THE RIGHT TO INCLUSIVE EDUCATION FOR CHILDREN WITH DISABILITIES

Analysis of the history of educational development of children with disabilities in Albania during 1945 -2011

Assessing factors that contribute to the practical implementation of inclusive education

Mars 2012
Study report

Analysis of the history of educational development of children with disabilities in Albania during 1945 - 2011
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### List of Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tr>
<td>D</td>
<td>Disability</td>
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<tr>
<td>NP</td>
<td>Normative Provisions for Pre-University Education</td>
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<td>AFDR</td>
<td>Albanian Foundation for Disability Rights.</td>
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<td>ISI</td>
<td>Institute of Social Insurance</td>
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<td>CRPD</td>
<td>Convention on the Rights of Persons with Disabilities</td>
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<td>MCDWA</td>
<td>Medical Commission of Designation of Working Ability</td>
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<td>MES</td>
<td>Ministry of Education and Science</td>
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<td>MH</td>
<td>Ministry of Health</td>
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<tr>
<td>MLSAEO</td>
<td>Ministry of Labor, Social Affairs and Equal Opportunities</td>
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<tr>
<td>PWD</td>
<td>Person with Disabilities</td>
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<tr>
<td>MMR School</td>
<td>School for Children with Mild Mental Retardation</td>
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<td>WHO</td>
<td>World Health Organization</td>
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DEFINITIONS AND BASIC CONCEPTS

Learning: the process of acquiring knowledge throughout life.
Education: formal academic education, which prepares new generations to become part of the development process.
Involvement: the process of joining a group.
Inclusion: the attempt to include and accept people in all aspects in order to participate in all activities with the rest.
Disability: long-term cognitive limitations, motor and emotional, that comes as a result of a combination of physical, mental and intellectual impairments, with environmental conditions in which the impaired person lives.
Integration: the process of physical involvement of people who have been excluded from society due to the exclusion that society imposed on them because of their differences from the majority.
Children with Disabilities: those whose physical injuries (including the sensory ones), or mental, intellectual or emotional, combined with external environmental factors, create difficulties for them in performing independently daily life functions for a long period of time.
Special needs: the needs arising as a result of the combination of living conditions and individual qualities.
Students with special needs: those with more specific needs than other students in carrying out daily life and learning functions, and who need support to carry them out as well as possible.
School of basic education, regular school: schools which most students attend.
Special school: schools for education of children with disabilities according to the type of impairment.
Inclusive education: one in which all students, regardless of needs, enjoy the same opportunities for education and socialization.
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PREFACE

Special Education in Albania has its own history of development. The institutionalized treatment of children with disabilities began as early as 1963 with the establishment of the Institute for Blind and Deaf Students. Later on, after 1970s in the cities where there were psychiatric hospitals, the first schools for students with mild mental retardation were opened. It should be emphasized that the state policy of treating children with disabilities during communism period in Albania, was not a social policy in its nature, but imbued with the ideology and philosophy of that time, which encouraged exclusion and segregation of this group of individuals. Establishment of special education and care institutions for children with disabilities, was an expression of the old model of centralized government, in contrast to the political and administrative decentralization, which the Albanian state underwent after 1990s.

Individuals with disabilities were regarded as mentally handicapped, unable to care for themselves and others, as a burden to their family and society, as nugatory. Using the medical approach, rehabilitation professionals identified individuals with disabilities, based on the impairment they had. Their impairment came to be seen as the most notable feature of their identity (often the only one) for people with disabilities, who instead of being called on their name, were instead called on their diagnosis. Prior to 1990s, children/individuals with disabilities were labeled with pejorative and disparaging terms, such as feebleminded, idiot, fool, sick, handicapped, mentally ill, insane, deficient and so on. The use of these terms stemmed mostly from the medical model of disability treatment, because even the commission of designation of the disability, operated by these definitions. Most frequent diagnosis by medical boards were: deficiency of a high degree, imbecile, idiot and the like. Consequently, persons with disabilities, defined as “unable” for doing anything, were set apart to be educated in special schools and were enrolled in residential institutions, away from the regular school system and community. The process of disability assessment, was based entirely on the medical model. Needs of persons with disabilities, have traditionally been treated separately and in specialized services, which has led to their exclusion from society.

Multifaceted democratic transformations that occurred in our country after 1990s influenced also the area of education and undoubtedly special education as well. Thanks to the opening of the country, mainly towards western countries of strong democracy, new notions and concepts were introduced in treatment and importance that should be placed to special education. Thus in the new legal documentation that was drafted, the law “On Pre-University Education System,” No. 7592, dt. 06.21.1995 of the National Parliament, as well as Normative Provisions for public schools, for the first time, special education was given a chapter of its own. Major changes that occurred in Albania in recent years, were reflected also in the policy and legal framework that supported children with disabilities and their families. Persons with disabilities currently comprise the largest group of individuals in need under the Albanian legislation on the social protection system. Traditionally, these individuals are supported in different forms by society and the state.

Albanian Government is engaged in the processing of the general guidelines, which ensure in a national level the rights of persons with disabilities. Part of this process is also the reform of deinstitutionalization and decentralization of services. The national strategy based on Law No. 9355 dt. 03.10.2005 “On Assistance and Social Services” is provided:
• Building of operational networks in the common ground of social entities operating in the same field.
• Evaluation of services depending on their social integration, meeting of needs.
• Promotion of autonomy depending on the age of the person with disabilities.
• The granting of information regarding the services.
• The right to these guaranteed services.
• Equality of treatment from individuals and organizations, and the right to complaining.

The truth is that the methods and means necessary to treat and educate children with disabilities, are in place. We note also that today’s society and professional’s position towards this category of children has changed, but much more remains to be done in terms of providing quality education and treatment within all social care service standards for persons with disabilities.
I. CHAPTER ONE

1.1 Presentation of the report and its goals

Little research work has been made in Albania on the history of education of children with disabilities, specifically targeting the forms and ways of realization of education for these children. Consequently there is a lack of accurate and complete data on the education of children with disabilities through the years, and more notably, the lack comparative data. There are only some sporadic data collected from various sources, which are devoid of the qualitative component.

This document, which is a summary and review of background materials and reports on the development of education for children with disabilities in Albania, based on the afore mentioned, presents a complete analysis of this background. It was designed aiming at identification of the Albanian practice and experience, and ways of organizing education and treatment of children with disabilities over the years (since the communist regime to this day). This goal was attained by analyzing the pattern of education for children with disabilities and the role and contribution of the Albanian government in this area, through a genuine research process.

The report presents a retrospective of the situation of education of children with disabilities in Albanian society through the years, making a thorough analysis of issues pertaining treatment and education of children with disabilities, as well as exhibiting the evolution of the situation of individuals with disabilities in Albania (using existing resources and other documents). This section constitutes the theoretical basis, in which the realization of this research relied. Here are some definitions and descriptions of key concepts of disability, which are widely utilized and recognized in our country also.

1.2 Methodology

The methods used for the realization of this research are: secondary data analysis and qualitative method of data collection through semi-structured interviews with key persons.

Secondary data analysis consisted in the revision and review of existing national literature in its theoretical and practical context, including in elaboration studies, reports, assessments for models of education for children with disabilities in Albanian society. This approach has helped in creating a theoretical perspective for the referenced study. This way a quick review of the existing materials was made, to better focus the research, aiming at identification of the relevant literature in this field. Review of literature intended to acquaint researchers with existing studies and other documents in this field. Work in this phase is focused on summarizing the key findings and relevant recommendations of existing research, which are directly related to the purpose of the research in question. Review of literature has assisted the work group, to analyze the theoretical frameworks of previous studies and documents, which provide important information.

After concluding with literature revision, work continued with interviewing some key persons. To create a clearer picture of the practices and the educational experience of children with disabilities through the years, seven interviews with key persons were made. These interviews were conducted with specialists and professionals in the field of disability, representatives of civil society and interest groups who lobby and...
advocate for the protection of the rights of children and parents with disabilities. Through interviews with key people, more information was gathered about the types and nature of services that are offered over the years for children with disabilities in Albania, and a number of contributing reasons and factors to the process were presented.

The information gathered from literature review on the one hand and the interviews with key persons on the other, have complemented one - another in creating a holistic overview of the history and development of education for children with disabilities in Albania.

The report that finalizes the performance of this study, is intended to provide a synthesis of the development of education for children with disabilities from 1945 - until today. This report presents a complex picture of a long and complex process of integration and inclusion of children with disabilities in the Albanian education system.

1.3. History of birth and classification/designation of children with disabilities

The level of development and culture of a country or a society, is measured, among other indicators, by how the state or society treats people with disabilities.

The treatment of persons with disabilities varies from country to country, or at least it has varied if we refer to the history of development of this process. Ways of treating these individuals have changed from one period to another, have been steadily developing and perfectioning. The history of disability dates back to antiquity, where disability was treated as a disease. In the nineteenth century, disability began to be treated as a social problem. Treatment of disability has undergone several phases if we refer to the period from antiquity to XIX century:

1. Theological stage (religious stage)

In this period, disability was regarded as a punishment and a curse from God and society despised and denigrating individuals with disabilities, and even punished them through various forms of punishment. In some countries, these people were kept locked in dark cellars, isolated, enfettered and not allowed to go out. In other countries, individuals with disabilities were considered demon possessed and were executed. Hippocrates was the first to show interest in the origins of disability, and he explained its existence in terms of natural causes.

In the early Middle Ages, the treatment of these individuals initially was mercy and compassion driven. Church had an important role in the emergence of this kind of attitude. At a later period, when Western Europe was faced with frequent wars, epidemics and famine, people with disabilities began to be regarded and treated as worthless people, of no value or significance and as a burden to society.

2. Metaphysical stage (reason)

In the XVI century, in Europe, a new wind blew in regard to the treatment and evaluation of persons with disabilities. Now it was reason the one that began to drive the process of their treatment and evaluation. In this period, people with disabilities began to be treated as sick people and disability began to be treated as an illness, making the treatment and appreciation of them be more humane or more affectionate.

3. Positivistic Stage (scientific)

Willis, in 1672, researched and analyzed issues pertaining disabilities through various diagnostics, designations and classifications for persons with disabilities. This marked an important watershed for that time. However, on the one hand such persons would be diagnosed and on the other; they would be excluded from the society/community. They were herded in large groups and were provided simply their vital needs, the utilitarian ones, thus being left excluded from social life and from among the society at large. This situation continued until the eighteenth century. The French Revolution of the nineteenth century, and its philosophy “Freedom and Equality” stirred great hopes that all and without any distinction should enjoy equal rights.
This period also marked the first period when individuals with disabilities began to be treated as people with equal rights in order to be able to live like everyone else. At this time there were some positive experiences in the treatment of individuals with disabilities. For example, Pinell De Hard in 1830 provided the best philosophy for dealing with these individuals based on the experience of treating a child raised in an wild environment, experience which let him to disabilities. Thus emerged the idea that social and environmental conditions do affect seriously the rehabilitation and treatment of persons with disabilities.

