



Home Office

# Country Policy and Information Note

## Albania: Mental healthcare

Version 1.0

May 2020

# Preface

## Purpose

This note provides country of origin information (COI) for decision makers handling cases where a person claims that to remove them from the UK would be a breach Articles 3 and / or 8 of the European Convention on Human Rights (ECHR) because of an ongoing health condition.

It is not intended to be an exhaustive survey of mental health issues in Albania.

## Country of origin information

The country information in this note has been carefully selected in accordance with the general principles of COI research as set out in the [Common EU \[European Union\] Guidelines for Processing Country of Origin Information \(COI\)](#), dated April 2008, and the Austrian Centre for Country of Origin and Asylum Research and Documentation's (ACCORD), [Researching Country Origin Information – Training Manual, 2013](#). Namely, taking into account the COI's relevance, reliability, accuracy, balance, currency, transparency and traceability.

The structure and content of the country information section follows a [terms of reference](#) which sets out the general and specific topics relevant to this note.

All information included in the note was published or made publicly available on or before the 'cut-off' date(s) in the country information section. Any event taking place or report/article published after these date(s) is not included.

All information is publicly accessible or can be made publicly available, and is from generally reliable sources. Sources and the information they provide are carefully considered before inclusion.

Factors relevant to the assessment of the reliability of sources and information include:

- the motivation, purpose, knowledge and experience of the source
- how the information was obtained, including specific methodologies used
- the currency and detail of information, and
- whether the COI is consistent with and/or corroborated by other sources.
- Multiple sourcing is used to ensure that the information is accurate, balanced and corroborated, so that a comprehensive and up-to-date picture at the time of publication is provided of the issues relevant to this note.
- Information is compared and contrasted, whenever possible, to provide a range of views and opinions. The inclusion of a source, however, is not an endorsement of it or any view(s) expressed.
- Each piece of information is referenced in a brief footnote; full details of all sources cited and consulted in compiling the note are listed alphabetically in the [bibliography](#).

## MedCOI

MedCOI is an Asylum and Migration Integration Fund financed project to obtain medical country of origin information. The project allows 11 European Union member states plus Denmark, Norway and Switzerland to make use of the services of the 'MedCOI' team in the Netherlands and Belgium.

The MedCOI team makes enquiries with qualified doctors and other experts working in countries of origin. The information obtained is reviewed by the MedCOI project team before it is forwarded to the UK or other national COI teams. Previous MedCOI responses are stored on its database which participating states are able to access.

## Feedback

Our goal is to continuously improve our material. Therefore, if you would like to comment on this note, please email the [Country Policy and Information Team](#).

# Contents

<b>Assessment</b> .....	<b>5</b>
Guidance on medical claims .....	5
<b>Country information</b> .....	<b>6</b>
1. Law and policy .....	6
1.1 Law and policy related to mental health .....	6
1.2 Government initiatives .....	7
1.3 Funding .....	7
1.4 Inspections of institutions .....	9
2. The healthcare system .....	9
2.1 Availability of healthcare .....	9
2.2 Psychiatric hospitals .....	11
2.3 Community care .....	13
2.4 Follow-up care .....	15
2.5 Compulsory treatment .....	15
2.6 Cost of drugs .....	15
2.7 Availability of drugs/treatment .....	16
2.8 Accessibility of drugs/treatment: regional and urban/rural variation .....	16
3. Mental health conditions .....	17
3.1 Introduction .....	17
3.2 Anxiety and Post Traumatic Stress Disorder (PTSD) .....	18
3.3 Depression .....	18
3.4 Suicidal behaviour .....	19
3.5 Chronic psychotic disorders .....	19
3.6 Alcohol and drug abuse .....	20
4. Paediatric care .....	20
5. Stigma .....	22
6. Alphabetical list of available medication .....	23
6.1 Mother Teresa Hospital .....	23
6.2 Florifarma pharmacy .....	24
<b>Terms of Reference</b> .....	<b>26</b>
<b>Bibliography</b> .....	<b>27</b>
Sources cited .....	27
Sources consulted but not cited .....	29
<b>Version control</b> .....	<b>31</b>

# Assessment

Updated: 1 April 2020

## Guidance on medical claims

For general guidance on considering cases where a person claims that to remove them from the UK would be a breach Articles 3 and / or 8 of the European Convention on Human Rights (ECHR) because of an ongoing health condition, see the instruction on [Human rights claims on medical grounds](#).

[Back to Contents](#)

# Country information

Section 1 updated: 17 April 2020

## 1. Law and policy

### 1.1 Law and policy related to mental health

- 1.1.1 The United States Department of State's Country Report on Human Rights Practices for 2019 stated: 'Labour laws prohibit employment discrimination because of race, skin colour, gender, age, physical or mental disability, political beliefs, language, nationality, religion, family, HIV/AIDS status, or social origin. The government did not enforce the law and penalties were insufficient to deter violations.'<sup>1</sup>
- 1.1.2 The Belgian Desk on Accessibility (BDA) of the Immigration Office in Belgium forms part of the MedCOI project; this project is financed by the European Commission's Asylum, Migration and Integration Fund with the purpose of obtaining medical country of origin information. The BDA carried out a fact-finding mission to Albania from 4 to 11 September 2016 in order to obtain up-to-date information about the healthcare system in Albania. The resulting report (the BDA/MedCOI report) was published in July 2017 and stated: 'From a legal point of view, the Albanian state has ratified the most important laws at international level regarding the respect for the humane treatment of a person under special conditions. The government has also ratified the convention for protecting the rights of persons with disabilities. In practice, the situation remains very difficult and challenging, not only for chronic but also for acute and urgent intervention cases.'<sup>2</sup>
- 1.1.3 The International Trade Association published information in October 2019 which stated: '...The National Agency of Drugs and Medical Equipment oversees registering drugs entering Albania. Since 2016, the Agency is also in charge of registering medical equipment. The MoH develops healthcare policies, proposes the national healthcare budget, and monitors state-owned health institutions.'<sup>3</sup>
- 1.1.4 In March 2020 the Government of Albania released the 11<sup>th</sup> National Report on the implementation of the European Social Charter, which noted: 'Regarding mental health care and persons with intellectual disability, the community approach of mental health service is specifically stated in Law No.44/2012 "On Mental Health".'<sup>4</sup>
- 1.1.5 See [Community care](#) for further information on this subject.

[Back to Contents](#)

---

<sup>1</sup> USSD, 'Country Report on Human Rights Practices, Albania, 2019', 11 March 2020, [url](#)

<sup>2</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

<sup>3</sup> International Trade Association, 'Healthcare Resource Guide: Albania', updated October 2019, [url](#)

<sup>4</sup> Council of Europe, '11th National Report on the implementation of the...', 6 March 2020, [url](#)

## 1.2 Government initiatives

1.2.1 WHO reported in 2018: 'In accordance with international trends, the Ministry of Health and Social Protection is developing new national policies to increase the degree of autonomy of public hospitals. A higher degree of autonomy could provide opportunities for improving the quality of care and efficiency while attracting dynamic managers.'<sup>5</sup>

1.2.2 WHO noted the Action Plan for the Development of Mental Health Services in Albania 2013-2022:

'The aim of this strategy is for the protection of the rights of persons with special needs disorders and mental health and the fight against exclusion and social discrimination, through an integrated network of mental health services treatment, rehabilitation and social reintegration.

'With two major strategic objectives;

1. Decentralization of mental health services through network expansion and enhancement of existing services.
2. Deinstitutionalization, by controlling the number of psychiatric beds and strengthening community mental health services.'<sup>6</sup>

1.2.3 See [Community care](#) for further information on this subject.

[Back to Contents](#)

## 1.3 Funding

1.3.1 The United Nations in Albania released the Progress Report for 2018 for the Albanian Programme of Cooperation for Sustainable Development 2019-2021, noting: 'The Government of Albania continues to implement the approach of Universal Health Coverage. Yet, disparities and inequalities persist among some groups of the population, notably among R&E [Roma and Egyptian minorities], and between urban and rural areas. Spending on health care is still below three percent of GDP and ten percent of the national budget.'<sup>7</sup>

1.3.2 As a comparison, Ariel Çomo, head of child psychiatry at the Tirana University hospital 'Maria Teresa,'<sup>8</sup> produced a paper in 2015 in which he compared mental health provision in Albania with that in other countries in the region. He noted the per capita government expenditure in health (in US\$), stating that this was \$142 in Albania, \$340 in Bosnia and Herzegovina, \$444 in Macedonia, \$516 in Montenegro, \$1,490 in Slovenia, \$1,580 in Greece, and \$2,031 in Italy<sup>9</sup>.

