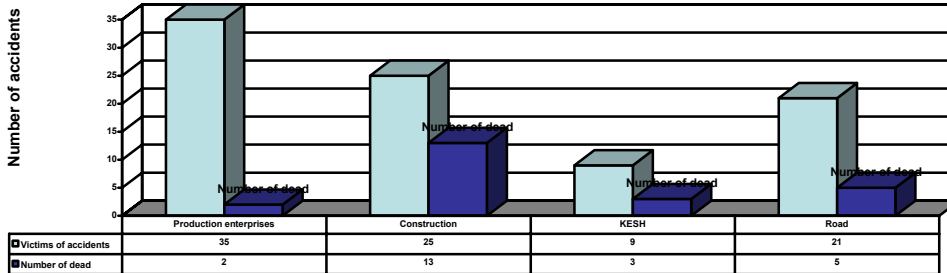
The sectors that were mostly affected during 2007 from accidents at work (here excluding accidents occurred in the mines – underground) are as follows:

- *Production enterprises* with 41.1 % of the overall number of accidents.
- *Construction Sector* with 22.7 % of the overall number of accidents occurred in the following districts: Tirana, Vlora, Durres, Elbasan, Lezha, Gjirokaster, and Shkoder.
- *KESH* with 10.5 % of the overall number of accidents occurred in the following districts: Tropoja – 2 cases (1 case of death), Elbasan – 1 case, Shkoder – 1 case of death, Tirana – 3 cases (2 cases of death), Fier – 1 case and Vlora – 1 case.

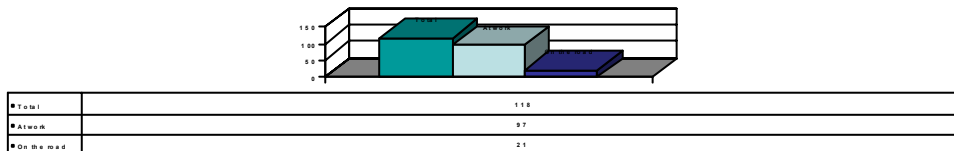
Road accidents

- *Road accidents* constitute 18.9 % of the overall number of accidents and 22.7 % of the overall number of death accidents. The sectors that were mostly affected by these accidents are presented graphically below:

