

**EVALUATION OF THE PROJECT FINANCED BY THE BANK'S POST- CONFLICT
GRANT ALBANIA
FY '98-FY'00**

**Project to support health and education facilities in Albanian district
most impacted by the conflict in Kosovo.**

WB-CSE

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1. Executive summary

The intensification of tensions in Kosovo and the arrival of the first refugees in Albania in 1998, raised concern about the latter's ability to cope with new possible waves of refugees. For this reason, the Community of Saint Egidio accepted to collaborate with the World Bank in a program whose main objective would be to support Albanian education and health facilities and, where possible, infrastructure. It appeared clear right from the start that though the main problem we were facing was an emergency situation we had also to plan on developing over time any measures we were taking. This was later called 'bridging from relief to development' and was instrumental in our choice of reserving a significant part of our general budget, allotted for all types of supplies, to the training of local personnel. Together with its knowledge of the region and experience in the country, the Community of Saint Egidio, placed its human resources, composed of all types of professionals, at the disposal of the project saving the budget notable sums.

Throughout the project there was strong collaboration with the local Albanian authorities and agencies, using a flexible consultation structure, a steering committee, which either formally or informally took part in all the program's fundamental decisions.

There were 4 types of intervention, which were variously mixed in the three temporal phases of the project, which lasted a total of 19 months. The components in which we intervened were: health facilities, education facilities, infrastructure, and emergency measures. The phases which we considered were:

1. information and knowledge collection regarding the overall picture, meetings with the first refugees and the first preventative measures and preparation for the arrival of larger numbers;
2. humanitarian, sanitary and scholastic emergencies first at Kukes and then at Lezha;
3. support, recovery and consolidation of the Albanian structures impacted by the arrival of the refugees.

The matrix of the interventions organized according to this scheme and presented in annex 1 describes in detail the correspondence between the temporal phases, components and interventions. The decision not to flatten the program to only handling the emergency aspect has meant that not only was it immediately useful in managing the refugees and supporting the Albanian structures, it has also produced some lasting results:

- the recovery and rehabilitation of several educational and health structures;
- the training of personnel;
- scientific information that might inspire new programs and that certainly have enriched our knowledge of the Albanian health structures.

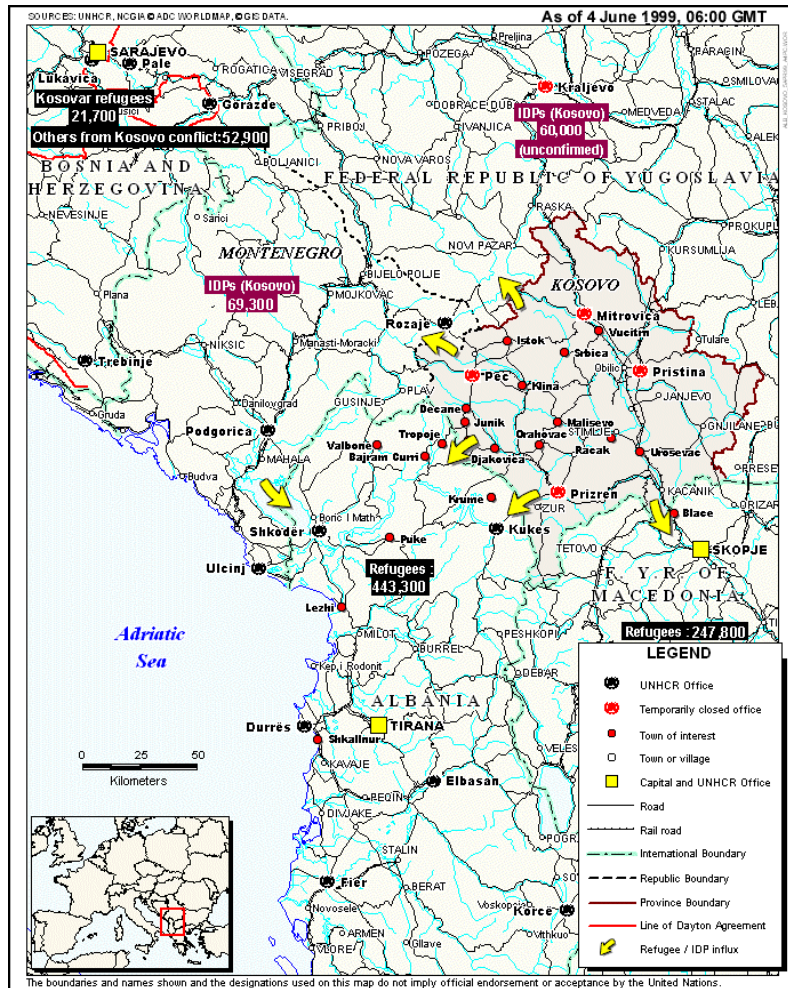
In synthesis the approach followed by the program has been one of support of the host country, Albania, with both immediate and medium and long term support, involving always, collaboration between outside experts and local personnel. This type of approach has valorized Albanian hospitality, a key factor in the success of the reception of the Kosovar refugees, and it avoided in many situations that any potential conflict of interests could arise between the host population and the refugees.

2. The Project: background and rationale

Recent Albanian history, scored by repeated and protracted political crises (starting from violent demonstrations following the collapse of the pyramid investment schemes), has had damaging effects on the economic and welfare systems of the country. Phenomena such as the increase in the emigration of trained technicians and professionals (doctors, nurses, teachers and instructors), the destruction or the damaging of public buildings, the interruption of any type of maintenance or restructuring, the decay of public works and the accentuated insecurity linked to an increase of uncontrolled crime have drastically reduced the country's ability to develop, particularly in the northern districts.

The money spent on health and education in 1997 was 3% each and for the budget of 1998 the percentages was set to drop respectively to 2.5% and 2.8%. This dramatic decline mainly hit the maintenance and logistics of the hospitals and schools, but it also betrays the effect of a significant reduction in the personnel employed in these areas, in fact the decline in employment over the five-year period 1992-97 was 63.2%. Taking only the last of these years, in 1997, the GDP decreased by 7% while inflation jumped to 42% and real salaries went up by only 10%.

Beyond these bare figures, we should emphasize how the several elements described come together to destroy the motivation and efficiency of personnel employed in health and education, inducing a vicious circle of decaying services - new emigration. The loss of faith in the institutions and in the reality of the country has produced a new inefficiency and a feeling of precariousness in everyday life. It seemed logical to us that the main goal of the international support should be to break this chain, so that to the improved functional conditions corresponded more efficient services and a reduced trend toward emigration. In this regard, looking beyond macroeconomic data, we are struck by some details: in an investigation carried out by Saint Egedio in 1996 at 139 grade schools in the district of Tirana, the percentage of students that did not complete school was higher than 20%. In another study carried out for UNICEF by Saint Egedio it was found that over 30% of the population of central Albania did not have access to running water. Urban water systems were heavily damaged and large peripheral areas were not being supplied. 87% of the samples taken from the water distributed in the area around Tirana were found to be polluted. There is no collection of data regarding the abandon of the clinics and hospitals in rural or peripheral areas, but it is certain that from a situation of overstaffing we had now reached a situation where there was a serious lack of doctors, nurses, teachers and technicians. In these months the demand for services has moved steadily from the outskirts toward the centre, from the clinics to the smaller hospitals and from these to the central ones in Tirana. Of course these examples are not exhaustive of the reality, but they seem to corroborate the conclusion we cited above regarding the need of



N.B. UNHCR'S CAPACITY TO MONITOR THE SITUATION WITHIN THE FEDERAL REPUBLIC OF YUGOSLAVIA IS LIMITED, OWING TO THE TEMPORARY RELOCATION OF ITS STAFF. THE FIGURES REPORTED ON THIS MAP HAVE TO BE CONSIDERED AS ESTIMATES.

The final figures of the movement of refugees from Kosovo as of June 1999 are illustrated in the following table.

Table 1: Daily Population Estimates

Refugees/Displaced in:	Remarks	Total
Federal Republic of Yugoslavia (Republic of Montenegro)	Arrivals 2 June: ca. 380	69,300
Federal Republic of Yugoslavia (Republic of Serbia)	No figures for displacement within Kosovo available; Yugoslav government report of 60,000 in Serbia unconfirmed	N/A
Former Yugoslav Republic of Macedonia	Camp population: 109,200 (source: UNHCR Skopje); arrivals 3 June: ca. 370; departures by air 3 June: 858 (see Table 2 below); overland departures to Albania 3 June: none (cumulative total to date: 684); Estimated number of refugees living in host families and elsewhere: 138,600 (sources: Macedonian Red Cross and government)	247,800
Albania	Arrivals from Kosovo 3 June: 165; Arrivals from Macedonia 3 June: none	443,300
Bosnia-Herzegovina	Total comprises Kosovar refugees only; Also resulting from the Kosovo conflict: 22,000 from Sandzak, 30,900 Serb, Croatians and Montenegrins from FRY (source: government)	21,700
TOTAL		782,100

It is evident that Albania has had a role of primary importance, shouldering a large part of the burden of hospitality. We can distinguish 3 temporal phases of the arrivals: the first, from September 1998 to February 1999 was characterized by the 'slow' arrival of the first wave of refugees; the second, almost explosive and concentrated at Kukes, from March 1999 to June 1999 and the third from June to August which was the rapid return. The project had to adapt rapidly to each of these phases.

THE OBJECTIVES OF THE PROGRAM

The main objective of the program was to act as support for the health services and educational structures in the districts of Shkodër, Lezhe and Tropoje to raise their functional capabilities to answer to the needs of the population, also keeping in mind the future unknown of the situation of Kosovo. Infrastructure aspects linked to the public utilities were also taken into consideration, as for example the water supply situation which was particularly serious.

Specific objectives:

1. The improvement of the health of the infant population by enhancing the basic health structures, particularly as regards rural health centres. For these the priority will go to the improvement of efficiency and effectiveness, based on services rendered, the patients served, the possibility to improve favourably the current levels of infant mortality.
2. The improvement of the health of the female population, in relation to morbidity and mortality in mothers, also through the upgrading of infrastructure, in material and equipment for obstetrics, gynaecology and emergency rooms for hospitals.
3. The protection of the health and sanitary conditions of the general population through check ups, training of personnel, upgrading of drinking water facilities, etc.
4. The rehabilitation of the infrastructure of the primary schools, particularly in rural or poor environments.
5. The improvement of the conditions and the functioning of the school, by supplying scholastic furniture and didactic material, as well as by the training and updating of teaching personnel.

3. The organization of the intervention: evaluating needs

Right from the beginning, we created a consultation mechanism which included Albanian experts both those representing the institutions variously involved in the refugee problem and those of the local authorities responsible for the several components of the project: infrastructure, health and education. This mechanism worked both through the periodic meetings of the steering committee and through informal meetings and discussions throughout the various phases of the project. It insured us of the full participation of the Albanians in the development of the program both in the identification of priorities and problematic aspects and as a source of data when from time to time we set up new initiatives.

Among the annexes you will find (**Annex 2, doc. 1,2,3**), only as examples, minutes of the some of the meetings of the steering committee and some of the numerous thank-you letters sent us by the local authorities all testifying to the appreciation of the initiatives which we instituted.

During the period of the crisis (April-June 1999), at Kukes in particular, but also at Lezha, CSE participated in the several programs started and coordinated by UNHCR in the areas concerning health and education and the general aspects of the town. Also in these cases the close connections with the local authorities - the mayor, the director of public health, the person in charge of the aqueducts and the director of the hospital - made it possible to quickly and more efficiently interpret the needs and identify priorities.

4. The three time stages of the project during the historical events of the Kosovo conflict and the project components

The project's time span can be divided into three parts, characterised by the type of intervention and by their connection to the chronology of the crisis. These can essentially be identified as follows:

November 1998 – March 1999: The first stages of the crisis. Arrival of the first groups of refugees; preparations for subsequent massive arrivals. This phase is characterised by the activities of the intervention organisation; gathering of data and acquisition of necessary; and by the first actions of assistance in the refugee settlements. The area of intervention is prevalently that of the northern districts, with the focus on Tropoje, Lezha, Shkoder, Kukes and Malesi e Madhe.

April 1999 – August 1999: Support of Albanian infrastructures and refugees during the conflict and the consequent mass exodus from Kosovo. Mass exodus across Kukes. This phase is characterised by the support offered to Kukes in the spontaneous refugees camps and to the Albanian health services. Subsequently, analogous actions will be performed in the Lezha district, while in the districts of Skoder, Malesi e Madhe and Tropoje, health assistance continues.

September 1999 – June 2000: Support of the reorganisation of health and educational facilities after the conflict. In this period, activities related to recuperation and rehabilitation, including environmental, are concentrated in order to aid Albania after the massive invasion.

All phases were characterised by the following components:

1. Support of health facilities in terms of essential drugs and equipment, automotive vehicles, minor construction work, training of health personnel and counselling for the patients. The health facilities were also involved in monitoring and research activities for the evaluation of certain problems of considerable interest: the situation of the refugees, prevalent preventable pathologies, access to services, malnutrition, etc.
2. Support of educational facilities in terms of rehabilitation of buildings and playgrounds; school furniture and teaching materials; support of summer schools for young refugee children; as well as training of teachers.

Interventions to the infrastructures, as for example, in the construction of a small aqueduct in Fierze, as an area affected by the arrival of refugees; or the supplying of electric pumps for the aqueduct in Lezha. In this sector, interventions for the supervision of environmental hygiene and garbage collection in the Kukes district must be remember.

a. The assistance to the first groups of refugees

The first districts effected by the influx of refugees from Kosovo were Tirana, Durrës, Kavaje, Lezhe, Shkodër, Kukes and Bajram Curri in each of which already in the summer of 1998 there were groups of refugees from differing zones in that region.

It was to help in handling the needs of these groups of people, as we have already said, that the components of were initially identified. They were to support the educational system and assist the local health services that were sent in by the Albanians to help the Kosovar citizens.

After carrying out a brief reconnaissance mission together with the World Bank, the Community of Saint Egidio, CSE decided in November 1998 to start its intervention in the district of Lezhe because there were already many Kosovars in that area. They had been there for many months as they had fled their homes in Kosovo in July and August 1998 when these were reached by the Yugoslav army. The intervention of CSE was concentrated particularly to help minors as a logical continuation of earlier initiatives carried out over the previous years, but also because of the relatively high density of these among the refugees, in particular those in the refugee camp set up near the vacation spot “Shtepia e punetoreve” at Shen Gjin. Agreements were made with local health authorities who assured us of their appreciation of CSE’s strengthening of the structures in the district.

Already during the brief missions we had noted very poor hygienic-sanitation conditions among the residents in the camps, but above all the lack of adequate food. Furthermore the repeated requests for sanitary and food help made by both the health authorities and by the refugees themselves appeared a good enough reason to concentrate our initial support action on alleviating malnutrition among infants which would have the positive consequence of preventing the spread of infective diseases. To this end in December 1998, we started distributing food with high protein and calorie content, above all to minors.

Furthermore, the presence throughout the country of many Kosovar children of school age had led the Albanian authorities to attempt to insert them in the national scholastic program so they would not lose the scholastic year which was already well advanced. Examining the situation CSE thought it would be useful, in agreement with local and national school authorities, to favour this process of integration of Kosovar students in the Albanian schools and, specifically, it decided to carry out structural works to modernize the elementary school located in the city of Shen Gjin as 70 young Kosovars were already residing in the nearby camp of “Shtepia e punetoreve” and with private families. So we set up a competition among local companies to examine the best way to restructure

the school “The First of May”, whose general conditions would have made it impossible to accommodate the large increase in the number of students. The winning company signed the contract to carry out the work. The work continued for 7 months, but this only because they took place in three different stages, and because the students were using the building throughout the period, scholastic continuity was more important than speed.

Initially, we decided to operate on a general level, giving the building an adequate number of toilets - previously almost absent - and improving the existing situation. Toilets were built ex-novo; some classrooms which had been changed into storerooms were cleaned up; a new room was built to serve as a workroom and as an environment where the students could carry out physical activities; doors were substituted, as were windows and their frames, on the first floor the new windows of the school were supplied with iron grates for protection; the ceiling which had leaked in several places when it rained was repaired and suitable runoff channels and downspouts were supplied.

During the works, in agreement with the World Bank, we assessed the importance of restructuring the whole building and gave the company the go ahead. At first the works concentrated on completing earlier work and the strengthening of supporting walls. Later, once the area containing the new toilets was completed, it was decided to complete this work by tiling the bathrooms to improve hygiene.

We continued the work, still with the same company, to avoid having to waste time on another competition. All the work was finished and the building was handed over in August 1999, slightly later than planned on because of a serious but entirely justifiable family problem of the owner of the company. Considering this problem CSE decided not to apply the penalties which were called for in the contract because the work was finished late. The works consisted in the systemation of the gate to the school courtyard; the painting of some rooms; the construction of a new septic system; the systemation of the protecting fence around the school; the systemation of the school courtyard; a new connection with the city aquaduct and channels for used water; channels for rain runoff; the installation of electric pumps, cisterns and pipes and the complete tiling of the bathroom environments.

The overall operation must be judged as a success because it has allowed us to realize the proposed objectives: the integration of the young Kosovars in the scholastic environment while they were in the area and the better functioning of the school also for the Albanian students even after the return of the Kosovars to their own country. Now the school is more comfortable and it can carry out its curricular activities more adequately. Further we must underline that the local community immediately appreciated the improvements and have made an effort to protect their newly refurbished school, contributing to its maintenance with the purchase of new furniture and the improvement of that which was already there.

Furthermore, during the last phase of the project, it was noticed that the school “The First of May” needed new scholastic equipment (desks, chairs, blackboards and so on) as those they had, already not in good condition, had had to support the added impact of the young Kosovars and increased school population. So it was decided to furnish the school with new and more modern furniture so that the environment would become more adequate for its function. With this objective we held a national competition in which 6 companies took part. The winning company, respecting all the obligations taken on delivered all the furniture to the school “The First of May” by February 2000.

b. Supporting other schools

Working on the proposals of some officials of the World Bank and in collaboration with the Swiss State Agency “Swiss Disaster Relief”, CSE carried out, in the month of December 1998, fact finding missions in the areas of Durrës and Kavaje visiting 3 elementary schools which were being restructured by the above-mentioned Swiss Agency. At that time these schools contained a significant number of students(2600) and of children refugees coming from Kosovo (230). They were “Hasan Koçi” and “Bajram Curri” in Durrës and “Fush-Qerret” at Kavaje.