1.3.3 See [Accessibility of drugs/treatment \(including regional and urban/rural variation\)](#) for further information on this subject.

---

<sup>5</sup> WHO, 'Primary health care in Albania: Rapid Assessment', 2018, [url](#)

<sup>6</sup> WHO, 'Plani i Veprimt për Zhvillimin e Shërbimeve të Shëndetit Mendor...', undated, [url](#)

<sup>7</sup> United Nations, 'Programme of Cooperation for Sustainable Development...', May 2019, [url](#)

<sup>8</sup> ESCAP, 'Ariel Çomo and the "deep gap" between available resources [...]', undated, [url](#)

<sup>9</sup> ESCAP, 'Mental Health services in Albania and in the countries around [...]', Ariel Çomo, 2015, [url](#)

- 1.3.4 The United States International Trade Association, which is a website that provides information to ‘foster economic growth and prosperity through global trade’<sup>10</sup>, noted on its Export.gov section, updated in October 2019:
- ‘Estimates put the current health expenditure for 2018 between 6-7% of the GDP, or more than \$1 billion [USD], out of which almost 60% is paid privately. According to the Albanian Ministry of Health (MoH), public healthcare spending in 2018 reached 48.6 billion leke (\$450 million [USD]). Experts argue that healthcare spending in Albania is even higher considering the sizable informal economy.
- ‘Public healthcare spending is partially financed by compulsory health insurance contributions by employees and employers (a 3.4 % health insurance contribution, divided evenly between employer and employee, is imposed on salaries) and subsidized by the state budget. The Compulsory Health Insurance Fund (ISKSH), funded by the health insurance contributions and subsidized by the state budget, reimburses the prescription drugs for the insured and pays for the public healthcare services as well as some approved hospital healthcare services provided by the private healthcare providers.’<sup>11</sup>
- 1.3.5 It was noted by WHO in 2018: ‘The Compulsory Health Care Insurance Fund is the purchaser of services. Its budget is distributed as follows: 24% for PHC, 27% for other forms of outpatient care and reimbursement for medicines, 48% for hospitals, 2% for the national preventive check-up programme and 2% for administrative expenses.’<sup>12</sup>
- 1.3.6 WHO also noted in 2018: ‘...For most of the PHC buildings, a budget for repairs and maintenance has not been made available in recent decades.’<sup>13</sup>
- 1.3.7 The BDA/MedCOI report, published in July 2017, stated:
- ‘The HIF [Health Insurance Fund] is a semi-autonomous structure from the MoH [Ministry of Health], founded in 1995 as the Health Insurance Institute. Later it became the HIF. The HIF is financed by the state budget and contributions. All the funds that go through the HIF are used to pay doctors, nurses, etc... Certain population groups are automatically included in the HIF: children, students, military personnel, pensioners and the unemployed. If you are unemployed, you get a document which has to be presented at the family physician to acquire a health insurance card.
- ‘... All the people who work in the public and private sector and who pay their taxes are included in the health insurance scheme. Besides these people, there are a lot of people who are paid under the covers. People can also make a voluntary contribution which is around €20 [Euros] to get a contribution card and via this way this person is insured. The government has launched the idea of free healthcare financed by general taxation. The minister wants to go to the general taxation system by the end of 2017.

---

<sup>10</sup> International Trade Association, ‘About us’, [url](#)

<sup>11</sup> International Trade Association, ‘Healthcare Resource Guide: Albania’, updated October 2019, [url](#)

<sup>12</sup> WHO, ‘Primary health care in Albania: Rapid Assessment’, 2018, [url](#)

<sup>13</sup> WHO, ‘Primary health care in Albania: Rapid Assessment’, 2018, [url](#)

‘...The total number of employees at the hospital is only a third of what is necessary. More funds are needed to hire extra staff. Social workers play an important role in the rehabilitation and re-integration process of these patients. An estimated 30% of the patients [mental health patients] relapse and return to mental health services.’<sup>14</sup>

[Back to Contents](#)

## 1.4 Inspections of institutions

- 1.4.1 The United States Department of State’s Country Report on Human Rights Practices for 2019 stated: ‘As of August [2019] the Office of the Ombudsman inspected four mental health institutions during the year and found that patients were given inadequate psychiatric evaluations upon both admission to and discharge from the institutions.’<sup>15</sup>

[Back to Contents](#)

Section 2 updated: 17 April 2020

## 2. The healthcare system

### 2.1 Availability of healthcare

- 2.1.1 The BDA/MedCOI report, published in July 2017, stated: ‘There are not many facilities to treat people with mental illnesses in Albania.’<sup>16</sup>

- 2.1.2 The BDA/MedCOI report, published in July 2017, stated:

‘The main problem to create a structure of psychosocial support in the country, is that it goes against the mentality in Albania. Until now, the treatment of mental health problems is only provided in psychiatric institutions. Since 2012, with the introduction of the new law on healthcare, the MoH in cooperation with other stakeholders, including the ARCT [Albanian Rehabilitation Centre for Trauma and Torture], have tried to include elements of deinstitutionalized care. The legal structure is in place today, but there is a lack of human resources and investments. The organization did not hear anything up until now of priority being given to mental healthcare. Most of the reforms up until now revolve around the EU admission process, notably the reform of the judiciary.’<sup>17</sup>

- 2.1.3 The United States International Trade Association, which is a website that provides information to ‘foster economic growth and prosperity through global trade’<sup>18</sup>, noted on its Export.gov section:

‘The healthcare system in Albania is mostly public, although private healthcare has become increasingly popular. The public healthcare service is organized at the primary, secondary, and tertiary service levels. Approximately 413 public healthcare clinics offer primary and secondary healthcare services and 42 public hospitals offer tertiary healthcare services. Pharmaceutical and dental services are almost entirely private. The share of

---

<sup>14</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

<sup>15</sup> USSD, ‘Country Report on Human Rights Practices, Albania, 2019’, 11 March 2020, [url](#)

<sup>16</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

<sup>17</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

<sup>18</sup> International Trade Association, ‘About us’, [url](#)

private healthcare services has experienced impressive growth in the last decade. The number of specialized private diagnostic clinics, labs, and hospitals has been growing at a fast pace, especially in major urban areas. The 13 private hospitals, as well as dozens of private multi-disciplinary diagnostic clinics and labs, offer a full range of medical services.’<sup>19</sup>

#### 2.1.4 The World Health Organisation (WHO) reported in 2018:

‘According to the basic package of PHC [primary health care] services, GPs have to (1) manage primary health care; (2) focus health care on individuals; (2) [sic] solve special health problems defined in the seven groups of services [which include mental health care]; (3) provide holistic and integrated health care; (4) adapt services to fulfil community health service needs; and (5) provide basic check-ups for the people in targeted age groups as defined by Ministry of Health and Social Protection (6). The basic package also highlights the competencies of GPs in five fields: clinical responsibilities, managing the health risks in the population, communication with patients, managing the patients and managing health care.