**Sekuin:** He was the first to apply the psycho-pedagogical theory in treatment of individuals with disabilities. But it was not long till Sekuin was opposed for his views and was banished from Europe. He established the first association of disabled people in the U.S. in the nineteenth century

**Binet** was the first to elaborate the tests for the assessment of mental disability. According to him, people with disabilities are like the normal people, but differ only in the performance: “all people in terms of their development process stand in a linear straight line and differ only from the place they occupy in this straight line, which means that they can be standing in the beginning or in the later parts of it, it does not matter; what matters is that they are in a straight line, equal, in a place where everyone can develop, although everyone is different. So people are not born outside the norms, but it is society that makes them to be outside of them”.

### 4. Stage of institutionalization

Between 1950 - 1960 institutions were established, that took under care children with disabilities and were responsible for their treatment. These institutions were set up away from cities, in remote areas.

### 5. Stage of integration

In December 16, 1976 General Assembly of the United Nations declared the 1981 as the International Year of Disability, announcing that this particular year would be dedicated to full integrating into society of people with disabilities.

Declaration of the Rights of Persons with Disabilities announced in December 1975 by UN General Assembly, calls on all countries to protect the rights of this social category. In this paper it is established that persons with total or partial disabilities, who find it impossible to meet their needs for a normal individual or social life, as a result of physical or mental disability, are entitled the right to non-discrimination and respect for human dignity. Regardless of the origin, nature and gravity of the disability, people with disabilities have the same basic rights as other citizens of the same age, to be counted worthy of a decent and normal life, to exercise civil and political rights, to be supported with medical, psychological and functional services, to enable integration, reintegration and benefit economic assistance or employment according to in their capabilities. Treatment of disability not only within the medical framework, turned into a necessity.

After 1990s, five latest UN conferences underscored the idea “of a society for all”. Their social inclusion and equal opportunities principles became part of EU policies. The EU Charter of Fundamental Rights, in its 26th article, acknowledged the right of persons with disabilities and defined measures that ensure their independence, social integration and an active participation of people with disabilities in the community.

About the terminology used for persons with disabilities, WHO (WHO 1980) states that “Handicap” is the disadvantaged social condition that limits or prevents the normal functioning of an individual in relationship to other people of same age and sex, in certain specific social and cultural circumstances and conditions.

“Disability” is the loss or limitation of opportunities to take part in normal life in the community in equal levels with others, as a result of physical and social barriers.

Later on, in 2001, WHO reassesses once again the classification of disability, integrating the medical model of disability as a personal problem, the social model that considers disabilities as something imposed from the environment, which prevents the inclusion of people with disabilities in all the aspects of social life. According to this definition:

“Persons with disabilities are those individuals whose physical functions, mental or psychological capacity,
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tend to deviate for more than six months from the typical conditions of their peers' development, followed by limitations on their participation in social life”. Thus, the WHO labels disability not as a personal characteristic of the individual but as a combination between damaged or limited functioning and negative environmental impacts.

As quoted in the preceding paragraphs World Health Organization in its context of medical experience, defines disability as a restriction or lack of abilities (resulting from an impairment) of ability to perform an activity in the manner or within that level called ‘normal’ for a human being. While this definition has been useful for statistical purposes, providing to some degree a homogeneity to legislation of different countries and even standardizing international clinical criteria, there has been much debate regarding the exact rendering of this definition. A person with disabilities may have an injury or a health condition such that the environment may affect it negatively. Environment, if we may refer here to the classification, includes phenomena such as attitudes, legislation, health and social services systems, natural products and facilities created by humans. Disability is a concept that should be treated separately from any special medical condition. It is a social product that varies from culture to culture or from one period of time to another, just like other issues such as gender, religion, or different classes.

It is safe to say that it is a term that encompasses a large number of disabilities, whether congenital or acquired, but on the other hand, it is a very broad term, which creates some confusion in everyday language.

The concept of disability is not always able to label specifically the subject matter. Often, the term is used to refer to the social disadvantages that accompany the child in certain situations.

International Organization of People with Disabilities, after a review process has defined disability as “a negative interaction between a person with an injury or a health condition and the environment.”

In CRPD (Convention on the Rights of Persons with Disabilities), persons with disabilities are defined as individuals who have long term physical, mental, intellectual or sensory impairments, which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others. This Convention, the UN recommendations for the equalization of opportunities and Action Plan of the Council of Europe, for a long time have called for disability classification to shift from the medical model towards social-sanitary model, aiming at the assessment of social needs and the best way of meeting them. These documents recommend the use of International Classification of Functioning, Disability and Health manual, ICF; prepared and given for implementation by WHO.

This definition is accepted and it has become part of the Albanian legislation with the Law 9355 (2005), National Strategy for PWD as adopted by a decision of the council of ministers, in which legal obligations are introduced on the implementation of specific legislation for vulnerable groups. Because Albania after 1990s was engulfed in the wave of democratic changes and was influenced by the experience of other countries and approximated the positive practices and models about the ways of defining disability, treatment and evaluation of individuals with disabilities. (This was made possible only through various NGO projects, because the MCDWA law still has not been amended).

Types of disability
Disability can be classified:

• **Physical Disability.** Any impairment that limits the physical functioning of the limbs, or fine and gross dexterity is considered disability. Other physical disabilities, are related to injuries that limit other aspects of daily life. (World Health Organization)

• **Limited sensory disability** is related to an impairment of one of the senses. These include visual impairment, hearing impairment, taste or smell impairment, somatological and sensory impairment (related to touch, cold, heat or pain) or balance disorder. (World Health Organization)

• **Intellectual disabilities** include mental retardation, learning disorders and brain damage or
neurodegenerative diseases such as dementia. The term ‘intellectual disability’ has been considered preferable as less judgmental than the term “mental retardation” (World Health Organization).

- **Emotional and mental health disabilities** include mental and emotional disorders. (World Health Organization)
- **Developmental Disability.** This disability results due to growth and development problems. Although the term is often used as a synonym for intellectual disability, it also contains many congenital medical conditions that contain no intellectual or mental components such as spina bifida. (World Health Organization)

A long list of definitions can be easily mentioned, but the greatest difficulty lies in supporting these people through health, social and educational services. With a child with disabilities, we imply that despite the richness of personality, there is a difference from others, an additional difficulty that affects his life, in relation to the surrounding world, but this does not represent all of his being.

Scientifically, a child is classified as a person with disabilities when: “Indicators of his development, when tested, are under its normality threshold, it is clear that he has a dysfunction. When it hinders his development and significantly affects his daily functioning, then we are dealing with a disability. Development does not occur in a fixed sequence, therefore many children show atypical patterns of neuro-development. This diversity in neuro-development, may be genetic for the most part, but environment, experience the possibilities of society are equally important”, so it is necessary to perform well planned and structured early interventions.

### The current operational definition of disability

National Strategy for Persons with Disabilities states that disability is not intrinsic in the individual, what the individual has is the impairment. The definition of disability is related to the definition: “Persons with Disabilities” are those persons whose physical functions, mental capacity or psychological condition, tend to deviate for more than six months from the typical of the respective age which causes a restriction of their participation in social life. This definition, which follows the WHO proposal, is not based on real or presumed deficiencies. The spotlight is on participation of persons with disabilities in various areas of life. A change from normal conditions means the loss or limitation on physical, mental or psychological structures, which are present in the respective age. Disability exists in cases when the injury leads to a restriction, which in turn affects the participation of the person in one or more areas of life. The criterion of duration of six months of limitation, excludes temporary disorders which are not considered disabilities, but does not preclude immediate interventions which are requisite in individual cases to avoid it. This relates in particular to children, in whom the disability or potential risk of disability is already identified (National Strategy for Persons with Disabilities, p 6).

In the study, the term “children with disabilities” is used for all those children who are diagnosed and deemed as such by the Medical Commission of Designation of Working Ability (MCDWA). This is a specialized medical committee, which evaluates the medical condition of persons with disabilities. This committee was established and operates under the Social Insurance Institute, where the doctor and employee of the State Social Service participate as a voting member.

### Approach to disability through its treatment models

**The medical model** considers disability as characteristic of a person, directly caused by disease, trauma or health condition. In this case disability requires medical treatment or other treatment/interventions to solve the problem at an individual level. This model focuses on the physical aspects of health problems. He puts emphasis on physical or mental illnesses of the individual, focusing on barriers to participation, created from the individual himself.

According to this model activities “regulate” a person with disabilities who is “sick”, and so he could join the “normal part of society”. Seen from this perspective:
• disability is a personal problem
• traditional ways of understanding disability, focus on the person’s injury and handicaps that result from it
• this model attempts to “cure” or “improve” the individual, so that he “fits in society”
• it defines a person with disabilities, only as a patient with medical needs
• it separates the person with disabilities from possibilities of inclusion
• provides only medical help from specialists
• it is costly and its benefits appear to be relatively small

Social Model regards disability as a problem created by society and does not attribute it to the individual. Under the social model, disability demands addressing through social policy, since the problem was created as a result of an inadequate physical environment created by attitudes and other characteristics of the social environment. It focuses on the barriers that exist in the view of society towards people with disabilities. According to this model, the activities focus on involving persons with disabilities to be seen as part of society. Considered from this perspective:

• disability focuses on society, not in people with disabilities as their problem
• people are with disabilities, because society denies their rights and opportunities
• it views disability as a social reflection on person’s impairment
• according to this model, the rights and needs of persons with disabilities are the same with those of persons without disabilities - e.g. education, health care, employment
• activities focus on identifying and eliminating environmental and institutional barriers as well as attitudes, which do not give way to inclusion

By analyzing both these models separately, they may be regarded as insufficient, although both are partially valid. Disability is a complex phenomenon, it is always an interaction between individual characteristics and the context in general where the individual lives, but some aspects of it are entirely internal, personal, and at times outer. In other words, the two models, the first from the medical perspective and the second from social perspective, have their significance if applied in conjunction with each other. They are convenient in terms of problems related to disability and neither one should be disregarded.

A better model to address disability, is that model which synthesizes what is true in the medical and social models, without falling into the common mistake in reducing the notion of full and complex disability to a problem of the person. This model, most useful for disability is called the “biopsychology model”. It promotes the idea that the physical, psychological and social environmental conditions, tend to influence one another and should be taken into consideration in order to understand and help individuals with disabilities. The biopsychology model is adjusted to environmental causes, and social effects they bring to individuals with disabilities.
2. CHAPTER TWO

Disabled children’s education situation over the years. An historic and reflecting overview

2.1. Disabled children’s education situation in 1944 – 1990

The provision of services for persons with disabilities in Albania, began in the early years after the establishment of Enver Hoxha’s communist regime, thus paving the way for the developments in special education in the following years. Orientation of these services was mainly toward the care for daily needs of individuals with disabilities, providing shelter and nutrition, usually assisting them through an institutionalized structure, without any efforts toward their rehabilitation and integration. These individuals were considered totally dependent and incompetent, thus arousing feelings of pity and mercy for them. They were looked upon as disabled, whose educational treatment was not a primary consideration for state and society. As in many other European countries, even in Albania the care for children and youth with disabilities, is developed outside the education system and traditionally over a long period of time, they have been left outside of this system. Disability was treated as a disease and there was no other form of treatment for it.

