

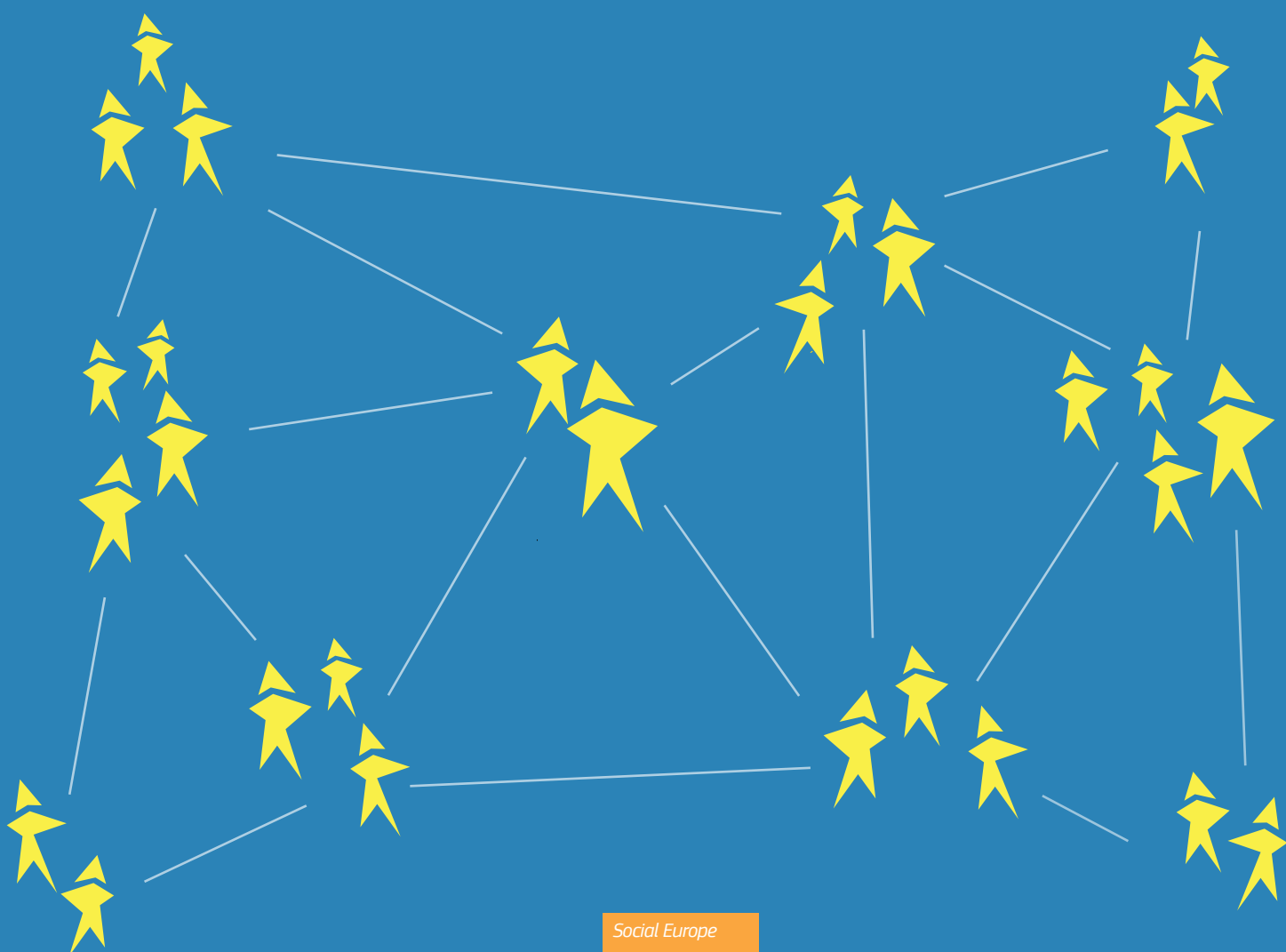


EUROPEAN SOCIAL POLICY NETWORK (ESPN)

# Social protection for people with disabilities

Albania

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Social Europe

**EUROPEAN COMMISSION**

Directorate-General for Employment, Social Affairs and Inclusion  
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# **European Social Policy Network (ESPN)**

## **ESPN Thematic Report on Social protection for people with disabilities**

**Albania**

**2022**

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The European Social Policy Network (ESPN) was established in July 2014 on the initiative of the European Commission to provide high-quality and timely independent information, advice, analysis and expertise on social policy issues in the European Union and neighbouring countries.

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## Summary

This report analyses some important cash and in-kind social protection provisions available to adult people with disabilities (i.e. people aged 18 or above). There are other important provisions available to them in other areas not covered in this report. In line with Article 1 of the UN Convention on the Rights of Persons with Disabilities (UN CRPD), “people with disabilities” should be understood as “those who have 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”.