‘... During the visits [of a delegation sent from WHO to Albania], it was observed that buildings are mostly old although well maintained. Some premises have been recently renovated. Some buildings show damaged offices, with the ceiling covered with mould, without a heating and ventilation system. The offices were small and uncomfortable. Some offices accommodate three to five people, including the patient, the GP and one or two nurses. Medical records are kept in the same office. Reception desks, even in larger PHC centres, are rather small with no or small waiting rooms. Some PHC centres in rural areas do not have waiting rooms.’<sup>20</sup>

#### 2.1.5 WHO also noted in 2018:

‘PHC centres provide a scope of services defined by a basic package of PHC services adopted by the Ministry of Health and Social Protection in 2009. The Compulsory Health Care Insurance Fund pays for all services included in the basic package of PHC services. The package defines seven groups of services: (1) emergency care; (2) health services for children; (3) health services for women of reproductive age; (4) health services for adults; (5) health services for older people; (6) mental health care; and (7) health promotion and education. In 2015, the groups for women of reproductive age and children were revised to bring them up to date with latest best practices.’<sup>21</sup>

#### 2.1.6 The BDA/MedCOI report, published in July 2017, stated:

‘The MoH [Ministry of Health] has further developed the primary healthcare (PHC) system over the past few years. In September 2016 there were 1,600 family physicians across the country, as well as 6,000 nurses. A recent development has been the introduction of a general medical check-up for everybody between 40 and 65 years old. This was introduced by the MoH in the primary healthcare system. The check-up encourages people to visit

<sup>19</sup> International Trade Association, ‘Healthcare Resource Guide: Albania’, updated October 2019, [url](#)

<sup>20</sup> WHO, ‘Primary health care in Albania: Rapid Assessment’, 2018, page 5, [url](#)

<sup>21</sup> WHO, ‘Primary health care in Albania: Rapid Assessment’, 2018, [url](#)

their family physician. It raises awareness for certain health issues and helps keep the population stay healthy. The general check-up is provided free of charge.’<sup>22</sup>

[Back to Contents](#)

## 2.2 Psychiatric hospitals

2.2.1 The WHO Mental Health Atlas 2017 provided the following information about outpatient and inpatient mental health facilities in Albania:

### ‘Outpatient care (total facilities)

‘Mental health outpatient facilities attached to a hospital: none or not reported

‘“Community-based/ non-hospital” mental health outpatient facility: 9

‘Other outpatient facility (e.g. Mental health day care or treatment facility): none or not reported

‘Outpatient facility specifically for children and adolescents (including services for developmental disorders): 3

‘Other outpatient services for children and adolescents (e.g. day care): none or not reported

### ‘Inpatient care (total facilities)

‘Mental hospitals: 2

‘Psychiatric units in general hospitals: 2

‘Forensic inpatient units: none or not reported

‘Residential care facilities: 13’<sup>23</sup>

2.2.2 A Home Office Fact-Finding Mission (HO FFM) took place in Albania from 31 October to 7 November 2017; the fact-finding team (HO FFT) reported:

‘There are four psychiatric hospitals in Albania: Tirana, Shkoder, Elbasan and Vlore. Stay is limited to three weeks. The two largest in Vlore (St Patrick’s) has 180 beds and Elbasan has 310. Around 75% of people in St Patrick’s have chronic illnesses and have been there for many years. The other two facilities are psychiatric wards of larger hospitals, Tirana has 90 beds (10 for children/adolescents) and Shkoder 35.’<sup>24</sup>

2.2.3 The HO FFT were told that there is a ratio of 1.5 psychiatrists per 100,000 of the population<sup>25</sup>. As a comparison, Ariel Çomo, head of child psychiatry at the Tirana University hospital ‘Maria Teresa,’<sup>26</sup> produced a paper in 2015 in which he compared mental health provision in Albania with that in other countries in the region, stating that the number of psychiatrists per 100,000 people was 1.83 in Albania, 4.95 in Bosnia-Herzegovina, 6.75 in Bulgaria,

---

<sup>22</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

<sup>23</sup> WHO, Mental Health Atlas 2017, Member State Profile, Albania, [url](#)

<sup>24</sup> HO, Report of FFM to Albania, October - November 2017, published February 2018, section 7, [url](#)

<sup>25</sup> HO, Report of FFM to Albania, October - November 2017, published February 2018, section 7, [url](#)

<sup>26</sup> ESCAP, ‘Ariel Çomo and the “deep gap” between available resources [...],’ undated, [url](#)

7.03 in Montenegro, 7.06 in Slovenia, 9.98 in Macedonia and 12.88 in Greece<sup>27</sup>.

2.2.4 The BDA/MedCOI report, published in July 2017, stated:

'The hospital [Psychiatric hospital "Sadik Dinçi" Elbassan] opened in 1964 as the neuropsychiatric hospital "Sadik Dinçi". After the 1990s the neurology department became part of the general hospital in Elbassan. It is the biggest hospital for psychiatric patients in Albania, which covers a population of 1,300,000.

'There are 310 beds in the hospital which has a yearly turnover rate of 450 patients. There are 5 doctors of whom 2 work in the community centres of mental health under auspices of the hospital. The psychosocial staff consists of 10 social workers and psychologists. The hospital focuses on treatment and rehabilitation. There are 3 wards for acute patients. In theory, there are no closed wards in the hospital. The first ward where patients enter, is the admission ward. It is a mixed ward for men and women with 8 beds. The other 2 wards are separated for men and women. Each ward has a capacity of 30 patients. The 2 wards have a capacity of 60 patients in total. Besides these wards, the community centres for outpatient treatment are located in the same building. They have a staff of 8: 2 doctors, 2 psychologists, 1 social worker and 3 nurses.

'...The patients who are hospitalized in the psychiatric hospital came on referral. Most of them come from Central Albania. The age of the patients varies from 18 years old up to 65. The psychiatric hospital is linked to the Mother Teresa UHC and takes care of children and adolescents suffering from mental illnesses.

'...The psychiatric hospital also accommodates 75 patients born with mental disabilities who need to be in special care facilities. These patients were re-examined by the MoH [Ministry of Health] in 2015, seeing as they will be brought under the auspices of the Ministry of Social Welfare. These patients are currently still at the hospital and the situation in the hospital becomes aggravated because of their presence.

'...The psychiatric hospital offers both types of treatment: medicinal treatment, as well as socio psychologic treatment and occupational therapy. Each patient gets into contact with a psychologist and social worker. They prepare the plan of treatment for the patient in coordination with the doctor and the patient. First, the patient is treated with medication, afterwards the patient works on his rehabilitation in society with the aid of a psychologist and social worker. There are two large rehabilitation centres at the psychiatric hospital where patients go to at least once a week. The staff consists of three persons for both centres. The centres organize occupational therapy on a daily basis for a total of 100 inpatients.

'...The psychiatric hospital does not treat drug addicts. In Tirana there is a specific ward at the Mother Theresa UHC for addicted patients. Separate

---

<sup>27</sup> ESCAP, 'Mental Health services in Albania and in the countries around [...],' Ariel Çomo, 2015, [url](#)

wards for drug addicts can be found in institutions in Elbasan, Korça, Berat, Vlorë and Shkodra.<sup>28</sup>

2.2.5 See [Follow-up care](#) for further information on this hospital. See [Alcohol and drug abuse](#) for further information on this subject.

2.2.6 The website 'Visit Tirana,' which assists tourists to Tirana, noted:

'Mother Teresa Hospital (known as QSUT- Qendra Spitalore Universitare Nene Tereza) is the main state-owned hospital in Tirana, Albania. It is currently the largest medical centre hospital located in the country [...].

'It is located in the north-east part of Tirana and occupies an area of 165,000 m2. Most of diseases as well as surgery interventions are offered here.'<sup>29</sup>

2.2.7 The BDA/MedCOI report, published in July 2017, stated:

'The UHC [University Hospital Centre] Mother Teresa treats a variety of mental disorders, including schizophrenia, personality disorders, depression, disorders related to the use of drugs, etc. It has closed wards for schizophrenic patients. The department has the latest generation of psychotropic medication to treat these illnesses. As in the rest of the world, the treatment of mental illnesses in Albania has evolved from closed wards to open rehabilitation which has created new challenges.'<sup>30</sup>

2.2.8 The section on [Paediatric care](#) contains information about paediatric medicine at the Mother Theresa University Hospital and the section on [Alphabetical list of available medication](#) contains information about drugs available at the hospital.

[Back to Contents](#)

## 2.3 Community care

2.3.1 The HO FFM report, published in February 2018, stated:

'The FFT were told that Albania's reform of mental health is trying to change the situation to a more community based approach. There are community support clinics which are aimed at rehabilitating and supporting the transition from hospitalisation to home.

'D and E [Different and Equal, an NGO which assists victims of human trafficking, domestic violence sexual abuse] commented that the community centres are always full. Some religious organisations also have spaces but these are also always full. There are very few chances for long term support for really serious cases.

