SEXUAL AND REPRODUCTIVE HEALTH WITH THE MAIN FOCUS ON FAMILY PLANNING ALBANIA
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DEFINITION OF THE PROBLEM IN RELATION TO HEALTH AND HUMAN PROGRESS

Family planning is vital for a sustainable development of every society. Hence, family planning programs including modern contraceptive methods support couples and individuals for realizing and exercising their basic right to decide freely and responsibly if, when, and how many children to have. The vast international evidence indicates that endorsement of effective family planning programs has resulted in substantial improvements in health-related outcomes (such as reduced maternal mortality, infant mortality and child mortality), as well as improvements in schooling and educational attainment and economic opportunities, especially for women.

During the socialist rule, modern family planning methods were outlawed in Albania. Ideological reasons aside, a common conviction was that attempts to interfere with procreation would cause serious health problems or even permanent infertility.

Hence, family planning services were introduced in Albania after 1990, following the breakdown of the communist regime and the transition towards a market-oriented system. The first step in this regard for the Albanian government was to give up on its pronatalist orientation, which was strongly promoted during socialist era for ideological reasons. Thus, after the collapse of the communist regime in 1990, the grounds for legal abortion were broadened and, by mid-1991, abortion was available upon request.

In 1992, the Albanian government started working closely with the United Nations Population Fund (UNFPA) to train physicians, midwives and nurses in family planning methods. Furthermore, importantly, in 1992, the government established a family planning service offering all methods of contraception for the general population.
However, integrated reproductive health services have been established in Albania only after the 1994 Cairo International Conference on Population and Development (ICPD).

LOCAL SITUATION, SPECIFIC INFORMATION ABOUT ALBANIA, COMPARISON TO GLOBAL AND REGIONAL SITUATION

Selected key facts in relation to family planning in Albania are summarized below:

- Overall population of Albania: about 2,87 million inhabitants (INSTAT, 2018)
- Women of reproductive age (15-49 years): 693,111 (INSTAT, 2016)
- Fertility rate: 1.54 (INSTAT, 2017); 1.8 (ADHS 2017-18)
- Abortion rate: 8.0 abortions per 1000 women of reproductive age (15-49 years) [IPH, 2018]
- Ratio abortions/births: 191.2 abortions per 1000 live births (IPH, 2018)
- Contraceptive prevalence rate: 4% (ADHS 2017-18)
- Infant mortality rate: 8.9 deaths per 1000 live births (INSTAT, 2018)
- Child (0-5 years) mortality rate: 10.8 deaths per 1000 live births (INSTAT, 2018)
- Maternal mortality ratio: 9.7 deaths per 100,000 women (INSTAT, 2017)

Regarding regional comparisons, the Department of Economic and Social Affairs, Population Division of the United Nations, has reported in 2017 that traditional method use was high in many countries of Eastern and Southern Europe, where 15 countries had traditional methods use above 10% in 2017, with the highest levels observed in Albania (42%), followed by Bosnia and Herzegovina, Serbia and Macedonia (all about 30%). Hence, on the face of it, the use of modern contraceptive methods in Albania is probably the lowest in the region.

According to the United Nations estimates, worldwide, in 2017, 63% of women of reproductive age (15-49 years) were using some form of contraception. Contraceptive use in 2017 was above 70% in Europe, Latin America and the Caribbean, and Northern America, but below 25% in Middle and Western Africa.

The United Nations estimate for the contraceptive prevalence (any method) in Albania for the year 2017 was 63.1%, which resembles the global estimate, while being below the European average.

INTERVENTIONS, ACTIONS, SYSTEMATIC DEVELOPMENTS 9TIMELINE AND ANALYSIS

According to a 1997 regulatory act, reproductive health care and basic family planning services are provided at the primary health care level, as well as in maternity hospitals thorough Albania. The overall goals of the reproductive health care services are to offer good quality, reproductive health care services to the Albanian population; to improve the health
status of women during their reproductive age, especially during childbearing and delivery; to improve the health status of fetuses, newborns, infants and children up to age five; and to improve the sexual health of adolescents and adults.

