

SITUATIONAL ANALYSIS OF THE RIGHTS OF PERSONS WITH DISABILITIES

ARMENIA



COUNTRY REPORT 2021

SITUATIONAL ANALYSIS OF THE RIGHTS OF PERSONS WITH DISABILITIES IN ARMENIA

COUNTRY REPORT

November 2022

About UNPRPD:

The United Nations Partnership on the Rights of Persons with Disabilities (UNPRPD) is a unique partnership that brings together UN entities, governments, OPDs and broader civil society to advance the rights of persons with disabilities around the world.

The Partnership was created to foster collaboration between its members and complement their work around disability inclusion through UN Joint programming. The Partnership operates through a Multi-Partner Trust Fund (MPTF) established to channel resources for participating UN organizations (PUNOs).

The UN entities participating in UNPRPD are ILO, OHCHR, UNDESA, UNDP, UNESCO, UNICEF, UNFPA, UN Women and WHO. Other UNPRPD members include the International Disability Alliance and the International Disability and Development Consortium (IDDC).

The main contributors to the UNPRPD MPTF are Australia, Finland, Norway, Sweden, United Kingdom.

Acknowledgements:

This situational analysis was conducted by a group of staff members from the Human Rights Defender's Office, consultants of the Research and Education Centre, experts in the field of legislation and protection of the rights of persons with disabilities, and two organizations of persons with disabilities (OPDs). Technical support was provided by the UNPRPD Technical Secretariat throughout the process.

Disclaimer:

The data and information presented in the report are based on the situational analyses conducted at the country level and were drafted by the UN country teams. Methodology for data collection included a desk review of relevant literature, key informant interviews and focus groups, stakeholder mapping exercises and consultative workshops with key stakeholders. The UNPRPD has not edited the report or verified the findings for accuracy. This report does not necessarily reflect the position of the UNPRPD.

LIST OF ACRONYMS AND ABBREVIATIONS	5
INTRODUCTION	7
METHODOLOGY	8
1. Stakeholder and Coordination Analysis	9
1.1. OPD capacity and engagement	9
1.2. Government agencies and cooperation with civil society	11
1.3. Disaster risk reduction and emergency response	13
Recommendations:	14
2. Equality and Non-Discrimination	16
2.1. The UN legal framework on the rights of persons with disabilities	16
2.2. Council of Europe framework on the rights of persons with disabilities	17
2.3. National legislation and law enforcement practises	18
2.4. National policies and strategies	20
Recommendations	24
3. Accessibility	25
3.1. Educational institutions, cultural and sport facilities	25
3.2. Court buildings	26
3.3. Penitentiary facilities and mental health centres	26
3.4. Public transport	27
3.5. Victims of domestic violence	27
3.6. Participation in political life	28
Recommendations:	29
4. Provision of inclusive services	31
4.1. Disability assessment and referral/guiding systems	31
4.2. Support services	32
4.3. Inclusive education	34
Recommendations:	37
5. Aftermath of conflict in and around Nagorno Karabakh	39
5.1. Soldiers who took part in the hostilities	39
5.2. Displaced persons from Nagorno-Karabakh	40
Recommendations:	41
6. Protecting the Rights of Persons with Disabilities during COVID-19	41

Recommendations	43
7. Budgeting and financial management in accordance with the Convention	43
Recommendations	46
8. Accountability and Governance	47
8.1. Use of tools by Washington Group for statistical data collection	47
8.2. Barriers to participation using available data on persons with disabilities	47
8.3. Lack of disaggregated data	48
8.4. Independent monitoring mechanisms	49
Recommendations:	50
9. Conclusion	51

LIST OF ACRONYMS AND ABBREVIATIONS

AMD	Armenian Dram
CEC	Central election committee
CJSC	Closed joint-stock company
CMNC	Crisis Management National Centre
CoE	Council of Europe
CPT	Committee for the Prevention of Torture
CSO	Civil society organization
HIV	Human immunodeficiency virus
ICF	International Classification of Functioning, Disability and Health
IRP	Individual rehabilitation programme
IVF	In-vitro fertilization
M&SE	Medical and social examination
MoESCS	Ministry of Education, Science, Culture and Sports
MoJ	Ministry of Justice
MoLSA	Ministry of Labor and Social Affairs
MPTF	Multi-partner trust fund
NGO	Non-governmental organization
OPD	Organization of persons with disabilities
PCR	Polymerase chain reaction method
SDG	Sustainable Development Goals
SNPO	State non-profit organizations
UN	United Nations
UNDP	United Nations Development Programme

UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UNIDO	United Nations Industrial Development Organization
UNPRPD	United Nations Partnership on the Rights of Persons with Disabilities
USS	Unified social service
WG	Washington Group
WHO	World Health Organization

INTRODUCTION

Since the adoption of the UN Convention on the Rights of Persons with Disabilities (also referred to as the Convention), UN member states have developed many strategies, mechanisms, and programmes to transform its principles and norms into efficient tools for protecting the rights of persons with disabilities. However, such strategies and programmes will not be effective if in the process of their development and actual application they are not validated and coordinated with stakeholders. Such initiatives should be implemented with targeted and meaningful participation by persons with disabilities. In many countries lack of inclusiveness has led to focusing resources only on specific domains of the Convention, whereas it is important that programmes address all areas of the Convention, as inclusiveness rests on the key principle of “leaving no one behind.”

With regard to persons with disabilities the foregoing principle was best expressed in the UN 2030 Agenda for Sustainable Development. UN member states adopted this agenda at the historic UN summit in September 2015 to serve as a global development guideline for the coming decade to end poverty in all its forms everywhere, promote good health and well-being for everyone, ensure inclusive and quality education for all and reduce inequality within countries. The motto and Agenda apply to all the 17 Sustainable Development Goals (SDGs), 10 of which directly relate to vulnerable groups and, in particular, to persons with disabilities.

To implement the Convention as a whole and to secure consent from and direct participation by stakeholders, the UN *Partnership on the Rights of Persons with Disabilities* was established. This initiative operates through the *Multi-Partner Trust Fund* (UNPRPD MPTF), an example of unprecedented collaboration within the UN that brings together different UN entities, Member State governments, organizations of persons with disabilities (OPDs) and civil society.

In 2020, a new 2020-2025 UN strategic operational framework (SOF) was adopted by the UNPRPD MPTF. The framework seeks to develop more proactive measures to support implementation of the Convention, with broad participation by persons with disabilities and direct involvement of disability rights organizations. The framework places special emphasis on ensuring robust involvement by persons with disabilities in the development and implementation of policies/programmes, as a pre-condition for all joint UNPRPD programmes. In light of these developments, the fourth UNPRPD ‘call for proposals’ was announced in August 2020 and resulted in the selection of countries and allocation of budgets to support programme implementation. Each programme was divided into three phases: 1) *conducting an induction training*, 2) *carrying out a situation analysis*, and 3) *compiling a full proposal*. The present study was carried out in line with the second phase of the programme.

In line with this framework, a comprehensive situation analysis of the rights of persons with disabilities in Armenia was carried out. The current state of implementation of the UN Convention, strategic government programmes, legislative reforms, collaboration by state agencies with support services and civil society organizations, law enforcement practices and other important components were studied in their entirety, providing an accurate and detailed description of the general situation of implementation of the Convention in Armenia.

According to official information, as of the end of 2020 the number of persons with disabilities registered in the Republic of Armenia was 191,827, of whom 72,844 were women. The number of children under 18 with disabilities in Armenia is 8,771 (around 1.2 per cent of all children), of whom

2,757 are girls. Persons with disabilities make up 6.5 per cent of the population, while according to WHO data, approximately 15 percent of the world population (over 1 billion people) has a disability. This may have different route causes, which will be explored within the situation analysis.

METHODOLOGY

The situation analysis was conducted under the programme *Creating Enabling Environment and Ecosystem Conducive to the Implementation of the CRPD and Promoting the Rights of Persons with Disabilities in Armenia*, in accordance with UNPRPD guidance for conducting a country situation analysis of the rights of persons with disabilities. The analysis centres around eight areas of concern: 1) *Stakeholder and system analysis*, 2) *Equality and non-discrimination*, 3) *Accessibility*, 4) *Provision of inclusive services*, 5) *Consequences of the war*, 6) *Protection of the rights of persons with disabilities during COVID-19*, 7) *Budgeting in accordance with the Convention*, and 8) *Accountability and governance*.

The study also places special focus on relevant international conventions, concluding observations by the UN Committee on the Rights of Persons with Disabilities and by the UN Committee on the Rights of the Child, the UN 2030 Agenda for Sustainable Development, and the Sustainable Development Goals.

A desk-review was conducted of pertinent legislation, the sub-legislative legal framework and relevant administrative and judicial practices related to the rights of persons with disabilities. In this context, the experts examined administrative proceedings related to the provision of services by State bodies to persons with disabilities, such as disability assessments, health and rehabilitative care, provision of various social security benefits and inclusive services.

The study's findings were also based on analysis of reports by OPDs and NGOs working on disability issues, individual applications to the Human Rights Defender and the results of monitoring visits by staff from the Human Rights Defender's Office, based on their mandate deriving from the Convention. Staff visited various institutions, including childcare and protection institutions, as well as social protection and care facilities, educational institutions and organizations providing services delegated by the State. In particular, Human Rights Defender's office staff paid a monitoring visit to Shengavit Unified Social Service Center in Yerevan, where individual interviews were conducted with staff members and 10 beneficiaries (five men, five women), including parents of children undergoing medical and social assessments, to determine their eligibility for disability certification.

In addition, information and data were collected from various government entities, including the judiciary and the Office of the Human Rights Defender, using standard questionnaires developed by the UNPRPD and adapted to the local context. Inquiries were also sent to 27 OPDs, NGOs working with persons with disabilities and individual experts. Since the situational analysis also addressed issues faced by soldiers receiving disability as a result of Armenia's September-November 2020 armed conflict, inquiries were also sent to the Homeland Defender Rehabilitation Centre. Inquiries were also sent to the UN Office in Armenia.

In addition to the questionnaires, individual interviews and focus group discussions were held with representatives of five OPDs, including those of women and parents of children with disabilities living

both in and far from the capital, particularly with parents of children with autism, Down syndrome, intellectual disabilities, and multiple disabilities. Focus group discussions took place in Gegharkunik, Lori and Shirak regions and in the capital city of Yerevan, during which data was gathered on 154 children (48 girls, 106 boys). Of these, 65 children were between one and six years of age; 14 were between 7 and 10 years old, 59 were aged 11-14 and 16 were between the ages of 15-18 years (Annex 1).

The condition of several court buildings and penitentiary facilities located in the capital and the regions were also examined in relation to accessibility. In addition, interviews were conducted with the chiefs of staff of courts, notary officers, notary translators, sign language interpreters, members of NGOs and members of Parliament.

In addition to consultations with OPDs, a two-day validation workshop with 80 participants (of whom 3 fathers and 68 mothers of children with disabilities) including parents of children of different ages and types of disabilities and representatives from government sectors was organized by OPDs founded by parents. The discussion centred on the main challenges raised during the focus group discussions and seeking agreement on a list of immediate actions. The workshop also served as an opportunity for parents to exchange experience and promoted the establishment of a platform of cooperation between parents of children with disabilities and relevant government agencies.

1. Stakeholder and Coordination Analysis

This section of the situation analysis explored the role and effectiveness of OPDs and their interaction with various stakeholders, including the State, and their institutional capacity as a step toward developing strategies to support improved cooperation, networking, management, accountability, intervention, advocacy, and communications.

1.1. OPD capacity and engagement

According to current legislation, the Republic of Armenia has a single approach to registering NGOs. Organizations of persons with disabilities, like other civil society organizations (CSOs), are registered in accordance with Chapter 2 of the country's Law on Non-Governmental Organizations. The process of registering NGOs is not disability-sensitive and includes restrictions on registering groups of persons with intellectual and/or psychological disabilities.