Albania has three disability-specific income-support schemes in place. The *disability payment* is part of the social assistance scheme funded by general taxation, and provides benefits to people with disabilities who have no contributory history. The two other schemes are part of the social insurance system and provide benefits only to people with disabilities who have a contributory history. The *disability pension* is broader, and provides income support to people whose ability to work is affected by a disability: the other scheme is more specific and is targeted only at people who have a disability caused by accidents at work or occupational diseases. All three schemes apply the same disability assessment framework based on a medical evaluation of someone’s ability to work. Administrative procedures and the availability of transport to go and get examined by the commission constitute additional barriers for people with disabilities. The social insurance schemes provide higher benefits than *disability payment*, which provides flat-rate benefits that are lower than the at-risk-of-poverty threshold. The reform of the disability assistance scheme, ready for national roll-out, will shift the assessment framework towards a bio-psychic-social model and will vary the amount of benefits based on the severity of disability.

Albania has no disability-specific old-age pension schemes in place, and income support to cover disability-related healthcare expenditure is lacking. Access to general social protection schemes is also limited. Old-age pensions and unemployment benefits are contributory and can be claimed only by people with a contributory history. The level of unemployment benefit is the same for all registered unemployed job-seekers, including people with disabilities. An important gap is the lack of available data on the employment rate of people with disabilities at the country level. Furthermore, workers who apply for unemployment benefits must also satisfy several additional criteria, such as actively seeking employment. Linking benefits to the contribution record is also being explored; however, policy-makers would need to take into account the disadvantage of low historic contributions by people with disabilities.

In Albania there are no income-support measures specifically aimed at covering disability-related housing expenses for home adaptations. People with disabilities can benefit from the social housing programmes providing cash benefits, such as the rent subsidy, and immediate grants. There is concern over the need to remove barriers in buildings for people with disabilities, and to install assistive accessories/technology, which are missing across the country.

There are a few categories of people eligible for social assistance, but people with disabilities (aged 18 or over) are not one of the directly targeted categories. Thus, households of people with disabilities can receive social assistance, but people with disabilities are not included in the estimated benefit for them.

There is no systematic access to assistive devices and technology at an affordable cost for children and adults with disabilities. The completion of the legal framework is one of the challenges faced in the provision of assistive technology equipment for people with disabilities. Municipalities do not offer any assistive tools other than wheelchairs provided by donor organisations.

The issues faced by people with disabilities are only occasionally part of the national debate. These debates are usually initiated by organisations of people with disabilities and mainly focus on the adequacy of benefits and accessibility challenges.

## 1 Access to disability-specific income support

### 1.1 Disability-specific benefits/pensions available to working-age people

#### 1.1.1 *Pagesa për Aftësinë e Kufizuar (Disability payment)*

The disability payment (*pagesa për aftësinë e kufizuar*) is a cash transfer paid under the social assistance scheme and funded by general taxation.

##### a) Eligibility conditions

Disability-related qualifying criteria: Permanent disability.

Age: Benefits are not restricted based on the age of the beneficiary.

Nationality and/or residency: Citizenship and residency in the country for the last three months.<sup>1</sup>

Waiting period: The benefit is granted from the moment the disability is certified. Usually there is a 30-60 day period to gather documents and go through administrative procedures.

Contributory history: No contributory history required.

Level of financial resources: The benefit is flat-rate and decided by the Council of Ministers. The level of benefits is not means-tested and is not conditional on, or affected by, any other income of the beneficiary.

Other: None.

Gaps and/or obstacles: Obstacles include the strict focus on the assessment of the medical ability to work, as well as the difficulties faced by people with disabilities to go in front of the commission and get examined or re-examined. Both these obstacles have been reduced under the piloted bio-psychic-social model.

##### b) Disability assessment framework

Type of assessment: The framework used to determine the loss of ability to work is based on a functional capacity assessment.

Responsible authorities: The responsible authority for the implementation of the disability assessment is the first-level medical commission on the determination of the ability to work (MCDAW). This commission reports to the state social services.

Method: The method used by regional MCDAWs combines documentary evidence and medical examination. Initially everyone claiming the benefits must submit an application to the MCDAW containing a list of documents on their medical condition. After reviewing the documentation, the MCDAW decides whether to proceed with a medical examination or to refuse the application. After the medical examination the MCDAW makes a final decision, which typically covers whether the applicant is eligible for disability benefits as well as an assessment of eligibility for a care-giver. Additionally, the decision by the MCDAW might determine a rehabilitation programme as well as the date for a re-examination. Since June 2016 a new assessment model has been piloted in some municipalities, and is expected to be rolled out across the entire country in the near future. The new bio-psychic-social model represents an important change in the methodology and evaluation criteria, while simplifying procedures and improving access. Instead of evaluating only the ability to work, this new model focuses on the ability to carry out activities of everyday life; and by

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<sup>1</sup> These conditions apply to EU and non-EU nationals as well as to people with refugee status.

measuring the degree to which this ability has been affected, it distinguishes between *light* (5-24%), *moderate* (25-49%), *heavy* (50-95%) and *full* (96-100%) disability.

Supporting evidence: A medical recommendation from a family doctor, epicrisis, evidence of residency, and other supporting documents (such as proof of school or university registration, diplomas).