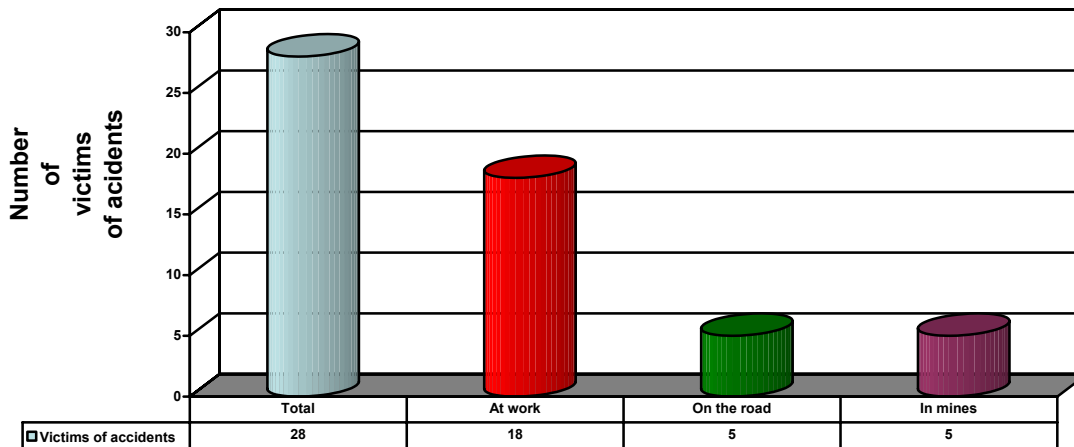
Victims of accidents per sector

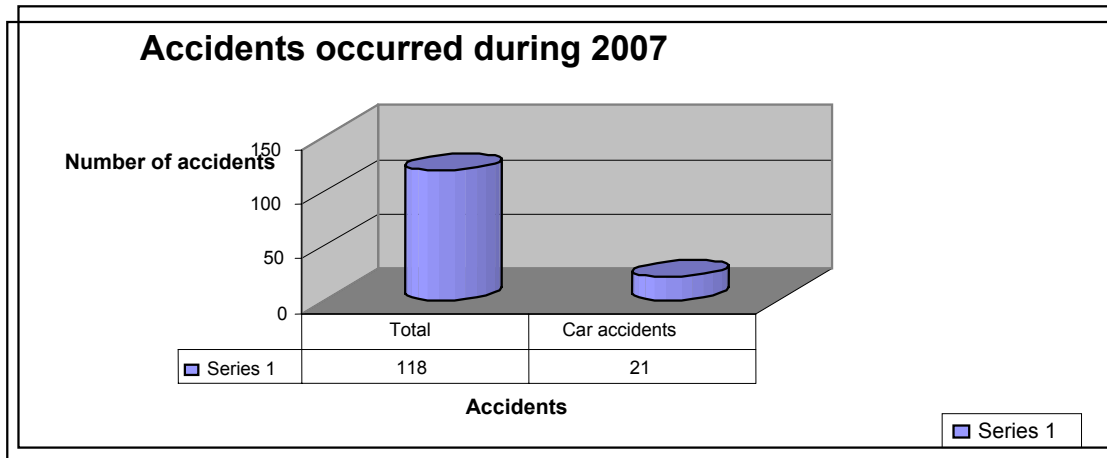


Victims of accidents during 2007



Dead in accidents in 2007





A more detailed analysis of the accidents occurred during 2007 classifies the victims of accidents as per number of employees in a certain employer, the group of age of the victims if these accidents, the type of activity, the days of the week when accidents mostly occur, months of year, geographic expansion, gender, etc. such analysis was carried out only for the accidents occurred during work and excludes accidents occurred on the road and those occurred in mines (underground).

Classification as per groups of age

As per each group of age, it results that the most affected are employees from 45 to 54 years old with 34.1 % of the cases, than those from 35 – 44 years old with 33 % of the cases, and last the employees from 55 – 64 years old with 16.5 % of the cases.

Classification as per type of activity

Based on the type of activity of the companies (as per the classification done by ILO), the cases of accidents in production enterprises represent 34.2 % of the total, in construction 26.1 %, in companies dealing with electric power, gas, water 12.6 % (this calculation includes all cases of accidents comprising car accidents).

Classification as per days of the week

Classified by the days of the week in which accidents mostly occur, it can be noticed that there are cases of accidents on both Saturdays and Sundays, which clearly shows that work activity continues during weekend. According to such classification, 18.9 % of the accidents have occurred on Mondays, 15.3 % on Fridays, and 27 % on Wednesdays. It is noticeable that most of the accidents occur on Mondays, on Wednesdays and during weekend.

Classification as per months of the year

Classified by the months of the year in which accidents mostly occur, it is noticeable that 15.3 % of the cases have been registered in July, 11.7 % in March and November and 10.8 % in the months of June and September.

Classification as per size of company (number of employees)

Classified as per the number of employees of the entities where victims of accidents were employed, it results that 25.3 % of the cases has occurred in companies employing more than 300 employees, 15.75 % in companies employing from 50 to 149 employees, and 14.4 % in companies employing from 15 – 49 employees.

Classification as per the gender

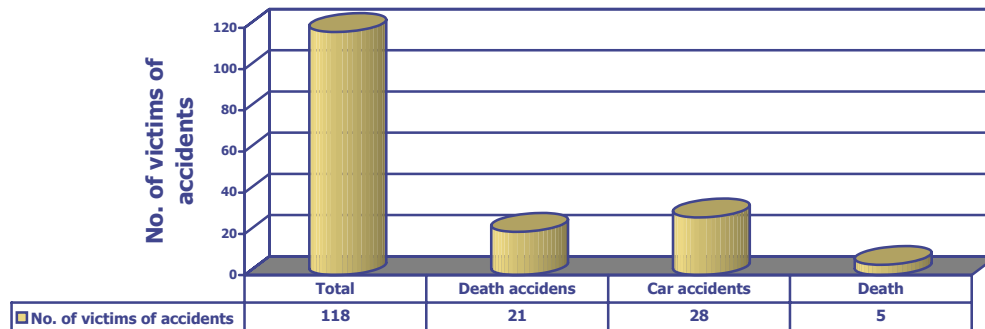
According to the gender classification, 4.5 % of the victims of accidents were females and 95.5 % males.

<i>No.</i>	<i>Accidents in %</i>
<i>Female</i>	<i>5.9%</i>
<i>Male</i>	<i>94.1%</i>

2007 showed an increase in the number car accidents compared to 2006. The graphic of the car accidents and the rank they represent in the total number of accidents is given below:

<i>Total number of victims of accidents</i>	<i>Number of victims of car accidents</i>	<i>Total Number of persons dead in accidents</i>	<i>Number victims died in car accidents</i>
118	21	28	5
	17.8 %	23.7 %	17.8 %

Accidents on the road



Article 3, paragraph 4

With a view to ensuring the effective exercise of the right to safe and healthy working conditions, the Parties undertake, in consultation with employers' and workers' organisations: ... to promote the progressive development of occupational health services for all workers with essentially preventive and advisory functions.

There are several decisions of the Council of the Ministers (DCM) on the organisation of the medical service in the enterprise, as follows:

- DCM no. 692, dated December 13th, 2001 "On special measures of safety and protection in the workplace".
- DCM no. 742, dated November 06th, 2003 "On some changes and amendments to DCM no. 692, dated December 13th, 2001 "On special measures of safety and protection in the workplace"".
- Instruction No. 2, dated June 25th, 2004 on the implementation of DCM No. 742.
- DCM no. 396, dated June 28th, 2007 "On the determination of professional diseases".