As we mentioned earlier, the Ministry of Public Education of the Republic of Albania had issued orders to facilitate the entry of all school-age Kosovars into the Albanian state school system so they would not lose the school year that for external reasons they had had to interrupt in their own country. As agreed with the World Bank and the Swiss Agency, CSE took on the responsibility of supplying, the three above-mentioned schools which were being restructured with adequate scholastic equipment, in as much as that which the schools had had previously was obsolete and would no longer be able of satisfying the needs of the increased school population.

This material was purchased entirely in Albania, following a competition for the contract. It was manufactured by a local company which also handled the delivery to the respective schools and all took place within the terms established in the contract. In this area CSE was asked to supply differing orders based on the several phases in which the restructuring of the schools was. In fact the work carried out by the Swiss Agency at these three schools did not finish all at the same time and this obliged CSE, together with the World Bank, to spread the competitions for the needed scholastic material and the deliveries of the same out over a period of months.

The several deliveries occurred as follows:

February 1999 (at completion of the school of “Hasan Koçi” and partially for the already restructured school of “Bajram Curri” of Durrës)

June 1999 (partially for the newly restructured parts of the school “Bajram Curri” of Durrës and at the completion of the works at the school of Fush-Qerret in the district of Kavaje)

August 1999 (at the completion of the works at the school “Bajram Curri” of Durrës).

When doing the fact finding missions in December 1999, CSE proposed supplying a number of wood-burning heaters to heat the classrooms of the three schools. However, during the works, CSE was informed by the director of schools that the Swiss Agency had already decided to supply these schools with electric heating systems. So, the heaters which had already been purchased from the only Albanian factory which builds them were delivered to the following schools which had had Kosovar students:

“The First of May” of Shen Gjini (Lezhe) (500 Albanian students, 60 Kosovars);

The elementary school of Petrela (Tirana);

The elementary school of Zall-Herr (Tirana);

The elementary school of Kukes.

It was further proposed by CSE that a personal kit of pens, pencil, notebooks, etc. be distributed to each of the more than 400 students in the school of Fush-Qerret (Kavaje). Because the continuing works made the holding of regular lessons impossible, and then for the changed situation brought about by the war in Kosovo, this material was transferred to “The School of Peace” opened in Kukes by CSE and used by the children who attended that school.

c. The support to the infrastructure in the areas where the refugees went

As mentioned before, there were refugees in the district of Bajram Curri already as early as July-August 1998. In December 1998, the mayor of Fierze informed CSE that there was an emergency in his village because there were more than 300 refugees staying in either public structures or private homes. In particular, those who had found hospitality with private families were in two areas of the town which was quite without running water. The situation which this created could only further weigh on the already precarious hygienic situation of the families offering hospitality. So it was necessary to build a small aquaduct to carry water from a free source located a bit over a kilometer away to the two distribution points located in open areas in the center of the two localities. Because of the difficult circumstances in which both the hosts and their guests were living - made worse by the very cold weather - CSE decided to ask for bids from local companies to construct the aquaduct to resolve the rising problem of the lack of running water. The executive project of the winning company was submitted to an engineer of the company “ACEA” of Rome for his evaluation of its suitability and he found that it was congruous with the needs of the situation.

A contract was signed and the company handed over the finished project which satisfied all the requirements in the contract a month after the works had started. When the works finished it was necessary to pay out a higher sum than that in the contract because of unforeseen, but essential works that came up during the project making it necessary stabilize the land under the works. These sums would not have altered the terms of the competition and they were irrelevant when one considers the total amount of the project. We hear today that this aquaduct is still functioning regularly and has thus solved a chronic problem for a large number of citizens in the areas interested.

d. Assistance to health structures

In August 1998, some thousands of Kosovar refugees crossed the Albanian frontier in search of shelter as they fled the Serbian offensive in their territory. Most of them were women and children. CSE which had been working on humanitarian projects in this area since 1992, especially in the area of maternal-infant related health assistance, immediately extended its intervention to include the refugees from Kosovo. This intervention became an integral part of the program with which the World Bank entrusted CSE.

There were six health centers involved in the program:

1. The pediatric ward of the Hospital of Bajram Curri in the district of Tropoje which is located in the area southwest of Kosovo;
2. The Maternal-Infant Clinic in the city of Koplik in the district of Malesia and Madhe on the border south of Montenegro;
3. The pediatric clinic in the city of Kukes on the border with Kosovo;
- 4 and 5. The pediatric clinic in the city of Shkoder, and a center for Maternal-Infant health in the village of Vau j Dejes, also in the district of Shkoder, both are close to the northern border of Albania and on one of the main routes followed by the refugees on their way into Albania;
6. The pediatric clinic in the city of Lezhe, an area designated by the Albanian government as one of those in which refugee camps were to be built.

The modality of the intervention:

The modality of the intervention aimed at supporting Albania's basic health services and in particular pediatric services related to the arrival of the refugees from Kosovo. The modality of the intervention is articulated in the following points:

1. Facilitate the access to basic health services for all Albanian refugee children from Kosovo with periodic visits to judge their state of health and growth by training of local staff and epidemiological surveillance.
2. Supply essential drugs for patients both in hospital or for out-patients at home in cases of proved seriousness and poverty for both Albanian and Kosovar citizens.
3. Carry out screening to evaluate cases of proteo-energetic malnutrition and other nutritional deficiencies by a specific nutritional training of the the local staff and an intervention on health education and health promotion.
4. Supply supplementary nutrition for the cases of moderate or serious malnutrition.
5. Improve the transport system for health material, ill patients and health workers on their way to visit rural areas or refugee camps by the furnishing of an ambulance and a second off-road vehicle, because the almost total lack of transport facilities.
6. All the interventions will be carried out in collaboration with the district health authorities and using local Albanian personnel working in the public pediatric services. This personnel was asked to work overtime and in areas outside those in which they normally do their work when refugees were located there.

Scheme of the health centres who were included in the service Oct.1998-March 1999

Location	Typology	Personnel	Activity	No. of Patients
Bajram Curri (Tropoje)	Pediatric ward and basic consultation activity	1 pediatrician 2 generic nurses	Hospital and visits for consultation	1850 refugees 530 Albanians
Koplik (Malesia and Madhe)	Pediatric consultation and ward for rural maternity cases	1 pediatrician 2 generic nurses	Visits for consultation, screening in villages, support in ostetric ward	380 refugees 432 Albanians
Shkodër-Ilagjia Partizani	Pediatric consultation	1 pediatrician 2 generic nurses	Visits for consultation, Visits to the refugee camps in the city of Shkodër	120 refugees 452 Albanians
Vau i Dejes	Pediatric consultation and ward for rural maternity cases	1 gynacologist 2 generic nurses	Visits for consultation, screening in villages, basic ostetric activities	51 refugees 680 Albanians 251 Albanian mothers
Lezhe (Lezhe)	Pediatric consultation	1 pediatrician 1 generic doctor 3 pediatric nurses	Visits for consultation in the city. Pediatric visits in the villages, Visits to the refugee camp of Shen Gjin also for adults	180 refugees 680 Albanians 251 adult refugees
Kukes	Paediatric consultation	1 paediatrician 2 paediatric nurses	Visits for consultation in the city. Pediatric visits in the	1300 refugees 450 albanian children

Watching the problems in the health situation in the districts of Lezhe and Shkodër worsen, due to the impact of the increasing numbers of refugees from Kosovo and after having listened to the several requests of the health authorities of these districts, CSE decided it would be a good idea to supply each district with a vehicle for the transport of patients toward their respective regional hospitals. For the district of Lezhe, because of the total lack of vehicles for the Public Health direction (the albanian structure devoted to the control of drinking water, food hygiene, vaccinations, etc) and because of the difficult terrain is poorly served by the road communication system, which is worse than bad and a similar vehicle was lacking, it was decided to buy for the public health administration of the district an off-road vehicle of the type “Land Rover defender” useful both in transporting various material but also adaptable to the transport of ill patients and particularly adapted to travel on dirt roads through the mountains. After holding an international competition, this vehicle was purchased and delivered to the administration of public health of Lezhe in their quality as head of the health services of the district.

For the district of Shkodër, also it was verified that the transport of patients was strongly affected by the lack of an off road ambulance. We took the decision to supply them with an ambulance with four-wheel drive to be used on the irregular roads of the territory to pick up patients and transport them to the city hospital. In fact, in that moment the public health administration of Shkodër did not possess a similar vehicle for the transport of patients: so the decision taken appeared the best one possible as this vehicle would also be used to satisfy the needs of the Kosovar refugees, many of which were spread out in the villages of the district of Shkodër. At the end of the emergency this vehicle would continue to be used for the transport of sick patients from the villages in the district which are without any health services.

Also in this case, we held an international competition to choose which ambulance, a “FIAT DUCATO 4x4, 2.8 TD”. The vehicle was delivered to the health administration of Shkodër in February 2000, admittedly somewhat later than expected, because this vehicle had to be custom-built by FIAT and then all the health equipment had to be assembled and installed.

Visiting the refugees in the city and district of Lezhe, as well as those in the district of Kukes, and listening to the needs expressed by the various health authorities in these districts, we considered it necessary to offer support in feeding refugee children younger than 10 years old who were present in those areas, because there was no way that the Albanian health structures were not going to be

able to satisfy the many alimentary deficiencies. So we purchased a small amount of rice, cheese, milk and other basic food to be distributed urgently to the families of Kosovar refugees that were arriving in Albania after the war started. In particular we supported the refugees families in Shen Gjin.

April-June - Kukës

At the moment of the first mass arrivals of Kosovar refugees in Albania, the government of this latter together with international authorities, having reached the conclusions that the flow of refugees was destined to increase as time passed, took the decision to spread the new arrivals in camps which were being set up throughout the country. To carry out this plan, it was necessary to use all possible means of transport, both public and private. Naturally a similar action needed urgent financial support to pay for the hire of the means of transport. The Albanian government, in serious economic straits, asked for help from the international agencies present in the country. The World Bank was one of these which then turned to CSE and asked them transfer an amount from general resources of the project to contribute in this effort. After having received an official request from the Ministry of Finance, CSE requested the necessary approval from the World Bank and then released the \$50,000 which was the requested contribution to the Ministry of Finance. According to a communication subsequently received from the Ministry of Finance the contribution was entirely used in for the objective for which it was requested.

a. Sanitary aide

Confronted with the serious health questions posed by the emergency, Sant'Egidio chose to enhance the Albanian health infrastructure present in Kukës, and in particular the only clinic for pregnant mothers and infants in the city, which was already working within management assistance of Sant'Egidio.

In situations such as this the most vulnerable part of the population which suffers is that composed of pregnant mothers and infants and the majority of Kosovar refugees were women and children. It was important to intervene immediately with a program to support the children and mothers health, often nursing.

This aid was offered totally free, there were more than 8,500 patients, in less than two months of work. The work load came down in mid June when the refugees went back to Kosovo.

The reports from the Crisis Unit of the Albanian government were alarming and while the logistic situation was not improving the refugees were helped by the Albanian people who pitched in with their own meagre resources of food and emergency shelters. The fact that one never knew how many refugees would arrive on any single day only complicated things. The difficult health situation in northern Albania raised the risk of a breakout of a contagious disease such as a diarrhea infection or meningial sepsis. We have to remember that there had been a cholera epidemic in

southern Albania in 1994 and the last polio epidemic to have hit eastern Europe started right in Kukes in 1996.

The following table will give some information in this area.

Albania and the district of Kukes-Has. Population and health statistics.

	Albania	Kukes	Macedonia
Inhabitants	3,182,417	104,731	2,190,000
Birth rate	21.96 per 1000	34.7 per 1000	31 per 1000
Mortality rate	7.54 per 1000	7.1 per 1000	7.3 per 1000
Infant mortality rate	34 per 1000	40 per 1000	20 per 1000
GDP pro capita in US\$	820	n.a.	990

Source UNFPA - UNICEF

As far as the number of refugees is concerned, UNHCR estimated about 40,000 were being put up by the local Albanian population in the town. The most important impromptu camps were: the camp of the Mosque in the center of the town, the New Camp, the Potato Warehouse Camp, the Zabel Camp and the Playground Camp.

These camps, made up as often as not of tractors with sheets of plastic stretched over them contained very variable populations, some estimates put their populations between 15,000 to 25,000 and to these numbers we have to add those that only crossed through the city or stayed only a couple of days (often this flow was amounted to 10,000 people a day).

In the city, in the square above the police station, there was an area where they placed the refugees headed for other areas. This center was constantly overcrowded and a realistic estimate of the number of people it contained was not possible. These were the poorest of the refugees, those who were not able to maintain themselves. They accepted to be transferred to camps organized by the Albanian authorities and by UNHCR in other areas around Albania.

At the beginning of April, there were no organized camps in Kukes. The Italians in Operazione Arcobaleno were setting up one near the “Uzhina” mine, called Kukes 1.

The Italian Red Cross set up a field hospital and a helicopter landing field to transport out the most serious cases.

The burden of the services offered the refugees weighed heavily on the Albanian infrastructure, particularly on the school buildings, filled with people. Shortly however the Kosovars were forced to leave these buildings. At the town hall UNHCR distributed a free daily ration of bread (500 grams per day per person) for a maximum of 10,000 refugees per day.

The public health system at Kukes had collapsed. The civil hospital was crowded with old people in serious condition and could not accept other sick people. Those who came were forced to stay nearby until they could be treated.

Aside from the Community, the other international organization present in Kukes in the first days of the crisis were:

The International Medical Corps with a clinic for adults and some doctors who visited the camps and helped patients there;

The Italian Red Cross which was setting up a field hospital and at the moment treated only the emergency cases who arrived from the border;

Medecines Sans Confins with a infirmary tent near the border to give the refugees their first health assistance;

UNICEF whose only action was a vaccination campaign for polio and measles.

Later many other NGOs arrived to help the refugees.

The pediatric service at the Poliklinik of Kukes was the only structure (excluding the pediatric ward which only had 18 beds) which tried to handle all the requests for pediatric help from a population which was estimated to be between 70,000 and 90,000 person.

The district of Kukes, like other Albanian districts, concentrates its extra-hospital services, such as specialized activities and pediatrics in a single structure for each district and it is located in the main city. The Director of Primary Health, the second highest health official, is in charge of the pediatric service and is mostly concerned with the vaccination service and keeping infectious diseases under control. In some districts, including Kukes, the Community of Sant'Egidio has, since 1994, integrated this service with a project to prevent and treat malnutrition in infants, endemic in this area of Albania.

At the beginning of the crisis, the personnel of the Pediatric Clinic of Kukes was composed of one pediatrician, also in charge of the Pediatric Hospital of the district, two general doctors and three nurses. The Pediatric Clinic, located in the center of the town, was in a convenient position as concerns the camps of the refugees because it was centrally located.

Our intervention followed six principle lines:

1) Strengthening the service hiring doctors and nurses from among the Kosovar refugees and then adding specialized

THE PAEDIATRIC SERVICE IN KUKES FOR KOSOVO REFUGEES

- STAFF FROM ITALY:
 - 1 M.D. COORDINATOR
 - 1 M.D. INFECTIVOL
 - 1 NURSE
 - 2 SOCIAL ASSISTANTS
 - 1 LANGUAGE ASSISTANT
- STAFF FROM ALBANIA
 - 1 PAEDIATRICIAN
 - 2 GP
 - 2 NURSES
- STAFF FROM KOSOVO:
 - 2 PAEDIATRICIANS
 - 1 NURSE
 - 2 LANGUAGE ASSISTANTS

volunteer doctors and medical personnel from Italy.

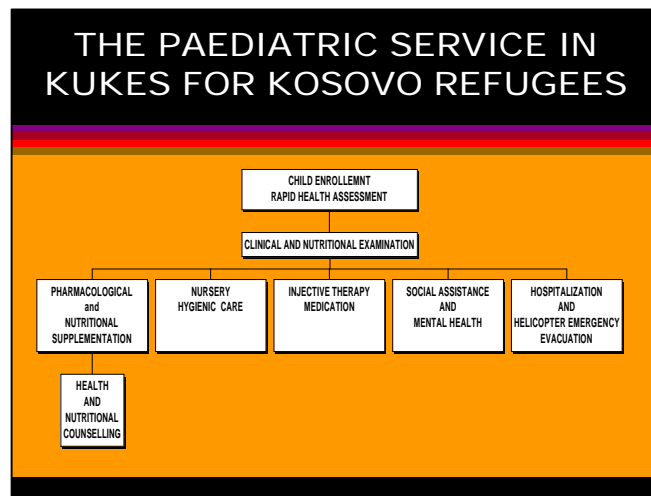
- 2) A rapid evaluation of the health and nutritional needs of the child and the identification of those cases where the child's life was at risk.
- 3) The managing of the most common pediatric pathologies and of the nutritional and hygienic needs connected with them.
- 4) The free distribution of essential medicines, nutritional supplements and sanitary material.
- 5) A connection with the Hospital of Kukes and the field hospital of the Italian Red Cross for cases needing hospitalization or specialized treatment.
- 6) Coordination with all the other aid organizations present to look into a possible integration of the services.

Working within an Albanian structure, obviously well accepted by the refugees, and including two pediatricians, a nurse and two translators from among the Kosovar refugees, contributed to making the intervention very effective.

The clinic was composed of four rooms, two for visits, one a nursery and infirmary and the last a storeroom for food and finally there was the bathroom.

The entrance had two large corridors used respectively as waiting room and reception. In the second of these, where the crowd of refugees was more intense, priority was given to the more serious cases, as they were identified by the health personnel on duty, and to newborn babies. In any case, all those with any complaint were accepted and they received a number which guaranteed them a visit within the day.