Assessor: The MCDAW, which is made up of five medical doctors (specialists) with at least five years of experience. There are five first-level MCDAWs that operate in the country. In contrast, in the piloted bio-psychic-social model the assessment is carried out by a multi-disciplinary commission made up of physicians, psychologists, and social workers.

Decision-maker: The MCDAW.

Critical analysis: Many of the problems of the existing disability assessment system, such as the strictly medical evaluation of disability and the periodic re-examinations, have been addressed by the new bio-psychic-social model now being implemented. However, the reform has not touched the salient issues of the adequacy of benefits or the inclusion of people with disabilities through work.

### **c) Benefit entitlements**

Level of the benefit: The benefit entitlement is flat-rate and not differentiated with regard to the severity of disability. The monthly benefit amount in 2021 was €88 (ALL 10,563). An equal amount is also received by the care-giver, usually a household member. People with disabilities who are attending school or vocational training receive a monthly payment equal to 200% of the base benefit, or €176 (ALL 21,126), while those who are attending university receive a monthly benefit equal to 300% of the base benefit, or €264 (ALL 31,689). On the other hand, benefits provided under the new bio-psychic-social model are differentiated according to the severity of disability. The base monthly benefit amount under this model is equal to 150% of the social pension, or €92 (ALL 11,147). Based on the severity of disability, monthly benefits can range from €56 (ALL 6,763) to €111 (ALL 13,406).

Duration of the benefit: People with disabilities are subject to periodic re-examinations.

Interactions with other income or other income-related benefits: Beneficiaries of the disability payment cannot receive benefits from the social insurance scheme, such as disability pensions or old-age pensions. If they are eligible for one of the latter, they are excluded from the disability payments.

Challenges: Although the reform of disability assessment and payments has brought several improvements, it has not touched the sensitive topic of benefit levels. The level of benefits poses serious threats in terms of adequacy. The EU-SILC<sup>2</sup> at-risk-of-poverty threshold was €128 (ALL 15,520) per month in 2020, which leaves almost all beneficiaries of disability benefits exposed to poverty risks.

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<sup>2</sup> European Union statistics on income and living conditions.



### 1.1.2 *Pensioni i Invaliditetit* (Disability pension)

The disability pension (*pensioni i invaliditetit*) is contributory and paid through the social insurance scheme.

#### a) Eligibility conditions

Disability-related qualifying criteria: Partial or permanent loss of ability to work.

Age: Benefits are not restricted based on the age of the beneficiary.

Nationality and/or residency: None (i.e. there are no nationality or residency requirements for accessing this benefit).<sup>3</sup>

Waiting period: The benefit is granted from the moment the disability is certified. Usually there is a 30-day waiting period for administrative procedures.

Contributory history: The minimum contributory history required is three quarters of someone's age at the moment of losing the ability to work, minus 20. Additionally, they should have paid contributions for at least 12 months over the previous five years. If they do not fulfil the minimum contributory history criteria, they can claim a reduced disability pension.

Level of financial resources: Benefits are not means-tested.

Other: None.

Gaps and obstacles: An important gap/obstacle relates to the fact that this pension scheme is strictly contributory. This is the main cause of non-coverage of young people who are unemployed or who are engaged in non-regular types of working. In addition, since benefits are contributory, people with a longer contributory history receive higher benefits, thus disadvantaging young people with shorter working histories.

#### b) Disability assessment framework

Type of assessment: The framework used to determine the loss of ability to work is based on a functional capacity assessment.

Responsible authorities: The responsible authority for the implementation of the disability assessment is the regional MCDAWs. These commissions report to the Social Insurance Institute.

Method: The method used by regional MCDAWs combines documentary evidence and medical examinations. Initially everyone claiming the benefits must submit an application to the MCDAW which contains a list of documents on their medical condition. After reviewing the documentation, the MCDAW decides whether to proceed with a medical examination or to refuse the application. After the medical examination the MCDAW takes a final decision, which typically includes an assessment of the severity of the disability (full or partial) as well as whether the disability is permanent or temporary. Thus, based solely on the medical diagnosis the MCDAW decides whether the ability to perform any work has been lost entirely or whether the applicant can perform some other types of work, as well as whether or not the applicant is eligible for a care-giver. Additionally, if the disability is temporary, the decision by the MCDAW determines the rehabilitation programme as well as the date for a re-examination. In the meantime, the person can receive the benefits.

Supporting evidence: Evidence of residency, medical recommendation from family doctor, epicrisis.

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<sup>3</sup> This applies to EU and non-EU nationals as well as to people with refugee status.

Assessor: The regional MCDAW. This commission is made up of three to five medical doctors (specialists) with at least five years of experience.

Decision-maker: The regional MCDAW. Decisions by the MCDAW can be appealed against at one of the specialist superior MCDAWs, which are made up of medical doctors with a scientific degree and at least 10 years of experience. Members of superior MCDAWs are appointed by the Council of Ministers.