Furthermore you will find the duties that the doctor of the enterprise carries out in the framework of ensuring medical care in the workplace. "The doctor of the enterprise" has the following duties:

1. The doctor shall dedicate two third of his working time to the work in the healthcare premises dealing with health pathologies;
2. The doctor shall dedicate one third of his working time to study the working conditions and to make employees aware on the elements of safety and health at work;
3. He also deals with organising periodical visits for employees by establishing the type and nature of the examinations;
4. He ensures the completion of medical documents which include:
 - a- Record of the visits;
 - b- Medical chart which contains also a description of the examinations;

- c- Paper for the statement of professional diseases;
- d- Preparation of an annual report on such activity to be submitted to the State Labour Inspectorate.

The inspections carried out by the State Labour Inspectorate have shown that: 921 entities with more than 15 employees were inspected during 2007. Only 13.46 % of them had in place the enterprise doctor service.

111 entities with more than 15 employees were inspected during the first two months of 2008. Only 25.2 % of them had in place the enterprise doctor service.

Note: The number of employees over 15 is emphasized since it is established in the Decision of the Council of the Ministers No. 742.

Several steps have been taken to improve the health services in the workplace, as follows:

- Upon restructuring of the State Labour Inspectorate, the Directorate of Safety and Health at Work was strengthened through the creation of a new sector; the "Sector of Dangerous Substances and Professional Diseases", which covers the medical services in the enterprises.
- Several agreements have been concluded the Public Health Institute and the State Sanitary Inspectorate.
- The Inspection Form is under review and improvement by adding to it new elements related to the health service in the enterprise.
- Letters of instructions have been sent time after time to the labour inspectors work in the field to give guidelines on the obligation of the employers to have the "Enterprise doctor" in all those entities wishing to exercise production activity and employ more than 15 employees, as well as those entities which qualify as such due to the decisions no. 459, dated July 22nd, 1998, no. 207, dated May 09th, 2000 and no. 419, dated May 09th, 2002 of the Council of the Ministers.
- The Ministry of Labour, Social Affairs and Equal Opportunities has started its work for the drafting of the National Strategy on Safety and Health at Work.
- The Ministry of Labour, Social Affairs and Equal Opportunities has started its work for the drafting of the Law on Safety and Health at Work within 2008. This law is foreseen to improve the health service and will include all the branches of economy.

The inspections carried out by the State Labour Inspectorate show that only during the first two months of 2008, as a result of the measures mentioned above, there has been an 11.74 % increase in the number of entities which are provided with the enterprise doctor service. More concretely:

- 921 entities with more than 15 employees were inspected during 2007. Only 13.46 % of them had in place the enterprise doctor service.

- 111 entities with more than 15 employees were inspected during the first two months of 2008. Only 25.2 % of them had in place the enterprise doctor service.

Total	118
At work	97
In the street	21

Article 11

THE RIGHT TO PROTECTION OF HEALTH

General aspects

Question A

Please indicate the forms of ill-health which at present raise the greatest public health problems in your country by reason of their frequency, gravity and any sequels.

Main causes of deaths:

Total	16934
Due to infections and parasites	91
Due to tumours	2018
Due to nutrition Endocrine	226
Due to blood and organs	57
Due to mental disorders	126
Due to nervous system and sensor organs	476
Due to problems in the circulation apparatus	8959
Due to respiration apparatus	771
Due to tract apparatus	330
Due to urogenital System	263
Due to complications during delivery	5
Due to problems of skin and tissues	13
Due to problems of bones and muscles	39
Due to born malformations	58
Due to perinatal problems	62
Symptoms and signs of diseases	1549
Traumas, poisoning and accidents	991

Question B

Please describe the measures aimed at ensuring universal access to health care. Please also indicate on what condition the various health services are made available to the whole of your country describing the geographical distribution of these services

The primary health care services are organized based on a health centres network spread overall country. There are 405 health centres contracted by the Insurance Institute. Each health centre was required to become capable of providing a minimum benefit package.

The network is deployed in urban and rural areas, respecting the norms of population coverage according to one general practitioner per 2000 inhabitants.

Question C

Please indicate how public health services are organized in your country and state, if possible.

a. There are no private clinics licensed to carry out clinical prevention and screening in Albania. Such function is covered by a high number of private clinics licensed to carry out different diagnostic processes which also perform the process of clinical prevention and screening. Regarding the public service, it is organised as follows:

- **Regarding the sexually transmitted diseases (SST)**, a special cabinet of sexually transmitted diseases is functional in each district (such team is composed by the infections' doctor, the obstetric – gynaecologist doctor and by the dermatologist one).

- **Regarding AIDS**, the analysis are completed in the 24 public health laboratories and in the blood banks, in the two reference centres – respectively in the Tirana Central Hospital and in the Public Health Institute, as well as in two specialised clinics on infective diseases in the Tirana Central Hospital (here including also the paediatrics). Services for those infected with HIV/AIDS are also offered by three non – governmental organisations and by six services easily accessible by the young (youth friendly services) throughout the country.

- **Regarding tubercular diseases**, the ambulatory service is offered by the anti – tubercular clinics in level of district, therefore in 36 (thirty-six) tubercular clinics. There is already a national program in place for controlling tuberculosis (DOTS), led by Lungs' Diseases University Hospital.