But the waits were long and often interrupted by the arrival of other urgent cases. Trying to avoid that serious cases were missed and became worse during the wait, there were periodic re-evaluations carried out by two volunteers who helped in the room with little activities (in general an Italian nurse and a Kosovar translator). The patients admitted to the clinic, after this first screening, were invited to come for the visit, nutritional evaluation, possible infirmary or hygienic intervention and during the same visit they received any medicines or food. At the end of the process, when the medicines or food were given over, either a doctor or a nurse would take the mother or person accompanying the child aside and instruct them and explain to them the treatment of diarrhea and



the importance of breast-feeding. In general all were invited to return if only to tell us how things were working out.

Evaluating health conditions

All the children were submitted to an initial rapid evaluation by a doctor or a nurse and classified using the following main categories:

1. Cough and respiratory difficulties
2. Diarrhea and dehydration
3. Fever
4. Signs of neurological problems (convulsions, agitated status or lethargy)
5. Exanthemata or other pathologies on the skin
6. Ear problems
7. Malnutrition
8. Wounds

Following this there was a more detailed clinical examination including a general evaluation of health conditions, of the psycho-muscular development, of the immune system and of chronic pathologic conditions such as, congenital heart problems, tumors, diabetes, etc.)

The nutritional state was evaluated using the weight/age ratio suggested by NCHS/WHO. Anemia was evaluated from the pallor of the mucous membranes and the palms.

Rickets was evaluated on the clinical evaluation of the rickets rosario and by an enlargement of the epiphysis.

An evaluation of the shelter/dwelling (among the tractors or in a house) of the family was an integral part of the visit and also the health conditions of the mother (obviously we tried to treat her if we found that she was ill).

All nursing mothers were given a 3-day supply of biscuits or rice to serve as a nutritional integration and it was established that they would receive a daily dose of iron sulphate and folic acid for a month. They also received information about breast-feeding and problems connected to it

Rapid health assessment on main problems and/or symptoms:

- COUGH OR DIFFICULT BREATHING
- DIARRHOEA AND DEHYDRATION
- FEVER
- CONVULSIONS
- LETHARGIC OR UNCONSCIOUS
- WOUNDS
- NOT ABLE TO DRINK
- SKIN INFECTIONS
- MALNUTRITION- ANOEMIA
- EAR AND EYES PROBLEMS
- CRYING AND PANIC CRISIS

Child Nutritional Assessment and supplementation

- Low weight child: <2sd weight/age NCHS/WHO standard
- Very low weight child <3sd NCHS
- Anemia: pallor of conjunctival
- All Children over 1 year received biscuits.
- Low weight child 0-6 m. received specific infant formula (just in case of mother's lactation failure)
- Low weight child 3-9 months received special Plasmon Rice Cream.
- Low weight children over 1 year received milk UHT, rice and biscuits.
- Very low weight child received specific nutritional assistance.

(Ingorgo, pain and infection). We gave the same type of treatment and nutritional integration to pregnant women who only came to have their baby examined.

Some results

The following chart shows the distribution by age of the 6,414 children visited and treated (3477 were males and 2937 were girls) during the 5 weeks of the intervention. The average age was 3.2 ± 2.8 and 36% were less than one year old. 70% were under 3 years of age.

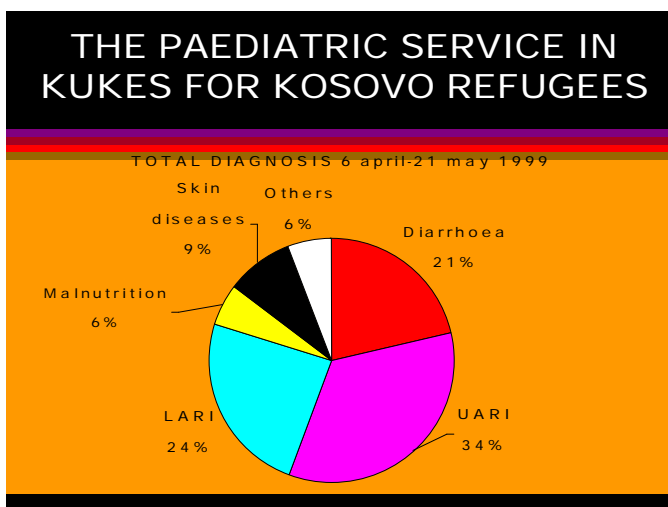
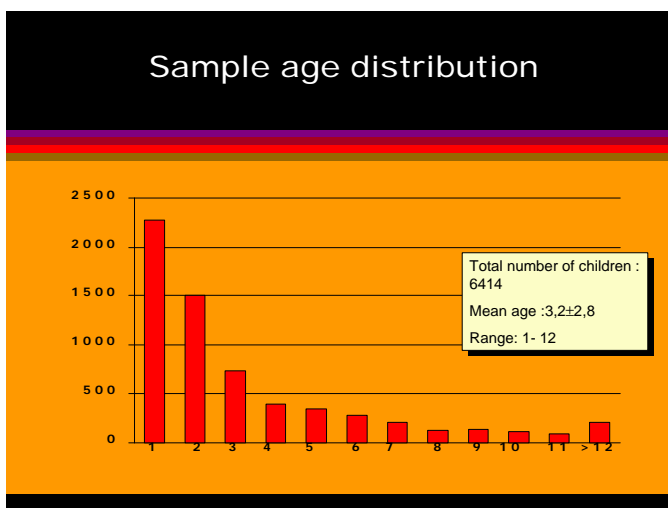
Mothers' health and nutritional assessment and supplementation

- Rapid mothers' health assessment
- Medical treatment and advice
- Referral to other specific Health Clinic
- Pregnant and lactating mothers received food supply (Milk, Rice, Biscuits) and Iron and Folic acid supply for 1 month

The main locations our little patients had come from were: Prizren, Dragash, Malishevo or Gjiakova.

The next chart shows the type of ailment of the over 9,000 diagnoses which we carried out. As you can see Acute Respiratory Infections were the most common pathology, both as Upper Acute Respiratory Infections (UARI) 34% and as Lower Acute Respiratory Infections (LARI) 24%.

These were followed by diarrhea pathologies, 21%. As was to be expected, illnesses connected with the cold represented the main health problem among the pediatric population of the refugees in Kukes, while the high incidence of diarrhea, the second largest type of disease, reflected the nutritional disorders and the problems connected with the

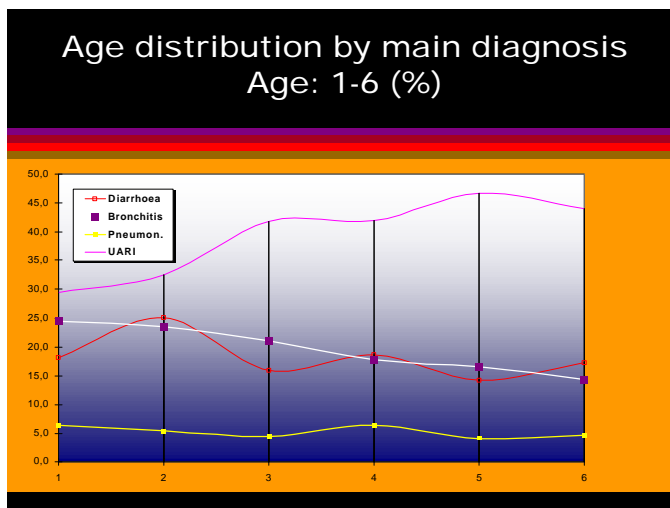


safety of the food and water supply.

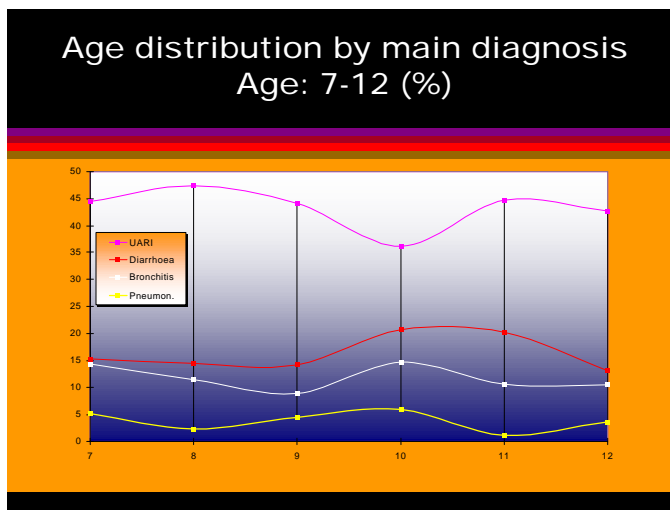
Nutritional deficiencies came in at a lower level, only reaching around 6% of the total diagnoses.

Notwithstanding the precarious hygiene conditions in the camps, particularly in the impromptu ones, the Kosovar families, with their self-organized social system, demonstrated a remarkable ability to protect themselves. This is confirmed by the low level of malnutrition and skin parasites such as scabies and lice. Breaking down the groups of pathologies into single diagnoses, non-hemorrhagic diarrhea was the most frequent, this was followed by pharyngitis, bronchitis, cold, dermatitis and earache. This picture seems coherent with the age distribution and the living conditions of the population in question.

The next table shows the distribution of the patients per age and per main diagnoses. First of all, we note that UARI (violet line) is the most common diagnosis in all subgroups and that the trend increases with the increase in



age, above all in the first 3 years. Secondly we see that pneumonia (yellow line) is well represented in all groups with the frequency of its distribution located between 5% and 10%. Bronchitis on the other hand tends to decrease with age (white line).



The trend of the diarrhetic diseases (red line) is the mirror image with an opposite trend, they were more common in children than in babies, with a peak in the second year, more or less in coincidence with the weaning process.

From 7 to 12 years of age diarrhetic diseases are more common than bronchitis, pneumonia is present and does not change in frequency and the UARI are as always the most common diagnosis. A comparison with the data from the surveillance system of OMS for the whole of Albania shows a similar trend for diarrhetic pathologies, while the prevalence of respiratory diseases is more common

in Kukes, perhaps this is because the climate is colder and the refugees were in poorer conditions when they arrived.

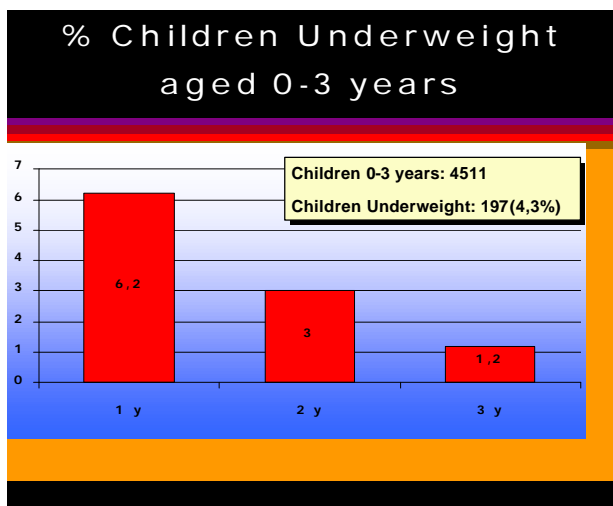
Other Diseases

We have seen that scabies and pediculosis were much less common than we had expected them to be. On the other hand, the 6 cases of tuberculosis in infants which were found among the refugees were important (they were all sent to Tirana for treatment). As far as non-infective diseases are concerned, the low number of children with psychologic disorders is probably attributable to the extremely youth of the patients visited.

Three cases of leukemia and 2 of diabetes were diagnosed and transferred to Tirana, while 5 children with heart problems were sent to the Italian field hospital to then be sent on to Italy for treatment.

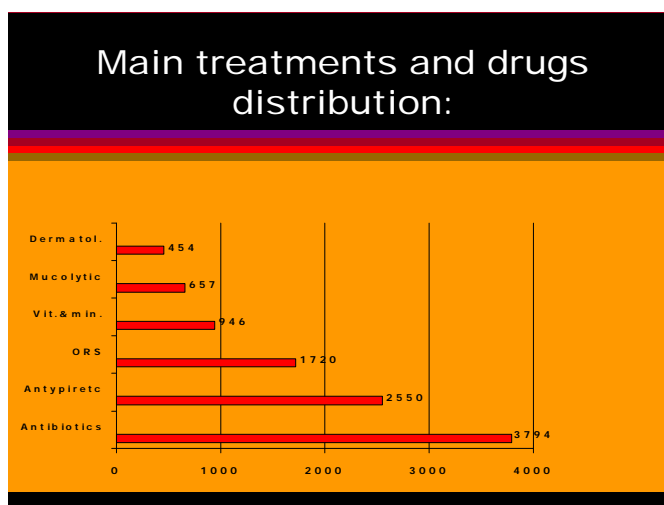
Nutritional state

We evaluated the underweight state to supply specific alimentary supplements. As you can see in the following chart, 3.6% of the children were within the qualifying criteria. When considering the very young, less than a year old that percentage went up to 6.2%. Most of these were linked with a blockage in nursing by the mothers. Rickets and anemia were the most frequently observed nutritional disorders.



The next chart shows the distribution of treatments and medicines:

Oral antibiotics, antipyretics and rehydrants were the most frequent medicines and therapies.



Finally, a word on the death rate among the refugees from Kosovo during the

emergency. Here WHO registered a much lower value than in analogous situations, i.e. 0.17 per 10,000 per day and much lower than what was expected (1 per 10,000 per day).

This important result might be due to many factors, amongst which one might hypothesize:

1. The good general nutritional level of the refugees when they fled their homes.
2. The capacity of the Kosovar families to protect their children and in general the weaker members.
3. Albanian hospitals.
4. International help.
5. The pediatric service and the mobile units placed in the field by the project of Sant'Egidio.

To have had such a low death rate must depend on a series of variables, but certainly the total would have been more tragic if international solidarity had not been present.

Mobile medical unit

Starting in the first days in April, having seen the precarious situation in the impromptu camps and the overcrowding of their health structures, Sant'Egidio decided to set up a special Mobile medical unit, which was to identify, point out and, where possible, treat patients who could not be moved or were dangerous to move. The personnel of this mobile unit were composed of doctors, nurses and some volunteers, both Kosovars and Italians. Their field of operations, at least initially, was the Potato Warehouse Camp and the camps nearby, where some 15,000 refugees were living, in terrible hygienic conditions, without any sanitary services and without any support infrastructure (water, electricity, heating, etc.).

Women and children were living in the old, abandoned buildings, but also many old people, while a further 3,000 people were living in tractors in the courtyards or in makeshift tents.

The medical team visited and treated 1,700 people in those days with a total of 4,700 visits if you include follow up.

Basic medical assistance was offered (physical examination, screening for infective diseases, hygienic instruction and a check of the glycemic level, urine and blood pressure) and infirmary care (prevention of bedsores, the removal or positioning of catheters, parenteral therapy, etc.). Further they gave out free essential medicine (for heart conditions, antibiotics, anti-diabetes, anti-epileptics, etc.) and they did physiotherapy where this was necessary. One of the important functions of the mobile unit was to send or provide for the transportation to suitable health structures of those patients with serious conditions or others with diverse emergencies.

We found it particularly useful to involve Kosovar doctors and nurses who we recruited among the refugees on a volunteer basis, but whom we paid a regular wage, according to Albanian standards. Their knowledge of the families of the refugees and the trust which they enjoyed, allowed us to help people in difficult situations.

The mobile unit did a lot of work with the old people in the camps, they found the situation difficult both for health reasons (think of a person over 70 with several conditions: hypertension, angina pectoris, diabetes, etc.) and for the greater burden that everyday problems had for them. And then we have to add to this the concentration of the family on the problems of the youngest, moving the problems of its older members to a less important level.

So the mobile unit, while it supplied medical therapy, did not overlook the human aspect of the several situations. Another group served by this intervention were younger patients with neoplasms or conditions which were particularly debilitating, such as epilepsy. For the first they found transportation to the most appropriate medical structure, such as the hospitals of Kukes or Tirana, for the second they restarted the interrupted therapies allowing many to start a normal life again.

Disorders such as depression, anxiety or post-trauma disturbances of sleep were very frequent, above all frequent in women who had lost family members (loss of a husband) or had been through traumatic events in their village.

In any case the daily presence in the camps of the mobile unit, not only guaranteed a continuous monitoring of the critical situations (from the control of respiratory ailments to the prevention of bedsores of various origins, including those from wounds) but also furnished a reassuring presence which was able to influence positively the quality of life and psychological conditions of many 'fragile' subjects.

Aged refugees

The intervention with the old people in the Hospital of Kukes started on April 18th. Two entire wards were occupied by 40 elder patients over 75 years of age, abandoned in the dispersion of the family units during the exodus or as a consequence of the operation of resystemizing carried out by the Albanians. In general their conditions were rather precarious, both because of their long journey and also for the stress of being unable to find their families or from having lost a person close to them. Some of them had bullet wounds or had suffered physical violence. Unfortunately the hospital structure was not in a position to offer them adequate support: the rooms were unheated and the number of blankets were insufficient as were the mattresses and bedding. The hygienic conditions were disastrous, especially for the presence of numerous cases of incontinence and the inavailability of the necessary hygienic material. Food supplies were poor in quality and insufficient. Many of these old people had not been able to change clothes since arriving in Kukes.

Here the program consisted in offering a series of services that took place throughout the day:

1. Dietary integration: milk, cheese, rice and fruit
2. Hygienic and infirmary support
3. Clothes and bedding

This intervention was in addition to a lot of animation and inter-personal contact, especially with those who were non-self sufficient. With the passing of the days there was a decided improvement in the general and psychological conditions of the patients. The affection which shown the volunteers from Sant'Egidio and the gratitude which they received in those days was in itself a wonderful reward.