Critical analysis: This assessment framework leaves MCDAWs with complete responsibility to take decisions on a case-by-case basis without any clear and transparent criteria to follow. As a result, in the past there have been several cases of corruption among MCDAWs. Another issue relates to the administrative burden left upon the individual to collect the necessary documentation and present themselves in front of the commission for examinations. As mentioned, MCDAWs are regional institutions and people who live far from the administrative centres of regions find it hard and expensive to travel to them.

### **c) Benefit entitlements**

Level of the benefit: The benefit level is related to the contributory history, the severity of the disability and household conditions. If someone has entirely lost their ability to work, they are eligible for a full disability pension, which is calculated using the same formula as that for the old-age pension. The monthly pension amount cannot be lower than 70% of the net minimum wage – that is, €154 (ALL 18,599) in 2022 – and is topped up with additional benefits if the MCDAW recommends that the beneficiary needs a care-giver or if they have dependent children. If someone meets the minimum contributory criteria and has not entirely lost the ability to work (and thus is able to work in another job), they are eligible for a partial disability pension equal to 50% of the full disability pension calculated as above. The MCDAW determines the degree of disability as well as the work that can be performed by the applicant. If someone does not meet the minimum contributory history criteria, they are eligible for a reduced disability pension. The benefit amount is calculated by multiplying the full disability pension by the ratio between the applicant's contributory history and the required contributory history to benefit from a full disability pension.

Duration of the benefit: The pension duration is not limited, although beneficiaries are subject to periodic re-examinations.

Interactions with other income or other income-related benefits: The benefit amount is not affected by other personal income from property, investments or, in the case of a partial disability pension, work. However, people cannot benefit from the social insurance scheme and the social assistance scheme at the same time. If someone has a contributory history and is eligible for a disability pension, they are excluded from the disability allowances given under the social assistance scheme and funded through general taxation. Additionally, benefits from the social insurance scheme are not compatible with income from work, except for people on partial disability pensions who are allowed to work.

Challenges: In terms of adequacy, the disability pension is higher than the disability allowance paid under the social assistance scheme. The 2020 EU-SILC set the AROPE<sup>4</sup> threshold at €128 (ALL 15,520), which is lower than the minimum disability pension, ensuring that beneficiaries are not at risk of poverty.

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<sup>4</sup> At risk of poverty or social exclusion.

### **1.1.3 Pagesa për invaliditet të përhershëm shkaktuar nga aksidenti në punë ose sëmundjet profesionale (Allowances for permanent disabilities caused by accidents at work or occupational diseases)**

#### **a) Eligibility conditions**

Disability-related qualifying criteria for allowances for permanent disabilities caused by accidents at work or occupational diseases (*pagesa për invaliditet të përhershëm shkaktuar nga aksidenti në punë ose sëmundjet profesionale*): Partial or permanent loss of ability to work.

Age: Benefits are not restricted based on the age of the beneficiary.

Nationality and/or residency: None (i.e. there are no nationality or residency requirements for accessing this benefit).<sup>5</sup>

Waiting period: The benefit is granted from the moment the disability is certified. Usually there is a period of 30 days for administrative procedures.

Contributory history: At least one day.

Level of financial resources: Benefits are not means-tested.

Other: None.

Gaps and/or obstacles: No evidence (reports, papers) on gaps/obstacles related to this benefit was identified.

#### **b) Disability assessment framework**

Type of assessment: The framework used to determine the loss of ability to work is based on a functional capacity assessment.

Responsible authorities: The responsible authority for the implementation of the disability assessment is the regional MCDAWs. These commissions report to the Social Insurance Institute.

Method: The method used by regional MCDAWs combines documentary evidence and medical examination. Initially everyone claiming the benefits must submit an application to the MCDAW containing a list of documents on their medical condition. After reviewing the documentation, the MCDAW decides whether to proceed with a medical examination or to refuse the application. After the medical examination the MCDAW takes a final decision, which typically includes an assessment of the severity of the disability (full or partial) as well as whether the disability is permanent or temporary. Thus, based solely on the medical diagnosis the MCDAW decides whether the ability to perform any work is lost entirely or whether the applicant can perform some other types of work, as well as whether they are eligible for a care-giver. Additionally, if the disability is temporary, the decision by the MCDAW determines the rehabilitation programme as well as the date for a re-examination. In the meantime, the applicant can receive the benefits.

Supporting evidence: Evidence of residency, medical recommendation from family doctor, epicrisis.

Assessor: The regional MCDAWs, each comprising three to five medical doctors (specialists) with at least five years of experience.

Decision-maker: The regional MCDAWs. Decisions by the commissions can be appealed against at one of the specialist superior MCDAWs, composed of medical doctors with a scientific degree and at least 10 years of experience. Members of superior MCDAWs are appointed by the Council of Ministers.

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<sup>5</sup> This applies to EU and non-EU nationals as well as to people with refugee status.

Critical analysis: Not documented.