- **Regarding mental health**, it is organised as follows:

There are four psychiatric hospitals in Albania. Their functions are: in Shkodra – psychiatric services, in Tirana – a psychiatric pavilion, in Elbasan – a psychiatric hospital and in Vlora – a psychiatric hospital. All these hospitals have in total a number of 840 beds.

The services for children and adolescents' mental health are concentrated only in Tirana. One National Centre for the development, Growth and Rehabilitation of Children from 0 to 6 years old (QKMZHRF) is located in the Kombinat area.

The hospitalisation structures are concentrated in the Psychiatric Clinic for Children and Adolescents at the Tirana Central Hospital (QSUT).

There are also some Community Mental Health Centres composed of multidisciplinary teams (including psychiatrists, social workers, nurses and occupational therapists), which offer services for adults but two of them also offer services for children and adolescents.

There are three Community Mental Health Centres (QKSHMs) in Tirana;
there is one QKSHM in Vlora;
there are two QKSHMs and two supported houses in Elbasan;
there is one supported house in Shkoder – Casa Mimoza;
there is one QKSHM in Korça;
there is one QKSHM in Diber; and
there is one QKSHM in Berat.

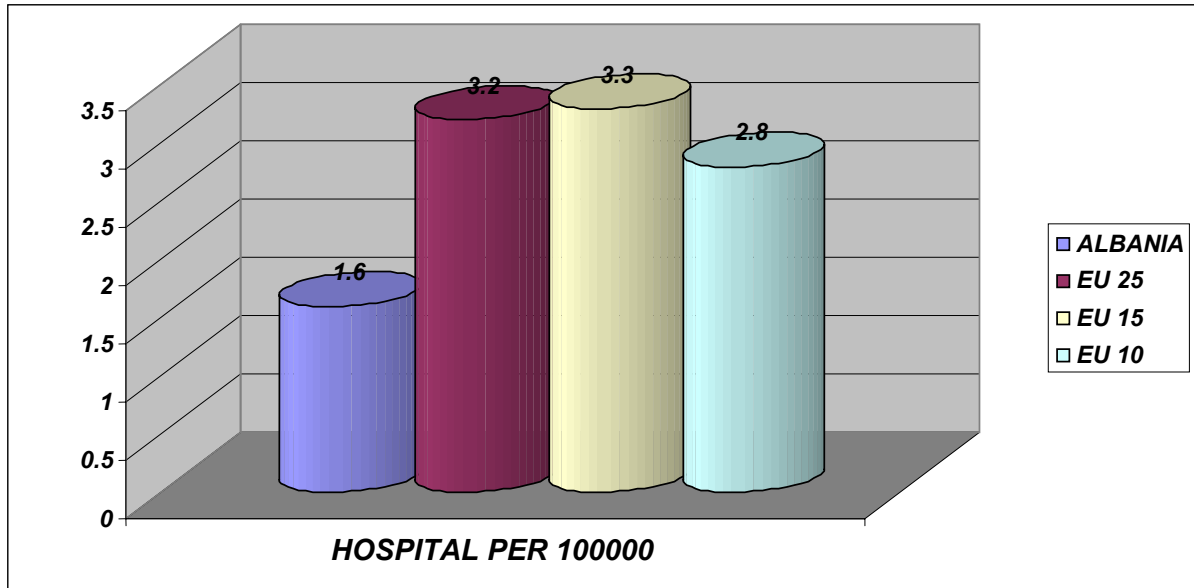
b. The health center provides for the population registered curative and preventive care through periodic examinations for people serf ferny chronic diseases hypertension, diabetes, asthma or vaccinations for children based on a National immunization calendar and also health educations and promotional activities.

c. The number of beds in hospitals is 8874 (according to the 2006 statistics from the Ministry of Health) – (hence there has been no increase in the number of beds) – which are mainly beds for acute cases. The beds for chronic cases are only around 50% of the number of beds in psychiatric hospitals.

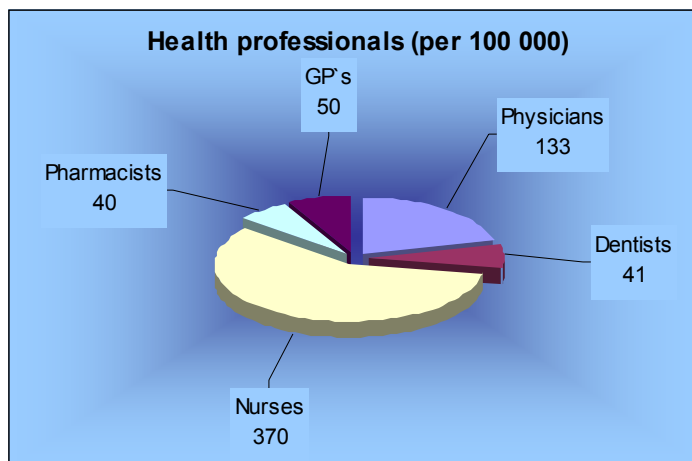
The number of hospitals for every 100000 inhabitants in shown in the following table: For the moment, no private hospitals have been licensed. There are only clinics which have beds for treating different specialized services. Their number all over the country is 12. 9 are in Tirana and 3 in three other districts.