Despite some progress in this area, **Armenia lacks an enabling environment that would facilitate the creation of OPDs, given that most such organizations are run jointly by persons with disabilities and non-disabled persons.** A list of leading OPDs and NGOs representing and defending the interests of persons with disabilities in the Republic of Armenia is presented in Annex 2.

Most OPDs are funded by donor organizations, such as the European Union, Council of Europe, United States Agency for International Development, and other European and American agencies. In recent years, OPDs have been able to provide specific services funded by grants from the State budget. UN agencies also work with OPDs through various projects, focused on building their capacity,

supporting their engagement and ability to speak out, mainstreaming inclusion in public services and awareness-raising.

OPDs representing the interests of "vulnerable groups" receive funding mainly for social, health and educational activities. Funds raised through charity or special fundraising campaigns also contribute to the activities of OPDs. For example, organizations active in defending the interests and rights of persons with disabilities may be funded through diplomatic missions of foreign countries; international organizations; local and international NGOs; or sectoral organizations with extensive experience in local and international advocacy, cooperation, information-sharing, and consulting with human rights organizations – including regional, national and international networks and coalitions of persons with disabilities. Many OPDs are actively involved in developing and implementing programmes coordinated by UN agencies, from the other side the UN agencies are supporting capacity building activities of OPDs. The United Nations Development Programme (UNDP), United Nations Children's Fund (UNICEF), United Nations Population Fund (UNFPA) and United Nations Industrial Development Organization (UNIDO) began in 2014 to collaborate with various OPDs; this work has continued through other projects¹. Nevertheless, **data on the proportion of funding sources for organizations managed by persons with disabilities and other NGOs that provide services to persons with disabilities is insufficient and no comprehensive analysis of this issue is available. Armenian law does not differentiate between NGOs that represent or defend the interests of persons with disabilities and organizations made up of persons with disabilities.** However, as a rule the charters of these organizations include provisions referring to persons with disabilities, although the majority function without limiting themselves by gender and age aspects. Most NGOs in this field are active in the areas of charitable programmes, human rights activities, and the provision of services. Some organizations specialize in identifying and addressing the problems of girls and women with disabilities. Others consist of parents of children with disabilities advocating for their child's interests and rights. A few are umbrella organizations. **At the time of this research there was only one active, functioning coalition in Armenia, the [Coalition for Inclusive Legal Reform](#), whose main objective is to protect the rights of persons with different types of disabilities.**

Although the number of OPDs has increased in recent years, surveys and individual interviews conducted for this study with persons with disabilities and their organizations showed that certain **groups of persons e.g., albinism, short stature or psycho-social disabilities are relatively less involved in OPDs, and in some cases no organizations represent such persons.** A few NGOs and associations in the country provide services to persons with visual and hearing disabilities and advocate for their rights. Some organizations seek to deal with the problems of persons with intellectual and developmental disabilities. However, **persons from these groups are rarely actively involved in social, political, socio-economic, and decision-making processes.**

The main areas of engagement of the most active OPDs include issues related to the rights of women and children with disabilities, education, advocacy, and social assistance. Several sectoral organizations carry out activities aimed at promoting and protecting the rights and interests of different groups of persons with disabilities and providing them with a variety of services. While

¹ More information can be found in Annex 3

many sectoral OPDs are involved in developing and implementing important strategic programming, it is nonetheless critical **to develop clear mechanisms to facilitate more effective participation by OPDs representing the interests/rights of persons with disabilities in policy development and decision-making processes with the State. One such mechanism could be the introduction or expansion of OPD monitoring functions in relevant state-funded programmes.**

OPDs regularly participate, either directly or through mediation, in meetings of UN special mechanisms and consultative bodies to present information on the human rights protection system in Armenia. They are also active in submitting shadow reports to UN treaty body committees (e.g., the Committee on the Rights of Persons with Disabilities (CRPD), the Committee on the Elimination of Discrimination against Women (CEDAW), and the Committee on the Rights of the Child (CRC). They also collaborate with various local and international organizations and coalitions to describe the issues and barriers faced by persons with disabilities when seeking to exercise their rights. OPDs also advocate for inclusiveness and equality through numerous platforms: UN agencies, Council of Europe office, Coalition to Stop Violence Against Women in Armenia, Non-Discrimination, and Equality Coalition of Armenia (NDEC), Eurasia Partnership Foundation, Helsinki Citizens' Assembly Vanadzor Office, Transparency International Anti-Corruption Center, Oxygen Foundation, Open-Society Foundations Armenia, IFES, and more.

1.2. Government agencies and cooperation with civil society

The Ministry of Labour and Social Affairs (MoLSA) actively cooperates with NGOs that address issues of persons with disabilities and OPDs operating in Yerevan and other locations in Armenia. These NGOs/OPDs include: Armenian Mothers (OPD of parents of children with cerebral palsy), Disability and Inclusive Development, We Can (OPD of parents of children with intellectual disabilities), Association of the Blind of Armenia (NGO), Step Forward (OPD of parents of children with autism), Skarp Health Center (OPD), Agate (rights defense centre for women with disabilities), Equal Rights and Equal Opportunities (OPD), Havat (NGO working with children with hearing disabilities), Full Life (OPD), Salvation/Prkutyun (NGO working with persons with intellectual disabilities), Child Development Fund (OPD), Astghavard, Mairi, Ekho, Disability Rights, National Autism Foundation (OPD of parents of children with autism), Voice of Silence (OPD of persons with hearing disabilities), Mission Armenia (NGO charity), Armenian Caritas (NGO charity), Armenian Red Cross Society, Armavir Development Center (NGO) and Satar (NGO).

OPDs' [representatives](#) are included in various committees, such as the National Commission for Persons with Disabilities and working groups established by MoLSA to discuss legislation, policies and strategies to ensure disability-specific and disability-sensitive approaches.

The National Council is composed of 10 government agency representatives and 11 NGO representatives, including organizations led by women with disabilities. In accordance with Decree No. 848-N by the Prime Minister (June 28, 2019), the Commission's composition was changed to include an equal number of representatives from State bodies and NGOs composed of persons with disabilities. This Commission acts as a platform for coordinating the activities carried out by various agencies and organizations, including OPDs and civil society. During National Commission meetings

the representatives of central and local authorities, OPDs, NGOs and the media discuss issues related to exercising the rights of persons with disabilities, which are being addressed by the joint efforts of State agencies and NGOs.

MoLSA regularly consults with OPDs on issues related specifically to disability and other policy areas. **However, no clear mechanisms are in place that would allow the organizations to assess the extent to which OPDs' recommendations, opinions and observations on sectoral documents and legal acts are considered or accepted.**

The National Commission for Persons with Disabilities (established by the Prime Minister in 2008) is also engaged in the process of discussing and addressing the problems of persons with disabilities with NGOs and OPDs. Information about upcoming meetings of this Commission is widely disseminated, and meetings are open to all OPDs.

OPDs and NGOs representing the rights of persons with disabilities are members of regional commissions for persons with disabilities. **Although the latter and NGOs representing their rights are included in these commissions and in the Yerevan City Commission, in practice, the effectiveness of their participation in developing legislation, strategies and policies – including involvement in decision-making processes– is open to question, as no clear and concrete mechanisms and monitoring tools for coordination of such efforts are in place.**

For example, to ensure the participation of persons with disabilities in decision-making processes and in the development of disability-related legislation, policies and strategies, draft documents are circulated among OPDs and discussions with OPDs and sectoral NGOs are held to ensure accessibility (e.g., sign language interpreter and physical access). Additionally, all draft documents are available through the open web page (such as e-draft) for suggestions and recommendations. **However, not all organizations are aware of these processes, and not all line ministries/sectors closely collaborate with OPDs. Some OPDs, especially in the regions, experience capacity and information gaps.**

MoLSA, being guided by the principles of equality of partnership and mutual trust, has taken the initiative to unite partner organizations under a national 'social cooperation agreement'. Fifty NGOs, including OPDs, have joined this agreement. The Ministry also cooperates with various sectoral organizations operating in Yerevan and in other regions of the country. During the last several years MoLSA and the Ministry of Education, Science, Culture and Sports (MoESCS) have received State funding to financially support a number of OPDs and NGOs representing persons with disabilities, primarily for the provision of various services. The list of accredited OPDs with which MoLSA collaborates is frequently expanded.

The office of the Human Rights Defender is mandated to monitor implementation of the provisions of the UN Convention on the Rights of Persons with Disabilities, as well as to prevent violations of the rights of the persons with disabilities and offer them protection. Effective cooperation has been established between the Human Rights Defender's office and OPDs and NGOs representing persons with disabilities. The effectiveness of this cooperation was facilitated through the establishment in 2019 of a [Public Council](#) under the Human Rights Defender's Office. The tasks assigned to the Public Council are to contribute to improving protection of the rights of persons with disabilities and strengthening cooperation between civil society and the Defender's office. To fulfil these mandates,

members of the Public Council can present to the Defender problems related to persons with disabilities and recommendations for solutions, as well as carry out field research. Further details are presented below under “Accountability and Governance”.

1.3. Disaster risk reduction and emergency response

Armenia is located in a region at high-risk for natural emergencies, and is thus subject to serious impacts from earthquakes, landslides, hail, floods, strong winds and forest fires. **Preventing emergency situations, reducing risk from disasters, and protecting the population should be considered issues of national security and understood as preconditions for sustainable development. In this context, the vulnerability and degree of preparedness among women, men, children, the elderly, persons with disabilities, socially vulnerable and other groups should be equally taken into account.**

MoLSA and the Rescue Service of the Ministry of Emergency Situations pursue a consistent policy of civil defence and population protection in emergencies, with a special focus on persons with disabilities. The Ministry’s system includes a crisis management centre containing all relevant databases, including information about the location of persons with disabilities by regions. The Rescue Service has been furnished with modern software systems to ensure that emergency phone numbers can be used throughout Armenia. The free ‘911 SOS’ application introduced at the Rescue Service’s national crisis management centre (CMNC) is designated for persons with disabilities to call the 911 service. The system is especially useful for persons with mobility, visual, hearing and speech disabilities, who can alert 911 by just touching the SOS button. At the same time, the 911 SOS’ application provides an opportunity for targeted awareness-raising since all registered users can receive the same information about an incident and what they should do. The CMNC is equipped with a short-message system (SMS) function, enabling it to send relevant pre-recorded texts to phone numbers in the system during emergencies. To ensure accurate planning and maximum coverage of awareness and alerting processes, MoLSA transfers to the CMNC all data on members of vulnerable groups currently entered into the system.

Despite these systemic improvements, shelters in the country are often inaccessible **for persons with disabilities, particularly due to the lack of warning sounds and light signals for persons with visual and hearing disabilities. Moreover, current legal provisions do not include toolkits or mechanisms to guarantee the fundamental rights of persons with disabilities during civil defense emergencies. The Draft Law On Civil Defense does not address the needs of persons with disabilities, and there is a lack of inclusive evacuation plans and disaster risk management at all levels, elements crucial to the safety of persons with disabilities.**

Major gaps:

- NGO legislation is not disability-sensitive, and there are restrictions on registering groups of persons with intellectual and psycho-social disabilities, who are not considered to have legal capacity. An enabling environment for facilitating the creation of OPDs is lacking, given the

disproportionate number of organizations dealing with persons with disabilities run jointly by persons with disabilities and non-disabled persons.

- Data on the proportion of funding sources for organizations managed by persons with disabilities and other NGOs providing services to persons with disabilities is insufficient, precluding comprehensive analysis of this issue.
- Lack of a formal, legal differentiation between NGOs representing or defending the interests of persons with disabilities and OPDs.
- There is only one active functioning coalition in the country with the main objective of protecting the rights of persons with different types of disabilities
- Groups of persons with certain conditions (e.g., albinism, short stature, and psycho-social disabilities) are relatively less involved in OPDs, and in some cases there are no organizations representing such persons.
- Persons with intellectual and developmental disabilities are less actively involved in various social, political, socio-economic and decision-making processes.
- Lack of clear mechanisms allowing these organizations to assess the extent to which, or the grounds by which, their recommendations, opinions and observations on sectoral documents and legal acts are accepted or considered by the Government.
- Although persons with disabilities and NGOs representing their rights are included in regional commissions for persons with disabilities, as well as on the Capital City Commission, in practice the impact of their participation in developing legislation, strategies and policies and in decision-making processes is unclear, as no concrete mechanisms or monitoring tools for coordinating such efforts are in place.
- Some OPDs, especially in the regions, experience capacity and information gaps.
- Current legal mechanisms are not accompanied by toolkits or other mechanisms guaranteeing the fundamental rights of persons with disabilities during emergencies. The Draft Law On Civil Defense does not address the needs of persons with disabilities.
- Inclusive evacuation plans and disaster risk management are lacking at all administrative levels, putting the safety of persons with disabilities at risk.