### **c) Benefit entitlements**

**Level of the benefit:** The amount of benefits varies depending on the contributory history and the severity of the disability. The payments for permanent disability can be claimed by every insured person that an MCDAW examination shows has lost at least 67% of their ability to work. The amount of the payments is related to the contributory history but cannot be lower than 80% of the net minimum wage – that is, €175 (ALL 21,135). Additional payments are available if the MCDAW recommends that the beneficiary needs a care-giver or if they have dependent children. If an insured person has lost between 33% and 67% of the ability to work, they benefit from a payment for partial permanent disability. The amount of the payment varies between 50% and 80% of the net average assessable basis of the previous year, depending on the degree of the loss of ability to work. If the loss of ability to work is less than 33% but higher than 10%, the insured person receives a small payment for permanent disability determined by the Social Insurance Institute.

**Duration of the benefit:** The benefit duration is limited to 12 months.

**Interactions with other income or other income-related benefits:** The benefit amount is not affected by other personal income from property, investments or, in the case of a partial disability pension, work. However, benefits from other public schemes are not allowed. Additionally, benefits from the social insurance scheme are not compatible with income from work, except in the case of people on partial disability pensions who are allowed to work.

**Challenges:** This scheme is contributory and favours people with a long contributory history. Even though people with full disabilities are protected by the minimum allowance threshold, set at 80% of the net minimum wage, in cases of light and moderate disabilities people with shorter contributory histories are disadvantaged by receiving much lower benefits.

## **1.2 Disability-specific old-age pension schemes**

Albania does not have any disability-specific old-age pension schemes. People on disability pensions, when they reach the retirement age, can switch to the old-age pension if the benefits are higher. No other scheme is in place.

## **1.3 Income support aimed at covering disability-related healthcare and housing expenses**

### **1.3.1 Healthcare**

Albania has no healthcare cash benefits scheme for people with disabilities. Beneficiaries of disability cash transfers, contributory or non-contributory, are covered by the health insurance scheme. Benefits, however, only consist of free visits, examinations and medical treatments as well as the purchase of medicines at reimbursed prices.

### **1.3.2 Housing**

In Albania there are no income-support measures specifically aimed at covering disability-related housing expenses for home adaptations.

## 2 Access to some key general social protection cash benefits

### 2.1 Old-age benefits

#### 2.1.1 *Pensioni i Pleqërisë* (Old-age pension)

- a) **Eligibility conditions:** The old-age pension (*pensioni i pleqërisë*) is part of the social insurance scheme and is contributory. The main criteria for obtaining this pension include a minimum contributory history of 15 years and reaching the official retirement age. This scheme has no special provisions with regard to people with disabilities. People benefiting from a disability scheme (contributory or non-contributory) can, when reaching the retirement age and if they fulfil the minimum contributory criteria, opt for the old-age pension. If they do so, they are no longer eligible for the disability pension or the disability allowances.
- b) **Additional amount/compensation included and adequacy issues:** No additional compensation is in place for the old-age pension scheme.
- c) **Gaps/obstacles:** People with disabilities are only covered by the old-age pension scheme in the same way as all economically active people. That means that they have to meet all eligibility criteria to benefit from this scheme. Given that people with disabilities have short contributory histories or no history at all, they are either eligible for minimal benefits or not eligible for any benefit at all.

### 2.2 Unemployment benefits

#### 2.2.1 *Pagesa e Papunësisë* (Unemployment benefit)

- a) **Eligibility conditions:** There are no different eligibility conditions for unemployment benefit (*pagesa e papunësisë*) for people with disabilities compared with people without disabilities. Unlike in most EU Member States, in Albania the amount of unemployment benefit is not linked to the amount of contributions. To qualify for the benefit, job-seekers should have at least 12 months of insurance; be involuntarily unemployed; be registered as unemployed at an employment office; be willing to undergo training and retraining; and not be entitled to any other social insurance benefits except the partial disability pension. Unemployment benefit is granted for a limited duration, varying from three months for those who have paid social contributions for at least the previous 12 months, to a maximum of 12 months for those that have worked for 10 years or longer. The self-employed are excluded from this scheme.
- b) **Additional amount/compensation included and adequacy issues:** The unemployment benefit is a flat-rate benefit unrelated to previous earnings, set by a decision of the Council of Ministers (DCM No 161/2018) at 50% of the gross minimum wage (€246, or ALL 30,000). The level of benefit is the same for all registered unemployed job-seekers, including people with disabilities.
- c) **Gaps/obstacles:** The contributory nature of unemployment benefits in the context of high levels of unemployment, inactivity, and informal employment is one of the major obstacles to ensuring access to the scheme, as people struggle to meet rather stringent eligibility criteria. This is further evidenced by the extremely low coverage of unemployed people by such benefits. An important gap is the lack of available data on the employment rate of people with disabilities at the country level. The only data available from the National Agency for Employment and Skills (NAES) are those related to registered unemployed job-seekers. On average in Q3 of 2021, about 470 people with disabilities were registered as unemployed job-seekers, accounting for

0.5% of the total number of registered unemployed (89,368). Eight out of 10 working-age people<sup>6</sup> with disabilities are out of the labour force (i.e. neither working nor looking for work); this category is five times less likely to be engaged in the labour market than the population without disabilities (UNDP, 2015). It is important to improve the statistical database of the NAES for collecting specific information on people with disabilities registered as unemployed job-seekers, in accordance with the data provided by the electronic register on disability allowance.