Hospitals

Hospitals (per 100 000)	1.6
Hospital beds (per 100 000)	306
Annual inpatient admissions (per 100)	8.7
Average length of stay 9 days)	6.6

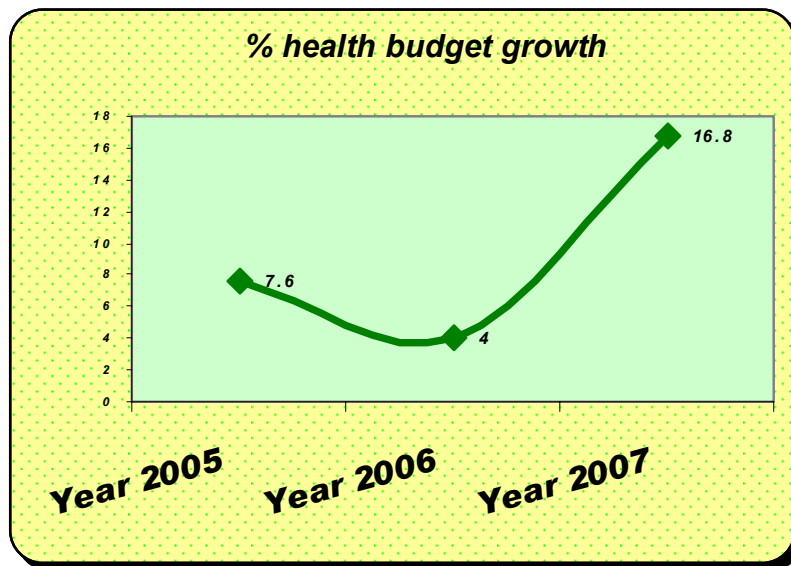
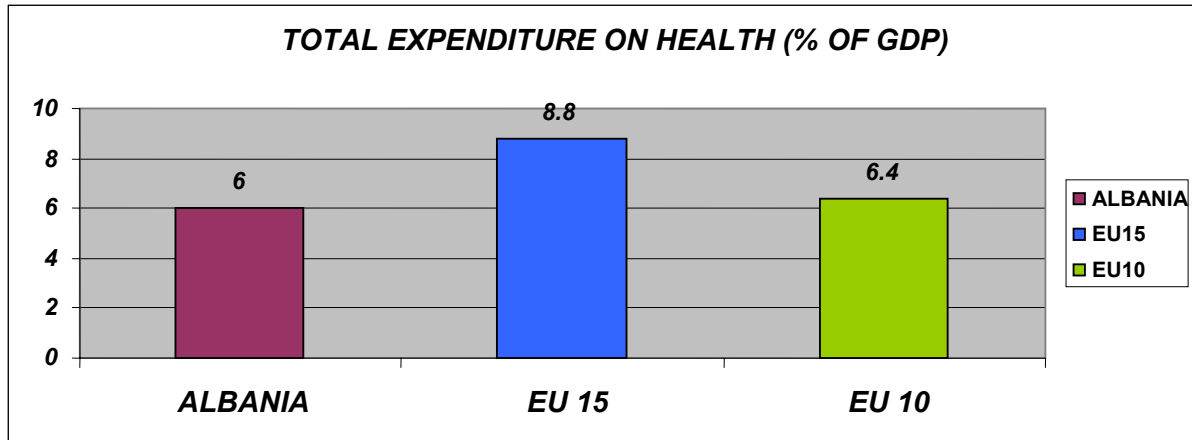


d. the number of health professionals for every 100000 inhabitants is as per the following table:



1226 licensed pharmacists exercise their profession all over the country. Out of these, 554 are located in Tirana and 672 in different districts.

The total expenditure of the Albanian gross domestic product (GDP) on health, compared to other countries, is given in the following tables:



- The legal basis for the regulation of the labour relations in the Republic of Albania is found in the Code of Labour, which approved by law no. 7961, dated July 12th, 1995, and has undergone some changes. Chapter VIII of the Labour Code deals with safety and protection of employees' health, providing for the liability of the employer regarding the adoption of technical safety measures aiming to prevention of accidents and professional illnesses. More concretely, this chapter establishes that the employer should inform the employee on the hazards related to a certain work and should train the employee on the need to respect the requirements in the field of health, safety and hygiene at work.

- Article 41 of the Labour Code (as changed by Law No. 9125, dated July 29th, 2003 "On some amendments and changes to the Law No. 7961, dated July 12th, 1995 "The Labour Code of the Republic of Albania", as changed), stipulates that the employer should obtain a permission from the labour inspector prior to initiate his / her enterprise, upon consideration of all the safety measures that should be taken.

- Pursuing article 40 of the Labour Code, the Decision of the Council of the Ministers No. 692, dated December 13th, 2001 “On special measures for the safety and protection at work”, which provides in details the measures which are necessary to be undertaken by the employer for the safety of the employees’ life. The decision foresees that special technical measures should be undertaken to avoid hazards and to guarantee both individual and collective protection, as well as the cases when the labour inspector intervenes.