It is hard to define an exact date in the history of special development that would mark its beginnings. No doubt that in different time periods and different society development stages, there have been formal and informal adjustments in the practices and ways to help and support disabled persons through the years (from 1945 onward). As in many other countries so also in Albania, special education has its development history. If we refer to the history of Greek special education, we can ascertain that: the first steps to secure special services were taken from humanitarian organizations or churches. Efforts in the area of providing special education services were dominated by private organizations, while the public sector was minimally involved at least to the 70s. From 1972, the year when the first legislation on special education was introduced, until 1985, all legislative actions have taken place outside the mainstream education law (Stasinós, 1991). Special education structures were developed outside the Ministry of Education, while the management, organizational structures, and inspection were controlled by the other Ministries.

In France the beginnings of care and special education forms for individuals with disabilities, date very early. 1793 is considered a symbolic date of rehabilitation reforms’ starting point in terms of this category of individuals. It is the year when Doctor Philippe Pinel received permission from Paris Commune to free 89 “crazed people” from shackles. Up to that time “the crazed” were housed with the convicts and the criminals. For the first time they were called “sick” that deserved treatment and care and this change in attitude marked the emerging of the modern psychiatry, which would spread in Europe (Bouissou, 1967). A second development in the history of special education in France was the opening of schools for deaf and blind children in the eighteenth century. These services were often provided by religious institutions. During this period Abbe de l’Epee opened a school for deaf and mute and Valentin Haüy opened an institution for blind children during this period. Other similar institutions were opened in the following years. Towards the end of the nineteenth century, there was a rise of interest in the fields of psychology and psychoanalysis. In 1909 a law was enacted which made possible the opening through local initiatives of “improvement classes” for children with learning disabilities.

In Albania, after an analysis and scrutiny of available evidence on the main strengths and characteristics of documented special education, there can be identified three distinct chronological phases in the special education history through the years:

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<th>Phase</th>
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<td>1909</td>
<td>In 1793, the first attempt to treat “sick” individuals as “sick,” and not as criminals.</td>
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<td>1972</td>
<td>In 1972, the year when the first legislation on special education was introduced.</td>
</tr>
<tr>
<td>1985</td>
<td>Until 1985, all legislative actions have taken place outside the mainstream education law.</td>
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Phase one: This phase includes the 50 year period of Albanian dictatorship, a period during which Albania was under the dictatorial regime and that continues to the early 90’s. We can say that Albania has inherited from the past a mentality which did not favor in any aspect the treatment and education of disabled children. This mentality stemmed from a low social and cultural level that characterized families, society and ultimately politics of that time. These three important elements have affected children’s with disabilities treatment, evaluation, and education during this period. In many areas, birth of a disabled child was considered a curse or a punishment from God and as a result the family members felt intimidated by the society, inferior, and prejudiced. For many families having a child with disabilities, was considered a shame and damnation from God. These children were kept isolated at home, “away from the public eye”, away from the community. Family was the only institution that ensured care for the children with disabilities during this period.

Under these conditions, there was neither medical and psychosocial treatment, nor let alone disabled children’s rehabilitation and education. On the other hand the society, with its attitudes and behaviors, prejudices, stereotyping, indifference, discrimination, and exclusion of these children and their families, has exacerbated and aggravated their predicament a great deal.

Of course this situation just described could have not been different, given the state policy of that time. There was no social policy that directly supported and favored disabled children. Albanian society of that time was not a welcoming society to the disabled children. Disabled children were objects of people’s pity, or of some charitable or benevolent acts. During 1950 to 1970, a network of care institutions for individuals with disabilities was established as a response to their needs for medical treatment and care. In these institutions, medical care was provided. The status of these individuals changed from being completely excluded and denigrated, to a condition in which they were “treated” and “considered” as persons entitled to help. This was an important starting point in the history of the care for children and youth with disabilities. But their social needs and the right to education, were unfamiliar matters for the state policy of that time.

Another topic for discussion is the issue pertaining evaluation and categorization of children with disabilities. Their categorization has its roots grounded deep within this complex state apparatus. Practices used for the institutionalization of these individuals and the language used for naming them, were mostly guided by the medical model perspective.

As for the situation of education of these children, we can say that the issues relating to their education until the 1970’s were not communist government priorities. After World War II, the new government in Albania with features of the dictatorship of the proletariat, enhanced with determination its political program of building a socialist state of Stalinist type. This power, with its peculiar characteristics and definition of new political course are reflected throughout the educational system, in particular in its physiognomy in this period, also called the first stage of the Albanian Socialist School (1945 - 1950). There were two basic pillars of the socialist course in Albanian schools: the social aspect, creating a massive school, aiming at bringing out the country from the underlying educational backwardness and in political terms, the creation of a school used as an instrument in the hand of the government, for building this new social order. Obviously, the needs of children with disabilities to be educated or involved in society, were not in the focus of the educational policy of the time. Problems and their needs were viewed only through the medical model of disability, giving importance to their institutionalized treatment in hospitals or in caring centers.

Problems of children and individuals with disabilities and their solution or addressing were sole responsibility of the Ministry of Health and the institutions that were dependent from it. “Sick”, “stupid”, “flawed” children were thus diagnosed as children with disabilities in this period and were sent to hospitals or centers that were very similar to psychiatric hospitals. In these centers–hospitals, there were placed children with mental disabilities, and those with severe physical conditions, that were abandoned by their families. Children with multiple disabilities and grave intellectual disabilities were considered ineducable, so there were no considerations of including them in educational institutions. They were placed in centers or residential homes or isolated in their homes, without any contact or relationship with the outside world.

Pursuant to the state policy of the time, in 1945, in Tirana was established the orphanage for school children orphans, which was a continuation of “Malet Tona” boarding school. Later, this initiative was undertaken in
other cities of the country as well. In 1947 started also functioning the institution of care for orphans and abandoned babies.

In 1956 there was established a nursery/Senatorial center under the out-patient clinic where children with problems in their physical health received treatment. Later, with the construction of the sanatorium in the outskirts of Tirana, this crèche ceased to exist as such and in its premises were given for use to the hospital’s residential center, with a dorm for children with disabilities. In the early 1960’s director of this center was appointed psychiatrist Dr. Anastas Suli, who was the first professional doctor who was involved in running this institution. Earlier, this center was run by the staff of nurses who worked there. Treatment of children in this center was only through the medical model. In 1979, after the completion of another building close to the existing one, which later served as a school for them, began to apply the first elements of education for children with mental retardation of the center in question. This was achieved thanks to perseverance and dedication of the director of this center, as well as Mr. Kasem Malaj, who was educated in Hungary for specialized pedagogy. It is worth noting that Hungary in that time was among the few countries that favored psychoanalytic theories (Frodjane). She had a very good experience with residential centers and children’s homes and orphanages. Some elements of this positive experience, specialist Kasem Malaj tried to implement in this center. It must be noted that despite all qualities and professional experience he had, he was appointed in this institution as persecuted employee by the communist regime of that time, who would be nominated in the most difficult and least important job position.

For children with slight and moderate intellectual disabilities and those with sensory disabilities, the education policy of that time began to receive consideration also their educational needs by establishing a system of special schools by type of impairment and disability they had. Under these conditions, the educational needs of children with disabilities began to be addressed directly only after 1960s. Regarding the history of development of special education, which covers the educational needs of children with disabilities, we can say that it dates back to the 1960s. Year that coincides with the beginning of institutionalized treatment of these children in institutions / centers raised and adapted for this category of children.

The first efforts were about the opening of some special classes for blind and deaf children. Their expansion led to the establishment in Tirana in 1963 of a National Institute, the students who do not see and deaf students, who after many years (in 1992) managed to split into two separate institutions, one for deaf students and another for blind students.

Pictures of the two institutions (Institute of deaf children and institute of blind children).

It is worth noting that some special education institutions at that time were set up at mainstream schools. If we refer to the above image, notice that in the left is the building of the Institute of deaf students, the school building in the middle, is the public 9 year school “Skënder Çaci” and on the right is the building of the Institute of Blind Students. In the picture are noticeable the slogans which reflected the typical ideology of that time, but they also convey the learning and educational prospects of these institutions, along with the rehabilitation and treatment for this category of children.

Because Albania was part of the larger socialist countries’ camp, the first experiences in special education were taken therefore from other countries of the same camp. Thus, in the first years after Liberation, cultural and educational exchanges, were oriented towards the Soviet Union and hence the position held in regard to culture and education was influenced by the collection of the defining concepts in this field. The first step was taken in 1958 by sending in the Soviet Union and in other countries, Albanian students to study for defectology. Most of these students failed to complete their studies there, due to historical
circumstances that are already known. They returned, to complete their education in Albania. The first two teachers who brought the experience gained there (in SU) in special education were Mrs. Liri Panajoti who specialized in applying Braille system for children with visual disabilities and Znj. Bedrije Tare, who specialized in the field of dactylology. After she returned from the Soviet Union, she adopted the Albanian dactylology to 36 phonemes of the Albanian language.

**Early education of children and youth with visual impairment in Albania,** is in the first place related to efforts to teach special writing. Braille, for these individuals, and secondly with their involvement in arts education in music, as players of musical instruments or as singers. In these years there were sent to study at schools of music in the Soviet Union and other countries, a certain number of individuals with visual disabilities. In general these were students who were involved directly only in professional education mainly in piano, accordion, and aerophones. They had not attended primary or the 7-year school system of that time. While some individuals with visual disabilities exercised already the profession of a singer or players of musical instruments.

So, the general public readily admitted that these individuals had the ability and capacity in the field of music and consequently their education in this area did not constitute a problem. Promotion of these models as well as information streaming from the Soviet Union and other countries of what was than the socialist camp, encouraged the leaders of the Ministry of Education of that time to consider creating special educational institutions like those already existing in the other socialist countries.

**Under these conditions, through DCM, No. 160, dated April 29, 1963,** the Albanian government decided to open the first Institute for special education in both categories of persons with disabilities, students who did not see and students who did not hear. The opening of this Institute was made possible only 7 months after the decision. **November 5, 1963** opened the doors for the first time in the history of the Albanian special education, the Institute of Deaf and Blind Students, who at that time was called the Institute for Deaf-mute and the Blind. The Ministry of Education of that time, decided to import a Perkins Braille typewriter which was provided the Institute for Deaf-mute and the Blind. (The first teacher for students with visual impairment in Albania was educated partly in defectology branch in Leningrad in 1958). With the opening of school in November 5, 1963 there was already prepared the first primer and arithmetic in Braille. These books came illustrated with pictures. The first teachers who worked at the institute brought the experience they had acquired from their schooling in Leningrad, which would later serve as the foundation upon which the education of this category of students would be built.

The first texts in Braille started to being typed also by teachers themselves, who after that, would hand them to students on specific topics or chapters basis. Life of this Institute began with an opening of two classrooms, one for blind students (12 students) and another for deaf students (10 students). Administrative criteria for admission were: students who did not see, they should have been blind but that not accompanied with other developmental problems. The same criterion was applied also for deaf students. Among the most important objectives that found application in that time for the education of children who do not see, it has been equipping students with the full scope of knowledge for their 8-year education, while for students with hearing impairments, would apply the elementary curriculum, but extended to 8 - 9 years of school.