Recommendations:

- 1) The State should ensure a favorable environment for the establishment and operation of organizations representing persons with disabilities. In this context, measures should be taken to formally distinguish between OPDs and NGOs representing the interests of persons with disabilities. This could be addressed in the Law on the Rights of Persons with Disabilities. It is recommended that **MoLSA and the Ministry of Justice (MOJ) initiate an amendment to the Law with the Government and, later, with the Parliament.**
- 2) All State and non-State bodies, including the Office of the Human Rights Defender, should consult and cooperate with all groups of persons with disabilities or their representatives when implementing any project relating to the rights of persons with disabilities. For this

purpose, mechanisms, and uniform toolkits for ensuring and assessing the effectiveness of this cooperation should be introduced.

- 3) The State should continue ensuring that effective mechanisms are in place to facilitate cooperation between NGOs and OPDs and all ministries and State bodies, especially in relation to mechanisms for notifying the public about State initiatives and the provision of feedback on recommendations made by organizations participating in policy and programme development. It is recommended that MoLSA takes the lead on elaborating such mechanisms within the government.
- 4) It is recommended that UN, , in cooperation with State and non-state bodies, implements projects to promote the full and active functioning of coalitions and alliances that represent persons with all types of disabilities and their rights. Such projects should represent persons with multiple disabilities and cover all regions of Armenia.
- 5) It is recommended that UN implements a project in cooperation with OPDs to build the capacity and awareness of persons with different types of disabilities, especially in the remote regions of Armenia, and promote their active participation in decision-making processes and involvement in disability-rights activities. It is recommended to design a Training of Trainers (ToT) program, to select candidates for the TOT, to conduct comprehensive TOT training provided that the trainers should conduct cascade trainings in the capital and in regions for all relevant beneficiaries and stakeholders.
- 6) It is recommended that the Ministry of Emergency Situations develops a concept paper for introducing alternative mechanisms for the provision of specialized services to persons with disabilities during emergencies, to mitigate the negative impact of decreased availability of those services on their physical and mental health. This should be developed in collaboration with other relevant State agencies and bodies, such as the Ministry of Health, Ministry of Justice and Police. The Government should carry out an assessment of potential problems facing persons with disabilities during emergencies and work with competent state bodies to prevent such occurrences. These efforts should take into account the needs of all groups and set a reasonable timeline for undertaking effective measures and ensuring their practical implementation, based on principles of inclusiveness and accessibility.
- 7) The State, in collaboration with ministries and local/international organizations, should implement projects and raise the awareness of persons with disabilities about plans and actions envisaged in emergency situations, using accessible formats. The Government should develop an action plan to ensure the health, education, and well-being of persons with all types of disabilities in emergency situations.

2. Equality and Non-Discrimination

2.1. The UN legal framework on the rights of persons with disabilities

On 30 December 2007, Armenia signed the UN Convention on the Rights of Persons with Disabilities and on 18 December 2009 the Constitutional Court ruled that the Convention was in compliance with the Constitution of Armenia. On 22 September 2010, the National Assembly of Armenia ratified the Convention. However, **Armenia has not yet ratified the Optional Protocol to the Convention on a procedure for filing individual complaints to the Committee on the Rights of Persons with Disabilities, despite having signed this document along with the Convention in 2007.** However, on 11 June 2020 the Government adopted a draft law on ratification of the Optional Protocol², which was then forwarded to the National Assembly for ratification. As of the time of this writing, the Draft Law had not yet been included on the agenda of the National Assembly for parliamentary debate.

On 8 May 2017³ the Committee on the Rights of Persons with Disabilities provided its latest opinion on Armenia's implementation of its international obligations under the Convention, issuing the following recommendations to the government: 1) *Ensure the full and equal participation of persons with disabilities in decision-making/developing legislation, policies, strategies, and other action plans on disability*, 2) *Improve the legislation in line with the requirements of the human rights model of disability*, 3) *Revise the Draft Law "On the Rights of Persons with Disabilities" to ensure its compliance with the Convention and general recommendations of the Committee*, 4) *Ratify the Optional Protocol to the Convention*, 5) *Adopt the human rights model of disability and ensure disability determination on the basis of the barriers to participation of persons with disabilities in the society, as well as their personal needs, will and preferences* and 6) *Enhance the capacity of the National Commission for Persons with Disabilities to ensure the intersectoral coordination and implementation of disability-related actions in public policies*.

The Committee also recommended speeding up the adoption of anti-discrimination legislation and ensuring that the legislation includes: a definition of disability-based discrimination in both the public and private sectors; definitions of multiple and inter-sectoral discrimination, particularly gender-based discrimination; and establishes a system of sanctions for violations of the rights of persons with disabilities. In addition, the Committee proposed that a concept of 'reasonable accommodation' be defined in anti-discrimination legislation and the violation thereof be defined as discrimination. In relation to gender discrimination, the Committee recommended, with reference to its General Comment No. 3 (2016) on Women and Girls with Disabilities and Sustainable Development targets 5.1, 5.2 and 5.5, intensified efforts to prevent and counter multiple and intersectional discrimination by including the concept of disability-based discrimination in all legislative acts and policies related to women and girls, as well as ratifying the Council of Europe

² See the Republic of Armenia Government No. 938-A decision dated 11 June 2020 on the Draft Law "[On Ratifying the Optional Protocol to the Convention on the Rights of Persons with Disabilities](#)" of the Republic of Armenia.

³ See the final observations of the Committee on the Rights of Persons with Disabilities on Armenia's first report. CRPD/C/ARM/CO/1: 8 May 2017. The full text of the report in English is available at:

https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRPD/C/ARM/CO/1&Lang=En

Convention on Preventing and Combating Violence against Women and Domestic Violence and applying the concluding observations of the CEDAW Committee.

Armenia has ratified all major UN human rights conventions.⁴ The objectives of these international legal instruments intersect with those of the CRPD, especially in relation to issues such as age, colour, ethnicity, citizenship, sex, gender identity, sexual orientation and other personal or social characteristics.

Armenia followed the Committee's recommendation to improve its legislation in line with the requirements of the human rights model through its adoption of a Law on the Rights of Persons with Disabilities in May 2021. In line with the Convention. However, Armenia still falls short of its international obligations by having failed to adopt a distinct non-discrimination law that includes definitions of multiple discrimination and intersectionality. It also falls short of its obligation to ensure full and equal participation by persons with disabilities in decision-making and legislative processes, since competent government bodies failed to define and implement clear and effective mechanisms and procedures for involving all competent OPDs and NGOs in those processes. It is also important to note that to achieve comprehensive and effective implementation of the Convention, it is necessary that local, State, and non-state actors adopt a holistic approach, which requires intersectoral collaboration. Accordingly, efforts should be directed to targeting the intersection of other UN convention's goals and objectives as they intersect with the Convention on the Rights of Persons with Disabilities. **Given that the Law was passed only recently, and several government regulations have yet to be adopted to ensure its full and effective enforcement, State and non-state actors share a substantial lack of experience with coordination mechanisms required to achieve intersectoral collaboration.**

2.2. Council of Europe framework on the rights of persons with disabilities

As a Member State of the Council of Europe, Armenia has ratified and is successfully applying a number of CoE legal instruments, including disability-related regulations. The most important of these are the European Convention on Human Rights and case law developed by the European Court of Human Rights. The latter is important for national legal developments and designing strategies, concepts and standards by State bodies. For instance, the judgement in the case of *Nikolyan vs. Armenia* (No 74438/14) concerned the right of access to court by persons with a mental health disability. **Case law by the European Court is an important resource for the development of country-level policies, strategies and programmes that complies with UN criteria.**

Armenia also ratified the Revised European Social Charter on 21 January 2004, Part III of which sets out general provisions for non-discrimination, stipulating those rights under the Charter should be guaranteed to all persons – without discrimination based on any grounds, including **disability**. The

⁴ Including the International Covenant on Civil and Political Rights, the Convention on the Elimination of All Forms of Racial Discrimination, the International Covenant on Economic, Social and Cultural Rights, the Convention on the Elimination of All Forms of Discrimination against Women, the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment and the Convention on the Rights of the Child. Armenia has also ratified a number of optional protocols to some of these conventions; for instance, the Optional Protocol to the Convention on the Rights of the Child, relating to the establishment of procedures for filing individual complaints to the Committee on the Rights of the Child, and the Optional Protocol to the International Covenant on Economic, Social and Cultural Rights.

Social Rights Committee, which monitors Charter implementation by Member States, has developed substantial soft law on the rights of persons with disabilities: Many of the Committee's conclusions about Armenia's fulfilment of its obligations with regard to various provisions of the Charter are accessible in the European Court's electronic platform, HUDOC.

Armenia has ratified the European Convention on Prevention of Torture and Inhuman or Degrading Treatment or Punishment, under which the Committee for the Prevention of Torture (CPT) was established. The Committee has broad powers to monitor the closed institutions of the Member States, including penitentiary facilities and mental health centers. Together, **the European Convention on Prevention of Torture and the CPT provide important guidance on protecting the rights of persons with a disability who are being detained or in mental hospitals. In addition, the Convention and the CPT represent important resources for developing strategies and programmes to protect persons with disabilities enclosed institutions from discrimination and cruel treatment.**

Positive legal developments have taken place concerning the rights of persons with disabilities under the instruments of the Council of Europe, including the case law of the European Court of Human Rights – **mainly concerning basic human rights covered under the European Convention of Human Rights, such as access to justice, right to be heard, unlawful deprivation of liberty, lack of redress and remedial mechanisms, inhumane and degrading conditions or treatment of persons under detention, etc. However, very little progress was achieved in relation to the right to non-discrimination, especially for vulnerable groups such as women and children with disabilities.**

2.3. National legislation and law enforcement practices⁵

On 5 May 2021 the National Assembly adopted the Law On the Rights of Persons with Disabilities (hereafter referred to as the Law), which entered into force on 4 June 2021. **The Law seeks to ensure the provision, protection and promotion of the rights of persons with disabilities.** It provides legal definitions for such important concepts as *disability, accessibility, reasonable accommodations, universal design, disability-based discrimination, independent living*, etc. The concept of disability is defined based on the UNCRPD definition, a bio-psycho-social, or human-rights based, model of disability. The Law also enables OPDs to file lawsuits on the grounds of discrimination to protect the rights of disabled persons unable to represent themselves in the courts. It imposes an obligation on the State administration and local self-government bodies to carry out various projects and services that are community-based, enabling persons with disabilities to live in their communities rather than entering large residential institutions, hence, exercising their right to independent living.

To ensure effective use of the Law, the government is considering the adoption of the following Resolutions: 1) *On approving the 2022-2027 comprehensive programme for social inclusion of persons with disabilities*, 2) *On approving the procedure for providing personal assistant services*, 3) *On*

⁵ More information is available in the Annex 4

approving the procedure for ensuring reasonable accommodations and 4) On approving accessibility requirements on the websites of official State and local self-government bodies. Once adopted, these government regulations will support implementation of the Law, since they provide detailed procedures and frameworks that will contribute to implementing the Law in each of the specific areas outlined. After adopting the regulations, the government will provide a budget for their enforcement. On 5 May 2021 the National Assembly also adopted a Law On Functional Assessment of Persons, to regulate the grounds and procedures for assessing an individual's functionality, determining his or her degree of functional limitation and designing individual service delivery plans. The Law would also allow persons with disabilities to appeal and monitor decisions by assessment committees. The introduction of functional assessment, based on the World Health Organization's 'International Classification of Functioning, Disability and Health' (WHO ICF) took place in line with the MoLSA 'Roadmap on Reform of Disability Assessment and Introduction of the Functional Assessment', developed in 2019 in the framework of the previous UNPRPD project.