- The Decision of the Council of the Ministers No. 742, dated November 6th, 2003 “On some amendments and changes to the Decision of the Council of the Ministers No. 692, dated December 13th, 2001 “On special measures for the safety and protection at work”” provides for the functioning of the medical service through the enterprise’s doctor, in all the entities which carry out production activities, be they private or state owned, Albanian or foreigner ones, juridical or physical persons, thus aiming towards the strengthening of protective measures.

- In the framework of the protection of employees’ rights, article XI of the Labour Code foresees that the employer shall pay to the employee the wage as per the provisions of the individual or collective contract, calculating that such wage may not be lower than the minimal wage. The minimal wage is calculated based on economic factors as well as based on the needs of employees and their respective families, also considering the income they benefit from the health insurance and the levels of living standards of various social groups. Actually, according to the Decision of the Council of the Ministers No. 235, dated February 27th, 2008 “On the calculation of the minimal wage at national scale”, the obligatory minimal wage has been established. It has to be applied by any juridical or physical person, either Albanian or foreigner.

Article 11, Paragraph 1

Question A

Though all sources of information show encouraging improvement in infant mortality in the last decade, this indicator, compared to other countries of the European region, remains high.

The official figures of the Ministry of Health, based in the reports given by public health institutions, show an infant mortality at 16 per 1000 persons born alive in 2000 and 12 per 1000 persons born alive in 2005, which means a reduction of 35.4 per thousand since 1993. The official data reported by INSTAT, collected based on the death records, are lower than those reported by the Ministry of Health.

Other studies and sources give higher figures of infant mortality. For example, the MICS survey, carried out in 2005 by UNICEF, calculate the infant mortality at a rate of 18 per 1000 persons born alive, using a simulation model which corrects the sub-reporting based on the survey data.

The acute respiratory illnesses are the first ranked cause for deaths of infants from 0 to 5 years old in our country. In 1991, they were ranked at almost 40 % of the infant mortality while in 1993 almost 43 %. It has to be emphasized that infant mortality due to acute respiratory illnesses (ARI) during these last years has been reduced by half, as compared with 1990. As far as longevity is concerned, such indicator is measured by INSTAT and the World Health Organization (WHO) (in Alb. OBSH).

Question B

a. The Ministry of Health, in all its activities, has worked on the preparation of regulations, instructions and documentation for the unification of services for mothers and children in the health structures. The following has been prepared regarding the above:

1 – **Regulation of Reproduction Health Services in the Primary Health Care**, which establishes the structures and reproduction health services / health of mother and child in the primary health care; their functioning regulations and the duties of health staff working in these services.

2 – **Instruction** regarding the obligatory periodical control and follow-up of pregnancy, delivery and the later stages, as well as the examinations and controls to be carried out for children from 0 to 6 years old.

3 – **The woman's doctor's chart**, foreseen to serve as a unified document to be used in all the public and private health services for the follow – up of the woman during pregnancy;

4 – **The child's doctor's chart**, foreseen to serve as a unified document to be used in all the public and private health services for the follow – up of the growth and development of children from 0 to 6 years;

5 – **The personal notebook of the pregnant woman** which, as per article 24 of the law, should be provided to the pregnant woman for free;

6 – **The personal notebook of child's health**, which is given to her for free during the visits for checking up the growth and development of the child.

b. **The National Strategy on Children**. Such strategy was approved in 2005 and constitutes an important governmental document for the respect of the rights of children as expressed in the Albanian Constitution and the United Nations International Convention on the Rights of the Child.

The Strategy establishes the duties and responsibilities regarding the implementation of such rights by the Albanian State. The Plan of Action is sufficiently detailed and contains the respective responsibilities for each responsible line ministry, the local power as well as non-governmental organisations and other important actors, included in the implementation of the strategy.

The National Strategy on Youth and the National Plan of Action have been approved by the Council of the Ministers on November 16th, 2006. Such strategy includes the national integrated youth policies which aim to address the needs of youth and the problems they experience. It is an inter–sectorial strategy and the activities of the action plan include numerous actors such as ministries, non-governmental organisations, local power, etc.

Article 11, paragraph 2

Question A

Law No. 9928 “On the stomatologic health service in the Republic of Albania” was approved on June 9th, 2008. In separate articles it provides for the offering of such service free of charge for children from 0 to 18 years old as well as for particular categories of disabled persons who, either by laws or bylaws, are entitled to stomatologic health service free of charge. Dental promotion is carried out by expert doctors in the framework of the dental service active in schools. First aid to emergency cases and therapeutic treatment of second grade cases are also offered.

Question B

The continuous education of the medical staff is carried out through training and awareness on the contemporary developments. This is made possible through workshops and annual conferences in cooperation with different associations and the departments of the Faculty of Medicine.

Article 11, paragraph 3

Question A

A number of national programmes are in place to prevent infective diseases. They are covered by special legislation as follows:

- 2 laws, one for the prevention and combating against infective diseases and another for the prevention and control of HIV/AIDS in the Republic of Albania (just approved).
- several decisions, orders and instructions related to the control of infective diseases and the anti – epidemic measures, here including quarantine and disinfections.