Further the mood created was contagious and soon the hospital personnel were involved, creating a favourable climate from the difficult situation of these old people.

b. Infrastructure support

In one of the impromptu camps organized by several family groups of Kosovars at the edge of the city near the “Potato Warehouse”, there was a total lack of hygienic services (showers and toilets). CSE, after having reached an agreement with the local authorities (mayor and the director of the municipal waterworks), the owner of the land and the Kosovar families sheltering there, and after having presented an operative project, commissioned a local construction company to lay a branch aquaduct to arrive within the fence which served as a perimeter to the impromptu camp in question. In 3 weeks, five toilets, with the necessary septic tank, and five showers, with hot and cold water were built for the families sheltering in the camp. This intervention immediately improved the hygienic situation of the camp because it allowed a minimum of services, above all to those families who had to take care of either older members or of young children and who through to use of these structures, could guarantee these more vulnerable members a minimum level of hygiene.

Once the emergency at Kukës was over, and the refugees were transferred by the Albanian government authorities to other parts of the country in mid-June 1999, CSE decided to continue their activity of aiding refugees in the district of Lezhë, where they had already been working for years in the health and educational sectors in support of local residents.

We received an urgent request from the district water authorities to substitute one of the four electric pumps which supplied the entire city with water as it had reached the end of its useful life. An immediate solution was urgent or the city of Lezhë would remain without running water and given the particularly difficult period, the summer of 1999, with a high number of refugees also counting on this infrastructure one can imagine the hygienic-health consequences of this.

After having called for international bids, CSE decided to purchase the electric pump from the only Albanian which supplies motors produced in China, because this was the original technology of the aquaduct and of the other pumps which were still functioning. The purchase of another electric motor, though with more advanced technology, would not have improved the functionality of the aquaduct. The substitution of the new equipment was handled by the administration of the aquaduct.

c. Support for the educational facilities

Right from the very beginning, Sant'Egidio was busy thinking about how to support Albanian schools. The condition of the children in the camps was tragic. It was not only the threat to their health of the cold and lack of food, or the terrible living conditions, but also their psyches were suffering from the traumas caused by violence and the need to escape from their homes, their land. For many of them, to this we must add the pain of the loss of parents, close relatives, or neighbours. Their drawings all seemed drawn by the same hand and the scene is always more or less the same: a village in flames and tanks moving through it accompanied by soldiers.

Confronted with the drama of these children, Sant'Egidio tried to help by establishing the 'Schools of Peace'.

We had to give them back a normal life, we had to break up those long cold days under the grey skies of Kukes. That is when we decided to set up 10 large tents in the field near the 'Potato Warehouse', one for each of the eight classes required of all students in Kosovo.

We used the Kosovar teachers themselves in the school. We paid them the same salary they had received in their towns in Kosovo during the years of the parallel educational systems. The school, supplied with all the necessary didactic material, started functioning regularly. The response was enthusiastic, both from the teachers, obviously happy to have a job again, but also from the children. More than 1,400 attended the School of Peace. There were so many, we were forced to hold school in shifts, one in the morning and the other in the afternoon.

June – August – Lezha

With the termination of emergency in Kukes and the transfer of authority in Kukes over the refugees then present in other areas of the country following the intervention of the Albanian government in mid June 1999, the CSE decided to continue its activities on behalf of the refugees in the Lezha district, where numerous health and educational activities benefiting the resident population had already been in progress for years.

An urgent request was received from the district's water department to replace one of the four electric pumps that supply water to the entire city, as – due to the time elapsed since their installation – one of them was extremely worn out, necessitating its immediate replacement. This was in order to prevent Lezha from being left without water, with all the imaginable consequences to health and hygiene, given particularly difficult period of the summer of 1999 and considering, furthermore, the presence in the territory of an elevated number of refugees. After having requested bids internationally, the CSE decided to buy the electric pump from the only Albanian company

handling Chinese – produced motors of the same technological origin as both the aqueduct and the one functioning pumps in use; an other type of electric motor, even one of superior technological quality, would undoubtedly have been inadequate and incompatible with the aqueduct's functional structure. The replacement of the new part was made by the same management as that of the aqueduct.

Support for the educational facilities, Lezha

A little later the experience of the Schools of Peace gained in Kukes was applied systematically throughout the district of Lezha.

During the months of May and June, more than 3,000 children from Kosovo and hundreds of Kosovar teachers benefited from this second initiative, carried out in 14 schools in the district, in close collaboration with educational authorities and local teachers

Another important initiative was linking the 'School of Peace' and the 'Country of the Rainbow'. This latter organization operates in 35 countries and has built up more than 30 years of experience of working with minors in difficulty. It attempts to get children to accept an educational path as a personal commitment. The children themselves are the supporters of the ideals of peace, justice and solidarity. Committing themselves to that which they believe in, they form a driving force not only for their own generation, but also for adults. In this way we educate a generation of sympathetic and understanding men and women, open to collaboration and dialogue and to a culture of justice and peace.

Solidarity with the poor, knocking down all boundaries or divisions between races, peoples or cultures, the just and responsible exploitation of the world's resources, for a development with involves all and not only the few rich countries, these are the themes to which the children in the Country of the Rainbow take a commitment.

Support to health facilities: a general scheme of the second temporary phase

In April 1999 the war in Kosovo saw the presence in Albania of approximately 500.000 refugees, most of them women and children, who crossed the Albanian border from the Serb offensive in their territories. The CSE goes into action with its own services and supports the humanitarian intervention in the field of mother and child health assistance. It also becomes necessary to support certain health structures of strategic importance, such as the Pediatric Hospital of Tirana, which will receive pharmaceutical supplies, including those of a specialised nature; the direction of Public Health of the Shkoder district, where all the city hospitals are crowded with refugees, will be sent pharmaceuticals and radiography materials; and the direction of Public Health of Lezha, which also will receive pharmaceutical supplies.

The health centres affected by the program are as follows:

1. The Pediatric Department of the Hospital of Bajram Curri, in the Tropje district, which borders the south-western zone of Kosovo, is re-supplied with pharmaceuticals and nutritional supplements;
2. The mother-child clinic in the city of Koplik, in the Malesia e Madhe district on the border with Montenegro.
3. The pediatric clinic of the city of Shkoder activates, with an extension in the refugee camps of Shkolla and Musik.
4. The mother-child health centre in the village of Vau i Dejes also begins action in nearby villages where there are refugee children.
5. A pediatric clinic in the village of Pllane, an out-patient clinic in the refugee camp of Shengjini and another in the camp of Danish Red Cross are added to the pediatric of the city of Lezha.

A situation of grave crisis having been verified, the objectives and manner of intervention remain the same, but the strategy has changed to an intervention of humanitarian emergency. (see method of intervention in Kukes).

Scheme of the health services and estimated number of interventions and assisted people.

Place	Tipology	Personnel	Activity	No. assisted
Aprile-Ottobre2000				
Bairam Curri (Troopoje)	Pediatric ward, primary health care	N. 1 Pediatrician N. 2 nurses	Hospitals, ambulatory visits and visits in the camps	Refugees 4.000 Albanian :300
Koplik (Malesia e Madhe)	Paediatric center and rural maternity	N.1 Pediatrician N. 2 nurses	ambulatory visits Support to the maternità ward	Refugees : 1200 Albanian: 280
Shkoder – Ilagjia Partizani	Pediatric Health Centre	N.1 Pediatrician N. 2 nurses	ambulatory visits and visits in the camps of the city of Skoder	refugees : 1800 Albanian: 380
Vau i Dejes	Pediatric Health Centre Maternity ward	N.1 Gynecologist N. 2 nurses	ambulatory visits, screening in villages, Primary maternal care	Refugees: 700 Albanian: 420
Lezhe (Lezhe)	Pediatric Health Centre Shen Gjin Camp Danish Red Cross Camp Pllane Ambulatory	N.4 Pediatrician N.2 GPs N. 6-8 nurses	ambulatory visits Pediatric visits in villages and refugees camps.	Refugees: 8000 Albanian: 1800
Kukes (Kukes)	Pediatric Health Centre	N.2 Pediatrician N.2 GPs N. 9-11 nurses	Ambulatory visits and visits in refugees camps	Refugees: 15000 Albanian: 800

Support in the reorganization of the basic paediatric service activities in the districts hardest hit by the conflict after the refugees returned to Kosovo.

Background and justification

After the crisis, which followed the NATO-Serb conflict, the conditions of the Albanian health service, particularly those in the areas where the highest number of refugees had stayed, became immediately critical. These districts were above all rural and located in mountainous areas historically the poorest and most depressed in Albania. In these areas health services had always been characterized by: the scarce and low quality of personnel, delapidated infrastructure, difficulty of communication, chronic shortages of equipment and essential medicines, high indices of infant mortality, morbidity and malnutrition. We should add, that in the 1990s, the dissolution of the communist regime has meant vast social and civil changes. These changes have brought about a break down in the civil society and no new reaggregation within the social fabric has replaced the old, instead the area has gone back to the earlier clan or ethnic aggregations which have only hindered efforts to set up the structures needed to manage public health.

During the conflict, the presence of the humanitarian organizations and in particular WB-CSE, momentarily managed to control some problems in the health services such as fleeing health workers and the lack of essential medicines and it improved some emergency services for the refugees with positive results also for the local population. Once the crisis was over, the mass and quick departure of the refugees reduced the inflow of aide to Albania leaving the health services in critical condition, the most serious of these problems could be summarized as follows (worked out by experts of CSE, Albanian health authorities and experts from the WB).

1. The resumption of the emigration of public health personnel toward cities or even abroad. Even when this personnel simply abandon the public sector and move into the private the loss to the general public is serious.
2. The difficulty in communication and transportation because of the worsening conditions of the roads.
3. The return of a scarcity of material and essential medicines in the assistance centers, with a worsening of the episodes of corruption and violence.
4. A serious environmental deterioration due to the massive presence of refugees (see the areas around Kukes), with a further worsening due to the lack of civic sense in the population. In this

area there was a serious lack of health and educational services that involved the population in the management of the environment and health and it is urgent to reactivate the valid and serious programs of health education and to start again the learning to respect the environment and public health.

5. The difficulties of the services to orient themselves toward the management of public health with programs of an educational and preventative character. It is useful to note that, in the area of preventative medicine, Albania has an active and efficient program throughout the country of infant vaccination. Further it has rational targeted programs to educate the population about pathologies of serious national and public interest such as hypothyroidism from iodine deficiency, proteo-energetic malnutrition or anemia from iron deficiency. These programs also help suggest changes in life style and dietary changes to avoid the problems caused by these conditions.

Once the WB-CSE program identified in these points the priorities for the health services in Albania, the program decided to support, in particular, the maternal-infant care centers at which CSE had been working since 1993 in the areas of both education and prevention to better support and orient the entire activity of these centers.

The network of pediatric clinics involved in the program is located in the north of Albania, with local health personnel coordinated by NGO personnel which uses the collaboration of the pediatricians from the Pediatric Clinic of Tirana dependent on the Faculty of Medicine and Surgery of the University of Tirana.

The table specifies the principle characteristics of the centers involved in the program:

Health Center	District	Rural/Urban	Hospital/Clinic	Personnel in loco	Babies 0-3 years assisted over a year
Lezhe - city*	LEZHE	Urban	Clinic	3	1500
Pllane**	LEZHE-LAC	Rural	Clinic	2	500
Burrel	MAT	Urban	Hospital	3	500
Rreshen	MIRDITA	Urban	Clinic	3	600
Peshkopje	DIRBA	Urban	Hospital	3	600
Kukes	KUKES	Urban	Clinic	3	600
Bajram Curri	TROPOJE	Urban	Hospital	3	500
Vau i Dejes	SHKODER	Rural	Hospital	3	400
Shkodër - city	SHKODER	Urban	Clinic	3	800

Koplik MALESIA AND Rural Clinic 3 500
MADHE

* This clinic has a vehicle available and carries out monthly visits in at least 10 surrounding villages where there are no health workers.

** This health center is located in a missionary institute and takes care of the mountainous area of the district of Lac.

The CSE-WB program carried out three types of intervention:

1. A program of health education for mothers and the general population.
2. A program to understand the size of the problem regarding iodine deficiency in northern Albania and to set up the services to fight it.
3. An intervention to understand and evaluate the importance of anemia caused by iron deficiency in children from 0-4 years and in pregnant and nursing mothers.

All these activities were integrated with the routine basic pediatric activities such as controlling growth and checking for malnutrition which was carried out in these centers.

Program to fight iodine deficiency (IDD) in school age children in northern Albania

Because of the particular hydrogeological situation, entire Albania villages, specially those in the north, are unfortunately struck by iodine deficiency. This deficiency has been historically present in the mountainous areas of Albania which are high and difficult even close to the coast.

The last official data relative to goitre in school age children for the entire country was around 41% (UNICEF 1995).

For the last few the fight against IDD has been entrusted to UNICEF, which through some programs, started producing iodized salt for the whole country. This worthy initiative was brought to a brusque stop in 1997, the year that Albanian finances collapsed. In fact the salt pans where the iodized salt was being produced belonged to a large financial company which then went bankrupt. From 1997 on, the production and distribution of iodized salt has almost entirely stopped. At the moment, UNICEF, together with the Institute of Public Health of Tirana, is managing to distribute iodized salt to a few Albanian cities.

Epidemiological preventative and surveillance activities such as screening in schools have been totally abandoned for years. Because of the lack of cooperation between the center and peripheral areas it is no longer possible to carry out this activity for organizational reasons.

In this confused situation, determined more by the political-economic situation in which the country has been living the last few years constantly in exceptional situations or often in real emergency health and political situations: cholera epidemic of 1994, polio epidemic of 1996, financial collapse of 1997 and the war in Kosovo 1998-99, it is difficult to find a moment of normalcy.

The Community of Sant Egedio, sensitive to this national nutritional problem, and with a solid tradition of work in pediatrics in the public health sector, extended its intervention in its 10 pediatric centers also to schools. At the moment it is only at the investigative level to discover the level of goitre.

We are studying 15 school throughout northern Albania with a total of about 10,000 students between the ages of 6 and 14 years.

The investigation, the results of which are currently being elaborated, is the largest study ever carried out in Albania in this field. At any rate the preliminary results show areas with low prevalence of around 5-15% and areas with very high prevalence of over 70%. The district with the highest level seems to be Mirdizia and closely behind it comes the district of Mat.

The investigation is planned as the survey before an intervention targeted to have as strong an impact as possible in the hardest hit zones and to prevent IDD in school age children.

Objective of the intervention:

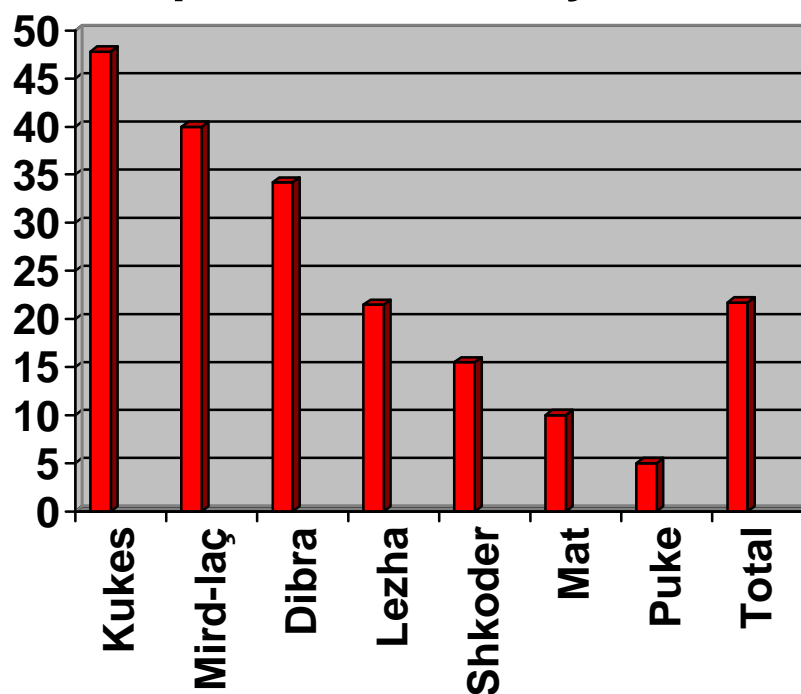
1. Evaluate the problem of iodine deficiency in isolated areas in the mountains of northern Albania.
2. Re-instate the service to fight against iodine deficiency in the youth through the activity of assessment, prevention and health education in the 10 northern districts.

Actions carried out:

1. The holding of meetings to update and coordinate the issue of IDD, with all the personnel of the program and with the experts of the Pediatric Clinic of the University of Tirana.
2. The setting up in each of the 10 district clinics of a scholastic and health commission to program the assessment, treatment, prevention and health education activities.
3. The identification of the school of the 10 districts and the screening to assess growth and the presence of thyroid goitre in a sample of 10,000 Albanian children.
4. The specific insertion of the fight against IDD in the program of health education to raise the awareness of the population through meetings with parents in the schools and programs on local televisions.