In 2017 the National Assembly adopted a Law on Preventing Family Violence, Protecting the Victims of Family Violence and Restoring Peace in the Family, which was enacted on 31 January 2018. This law has implications for the rights of persons with disabilities. In particular, it protects '*persons in care*' which embraces three categories: children, the elderly and persons with disabilities⁶. Several legal aspects relating to persons with disabilities, such as legal capacity, active legal capacity and issues related to compulsory medical care for citizens in psychiatric institutions, are regulated by the Civil Code of the Republic of Armenia. The rights and responsibilities of persons with intellectual disabilities are regulated by the Law on Psychiatric Care. The use of compulsory medical measures on a person and compulsory medical care in mental health institutions are regulated by the Criminal Procedure Code and the Criminal Code of Armenia. In addition, , specific aspects of the rights of persons with disabilities are also protected by the Law on Medical Assistance and Service to the Population", which sets the ground rules for carrying out medical/social examinations to determine the disability group into which an individual falls; the law of the Republic of Armenia "On Social Support", which establishes legal grounds and conditions for providing care to persons with disabilities (as persons facing 'difficult life situations'); the Labor Code, which defines privileges for persons with disabilities in employment and the law On Urban Planning, which sets out the principles of urban planning activities and regulates the accessibility of buildings and other structures.

Apart from these statutes, several government regulations have been promulgated to regulate issues arising from the above-mentioned laws, such as the Decision on Disability Benefits (Resolution No. 635-N dated June 26, 2014), Resolution on Persons not in Military Service who Acquired Disability during Defense of the Republic of Armenia (Resolution No. 580-N dated June 2, 2016), Resolution on Procedure and Conditions for Providing Care to Persons with Disabilities (Resolution No. 1112-N dated September 25, 2015), Resolution on Social Groups Having the Right to Receive Medication Free of Charge and on Preferential Terms (Resolution No. 396-N dated June 8, 1999) and many others.

Courts and administrative bodies are also gradually developing law enforcement practices related to the social model of disability, especially in cases touching on an individual's legal capacity, focusing on issues of access to court and the right to be heard, etc. In this regard, Decision SDO-1197 of the

⁶ See article 4, part 1, paragraph 6.

Constitutional Court is of particular importance; the court declared unacceptable the failure by courts to notify persons recognized as lacking legal capacity in proceedings that touch upon their rights or interests. Also noteworthy was the decision by the Court of Cassation in civil case No. EShD/0938/02/10 on the right of a person to be heard during trial proceedings concerning his/her legal capacity.

However, national legislation regulating the rights of persons with disabilities lacks a distinct non-discrimination law. The draft law has been pending in the national online platform for public debate for an indefinite period, without a clear timeframe for being forwarded to the national parliament for adoption.

2.4. National policies and strategies⁷

With the ratification of the Convention in 2010, Armenia agreed to change the national concept of the rights of persons with disabilities: transitioning from a medical to a bio-psycho-social model. This change implied the need for reforms. Among the first steps, MoLSA developed a concept paper for *Introduction of the Disability Comprehensive Assessment based on the WHO Principles of the International Classification of Functioning, Disability and Health*, which was approved by a government resolution in 2014.⁸ Following that, a number of reforms were undertaken; in particular MoLSA initiated a reform of the system of medical and social expertise for assessing an individual's degree of disability. MoLSA studied the WHO ICF, and with international support, developed age- and gender-sensitive assessment toolkits and methodological guides for use by professionals when conducting individual functional assessments, with his/her active and meaningful participation. Further, the government adopted several strategic documents that were approved by government resolutions (thereby obtaining the status of 'sub-legislative acts', which makes them mandatory legal instruments). On January 12, 2017, the government adopted the [Comprehensive Programme for Social Inclusion of Persons with Disabilities for 2017-2021 and Measures to Ensure the Implementation of the Programme](#). This document envisages steps by State bodies in several strategic directions: 1) *Alignment of national legislation with the requirements of the UNCRPD*, and 2) *Accessibility to education, employment, participation in sports and cultural life, entertainment and tourism, health, treatment and recovery, participation in political and public life, protection of the population in emergency situations and civil protection and statistics and data collection*.

The five-year programme calls for funding of related activities not only from the national budget but also from community budgets and other supplementary sources, such as international donor organizations. Some activities are defined in the programme to be funded solely by donor organizations, including: 1) *work necessary for the introduction of a human rights-based model of disability assessment*, 2) *introduction of a social model of personal needs assessment by State and NGO service providers*, 3) *creation of a social taxi service*, 4) *ensuring accessibility of information for persons with disabilities through the introduction of a special video communication system by service delivery entities*, 5) *development of assistance guidelines to address specific situations and introduce*

⁷ More information is available in the Annex 4

⁸ See RA Government Protocol Decision N 1 as of January 9, 2014. Available at: <http://www.e-gov.am/protocols/item/347/>

appropriate services, 6) introduction of inclusive education coordinators at higher education institutions (universities) to support the organization of an educational process accessible to persons with disabilities and 7) establishment of social enterprises for persons with disabilities.

The programme also provides for certain activities to be co-funded by State and community budgets and international donor organizations. Among these activities, designed to improve accessibility are:

- 1) Review and modernization of construction norms providing accessibility for persons with disabilities in buildings and constructions (RA Building Norm IV-11.07.01-2006),*
- 2) Development of a set of design rules for ensuring the accessibility of buildings and construction for persons with disabilities,*
- 3) Provision of vehicles adapted for persons with disabilities,*
- 4) Installation of special elevators for persons with disabilities on buses operated on intercity and suburban routes and installation of devices for loud announcements of the names of bus stops,*
- 5) Providing access to the official website of the State bodies for persons with visual and hearing disabilities,*
- 6) Providing audio guide service for visually disabled visitors to museums, art and culture institutions,*
- 7) Introduction of services for persons with hearing difficulties in theatres,*
- 8) Providing materials related to the selection process for persons with disabilities in an affordable format,*
- 9) Regular publication of information, printing and dissemination of information materials on programs, activities, services aimed at the social inclusion of persons with disabilities, as well as on issues of persons with disabilities and on ongoing reforms,*
- 10) Measures to raise awareness among specialists and journalists about persons with disabilities and their problems.*

The five-year programme calls for monitoring and evaluation activities to be carried out by a body consisting of representatives of governmental bodies and OPDs/NGOs.

Despite these measures, State bodies failed to publish information on the results and reports of the ongoing monitoring of implementation of the five-year government programme. The monitoring framework, envisaged by the programme has not been put into motion. In this regard, the key issues in terms of the strategy's feasibility and effectiveness appear to be proper organization of the accountability and ongoing monitoring processes, coordination of the work of all responsible bodies and the routine provision of information to the public.

On 16 May 2019 the Government adopted Resolution [**No. 650-L "On Approving the Programme of Activities of the Government of the Republic of Armenia for 2019-2023"**](#). This envisages several measures related to the rights of persons with disabilities aimed in particular at: increasing the competitiveness of young persons with disabilities in the labour market (par. 6), bringing national legislation in line with the requirements of the Convention (par. 7), establishing a social model for assessing the needs of persons with a disability and providing rehabilitation services commensurate with assessed needs (par. 8).

On 29 September 2020, by Resolution N 1601-L the Government issued a Decree [**"On Approving the 2021 Annual Programme for Social Inclusion of Persons with Disabilities and the List of Measures"**](#). The Resolution envisaged several specific measures for 2021: 1) *acquisition of vehicles adapted for the service of persons with disabilities, 2) development of a detailed action plan and*

schedule for the complete adaptation of the transport system as well as bus stops in Yerevan and in all regions of the Republic of Armenia, 3) oversight to ensure the accessibility of new urban development projects and building renovations, 4) adapting building conditions at preschool educational institutions to the needs of students with disabilities, 5) improving the conditions of school buildings to ensure accessibility for children/persons with disabilities, and 6) introduction of service (sign-language) for persons with hearing difficulties in theatres.

On 30 September 2021, the Government adopted the Decree [On Approving the Annual Plan for 2022 and the List of Measures for the Social Inclusion of Persons with Disabilities](#). Under this decree, 42 measures were envisaged for 2022. The implementation deadline for most of the 35 activities foreseen is the fourth quarter of 2022. Unlike the annual plan for 2021, the plan for 2022 does not list donor organizations as a source of funding. However, seven of the activities can receive funding from “other sources not prohibited by law”, offering an opportunity to seek external donors. **In regard to accountability for the annual plans, the 2020 plan did not include a public reporting mechanism. The 2021 action plan lacked information on the timeframe for implementation of the measures envisaged that year. Although both the annual plans for 2020 and 2021 contain a reference to the five-year programme for 2017-2021, it is not clear which specific measures reflect the general policy directions of the five-year programme. This is due to the fact that there is no monitoring framework in place, as envisaged by the five-year programme. In summary, there is no comprehensive monitoring and accountability framework for implementation of the annual programmes or the five-year programme. Monitoring is not done regularly based on clear cut schedule.**

The next strategic document is Government Resolution N 369-L of 18 March 2021: [On Approving the Programme for the Protection of the Rights of Persons with Disabilities Obtained during Military Service and the Program Implementation Schedule](#). Some of the measures envisaged by this document do not contain underlying data on their intended scope or the number of intended beneficiaries. For example, no clear data are available on the number of **people who were injured or obtained disability status as a result of the 2020 armed conflict. The data used in the programme is thus preliminary.**

On 26 December 2019, the Government adopted a [National Strategy for the Protection of Human Rights and Action Plan for 2020-2022](#) which envisages several strategic measures under sections entitled ‘Equality/Non-Discrimination’, ‘Right to Health Care’ and ‘Right to Education’: 1) *Acquisition of affordable means of transportation to transport arrested and detained persons (including persons with special needs and with disabilities) in accordance with international standards (deadline: first half of 2022);* 2) *Implementation of work related to ratification of the Optional Protocol to the 2006 UN Convention on the Rights of Persons with Disabilities (deadline: first half of 2021);* 3) *Legislative definition of protection of the rights of persons with disabilities and social inclusion guarantees (deadline: first half of 2020);* 4) *Legislative definition of rules for medical care and services for persons with disabilities (deadline: first half of 2021);* 5) *Ensuring the participation of persons with intellectual disabilities in all decision-making processes concerning them (deadline: second half of 2020);* 6) *Raising awareness about the right to health and medical care (including sexual and reproductive health) for those with disabilities are in penitentiaries or psychiatric institutions (deadline: first half of 2022), and*

7) *Implementation of training in specialty medical care and services for persons with disabilities (deadline: 2020-2022 regularly).*

The 2020-2022 programme envisages the establishment of a Coordinating Council to oversee and monitor implementation of the action plan. The Coordinating Council consists of representatives of public authorities and civil society. Information on Council activities is available on the Platform of National Strategy for Human Rights (under "[Coordinating Council](#)") and is posted on the official website of the Ministry of Justice (<https://www.moj.am/>). This platform (<http://www.e-rights.am>) in turn provides an opportunity to ensure transparency and accountability of all processes related to the strategy and action plans. The report for the first and second halves of 2020 and the annual report for 2020 are currently posted on the platform. **A review of the reports from 2020 and the first half of 2021 suggest that performance on measures related to the rights of persons with disabilities were found to have been only partially fulfilled.**

The adoption in 2021 of the two major legislations, the Law on the Rights of Persons with Disabilities and the Law on Functionality Assessment, can be regarded as two major developments in the sphere of protection of the rights of persons with disabilities. However, the government has not yet adopted the regulations which are necessary in order to ensure that the above two laws are implemented effectively. Further, despite training seminars on awareness enhancement of the rights of persons with disabilities, including on prohibition of discrimination, have been regularly held for employees and specialists dealing with support and other services for persons with disabilities, the statistics show that low number of employees attended those seminars. In this context, the government failed to undertake sufficient measures to ensure effective training programs were held on non-discrimination, accessibility, inclusiveness, and other fundamental principles under the UN Convention on the Rights of Person with Disabilities.