'There are nine mental health community day centres around the country which offer multi-disciplinary services with psychologists, psychiatrists, a psychiatric nurse, social workers and occupational therapists.'<sup>31</sup>

2.3.2 The United Nations in Albania released the Progress Report for 2018 for the Albanian Programme of Cooperation for Sustainable Development 2019-

---

<sup>28</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

<sup>29</sup> Visit Tirana, 'Mother Teresa Hospital', undated, [url](#)

<sup>30</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

<sup>31</sup> HO, Report of FFM to Albania, October - November 2017, published February 2018, section 7, [url](#)

2021 which noted: 'In addition, WHO trained staff of the two Mental Health Residential Centres and one Community Mental Health Centre in Vlore.'<sup>32</sup>

- 2.3.3 In March 2020 the Government of Albania released the 11th National Report on the implementation of the European Social Charter for Albania, which noted:

'In this framework [within the Action for the Development of Mental Health Services in Albania 2013-2022] 9 (nine) Community Mental Health Centres (community ambulatory services) and 13 (thirteen) Supported Homes (community residential services), were established. Supported Homes are functional units of mental health services, aiming the provision of residential services to individuals in a similar environment as family, where the main purpose is the care and rehabilitation of individuals with mental disorder. The beneficiaries of these type of services are also persons with intellectual disabilities and currently these services accommodate about 130 people with long term mental health disorders.'<sup>33</sup>

- 2.3.4 The BDA/MedCOI report, published in July 2017, stated:

'The project of the protected homes started 10 years ago. The WHO had an office in the psychiatric hospital at that time and was part of the process for drafting the strategy on deinstitutionalization... More homes of protection need to be opened, but this is only the first stage of development. In Tirana a new protected home is supposed to open supported by the San Egidio Community. The cost of the protected homes is covered by the Albanian government.'<sup>34</sup>

- 2.3.5 When referring to the Sadik Dinçi' Elbassan [district] Hospital, the MedCOI Fact Finding Report stated:

'The psychiatric hospital also has 2 sites with protected homes: one in Elbasan, the other in Cerrik. The Elbasan home shelters a total of 10 women. In the Cerrik home 6 men and 6 women live. The aim of the protected shelters is to prepare the patients for reintegration into family live. Different activities are organized, including cooking, drawing, etc. Before being sent to the shelters, the patients were treated as inpatients. The shelters are part of a strategy initiated by the MoH to provide deinstitutionalised care in mental healthcare. There are 2 protected homes to open in Korça, which will accommodate 6 men and 6 women. The staff who will work in Korça was selected and trained by Irish instructors under the guidance of the WHO. The Sadik Dinçi hospital selected the patients who will be sent to Korça. The hospital is awaiting the final approval of the MoH to send the patients over there. All of the necessary papers have been prepared by the hospital to complete the transfer of the patients to the site in Korça.'<sup>35</sup>

- 2.3.6 MedCOI, a project financed by the European Commission's Asylum, Migration and Integration Fund with the purpose of obtaining medical country

---

<sup>32</sup> United Nations, 'Programme of Cooperation for Sustainable Development...', May 2019, [url](#)

<sup>33</sup> Council of Europe, '11th National Report on the implementation of the...', 6 March 2020, [url](#)

<sup>34</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

<sup>35</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

of origin information, reported in December 2019 that psychiatric treatment in the form of assisted living or care at home by a psychiatric nurse was available at the German Polyclinic, Rruga Lord Bajron in Laprake, Tirana which is a private facility<sup>36</sup>.

[Back to Contents](#)

## 2.4 Follow-up care

2.4.1 The BDA/MedCOI report, published in July 2017, stated: ‘The hospital [Psychiatric hospital “Sadik Dinçi” Elbassan] does not offer any type of home care. Once a patient is discharged, the staff of the hospital visits the patient at home to check up on him. [...] The psychiatric hospital does not specifically assist patients in the search of a job.’<sup>37</sup>

2.4.2 See [Psychiatric hospitals](#) for further information on this hospital.

[Back to Contents](#)

## 2.5 Compulsory treatment

2.5.1 Balkan Insight, an online news outlet, reported in January 2020:

‘The European Court of Human Rights in Strasbourg said on Tuesday that it had found in favour of Arben Strazimiri [who was arrested for attempted murder but was not found to be criminally liable because of paranoid schizophrenia], who was detained in a prison hospital because Albania does not have specialist healthcare institutions for people who have been ordered to undergo compulsory treatment for mental illness.

‘...Since then [his arrest in 2008], he has been held at the Prison Hospital in Tirana because the country doesn’t have a specialist healthcare facility for those undergoing compulsory treatment. “The court found in particular that there had been a longstanding failure by the Albanian authorities to set up a special medical institution for the mentally ill who were deprived of their liberty on the strength of court-ordered compulsory treatment,” the court said.

“That was in breach of its domestic statutory obligations, and pointed to a structural problem,” it added.’<sup>38</sup>

[Back to Contents](#)

## 2.6 Cost of drugs

2.6.1 WHO reported in 2018: ‘As an initial step towards universal coverage, free accessibility to preventive services for the entire population, including uninsured people, was introduced in January 2017.’<sup>39</sup>

2.6.2 The BDA/MedCOI report, published in July 2017, stated: ‘Treatment for psychiatric illnesses is completely free of charge and covered by the government. Patients do not pay at the hospital. The government provides a lot of funds through the MoH and the Ministry of Social Welfare.’<sup>40</sup>

---

<sup>36</sup> MedCOI, 20 December 2019, last accessed: 24 January 2020

<sup>37</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

<sup>38</sup> Balkan Insight, ‘Albania Held Mentally Ill Man in Prison Illegally’, 21 January 2020, [url](#)

<sup>39</sup> WHO, ‘Primary health care in Albania: Rapid Assessment’, 2018, [url](#)

<sup>40</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

## 2.7 Availability of drugs/treatment

- 2.7.1 MedCOI noted in August 2019: 'Quetiapine is available under brand name Seroquel; Olanzapine is available under brand name Zyprex and Risperidone is available under brand name Risperdal.'<sup>41</sup>
- 2.7.2 MedCOI reported in January 2019: 'Aripiprazole, biperidene and trihexyphenidyl [all antipsychotic drugs] are only available in private pharmacy. No state hospital and pharmacy carries this medication. This means the patient have to buy them with special prescription by the treating specialist. The patient has to pay the fee by them self in a private pharmacy (not covered by the state Insurance).'<sup>42</sup>
- 2.7.3 The BDA/MedCOI report, published in July 2017, stated:  
'In general, the hospital [Psychiatric hospital "Sadik Dinçi" Elbasan] does not have a problem with the supply of medication. Sometimes there are supply issues for certain medicines because of bureaucratic procedures. The hospital does not have the latest generation drugs to treat mental health problems. Each year the MoH sends the list of registered medicines to the hospitals. The hospital sets up a planning on an annual basis. It sends this planning of the necessary medication to the MoH which ultimately decides. There are sometimes interruptions regarding the supply of certain medicines which have to do with the procurement procedures in place. According to the hospital, if there is an interruption in the supply of medication, this usually lasts from 2 weeks to 1 month. The technical director of the hospital stated that an interruption in the supply of medication does not affect the treatment of the patients, seeing as all the alternatives are in stock at the hospital.'<sup>43</sup>

## 2.8 Accessibility of drugs/treatment: regional and urban/rural variation

- 2.8.1 The HO FFM report, published in February 2018, noted:  
'People who live in remote areas are usually referred to specialist teams by their GPs.  
'Primary health care is offered for free, whether or not the person has insurance. If a person follows the referral system, they can access the secondary health services for free. Mentally ill people have been positively discriminated against so they get access and treated for the associated social issues.'<sup>44</sup>
- 2.8.2 WHO reported in 2018: 'More recently, the Government of Albania is planning additional investments to develop and implement new PHC models of care that consider the needs of urban and rural populations.'<sup>45</sup>

---

<sup>41</sup> MedCOI, 20 August 2019, last accessed: 24 January 2020

<sup>42</sup> MedCOI, 24 January 2019, last accessed: 24 January 2020

<sup>43</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

<sup>44</sup> HO, Report of FFM to Albania, October - November 2017, published February 2018, section 7, [url](#)

<sup>45</sup> WHO, 'Primary health care in Albania: Rapid Assessment', 2018, [url](#)

2.8.3 The United Nations Committee on the Rights of Persons with Disabilities noted in their Concluding Observations on the Initial Report of Albania in 2019:

‘The Committee is concerned about the insufficiency of accessible health-care services and facilities in the community for persons with disabilities, particularly those with intellectual disabilities and those requiring extensive support. It is particularly concerned about the lack of:

‘a) Information on the achievements of the National Health Strategy 2017–2021, the National Action Plan on Disability 2016–2020 and the Action Plan for the Development of Mental Health Services in Albania 2013–2022, particularly with regard to the sufficiency of programmes for early identification, for autistic persons and for persons with disabilities living in rural areas...’<sup>46</sup>

2.8.4 The BDA/MedCOI report, published in July 2017, stated:

‘Demographic developments have reshaped Albania. There are more people living in urban areas now than in rural areas. [...] Healthcare coverage is regulated per capita. A doctor should cover an area of 2,000 people in order for him/her be contracted by the HIF. Sometimes doctors move with the population they cater to. Not all demographic movements inside the country are registered, which makes it harder to adapt the healthcare system.’<sup>47</sup>

2.8.5 The BDA/MedCOI report, published in July 2017, stated: ‘According to the observations of the country director [of the World Health Organisation in Albania], mental healthcare and follow-up complications are well taken care off in Durrës. All the staff was trained to give psychological support to patient.’<sup>48</sup>

2.8.6 The BDA/MedCOI report, published in July 2017, stated: ‘The Hospital [Hygeia Hospital Tirana, a private facility] is not licenced to provide services for mental health illnesses and substance abuse disorders.’<sup>49</sup>

2.8.7 See [Funding](#) for further information about rural/urban disparities.

[Back to Contents](#)

Section 3 updated: 17 April 2020

### 3. Mental health conditions

#### 3.1 Introduction

3.1.1 The Albanian Centre for Population and Development reported in February 2016 on mental and behavioural disorders: ‘These disorders show a trend of growth and higher incidence among females. In 2010, mental and behavioural disorders accounted for 13.4% of the total disease load among women, compared with 8.8% in men.’<sup>50</sup> Albanian Daily News noted that a survey conducted by the Lancet commission on Global Mental Health in

<sup>46</sup> United Nations, ‘Committee on the Rights of Persons with Disabilities’, 14 October 2019, [url](#)

<sup>47</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

<sup>48</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

<sup>49</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

<sup>50</sup> Albanian Centre for Population and Development, ‘Shadow Report...’, February 2016, [url](#)

2019 had indicated that 13.8% of the population is affected by some form of mental ill-health<sup>51</sup>.

[Back to Contents](#)

### 3.2 Anxiety and Post Traumatic Stress Disorder (PTSD)

3.2.1 Albanian Daily News, an Albanian online news outlet, reported in January 2019: 'According to a survey conducted by "Lancet Commission on Global Mental Health", Albanians are ranked first in the region regarding anxiety disorders. In Albania anxiety disorders involved 3.56% of the population, as the survey made known.'<sup>52</sup>

3.2.2 WHO reported in 2017: Albania has a total of 104,925 cases of anxiety disorders which is 3.8% of the population<sup>53</sup>.

3.2.3 MedCOI reported in January 2020 that the following treatments were available at the University Medical Centre of Tirana Mother Teresa Rruga e Dibrës 372 Tirana which is a public facility:

- 'Psychiatric treatment of PTSD by means of cognitive behavioural therapy
- 'Psychiatric treatment of PTSD by means of EMDR [Eye Movement Desensitisation and Reprocessing, a type of psychotherapy]
- 'Psychiatric treatment of PTSD by means of narrative exposure therapy
- 'Outpatient treatment and follow up by a psychologist
- 'Inpatient treatment by a psychologist
- 'Outpatient treatment and follow up by a psychiatrist
- 'Inpatient treatment by a psychiatrist
- Psychiatric treatment: assisted living / care at home by psychiatric nurse.'<sup>54</sup>

3.2.4 The BDA/MedCOI report, published in July 2017, stated: 'Post Traumatic Stress Disorder (PTSD) is not treated in the psychiatric hospital ["Sadik Dinçi"] in Elbasan. The management believes that patients with this medical condition are better treated as outpatients in community centres in Tirana.'<sup>55</sup>

[Back to Contents](#)

### 3.3 Depression

3.3.1 WHO reported in 2017: Albania has a total of 131,048 cases of depressive disorders which is 4.8% of the population<sup>56</sup>.

3.3.2 MedCOI reported in January 2020 that the following treatments were available at the University Medical Centre of Tirana Mother Teresa Rruga e Dibrës 372 Tirana which is a public facility:

---

<sup>51</sup> Albanian Daily News, 'Anxiety Disorders- Albanians Ranked First in Region', 16 January 2019, [url](#)

<sup>52</sup> Albanian Daily News, 'Anxiety Disorders- Albanians Ranked First in Region', 16 January 2019, [url](#)

<sup>53</sup> WHO, 'Depression and Other Common Mental Disorders, Global Health Estimates', 2017, [url](#)

<sup>54</sup> MedCOI, 27 January 2020, last accessed: 30 January 2020

<sup>55</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

<sup>56</sup> WHO, 'Depression and Other Common Mental Disorders, Global Health Estimates', 2017, [url](#)

- ‘Psychiatric treatment by means of psychotherapy: e.g. cognitive behavioural therapy
- ‘Psychiatric treatment by means of psychotherapy: other than cognitive behavioural therapy
- ‘Psychiatric clinical treatment in a closed ward/setting (not necessarily forced admittance).
- ‘Psychiatric treatment in the form of family therapy.’<sup>57</sup>

3.3.3 In January 2020 MedCOI noted that at the Mental Health Centre Community, which is a public facility, near Nasi Pavilo and the American Embassy [in Tirana], psychiatric treatment in the form of group therapy (target group of similar patients) was available<sup>58</sup>.

[Back to Contents](#)

### 3.4 Suicidal behaviour

3.4.1 Macrotrends, a global organisation that monitors and reports on trends from across the world, noted the suicide rate in Albania from 2000-2020: ‘Suicide mortality rate is the number of suicide deaths in a year per 100,000 population... Albania suicide rate for 2016 was 6.30, a 5% increase from 2015.’<sup>59</sup>

3.4.2 MedCOI noted in January 2020 that the following treatments were available at the University Medical Centre of Tirana Mother Teresa Rruga e Dibrës 372 Tirana which is a public facility:

- ‘Psychiatric crisis intervention in case of suicide attempt including gastric lavage / stomach irrigation
- ‘Psychiatric crisis intervention in case of suicide attempt.’<sup>60</sup>

[Back to Contents](#)

### 3.5 Chronic psychotic disorders

3.5.1 Albanian Daily News noted that a survey conducted by the Lancet commission on Global Mental Health in 2019 had indicated that 0.67% of the population have bipolar disorders<sup>61</sup>.

3.5.2 MedCOI reported that the following treatments were available at the University Medical Centre of Tirana Mother Teresa Rruga e Dibrës 372 Tirana which is a public facility:

- ‘Outpatient treatment and follow up by a psychologist
- ‘Inpatient treatment by a psychologist
- ‘Outpatient treatment and follow up by a psychiatrist

<sup>57</sup> MedCOI, 27 January 2020, last accessed: 7 April 2020

<sup>58</sup> MedCOI, 27 January 2020, last accessed: 30 January 2020

<sup>59</sup> Macro Trends, ‘Albania Suicide Rate 2000-2020,’ undated, [url](#)

<sup>60</sup> MedCOI, 27 January 2020, last accessed: 30 January 2020

<sup>61</sup> Albanian Daily News, ‘Anxiety Disorders- Albanians Ranked First in Region’, 16 January 2019, [url](#)

- ‘Inpatient treatment by a psychiatrist.’<sup>62</sup>

[Back to Contents](#)

### 3.6 Alcohol and drug abuse

3.6.1 Albanian Daily News noted that a survey conducted by the Lancet commission on Global Mental Health in 2019 had indicated: ‘Alcohol dependence comprises about 1.67% of the population... drug dependence 0.66%.’<sup>63</sup>

3.6.2 In a MedCOI report dated February 2020 it was noted that the following treatment was available at Mother Teresa University Hospital, Tirana:

- ‘Psychiatric treatment of alcohol drug addiction in a specialized clinic (detox)
- ‘Psychiatric treatment of drug addiction in a specialized clinic (rehab)
- ‘Psychiatric treatment of drug addiction; inpatient/clinical care with methadone
- ‘Psychiatric treatment of drug addiction; outpatient care
- ‘Psychiatric treatment of drug addiction; outpatient care with methadone
- ‘Inpatient treatment by a psychiatrist
- ‘Outpatient treatment and follow up by a psychiatrist’<sup>64</sup>

3.6.3 See [Psychiatric hospitals](#) for further information for treatment of drug-addicted patients.

[Back to Contents](#)

Section 4 updated: 17 April 2020

## 4. Paediatric care

4.1.1 WHO reported in 2018:

‘Preventive care and patient and family education are part of the basic package of PHC [primary health care] services. The description of preventive services is very detailed for monitoring the growth and development of children, who require frequent control visits during the first three years. Controls are then required once per year between four and six years of age.