The results of the screening for the prevalence of goitre in the northern districts

Goitre prevalence % by districts

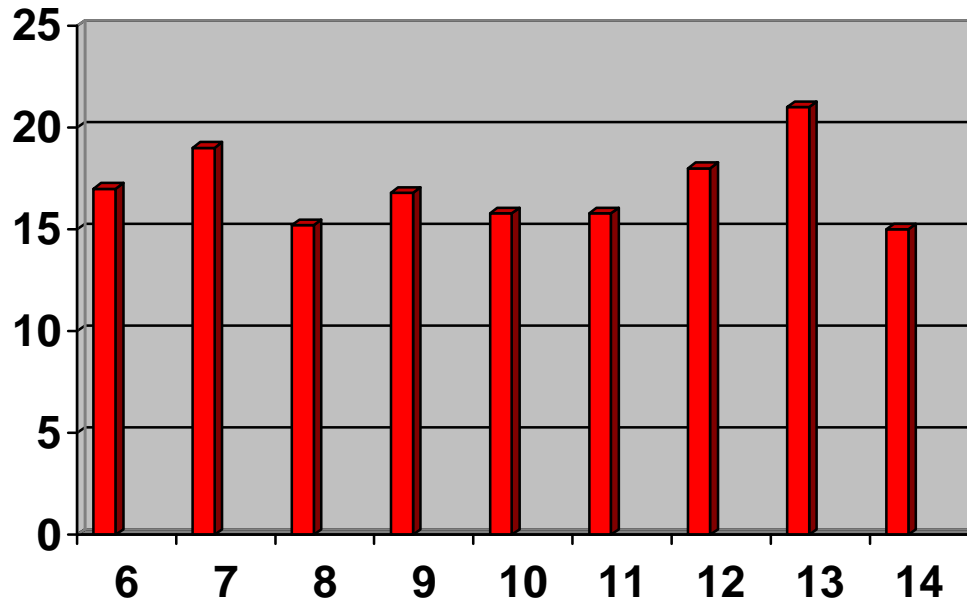


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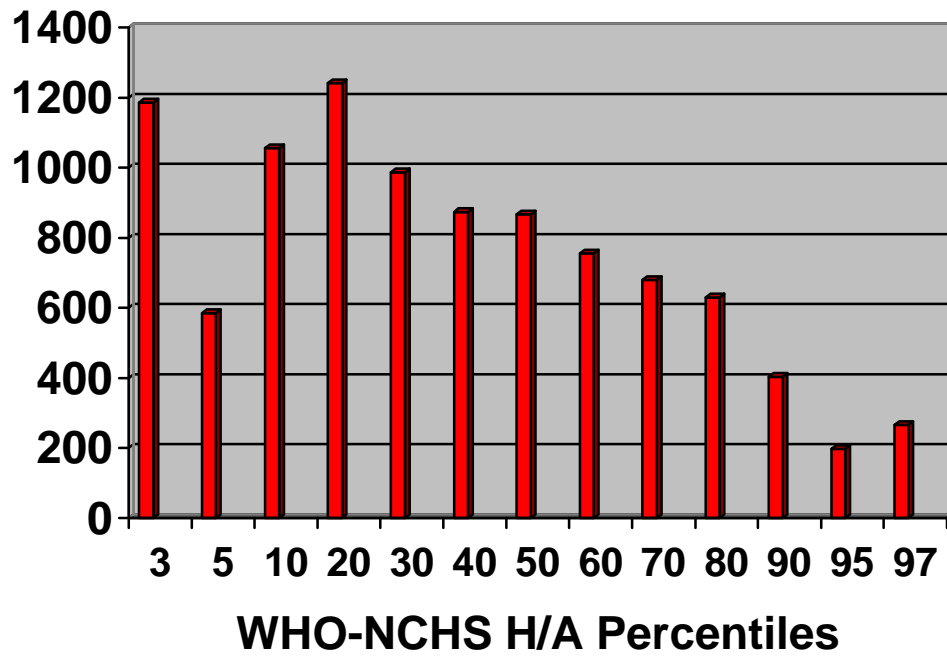
- 1) Albania is located in a territory with a high level of endemic goitre. More than 20% of the people tested were infected carriers.
- 2) The percentages of infection were not constant throughout the area, ranging from 5% to 48%.
- 3) The district with the highest level was Kukes, an area with an historically high level of endemic goitre.
- 4) Noting the wide variability over the territory of goitre, it would be better if more attention were dedicated to some districts such as Kurbin and other rural districts which have not been studied.

The age group chosen for the study showed a level of homogeneity in the distribution of goitre, in conformity with data found in international literature on goitre in age groups.

Goitre prevalence % by ages



Growth distribution



As regards the growth trends of the examined subjects, the sample showed a distribution of characteristics which we can point out:

- 1) The categorization of the subjects for height and age within the percentage values published by WHO-NCHS show that the modal values were in the 20th percentile.
- 2) About 13% of the sample, 1200 students, had values in the 3rd percentile.
- 3) In conclusion one can probably relate the retarded growth in these subjects with the iodine deficiency which was found.

These preliminary results brought to light both the endemic aspect of goitre in this area and the retarded growth of Albanian children, both of these should be studied further to discover any inter-relationships. Undoubtedly the most important contribution in this area has been to further the study of the relationship between iodine deficiency and retarded growth in school-age children, which however should be further investigated, too.

The investigation regarding the frequency of iron deficiency anemia in a sample of mothers and children in the district of Lezhe

Introduction:

Iron deficiency anemia in children is an important contributing factor for the risk of cognitive deficit and behavioural problems. In women, in particular in those who are pregnant or nursing, this pathology causes well known clinical problems which have effects on their children, and then on the whole family because of the role of the mother within the family. Because of the rather high costs of clinical analyses and of the problems of both the families and the health services in Albania, notwithstanding the well known epidemiological importance of the problem, the examination for iron deficiency is not carried out except in particular situations. This is the reason why CSE inserted an investigation to evaluate the frequency of anemia and the iron situation in children and mothers in the northern districts of the Albania within the program for the fight against infant malnutrition.

Design and method:

A transversal study was carried out on a sample of 112 children between the ages of 4-60 months and 102 mothers. The patients to be studied was chosen as follows: in two villages all the children and their mothers were invited to a screening for iron deficiency anemia and in the city the possibility of screening was offered to the mother-child pair which came to the health center for vaccinations. In this way we respected the criteria for random choice and we did not enrol subjects with acute pathologies in act. All were submitted to a clinical exam, and a blood test to carry out the tests in the table below. All the samples were examined in the same laboratory. The mothers were asked to fill out a questionnaire with questions on their own personal clinical history and that of their child, recent illnesses, cultural and economic level, work situation in the family and finally questions on the diet of each. According to the methodology recommended by the American Academy of Pediatrics, anemia in children is defined by values of Hb<11.0g/dl, iron deficiency is defined by values of ferritina <10µg/L, and/or MCV<70 fL associated to values of RDW > 14.5%. The subjects were classified based on their iron and anemia levels into four groups: Iron Sufficient Not Anemic (ISNA), Iron Sufficient Anemic (ISA), Iron Deficient Not Anemic (IDNA) and Iron Deficient Anemic (IDA). All the children and mothers found with iron deficient anemia were treated with iron dietary supplements for a month.

Preliminary results:

Table 1 contains the average age, principle laboratory exams of the children and mothers who were examined.

Variable Children	Number of subjects	Average±DS	Variable Mothers	Number of subjects	Average±DS
Age (months)	112	17.1±10	Age (years)	103	29.4±5
RBC	112	4.7±0.4	RBC	103	4.6±0.3
Hgb	112	10.3±1.1	Hgb	103	12.4±1.0
HCT	112	32.8±2.9	HCT	103	38.3±2.5
MCV	112	70.1±5.7	MCV	103	82.5±3.7
Iron-deficiency	104	56.2±26.4	Iron-deficiency	100	87.6±32.8
Ferritina	64	36.2±39.4	Ferritina	76	34.7±30.6
Transfer	63	188.8±107	Transfer	76	174.9±100

As regards the frequency of anemia and the relative iron deficiency, figure 1 shows that the frequency of infant anemia (IDA + ISA) was at 68.7%, while iron deficiency (IDA) was 42%. The distribution by age shows that anemia and the accompanying iron deficiency struck more than 80% of the sample during their first year of life. However after the third year the situation improves, though there is still a significant percentage with iron deficiency (IDA + IDNA) 19%. As far as the assessment of the carriers of thalassemia is concerned, we should say that all the subjects identified with anemia (IDA + ISA) were screened for thalassemia and three subjects showed pathologic hemoglobin values indicative of some form of thalassemia. As regards the mothers, we should mention here that 48% showed low values of Hgb (<12), and their iron level was significantly compromised (23% had low iron levels and 14% had low ferritina levels).

Successive elaboration has clarified the role of environmental and nutritional parameters on the anemia and on the levels of iron, to complete the picture of iron deficiency anemia risk in infants it would be useful to make a deeper study of the mother-child relationship.

Program to aide in the health education of the mothers of northern Albania

The need to reactivate the health education process for mothers of northern Albania encouraged us to provide a program with the following objective:

- 1) To realize an educational model that interacts effectively with the work of the health assistance clinic in a rural area where there is a high risk of infant malnutrition and morbidity and in the degraded urban areas left after the conflict in Kosovo.

Methodolgy:

- 1) The assessment of what training is needed and what information is to be transmitted.
- 2) The training, updating and motivating of functioning health personnel in basic pediatric services.
- 3) The institution of the training process aimed especially at young women in villages and leading women who will be able to transmit the educational message. This process will come about by setting up classes and courses in selected villages and suburban areas on health education.
- 4) The preparation of a health education text which contains the basic messages for a correct management of the mother's and child's health.
- 5) The holding of some health education seminars on local television.

Modality and activity of the intervention:

In January 2000 training and organizational seminars were held in Tirana to prepare the intervention on health education. The participants were the nurses and doctors who had been involved in the programs managed by CSE over recent years. The coordination and the organization was carried out by CSE health experts. The objectives of the seminars were as follows:

- 1) Initiate a process of common reflection on the training needed by Albanian mothers.
- 2) Prepare a health education text in Albanian.

Once the themes were identified and agreed on some texts were presented. These had been prepared by CSE experts and by the WHO for the preparation of lessons and the basic text for courses in health education.

By unanimous opinion of the participants, the subjects to be given priority were:

- 1) The role of the urban, rural and domestic environment in causing diseases and how to resolve these problems.
- 2) The transmission of infective diseases, particularly considering the role of carriers and pets.
- 3) Water and diarrhoea in children.

- 4) Personal hygiene and the fight against common skin ailments.
- 5) Food hygiene.
- 6) Basic principles for a healthy diet.
- 7) Hygiene during pregnancy.
- 8) Guide to correct nursing.
- 9) Prevention of accidents at home.

The seminars then standardized and established some of the didactic ways and methods and they decided to intervene in the urban and rural environment setting up a regular course of health education at the clinic. The courses were open to women of the village, in particular mothers, the lessons were held every fortnight and there were 10 lessons to a cycle. Each course was to have a minimum of 20 women. In each course every participant had the text of health education and the lesson consisted in a first part where the text was explained and a second part where the subject was discussed. Each subject was discussed by comparing the results to be expected from the several traditional behaviours and local beliefs and emphasizing the positive message of the text. Mothers proved to be a valid carrier of the educational messages who understood the good sense of the lesson and applied it at home. These women were then later used by health personnel as assistants in spreading health education over the community.

Thirty three courses of health education were carried out over the 6 months the intervention lasted: 5 in the district of Shkoder, 3 in that of Malesia and Madhe, 2 in Tropoje, 3 at Kukes, 4 at Dibra, 4 at Mat, 2 in Rreshen, 8 in Lezhe-Lac and 2 at Puk. About 900 women attended them. The differences in the number of courses were due to the logistics of the territory, lack of means of transport and other types of difficulties for connections. In spite of difficulties television services with the entire course of health education were realized on the local networks in the districts of Lezha, Mat and Puke. A radio course on many health education subjects in the urban environment was held in Kukes.

The text used for the course was very useful. It was distributed to all the participants of the courses and it was a concrete didactic aide without which all the work would have been vain. Currently it is the only text on basic health education in Albania.

Infrastructure aide

After the summer of 1999, when the refugees had returned to Kosovo, the city of Kukes, which hosted a greater number of people than any other in Albania, found itself in a rather difficult period as regards the hygienic situation throughout its territory. The solid waste left by the refugees was so

evident that an urgent intervention had been requested for the entire area. So, following an explicit request from the World Bank, CSE decided to take action on two fronts.

The first, relative to helping in financing a clean-up day held in October 1999, was promoted by the British NGO "TEARFUND" and needed the cooperation of local people. These, together with Albanian and foreign NGOs who contributed the funding and work, spent a whole day collecting vast quantities of garbage littering the city. CSE contributed \$1,000 to this initiative and the final results were very positive.

The second, on the other hand was a direct intervention by CSE to contribute a more stable solution to the problem of solid waste. After meeting the mayor of the city, we discerned a complete lack of funds in the municipality governments coffers for the purchase of a vehicle for garbage collection. CSE's proposal was to furnish the director of hygiene of Kukes' city government a power shovel, which could be used both for collecting solid waste and for future public works projects in the district. The international competition was held and it was decided to buy a FIAT HITACHI digger which was then given to the mayor of Kukes as a good belonging to City Hall. The delivery of the vehicle has resolved Kukes' solid waste collection problem definitively and according to the mayor of Kukes himself it has been used several times to dig ditches and to move earth at programmed public work projects.

Similarly, following the return of the refugees to Kosovo, the general public health conditions in the district of Kukes, long with chronic shortages, suffered a further deterioration because it lacked adequate funds and structures to carry out the prevention and control services of the district health situation. Following numerous contacts between CSE and the local health authorities of Kukes the urgent need for structures to strengthen their essential structures such as, for example, the laboratory to control the city's water supply. This laboratory analyses not only the drinking water of Kukes city but also that of the other two districts in the prefecture of Kukes (Bajram Curri and Has). In fact, for some time now this laboratory had not been able to carry out its assigned tasks competently, precisely because of the chronic lack of equipment and necessary equipment. Furthermore, this situation had become much more serious because of the large increase in the local population, though temporary, caused by the presence of the refugees during the months of the conflict in Kosovo. Then, because the prefecture of Kukes is a province bordering on Kosovo, and one of the poorest in the country, it was considered necessary to satisfy this request as part of the plan to improve public health services in peripheral areas, totally lacking but as necessary for a correct administration of the health of the resident citizens.

So it was decided to supply the water laboratory of Kukes with a spectrophotometer, an electronic scales and other material useful in carrying out correct periodic analyses of the water supply.

Following an international tender, this material was purchased and delivered to the director of Public Health of Kukes who then had it installed in the laboratory for water analysis. The company which sold the material sent a technician to Albania to insure a correct installation of the equipment as well as to supply the users adequate explanations on its correct functioning. Today that equipment is regularly used by the local technicians and has shown itself essential for an exact control of water quality in the districts of Kukes, Bajram Curri and Has.

Also in the district of Lehze the health situation was problematic directly after the return of the refugees to Kosovo. Because of a lack of funds from central authorities not even the most elementary needs of prevention and health care of those in need of it in the local population could be handled. CSE, which has worked in this zone right from the beginning of its experience in Albania, had noted, particularly in the period when the refugees were present, the lack of adequate instruments for carrying out preventative analyses on women and expectant mothers. Also the public health authorities has numerous times noted the lack of equipment for echographs which had made it necessary that women be moved to Tirana whenever more specialized analyses were needed. This lack became particularly evident in the period when the refugees were present swelling the population resident in the district. So CSE decided to make up for this lack by supplying the Maternity Hospital of the city with the necessary equipment. Several international companies were contacted to arrange for the supplies.

The system was purchased and delivered to the director of public health of Lezhe, who had it installed in a room of the Maternity Hospital of Lezhe, making sure the stabilizer (UPS system) was added. This last was purchased together with the echograph machine to handle the common spikes in line tension which occur on the Albanian electric grid.

CSE decided to carry out a small intervention, which at any rate was necessary, in the elementary school in the village of Petrela in the district of Tirana. During the war this school had sheltered several Kosovars and, following a meeting with the director of the school, it was found the building needed an electrical system. This because when the electricity had been brought to the village, more than 10 years ago, yes a connection for the school had been proposed, but for a lack of funds, this latter had never been linked to the national grid. The upshot was that from the moment of construction, the school had never received electric current. So CSE, without calling for competitive bids because of the smallness of the sum involved \$1,400, decided to entrust a local technician with the job of linking the school to the national grid. The job was done in less than a month and the old, never used, electrical system was completely substituted with another of EEC standards and today it is still furnishing the school with electrical power.

Another job which was certainly much bigger was the reconstruction of two courtyards of the Gjergj Kastrioti and Lisus elementary schools of Lezhe which had for years been in pitiful condition because of the lack of maintenance by the competent authorities.

These schools had been used to house a large number of Kosovar students who had come to the city of Lezhe and its surrounding district. The public education authorities of the district had several times informed CSE of the very dangerous conditions in which these courtyards were and the threat which they represented for the children and for the residents of the houses directly connected to buildings situated around the courtyards themselves. Because of a lack of maintenance over the years the drainage pipe passing under the lower courtyard had become blocked and this had caused flooding in the higher courtyard. Furthermore the permanence of water in the area had meant the creation of a swamp, in which during the summer, insects of every type found a perfect home. The unpaved lower courtyard, without any type of maintenance for many years, had instead become a dusty field into which the outflows from the restrooms from the Gjergj Kastrioti School ran, as the necessary plumbing work had not been completed. It is easy to understand that similar conditions were a real threat for the health of the children if urgent steps were not taken.

Following a detailed discussion with representatives of the World Bank, CSE obtained from it approval to start a planning phase to restore these courtyards. CSE hired hydraulic and topographic engineers whom they could trust, to draw up an executive project. The hydraulic engineer would, during the executive part of the project supervise the works in close collaboration with CSE. When the executive project was presented, CSE contacted 5 local companies and invited them to make competing bids, including the regular documentation, so that CSE could then chose the company making the best bid to carry out the works. The documentation sent from the companies was opened on the established day in the presence of representatives of the companies and a commission purposely convoked by CSE at the office of the director of public education of the Lezhe district, which had been kindly made available for this purpose. The documentation which had been received appeared regular so the commission declared the competition valid and then informed the participants that shortly they would be communicated the name of the winning institution. The winner was the company "Ylberi" of Lezhe, with which, according to the procedures established by the World Bank, a contract was signed in which it was established that the works would be carried out as in the plan and that there would be no payment before the works were started. The company charged with these works started on them immediately after signing the contract. Complete documentation of the project which was delivered with the project when it was finished show exactly what was done. Furthermore, three times a week for the entire period while the works were being carried out, the hydraulic engineer - and when necessary the topographic engineer - representing CSE, went to the site and supervised the progress of the works, easily checked because

of the extremely detailed reports produced by the company. The engineer himself, on his own responsibility, produced three detailed progress reports during the works, which were to serve CSE in determining payment to be handed over to the construction company for work completed up to that moment, as regularly agreed. The works were finished within the time period established by the contract (45 working-days) and so it was not necessary to apply any penalty for late delivery. The quality of the work, both that which can be observed and that which is hidden (construction of underground drainage channels or the repair of those already in place), was excellent as noted by periodic reports from the supervisor, the documentation from the construction company and by the final tests in which the asphalted surfaces were flooded and by the normal outflow of the water. To complete this work and avoid that the courtyard were used for improper purposes by the local population, gates were placed around the courtyards. One of these is a sliding gate to allow for the passage of trucks. The surrounding wall was completed and runoff channels for waste water from the school were directed to the appropriate sewers. The garden and basketball court were repaired. After carrying out a second test, one month before the works were handed over, which was also positive, the courtyards were officially inaugurated with a popular festival to which all the children and teachers of the schools were invited as well as all the civic and district authorities and local citizens. The comments collected from all were positive and expressed the recognition by all the inhabitants of the city of a project which was so necessary. Currently the conditions of the courtyards are very good because the teaching personnel has carried out and continue to do so a continuous and constructive action of making the students aware of the importance to the community of keeping this structure as well as possible for as long as possible through constant maintenance over the years.