In addition to the strategic documents noted above, several draft papers were under development by the government in early 2022: 1) a draft resolution "[On Approving the Development Strategy in the Area of Labor and Social Protection](#)" which envisages the introduction of electronic system for assessing the functionality of persons with disabilities, 2) a draft resolution "[On Approving the Strategy for the Development of the Labor and Social Protection Sector for 2020-2025](#)", which addresses the new methodology and procedures for monitoring services in the field of social protection, including an information system for monitoring and evaluation of programmes and measures, 3) a draft resolution "[On Approval of the Schedule for Implementation of the 2020-2024 Action Plan for Transformation of Care Services for Persons with Disabilities](#)", which targets critical issues such as the right of persons with disabilities to live independently and be included in the community.

Major gaps:

- Armenia has not ratified the Optional Protocol to the Convention, which would allow individuals or groups of individuals to lodge complaints to the UN Committee on the Rights of Persons with Disabilities about systemic problems affecting them,

- Armenian legislation lacks a distinct non-discrimination law. This legislative gap weakens enforcement of the newly adopted Law on the Rights of Persons with Disabilities, which seeks to curb the practice of discrimination on the grounds of disability.
- Following the adoption of the Law on Functionality Assessment, it was expected that the Government would speedily adopt a number of regulations providing detailed procedures for operation of the system. However, the regulations have not been adopted, resulting in a major operational gap between the law and its enforcement.
- National legislation does not clearly define the concepts and legal grounds for intersectionality and multiple discrimination. These key gaps contribute to the absence of institutionalized administrative and court practices to protect the rights of vulnerable women and children with disabilities.
- The State and municipal bodies lack experience in implementation of the Law on the Rights of Persons with Disabilities, resulting in a lack of intersectoral coordination and collaboration in regard to implementation.
- There is a lack of effective public reporting on and monitoring of State bodies' performance with regard to national policies, strategies and projects concerning persons with disabilities.

Recommendations

1. MoLSA and other State bodies with reporting obligations should have clear and foreseeable procedures (e.g., rules, timeline, format, platforms, etc.) for regular reporting on implementation of government programmes and projects, including the Five-year Action Plan and the annual action plan for 2022.
2. It is recommended that the UN approaches MoLSA with a proposal for providing assistance on improving existing reporting procedures and platforms.
3. MoLSA should take the initiative to develop intersectional cooperation between MoLSA and the Ministry of Health, the MoECS and the Ministry of Territorial Administration, to introduce a unified policy on community-based services. The policy should address ensuring adequate accountability and ongoing monitoring structures, coordinated work of all stakeholders and routine provision of information to the public through the publication of strategy implementation reports.
4. MoLSA and the Ministry of Justice (MoJ) should facilitate speedy adoption of the Optional Protocol to the Convention by the National Parliament.
 - a. It is recommended that the UN wapproaches the Ministry of Foreign Affairs (MFA) or the MoJ to determine whether Parliament has a clear timeline for adopting the Protocol.
5. The MoJ should finalize the draft Equality/Non-discrimination Law and facilitate its approval by the Government so that it can be forwarded to the Parliament for adoption.
 - a. It is recommended that the UN proposes provision of technical legal assistance to improve aspects of the Equality Law related to disability; in particular,

clarifying the law's definitions of intersectionality and multiple discrimination and generally ensuring that it is in harmony with the Law on Rights of Persons with Disabilities, the Law on Domestic Violence and the Law on Equal Opportunities for Women and Men.

6. MoLSA should facilitate speedy adoption by the government of a set of regulations (sub-legislative acts) necessary for full and effective enforcement of the Law on Functionality Assessment and the Law on the Rights of Persons with Disabilities.

3. Accessibility

3.1. Educational institutions, cultural and sport facilities

When reviewing the preliminary report by Armenia in 2017, the Committee expressed concern that despite the growing trend toward inclusive education, children with disabilities still study in segregated education systems and don't receive the support they need. The Committee also expressed concern over the lack of accessibility and reasonable accommodations in public schools for children with disabilities and the lack of support and training courses on inclusive education for administrative and educational staff. The Committee further noted the lack of a comprehensive strategy to promote inclusive, quality education in urban and rural areas and to ensure inclusive education at all levels, including preschool and tertiary education.

Access to pre-school educational facilities remained unresolved by the end of 2020. Overall, in Armenia, there are 910 community, departmental and non-state preschool education facilities ([National statistic](#)). 161 kindergartens are operating under the Yerevan Municipality, of which only eight have a capacity to provide inclusive education. According to the new Law on Preschool Education (adopted in 2020) and an Action plan (adopted in 2021) on mainstreaming inclusion in preschool education, all preschool education facilities will become inclusive by the end of 2023. According to the Ministry of Territorial Administration and Infrastructure, in 2020 **State bodies failed to take measures to improve accessibility in all regions of the country. According to the Ombudsman's annual report, Armenia lacks unified practice and approaches for resolving the issue of accessibility.**

Access to school, according to 2021 data 7,317 children with special educational needs are attending inclusive schools, while 556 children with disabilities and with special education needs are studying in the special schools ([EMIS](#)). The Law on General Education provides for the introduction of a universal inclusive education system in Armenia by August 1, 2025. Hence, inclusive education is an on-going process. As of this writing, neither transportation to schools nor the physical environment at schools can be considered accessible by children with disabilities. According to a [study](#) carried out by the NGO Disability Inclusive Development, which examined 20 schools built or reconstructed in Yerevan, Gyumri and Vanadzor cities, overall accessibility rates ranged from 79 percent to 24 percent, **meaning that most of the 20 schools observed did not meet accessibility standards.** A lack of accessibility was also observed at facilities housing the most vulnerable groups: the Kharberd Specialized Orphanage and Boarding House No. 1. For buildings at higher educational institutions

(universities), in recent years ramps and bathroom accommodations were built at several buildings to meet the needs of students and visitors. However, students with disabilities report many other obstacles; in particular, the lack of adapted accessible educational literature and other teaching materials, as well as ongoing problems tied to physical accessibility of buildings.

Overall, the physical environment at cultural institutions is not accessible for persons with disabilities and does not permit them free movement inside the buildings. Moreover, many cinemas, theatres and other cultural structures are totally lacking in specially adapted areas for persons with visual, hearing or mobility impairments. To mitigate these inconsistencies, government bodies occasionally provide support to NGOs representing the interests of persons with disabilities. For example, from January to October 2021, MoLSA provided books and notebooks in Braille to persons with visual impairments and organized a 'Talking Books Recording Services' event with the Association of the Blind in Yerevan. The same support programme allowed the Association of the Blind to publish nine issues of a monthly 'Bulletin' in Braille, each with a circulation of 260 copies. However, in general sufficient steps are not being taken by the State to develop accessible recreational and sports facilities for persons with disabilities, such as ramps and other reasonable accommodations.

3.2. Court buildings

Court buildings as a whole do not meet the accessibility requirements for persons with disabilities. The bathrooms are mostly in poor conditions, and totally lack accommodations. Most restrooms have Squat toilets and are placed far from the floor. Doors and the bathrooms themselves are narrow and not adapted for wheelchairs. Information and communication systems also place a burden on persons with disabilities. For example, the cost of translators for persons with disabilities are not reimbursed by the courts, which demonstrates a discriminatory attitude since the government compensates other types of translation services such as, for example, foreign language translations. When communication costs are borne by the applicant, persons with disabilities are more likely to avoid taking cases to court. Detainees who are moved from prison to courts for trial also face substantial problems, since some courts have detention cells located in underground floors with no elevators or other devices available for detainees with mobility problems. Under such circumstances, according to bailiffs and police officers who accompany detainees to courts from penitentiary facilities, the detainees must be carried by hand to their cells, raising issues of discriminatory and degrading treatment.

3.3. Penitentiary facilities and mental health centres

Physical accessibility at penitentiary facilities remains largely unavailable, characterized by a complete lack of care services. Penitentiaries lack specialized staff to provide daily care for detainees with disabilities, including transport, food, bathing, and toileting.

Mental health centres also fall short of the minimum standards for physical accessibility and present barriers for communication access. For example, some facilities lacked boxes for complaints, some exercised a total ban on the use of cell phones and others lacked payphones.

3.4. Public transport

The accessibility of public transport is a systemic problem that remains largely unresolved in the capital and all other urban areas of Armenia. Public transport as a whole lacks accommodation for people who require a wheelchair for mobility. In 2021 Yerevan Municipality acquired 211 new compact buses with lifts and ramps for wheelchairs and put them in use in October 2021. Another contract for purchase of long, 8.6 meter buses with similar technology was signed recently by the municipality. In addition to physical barriers, public transport systems lack communication systems for persons with disabilities. As part of ongoing public transport reform, municipal authorities plan to introduce an electronic payment system with a device allowing communication by persons with hearing and visual impairments. Finally, the lack of adaptations and accommodations in Yerevan's Metro is a long-standing problem. No effective universal design or reasonable accommodation have been introduced in the Metro's infrastructure.

3.5. Victims of domestic violence

Women and girls with disabilities are often subjected to domestic violence.⁹ Some regions of Armenia have support centres, several of which are national non-profit organizations (SNPOs). Among the organizations are: the Women's Support Center/Shelter (NGO), Yerevan Zatik Child Support Center (SNPO), Yerevan Ajapnyak Administrative District Children's Social Care Center (SNPO), Nubarashen Child and Family Support Centre, unik Region Child Support Center (foundation), Lori Region Child and Family Support Center (SNPO) and the Gyumri City Child Social Care Center" (SNPO). **There are no support centres in other regions.** Persons with disabilities who have been abused – in particular, persons with hearing, psychological, visual, intellectual, or physical disabilities – are registered at only two of the seven above-mentioned centres. Women and girls with visual, physical and hearing impairments experience highly limited inclusion and access, due to the lack, or absence, of specialists, necessary materials and the furnishings.

Very few records of violence against a person refer to disability as a distinct category. Moreover, a government resolution precludes making a note of the victim's disability when recording domestic violence. Thus, domestic violence against persons with disabilities is latent, remaining largely undisclosed and uncounted. Given women's vulnerability to domestic violence (especially those with a disability) victims often prefer not to report instances of violence towards them for fear of sparking reprisals. This problem is often due to police failure to effectively explore the motive behind such crimes. This approach deepens the discriminatory attitude towards persons with disabilities in society and excludes them from many spheres of life, making the obstacles faced by persons with disabilities more invisible. In order to eliminate discrimination in such situations, the State is obliged to take constructive action, making it mandatory to report the disability of a victim of domestic violence, which will not only increase their visibility but also increase public awareness and help to end discrimination.

⁹ See "Qualitative Study on Increasing the Efficiency of the Practice and the Initiatives of Providing Multi-Sectoral Response to Domestic Violence in Armenia" at the following link <https://bit.ly/3EwOALG>

3.6. Participation in political life

Multiple factors impede political participation by persons with disabilities. During focus group discussions, individuals from different groups of persons with disabilities, living in both urban and rural areas, stated that the biggest obstacle was the inaccessible physical environment at polling stations, which lack both ramps and handrails. Many polling stations have uneven thresholds, inaccessible restrooms, narrow doors leading to election rooms and numerous stairs. Another obstacle to political participation is the difficulty involved in accessing campaigns and campaign information, impeding the exercise of political rights and electoral participation by persons with hearing, visual and intellectual impairments. Specifically, the absence of Braille translation, subtitles, audio templates and translators, and the complexity of texts for persons with learning difficulties limit participation. The campaign process is also inaccessible to persons with physical impairments, as rallies are generally held in inaccessible, crowded places. Inaccessible transportation is another barrier to political-civic participation, which has been specifically targeted as a priority by groups of men and women with disabilities from rural areas. Persons with mobility difficulties are especially affected, as lack of accessible transport restricts their ability to reach polling stations, participate in demonstrations and conduct their own campaigns.