In addition to activity status and contributory history to meet minimum eligibility criteria, workers who apply for unemployment benefits in Albania must also satisfy several additional criteria, such as actively seeking employment. Moreover, this criterion, for example, ignores the added disadvantage faced by people with disabilities or by single parents with children. The current scheme denies benefits to people who voluntarily leave a job without any compelling reason. Discussions are ongoing on the possibility of loosening eligibility criteria, particularly in response to economic shocks and considering the above-mentioned disadvantages. Linking benefits to the amount of contributions is also being explored; however, policy-makers would need to take into account the disadvantage of low historic contributions by people with disabilities.

## 2.3 Guaranteed minimum income schemes and other social assistance benefits (GMIs)

### 2.3.1 *Programi i Ndhmës Ekonomike* (Social assistance programme)

- a) **Eligibility conditions:** The social assistance programme (*programi i ndihmës ekonomike*) is a non-contributory scheme covering the categories most in need (poor individuals/households and special categories) as defined in the Law 57/2019 on social assistance. It is based on a proxy means-tested assessment, and households are eligible for such benefits even if they have some sources of income. There are a few categories eligible for social assistance, but people with disabilities (aged 18 or over) are not one of the directly targeted categories. Thus, poor households containing people with disabilities can benefit from social assistance, but people with disabilities are not included in the estimated benefit for these households.
- b) **Additional amount/compensation included and adequacy issues:** The amount of the social assistance depends on the household size and composition. The decision of the Council of Ministers No 597/2019, which defines the procedures and level of benefit, provides that households eligible for social assistance that also have members benefiting from the disability allowance, will have this allowance deducted from the households' estimated benefit.
- c) **Gaps/obstacles:** The social assistance scheme is based on a means-tested assessment, and households are eligible even if they have other sources of income such as benefits from other social protection schemes (pensions, disability benefits etc.), paid employment or income from household agricultural activity. However, the social protection system does not allow parallel payments – that is to say, people with disabilities receiving the disability allowance may not also benefit from the social assistance benefit. This is a significant gap in the social protection system, which although in principle is designed to address the multiple vulnerabilities of individuals and households, fails to achieve this goal in practice. People with disabilities can also be poor, especially as their level of integration in the labour market is very low: thus the social assistance benefit would contribute to addressing their lack of income and

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<sup>6</sup> The working-age population is the population aged 15-64.

their risk of poverty. Policy-makers in Albania have failed to distinguish between the scope of the two benefits – disability allowance and social assistance.

### 3 Provision of assistive technology and personal assistance

**There is no systematic access to assistive devices and technology at an affordable cost** for children and adults with disabilities (UNICEF, 2018). Legislation is also rather vague and not implemented properly. Although Article 9 of the Law 93/2014 “On the social inclusion and accessibility of persons with disabilities” provides for assistive devices, the state does not even provide the most basic assistive devices, such as wheelchairs.<sup>7</sup> Moreover, the same article also states that assistive devices should be provided based on an assessment by a commission (without specifying which commission) and that the Mandatory Health Care Insurance Fund under the Ministry of Health and Social Protection (MoHSP) is responsible for their provision (UNICEF, 2018). The Law 93/2014 does recognise various services that are designed to provide support in surmounting barriers, including personal assistance, supporting technical equipment and supplies, accessibility services, accessible transportation, reasonable accommodation, and when necessary supported decision-making (Article 6).<sup>8</sup> The Law also defines the minimum standards, such as the need for a personal assistant for people with disabilities, assistants for blind people, and sign language interpreters for people with speech and hearing impairment.<sup>9</sup> The role of personal assistants is new in Albania and is mainly covered by family members in their role as care-givers, though they do not have the adequate qualifications.

The **national action plan for people with disabilities 2021-2025** (MoHSP, 2021) acknowledges the challenges in the provision of assistive technology equipment for people with disabilities – the completion of the legal framework and the need for increasing capacities for supporting the needs of people with disabilities. It recognises that one of the challenges is the need to improve the capacities of personal assistants supporting the healthcare needs of people with disabilities. Drafting new programmes and curricula for the qualification of personal assistants for people with disabilities is part of the measures planned within the framework of the national plan.

The cost of purchasing wheelchairs is significant for a household with insufficient economic means. There is no reimbursement of costs for orthoses, prostheses, wheelchairs of various types, hearing aids and other aids for people with disabilities, nor is there any database of children and adults with disabilities who need them (ADRF and World Vision, 2018). Civil society organisations have tried to address some of the needs for assistive devices, but long-term support and the capacity to sustain the level of service cannot be guaranteed.

Since June 2017 the MoHSP has supported wheelchair services, including individualised assessments, and the delivery, assembly, and adjustment of wheelchairs. Approximately 900 people in need of wheelchairs have benefited from this service each year. The annual allocated budget from the MoHSP for the production of orthoses and prostheses and the annual fund for the provision of this service is only €41,000 (ALL 5,000,000). However, the MoHSP confirms that this fund has not been used, because no company has been able to provide the necessary materials in compliance with the technology in place for the production of orthoses and prostheses (MoHSP, 2021). Municipalities do not offer any assistive tools other than wheelchairs provided by donor organisations, while there is a

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<sup>7</sup> Alternative report to the UN Committee on the Rights of Persons with Disabilities (on the Albanian Government's Initial Report on the Convention on the Rights of Persons with Disabilities) (Network of Disability Organisations, 2019).