Also, other measures regularly undertaken are as follows:

- Obligatory surveillance system for 73 infective diseases, mainly for the hospital ones;

- Early warning system based on 9 syndromes in the primary and hospital health care;
- Obligatory vaccination for poliomyelitis, B hepatitis, diphtheria, tuberculosis, tetanus, measles, pertussis, rubeola, and mumps for children up to 14 years old and certain groups of the population. The coverage with vaccines is quite high and the effective prevention of such diseases, including the eradication of some of them, has been achieved.

The Public Health Institute (ISHP) is the national technical institution, responsible for leading, coordinating and evaluating the measures taken to prevent epidemics, endemics and other diseases.

The Infective Diseases Control Department at the ISHP manages these surveillance systems by cooperating closely with the epidemiologic services in different districts and carries out interventions to for the identification and prevention of eruptions of epidemic nature. In the framework of the Stability Pact, Albania has initiated a series of activities which aim to the strengthening of information systems related to infective diseases, the enhancement of the reacting capacity in emergency situations as well as the harmonisation or coordination at regional level.

The vaccination coverage reaches 97 % of the population.

Question B

Please indicate what general measures are taken in the public health field, such as:

a. – Prevention of air pollution,

Several important laws and decisions of the Council of Ministers (DCM) have been approved in this aspect, relating to the protection of air from pollution (Law No. 8906, dated June 6th, 2002), monitoring of environment (Decision of the Council of the Ministers No. 435, dated September 12th, 2002) where monitoring of environment is included according to the most important indexes, the norms of environment air quality (DCM No. 803, dated December 4th, 2003), the permitted limits of emission from stationary sources (DCM No. 248, dated April 24th, 2003).

Regarding the approximation of the air legislation with that of the EU intensive work is being done by the Ministry of Environment, Forests and Water Management. Meanwhile, an EU project for the approximation of legislation is being implemented. The Ministry of Health is one of the parties in such process.

– Prevention of water pollution,

Regarding water pollution, the State Sanitary Inspectorate is functional in the Ministry of Health, the ISHP and in the districts' public health directorates, to control the observance of hygiene and sanitary rules in the designing, construction, reconstruction and use of potable water supply structures, rules established in the hygiene – sanitary regulation for

the control of potable water quality, stipulated in the Decision of the Council of the Ministers No. 145, dated February 26th, 1998.

In parallel way with this structure, microbiologic and physic – chemical laboratories are in place in the ISHP and in the districts' public health directorates which carry out on daily basis the analytical microbiologic and physic – chemical monitoring, here including the control of the chlorination of potable water in the water system.

Regarding the approximation of legislation on air pollution with that of the EU, the Ministry of Environment, Forests and Water Management is working intensively on the legislative aspect. Meanwhile, an EU project for the approximation of legislation is under implementation. The Ministry of Health is part in the process. The Public Health Institute and the Ministry of Health are permanently monitoring the potable water and the surface waters in accordance with the respective legislation.

– Prevention of soil pollution;

Identification and evaluation of levels of pollution of environment are one of the priorities in the daily work of the Public Health Institute. Regarding these, particular areas which are seen as problematic from the environment point of view have been object of study for several consecutive years. The evaluation of quality of seacoast waters (in the beaches) has been carried out continuously. The Public Health Institute has undertaken study activities such as:

- Analytic evaluation of the level of lead in the potable water, in the soil and in the surface waters in the area of Uznova, district of Berat;
- Pollution due to presence of organ-chlorinated pesticides in the area of Porto – Romano in the district of Durres;
- Pollution due to PAH, Oils and Grease in the area of Zharrëz, district of Fier;

aiming to better inform the decision taking authorities so that the later can enable interventions through different technical and financial forms and means to improve the situation.

b. protection against radioactive contamination;

The Commission on the Protection from Radiations and the Office for the Protection from Radiations have focused their attention in the safety and security of the radioactive materials, as well as that of all sources which generate ionizing radiations. Hence, the work has rigorously concentrated in the application of the guidelines issued by the Commission on the Protection from Radiations by the entities working with radiating sources regarding the treatment of radioactive liquid or rigid waste. Their treatment is linked to the temporary or permanent storage of radioactive waste in accordance with the Regulation “On the treatment of radioactive waste”. In accordance with the provisions of the regulation, the waste is transformed in material which is harmless to human health or environment, now and for the future generations.

The liquid or rigid waste which contain radioisotopes are stored in special places which ensure protection from radiations, where entry and exit is strictly controlled.

c. Protection against noise pollution;

The Law No. 9774 “On the evaluation and administration of noises in the environment” was approved on July 12th, 2007. The work has now focused in its implementation and in the preparation of bylaws. The law was prepared as part of the approximation with the European Community Directive on noises.

d. food hygiene inspection

Law No. 9863, dated January 28th, 2008 “On food” was approved. It has as a priority the creation of the National Food Authority. Such authority is being created in the framework of the CARDS programme. The Ministry of Health is one of the parties in this process and until such authority is in place, the State Sanitary Inspectorate shall continue to perform its obligations towards food security in accordance with the previous law.

e. minimum housing standards;

f. measures taken to combat smoking, alcohol and drug abuse, including multiple addiction, as well as against sexually transmitted diseases.