The Albanian government has envisaged a human rights approach to the provision of reproductive health services. From this point of view, since 1992, a special Decree of the Council of Ministers envisaged that family planning should be considered as a basic human right from which all citizens should be able to benefit of their own free will. According to this Decree, the Council of Ministers endorsed specific activities in family planning including prophylaxis, the right of couples to decide on the number of their children, spacing of births, treatment of sterility, control and treatment of sexually transmissible infections such as AIDS and syphilis, and provision of information on sexual and reproductive health matters. In addition, gender equality and women’s right to health are strongly promoted by the Albanian government as particularly important cross-cutting themes.

Currently, in each district of the country, there are gynecologists and midwives who provide the family planning services. Also, in each maternity hospital a part-time family planning center has also one specialized obstetrician-gynecologist and a midwife. Importantly, family planning services are integrated into the daily operations and activities of all consulting centers for mothers and children in Albania.

Since 2010, the Albanian government has entirely funded the contraceptive procurement for the public sector. At present, the Ministry of Health and Social Protection funds the contraceptives procurement, customs, transport and storage system, whereas the family planning consultation is covered by the insurance service employing a per-capita system.

Since 1996, a Logistic Management Information System was established with the support of UNFPA and USAID providing accurate and good quality data regarding the distribution of products in the public system. In 2002, this system was introduced at a national level and was computerized at a district level (including all 36 districts of Albania). In 2006, the Institute of Public Health assumed the responsibility of managing this Logistic Management Information System, including the storage and distribution of contraceptives in all districts of the country. Yet, notwithstanding the importance of this logistic system, a realistic estimation of population trends in modern contraceptive prevalence rates cannot be made.

Furthermore, under the 2003 National Contraceptive Security Strategy, the Albanian government took over the cost of procuring public sector contraceptives in a stepwise manner, whereas the donors’ contribution decreased likewise.

The main documents endorsing the reproductive health care and family planning services in Albania are listed below:

- Strategic Document and Action Plan for Sexual and Reproductive Health for the period 2017-2021
- Law on “Reproductive Health”, No. 8876, Date: 04-04-2002
- Law on “Pregnancy Interruption”, No. 8045, Date: 07.12.1995
- The National Contraceptive Security Strategy 2017-2021
MEASURED OUTCOMES, CHANGES OBSERVED, PROGRESS

Currently, the main modern contraceptive methods employed in the Albanian context include pills, condoms and injections. In addition, according to the new National Contraceptive Security Strategy 2017-2021, in the year 2019 there were also introduced the emergency contraceptives in the basic package of family planning services.

At present, contraceptives are available in Albania from the following three sources: free-of-charge (provided by the government); at subsidized prices (provided from social marketing programs); and at market prices (provided from the private sector).

According to the official information from the Ministry of Health and Social Protection, free of charge contraceptives are available in 426 public sector family planning clinics in all districts of the country. However, this represents a slight decrease compared to the year 2011, where family planning services were provided in 431 women consultancy centers, maternity hospitals, and health centers at commune level.

At the same time, the available information from the national Contraceptive Logistics Management and Information System indicates that the number of contraceptive consultations in the public sector has similarly decreased since 2011, as well as the number of users and the couple-years of protection.

Essentially, however, there is evidence of a paradox in the Albanian context which, on the face of it, is characterized by a low contraceptive prevalence rate, but also a relatively low abortion rate.

The main measured changes in family planning indicators observed in Albania in the past few decades include a decrease in fertility rate and abortion rate, but a contradictory trend related to the modern contraceptive rate.

The changes observed in fertility rates in Albania in the past two decades are presented below (Figure 1).
The total fertility rate is 1.8 children per woman (ADHS 2017-18), which has been increased from 1.6 children per woman in 2008-09. According to the recent ADHS 2017-18, the median birth interval increased to 50.7 months from 47.0 months in 2008-09.

Furthermore, the median age at first birth among women aged 25-49 years in Albania is 23.8. An issue of concern relates to the percentage of women aged 15-19 years who have begun childbearing, which has increased to 3.5% in 2017-18 from 2.8% in 2008-09.

