

A black and white photograph of a classical building, likely a church or government building, featuring a prominent clock tower with a large clock face. The building has ornate architectural details, including columns and a dome.

# Advancing Integrated Primary Health Care in Albania

*A Model for Sustainable and People-Centered Systems*

# Objectives

As Albania works toward achieving universal health coverage and building a more resilient health system, our study focused on understanding how its primary health care system has evolved. We set out with four key objectives:

- Evaluate Albania's efforts to reorganize and strengthen primary health care
- (PHC) Assess the integration of health and social care within PHC structures
- Benchmark Albania's progress against the WHO Operational Framework for Primary Health Care
- Identify gaps and opportunities for sustainable PHC transformation

# Key Facts & Figures: Albania's PHC Landscape

## Main Points:

**3812** total PHC institutions

- **412** Health Centers
- **3400+** Health Posts (rural network)

**33%** of Health Centers (136/412) have only 1 GP

*24 Health Centers lack a doctor, served remotely*

**906** Health Posts serve fewer than **199** residents

**817** Health Posts serve between 200–500 residents

*70% of Health Centers report no psychologist or social worker*

Digital e-referral system piloted but no national EHR at PHC level

Average doctor-to-population ratio:

1 doctor per **1859** inhabitants

Average nurse-to-population ratio:

1 nurse per **470** inhabitants

# Methodology

## Applied a mixed-methods approach

- Policy analysis of national health strategies and legal frameworks
- Stakeholder interviews with health managers, policymakers, and healthcare workers
- Data mapping of healthcare infrastructure, workforce distribution, and service utilization
- Case studies of Family Medicine Health Centers, Health Centers, and Social Health Centers
- Benchmarking Albania's reforms with WHO standards for people-centered health systems



# RESULTS

# Emerging Innovations & Challenges

## Early Innovations and Remaining Challenges

- Digital health systems piloted: e-referrals, early electronic health records
- Workforce imbalances persist, especially in rural areas
- Underutilization of nurses in community care and preventive services
- Financial sustainability and clear performance-based funding models still evolving

Service Integration	Digital Health Innovation (moderate progress)	Workforce Capacity (low progress)	Governance	Financial Sustainability
• (high progress)	• (moderate progress)	• (low progress)	• (moderate progress)	• (low progress)

# System Redesign & Service Integration

## Primary Health Care System Redesign in Albania

1. Albania has reorganized PHC into a tiered network:
  - Family Medicine Health Centers
  - Health Centers
  - Health Posts
2. Social Health Centers introduced to provide integrated health and social services for vulnerable populations

# Discussion & Impact

- Albania offers a real-world example of PHC transformation in a resource-constrained setting
- Integration of health and social services shows potential for improving equity and accessibility
- Successes linked to strong policy alignment, early community engagement, and gradual adoption of technology
- Key challenges remain: workforce capacity, rural service access, and full implementation of digital infrastructure
- Albania's experience provides evidence-based recommendations for other countries pursuing PHC reforms to achieve universal health coverage



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# THANK YOU



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