*Image from the Institute of deaf students.*

As seen from the picture, students of this institute are wearing the standard uniform of that time that was used in all Albanian schools (black gowns with white collar and red pioneer scarves). This element was among the few that approximated these students with students from other schools.
Children are supervised from their tutors and teachers in this setting also, which clearly bespeaks the strong bond between them and the responsibility and professional commitment of employees of this institution. It is worth noting that after the period 1970 to 1990 there was a substantial increase in the number of children enrolled in this institution and this is explained by increased awareness of families and increased care provided by social, education and health policies of the time. The parents of these children, became aware of the importance of education of their children, but also the politics of that time took seriously into account the needs of these children, treating them not only from medical model perspective, but also from the pedagogical/educational one, in order to meet their educational needs.

In the chart below it is displayed the distribution of students enrolled from 1963 to 1990, at the Institute of the Blind and Deaf Students, as well as the distribution of students enrolled at the Institute of Deaf Students from 1992 to 2011.

<table>
<thead>
<tr>
<th>Period in years</th>
<th>Number of students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 1963</td>
<td>22 students with visual and hearing impairment</td>
</tr>
<tr>
<td>Year 1970</td>
<td>90 students with visual and hearing impairment</td>
</tr>
<tr>
<td>Year 1980</td>
<td>390 students with visual and hearing impairment</td>
</tr>
<tr>
<td>Year 1990</td>
<td>420 students with visual and hearing impairment</td>
</tr>
<tr>
<td>Year 1998</td>
<td>202 students with hearing impairment</td>
</tr>
<tr>
<td>Year 2003</td>
<td>150 students with hearing impairment</td>
</tr>
<tr>
<td>Year 2004</td>
<td>159 students with hearing impairment</td>
</tr>
<tr>
<td>Year 2006</td>
<td>140 students with hearing impairment</td>
</tr>
<tr>
<td>Year 2007</td>
<td>130 students with hearing impairment</td>
</tr>
<tr>
<td>Year 2008</td>
<td>128 students with hearing impairment</td>
</tr>
<tr>
<td>Year 2009</td>
<td>127 students with hearing impairment</td>
</tr>
<tr>
<td>Year 2010</td>
<td>124 students with hearing impairment</td>
</tr>
<tr>
<td>Year 2011</td>
<td>108 students with hearing impairment</td>
</tr>
</tbody>
</table>

But after 1990s the number of students who attended the institute, suffered a significant decline. This can be explained by several reasons:

1. The Albanian population after the 90s was engulfed in a variety of changes as a result of transition aiming at democratization of political and economic structures. During this period, as a result of changes in the country, the ban on the free movement of population was lifted and many families emigrated abroad in search of a better life. Families of children with disabilities saw emigration as an optimistic alternative that could provide effective and appropriate services for their children. Many families who had children with severe hearing problems, migrated to neighboring countries such as Italy, Greece, France, and as far as U.S. in hopes that their children would have more opportunities to integrate and thrive. Many children who previously had been students of the
Institute of Deaf Students, after 1990 were integrated or involved in the care services that the societies of the countries where their families had already settled provided.

2. Changes influencing the society affected the make up of Albanian families in the transformation of large families into smaller ones. This created more opportunities to provide care for children, increased awareness of parents to ensure children’s welfare. Likewise, internal migration, mainly from northern and rural areas to urban areas, created more access to benefit from early intervention and prevention programs. More children were involved in regular vaccination programs and continuous health control enabling the number of children affected by illness or problems caused by German measles or the prolonged treatment with antibiotics (both causing hearing problems) be lowered significantly.

3. Establishment and consolidation of many centers, with the support of state and nongovernmental organizations, caused a certain number of children who had previously attended the Institute of Deaf Students, benefit from the services offered by these centers.

While in other countries, services for this category of children were strongly supported by religious organizations and the church, just as their educational needs were realized with the help of these institutions, the fact that Albania was an atheist and its school secular, made the religion and religious organizations out of reach to offer support.

After a long hiatus, associated with the creation of new opportunities for change and development of these institutions, in 1989 the Minister of Education of that time Mr. Skënder Gjinushi provided scholarships for some of the specialists working in the disability field. This was the first initiative after a long halt, caused by disestablishment of relationships with twin countries of the socialist camp. So in February 1989, a group of specialists from Albania went on a scholarship program to Italy for a period of 6 months, until June 1989. The group was composed of Mr. Virgil Nano, at that time director of special education “Louis Gurakuqi” in Tirana, Mrs. Fatima Kapo, deputy director in the same school, Mrs. Lindita Klimi, a teacher at the Institute of Deaf Students and Mrs. Liljana Nano, a teacher at the Institute of Blind Students.

This initiative was supported by another enterprise of this nature. Some months later, two teachers for blind students (Mrs. Vera Skëndo and Mrs. Luiza Shtjefni) were sent to France with scholarships to learn from the French experience in handling the education of children with visual impairments. In 1993, for the first time in Albania by some specialists of language and communication, was first compiled the signs book. This book was the result of a large collaborative work of the specialist Mrs. Lindita Klimi and the representative of the Dutch Foundation “Efata” Mrs. Ineke Honne.

On September 20, 2005, the Ministry of Education of the time, by an official instruction required expansion of the curriculum for children with hearing impairment that were receiving education in the Institute of Deaf Students. This instruction paved the way for the application of practices and methods aimed at integrating special education curriculums with the curriculums of basic education schools. In this period, in the Institute of Deaf Students it was experimented the preparatory class for children enrolled in this institution.

Until early 1990, the only method used to teach children with hearing problems was the verbal one (through lips reading). Students and teachers were categorically forbidden to use nonverbal communication, gestures, or body language. Students were obliged to keep their hands under desks to avoid using them during class sessions. Moreover, it was forbidden to use signs as a means of communication. After 1990s contemporary methods were applied and school curricula for this category of children, underwent substantial modifications. A mixed set of methods were used in order to make possible the involvement of children in the learning process and to ensure effective teaching and learning. Nowadays, in school curricula of the educational institution, the method of global communication is being used including verbal communication, gestures and dactylography.

The establishment and operation of these two institutions for students with visual and hearing problems, it covers almost to a full extent the whole country needs for the categories of students they specialize on educating.
The opening of residential centers and special schools

For children with other problems in their development (mental retardation, cerebral palsy, etc.), the Ministry of Health of that time, established some residential centers (institutions with dorms). These institutions typically expressed an outdated model of a politically centralized government. In the recent years, these institutions have come under the authority of the Ministry of Labor, Social Affairs and Equal Opportunities.

After the year 1970 in the cities where there were already psychiatric hospitals, there were opened schools for students with mild mental retardation. The need to open these schools was influenced by taking measures to cope with the numerous abandoning of school from students with disabilities who could not manage to complete the 8-year education, although by now it had turned into a compulsory education. Under these conditions it was necessity the establishment and consolidation of special schools for children with mild mental disabilities. For these schools special curricula were designed. Initially these schools were opened in Tirana, Vlora, Elbasan and later in Shkodra, Durrës and Korça.

History of opening of the special school “Luigj Gurakuqi” in Tirana

(For the first time in our country, with the initiative of a group of specialists in the field of disability, on October 17, 1973 was established the first special class for children with disabilities in the city of Tirana. This class originally had only 15 children and was opened on the 8-year public school premises of “Luigj Gurakuqi.” It was the commitment of initiatory group (Mrs. Urani Dhimo, Mrs. Liri Gjoliku and Mr. Virgil Nano) and the results achieved with the students in this class, and growing needs for education of children with disabilities that led to the establishment of a genuine school in 1979 in Tirana, which today is called special school “Louis Gurakuqi”).

Albania was the fifth country in that time that had set up the system of special schools to enable the education of children with disabilities and certainly this initiative should be commended and supported, regardless of limitations and ideological constraints of that time. Before a class would open, the initiating group had monitored and observed in the nearby schools, the students who exhibited academic, behavioral, developmental problems, etc. The first children who were enrolled in this class were mostly children who had failed to assimilate and acquire the curriculum of the first and second grade. Initially, the opening of a special class in the premises of a regular 8-year school, created many problems both for the students of this class and for the other students of the school as well. Prejudice and stigmatization for disability in general and children with disabilities in particular; greatly aggravated the situation regarding the ongoing of learning for children with disabilities in mainstream school environments. Other students were intolerant and disapproving towards their peers with disabilities. They displayed discriminatory and exclusive attitudes toward these children. Also for teachers and staff of this school, this initiative was not well received. They were reluctant and had low expectations in regard to the education of children with disabilities. Special class teachers of that time, say that they had to send repeated requests to the school’s directory, to change the time of the lunch break, so that students with disabilities were not exposed and faced in the same environment and at the same time with other children of no disabilities. This would somehow avoid discrimination and contempt towards them, but would also certainly, pave the way for their isolation and segregation. Despite the fact that the opening of this school marked the first change oriented towards creating opportunities for children with disabilities to be educated, it carried its risks. Many teachers in mainstream schools at the time, began to identify as children with disabilities, all those children who for various reasons could not acquire the curriculum, calling for the continuation of their education in special schools.

The first two teachers of the special class, taught in an organized way, both in the morning and in the afternoon. It is worth noting that their work and commitment was at very high levels. Certainly the lack of experience in working with children with disabilities, had dictated to them the need for their dedication, maximum commitment and care to help and support these children in their education process. They worked with passion and love with all the children in their class. The teacher who taught during the first part of the day, marked and recorded in the “Journal of Communication” (that is how they called the notebook where they pass one-another tips and suggestions for each student) all the students had
achieved, as well as the difficulties that they had encountered and areas where intervention was needed. So this process was repeated day after day, helping thus the monitoring of the progress of children and the strengthening of cooperation between them. Initially in this school there were not enrolled children with severe or obvious diagnosis.

Their education still remained a challenge in Albania at that time. Certainly the increasing number of students who attended a special school, raised the need of increasing the number of teachers who would work in this school. Perhaps these reasons, but also increased demands of the number of children with disabilities, made special classes move to a separate building. In 1974, another special class was opened and these two classes opened the way for the establishment of a genuine special school for this category of children.

At a later stage, the doors of the special school were opened also for children with severe diagnoses, such as children with the down syndrome, with mental retardation of varying degrees. Their enrollment was made possible after their situation was first assessed by an admission committee, set up in school. This committee was composed in addition to the schools’ managing team, also of a methodologist teacher (teacher’s name Hava Haxhiu) who assessed children for their academic achievements, and two health employees (psychiatrist Dr. Anastas Suli and child psychiatrist doctor Dr. Elida Cangonji) who assessed the physical and mental status of children.

Teachers in this school were distinguished for great dedication and professional commitment to support the process of educating children with disabilities. A great amount of work in these schools was made in terms of adjustment and adaptation of textbooks to the level of skills and capacities of children. Shortages in materials and teaching tools, were covered by the creativity and professionalism of the teachers in building themselves their necessary material base.

It was not long till the school was turned into a resource center and exemplary school for other special schools in the country. Teachers in this school held open class sessions, or as were called differently at the time “open learning”, which were attended not only by teachers and school managers of special school, but also of the 8 - year ones of the basic education.