According to ADHS 2017-18, of all births in the past 5 years and current pregnancies in Albania, 89% were wanted at the time of conception, 4% were mistimed, and 7% were not wanted (Figure 2). Conversely, the total wanted fertility rate is 1.6, which is lower than the actual 1.8 total fertility rate. Nevertheless, on average, women in Albania want almost the same number of children as they have (ADHS 2017-18).
Conversely, the changes observed in the abortion rates in Albania in the past decade (since the establishment of the Surveillance System of Abortions at the national Institute of Public Health in Tirana) are presented in Figure 3.

![Figure 3. Abortion rate (per 1000 women aged 15-49 years) in Albania for the period 2010-2018 (IPH, 2019)](chart)

There is evidence of a gradual decrease in the abortion rate from 2010 to 2017, followed by a slight increase in the year 2018. Of note, the recent ADHS 2017-18 reported that 9.2% of all pregnancies in Albania (involving women aged 15-49 years) resulted in abortions.

On the other hand, the changes observed in the prevalence of modern contraceptive methods in Albania in the past two decades are presented in Figure 4.

![Figure 4. Prevalence of modern contraceptive methods in Albania for the period 2002-2018](chart)

Apparently, the use of modern contraception among currently married women decreased from 11% in 2008-09 to 4% in 2017-18. This finding is peculiar given the fact that knowledge of family planning is nearly universal in Albania, with 97% of all women and 96% of all men age 15-49 knowing at least one method (ADHS 2017-18). Among women
who currently use a modern method of contraception, 56% of them obtain it from the private sector (ADHS 2017-18). The main reason for discontinuation of contraception, according to the fairly recent ADHS 2017-18, is the desire to become pregnant (42%).

The total demand for family planning among currently married women decreased from 82% in 2008-09 to 61% in 2017-18. Only 6% of demand is satisfied by modern methods (ADHS 2017-18). As for the unmet need for family planning, according to the ADHS 2017-18, 15% of currently married women and 11% of all women have an unmet need for family planning.

STAKEHOLDERS, ORGANISATIONAL AND POLITICAL LANDSCAPE

In Albania, since 1997, all family planning services offered free-of-charge in the public sector are integrated into the health system at all three levels (primary, secondary and tertiary level). In the public system, these services are provided in 430 family planning centers including women consultancy centers, maternity hospitals and health centers at commune level. In urban areas, family planning services, besides women consultancy centers, are provided also in maternities, district and regional hospitals, and university hospitals (tertiary level – in Tirana only). Conversely, in rural areas, family planning services are provided in health centers and health posts.

The majority of potential donors in the field of family planning have phased out from Albania. In addition, social marketing is facing out a lot of challenges due to financial instability and the private commercial sector is less interested to invest in family planning programs.

Under these circumstances, the Ministry of Health, with the support of UNFPA, has begun efforts to adopt the concept of “Total Market Approach” for contraceptive security.

The private not-for-profit sector is represented by social marketing and NGOs. The only social marketing institution operating in Albania is NESMARK.

The Albanian Center for Population and Development (ACPD) is the major NGO providing family planning and reproductive health services and distributing contraceptives.

WAY FORWARD

The main family planning challenges which need to be tackled in the near future in Albania include the following issues:

- The particularly low prevalence of modern contraceptive methods in the Albanian population is an issue of concern. This disturbing finding is confirmed by several studies, including the fairly recent ADHS 2017-18. As a matter of fact, the low rate of contraceptive use contradicts the pretty high level of knowledge about modern contraceptive methods which is estimated around 95%-98% in the Albanian population.

- Another issue of concern includes the lack of participation of Albanian men in the counseling services related to the use of modern contraceptive methods.
Furthermore, the *access to reproductive health services for adolescents is not adequate*. Hence, there is an urgent need to design and tailor appropriate services for this age-group, considering their unique features, needs and demands for reproductive health services.

In addition, there is a *need for strengthening of the health information system* and integration of the data pertinent to different dimensions, e.g., contraceptive use and sexually transmitted infections, or abortion rates – all these disaggregated by different age-groups and socioeconomic strata.

There is a call for strengthening the *public-private partnerships* in the supply and delivery of family planning commodities and services in Albania.
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