Tobacco

On February 9th, 2006, the Albanian Parliament ratified the Framework Convention on the Tobacco Control. Later on, Law No. 9636, dated November 6th, 2006 “On the protection of health from tobacco products” was approved. The law started being implemented and on this purpose, a separate inter-ministerial committee was created, named: the Inter-ministerial Committee for the Protection of Health from Tobacco Products.

The law foresees the cooperation of several State structures such as: the municipal police, the Customs’ General Directorate, the Taxes’ General Directorate, and the State Sanitary Inspectorate.

Several training sessions have been carried as well as comprehensive education, communication and public awareness, etc.

Alcohol

Law No. 9518, dated April 18th, 2006 "On the protection of minors from use of alcohol" was approved and a series of round tables shall be organised in the future to raise awareness of different actors for its implementation and information campaigns to raise awareness amongst the population shall also be undertaken. A national strategy “On alcohols” is under drafting. It will pave the way for drafting and approving a law on alcohols.

Drugs

In the framework of the implementation of the National Strategy against Drugs 2004 – 2006, the work has focussed towards prevention of drug abuse through increase of public awareness on the risks and negative consequences of the use of psychoactive substances, as well as towards offering of preventive, curative and rehabilitation services. Through epidemiologic studies, the credibility of the problem has been valuated. Public comments in the written and electronic media have been carried out to inform on the findings of studies aiming to increase public awareness on the risks and negative consequences of the use of these substances by availing of the role of the media.

Routine voluntary and confidential testing and counselling is continuously done in the Public Health Institute regarding HIV/AIDS. The same is done for the biologic and behaviour surveillance relating to HIV/AIDS and Sexually Transmittable Infections, in the framework of the control of their negative consequences to the public health and to the society, consequences deriving from the use of drugs, here including the Sexually Transmittable diseases.

Also, considerable cooperation between the governmental and non-governmental sectors has taken place to ensure the inclusion and the cooperation of State agencies and institutions, non-governmental organisations, humanitarian organisations, religious associations, and the private sector to offer a coordinative and managing policy in the fight against drugs as well as to create efficient information systems.

Thus, the work has been coordinated with the Toxicology Service (in the Military Hospital) regarding the surveillance of HIV/AIDS and the Sexually Transmittable Infections amongst users of drugs.

- Short and mid term treatment;
- Hospital detoxification;
- Damage reduction;
- Treatment with methadone.

The activities of the following associations were supported:

- “Aksion Plus” Non-profit organisation;
- APRAD association;
- Association “Për një Shqipëri të Shëndetshme” (For a healthy Albania).

Our strategic goal in the field of food safety aims towards creating a full functioning system of food safety and consumer protection “from farm to table”, which covers the entire country as well as aims to monitoring and control in accordance with the European Union standards.

The approximation of the actual legislation and standards with those of the European Union on safety of food products, health and wellbeing of animals, health of plants, protection of environment, control and inspections’ system, as well as the development of

the administrative infrastructures who shall implement such legislation are part of the food safety policy which derive from the obligations of articles 76 and 70 (3) of the Stabilisation and Association Agreement and the European Partnership.

The consumer's protection and the prevention of diseases originating from food are the two basic elements on which the Food Safety Sector has built its policies and strategies to achieve the goal of establishing the basis for ensuring the highest level of the protection of people's health and the interests of the consumers.

Important progress has been achieved for accomplish such goal. A law on the field of food safety was approved for the first time: the Law No. 9863, dated January 28th, 2008 "On Food". It intends to set the bases for ensuring a higher level of protection of people's health and the interests of the consumers. This law makes the risk analysis, establishes the main actors to be involved in analysing, communication and management of such risk as well as establishes those who are responsible for food safety. The abovementioned law is in line with the European legislation in this field. The work is concentrated now in the drafting of the bylaws for its implementation by transposing the European legislation. 37 decisions of the Council of the Ministers, orders, instructions and regulations, regulating various aspects of food safety have been approximated and are in power until now.

The Directorate for Food Safety and Consumer Protection (DSUMK) at the Ministry of Agriculture, food and consumer protection is responsible for drafting policies, strategies and legislation on safety and quality of food products. The Directorate for Food Safety and Consumer Protection exercises its functions through the Food Safety Inspectorates in the Regional Agriculture and Food Directorates.

The National Food Authority was created to enable the achievement of the strategic goal to ensure the safety of food products "from farm to table", as required by the Law No. 9863, dated January 28th, 2008 "On Food". On this purpose, since June 2007, a project "On the creation of the National Food Authority" has started under CARDS 2005 programme. This Authority shall carry out inspection, technical and scientific activities on safety and quality of food for humans and for animals, on the health and wellbeing of animals, as well as on the protection of plants, thus making an important qualitative step to achieve the goal of food safety – the protection of life and health of people and the interests of the consumers.