In this school began to enroll also children who came from the orphanage, as well as those who come from families with social and economic issues (divorced parents, convicted, deported, those who manifest environmental and circumstantial deficiencies etc.). Teachers show that they had a close cooperation and relationship between parents and their children, which reflected significantly in the positive results achieved in working with these children.

Until the 1990s the school experience was very positive in terms of preparing students for skills and professional skills. Under an agreement signed between the leaders of this school and work office in the Executive Committee of the Tirana District, students in the seventh and eighth grades, conducted their teaching practice in town’s enterprises such as the “NPV”, the artistic enterprise, tailoring enterprises, porcelain enterprise, wool industry, knitwear; tourism and hotel company. Children were allocated in these institutions according to their abilities and capabilities after being monitored for a long time by their teachers. Teachers of wood craft of the school (there were about 4 - 5 such teachers) supervised the development of teaching practice in these enterprises. At the end of the school, coinciding with the end of eighth grade, these students were employed on the basis of professional skills acquired during the teaching practice in their respective enterprises. Before these students were hired as employees of enterprises, the school teachers would prepare the environment and other employees to welcome and to value them as equal to students with disabilities. They held informational meetings about the characteristics of development, behavior, skills and capacities of these students, with employees of these enterprises. In collaboration with the directors of these companies, employees were assigned to supervise and take care of these students. Young people with disabilities who began working at these companies, were rewarded for the work they performed just as well as all other employees of the enterprise through the payroll system. They were paid about 4,000 Lekë per month. Many of them already contributed to the provision of household income, shattering this way the myth of them being a burden to family and society. Although students had left school and worked in various enterprises, interest and care of school teachers in companies where they worked, was part of ongoing care towards them.
These forms and practices of training and qualification of children with disabilities, are a living testimony of the earliest efforts to realize their integration into society, to develop their skills and capabilities, alongside other members of society. But this initiative and this tradition came into a halt, and gradually its traces disappeared after the 1990s in Albania began the changes of the 1990s.

Currently, in this school, the education of children is accomplished within a 9-year time frame including a preparatory year for children who need a preparatory phase. The school is attended by children of age group 6-20 years old.

Students and teachers of special school “Luigi Gurakuqi” (photo taken in 2007)

In every class there are 10 - 12 students who are taught and trained by the teacher and teacher assistant. The school aims that in addition to the academic development, to accomplish the increase of student’s independence, socialization and their readiness to engage fully in society and enjoy a prosperous and fulfilling life.

Student in leisure activities

In this school in addition to the academic preparation, a special attention is given to the functional and practical training of students by facilitating and expediting the process of their integration into social life.

Students at the tailoring class

Besides regular classrooms, in children’s disposal are put also other facilities such as the library, gyms, games room, greenhouse for floriculture, cooking room, and the tailoring workshop. These facilities help in equipping children with the most necessary skills and practical know-hows of life. Within this process the school collaborates closely with other 8-year schools. Students of “Luigi Gurakuqi” school, conduct together with their peer from other schools, diverse educational, artistic and sports activities.
The opening of other special schools in the country

Other special schools were opened in this period of time:

- in 1974 it was opened the special school of the city of Durrës,
- in 1983 the special school of the city of Vlora,
- in 1984 the one in the city of Elbasan,

Schools and day or residential centers of the special education, cover only the needs of the cities where they are located, and do not even meet the needs of their district those of the whole country notwithstanding.

Special schools that were established in this period, were the only opportunity to realize the education of children with disabilities in Albania. In these circumstances, it was established and consolidated the special education system in Albania. Despite some positive achievements or efforts to make possible the integration of children with disabilities in Albania, this system was a segregated educational system that significantly increased the social exclusion of these children, because special schools that were part of it, were isolated and detached from other school facilities. Special educational system initially was considered and treated as an expression of care and an educational means for children with disabilities, in order to better address their special needs for education. From the purpose for which these educational institutions were established, it is understandable that even their philosophy was different from that of educational Institutions where other children were educated. Schools were part of the network of public educational institutions. Students of these schools received equivalent knowledge of elementary programs of other 8-year public schools. But the elementary curriculum in these schools, was covered over all 8 years of education. Despite this objective, the following schools: more care was shown for wellbeing of these children during the day, their curriculum did not contain useful subjects for children with disabilities, such as knowledge and skills necessary for life and materials that helped in their psycho-social rehabilitation. Their curriculum was also not enriched or expanded, but shrunk and was simplified so that disabled children would acquire it better. Practice of these schools relied mainly on the experience of East European schools. Education employees working in these schools, were not specialized in working with children with disabilities.

Despite that during the socialist regime, Albania ideologically was part of the Eastern countries block, occupations directly related to disability, such as defectology, physiotherapy, special pedagogy were not as developed as in other eastern countries. The first Albanian psychologists, graduated in Romania (Mr. Virgil Nano and Mr. Luan Hajdaraga). Initially they were appointed in the Institute of Students with Hearing and Visual Impairments. Upon the opening of the special school, Mr. Virgil Nano, was appointed director of it.

For decades, a large number of children with disabilities was placed in institutions and this practice continued until the 1990s. These children lived separately from family and community. This model was far from the model that respects and protects human rights. The poverty in which Albanian families of that time lived in and the disability of children of these families, were factors that affected one-another; creating multiple disadvantages for this category of individuals and their families. In a time when there was a complete lack of support needed by the state, when there was no approach of social services for treatment and care for
these children, parents would consider the institutionalization of their children as the sole alternative. This explains the increasing number of children who attended the Institute for Students with Visual and Hearing Impairment until the 1990s. Until the 1990s, the forms that have dominated the services, have been those of care in specific institutions, disconnected and isolated from other children and the community. The main arguments that underpinned these practices, have been the assumption that in this way, the work with these children was more organized, in smaller and more homogeneous groups, and thus conditions were created for a more effective treatment. On the other hand, a lot of criticism was addressed to these institutions, especially for its artificial conditions and the isolation they created, and social inadequacy that is created to these children to cope with real life, the lack of positive models, the limited incentives, reduction of the demands of the staff, the negative effects of their stigmatizing etc.

So at this stage of development of education for children with disabilities, the most typical way of their education, was the special education. Separate special education, just like other services for people with disabilities and children with special needs, emerged as an expression of care that society revealed toward them. The medical model of disability, considers disability as an individual pathology, therefore defective individuals must be cured through medical intervention which would correct the anomaly and help them adapt to the environment. Implementation of the medical model in education led to the emergence and spread of special schools and residential institutions for children with disabilities. Medicalisation of disability, which gave rise to long-term institutionalization, is one of the main factors of segregation, isolation and exclusion. From it generated all social segregative policies and exclusive practices that on sporadic cases continue to exist till today.

**Facts and figures on the number of students with disabilities, who are currently being educated in special schools in the country**

- In the special school of the city of Korça during the school year 2010-2011 there were enrolled in first grade 13 children.
- In the special school of the city of Vlora currently there are attending 92 children (30 females and 62 males).
- During the academic year 2010-2011 there were enrolled 19 first grade children and 8 children completed the school.

Despite the efforts of the Albanian government and nongovernmental organizations to enable the inclusion of children with disabilities in inclusive schools, there is still a significant number of children who receive their educated in special schools. This is explained by several reasons. Parents have low expectations for development and progress of their children and that is why they choose to educate their children in special schools. Another reason is the high level of poverty and unemployment among families of children with disabilities. Conditioned by the difficult social-economical factors, these families educate their children in special schools because these institutions provide free meals, textbooks and other school materials. Another reason worth mentioning, is the lack in regular school’s infrastructure, lack of flexibility of the curriculum, inadequacy of knowledge of teachers on how to cope with this category of children, the lack of implementation of the legal framework for the education of children with disabilities, etc.

In 2003, the town of Laç with the initiative of Caritas France and the Education Office of Kurbin District, and the support provided by staff of the Child Development Center in Tirana, it was opened the first special class with 15 children with disabilities, in the premises of a high school of the city. But the school community was disapproving and biased against children with disabilities. For this reason this class was moved into the premises of a 9-year school. Currently, in this class, study 13 children. Teachers who work with children with disabilities, are part of the regular institution’s make out. To realize the learning process for children mixed methods of education-learning process are applied.
The situation of services for people with disabilities

Map of the network of services for disabled individuals at a national level

Evaluation of the situation of services for people with disabilities is based on the number of centers that provide residential and community services and domestic services from public and private institutions, the capacity of centers, the extent of their usage, the types of services offered.

For people with disabilities both public and private residential community services are provided.

Treatment of children with disabilities in our country is provided in the following directions:

- residential or daily social public services;
- non-public social services;
- community-based social services;
- assistance through disability pensions;

Priority has been given to the transformation of services to consolidate and improve the existing situation in residential and semi-residential institution, always bearing in mind the context and environment in which they are located.

Residential centers in general, are of a social-health nature, are intended for persons with disabilities older than the norm required by the compulsory education, which are on continuous assistance and seem to be deprived of needed family care support, or for which, staying with their families is definitely impossible, and (as it happens for a good part of these children) are abandoned by their biological family. Semi-residential centers of health and social care in nature, with daily service are intended for young or adult individuals with severe disabilities.

Each center is based on community services charter including:

- services build in such a way as to facilitate cooperation between individuals with disabilities and their families. Each structure operates through:
- managerial personnel;
- social - health personnel, which possesses the relevant qualifications, socio-sanitary and educative personnel, which possesses relevant qualifications;
- community based day services that unfortunately are in small numbers;
- services in families (as a new type of services);

In these centers, organization of work is accomplished through teamwork, annual programs, education and training of the staff with assigning of the responsibilities, as well as supervision from foreign experts. In these centers, types of beneficiaries are 3–18 year old children and adults over 18 years; in general, these institutions have mixed beneficiaries, both children and adults. Based on the forms of disability: 70% psycho-physical, 6% of the type of sensitivity and 24% with all types of disability.

The approach for these children aims to be effectively able to receive education, training, health services, rehabilitation services, preparation for employment and recreational activities, in order that the child may accomplish a fuller social integration and individual development, including its cultural and spiritual development.

Public sector, offers services in seven residential centers and community centers in 10 districts of Tirana, Shkodra, Elbasan, Berat, Korça, Vlora, Durrës Lezha, Kukës and Dibra. Within the framework of decentralization, all public residential centers have passed under dependency and administration from local units.

Non-public sector, services are offered in eight residential centers and 29 community centers in the Districts of Tirana, Shkodra, Korça, Elbasan, Kukës, Durrës, Gjirokastër and Berat.

Public services for people with disabilities are offered in 17 centers or in 31% of the total number. In nonpublic centers, there are provided services for 37 centers or 69% of total number. As it can be noticed,
there is a greater increase of services provided by non-public sector. Out of 54 centers where services are offered for people with disabilities, 39 are community centers or 72% of them, while 28% provide residential services. As it can be noticed, community service has a wider reach and spread compared to residential service.