In 2020 “Agate Rights Defense Centre for Women with Disabilities” NGO conducted a comprehensive survey¹⁰ on the accessibility of polling stations in Yerevan and 10 regions of Armenia. The survey assessed 1,987 polling stations, including 11 closed penitentiary institutions, accounting for 99 per cent of all polling stations in the country. It found that according to accepted normative requirements, none of the polling stations could be considered fully accessible, while 524 (26 per cent) were partially accessible, given the availability of one or more accessibility functions.

Major gaps:

- Lack of accessibility in public spaces is widespread and systemic in nature. Most educational, cultural, sport and leisure facilities, public transport, and built infrastructure (including court buildings, penitentiary facilities, polling places and mental health centres) lack basic physical accessibility standards.
- The Government lacks a comprehensive, coordinated programme for eliminating physical barriers in public spaces in the regions. Funding for building ramps and other accommodations are not allocated proportionally between the regions and the capital, nor among the regions.
- Translation services at courts for persons with disabilities is discriminatory, as they are not reimbursed by the government, unlike translation services for foreign language speakers, which are provided free of charge.

¹⁰ See the page with links to the publications:

<http://agatengo.org/%D5%B0%D6%80%D5%A1%D5%BF%D5%A1%D6%80%D5%A1%D5%AF%D5%B8%D6%82%D5%A9%D5%B5%D5%B8%D6%82%D5%B6/?lang=hy:>

- Support centres for women and girls with disabilities who are victims of gender-based violence are not allocated proportionally in the territory of Armenia; support centres are located only in the capital and in three regions.
- The law on domestic violence lacks a definition of violence based on disability. Given the absence of a dedicated non-discrimination law this is a major gap, which results in the failure to investigate and record violence motivated by discrimination based on both gender and disability, e.g., intersectionality.

Recommendations:

- 1) It is recommended that MoLSA conducts a needs assessment to discover why resources are not distributed equally among the regions and between the regions and the capital. The Government should review its policy on creating an accessible physical environment to ensure that actions and corresponding funding are equally distributed among administrative regions of Armenia.
- 2) It is recommended that MoLSA reviews the policy of building support centers and shelters for women and girls to ensure that they are available proportionally in all regions of Armenia.
- 3) The government should ensure sustainable, long-term funding for shelters and social assistance centers, while at the same time making those buildings more accessible to persons with different types of disabilities. The Government should also ensure that support centers and shelters are equipped with hotlines accessible to persons with all types of disabilities. Further, the government should ensure that information bulletins, brochures and other information materials are available for persons with disabilities in an accessible format, e.g., in Braille, through audio for persons with visual impairments, or in easy-to-read formats for persons with intellectual impairments, and videos with sign language interpretation and closed captions for persons with hearing impairments.
 - a. *It is recommended that the UN assist the government and NGOs to develop methodological guidelines on accessibility and communication with persons with different types of disabilities and to disseminate them among shelters and support centers.*
 - b. *It is recommended that the UN implement a project in cooperation with MoLSA to train support centers' staff on how to handle the needs of persons with disabilities.*
- 4) MoLSA and the Ministry of Justice should initiate an amendment to the Law on Domestic Violence to define the prohibition of violence based on discrimination by gender and disability, under the general concept of intersectionality.
- 5) In the context of the above it is recommended that the Police and Ministry of Justice jointly amend the electronic and paper-based forms used to report crimes by adding a separate paragraph (check box) for indicating that disability was the motive of the reported crime. The forms should also specify the victim's type of disability, which is necessary both for effective investigation and for data collection purposes.

- a. *It is recommended that the UN approaches the CoE office in Yerevan about possible cooperation on these matters as part of CoE planned projects with law enforcement bodies of Armenia, such as projects for revising crime report forms, in the general context of improving the collection of disaggregated data on crimes motivated by discrimination.*
 - b. *It is recommended that the UN organizes a workshop with officials from law enforcement bodies (e.g., investigative, and prosecutorial bodies, including the Police Information Centre) on Convention requirements for crime reporting and data disaggregation, with a special focus on handling of reporting crimes of domestic violence involving victims with disabilities.*
- 6) The discriminatory practice of charging persons with disability for translation services (eg. sign language interpretation) in courts should be stopped immediately. In this regard, the Supreme Judicial Council, as the highest judicial body, should amend the relevant regulations and instruct courts to suspend the practice until the regulations are revised and put in force.
 - a. *It is recommended that the UN approaches the Supreme Judicial Council with a recommendation to amend the practice, in accordance with the UN Convention on the Rights of Persons with Disabilities.*
- 7) NGOs, OPDs, government officials and civil servants involved in important decision-making processes should receive regular training on various aspects of the Convention, with a special focus on intersectionality and multiple discrimination.
 - a. *It is recommended that the UN provides assistance to MoLSA to design training programmes (including training-of-trainers) and for the delivery of training seminars on intersectionality, multiple discrimination and other forms of discrimination against persons with disabilities.*
- 8) It is recommended that the MOJ and CEC amend the Election Code to add a provision that voting should take place in an accessible environment.
 - a. *It is recommended that the UN directs this recommendation to the MoJ and CEC in collaboration with OPDs and persons with different types of disabilities. The UN could provide technical legal assistance, such as expertise for drafting amendments of the election law, including relevant government regulations addressing the exercise by persons with disabilities of their political right to vote and stand for elections.*
 - b. *It is recommended that the UN also suggests measures to reform and improve access to communication online and at polling stations – such as, for example, sign language interpretation for persons with hearing disabilities or persons with hearing impairments, accessible and easy-to-read format information for persons with intellectual and learning disabilities and those with other forms of disability.*
 - c. *Given the planned constitutional reforms, it is recommended that the UN initiates talks with the newly formed Commission on Constitutional Amendments, or with the Parliamentary Permanent Commission on the*

Issues of Human Rights, on the possibility of defining temporary or permanent quotas for National Assembly elections to promote political participation by women with disabilities.

4. Provision of inclusive services

4.1. Disability assessment and referral/guiding systems

With the amendment to the Law on Social Assistance of 25 February 2021, MoLSA established a 'Unified Social Service' (USS) within its structure, bringing together four major bodies in the field of social protection: 1) social security service, 2) medical-social examination, 3) state employment offices and 4) regional social assistance agencies and community-level social assistance divisions. As a result of this major unification, many persons with disabilities, particularly those with mobility problems, raised concerns about reaching territorial branch offices, which are often located far from their homes.

Problems persist with the disability assessment process, which has not yet been transformed to a functional assessment mode. Further, assessments are not carried out by a multidisciplinary team, and the "medical" approach still prevails in the assessment of the results. These inconsistencies are caused by the fact that the Law on the Functional Assessment entered into force in September 2021, whereas the relevant government regulations, which provide more detailed frameworks and procedures, are only scheduled for adoption in April 2022. In the meantime medical examinations are still being carried out in accordance with existing regulations, which fall under the medical model of disability assessment.

Further, access to medical/social examination is difficult due to the limited number of assessment centres, which often requires long-distance travel for persons living in rural areas due to the lack of accessible transportation. Respondents also mentioned the difficulty posed by challenging decisions by the assessment commissions. Most appeals are refused by administrative bodies, leading complainants to seek a remedy through the judiciary. However, it can take as long as two years to pursue a case in administrative court, deterring people from doing so.

Another issue is tied to the subjective nature of decisions. As mentioned, the medical approach to assessment still prevails in Armenia. Commissions often decide that the current pathology has not led to a limitation of life activities. Under such circumstances, citizens are generally advised to re-apply to the local commission for re-examination if their condition becomes worse. This requires additional diagnostic, medical, and rehabilitative measures, and these steps have significant financial costs. Many applicants are unable to obtain new medical records due to lack of financial resources. This is not in line with the requirements of the Convention, which specifies that disability should not become an additional financial burden for persons seeking to exercise their rights.

The COVID-19 pandemic further complicated these problems. Examinations scheduled for February 2020 were postponed until April 2020 and then extended to October 2020. Given that an electronic filing procedure was introduced, many applicants were unable to submit electronic applications within the timeframe required. Many applicants were not even informed about the new electronic procedure.

4.2. Support services

According to the Law On Social Assistance, the main social services include: counselling support, rehabilitation support, in-kind support, housing, care, legal assistance, assignment and disbursement of pensions, benefits and other monetary payments, services defined by law and services requiring medical and social expertise, including other social services not prohibited by the law. According to MoLSA, around 14,000 assistive devices are provided annually. If the beneficiary is not able to visit a USS site due to a health condition or other problem, at the beneficiary's request USS officials and the multidisciplinary team make a home visit or communicate by video.

Within the framework of measures supported by designated expenditures from Armenia's state budget, care and social rehabilitation services are offered to persons with disabilities to assist with arranging day care and/or round-the-clock care for persons with disabilities, their social inclusion and the development of independent life skills. Starting in 2019, tenders have been announced for the implementation of services, in which organizations certified by MoLSA are eligible to participate. Grants from the state budget are provided to organizations winning the tenders to facilitate care, employment and training for persons with disabilities.

A 2019 UNICEF evaluation of rehabilitation services for children in Armenia, as well as information collected during this study, found **a significant gap between the need for these services and capacity to provide them, as well as a lack of access to habilitation and rehabilitation services in some regions**. Access is more difficult for children from rural areas as most services are concentrated in the capital city. State funding is limited: children with disabilities or developmental delays can receive only one or two intensive therapy sessions a year, each for a maximum of one or two months. Those living in regions are fully deprived of access to full-scale rehabilitation centres; families must spend extra money to access habilitation and rehabilitation services in other regional centres or in the capital.

The quality of services provided is also unsatisfactory, due to lack of oversight over the quality of treatment, lack of professional staff for provision of services in the regions, lack of effective continuum of professional development for non-health rehabilitation staff. Service quality is also affected by the extremely busy schedule and overload of the entire support system, which also causes delays in identifying children's needs and timely provision of services. Another obstacle to obtaining child rehabilitation services is related to parental involvement. In many cases, due to family or other problems, the child does not participate in the rehabilitation treatment assigned because the parent (guardian) cannot leave the other children unattended or be absent from work. In this regard, the introduction of the personal assistant mechanism can play a key role. The importance of introducing the personal assistant mechanism and expanding community-based services was further emphasized in the context of preventing the spread of COVID-19. The introduction and implementation of this mechanism can not only provide support for those who encounter self-care issues in everyday life but also ensure the accessibility of services. Many parents expressed concerns about **management of the service delivery system, which is seen as overloaded and thus incapable of providing services to all persons in need.** In summary, there is a lack of a monitoring and evaluation system to assess the quality of provided

services and their outcomes, a systematic means of tracking participation by persons with disabilities, and of identifying and addressing the reasons for non-use of services. Finally, both **the number of services covered by State funding and the number of specialists providing such services are limited**. The system is constantly backed-up, and there is a lack of cooperation and dialogue with beneficiaries or their parents. The end result for children depends heavily on the human qualities and knowledge of staff.

Mandatory community-based services should be available in each settlement and accessible for children with disabilities, which will ensure a continuum of services throughout the entire lifespan, starting from an early age to adulthood, offering a sense of security for children with disabilities and their parents. It is also necessary to provide full-scale services for persons with disabilities at day care centres (care, development, ongoing rehabilitation therapies, health services).

A new mechanism is needed to expand diverse types of foster care, including specialized and emergency foster care, when parents of children with disabilities are unable to take care of them due to illness or other insurmountable or emergency situations.

It is also necessary to establish community-based independent living centres for young people as a social service, according to international best practices. This will enable young people to be included in public life and benefit from living an independent life. One such example is the centre opened through joint efforts by UNICEF and the Gyumri Centre for Youth Initiatives. UNICEF plans to support the establishment of 10 inclusive centres in Armenia, which will be called 'safe harbors', as they provide diverse inclusive services to children and adolescents.