‘Dedicated paediatricians and nurses responsible only for preventive services perform these services, which are organized as parallel services. In an urban PHC centre in Fier, a paediatrician covers 6000 children and provides only preventive check-ups, vaccination, preventive visits at home and prevention and management of child maltreatment from violence and abuse. This type of parallel services prevents a holistic assessment of child development and the detection of health problems, since it does not build on

<sup>62</sup> MedCOI, 27 January 2020, last accessed: 30 January 2020

<sup>63</sup> Albanian Daily News, ‘Anxiety Disorders- Albanians Ranked First in Region’, 16 January 2019, [url](#)

<sup>64</sup> MedCOI, 12 February 2020, last accessed: 17 February 2020

a trustful and continuous relationship with parents and teachers given the high number of children per paediatrician.<sup>65</sup>

- 4.1.2 The European Society for Child and Adolescent Psychiatry (ESCAP) released an undated interview with Ariel Çomo (a Psychiatrist at Mother Teresa Hospital), in which Çomo stated: “[...] the health system in Albania has not been able to enrol a great many professionals in child psychiatry, nor in allied professions. Today we have fifteen working child psychiatrists, some of them also work with adults, and in the allied professions we have only three psychologists for adults and youth. This scarcity does not only go for mental health services – it is the same in other sciences and services.”<sup>66</sup>
- 4.1.3 ESCAP released an undated article where it noted: ‘The establishment of academic child and adolescent psychiatric training in Albania is developing slowly but steadily. With funds scraped together from scarce international collaborations, limited government funding and charity, a tiny group of students make use of the basic facilities.’<sup>67</sup>
- 4.1.4 MedCOI reported in December 2019 the following treatments as available at the Mother Teresa University Hospital, Tirana, which is a public facility:
- ‘Inpatient treatment by a paediatric physical therapist
  - ‘Outpatient treatment and follow up by a paediatric physical therapist
  - ‘Inpatient treatment by a child psychologist
  - ‘Outpatient treatment and follow up by a child psychologist
  - ‘Home assistance / care at home by a nurse.’<sup>68</sup>
- 4.1.5 MedCOI noted in December 2019 that the Public Facility Institute for Handicapped children, near village SOS Sauk, Tirana offered care for both combined mentally and physically handicapped persons and long-term, institutional around-the-clock care and paediatric care, such as special schooling for the mentally handicapped<sup>69</sup>.
- 4.1.6 MedCOI reported in November 2019 the following treatments as available at the Mother Teresa University Hospital, Tirana, which is a public facility:
- ‘Inpatient treatment by a paediatrician
  - ‘Outpatient treatment and follow up by a paediatrician
  - ‘Inpatient treatment by a paediatric psychiatrist
  - ‘Outpatient treatment and follow up by a paediatric psychiatrist.’<sup>70</sup>
- 4.1.7 For further information about the Mother Theresa University Hospital, see [Psychiatric hospitals](#). The section entitled [Alphabetical list of available medication](#) contains information about the drugs available at the hospital.

---

<sup>65</sup> WHO, ‘Primary health care in Albania: Rapid Assessment’, 2018, [url](#)

<sup>66</sup> ESCAP, ‘Ariel Çomo and the “deep gap” between available resources and the...’, undated, [url](#)

<sup>67</sup> ESCAP, “Mandatory Fun”, undated, [url](#)

<sup>68</sup> MedCOI, 11 December 2019, last accessed: 24 January 2020

<sup>69</sup> MedCOI, 11 December 2019, last accessed: 24 January 2020

<sup>70</sup> MedCOI, 5 November 2019, last accessed: 17 February 2020

## 5. Stigma

- 5.1.1 In March 2020 the Government of Albania released the 11th National Report on the implementation of the European Social Charter, noting: ‘The vision for the future [of mental health care in Albania] continues to be inspired by the philosophy of protection of the rights of persons with mental disabilities and special needs on mental health and the fight against exclusion and social discrimination through the establishment of an integrated network of mental health services for treatment, rehabilitation and social reintegration.’<sup>71</sup>
- 5.1.2 In the Human Rights Council Report of the Working Group on the Universal Periodic Review on Albania in September 2019 it was recommended by Portugal that Albania: ‘Respect the rights of persons with mental health conditions and psychosocial disabilities, in line with the Convention on the Rights of Persons with Disabilities, including by combating institutionalization, stigma, violence and overmedicalization, and by developing community-based and people centred mental health services that promote their inclusion in the community and respect their free and informed consent.’<sup>72</sup>
- 5.1.3 The Office for Democratic Institutions and Human Rights, which is a part of the Organization for Security and Co-operation, reported in June 2019: ‘Restrictions on voting rights of citizens, who are mentally incapacitated, even when supported by a court decision, are contrary to international obligations.’<sup>73</sup>
- 5.1.4 The United States Department of State’s Country Report on Human Rights Practices for 2019 stated: ‘Persons with mental and other disabilities were subject to societal discrimination and stigmatization.’<sup>74</sup>
- 5.1.5 The BDA/MedCOI report, published in July 2017, stated: ‘According to the ADRF [Albanian Disability Rights Foundation], people with mental health disabilities are the most discriminated group in Albanian society. They approximately make up 50% of all disabled people. [...] The stigma associated with mental illnesses and disabilities is still an important issue in Albanian society, although things have improved slightly compared to attitudes in the past.’<sup>75</sup>

---

<sup>71</sup> Council of Europe, ‘11th National Report on the implementation of...’, 6 March 2020, [url](#)

<sup>72</sup> Human Rights Council, ‘Report of the Working Group on the Universal...’, 3 July 2019, [url](#)

<sup>73</sup> Organisation for Security and Co-operation, ‘Republic of Albania...’, 30 June 2019, [url](#)

<sup>74</sup> USSD, ‘Country Report on Human Rights Practices, Albania, 2019’, 11 March 2020, [url](#)

<sup>75</sup> BDA/MedCOI, Fact Finding Mission Report July 2017, last accessed: 17 February 2020

## 6. Alphabetical list of available medication

### 6.1 Mother Teresa Hospital

6.1.1 MedCOI reported the following as available at the Mother Teresa hospital Pharmacy, in Bulevardi 'Zogu I' Tirana which is a public facility:

A : Aripiprazole depot injections<sup>76</sup>, Alfuzosin<sup>77</sup>, Alprazolam<sup>78</sup>

B: Bromperidol decanoate depot injection<sup>79</sup>

C: Chlorpromazine;<sup>80</sup> Clomipramine<sup>81</sup>, Clonazepam (i.v. injection for epileptic attacks<sup>82</sup>, Clonazepam rectiole / rectal suppository for epileptic attacks<sup>83</sup>, Clonidine<sup>84</sup>, Clorazepate<sup>85</sup>, Clonazepam<sup>86</sup>

D: Diazepam<sup>87</sup>, Diazepam ( rectiole / rectal suppository for epileptic attacks)<sup>88</sup>, Diazepam (i.v. injection for epileptic attacks)<sup>89</sup>, Doxazosin<sup>90</sup>, Disulfiram<sup>91</sup>

F: Fluoxetine<sup>92</sup>, Flurazepam<sup>93</sup>, Fluvoxamine<sup>94</sup>

G: Gabapentin<sup>95</sup>

H: Haloperidol decanoate depot injection<sup>96</sup>

L: Levetiracetam (i.v. injection)<sup>97</sup>, Levodopa<sup>98</sup>, Lorazepam<sup>99</sup>

M: Melatonin<sup>100</sup>, Methadone<sup>101</sup>, Midazolam ( i.m. injection for epileptic attacks)<sup>102</sup>, Midazolam ( nose spray for epileptic attacks)<sup>103</sup>, Midazolam (oromucosal solution for epileptic attacks)<sup>104</sup>

---

<sup>76</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>77</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>78</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>79</sup> MedCOI, 20 December 2019, last accessed: 24 January 2020