Only in 6 counties there is residential service provided (Tirana, Shkodra, Durrës, Berat, Korça, and Vlora). In all these cities, except the city of Berat, there are also special schools, and in some of them also psychiatric hospitals which altogether complete better the puzzle of services for people with disabilities, but on the other hand, these types of services are inexistent. That causes the needs of people with disabilities in those cities to be aggravated. Thus, there is no residential services in 6 other counties (Fier, Elbasan, Dibra, Kukës, and Lezha). There is a concentration of centers and services only in certain cities, leaving uncovered the needs of people with disabilities in other cities. So, out of 15 public centers and 8 nonpublic centers, in Shkodra it is concentrated 59% of them, whereas 13% in Tirana, and 13% in Berat, whereas the rest in Korça, Durrës and Vlora.

Community services cover 10 counties inhabited by 80% of the total population. In the county of Vlora and Fier, there are not provided any community services. Out of 39 community services, 17 or 43% of services are offered in Tirana, 15%, are offered in Korça, 13% to 18% in Shkodra and Elbasan, Berat and Krumë. The rest of the counties such as Lezha, Durrës, Gjirokastra, Dibra, all-together comprise 11% of service centers. In 54, residential and community centers, there are 2,147 people with disabilities who benefit from services thereof. Residential centers provide services for 352 people with disabilities, while in the communitarian ones, there are 1,795 beneficiaries. Since these services are located in larger urban centers, the needs for services in more distanced areas are only partially fulfilled. These services are currently provided by the central government and are part of decentralization towards empowering of the local government. Existing community-based services, are offered by international and local NGOs. But even these services are concentrated mainly in Tirana and other cities with better infrastructure. Meanwhile, all respective institutions, are eager to improve residential services and the development of day support services within the family and community based services across the country.

**Number of centers of public and private residential services, is displayed below**

<table>
<thead>
<tr>
<th>RESIDENTIAL SERVICES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Public entities</strong></td>
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<tr>
<td>No.</td>
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<td>1.</td>
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<td>5.</td>
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<td>6.</td>
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<tr>
<td>7.</td>
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<tr>
<td><strong>Nonpublic entities</strong></td>
</tr>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
</tbody>
</table>
3. Center “Misionaret e Bamirësisë Nënë Tereza” Shkodër 54 beneficiaries
4. Ecclesiastic Legal Person “Shtëpia Rregullatore e Bashkësisë Misionaret e Dashurisë” Shkodër 24 beneficiaries
5. Papa Giovani XXIII Shkodër 8 beneficiaries
6. Center “Misionaret e Bamirësisë Nënë Tereza” Tiranë
7. Zoti e do Shqipërënë Foundation Marikaj/Tiranë 24 beneficiaries

DAILY SERVICES
Public entities
1. Development Center Lezhë 35 beneficiaries
2. Development Center Korçë 25 beneficiaries
3. Development Center Shkodër 54 beneficiaries
4. Balash center Elbasan 40 beneficiaries
5. Day center Kuçovë 8 beneficiaries
6. Day center Kukës 12 beneficiaries
7. Day center Librazhd 10 beneficiaries

Non public entities
1. Ndihmoni Jetën Center Tiranë 19 beneficiaries
2. “Të qëndrojmë së bashku” Social Center Tiranë 50 beneficiaries
3. Shtëpia e Kuqe Center Tiranë 9 beneficiaries
4. Dora e Ngrohtë Center Tepelenë 9 beneficiaries
5. Shoqata për edukimin e shurdhëve dhe integrimin e tyre Shkodër 10 beneficiaries
6. Capodarco Association Tiranë 59 beneficiaries
7. “Shën-Asti” Foundation Berat 17 beneficiaries

COMMUNITARIAN SERVICES
1. “Drita e Shpresës” Center Pogradec 120 beneficiaries
2. “Nehemia” Foundation Has – Kukës 50 beneficiaries
3. Shoqata e Perfitimit fizik ditor Korçë 50 beneficiaries

The number of people with disabilities in categories (year 2010)

<table>
<thead>
<tr>
<th>Classification</th>
<th>Total</th>
<th>PWD</th>
<th>Caregivers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Persons with disabilities born or become later in life, from causes unrelated to employment</td>
<td>76,975</td>
<td>61,887</td>
<td>15,098</td>
</tr>
<tr>
<td>Mental, sensory, physical</td>
<td>53,783</td>
<td>46,281</td>
<td>7,502</td>
</tr>
<tr>
<td>Blind</td>
<td>15,410</td>
<td>11,635</td>
<td>3,775</td>
</tr>
<tr>
<td>Paraplegic and tetraplegic</td>
<td>7,792</td>
<td>3,971</td>
<td>3,821</td>
</tr>
</tbody>
</table>
Children with mental, physical and sensory disabilities, based on law 9355 are entitled to the monthly payment of 9,300 Albanian Lekë per person, and so much also for the payment of their legal guardian. In case they continue high school, this payment is doubled and it is tripled when pursuing higher education, encouraging this way their education.

Also we can mention children that have benefited “status of the blind” based on the DCM 8098 dated 03.28.1996, Article 1, which stipulates:

- Beneficiaries from this law are all persons with full or partial loss of sight, congenital or acquired, which according to medical criteria are disabled in normal conditions.

Children with the “Status of the Blind” are entitled to free services and have certain rights stipulated on relevant sections of DCM, such as (an assistance payment for the blind, legal guardian, payments for continuing secondary and university education, as well as other services).

Also, excluded from taxes are the handicapped children who are paraplegic and tetraplegic invalids, based on Decision 387 dated 05.31.2001, which includes:

- taxes for consular services;
- taxes for use of radio-television sets;
- taxes for use of telephones;
- taxes for enrollment in higher education;
- taxes for aerial border crossing of the Republic of Albania;
- taxes for navigation document;
- taxes for cleaning, waste removal and composting
- taxes for amateur hunting and fishing;
- taxes for solidarity for the public order and defense
- taxes for annual registration of vehicles;

Community service for persons with disabilities

All social services for persons with disabilities until 2002 have been offered in two classic forms: residential service in development institutions and centers, and government program for economic support of persons entitled to the disability payments and in other cases with payment of legal guardian. From this year, as part of efforts to expand the typology of service for persons with disabilities is undertaken a national-wide activity aimed at improving the national social services for persons with disabilities, while reducing closed residential service in favor of decentralized and communitarian service and gradually applying more modern forms of service.

Data for centers and services:

Korça Development Center

The building on which the facility of this center is accommodated, is of 1931, a gift for orphan children by patriotic families of Korça. Until 1950, this building served as an orphanage, and from that time till 1969 has been the sanatorium hospital ward of the city. From 1964 to 1994 it has provided services for people with mental and physical retardation, it was called “Asylum” and under the Ministry of Health. After the creating of MLSAE0, in 1994, this institution was renamed “Dallandyshet” Residential Development Centre, Korçë. This center has a successful collaboration with ASED Foundation which made possible the construction of the annex to this center with special facilities for the rehabilitation of individuals with mental and physical problems, as well as reconstruction of the whole building in general.
Durrës Development Center
In 1984 in the town of Durrës, it was set up an institution for treatment of persons with disabilities, which was called Physical-Mental Hospital, which initially treated 15 children. Later on, in 1990, their number reached 22.
In 1994 the institution moved to the neighborhood 12 of Durrës, in one of two storey buildings, where it is still found to this day.

Berat Development Center.
The residential center started its activity in 1963. This center has worked in its beginnings with abandoned dystrophic children of physical and mental disabilities of 3 -15 years of age. This institution functioned as such until 1991.
After 1994, in collaboration with the Foundation ASED, it was made possible not only the reconstruction of the building but also began a new era of training for staff which began to apply new models and practices in the treatment of children and youth with disabilities in this center.

Development Center Shkodra
- The facility of this center was built in 1973. This building has remained unchanged to this day. However, in 1994 its name was changed from: the Hospital of Children with Mental Retardation, to Development Center; to suit its turning into an institution of social care.

Development Center Vlorë
This center formerly called the House of Preschool Children, was built in 1960. At this institution there were treated dozens of orphaned children aged 3 - 6 years old, who past this age were transferred to the orphanage of Tirana.
In July 2001, the institution changed its operation and the type of service it provided, being transformed from a Home for Preschool Children, to a Residential Care Center for children with disabilities 6-18 years of age. During the year 2002, in collaboration with the ASED (Swiss association), the staff of this center was involved in a number of trainings aiming at the recognition and assessment of the complexity of the needs of children with disabilities.
In 2003, a full reconstruction of the building was made, based on a project designed by the ASED, and on its premises was built the University of Special Pedagogy with Albanian and Swiss professors. This is a center with modern standards that provides services for persons with disabilities. It has adequate facilities such as classrooms by specialty; physiotherapy, occupational therapy, classes for educators, as well as other modern sports facilities. The Center is equipped with teaching tools for children with disabilities who are assisted by the association ASED.

Development Center “Pëllumbat”, Tirana
This institution has been operating since 1957 and in that time it has served as a dystrophic center. With the passage of time it has undergone changes and one of the most important ones, was the transition into a rehabilitation center for disabled children, in which function it continues to operate to this day.

The type of services offered by this institution is the weekly residential service for children with disabilities, which means that children spend their weekend with their families. Is was also made possible the opening of a day center project, funded by the World Bank which provides day services for 30 clients with disabilities.

Day Care Development Center Lezhë
Development Day Care Center “Trëndafilat” Lezhë, operates as an institution of social care for people with physical and mental disabilities since 1996. During these years a considerable number of 54 clients are treated in this institution. It is the only institution in the Lezha County that provides day care services for clients with disabilities. Certainly that over the years the demand has been constantly increasing from parents to treat their children in this institution.
Development Day Care Center “Atelia” Korçë

Development Day Care Center “Atelia” Korçë, is created and functions since July 2002. The Center’s Activity is primarily to assist people with disabilities and their parents. The building was reconstructed by ASED which has made a great contribution also towards the training of the staff. The institution provides an opportunity to offer day services for individuals with disabilities in the city of Korçë.

In the center, different activities are conducted:

**In the boys’ class, the following activities take place:**
- production of various kinds of brushes
- coloring in tracing paper and cardboard, as well as abstractionist paintings
- ornate productions on crocks and bottles
- gardening and maintenance of the interior and outer part of the premises of the institution

**In the girls’ class, the following activities take place:**
- knitting and crochet works using acrylic as raw material
- postcard products and various paintings
- productions of necklaces etc.

**Services provided by NGOs**

Needs of persons with disabilities to social services are addressed by different NGOs, which have played an important role in their rehabilitation and integration of their social life. They provide residential and day care services for persons with disabilities. Following is a list of NGOs that are licensed in the area of providing residential services for this category of individuals:

- Madonnina Del Grappa in Shkodra
- Projekti “Shpresa” in Shkodra
- Misionaret e Bamirësisë Mosrat e Nënë Terezës, Shkodra
- Zoti e do Shqipërinë, Markaj, Tirana
- Qendra “Lira” Berat

It is worth mentioning also a number of day centers funded by World Bank projects in Tirana, Durrës, Vlora and Shkodër which provide day services for persons with disabilities. Upon expiry of their functioning time, these centers will be managed by local authorities represented by the municipalities and communes.