9. Conclusions

1. The rapidity and effectiveness of the response

The first consideration must be given to the timeliness of the intervention, possible because the Community of Sant'Egidio was already present in Albania allowing them to intervene practically at the beginning of the emergency. Here we were lucky.

The synergy with other institutions, such as the World Bank who funded the project and the absence of red tape contributed significantly to the rapidity and effectiveness of the intervention.

A group consisting of about operatives alternated for the entire period of the emergency (about 2 months) facing the various problems as they came up. The time donated by all these operatives made our intervention strongly motivated and with a very low cost : benefit ratio.

2. The process of including and collaborating with the local population offering hospitality and their structures

Sant'Egidio's intervention did not substitute the services and local resources, poor though they were. On the contrary it allowed the full valorization and revitalization of both the structures and local personnel, both in the public health sector and the clinic. The pediatric centers, the local hospital and the center for newborns were all included in the intervention and so not allowed to remain passive and impotent spectators of the action of others. The Albanians worked with our workers and they also received an economic incentive. In this way we eliminated potential contrasts among the members of the two populations. The Albanian Health Minister communicated to us and we received many other letters of proof that this system was generally appreciated, by both the refugees and the local Albanian population.

3. The potential of a response 'in context'

Faced with an enormous influx of refugees (about 200,000 people) in a town of 25,000 inhabitants, it became necessary to carry out a carefully planned action 'in context', that is to say the ability to act exploiting local resources for the general problems. In this sense the intervention had an effect on the waterworks, sewage and solid waste disposal, with a significant involvement of unemployed Albanian workers. In this type of situation, when the local population is offered the possibility of working on jobs regarding the environment, hygiene and general problems of organization and supply, this has been very valuable in preventing, both possible health problems and also possible discontent and tension between the local population and the refugees.

4. The creation of a support network

We should point out that this was not exclusively a technical mission. Sant'Egidio has directed a wave of solidarity at Kukes with material collected throughout Europe, creating for them a significant support network. That was how we got over the problem of distance, not to say real separation, between the humanitarian intervention and public opinion.

5. Answering non-material needs immediately

It is not rare, in emergencies, for the great humanitarian machine to concentrate on the material needs, not emphasizing the 'normalization' of the lives of the refugees, which should rather be the primary objective. In fact a refugee's life is deeply marked by the traumas which he or she has had to undergo: the violence, the progressive loss of dignity linked to his or her being deprived of his or her status as a citizen, of their house, clothing and personal hygiene and the anguish over the loss of relatives, friends and other things.

A Kosovar doctor, thinking about what was most needed in his area, immediately said that they had not received food for several days (right from the beginning of the emergency in Kukes), but when the operators from Sant'Egidio asked if he wanted food, he answered that their most pressing need was another: "we have no water to wash in, give us back our dignity".

Standing in a line to call

These were the motives that determined us on concentrating our initial efforts on the school, installing in the first days, a real school in the tents. There were classes for the first 8 grades of schooling. We wanted to give back to the young, not only the appearance but also the substance of a normal life, which was starting up again, sure perhaps in a field or under a tent, but with a teacher and classes, studying and holidays and other social activities. The schools at Kukes and Lezha, involved more than 4,000 children and in a virtuous circle it spread also to the adults.

6. Involving the refugees in the answer

In this school there were, as mentioned above, teachers, monitors and people in charge of didactic programs, all were Albanians. We must not underestimate the importance of this involvement for the 'normalization' of their own daily lives. In fact in this way a first contribution was made in the effort to mend the social structure lacerated and disturbed by the deportation and the conditions in the camps.

7. Serving peace in the emergency

Ever since the war in Bosnia, Sant'Egidio has attempted to reconstruct in this area the atmosphere of solidarity and dialogue, the only base on which a future of peaceful cohabitation can rest. We teach the people peace. No real peace can exist in the Balcans until peace has entered the hearts of the Bosnians, Serbs, Albanians and Croats. So we founded the School of Peace, right in Kukes. We decided to start from the children. They are the future of the Balcans and it is they who must start dreaming of peace and refuse to grow up in the school of hate and violence. The children themselves can be the 'instructors' of peace for the adults, their teachers and their families; discussing under the tents, working together, sharing experiences from the times of war and suffering. The school of Kukes is a small example making it possible to dream of life in a world free of poverty and suffering, and also of war.

Annex 1

Project Matrix Temporary Phase 1

Action description	Component	Impact \$	Expenditure USD
Food distribution in Shen Gjijn camp December 1998	Humanitarian aid	400 k	2625,17
Starting rehabilitation School of Shen Gjijn December 1998	Educational support	500 a 60 k	82.317,17
Furnishing furniture to the schools of Hassan Koçi, Bairam Curri in Durres and Fush- Qerret in Kavaje January 1999 – August 1999	Educational support	2600 a 230 k	116.558,26
Furnishing heaters to the schools of Shen Gjijn in Lezha, Petrela and Zall-Her in Tirana and other schools in Kukes district	Educational		6.168,03
Fierze aqueduct	Infrastructure	? a 300 k	28.488,07
Drugs for Lezhe and Skoder Hospitals January 1999	Health support	5000 a 300 k	54.786,58
Drugs for the paediatric ward, Tirana Hospital March, 1999	Health	1000 a 500 k	34.351,04
Drugs for Kukes, Skoder, Tirana and Lezha, directions of PublicHealth March, 1999	Health	Not assessed	16.904,05
Assistance to paediatric health centres: Bairam Curri, Koplik, Skoder, Vau I Dejes, Lezha and Kukes. Lab instrumentation in Kukes	Health support	3881 k 2795 a	11.050,52
Off-road vehicle for Lezha Public Health Direction	Health support	Not assessed	28.660,19
Transport of refugees (april 1999)	emergency	n.a.	54.712,07
Off –road Ambulance for Skoder district	Health support	Not assessed	37.434,29

Project Matrix Temporary Phase 2

Action description	Component	Impact \$	Expenditure USD
District of Kukes: paediatric health services	Health support	15.000 k 1.500 a	7.902,53
District of Kukes: building of showers and toilets for refugees. Solid waste cleaning	Infrastructure	3.000 k	7.940,17
District of Kukes: educational facilities	Educational support	1.400 k	1.408,83
District of Lezha: educational facilities	Educational support	3.000 k 1.000 a	
District of Lezha: health services	Health facilities	8.000 k 1.800 a	
Drugs for Lezhe and Skoder Hospitals January 1999	Health support	5000 a 300 k	
Drugs for the paediatric ward, Tirana Hospital March, 1999	Health	1000 a 500 k	
Paediatric Health centres: Tropoje, Skoder, Malesia e Made	Health	7.700 k 1280 a	

Project Matrix Temporary Phase 3

Action description	Component	Impact \$	Expenditure USD
Health care: iodine survey, anemia survey and health education	Health support	11.000 a	43.296,04
Fiat Hitachi digger for garbage collection	Infrastructure	n.a.	37.974,51
Rehabilitation of the School of Petrela	Educational support	100 a	1.586,97
Ecograph	Health	n.a.	20.866,92
Gjorgj Kastrioti and Lissus Schools courtyards, Lezha district	Educational support	1.800 a	80.322,82
Laboratory instrumentation, lab of waters, Kukes	Health support	n.a.	See Matrix 1
Training Bobath	Health	40 a.	10.667,43
Text book for women	Health	n.a.	12.458,83
Clean-up day in Kukes, Paediatric Conference in Tirana		n.a.	2.014,51 997,86

Annex 2
Reference documents

REPORT OF THE COMMITTEE MEETING ABOUT THE PROJECT OF
COMUNITA' DI SANT'EGIDIO - WORLD BANK
FOR THE PROGRAM
"PROJECT TO SUPPORT HEALTH AND EDUCATION FACILITIES IN THE
ALBANIAN
DISTRICTS IMPACTED BY THE CONFLICT IN KOSOVO"

TIRANA, DECEMBER, 7th, 1998

PARTICIPANTS :

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2. P. RAGO	“
3. E. BUONOMO	“
4. M. O'DONNELL	WORLD BANK
5. P. BELINOVA	HEALTH ASSISTANT - SHKODER
6. T. PAVACI	MINISTRY OF EDUCATION - INSPECTOR
7. E. SOKOLI	DIRECTOR OF EDUCATION - LEZHA
8. LL. MARKU	DIRECTOR OF PUBLIC HEALTH - LEZHA
9. B. DUSHAJ	MAJOR OF FIERZE - BAJRAM CURRI
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REPORT

Palombi introduces S.Egidio Community and its activity in Albania. Continues illustrating the ONG philosophy, emphasising some aspects, the connection between the emergency and development, the integration and coordination over the priorities. Then Palombi asks the participants a report about their priority, and about the emergent requests connected with their qualified sector, and their geographic area.

A. Kashahu(office for refugees) thanks the Community for the consultation with the Office for Refugees, and emphasizes the importance of exchanging informations between them. He estimates the complexity of the program presented, and expresses his best wishes for a close collaboration. Tells that there is a list of most urgent needs preparing, which will be distributed within a short time. Also stresses that in Tirana exists a residence in which are lodged 43 people injured of the U.C.K, that have not gotten neither help nor assistance from any humanitarian organization.

Belinova, illustrating the situation in Shkodra stresses the absolute necessity of the materials for the first aid, means for transport of the sick, and most of structural deficiencies because of lack of electric energy heat and drinkable water. In the end he put the problem of the control of tuberculosis which seems to be reactivising with 94 new cases in only 1998. Such pathology endangers to be transported to the refugees coming, and to be spread in an uncontrolled manner. **Palombi** thanks and asks Belinova to accurately document the needs of the district and tuberculosis prevalence, showing the possible role of the information resources for new projects within the actual program. Tells also that new programs for reconstruction are activating from the World Bank for hospitals in Shkodra and other government agencies. Buonomo emphasizes the importance of supervising the contagious diseases in the presence of the big emigrant movements and the necessity of presenting the possible epidemic problems from the group of the program, in charge of public health. Palombi declares in favour the need of an ambulance, considering the small number of vehicles that district's directorate possesses (actually they have only one car), bad road conditions and the big number of rural population. In this direction are eventually help from NGO is needed.

O'Donnell communicates the willingness of the local experts of the World Bank, for collaboration in this program and, also tells that new health programs are compiling in the education field in which legal ways are slow. She stresses that the established partnership with Sant'Egidio Community will develop with fast steps.

Marku, illustrating the situation in his district, presents that for the refugees are taken precious initiatives from the part of Sant'Egidio Community and other NGO about the needs of improving refugees living conditions. Stresses especially the problem of food and heating insufficiency. Regarding the hospital emergencies, presents a request for medicine, medical means, and vehicles, which reaches the amount of 200.000 \$, because of emigrate movements is more the 30.000 units, while the budget has remain the same as before.

Palombi clarifies the interlocutors that they should select their requests about the objectives of the program and the budget that it possesses.

Marku, states that they should give priority to 10 first requests (medicine and antibiotics) and the vehicle.

Palombi, answers that the request is acceptable, emphasising that were other requests might be solved too, thanks the Community ability to collect subsidies from other donators out of the project.

Sokoli, shows his concern about the classes and school supplies missing in Lezha district, requesting fund need for 700.000 \$. Palombi clarifies that this amount is equal to 70 % of all budget, and then invites to agree only for Shengjin's school which is being frequented by Albanian and Kosovo children too. Even O'Donnell underlines that the World's Bank intervention has been more productive than in other districts, this thanks to good relationships with the director, but in this moment is needed to concentrate in the refugees situation.

Pavaci continues reflecting the budget limitations for education in Albania, 65 % of which goes for staff payment. Explains that from the help of the Italian government in the compulsory education schools are covered with textbooks average 50 % of the students. For the refugees children the textbooks are promoted by a donation of Soros foundation. But serious remains the problem of the school equipment and the conditions of some of the schools, particularly of Durresi and Tirana in which most of the Kosovo children are concentrated. Presents also the problem of epidemic sickness

like in one school in Librazhdi, 36 children have been infected from viral hepatitis, pointing here the problem of the school - public health report.

Rago tells about the planning assistance for two schools in Durresi district and one in Kavaja, which after the reconstructions made by one Swiss NGO will be provided with school equipment. In these institutions are present children from Kosovo. The discussion continues over the conditions of the school in Shengjin in which evident is the fact of necessity of reconstruction (bathrooms, water - works, new classrooms etc) in an amount of 70.000 \$. Palombi tells that from the visit of the paediatric clinic doctors, is identified a case with hepatitis among the Kosovo children.

Marku tells about the very bad conditions of the sewer and the common kitchen in the refugees camp, thing that he has become known even before with a letter directed to Sant'Egidio Community.

Dushaj speaks about the strategic importance of his city and district for the refugees movements. He observes that both camps are in good conditions and the priority remains the problem of the drinkable water, considering that might be other refugees coming. Help is also requested in the public health net.

Buonomo presents that district's authorities have requested a special help for the hospital in Bajram Curri. The Community has just finished the reconstruction of the paediatric unit and will continue to support the activity of this structure.

Palombi agrees with the necessity of an aqueducts which will bring in the city the drinkable water.

O'Donnell says that Soros foundation will buy 3000 textbooks for the Kosovo children and maybe the Ministry of Education will ask for 3000 other textbooks. The program will take into consideration this new request.

Palombi closes the meeting, setting the next meeting after one month. Invites people to collect information and documents over the conditions of the advances made are the approved projects and for the new requests that will be discussed.

**Support Program for Areas of Albania Hosting Refugees from Kosovo
World Bank – Community of S. Egidio
Albania**

Palombi: He opens the meeting making evident the innovations in the non-academic and non-bureaucratic working method as well as the spirit of collaboration between informative and competent experts. After making the necessary introductions, he gives the floor to Dr. Paolo Caputo, a World Bank expert covering problems of the post–conflict periods.

Caputo: Speaking about the history of this program, he focuses on the desire expressed by the WB to be involved and modestly contribute to the emergency process relating to Kosovo refugees on Albanian territory through S. Egidio Community, which guarantees a rapid and adequate intervention. At the beginning, it was difficult to undertake any initiative, due to the fact that the situation in Kosovo was so complicated, and at the same time, there was much confusion in Albania. It was decided to start with a flexible project, under which some fund was available, aiming at an adequate intervention. World Bank is not an active participant under the project, but it has some limited role in the financing. It is the S. Egidio Community, an organisation that appreciates working with the Albanians, which organises the job and performance. The project's goals are limited in number, but there will be some considerable results, if a concrete and rapid intervention is undertaken. Closing the speech, Caputo introduces the other members of WB team present in the meeting: Gailius Draugelis and Madelene O'Donnell.

Palombi: He thanks Dr. Caputo and invites the participants to pass on to the second issue of the agenda: further development of initiatives undertaken in the previous meeting.

Giacomini: He presents the initiatives at the implementing stage regarding school, health and logistical sectors. He speaks about the delivery of school equipment (benches, desks, stools, blackboards, stoves etc.) as well as of didactic stuff (copy books etc.) to Durrësi and Kavaja. Swiss Caritas has been involved in the reconstruction of these schools. The school in Shengjin has been partially reconstructed (new bathrooms are being built; electric system is being refurbished, old doors, windows and sewage pipes are being replaced with new ones etc.).

The first phase is coming to an end and a total of 50.000 \$ has been spent to cover the costs. In the end of the second phase, the total is estimated to mount to 75.000 \$. The work will finish by March 1999.

Palombi: He suggests that when all the job has been finished, inauguration activities should be arranged and organised, and this, not for advertising purposes, but to give hope to the local population and indicate that even in Albania there is some progress, which is also one of the project's goals.

Giacomini: In the frame of Palombi's proposal, he reminds the participants that a school is going to be inaugurated in Durres on 5 March and the actual Minister of Education is going to participate in the ceremony. These days, together with the WB delegation, we visited some schools, and in particular a school in Shkodra (Laç – Vau i Dejes), which is in a very bad condition. After that, he proposes that something has to be done for this school.

Concerning the health sector, Giacomini says that in collaboration with Dr. Marku, distribution of medicaments has already begun in Lezha. The medicaments are stored in a safe place. In addition, it has been ordered a new car (Fuori Strada) for the transportation of the sick persons. Also, a considerable quantity of medicaments is going to be delivered to Shkodra. It is to be mentioned that a whole list of medicaments is expected to come. We are aware of the difficulties regarding the provision of children with medicaments and milk. Apart from that, we are very concerned about the

establishment of an ambulance in Shkodra. Medicaments are also going to be delivered to the Paediatric Hospital in Tirana.

Regarding the water provision sector, it could be said that a contract was signed and work has already started in the water-works of Fierza. A delegation visited the construction-site these days.

Marku: He thanks for the program starting to be implemented and expresses his opinion that things are getting on well in several areas. The first set of medicaments has already arrived in Lezha, and they are intended for the people from Kosovo and local population either. He emphasises the fact that there is shortage of medicaments. It was made a control of the medicaments at the arrival point and another one is thought to be made at the exit. We intend to be very strict in the administering of the medicaments, so that they can last up to the end of the year. The hospital then will be able to face the situation and provide good services to both Albanians and Kosovo people. We hope to have the car soon, because we desperately need it. It will serve as ambulance of malnutrition for Kosovo children in Shengjini camp.