<sup>8</sup> Committee on the Rights of Persons with Disabilities discusses the availability of sign language interpretation in dialogue with Albania, 28 August 2019.

<sup>9</sup> *Ibid.*

total lack of other assistive tools or technological equipment for blind or deaf people (UNICEF, 2018).

In 2021, the **Electronic and Postal Communications Authority (AKEP)** approved a regulation for the protection of consumers and subscribers of public electronic communications services by defining, in a specific chapter, the measures that should be taken by operators to draft, publish and observe clear and effective policies and procedures for the fair and proper treatment of subscribers classified as people with disabilities. Furthermore, it articulates that the concepts of accessibility for people with disabilities shall be applicable to: (i) mobile services (audio, internet access, broadband), including emergency services; and (ii) customer care, customer support centres, websites and points of sale. It also promotes the provision of end-use equipment for people with disabilities, including basic phones, phones with accessibility features, smartphones, tablets, applications and assistive services (MoHSP, 2021).

A **braille publication service** is provided by the Institute for Students with Visual Impairment and the Association of Blind People of Albania through its National Centre for the Rehabilitation of People with Visual Impairment. The books in braille are financed through the state budget or donors, but they do not meet all the needs and it is necessary to broaden the technical aspects, train staff, and ensure programmes with updated printing.<sup>10</sup>

The MoHSP has been working to develop the **standards for on-screen readers and speech-to-text software**. The MoHSP also recognises the challenge of purchasing various software owned by private companies, some of them global.<sup>11</sup>

Lack of access to assistive devices and technology at an affordable cost represents a major bottleneck in supporting inclusion and accessibility and the fulfilment of rights to inclusive education (Article 24), independent living (Article 19), personal mobility (Article 20) and several other rights under the UN CRPD (UNICEF, 2018). The World Health Organization (WHO) has produced a priority assistive products list, to enable governments to raise awareness, plan and mobilise resources.<sup>12</sup> The list includes hearing aids, wheelchairs, communication aids, memory aids and other essential items. However, these priority products need to be available at an affordable price for the community or state; thus further investigation is needed to assess the options for affordable investments in technology (UNICEF, 2018) for enhancing the inclusion of people with disabilities.

## 4 National debates, reforms and recommendations

### 4.1 National debates

The issue of people with disabilities is only occasionally part of the national debate. These debates are usually initiated by organisations for people with disabilities and mainly focus on the adequacy of benefits. There has been a continuous demand from these organisations for the government to increase the disability payment, which is still lower than the AROPE threshold set by the EU-SILC. The issue of accessibility has been raised constantly by civil society organisations and stakeholder groups in the country.

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<sup>10</sup> Initial report submitted by Albania under Article 35 of the Convention. Committee on the Rights of Persons with Disabilities discusses the availability of sign language interpretation in dialogue with Albania, 28 August 2019.

<sup>11</sup> Committee on the Rights of Persons with Disabilities discusses the availability of sign language interpretation in dialogue with Albania, 28 August 2019.

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[https://apps.who.int/iris/bitstream/handle/10665/207694/WHO\\_EMP\\_PHI\\_2016.01\\_enq.%20pdf;jsessionid=DF289A6A533D3CDC5E4DABC422E9D58C?sequence=1](https://apps.who.int/iris/bitstream/handle/10665/207694/WHO_EMP_PHI_2016.01_enq.%20pdf;jsessionid=DF289A6A533D3CDC5E4DABC422E9D58C?sequence=1)



Inaccessible premises – including those of social services, education institutions, courts, healthcare services, and voting centres – remain a challenge for people with disabilities in Albania. Another nationally debated issue is related to the inclusion and employment of people with disabilities through a quota/levy fund, which will be explained below.

The current scheme denies benefits to people who voluntarily leave a job without a compelling reason. Discussions are ongoing on the possibility of loosening eligibility criteria, particularly in response to economic shocks and considering the above-mentioned disadvantages. Linking benefits to the amount of contributions is also being explored; however, policy-makers would need to take into account the disadvantage of low historic contributions by people with disabilities.

## **4.2 Recent reforms and reforms currently in the pipeline**

### **4.2.1 Reform of the disability programme**

Since 2016 Albania has been implementing an important reform of the social protection programme covering assessment and payments for people with disabilities. This reform involves an important shift in the disability assessment framework away from the existing, purely medical, system to a bio-psychic-social assessment model. This new model takes into account not only the ability to work but also wider criteria, by focusing on the ability to carry out activities of everyday life. The existing MCDAW commissions will be replaced by new multi-disciplinary commissions comprised of physicians and social workers. Furthermore, the national electronic register that is being created will exchange information with all other government agencies, easing the administrative burden of collecting the necessary documents. The elimination of periodic re-examinations is also an important step forward in improving access to services. More importantly, the reform will introduce a measure of disability severity that distinguishes between *light* (5-24%), *moderate* (25-49%), *heavy* (50-95%) and *full* (96-100%) disability. Income support will vary in accordance with the severity of disability and the same will happen regarding other non-cash benefits.