2.2 The situation of education for children with disabilities in the years 1990 onwards

**The second phase 1992 - 1997**

Beginning and mid 1990’s set Albania in the road of big changes, in the big qualitative leap from the totalitarian to a democratic system, putting the country in the path of democracy and radical transformation. Such changes were accompanied naturally with a new attitude of Albanian social profile in view of their social and educational aspects. Parents of children with disabilities, put pressure toward integration of their children in basic education schools, refusing to enroll their children in special education schools. These changes also affected and had an impact on the education system, and no doubt the field of special education sector. Thanks to the opening of the country, mainly to western countries with a consolidated
democracy, new notions and concepts were introduced regarding the treatment and the place which the special education should take. The special period of that time, put the government, the educational institutions and community before some necessary obligation, regarding the creation of opportunities that children with disabilities be educated in equal conditions with those of their peers.

In this period, the problems and needs of children with disabilities, became first known for the public. Media began speaking of them, the first associations were established. A movement began aiming at modification and transformation of the Albanian mentality about children with disabilities and their families. These changes were associated with the opening of state borders to the Western countries and the facing of Albanians therefore with another reality. The first non governmental associations that were formed, began to address the complex needs of children with disabilities. In other words, the change started at the mentality of civil society, which was later followed by the modification of professionals’ expectations for individuals with disabilities to arrive at the reflection of these changes in government policies. An important point that showed the change of state policy, was the devolution of competences from institutions operating in the field of disability under MoH to MLSAE in 1993.

In this period, the first integration practices that made possible the integration of some students with disabilities in classrooms of basic education alongside their peers, began to be implemented. The integration of these children with disabilities in school and social life, came as a necessity of development of integration of society. Generally speaking, the integration is considered to be one of the major reforms of society in its steps towards progress. It affects not only persons with disabilities, but the entire society, each and every citizen, to avoid the serious consequences of isolation.

The process of integrating children with disabilities, is facilitated by feelings of solidarity that Albanian society had inherited from family support, and the benevolence of the employees of education. But the lack of a legal framework to open the path of integration process of children with disabilities, has slowed down this process.

Despite these efforts, there were many issues in terms of financial, material and human resources. Life characteristics and features of the Albanian society: poverty, isolation, lack of infrastructure, unemployment, the cost of health services, migration and prejudice, created difficulties in realizing the process of integration of disabled children in the learning process.

This process received strong support from many national and international non-governmental organizations, such as: Children’s Aid Direct (CAD), UNICEF, Save the Children, MEDPAK, Shoqata Kombëtare e Hanikapëve Mendorë, FSHDPAK, Ndihmoni Jetën, Organizata e të Verbërve, ANAD (Association of people with hearing impairment). This process was partly reflected in the government policy of that time. It may be pointed out that there were concrete positive efforts by the governmental structures on the rights of children with disabilities, after the official signing of the International Convention on the Rights of the Children, in February 1992. These rights were reflected in the relevant legal acts. In that scope, it’s worth mentioning the adoption of Law no. 7952, dated 06.21.1.995 of the Constitution of the Republic of Albania, for the pre-university educational system, which for the first time declared that:

**Article 3**: Citizens of the Republic of Albania, enjoy equal rights, to be educated at all levels of education ... regardless of social status, health ... and economic level.

**Article 39**: Public Special Education is an integral part of the public education system in the Republic of Albania. Public Special Education aims that through the use of specific forms and methods to ensure the fullest possible development of opportunities for people with physical, mental or emotional impairments, in accordance to their needs and requirements for a life with dignity.

This law was specified in the Normative Provision of the time for public schools, approved by the Ministry of Education, and which obliged the responsible authorities to implement it. In regard to children with disabilities, the NP in question allowed their education in both special schools and in mainstream schools. The exact quotation:
Article 62/1: Special Education Schools for students with disabilities are part of the network of public pre-university educational institutions of the Republic of Albania. Article 62/8: In villages or towns where there are no special education schools, children with disabilities can receive their education in 8-year public schools, 1-2 per class. Unfortunately, this provision was not accompanied by separate decrees for specific applications, thus leaving room for various interpretations, especially in respect to the practical aspect of education. In this way, the law did neither prohibit children with disabilities from attending mainstream schools, neither ensured appropriate education for them.

A critical overview of the process of integrating children with disabilities in basic education schools

Integration of children with disabilities in basic education schools, certainly made possible the overthrow of a mistaken mentality that had dominated Albanian society for many decades, about their education in special schools only, but it did not make it to establish a stable foothold in deepening and strengthening this process. There were some successful experiences of integrating children with disabilities in mainstream schools supported by local and international nongovernmental organizations. For one we can mention the project undertaken by the “Children’s Aid Direct” association during 1994-1996 in collaboration with the Education Directorate of Tirana and the National Association of Parents in Help of Children with mental disabilities, “undertook a process of integration of some children with disabilities in kindergartens of Tirana. Also in this period, the Association of Parents in Librazhd, today known as MEDPAK, took the initiative to include 11 children with disabilities in the school, “Genc Leka” of that city.

These initiatives were also supported by normative provisions for public education in 1996, which stated that “the integration of students with disabilities within mainstream schools, is regarded as a necessary contemporary process” without specifying the necessary solutions.

In this context, Child Development Center in Tirana, during 1997-1998 academic year, undertook a project to integrate some children with disabilities in mainstream schools of Tirana (children with hearing impairments, autism, hyperactivity, with psychomotor developmental delays, speech problems, etc.). It is noteworthy that in this period, were graduated the first students in the Faculty of Social Sciences in Social Work and Psychology branch. These young professionals were part of teams in non-governmental organizations and state institutions and practices that applied integrating methods and practices in order to realize the education of children with disabilities in mainstream schools. They helped in the social model approach to treatment and assessment of children with disabilities. It may be noteworthy that in the special school “Luigi Gurakuqi” in Tirana in 1997, with the support of the European House, a social worker was hired, creating a contemporary model in special schools, the work in a team with the participation of professionals from the different fields. But despite these efforts the process of integrating children with disabilities in mainstream schools was still a challenge that needed to go outside the framework of kindness and mercy of their teachers in receiving them in their classes. It had to be installed in the protocols and legal structures that would turn this process into a visible and tangible reality. But despite these efforts, Albanian schools were not yet ready to admit children with disabilities; teachers had not received adequate training and education, so that despite achievements there were still many failures as well.

The third phase, 2000 onwards

The leap in time from 1997 to 2000, is related to the chaos that swept the Albanian society in these years, as well as with the Kosovo crisis, which brought in the Albanian territory, a large inflow of refugees together with the accompanying problems they had. After a several year tradition in terms of integration of children with disabilities, a positive model in this field had been already established.

In this period, the joint efforts of parents of children with disabilities, the state bodies, civil society and the specialists of the field, were oriented toward the support of inclusive reform in education. This reform
aimed at providing equal opportunities in education for all students, including those with disabilities.

Inclusive education was a complex process that first and foremost, needed to be recognized and accepted by any Albanian society system and then implemented. It required undertaking of radical changes. Changes pertaining the legal framework of education, the commitment of education authorities and school administrations to increase the participation of all students in curriculums, to provide sufficient support services, qualified staff, teachers with proper training, and above all, to create a welcoming and safe school atmosphere.

Albania in this period was not yet ready to implement inclusive practices in education. We can say that only the first steps had been taken in this direction.

Data if we refer to the work results from the application of multi-year projects implemented in the regions of Tirana, Korça, Vlorë, Berat and Gjirokastra by Save the Children in collaboration with the Association “Ndihmoni Jetën” and MEDPAK have shown that students with disabilities that have participated in inclusive education have:

- Higher academic achievements
- Higher self confidence
- Better social skills

It is believed that the education of children with disabilities alongside their peers, facilitates their access to general curriculum. Inclusion creates benefits for other students as well, who learn to understand and interact better with other individuals that have special characteristics.

**First, the inclusive education reform sought legal framework changes in education**

Albanian legal framework of this field is relatively new, compared to other states’ legislation. The first law that addresses from the social perspective individuals with disabilities, is the Social Assistance Law adopted on 05/18/1993.

From a different perspective, it is noteworthy that the first law pertaining individuals with disabilities in our country, is the law of 1960, which was modified and amended several times by the Parliament. The interpretation of the law clearly shows that individuals with disabilities were treated only through the medical model, leaving out the psycho-social context in which they lived, and the importance of their integration into society. Applying the medical model became more apparent for all institutions that care for individuals with disabilities that were under the authority and jurisdiction of the Ministry of Health. This approach is also evidence of anti-social attitudes that the Albanian society displayed against individuals with disabilities. Rights of individuals with disabilities issues, were dead issues. These rights were never spoken of, and moreover there was no concrete effort to protect those rights. The society did not respect the principle of human diversity. Discriminative attitudes towards this target group, starting from among the family and then beyond the household “walls”, aggravated immensely the situation of children with disabilities. For the family, the birth of a child with disabilities was a great mishap, which should be isolated and kept secret within its confines.

The experts of this field testify that during the dictatorship, there was a tendency to hide the existence of disability diagnoses. The strong erroneous propaganda denying the existence of disability diagnoses, is another example of discriminatory and ignoring ways the problems which children with disabilities were faced. The tendency not to recognize and treat as such the diagnoses that children had, lead to lack of services and their ineffective treatment. It is noteworthy that under this pressure combined with the nuances of political-ideological era, realization of researches and realistic assessments of the situation, conditions and treatment of children with disabilities, was an utopia.
Changes that accompanied the early 1990s, brought with them the first changes in the treatment of individuals with disabilities, ranging from the broader legal framework and further on. Many nongovernmental organizations offered their financial support and technical and professional assistance in terms of treatment of children with disabilities. It began to be applied the social model of treatment of disability, along with the medical one. The most vivid example of this change was the recognition of the rights of these individuals. The state finally recognized the right of these individuals for support and social assistance. This was made possible by the amendment of Law No. 7692 of 03/31/1991 on Major Constitutional Provisions. In Article 31 of this Law it is stated: Under a certain system, everyone is entitled to social security in old age or when it has a handicap.

Law No. 7710 dated 05/18/1993: for social support and assistance, is the first legal act that paved the way for all other legal regulations in favor of treatment of individuals with disabilities. Following the passing of this law, the decree of the Council of Ministers No. 457 dated 10/08/1995: “On disability perquisite” entered force. These decrees covered individuals with disabilities or those who had become so within 21 years of age (or up to 24 if they were continuing education), in case that their disability was acknowledged by MLDWA.

To promote and encourage the involvement of these individuals in the education system aiming at expanding their knowledge, the state has allocated extra payments to individuals with disabilities who attend middle school or university.

The increase of the number of beneficiaries of social protection scheme, indicates an increase of services to this category of individuals, but it is also explained with the change of mentality and attitude of the Albanian society towards disability.

Another law that is added to this legislative package to support individuals with disabilities, is the law No. 8090 dated 03/28/1996 “On the status of the blind”, from which benefit all persons with full or partial loss of visibility, both congenital or acquired during life, verified by MLDWA.

Another law that brought innovations in the Albanian legal framework was Law No. 8092 on Mental Health which ensured “the right to free rehabilitation and treatment in social welfare institutions, public institutions of rehabilitation and education. The right to social support and services from the social worker.