Palombi: He states that supplementary controlling over medicament delivery does not indicate that they do not trust the people engaged in the operations, but it is a rule applied by the S.Egidio Community aiming at providing trust for the donors to make investments. We are so content that 50% of the needs for medicaments has been met so far. Under an agreement between Albanian Government and Italian Embassy in Tirana the Tor Vergata University was entrusted with the task relating to virology and analysis on the epidemic hepatitis. He tells about Prof. Diviza's visit to Albania to pick up the samples needed and mentions some of his visits to several laboratories. Palombi also invites the people concerned to present other requests for emergency needs. For medical check ups of the children sheltered in the refugees' camp in Shengjin an ambulance was set up and nutrition aids were distributed over last months. We are waiting for UNCHR to notify us to start the work for refurbishing the sewage system in the camp.

Rago: He says that the car for the Public Health Directorate in Lezha is coming. With the support of WB, we are on the way to resolving the problems we have had with the customs office in terms of customs clearance.

Dushaj: Most of work has been done on Fierza water-works. Soon, a considerable part of Fierza's town will be supplied with water. It is necessary to repair another water-works and start a new project for garbage cleaning; at the same time, it is quite necessary to systemise the town's sewers. On health field, in collaboration with Franciscan nuns, it can be possible to distribute other medicaments. The local school is in need of equipment.

Palombi: He addresses to the representatives from Shkodra. He tells them that there is a delay in the delivery of the medicaments' list and their demand for a car will be taken into account.

Sallabanda: He talks about his co-operation with the S. Egidio Community, which supports for years the malnutrition program and stresses the need to immediately intervene into the water project, so that it is completed. He adds that the map showing the current needs has changed a lot, but Albania is still in an emergency state. There are still 40 chlorinating stations to be installed, which would be very useful wherever the refugees have been settled. It is understandable that lack of water is the most problematic point in the health system. Due to lack of water, the number of diarrhoea cases is estimated to be 200 times bigger than the average in the European countries. We find it indispensable to make alterations to the water chlorinating system. Our suggestion is to use hypochloride Na instead of hypochloride Ca. He stresses that chloride has to be produced not only in Tirana, but also in other regions of Albania, the staff responsible for Public Health has to be trained, and there is a great need for establishing a course to provide special training on the environmental epidemiology. The program covering the water supplies problems should continue for lack of water affects not only the health system, but also the economy, politics and the whole image of Albania.

Palombi: He says that it is the right time for EU (European Union) to give access to Albanian exports after the cholera epidemic of 1994 (for instance, fish exporting takes up about 1.11% of general export). From the epidemiological viewpoint, Palombi is convinced that there exist the

premises for other epidemics. He presents his arguments: Installed chlorinating stations work with hypochloride Na, which is not produced in Albania. It might be imported, but transportation is too expensive. We have had an idea to produce hypochloride Na here in Albania, but it can not be applied, because of the interruptions in the electricity supplies which occur time and again. Under these conditions the apparatus producing chloride can not work. Apart from this, there are too many chlorinators installed at some water-works, for instance: 600 chlorinators at only 10 regions, and it is therefore very difficult to control whether chlorinating has been done well. In addition, the events that have happened as well as the grave situation created in Albania in the course of the recent years have generated a lot of problems. It is known that 20% of Albanian population secures drinking water from the wells, and of course it is not chlorified. Finally, he agreed with the proposal to continue installation of chlorinators.

Rreshpja: He thanks S. Egidio Community for its activity in Shkodra during the period from 1991 until now. Health services established in Shkodra cover 270.000 inhabitants, including, besides Shkodra, Koplík and Puka. There are 6 hospitals with 1500 employees and 650 beds, and the average number of people hospitalised per day is 35-40. Every day, 3 to 4 patients are driven to Tirana. There are 3000 Kosovo refugees all over the region. There are 7 ambulances available, out of which 4 were bought 5 years ago; the others have been working for more than 20 years. We have had some problems concerning the car maintenance. Taking into account the needs of Shkodra region for medicaments, we have already made a list of the antibiotics and serum needed.

Palombi: He confirms that lack of serums is becoming a serious issue and he wants to know if that is a result of the high production costs or because there is no serum production at all in Albania.

Belinova: He has identified the needs of Shkodra, which is the biggest city of North Albania. There are 6 hospitals and all are in very difficult conditions. The doctors are obliged to fill the prescriptions out and after that the patients have to buy the medicine at private drug stores, although these drug stores pertain to the public structure. There are some regions, where people are so poor that they can't afford buying the medicine prescribed by the doctors. Antibiotics are scarce, especially in the Paediatric Hospital, where a great number of children from Kosovo has recently been hospitalised. There has been no milk at all for them for three months. A small laboratory that produces serums is available, but there are several difficulties concerning the hygiene and the sterilisation of their products.

Rreshpja: He stresses the fact that the main reason for the lack of serums is the production high costs. There is a laboratory, which produces serums within the hospital environments, but this is too dangerous, because of its bad hygienic and sanitary conditions (the flagellums' taps are used many times, so they might become a source of dangerous infections.).

Sallabanda: He refers to a study on the production of serum conducted by WHO (World Health Organisation), from which it was concluded that there was an alarming situation (the conditions for the production of serum could not be met). Therefore, it was decided to close the laboratory. It was for the same reason that the Minister decided to close any similar laboratory, and since then the serum has been imported from other countries. Actually, a small laboratory in the hospital of Tirana is being equipped to be available for the serum production. This is a project under a Spanish co-operation agreement. But this laboratory can not meet the needs all over Albania.

Palombi: He proposes to conduct a study on the establishment of a laboratory for serum production in Shkodra. He thinks that it will meet the needs of all the Northern Region. Initially, the costs of serums will be relatively high, but with the passing of time it will get lower than the costs of import. Palombi suggests to verify the conditions (site, electricity supplies, staff etc.). He makes a proposal to Belinova and Rreshpja to set up the laboratory first, and then decide whether to start the respective project.

Godó: He proposes to invite the other chiefs of Paediatric hospitals to take part in their meetings. The Paediatric Hospital in Tirana is the only centre that manages the paediatric scientific researches in Albania. During recent years, the number of hospitalised people has been increasing, especially this year when a great number of people from Kosovo are coming to Albania. The number of serious cases has also been growing. We would demand 3 things for the Paediatric Hospital:

- a) emergency medicaments and consumption supplies;
- b) equipment to improve services;
- c) partial reconstruction and refurbishing of the hospital.

Japanese government has promised to provide aids, which will mainly consist of hospital equipment. But the reconstruction of Paediatric Hospital and storage of the equipment to come should be treated as priorities. At the moment, the Ministry of Health can not support us financially. These difficult conditions have favoured infections in the hospitals. Definitely, if the conditions in the hospitals are improved, the demands for medicaments will drop.

Palombi: He asks the representatives from Shkodra and Tirana to provide data on the most frequent diseases, especially among Kosovo children and their general health state.

Godó: I would say that the persons suffering from tumour and blood diseases are treated in Tirana, because there are no such other centres in Albania. Usually, the number of people with pulmonary pathologies that can not be cured in ambulances increases in winter; the same thing is to be said regarding viral epidemics and other cases. Talasemia represents a serious problem, due to the fact that Albania is the only country without a research centre to conduct studies on it. There is need for a project to cover studies on Talasemia.

Palombi: He emphasises that some Italian universities are interested in talasemia and bronchitis prevention issues. Widespread of such diseases indicates that there are no structures to cover the problem countrywide. Regarding the demand about medicaments, I have to say that we have come to an agreement. As for the rest of the demands, we propose to visit the hospital and estimate its conditions. He focuses on the issue relating to establishment of an efficient information network for collecting data, especially about infantile death rate.

Sallabanda: He tells about his visit to the South of the country to see the conditions of Kosovo refugees in Fier. Actually, there are about 300 Kosovo people living in the private houses of some families they have no blood relations. The aid they have received is very small: 3\$ per capita. Red Cross has provided them with material aids two times. Local authorities are very concerned about the refugees' status for Kosovo people. The aids Kosovo people have obtained so far is a sign that they have been enjoying the same rights as Albanians. The number of children attending school is small. There are 110 children, and 80% of them must attend school, but only a few of them go to school.

Galanxhi: He says that the government-representing office responsible for refugees has established very good relations with UNHCR and other NGO-s, such as S.Egidio Community. They have made a preliminary registration of the people from Kosovo in unfavourable conditions. They have come up with the conclusion that their living conditions are worse than in Kosovo. There are about 24.000 refugees. A new law on refugee's status has been approved, but it has to be completed. According to this law, the refugees are not entitled to economic aids. The aids they have received have been sent from Italy. Refugees Office is responsible for:

a) accommodation b) providing foods supplies based on the number of family members. Some centres have been set up in the districts where there is a vast number of refugees: in Fierza, Kukes, Shkodra. Other centres will be set up in Tirana and Durres, where about 75% of refugees have settled. Another big centre will be set up in Rrogozhine. It will cover health and education problems. In Fier, they will be provided with an identity card. An Islamic NGO is going to provide food for them. As soon as Rogozhina centre is completed and available, anyone could move there. Two other centres have been rehabilitated, in Rubik and Burrel, but the refugees do not prefer to move to this area. The same thing is happening in Shkodra. Nobody wants to move to Velipoja. In Tropoja, delivery of aids to the destination is not always so safe. This month, the Municipality Mayor supported in the aids delivery to Fierza. There are health and organisation problems in Shengjini centre. We proposed to organise their movement to Shkodra. The government is paying much attention in solving emergent problems. We have to get some aid for the local population either, in order to avoid unequal treatment.

Palombi: Our program predicates to support local population, too.

Pavaci: He thanks on behalf of Ministry of Education. He considers S.Egidio Community an indisputable partner. The data on the situation is always changing, due to movement of the families to other places. Kosovo pupils are not attending schools, because they have no documents; they come from rural areas, so, their educational level is different from that of the Albanian pupils. On the other hand, there is shortage in didactic materials. If people are brought together in centres, the responsibility of the Ministry will be greater. The Ministry can not fund establishment of centres. So, inauguration ceremony of such centres is turned into a celebration. We have a limited budget of 9 million US \$, which has been planned for recovering the damages caused in schools in the recent years. Pavaci would like to remind the participants not to forget the needs of Albanians children: 1/5 of Albanian population attends schools. The Ministry of Education is very concerned about providing schooling to children from Kosovo, particularly in Tirana and Durrresi. According to my opinion, priority should be given to reconstruction and refurbishment of schools, while their equipment is to be listed the second among the priorities. The Cabinet Chief is doing his best in this regard.

Palombi: He tells participants to identify priority needs.

Sokoli: He lists all needs the schools in Lezha have. They need to be reconstructed and equipped. He appreciates all what has been done in the school of Shengjini. He points out that it is necessary to improve the surroundings of the town's schools. Improvement of the environmental conditions at schools is to be considered not only a measure to prevent infectious disease, but it also affects civil education. He is ready to prepare projects about town's schools and thinks that they are going to acquire more than they will spend. He speaks concretely and in details about this issue. It is important to build up parks, or just plant trees around schools, and refurbish the sewage system.

Palombi: He thinks that problems concerning children's health need to be treated with priority. He proposes to hold a conference, where Albanian paediatricians will participate and provide overall information on children's health nation-wide. He proposes to organise training courses managed by international experts, in order to find a unique way on fundamental topics, including schools.

Godó: He thinks that the Ministry of Health has to be involved in the process, because it its responsibility to gather data periodically.

Sallabanda: He thinks that the Paediatricians Association cannot decide by itself, without the support of the Ministry of Health. In each district there is a person responsible for data collection, but not in all the cases he/she is doing the job well. They should carefully select the data gathered. The best thing is to give a chance to these persons.

Palombi: Closing the meeting, he says that a good job has been done until now. It is also a very good basis for the future performance.

Caputo: He thinks that this project does not cover only the refugees, but also the areas where they have settled. He invites the participants to be strict in identifying the interventions, having as a model S. Egidio Community. He draws attention to the importance of common negotiations to solve the problems. He suggests to draft some other projects and present them to other donors through World Bank.

VERBAL OF STEERING COMMITTEE

TIRANA JULY 1999

ASTRIT BECI

Informes that the Directory of hospitals in Shkodra is closely collaborating with World Bank for the reconstruction of city's hospitals. The project foresees that the new surgical unit will be connected to the central hospital. He stresses the serious work that they are doing, when at the established territory are just starting the excavations of the basements. The construction activity will be terminated for 15 months and after then it will be continued to provide the necessary equipments. Otherwise informs that from a German NGO called HCC is established the fund of 200.000 USD for the reconstruction of the Polyclinic of Shkodra city, in which will be provided a new complete electric plant and a heater plant.

He adds that at Master Plan are foreseen all the respective destinations of different hospitals, but this at the same time has created some problems between the other donors, because they during their work will necessarily be referred to some indications expressed to the Master Plan, which sometimes are in collision with the project proposed from them.

Informes that the Albanian Ministry of Health has reduced the number of beds in hospitals at a maximum 35 units and in the mean time is strengthened the service of family doctor and health centre ones on the districts.

LEONARDO PALOMBI

Agrees with the reduction of beds in hospitals but only if it will be strengthened the peripheral health services. For this he remembers that CSE has the availability to intervene at some of these health centres.

ASTRIT BECI

He makes 5 priority requests: A total reconstruction of a Health Center in Breg Lumi; Maternity of Vau i Dejes, Paediatric Hospital in Shkodra city; Transfusional centre of Shkodra; Shkodra's tuberculosis's Centre. He stresses the emergency of setting up the transfusion centre because during the period when the Kosovo refugees were in Albania, in front of the cases which needed blood transfusions was not possible the intervention to face such requirement. He evidences the fact that often are introduced big projects but sometimes the main problem is concerned with the insufficiency and the lack of some essential services. To illustrate this he brings the example of tuberculosis, a disease which is spreading, and which requests a great financial pawn that is not available at the moment. He adds that it will be indispensable to supply the tuberculosis's Centre with essential materials as: a fluorograph and other equipments which are used to carry out the different analysis.

LEONARDO PALOMBI

Remembers that in preceding steering committee was talked about tuberculosis problem and a such worry is transmitted to the Minister of Sanity from CSE, when both parts agreed with the emergency intervention on the districts of Shkodra, Lezha, Kukes and Tirana. Makes the request if it is necessary to build up tuberculosis's centre or such activity is just foreseen at Master Plan.

ASTRIT BECI

Expresses an his personal opinion that it will be better to build up a centre for tuberculosis patients, when it will be the possibility to have their Clinical cards , and to distribute the medicines for the patients who don't need to be sheltered in hospital.

LEONARDO PALOMBI

Affirms that CSE has a qualified experience about the tuberculosis's problem, because of the intervention turned at the Community's hospital in Guinea – Bissau, in which are created 130 beds and the patients are treated with DOT therapy. Besides this structure, exists an health centres network, part from the hospital, when the resigned patients are carried out by different check up during the period of 6 months after the resignation. But he has the opinion that such method is not available for the reality of Shkodra.

ASTRIT BECI

Says that in Shkodra just exists the sanatorium hospital which has 70 beds, when works 6 doctors. He thinks that next to this building it will be better to build up the new anti tuberculosis's centre. He adds that the transfusion centre will be reconstruct again because the rooms when firstly was the old centre, now are given back to the their owner, according to the law of property. Affirms that the foreseen expenses for the building are about 35.000 USD. But also does exist the necessity to supply the centre with adequate materials. Actually they have only 2 refrigerators and need other equipment. Remember that because of the lack of equipments, for the moment is not possible to preserve large blood quantities. The quantity of plasma that actually is possible to preserve is about 4 – 5 sacks that are exclusively used to face a possible emergency. If is necessary to have more blood, we call the donators which make all the analysis, but at the same time buy this way, is not possible to widen the donors network. He thinks that to acquire the necessary materials for supplying this centre are foreseen about 35.000 USD.

About the tuberculosis's problem, he thinks that is the WHO's task to study the evolution of phenomenon, to know the disease's prevalence and diffusion.

About the health center of Vau i Dejes he informs that there are about 20.000 people of the area that don't have a Maternity, and in the Master Plan isn't foreseen the construction of such structure, because Master Plan referes only the reconstruction of Shkodra city's hospitals. Remember that in Vau i Dejes the birth are about 150 – 200 a year, meanwhile in Shkodra city are more or less 850 – 900 birth a year. These data aren't exactly complete, because a lot of birth are happening in the houses so aren't registered in hospital's register.

LEONARDO PALOMBI

Supports the idea that the taking place of round tables about Public Health with the participation of local and foreign experts has an extreme interest. Affirms that the main problem remain the researching of funds. Gives a great importance at the widening of tubercoloso's problem last years and insists about the necessity of a national plan for strengthenig the structures to fight him. Its also too necessary a coordination with ather donators to rediscuss the various priority. Concludes saying that the funds which CSE disposes will be used for some projects in Shkodra district.

MADELENE O'DONNELL

She affirms that CSE has the capacity to vehicle the funds faster than the World Bank do, so it will be more incident and will be more helpfully for the realisation of such projects.

ASTRIT BECI

Remembers that the Director of Public Health of the district has a coordination role and develop his job connecting the activities of different institutions. Furthermore, an specific lack is its little economic possibility which ought to be grown up.

LLESH MARKU

Explains that Lezha's hospital is going to be reconstructed due to a four year programme performed and managed by Swiss Caritas. But actually the main problem of the district's Sanity is the inadequateness of essential services on that area when is verified a great number of population moved by mountains. To illustrate this, he gives the example of the areas between the new settlements of Tale e Breglumi when actually live 4.000 people without any health structure. On the same conditions there are also 2 neighbourhoods of Lezha's city outskirts, (behind the Castle and besides the paper factory), when live more or less 10.000 people.