The reform has not, however, envisaged any increase in the social protection budget, which in turn would bring an increase in the cash transfers – as seen above, these do not guarantee an income above the AROPE threshold. Additionally, as the reform stresses the combining of cash transfers with other services, it is of imperative importance for the success of the reform that there should be investment in the creation of these services and in making them accessible for people with disabilities.

### **4.2.2 Employment Social Fund (ESF)**

In 2019, with the adoption of Law No 15/2019 "On Employment Promotion", ample space was created for diversifying employment-promotion programmes and employment services, and the establishment of an Employment Social Fund (ESF) for the employment and upskilling of people with disabilities. The ESF is designed to finance employment-promotion programmes; self-employment; rehabilitation for work; vocational training and retraining; employment orientation and counselling; support services; adjustment of the workplace for people with disabilities, including deaf people and people with reduced working capacity assessed as partly fit for work by the respective commissions; social reintegration programmes; and support to promote the employment of household members of people with disabilities.

The ESF will be financed by employers, the state or other donors and will be managed by the NAES to finance employment, training, self-employment, or workplace adaptation programmes for people with disabilities. The by-law for the establishment of the administrative board for the management of the ESF has been approved by the Council of Ministers (DCM No 177/2020); however, the ministerial order for the operational modalities for the collection of the funds has yet to be approved. The quota/levy scheme introduced for public and private employers envisages that each employer with more

than 25 employees should employ one person with disabilities, and an additional one for every 50 employees thereafter. If employers fail to fulfil this obligation, they will have to contribute to the ESF an amount equal to 100% of the minimum wage for every month in which they do not employ the appropriate quota of people with disabilities.

The quota provision, as well as the compulsory payment, was part of the original Employment Promotion Law of 1995. However, these elements of the law were never implemented because the secondary legislation was never enacted, the obligations to meet the quota were not monitored, and levies were never collected.

Changes introduced to the law on social assistance (July 2019) removed a provision which stated that people with disabilities would lose disability cash benefits after 48 months of employment. This will constitute an additional incentive for boosting employment of these people. The identification of the current employment situation of people with disabilities was underlined in the national action plan for people with disabilities (2021-2025). Cross-sectoral co-ordination remains crucial for the implementation of the ESF. It is not yet clear to what extent the ESF will lead to significant results in terms of the integration of people with disabilities into the labour market. To date the ESF has yet to be operationalised. In the aftermath of two economic shocks – the 2019 earthquake and the COVID-19 pandemic – it appears unlikely that the ESF will become operational during 2022.

### 4.3 Good practice and recommendations on how to tackle gaps and obstacles

**Several examples of good practice brought about by the reform of disability payments could be also extended to the contributory disability pensions provided by the social insurance scheme.** The easement of administrative procedures and documentation collection brought about by the creation of the national electronic register is something that could also be extended to people with disabilities benefiting from the social insurance scheme. The elimination of periodic re-examinations (which involve extra costs, especially for people with severe disabilities) is something that could also be extended to the social insurance scheme.

**It would be advisable to unify the legislation regarding the categories used to differentiate between the severity of disabilities.** With the new legislation, the social assistance scheme recognises four categories of disability, whereas the social insurance scheme recognises three categories. Harmonising these categories would make it easier to understand the existing situation and implement future policies.

**There is a need for policy-makers in Albania to distinguish between the scope of the two benefits - disability allowance and social assistance.** The purpose of the social assistance programme is to alleviate poverty and guarantee access by beneficiaries to social protection by addressing their multiple vulnerabilities – through both income support and services. The lack of equal access to the comprehensive treatment of these needs violates the rights of individuals and households and undermines the success of the programme designed for this purpose. The social assistance law needs to be reviewed to allow the participation of people with disabilities as beneficiaries with equal rights. The exclusion of parallel payments (disability allowance and social assistance at the same time) remains a significant gap in the social protection system.

**Albania should strengthen data-collection mechanisms,** ensuring that comprehensive, reliable and disaggregated data on disability and people with disabilities are collected, in line with Article 31 (statistics and data collection) of the UN CRPD.

**Eligibility criteria for unemployment benefit for people with disabilities need to be revised,** particularly in response to economic shocks and taking into account the disadvantage of low historic contributions by people with disabilities.

**Improving the statistical information on people with disabilities registered as unemployed job-seekers**, in accordance with the data provided by the electronic register on disability allowance, is crucial for tailoring the support for this category and empowering them to integrate in the labour market.

While accessibility remains crucial, **addressing the needs of people with disabilities requires a holistic approach** through improved co-ordination of cross-sectoral measures, such as social care services, employment, healthcare, and cash benefits. Linking cash and care programmes will require further attention, especially once the roll-out of the reformed disability programme is completed by end of 2022.

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