Issuance of this law opened the way to the practice of social work services by professionals in this field for individuals with disabilities. Article 8 of this law states: In all psychiatric rehabilitation institutions, the Ministry of Labor and Social Affairs appoints social workers who monitor the treatment of patients from the social and protection of their rights perspective. In this context, the Ministry of Health also appointed social workers at the psychiatric specialities in the level of primary health institutions.

**In this context, in December of 2002** it was passed the Normative Provision which made the legal situation to change, supporting unequivocally the right of disabled children, to be appropriately educated. The NP does not exclude any category of children from the compulsory education, regardless of their abilities. At the same time, it provides three forms of realization of their education, such as mainstream schools, special schools and other institutions (e.g. home) in cases of that group of children who for various reasons can not attend neither mainstream school nor the special one. On this issue, **Article 57 of this NP, Chapter XIII** - “Education of Students with Special Needs”, reads as follows: [1/b] For children with disabilities of mental, physical, sensory and organic nature, the state takes care and creates opportunities and supportive structures or other diverse bodies within and without the school, for the maximum development of their potentials.

[2] The education of children with disabilities is conducted in two ways: through their integration in public education schools (**mainstream schools**) in the **framework of inclusive education** and their treatment in **separate schools or classrooms** (**special**), according to their category and specifications that they represent, which are part of a network of public pre-university educational institutions in the Republic of Albania.
[7] Children with severe mental or physical disabilities, unable to receive treatment in special schools, can be treated in other institutions as appropriate.

[16] Educational-teaching staff shall endeavor that students with disabilities do not quit school. If they do, as provided … their education can continue at home, if a parent desires so. Normative Provision of Pre-University Education (December 2002) not only ensures the right of children with disabilities to be educated in three ways, but also puts in practice their belonging into mainstream schools.

In this regard, Article 57 of the normative provision states: [10] Students with disabilities, proved to be in that condition by the health authorities are entitled the right to education in mainstream schools, 1-2 students per class. For these students the school takes action and makes overall efforts to educate and integrate them into the life of the classroom and school.

[13] To assist and facilitate the work of teachers who teach in regular classrooms in which there are students with disabilities (1-2 students per class), teachers can take advantage of one of the following alternatives:

- a) For each student with disabilities, the number of students in class is decreased by 3 (three);
- b) Teachers are reduced the weekly workload by 2 (two) classes;
- c) For every 4 (four) hours of instruction, the teacher is paid 1 (one) additional hour.

In view of the process of integration and inclusion, article 57 of the NP, now provides a range of other legal obligations for the mainstream school, pertaining the implementation of the curriculum, academic curricula, textbooks, assessment of children with disabilities in their transition from one class to another, etc. These obligations are as follows: [17]

- a) ... students with disabilities receive basic knowledge on simplified curriculums of 8-year education, tailored to their abilities and skills. Besides knowledge, with an expanded program of learning, disabled students are given the rudiments of simple practical professions.
- c) In implementing the textbooks and curricula, children’s needs and specifications are taken into account. Their application is made creatively, suited to the difficulties that students present.

12d) for individual students, whose condition is below the minimum level of curriculum or when the person represents entirely specific needs, work will continue with individualized education plans.

[18] The integration of students with disabilities with students in mainstream schools, is a necessary contemporary process, used in the practice of special schools and deemed as an important process in child development. This process is mutual and in special occasions it can be transferred to full integration.

[19] Directories of special schools must create opportunities that for certain subjects, students with disabilities follow the lessons together with students of the mainstream 8-year school, establishing cooperative ties with them. ... Besides teaching, there must be organized common educational and recreational activities.

[20] Assessment of children with disabilities is made by grades or synthesizing expressions, just like for all other students, but they pass from one level to the next without failing.

[21] At the end of eighth grade, students with disabilities in mainstream schools, in the final exams are to be tested under the special curriculum that was applied to them. The components of the final exam for this category of students, are compiled by the school itself, with the approval of the Department of Education.

Although it came rather late, the Normative Provision of 2002, marks an important milestone in the process of improving the legal framework on the rights of children with disabilities, to be educated just like their normal peers. Its adoption, paved the way for inclusive education in Albania. In this provision, for the first time it is clearly articulated the modern trend of integrating children with disabilities into
mainstream schools, and it is spoken against their segregation in special institutions and inclusive education. In its declarative perspective, the legal framework represented by the NP in force is regarded as very advanced, democratic and comparable to the standards of developed countries.

This legal platform cleared the path of many concrete initiatives to support the process of inclusion in education of children with disabilities. Thus in the years 2000-2003 MEDPAK association, in cooperation with UNICEF, CAD and MES, implemented the project called “Special Integrated Education” in the regions, Librazhd, Elbasan and Peqin. This project aimed at providing educational parity for children with disabilities.

In this scope, also the association “Ndihmoni Jetën”, during 2003-2009, in cooperation with Save the Children and the Ministry of Education and Science, implemented the project “Children with disabilities in inclusive education”, a project which aimed at inclusion of children with disabilities in 10 kindergartens and 10 schools in the city of Tirana.

The Educational Directorate of the city of Berat, through a project in collaboration with Save the Children, supported the process of inclusion of children with disabilities in kindergartens and schools of this city. Another powerful enterprise in this field has been and still remains, a project called the Project “Inclusive education - a New Millennium requirement” which since the year 2006 and onwards, is being implemented by the Association MEDPAK, in cooperation with Save the Children and Ministry of Education and Science, and in partnership with regional educational directories of Korça, Vlora and Gjirokastra. This project aims: education of children with disabilities in inclusive schools in the regions of Gjirokastra, Korça and Vlora.

The Albanian government undertook a series of actions also in respect to the improvement of the special education system by aiming at the transformation of special schools in important resource centers that will meet the needs of children with disabilities and the teachers of mainstream schools to work with this category of children. In this framework, it was opened in September of 2004 in Vlora, the branch of specialized pedagogy, which would prepare capable specialists to support and assist the process of educating children with disabilities.

Also in this period MES with Order No. 321, dated 10.11.2004 for “experimentation of psychological services in pre-university education system” legalized the implementation of psychological services at pre-university educational system, in kindergartens, in compulsory 9-year education schools, and secondary education of the urban areas of the country.

This law enabled the inclusion of psychologists and social workers in 9 year and secondary schools, thus creating more opportunities for children with disabilities who were therefore included in mainstream schools and also benefited psychosocial and social support.

In some universities of the country, are opened branches such as logopedia speech therapy and physiotherapy, which testify once more for the government’s efforts to create opportunities for children with disabilities to utilize their potential development being supported by family, educational, health and social institutions, and the community.

An important step in terms of the education of children with disabilities, is the recent drafting of the law on pre-university education.

Implementation of this law in comparison with the existing law, brought several ground-breaking innovations:

- Assessment of children by a multidisciplinary committee
- Introduction of support teachers
- Increase of the age limits for admission and graduation for children with disabilities.

In Section 6, at the RIGHT TO EDUCATION section, it is provided:

- Pre-university education (hereinafter “education”) in the Republic of Albania, is constitutionally ensured to all its citizens;
• All citizens of the Republic of Albania or foreign nationals residing in the Republic of Albania, at the age specified by this Law, within the borders of the Republic of Albania, are ensured attendance in educational institutions without discrimination on the bases of race, color, sex, language, faith or religious affiliation, nationality, ethnicity or social origin, property, kinship affiliation, health conditions or other status the citizen might have;

In Article 7 about MAIN PRINCIPLES ON THE RIGHT TO EDUCATION, it is provided:

• Each student is entitled the right to quality education.

• Students from families in need, students with special needs and those with learning difficulties, are entitled the right to special care.

Chapter 12, section 76 of this draft, is about education of children with special needs, which in the mission and principles, is clearly stated below:

• In accordance with the mission of pre-university education system and its goals, defined in this Law, the education of children with special needs aims at developing the full potential of individuals, helps improve the quality of their lives preparing them for full integration in society and at work.

• Inclusion and integration of children with special needs in mainstream kindergartens and schools of basic education is of primary importance. Attendance in specialized educational institutions, is generally temporary.

• In preschool and basic education institutions, the curriculum compiled and implemented for students with special needs, is customized in accordance to physical, mental, emotional and social development of students.

• Personalized programs for students with special needs in mainstream educational institutions, are developed by a committee composed of teachers of various fields of learning, by psychologist and an external specialist of the children with special needs. To implement a suitable program, it is imperative that in its conception, parents be involved also.

• The ministry, in cooperation with the base unit of the respective local government, provides education for children with special needs in one of two types of educational institutions, the mainstream or specialized one.

This is the first time that law envisages personalized curriculums on the basis of which children with disabilities and learning difficulties should be educated.

In Article 77 of this draft it is mentioned for the first time a multidisciplinary assessment commission, drifting away from the medical model of assessment:

• Under the local educational unit, it is set up the assessment committee that consists of doctors, psychologists, teachers, specialists for children with special needs, social workers. Parents have the right to participate in discussions of the committee about their children.

• Assessment Committee determines the type of pre-school institution and that of the basic education, that the child with special needs should attend, according to criteria established by the Ministry of Education and Science, and the Ministry of Health. Based on the judgment of the committee, the child with special needs starts first grade at age six to nine and is allowed to pursue basic education until the age of nineteen years. Assessment Committee determines which children with special needs are included in compulsory education and who are enrolled in educational institutions on basis of the desire of parents. At the request of parents, the committee decides that the child start primary education at age five or seven.

• Other duties of this committee will be determined with a sublegal act of the Minister.

Article 78 states how education of children with special needs is accomplished:

1. The attendance of kindergarten/school for children with special needs, is regulated as follows:
a. children with special needs, are educated in mainstream educational institutions, where students
with special needs, join other students, or in specialized educational institutions;

b. for children that due to severe impairment motor skills or other reasons, can not attend a
mainstream or specialized basic education, the educational institution where they are enrolled,
organizes classes at home;

c. special needs students attend secondary and university education in mainstream classes. Criteria
for attending secondary and university education by students with special needs, is determined by
the Ministry of Health and Ministry of Education and Science, and their observation is supervised
by the Assessment Committee.

2. For students with special educational needs in compulsory and optional subjects, are used:
   a. regular curriculums,
   b. tailored curriculums,
   c. specialized curriculums.

3. Director of mainstream educational institution is obliged, under this Law, to approve enrollment of each
child with special needs, in compliance to the provisions of the Assessment Commission, and provide
educational conditions under this Act and regulations issued by the relevant Minister.

4. Personalized program change within an educational institution, is decided by the Commission in
   collaboration with parents, whereas the change of the educational institution attended, is decided in
   cooperation between committees of the two educational institutions, in consultation with the Assessment
   Committee and in collaboration with the child’s parents.

5. The state provides free education for children with special needs in public educational institutions.
   According to the definition of the Evaluation Commission, children with special needs receive free transport
   from their residence to educational institution and back. The ministry and local educational unit equip with
   priority the special needs students with the necessary learning tools, the other auxiliary tools including
   those of the updated information and communications technology.

6. Students with special needs are provided with priority the sufficient educational staff, including the
   support teachers. For educational employees, who have under care children with special needs, special
courses are prepared in the institutions of higher education and in-service trainings are provided.
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