He makes the request for supplying the city's Maternity with specific equipments as an echograph. One or more monitors for the intensive care unit, one or more monitors for the cardiac beating, an incubator for the neonatology unit. He explains that the agreement with Swiss Caritas foresee only the rehabilitation of structures – till 2001, but not the donation of sanity equipments, which were partially donated previously by the same organisation. This donated equipments were very used and so after a short time become out of use.

He thinks that in Shengjin will partially continue to be present a number of Kosovo refugees, which haven't the possibility to spend the winter at their homes because of the destruction caused during the conflict's period. It will be better that our services will continued to be present there.

It 's very serious the problem of tuberculosis's spreading. Furthermore the district had not an tuberculosis's hospital when such patients would be treated so this is a great difficulty. But the Directory of Public Health disposes some rooms that will been used to face such emergency.

MADELENE O'DONNELL

Asks to the participants if does exist or not a national programme of coordination against the tuberculosis.

ASTRIT BECI

Answers to the question explaining that just does exist a structure on national level who is employed to coordination, named Institute of lung diseases with the head office in Tirana . He notes that the costs are a little beat elevate (about 85.000 USD) so this provoke difficulties on the proper doing of coordination's activity.

TONIN PAVACI

Exhorts saying that the situation of public instruction is on a continued evaluation and so very soon became not actually to discuss about the realization of previsions made just one or two months ago. Remembers the low Ministry's budget which makes possible to realize only the minimum of necessary interventions. To illustrate this he gives the example of the funds given from Ministry of Public Instruction to guaranty the minimum conditions of 150.000 children in elementary schools, when are foreseen 36 million USD to rehabilitate the school's buildings, printing the books, to guaranty the salary of teachers at least for the active period of lessons (10 months).

Says that actually the greatest problem is the rehabilitation of school's buildings, an emergency started since 1987, caused by a restricted public funding year after year, by other side the arriving of Kosovo refugees and their sheltering at some schools have brought further damages at this ones. The Ministry during these days is valuating the situation of the schools to verify the ones who needs emergency interventions.

Makes present that has not begun yet the printing of school texts for school – year 1999 – 2000. Remembers the last year experience when two Italian Ministries offered some credits to fulfill this. This year it will be the World Bank who will support this economic engagement.

Affirms that the non controlled movements of population from the mountains area to the outskirts of great cities hinders the Ministry plans. He mentions the situation of outskirts' schools of Tirana when there are classrooms with 52 students. Talks to the participants about a proposal made by Soros Foundation to create some container – classes dismountable and transportable to place them at the necessary places. The price of such objects is about 150 USD, including the school – furniture, to spend without doing the regular competition between different companies, as usually carry out. Remember that the budget which the World Bank puts on at disposition to reconstruct new school buildings (9,6 million USD) is finishing, and the ones puts on at disposition from European Union is ending too.

Suggests some proposals that should be used to realize at schools to limit the discomfortableness of teachers and students. These are : supplying the schools with school – furniture, second – hand ones, donated by European schools twined with Albanian schools, supplying the superior schools with computers in accordance with the Ministry devices about data processing learning, which still are not realised because there's no possibility to buy such equipments, the creation of the school documents centre connected with all the country's districts, close to Ministry of Public Instruction or Pedagogic Institute, to favour the coordinating work between different regions of country for the instruction's and teaching problems, the opening of a new typography close to Ministry of Public Instruction to print the different documents of the same Ministry destined to the districts Directors, The construction and opening of a non public school dedicated to the Community of S. Egidio.

EDUART SOKOLI

Proposes again the requests just made previously to the Community of S.Egidio for the schools of Lezha district, adding something about the superior school of city which will be supplied with essential materials by World Bank. This school should need laboratory equipments and laboratory of Chemical, physic, biology, data processing and foreign languages. Hints furthermore, the possibility to create at some schools sporting spaces that actually does not exist any more. But in front of this complicated and difficult situation this kind of proposal should be considered as a dream to be realized in a very distant future.

LEONARDO PALOMBI

Affirms that all the made proposals deserves the adequate consideration and retains that something for each requests will be fulfilled, but giving priority at health sector.

He adds that the Community of S.Egidio has its own resource which should be used for example to set up the laboratories mentioned by the Director of Public Instruction of Lezha district, or to open the typography close to the Ministry of Public Instruction. Points out the problem of the lack of school furniture in Albanian schools, reminding that it began for years then in Italy the number of school people is constantly diminishing, so the exuberant furniture from Italian schools should be donated to Albanian schools. To verify are the costs of transport. Proposes regarding to the production of school furniture in Albania, it will be interesting the Construction School of Tirana “ Karl Gega “, searching contemporary a local company which will carry out the tube fold used for the production of desks and chairs. Asks to the representative of Public Education to verify if does exist in Albania such company.

Regarding to the Health sector, after have hearing different interventions, affirms that the tuberculosis's problem is actually the most important and emergent priority.

However, the other proposals made during the meeting, about Sanitary problems, will not be forgotten any more.

Proposes that in Lezha district ought to be organized health education - training course with the mothers of villages and city. Such training courses are extremely very useful to widen mother's hygienic knowledge and by other hand to organize them don't need much expenses . Asks to the Director of Public Health of Lezha to find some pilot – areas in which it would be possible to organize them.

Concludes the meeting giving to the participants the appointment of next meeting to be organized during next autumn in a data to be jet decided .

**REPUBLIC OF ALBANIA
MINISTRY OF HEALTH
DIRECTORY OF PUBLIC HEALTH
No. Prot.**

Shkoder ,on 11.04.2000

Sant'Egidio
German Villa No.1
Elbasan Street
Tirana

Directory of Public Health Shkoder expresses its deep gratitude for the help you provided in the fulfillment of our necessities with the ambulance .
In the same time we let you know that the ambulance gifted from you , is sent in the services of the Hospital Directory Shkoder and will be administered after the rules in force .

DIRECTOR
Dr..Gjovalin RRESHPJA

**REPUBLIC OF ALBANIA
ELEMENTARY SCHOOL "BAJRAM CURRI"
DURRES**

Durres, on 02.09.1999

To: Sant'Egidio Institute , Tirana

LETTER OF THANKS

The Directory of the elementary school "Bajram Curri" , Durres , parents and pupils of the beach area for the second time , sent their thanks letter , for your generous help , in completing the school with new equipment.

"Bajram CURRI" school is very big with around 2000 pupils , where teach 62 teachers in 46 classes . This great burden was accompanied by very used equipment , from benches and desks to the teacher's chair. We used to work in non convenient places , not pleasant for an educational institution as a school should be .

In this hard conditions , our school faced the enormous arrival of the Kosovo's children, drawn away from the war taking place in Kosovo . In September 1998 there were around 130 pupils who together with the children of the community learned and finished the school year with high results . While in June 1999 was opened in our school a summer school only for kosovans around 750 pupils , but it didn't last long , because with the end of the war in Kosovo , loving their country , together with their families they returned home , with the desire to continue school there.

Directory of school , teachers, pupils and parents are convinced that in the conditions of our country , this poor state , would have continued longer , but in those hard days were you near us that thought and operated furnishing school with totally new and very beautiful equipment , for which our pupils not only have dreamed of but now they can touch and learn with them .

The school year 1999-2000 starts with the school totally reconstructed or brand new school , and this causes emotions and also honor for you , words of deep love and respect, thanks for the generous help .

Generations of pupils , teachers will never forget your help . In the history of the school it will remain as one of the most important moments of its whole life.

THANK YOU !

**DIRECTOR
Kadri TARELLI**

REPUBLIC OF ALBANIA
Elementary school FUSHE –QERRET
KAVAJE

Date, 16.08.1999

THANKING : Mr.Paolo RAGO

Honoured Mr.Paolo RAGO!

Firstly , we wish all the best for you and the staff of the foundation you represent .
Elementary school Fushe Qerret Kavaje , after the reconstruction made by a Swiss foundation , had immediate need for a deep change in the internal areas . Its old equipment , dating 1960-70 , with very poor quality , not suitable because of their long time usage , would have not matched with its new and beautiful view and which is more important , would have been a serious obstacle for the normal continuity of our educational activity.

But, Honoured Mr.Paolo , it was your interest and your valuable help in the quality of the coordinator of Sant'Egidio foundation , that furnished our school with a considerable quantity of materials such as tables, blackboards, chairs, different things for pupils etc. and made it possible to create very comfortable conditions in school's internal places.

Feeling very near your loving contribution and your desire for further fulfilment of our necessities with laboratory materials and office equipment , the directory of the elementary school Fushe Qerret Kavaje , takes the occasion that in the name of its staff , teachers and pupils , **to thank you from our heart and** to express gratitude for everything you have done for us , wishing in the same time further successes in your humanitarian mission.

DIRECTOR

Skender LUSHKJA

**TO :
COMMUNITY SANT'EGIDIO
GERMAN VILLA NO.1
TIRANE**

Elementary school "Hasan KOCI", is situated in Shkozet , Durres .

Shkozet is a loaded area and there are a great number of pupils in the school .

The school building is built around 1960-s . Even its materials were out of use .The intervention of the Swiss Government brought as a consequence the full reconstruction of the school during 1998-1999 .

Your intervention and your help made it possible to make materials base of the school completely new and updated .

You brought in the community of Shkozet the idea of a modern school , where pupil get contemporary knowledge .

Once again in the name of the educative personnel , pupils of the school , inhabitants of Shkozet , we thank you for your valuable help .

In the history of this school you have taken the place of honor and so always you will be welcomed and honored for the future generations.

Durres on 06.09.1999

**Director of school
Shaban TAIPI**

**REPUBLIC OF ALBANIA
MINISTRY OF EDUCATION AND SCIENCE
EDUCATIVE DIRECTORY**

Lezhe, on 22.06.1999

Subject: Request for immediate help for the schools

Community Sant'Egidio
Elbasan Street
German Villa No.1
Tirana

Thank you from heart for the contribution given for the education of the children coming from Kosovo in the city of Lezhe and wider , for our needs in perspective and having complete trust in your engagement even in the future we present these needs that we have.
Having trust in the seriosity and engagement you have always shown , I am convinced that from your part will be done all the possible efforts for reaching these needs we already have .

With too much gratitude

Director
Eduard SOKOLI

**REPUBLIC OF ALBANIA
DIRECTORY OF PUBLIC HEALTH
NR. prot.**

Lezhe, on 10.07.1999

SUBJECT: REQUEST FOR THE CONTINUITY OF THE ACTIVITY OF SANT'EGIDIO COMMUNITY IN LEZHE.

TO: COMMUNITY SANT' EGIDIO - TIRANA

It has been years now that the Health Service in Lezhe has had present the great help of Sant'Egidio Community .

This help was empowered more during this year while putting in execution the project of the World Bank , for the support of the stative institutions in facing the grave situation created from the arrival of the dismissed from Kosovo due to which we were able to face this situation .

Concretely during April-May were sheltered in the city of Lezhe over 15.000 dismissed from Kosovo .With these arrivals was successfully faced the Health Service, where Sant'Egidio Community covered the most difficult sector, **Mother and Children Service**

This service was covered creating three strong ambulatory points with staff, medicines and suitable places .

In these days when most kosovars are back in their country, in Lezhe have remained two camps , one in Shengjin and one in the city .

Directory of Public Health –Lezhe , thinks that it is necessary Community Sant'Egidio continues its activity in Lezhe taking into account that it is the only association helping in this moments the dismissed remaining .

It has to be considered and stressed that the Shengjin Camp will remain a gathering place in which will be sheltered temporarily those who for different reasons will not have the possibility to turn back and will continue to stay in Albania.

Thinking that we have expressed very small part of the enormous work held by you in these months , we hope that you will find our request reasonable and useful.

We woul like to thank Community Sant'Egidio for the great help offered to us in these hard days and in the meantime World Bank also for approving very efficient project in this situation .

Director
Llesh MARKU

GRATITUDE AND THANKS

Directory of Public Health Kukes wants to express with great pleasure its gratitude to the Community Sant'Egidio for the work done in our city during the grave situation , created by the great flow of the arrivals from Kosovo .

The activity of Sant'Egidio Community has been a great one, contributing in our medical institutions with provisions and concrete work in:

- IN THE POLICLINIC .

They have cured and treated with provisions , medicines , foodstuff (milk, biscuits, rice, pasta, juice fruits etc.) , all children arrived from Kosovo and those in the city of Kukes who were in need.

They have done all the necessary manipulations for all disabled visited by them and also for the others presented .

They have realised programs for raising the hygiene – sanitary culture level , furnishing the children's consultancy with showers and other materials as well .

They have realised programs concerning children's growth, breast feeding , preventive measures against diarrhoeic illness .

- IN THE HOSPITAL .

They have sent medicines in quantity and quality distributed them to disabled such as clothes , other materials as pampers , milk for babies in the birth house and provisions for their mamas .

They have organised moving equipages with doctors and nurses to help the arrivals from Kosovo with medicines , foodstuff and clothes .

They have realised programs for the hygiene of the city , cleaning, gathering and transporting different remains , which have influenced the prevention of transmitting diseases .

Viewing the activity held by the Community Sant'Egidio during all this time we wish to thank them for their work and in the meantime we request that in the future they continue these help with their work in the Policlinic , with medical visits, medicines and programs for the malnutrition and other problems concerning children's growth .

THANK YOU !

DIRECTOR OF PUBLIC HEALTH

Dr.Gani GASHI

KUKES ,ON 20.05.1999

**REPUBLIC OF ALBANIA
ELEMENTARY SCHOOL "Bajram CURRI"
DURRES**

Durres, on 20.06.1999

LETTER OF GRATITUDE AND THANKS

TO: COMMUNITY SANT'EGIDIO , TIRANA

Staff of school, teachers and pupils , parents of the community , express their gratitude and thank you for the help you are giving to the elementary school "Bajram CURRI" .

In this school there are over 1900 pupils and teach 62 teachers , plus two groups of children in the kindergarten from 5-6 years old.

Classes were conducted in very difficult conditions ; buildings and furnitures were very worn out and in pity conditions .

In November 1998 started the reconstruction of the buildings , not in the whole but partly so as not to interrupt lessons and also providing it with new tables , desks which were strong, beautiful and functional .

In August finished the complete reconstruction of the third building and the new school year 1999-2000 will find us in very pleasant areas , which view educates culture and benevolence .

Everything has been done thanks to your generous help , without which it would have needed years to be completed .

Due to all this , teachers pupils parents thank you and are grateful for all their lifes . This investment serves the education and culture of our children and to the whole country in general .

WE ARE GRATEFUL TO YOU .

Let's hope this collaboration will continue in the future.

In the name of the staff, teachers , pupils

DIRECTOR
Kadri TARELLI

REPUBLIC OF ALBANIA

MINISTRY OF EDUCATION AND SCIENCE
EDUCATIVE DIRECTORY
NO.179 Prot.

Lezhe, on 22.05.1999

SUBJECT : THANKS TO SANT'EGIDIO COMMUNITY

To: Sant'Egidio Community

ROME

Educative Directory of the city of Lezhe thanks you from heart for reaching this collaboration with your representatives , who helped in creating normal conditions for the education of the children , especially those arrived from Kosovo . This help was concreted in the full reconstruction of the elementary school of Shengjin and other engagemnets to face the new situation . We trust that this collaboration will make possible creating conditions for the education of the children from Kosovo in Shengjin and more .

With very best regards

DIRECTOR
Eduart SOKOLI

**REPUBLIC OF ALBANIA
MINISTRY OF HEALTH
DIRECTORY OF PUBLIC HEALTH
Nr.221 Prot**

Shkoder, on 26.04.1999

SUBJECT: GRATITUDE FOR THE PROVISIONS SENT .

To : Association Sant'Egidio
Tirana

In the framework of the emergency situation created in Shkoder because of the arrival of the Kosovans taken forcibly away from their country , the Medical Service in Shkoder was put in great difficulties .

Having present your quick and correct help the Directory of Public Health in Shkoder, managed to face this difficulties successfully , being near the disables arrived from Kosovo with the necessary medicines .

Once again we thank you for your correctness , standing near us in those difficult moments , which made it possible for us to confront the situation with less pain and suffer .

HONOUR AND RESPECT

Director of Public Health

Gjovalin RRESHPJA

**REPUBLIC OF ALBANIA
DIRECTORY OF PUBLIC HEALTH
LEZHE**

Lezhe, on 17.05.1999

To: Sant'Egidio Community
TIRANA

It has been years now that Sant'Egidio Community is giving its great help in the improvement of health service in Lezhe .

Directory of Public Health evaluating this precious help of your community desires to show some of the main directions of this help:

- Immense work is settled in the implementation of the Malnutrition Programm . This programm started by your community is one of the most successful undertakings done in the Medical service of our city .
This program has made it possible to find the malnourished children , to treat them regularly offering them necessary medicines and food help .This program was preceded by the recovery of the Malnutrition Centre of the City . This very important program was spread with great devotion and desire in the Kosovo children , giving a precious help to turn them to the normal life .
- Directory of Public Health Lezhe , wants to thank especially for the great help your Community has given and continues to give to the people dismissed from Kosovo . This help was offered to the first arrivals from Kosovo during last year in the city of Shengjin .
- Sant'Egidio Community with the right vision to confront this situation , made possible the successful realisation of a program of help and cooperation with the World Bank .In the framework of this program the medical service in Lezhe was greatly helped in:
 1. A big quantity of medicines and perfusions was offered to the secondary service . Thanks to this help the hospital of Lezhe faced successfully the situation created from the great arrival of the dismissed from Kosovo .For this reason the staff of the hospital is grateful to your community and expresses the desire to have you continuously present in this hospital even in the future .
 2. A vehicle was gifted to the Directory of Public Health to face this grave situation and to attend the work held in our city in the Inspectorat Mother Child , Malnutrition Program and attendance of different problems of the Kosovo's people .

Directory of public health thanks especially for the understanding that have always found in you for the solution of all problems .

We are convinced that collaboration will grow stronger in the future , in a way that together we can improve the conditions of the medical service in Lezhe .

With Respect

**DIRECTOR
Llesh MARKU**