One of the most common health care problems for persons with disabilities is the lack of free in-patient medical care. Such care is not always fully covered by State funding, and healthcare facilities often refuse to provide high-level medical care (coronary stents, coronary angiography, aortic-coronary shunting, etc.) to insolvent, severely ill patients who fall within the 3rd Group of disability status. According to Government Resolution No. 318-N, open heart surgery is covered by State funding only for persons with 1st and 2nd Group disability status.

Another challenge is gaining access to proper medicines. Obtaining medicine is a major issue because some are difficult to access or completely unavailable because they are not registered in Armenia or included on the list of essential medicines. The cost of chemotherapy remains high. The cost of chemicals for malignant oncological diseases for persons with disabilities is covered by the Ministry of Health's 'minimum scheme of chemotherapeutic measures' in the amount of the actual cost of chemicals purchased by the facility and provided to the patient (around US\$700 per year). Reimbursement is made for the expense for one year, but if the cost exceeds that amount, the difference must be paid by the patient. Some people noted that the amount of compensation was too low, and they had to discontinue medical treatment due to their inability to pay.

Due to the lack, or insufficient availability, of community-based services persons with psycho-social and mental health problems still receive long-term 'care' in institutions designed for that purpose, without being able to leave, giving rise to issues of unlawful deprivation of liberty. The Government has adopted a strategic document aimed at shifting from large-scale care facilities to expanded community-based services. The *"2013-2017 measures for the implementation of the concept of providing alternative services for the care of persons with mental health problems and social services"* approved by the Government on September 13, 2013, envisages the *"establishment of*

a round-the-clock care home for persons with mental health problems in two communities of the country - as an alternative to the Vardenis Neuropsychological Retirement Home within the framework of the pilot program". The first community-based social-psychological service for persons with mental health problems is the Spitak Care Home, which opened in May 2016, designed to accommodate a maximum of 16 people. As of October 2021, the care home is hosting 18 people.

4.3. Inclusive education

The Government of Armenia launched the Universal Inclusive Education (UIE) reform, 'Education For All' in 2016 in an effort to enhance access to education for children with disabilities and eliminate the isolation of children due to their special educational needs. According to data published on the official website of the Education management information system (<https://reports.emis.am>), in the country is 1,404 schools (serving 403,179 students), all schools are announced as inclusive. Overall, 7,317 students with special educational needs are attending inclusive schools and received pedagogical-psychological services. In addition, there are seven special schools where study 556 children with special educational needs/children with disabilities. Of this group, 114 have hearing difficulties, 253 have intellectual impairments, 88 have physical impairments, 59 have visual impairments, and 42 behavioral problems.

Children with disabilities continue to be the largest group of out-of-school children, in spite of the national policy on universal inclusive education. According to the [Household survey](#) (2019), the enrollment in pre-school education facilities (out of the number of children below 6) was 34%, differing according to the level of poverty. Additionally, the preschool enrollment rate (out of children 0-5 years) was 24.3% also differ for urban - 28.6%, and rural communities - 16.2%. Data on children with disabilities in preschools are largely absent from national statistics, making these children 'invisible' to decision makers, service providers and the public.

In 2021 an inclusive education implementation in general education process was launched in the final two regions of Armenia: Ararat and Vayots Dzor. Other regions have already launched efforts to mainstream inclusive education.

In 2020 the Republican Pedagogical-Psychological Centre conducted capacity development training courses for 4,155 specialists from 268 educational institutions. Further training was conducted, and counselling was provided to specialists at territorial pedagogical-psychological support centres, educators at pre-school educational institutions, and parents and children. In 2020, these centres, in collaboration with NGOs and OPDs, provided support services to around 7,300 children with special educational needs, including children with disabilities, in Yerevan, Syunik, Tavush, Lori, Shirak, Armavir, Aragats, Aragats, Aragats region.

During 2021 awareness-raising activities were carried out for pedagogical-administrative staff of mainstream schools, parents, state and community-based institutions (teachers, pre-school educational institution pedagogues, teacher assistants, support specialists, parents, representatives of SNCOs, NGOs and foundations) through consultations, seminars and round-table discussions led by the Support Centres, with the aim of promoting education for children with special educational

needs and/or disabilities, to eliminate discrimination against them and promote universal inclusive education. Overall, 1,224 consultations were held by the Centres, reaching 788 participants.

In addition, 142 posts and awareness-raising materials were posted on the official website of the Support Centres (www.hmk.am), as well as on social media platforms (Facebook, YouTube) to publicize and raise awareness about inclusive education through various informational channels (events, meetings, discussions, seminars, trainings, videos) in the Armenian and English languages. Public Radio's 'Live Together, Learn Together' radio broadcast series aired three programmes to discuss effective inclusive education in schools. Sixteen round-table discussions on challenges and achievements in the area of inclusive education were organized in communities and at schools.

Physical accessibility for children with disabilities remains the major problem at all three levels of the educational system – pre-school facilities (kindergartens), general educational facilities (primary and secondary schools) and higher educational institutions (universities). The lack of physical accessibility at pre-school facilities refers to toilets, group rooms and overall space. Often, parents of children with disabilities prefer to make use of services at rehabilitation or development centres (mostly paid services) rather than exercise their right to education in a public preschool. According to parents, no effective assessment of the needs and development opportunities for children with disabilities is conducted before accepting them into preschool institutions. **The number of professionals in kindergartens who have appropriate training to work with children with special needs is insufficient.**

Universal inclusive education is expected to be fully introduced in Armenian public schools by August 1, 2025. In May 2020 the Government approved a new Law on Preschool Education, which calls for: making inclusive and quality preschool education accessible for all children in urban and rural areas, special education and development needs assessment of preschool age children and provision of individual services and support. At present substantial problems have been identified in regard to **geographical and physical accessibility of schools for children with disabilities. Textbooks, learning materials and programmes are frequently not tailored to the special needs disabled children.** The number of specialized textbooks and exercise-books are not sufficient for the needs of children, including educational materials corresponding to the age and specific developmental needs. Another major issue is the **transportation of children with special educational needs.** The State does not provide transportation to school as a support service. **Another set of issues that concerns parents is the lack of assistive devices for children who cannot communicate through speech and movement, further complicating their education.** The variety and quality of assistive devices is insufficient to meet the needs of children with multiple disabilities. For example, no special communication devices are available to allow children with speech disorders to express themselves and, subsequently, engage fully in the educational process. **Mainstream schools do not offer activities (e.g., painting, ceramics, dance, music) taught by specialists with relevant skills for working with children with special educational needs, and extracurricular institutions usually refuse to admit children with special needs.**

As regards higher educational institutions, the problems are similar to those described above: lack of an accessible physical environment and adapted textbooks. However, significant efforts have been made to build ramps at entrances to university buildings and design accommodations in rest rooms.

Major gaps:

- Disability assessments are still carried out using the medical model of disability because government regulations defining new procedures and frameworks under the recently passed Law on Functional Assessment have not yet been finalized.
- Procedures and grounds for challenging the decisions of disability assessment bodies are complicated, time-consuming, and costly.
- A significant gap exists between needs and the capacity of care and social rehabilitation services to meet them, and access to rehabilitation services is lacking in some regions of the country.
- The quality of rehabilitation services is unsatisfactory for several reasons: limited State funding, lack of State mechanisms to oversee operation of the services, lack of professional staff and an overburdened overall system of support services.
- The quantity of rehabilitation services provided is insufficient for children with multiple or severe forms of disability. Services are not provided on a regular basis or continuously and do not offer the full scope of specialized treatment, such as physiotherapy, ergotherapy, speech therapy, hydrotherapy, and psychology.
- Access to expensive treatments (such as chemotherapy) by persons with disabilities remains problematic due to the high costs of medicine and the limited compensation offered by the government, which often results in a decision by persons with disabilities to cancel their treatment plan.
- Due to the lack or insufficient number of community-based services, persons with psychosocial and intellectual disabilities still have no alternative to receiving long-term treatment and care in mental health facilities, keeping them confined in the facility for long periods of time.
- At all levels of the education system, ensuring inclusive education faces challenges such as the lack of physical accessibility, transportation support and assistive devices; insufficient availability of textbooks and curricula adapted to children with special educational needs; and lack of access to arts and cultural activities led by specialists skilled in working with children with special needs.

Recommendations:

- 1) The MOLSA should introduce targeted assistance programmes, taking into account the individual needs of persons with different types of disabilities.
- 2) The MOLSA in cooperation with MOJ and the Ministry of Health should adopt regulations and sub-legislative acts as soon as possible related to the operation and enforcement of the Law on Functionality Assessment and the Law on the Rights of Persons with Disabilities.
- 3) MoLSA's Office of Medical-Social Expertise should ensure that mechanisms for filing complaints against decisions by medical-social councils are improved, to avoid lengthy

appeal procedures. These procedures should be reformed to allow experts proposed by applicants to obtain the status of independent expert during proceedings.

- a) It is recommended that the UN collaborates with MoLSA to hold in-depth training seminars for the staff of medical/social commissions. The training programme should tackle key problems such as complaint mechanisms and procedures, the use of standards not in compliance with the present functionality assessment system, etc.
- 4) The Ministry of Health should periodically publish, through social media websites or other channels, information on the types of medicines received and allocated through humanitarian aid, as well as those allocated to health institutions through other humanitarian channels.
- 5) Under article 33 of the Convention the Human Rights Defender has a special mandate to monitor implementation of the Convention. It is thus recommended that the UN approach the Human Rights Defender with a request that the following issues be raised with competent State and public bodies, in order to honor Armenia's international obligations under the Convention:
 - a) *strengthen and extend multidisciplinary, community-based services for children and persons with disabilities*
 - b) *establish an individual service 'basket' based on individual needs assessments, to facilitate the provision of services through a certificate, thus allowing the persons with disabilities an opportunity to choose the provider and control the quality of services*
 - c) *develop a list of services based on type, severity, and level of disability, and introduce free long-term rehabilitation services, especially for persons with multiple disabilities*
 - d) *develop the concept and make greater use of personal assistants, accompanying persons, caregiver specialists, ensuring that they possess in-depth multidisciplinary knowledge*
 - e) *strengthen the concept of social worker/case manager, provide in-depth multidisciplinary learning opportunities and regular training related to children/persons with disabilities*
 - f) *promote integrated service models for early intervention services, referrals, and the provision of a continuum of care and support.*
- 6) The government should ensure that required quantities of textbooks, teaching, and learning materials in easy-to-read formats are available at all educational institutions. This issue should be raised with the MoESCS.
- 7) Conduct periodic training seminars and workshops with parents and children concerning behavior, attitudes, and interactions with children with disabilities to promote social inclusion. NGOs and OPDs should be considered as potential implementers of these activities, and it is recommended that UN supports them in this process both technically and financially.
- 8) At all levels of the education system, promote reasonable accommodations, including physical accessibility and assistive technologies for education. At mainstream schools, ensure the presence of professional staff with special skills for working with children with special education needs and disabilities on extracurricular activities (painting, ceramics, music, sport and etc.). This issue should be raised with the MoESCS.

5. Aftermath of conflict in and around Nagorno Karabakh

5.1. Soldiers who took part in the hostilities

As a result of military conflict from September to November 2021, 1,464 persons were certified as 'disabled'. Problems arose during the process of determining disability status due to subjective interpretation of the standards by the medical-social examination commissions. In addition, individuals whose disability was a consequence of the armed conflict faced **difficulties in receiving medication and medical care and verifying a causal link between the disability and military service, as well as barriers to the exercise of their rights to education, employment and improved housing conditions.**

Since 2018, the Homeland Defender's Rehabilitation Centre, established through cooperation between Yerevan State Medical University and the Ministry of Defense, has been operating in Yerevan. At the Center, injured military servicemen receive rehabilitation services, and some educational and vocational skills development programmes are offered. Persons who became disabled during military service, especially those with brain injuries, need regular access to anticonvulsants to maintain stable health. However, the anticonvulsants provided by the state are not effective; more effective anticonvulsants are quite expensive and are not included on the main medication list. As a result, injured servicemen must allocate all or most of their disability pensions to obtain medication that has become a vital necessity for them. Another problem they face is that there is no state order for medical care, thus many persons who became disabled during their military service are unable to receive the medical care they need.