<sup>80</sup> MedCOI, 20 December 2019, last accessed: 24 January 2020

<sup>81</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>82</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>83</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>84</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>85</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>86</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>87</sup> MedCOI, 11 December 2019, last accessed: 24 January 2020

<sup>88</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>89</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>90</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>91</sup> MedCOI, 12 February 2020, last accessed: 17 February 2020

<sup>92</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>93</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>94</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>95</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>96</sup> MedCOI, 20 December 2019, last accessed: 24 January 2020

<sup>97</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>98</sup> MedCOI, 24 January 2019, last accessed: 24 January 2020

<sup>99</sup> MedCOI, 11 December 2019, last accessed: 24 January 2020

<sup>100</sup> MedCOI, 11 December 2019, last accessed: 24 January 2020

<sup>101</sup> MedCOI, 12 February 2020, last accessed: 17 February 2020

<sup>102</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>103</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>104</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

N: Naltrexone hydrochloride<sup>105</sup>, Nitrazepam<sup>106</sup>, Nortriptyline<sup>107</sup>  
O: Olanzapine<sup>108</sup>  
P: Paroxetine<sup>109</sup>, Prazosin<sup>110</sup>, Pregabalin<sup>111</sup>, Promethazine<sup>112</sup>  
Q: Quetiapine prolong (retard)<sup>113</sup>, Quetiapine<sup>114</sup>  
R: Risperidone depot injection<sup>115</sup>, Risperidone<sup>116</sup>  
S: Sertraline<sup>117</sup>  
T: Temazepam<sup>118</sup>, Terazosin<sup>119</sup>, Topiramate<sup>120</sup>  
V: Valerian extract<sup>121</sup>, Valproic acid OR valproate OR Depakine® (i.v. injection)<sup>122</sup>  
Z: Zolpidem<sup>123</sup>, Zopiclone<sup>124</sup>

6.1.2 For further information about the Mother Theresa University Hospital, see [Psychiatric hospitals](#) and [Paediatric care](#).

[Back to Contents](#)

## 6.2 Florifarma pharmacy

6.2.1 MedCOI reported the following as available at the Florifarma pharmacy in Bulevardi 'Zogu I' Tirana which is a private facility:

A: Aripiprazole<sup>125</sup>

B: Biperidene<sup>126</sup>, Bromperidol<sup>127</sup>

---

<sup>105</sup> MedCOI, 12 February 2020, last accessed: 17 February 2020

<sup>106</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>107</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>108</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>109</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>110</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>111</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>112</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>113</sup> MedCOI, 20 August 2019, last accessed: 24 January 2020

<sup>114</sup> MedCOI, 20 August 2019, last accessed: 24 January 2020

<sup>115</sup> MedCOI, 20 December 2019, last accessed: 24 January 2020

<sup>116</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>117</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>118</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>119</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>120</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>121</sup> MedCOI, 13 December 2019, last accessed: 24 January 2020

<sup>122</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>123</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>124</sup> MedCOI, 27 January 2020, last accessed: 17 February 2020

<sup>125</sup> MedCOI, 20 December 2019, last accessed: 24 January 2020

<sup>126</sup> MedCOI, 24 January 2019, last accessed: 24 January 2020

<sup>127</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

F: Flupentixol<sup>128</sup>, Flupentixol decanoate depot injection<sup>129</sup>, Fluphenazine<sup>130</sup>,  
Fluphenazine decanoate depot injection<sup>131</sup>

H: Haloperidol<sup>132</sup>

L: Levomepromazine<sup>133</sup>, Levomepromazine<sup>134</sup>, Lithium carbonate<sup>135</sup>,  
Lurasidone<sup>136</sup>

O: Olanzapine pamoate depot injection<sup>137</sup>, Oxazepam<sup>138</sup>

P: Paliperidone<sup>139</sup>, Paliperidone palmitate depot injection<sup>140</sup>, Penfluridol<sup>141</sup>,  
Perphenazine<sup>142</sup>, Perphenazine decanoate depot injection<sup>143</sup>, Pimozide<sup>144</sup>,  
Pipamperone<sup>145</sup>

Q: Quetiapine depot injection<sup>146</sup>

T: Thioridazine<sup>147</sup>, Trihexyphenidyl<sup>148</sup>

Z: Zuclopenthixol<sup>149</sup>, Zuclopenthixol decanoate depot injection<sup>150</sup>

[Back to Contents](#)

---

<sup>128</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>129</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>130</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>131</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>132</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>133</sup> MedCOI, 23 March 2018, last accessed: 17 February 2020

<sup>134</sup> MedCOI, 30 March 2018, last accessed: 17 February 2020

<sup>135</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>136</sup> MedCOI, 20 August 2019, last accessed: 24 January 2020

<sup>137</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>138</sup> MedCOI, 30 March 2018, last accessed: 17 February 2020

<sup>139</sup> MedCOI, 20 August 2019, last accessed: 24 January 2020

<sup>140</sup> MedCOI, 20 December 2019, last accessed: 24 January 2020

<sup>141</sup> MedCOI, 20 December 2019, last accessed: 24 January 2020

<sup>142</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>143</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>144</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>145</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>146</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>147</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>148</sup> MedCOI, 24 January 2019, last accessed: 24 January 2020

<sup>149</sup> MedCOI, 26 March 2020, last accessed: 2 April 2020

<sup>150</sup> MedCOI, 20 December 2019, last accessed: 24 January 2020

# Terms of Reference

A 'Terms of Reference' (ToR) is a broad outline of what the CPIN seeks to cover. They form the basis for the [country information section](#). The Home Office's Country Policy and Information Team uses some standardised ToRs, depending on the subject, and these are then adapted depending on the country concerned.

For this particular CPIN, the following topics were identified prior to drafting as relevant and on which research was undertaken:

- MedCOI
  - What is it
  - Availability/accessibility information
- Overview of health care system
  - Funding – is it free to all?
  - Number of psychiatric hospitals/beds
  - General hospitals with psychiatric wings
  - Community care
  - Follow up care
  - Law and policy on mental health care
  - Government initiatives
- Medical conditions: Mental health
  - PTSD
  - Depression
  - Suicidal behaviour
  - Chronic psychotic disorders: schizophrenia, bipolar disorder
  - Alcohol/drug abuse
- Treatment
- Paediatric care
- Cost of drugs/treatment
- Availability of drugs/treatment
- Accessibility of drugs/treatment (including regional and urban/rural variation)
- Stigma
- Alphabetical list of available medication

[Back to Contents](#)

# Bibliography

## Sources cited

Albanian Centre for Population and Development, 'Shadow Report, Healthcare Field-Case of Albania', February 2016,

[https://tbinternet.ohchr.org/Treaties/CEDAW/Shared%20Documents/ALB/INT\\_CEDAW\\_NGO\\_ALB\\_23255\\_E.pdf](https://tbinternet.ohchr.org/Treaties/CEDAW/Shared%20Documents/ALB/INT_CEDAW_NGO_ALB_23255_E.pdf), last accessed: 17 February 2020

Albanian Daily News, 'Anxiety Disorders- Albanians Ranked First in Region', 16 January 2019, <https://www.albaniandailynews.com/index.php?idm=27226&mod=2>, last accessed: 1 April 2020

Balkan Insight, 'Albania Held Mentally Ill Man in Prison Illegally', 21 January 2020, <https://balkaninsight.com/2020/01/21/albania-found-guilty-for-maltreatment-of-mentally-ill-claimant-ehcr/>, last accessed: 1 April 2020

Council of Europe, '11th National Report on the implementation of the European Social Charter', 6 March 2020, <https://rm.coe.int/rap-cha-alb-11-2020/16809cd971>, last accessed: 1 April 2020

European Society for Child and Adolescent Psychiatry,

"Mandatory Fun", undated, <https://www.escap.eu/policy/albania/mandatory-fun>, last accessed: 2 April 2020

'Ariel Çomo and the "deep gap" between available resources and the children's needs', undated, <https://www.escap.eu/policy/albania/>, last accessed: 1 April 2020

'Mental Health services in Albania and in the countries around - comparative reflections on Workforce,' Ariel Çomo, 2015, [https://www.escap.eu/bestanden/Policy/artikulli\\_ariel\\_comparing\\_workforce.pdf](https://www.escap.eu/bestanden/Policy/artikulli_ariel_comparing_workforce.pdf), last accessed: 17 April 2020

Home Office, Report of Fact-Finding Mission, Albania, 31 October to 7 November 2017, published February 2018, [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/681071/Home\\_Office\\_FF\\_M\\_Report\\_-\\_Albania.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/681071/Home_Office_FF_M_Report_-_Albania.pdf), last accessed: 17 April 2020

Human Rights Council, 'Report of the Working Group on the Universal Periodic Review, Albania', 3 July 2019, <https://digitallibrary.un.org/record/3823788?ln=en>, last accessed: 1 April 2020

International Trade Association,

'About us', <https://www.trade.gov/about-us>, last accessed: 1 April 2020

'Healthcare Resource Guide: Albania', updated October 2019, [https://2016.export.gov/industry/health/healthcareresourceguide/eg\\_main\\_116142.asp](https://2016.export.gov/industry/health/healthcareresourceguide/eg_main_116142.asp), last accessed: 1 April 2020

Macro Trends, 'Albania Suicide Rate 2000-2020,' undated, <https://www.macrotrends.net/countries/ALB/albania/suicide-rate>, last accessed: 1 April 2020

MedCOI,

26 March 2020, last accessed: 2 April 2020

12 February 2020, last accessed: 17 February 2020

27 January 2020, last accessed: 17 February 2020

20 December 2019, last accessed: 24 January 2020

13 December 2019, last accessed: 24 January 2020

11 December 2019, last accessed: 24 January 2020

5 November 2019, last accessed: 17 February 2020

24 January 2019, last accessed: 24 January 2020

21 January 2019, last accessed: 17 February 2020

20 August 2019, last accessed: 24 January 2020

30 March 2018, last accessed: 17 February 2020

23 March 2018, last accessed: 17 February 2020

Fact Finding Mission Report, July 2017, last accessed: 17 February 2020

Organisation for Security and Co-operation, 'Republic of Albania, Local Elections', 30 June 2019, <https://www.osce.org/odihr/elections/albania/429230?download=true>, last accessed: 2 April 2020

United Nations,

'Programme of Cooperation for Sustainable Development 2017-2021 Progress Report 2018', May 2019, [https://www.un.org.al/sites/default/files/GoA-UN-Progress%20Report%202018\\_1.pdf](https://www.un.org.al/sites/default/files/GoA-UN-Progress%20Report%202018_1.pdf), last accessed: 2 April 2020

'Convention on the Rights of Persons with Disabilities', 14 October 2019, <http://docstore.ohchr.org/SelfServices/FilesHandler.ashx?enc=6QkG1d%2FPRIcAqhKb7yhspdJq2SN0FynLS%2BUiWUaqofjmf0rHJ5MLWvzpC5ePiublk65eOKd%2FNGE6rLwV%2B8UH2qHAw2phpnAZHHFMFuZbruUZnlNmuu8vWWy5fRMtquz>, last accessed: 1 April 2020

United States Department of State, 'Country Reports on Human Rights Practices 2019,' Albania, 11 March 2020, <https://www.state.gov/reports/2019-country-reports-on-human-rights-practices/albania/>, last accessed: 1 April 2020

Visit Tirana, 'Mother Teresa Hospital', undated, <http://www.visit-tirana.com/things-to-do/hospitals/184/mother-teresa-hospital>, last accessed: 24 January 2020

World Health Organisation,

'Depression and Other Common Mental Disorders, Global Health Estimates', 2017, <https://apps.who.int/iris/bitstream/handle/10665/254610/WHO-MSD-MER-2017.2-eng.pdf>, last accessed: 1 April 2020

'Primary health care in Albania: Rapid Assessment', 2018, [www.euro.who.int/\\_data/assets/pdf\\_file/0011/373718/alb-phc-ra-eng.pdf](http://www.euro.who.int/_data/assets/pdf_file/0011/373718/alb-phc-ra-eng.pdf), last accessed: 1 April 2020

'Plani i Veprimit per Zhvillimin e Sherbimeve te Shendetit Mendor ne Shqiperi 2013 - 2022 (Action Plan for the Development of Mental Health Services in Albania 2013 – 2022)', undated, <https://www.mindbank.info/item/3098>, last accessed: 1 April 2020

'Mental Health Atlas 2017,' Member State Profile, Albania,  
[https://www.who.int/mental\\_health/evidence/atlas/profiles-2017/ALB.pdf?ua=1](https://www.who.int/mental_health/evidence/atlas/profiles-2017/ALB.pdf?ua=1), last accessed: 16 April 2020

[Back to Contents](#)

### Sources consulted but not cited

Albanian Helsinki Committee, 'Regional Monitoring Report', 2015,  
<https://ahc.org.al/wp-content/uploads/2016/12/REGIONAL-MONITORING-REPORT.pdf>, last accessed: 31 March 2020

Austrian Economics Centre, "'Free" Health Care Is the Wrong Path for Albania', undated, <https://www.austriancenter.com/free-health-care-albania/>, last accessed: 1 April 2020

Ceic Data, 'Albania AL: Suicide Mortality Rate: Female', 2016,  
<https://www.ceicdata.com/en/albania/health-statistics/al-suicide-mortality-rate-female>, last accessed: 1 April 2020

Conorzio Per Valutazioni Biologiche E Farmacologiche, 'University Hospital Centre "Mother Teresa"', undated, <https://www.cvbf.net/university-hospital-center-mother-teresa/>, last accessed: 17 February 2020

Embassy of The United States in Albania, 'List of Medical Facilities', August 2016,  
<https://photos.state.gov/libraries/albania/388734/documents/list-of-clinics.pdf>, last accessed: 1 April 2020

European Journal of Research in Social Sciences, 'Problems and Challenges of Mental Health Professional in Albania during the process of Decentralization of Mental Health Services', 2016, <https://www.idpublications.org/wp-content/uploads/2016/05/Full-Paper-PROBLEMS-AND-CHALLENGES-OF-MENTAL-HEALTH-PROFESSIONAL-IN-ALBANIA-DURING-THE-PROCESS.pdf>, last accessed: 1 April 2020

O GOCË, 'It took them 20 years to put a name to mental health illness in Albania', undated, <https://o-goce.com/it-took-them-10-years-to-put-a-name-to-the-illness-mental-health-in-albania/>, last accessed: 1 April 2020

Privacy Shield, 'Albania- Medical Equipment' undated, <https://www.privacyshield.gov/article?id=Albania-Medical-Equipment>, last accessed: 1 April 2020

The Global Economy, 'Albania Suicides', 2016,  
<https://www.theglobaleconomy.com/Albania/suicides/>, last accessed: 31 March 2020

The Lancet, 'Past, present, and future of global health financing: a review of development assistance, government, out-of-pocket, and other private spending on health for 195 countries, 1995–2050', 25 April 2019, [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(19\)30841-4/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(19)30841-4/fulltext), last accessed: 2 April 2020

World Bank, 'Suicide Mortality Rate (per 100,00 Population) – Albania', 2016,  
<https://data.worldbank.org/indicator/SH.STA.SUIC.P5?end=2016&locations=AL&start=2013&vie%3%AB=chart>, last accessed: 31 March 2020

World Health Organisation,

'Mental Health Action Plan 2013-2020', 2013,  
[https://apps.who.int/iris/bitstream/handle/10665/89966/9789241506021\\_eng.pdf?sequence=1](https://apps.who.int/iris/bitstream/handle/10665/89966/9789241506021_eng.pdf?sequence=1), last accessed: 31 March 2020

'Policies and Practices for Mental Health in Europe', 2008,  
[http://www.euro.who.int/\\_data/assets/pdf\\_file/0006/96450/E91732.pdf](http://www.euro.who.int/_data/assets/pdf_file/0006/96450/E91732.pdf), last  
accessed: 2 April 2020

'Suicide prevention, Albania', 2017,  
[https://www.who.int/mental\\_health/suicide-prevention/country-  
profiles/ALB.pdf?ua=1](https://www.who.int/mental_health/suicide-prevention/country-profiles/ALB.pdf?ua=1), last accessed: 31 March 2020

[Back to Contents](#)

# Version control

## Clearance

Below is information on when this note was cleared:

- version **1.0**
- valid from **30 April 2020**

## Changes from last version of this note

This is the first version of the Albania: Mental healthcare CPIN.

[Back to Contents](#)