Also at issue is the right to education for wounded soldiers. Higher education institutions are not obliged to apply tuition discounts, since there is no state reimbursement. Hence a considerable number of wounded soldiers face the double burden of expenses for their treatment and tuition fees. In any case there is no standard method for calculating tuition discounts, which is left to the discretion of higher education institutions.

Cultural and recreational activities for soldiers with disabilities are held on a regular basis, both at rehabilitation centres and remotely again by these organizations. Often artists and celebrities from the Armenian Diaspora visit the centres. As a result of cooperation with several institutions funded by the resources of these organizations, soldiers with disabilities regularly participate in theatrical premieres, concerts, movie shows and sports events.

By the order of MoLSA, a multi-disciplinary team was established, comprising orthopedists/traumatologists, physiotherapists/rehabilitators, therapists, prosthetics specialists, coordinators-consultants, and in some cases specialists in environmental adaptability and assistive technology. The needs of 133 wounded soldiers were assessed with tools specifically developed by the multidisciplinary team to determine the type of prosthesis, and other products needed to ensure mobility for individual soldiers and the services required to ensure recovery, including career counselling, adaptation to a work environment, as well as social assistance, such as the social taxi service.

5.2. Displaced persons from Nagorno-Karabakh

As a result of the armed conflict, the number of persons in difficult life conditions (housing, education, healthcare, social-psychological etc.) has increased, and many of those in need are persons with disabilities. When exercising their social security rights, persons with disabilities displaced from Nagorno-Karabakh to Armenia currently face obstacles such as the impossibility of receiving pensions or other related benefits due to bureaucratic obstacles and a lack of standard procedures. An interview held in the territorial units of the Unified Social Service revealed that families displaced from Nagorno-Karabakh temporarily settled in private houses and faced similar difficulties because of having a family member with disability. The research revealed that the majority of people who found shelter in Armenia after the conflict either rented a house or apartment, lived at a host's apartment or lived in temporary shelters provided by the state. The issues of persons with disabilities from NK who were displaced to Armenia and residing in rural areas were mainly related to lack of personal space and the possibility to be separated considering their specific needs. Pursuant to a Government decree, 421 residents received support supplies (including prostheses, orthoses, orthopedic and orthotic shoes, hearing devices, wheelchairs and hearing aids.).

An overwhelming number of NK residents with disabilities displaced to Armenia are in need of access to healthcare services and medication. Within the framework of Resolution No. 318-N, 'On free-of-charge medical aid and service guaranteed by the State', dated March 4, 2004, medical aid and services for persons displaced from NK – as persons affected by the state of emergency declared in the Republic of Armenia and the de facto authorities of Nagorno-Karabakh or as a result of hostilities (hereinafter referred to as "affected persons") – is to be guaranteed by the state and provided free of charge. It should be noted that the Ministry applied a broad interpretation to the term 'affected persons', that includes not only those injured but also persons displaced from their place of residence. By virtue of this amendment, once registered, affected persons are entitled to receive free of charge primary healthcare services guaranteed by the state with the doctor of their choice.

Finally, persons with disabilities displaced from NK also face unemployment and severe difficulties earning a living.

Major gaps:

- Soldiers wounded in the NK armed conflict face problems similar to those of other persons with disabilities – use of the medical model of disability assessment and complicated appeal mechanisms with excessive bureaucracy, including difficulty acquiring necessary medication and lack of full reimbursement by the State for expensive medication.
- They also face barriers to exercising their right to education at higher educational facilities, as the latter are not obliged to offer discounted tuition fees to students with disabilities. Consequently, persons with disabilities face the additional burden of paying both for medical/rehabilitation treatment and tuition fees.

Recommendations:

- 1) Conduct a needs assessment of persons with disabilities among the displaced, and based on the results develop a coordinated policy for providing support, especially in the area of employment opportunities. *This task is recommended to be implemented by an NGO specialized in the field or an OPD. The UN is recommended to provide funding for the implementation of this task.*
- 2) Develop and introduce a strategy for timely support and protection of the rights of persons with disabilities displaced from NK to Armenia. Ensure public awareness about the needs and rights of persons with disabilities displaced from Nagorno Karabagh to Armenia.
 - a) Tasks 1 and 2 is recommended to *be implemented by MoLSA.*
 - b) *It is recommended that the UN approaches the Ministry with a proposal to provide expertise, consultancy, and funding, if appropriate.*

6. Protecting the Rights of Persons with Disabilities during COVID-19

Due to pandemic restrictions, persons with disabilities have not been able to visit banks to collect their pension. Movements of persons with disabilities were restricted since they were considered to be at higher risk of contracting COVID-19. In some cases, payment of pensions was discontinued due to the failure to make timely visits to the bank and complete the necessary paperwork. No procedures for addressing specific situations such as these have been developed. Decisions were made without due consideration of the consequences for persons with disabilities.

Armenian authorities also imposed COVID-19-related restrictions at daycare facilities. Nursing homes shifted to a closed working regime due to the pandemic, prohibiting both exit and entry of beneficiaries. Some new beneficiaries were admitted to nursing homes during the pandemic, but they were located in solitary confinement until the nursing home undertook testing. In case of a positive result, treatment was carried out in solitary confinement. At some institutions no new people were admitted during the pandemic. Many **patients were unable to interact with the outside world.** With regard to recreation activities for patients living in nursing homes during the pandemic, it should be noted that as the number of cases increased, previously held activities and group sessions based on the preferences of the beneficiaries were terminated and alternative activities were not introduced.

The Ministry of Health did not carry out a needs assessment or develop a standard procedure for ensuring infection prevention and control at psychiatric institutions during the COVID-19 pandemic. This resulted in an unequal, and sometimes irrational, distribution of protective equipment. For example, one institution received close to 8,000 masks for 87 service providers and 57 employees, while other facilities with more providers and a larger staff were given only half that number of masks. To prevent the spread of the virus, the institutions tried to establish separate areas to isolate those infected or newly admitted and thus potentially infected.

Communication with the outside world by persons in psychiatric institutions was problematic due to COVID prevention restrictions at closed facilities. One of the centres observed was equipped with an internet connection and computers, and patients were allowed to make video calls upon a written request. Personal phones were kept by the staff, sometimes for punitive reasons and sometimes arbitrarily. At the same time, patients who had telephones were prohibited from loaning them to others, thus restricting their right to make decisions about the management of their personal belongings, which is a matter of serious concern.

There is no common approach for providing the means required to ensure communication with the outside world for those in psychiatric institutions. In some facilities telephone connections and internet access are located in staff rooms and thus inaccessible to persons receiving treatment.

Patients thus had to rely on employees of the institutions to communicate, which created dependencies. **It is thus necessary that psychiatric institutions take steps to provide alternatives that allow persons under treatment and care to interact with the outside world.**

These and other observations demonstrated that the institutions were not prepared to face an emergency such as the pandemic in terms of procedures or equipment. Additionally, the implementation of preventive measures placed an additional burden on facility staff, negatively impacting their labor rights and underlining the lack of resources and vulnerability of people in closed institutions to emergencies.

In summary, **it can be concluded that during a state of emergency it is even more challenging to provide persons receiving treatment and care in institutions with proper living conditions, including food, necessary hygiene conditions and items and external communication.** Patients could not receive food, clothing, or personal items from relatives, and institutions were unable to provide sufficient quantities.

The issue of housing for homeless persons with disabilities during the COVID-19 pandemic remains unresolved. The temporary homeless shelter in Vardashen, run by the Armenian-Danish Hans Christian Kofoed Charitable Foundation, offers urgent social assistance to homeless people in difficult situations, including persons with disabilities, by providing them with temporary accommodation, medical care, social-psychological and legal advice, two daily meals, clothing and accessories. Entrance to the institution is allowed only after showing a negative PCR test.

The Social Emergency Assistance System development programme approved by the Minister of Labor and Social Affairs (Order No. 71-A of June 5, 2019), contains plans for establishing a social emergency assistance system. The purpose is to provide a rapid response to social problems during emergency, life-threatening situations and for those in need of urgent assistance. Basic social services, including housing, are to be provided within that framework. **Urgent steps are required to ensure that the goal of creating a social assistance ‘ambulance service’ is included in the plan.**

Major gaps:

- In mental health facilities access to means of communication such as telephones and Internet – and thus access to the world outside – for persons with intellectual disabilities is

disproportionately restricted by the management of these facilities. Patients were forced to depend on staff members even to use their personal belongings, such as telephones.

- Procedures for payment of pensions and other social allowances were put in place without reference to individual situations and the specific needs of persons with disabilities affected by COVID-19.

Recommendations

- 1) MoLSA, with the participation of NGOs, OPDs and other interested beneficiaries, should take measures to address the following recommended actions:
 - a) *develop and introduce a strategic plan for supporting and protecting the rights of persons with disabilities during COVID-19 Pandemic,*
 - b) *introduce alternative mechanisms for providing specific professional services during COVID-19 Pandemic to mitigate the negative impact of the loss or reduction of services on the physical and mental health of persons with disabilities,*
 - c) *introduce community services, as well as personal assistants, especially to support persons unable to care for themselves.*

7. Budgeting and financial management in accordance with the Convention

The major bodies that implement programmes and activities in Armenia's disability sector are MoLSA, the Ministry of Education, Science, Culture and Sports and the Ministry of Health. Measures required to implement the Convention were outlined in the 'Comprehensive Social Inclusion Programme for Persons with Disabilities 2017–2021', implementation of which is summarized annually in a comprehensive report.

MoLSA implements projects by delegating service provision to non-governmental organizations. For example, to carry out the '24-Hour Care Services for the Elderly and Persons with Disabilities under 18', some 2,512,293.0 Armenian Dram (AMD) was allocated to NGOs from the 2021 state budget to deliver care to persons with disabilities. In 2021, funds were also allocated for care and social/rehabilitative treatment through the delegation of funds to NGOs:

Home-care services for the elderly and persons with disabilities	Persons with disabilities make up about 30% of those served	236,921,300 AMD
--	---	-----------------

Daycare services for the elderly and persons with disabilities	Persons with disabilities make up about 30% of those served	210,902,500 AMD
Home care for persons with mental health problems		14,448,300 AMD
Round-the-clock care services for persons with disabilities in small group homes		81,597,900 AMD
Social-rehabilitative services for persons with disabilities at daycare centres.		201,443,700 AMD

In 2021, 1,190,216.9 AMD was allocated from the state budget to implement the 'Support to Persons with Disabilities' programme. In addition, 1,946,795.4 AMD was allocated for the implementation of employment programmes, of which 55,340.0 AMD was meant for persons with disabilities alone, through two programmes: 'One-off compensation to employers for the adaptation of the workplace for uncompetitive persons with disabilities' and 'Partial salary reimbursement to employers who hire persons with disabilities or the parent of a child with a disability, as well as financial assistance to those who accompany a person with disabilities'. The 1,946,795.4 AMD targeted for implementation of government employment programmes can also be used to employ persons with disabilities, since they can be included in other government employment programmes as a matter of priority. The 'Organization of Trainings for Parents of Children with Disabilities' programme was launched in 2020 with just 30 beneficiaries. The state budget for 2021 is intended for 28 beneficiaries, through funding of 2,564,1AMD. Service delivery is performed by an organization selected as a result of a competitive process. In the field of disability, allocations are also made from the State budget to other agencies, including the Ministry of Defense, Ministry of Emergency Situations and others.

Resources allocated to national monitoring mechanisms are limited, as is participation by OPDs in the monitoring process. No funding is allocated to the Office of the Human Rights Defender, despite the fact that it is designated by the Convention as the monitoring body for overall implementation of the Convention. These issues were raised by the Committee on the Rights of Persons with Disabilities in its 2017 Concluding Observations. The Committee recommended adequate funding for the

functioning of the independent monitoring mechanism and ensuring full participation by OPDs in the monitoring process.

In the State budgets for **2017–2021, funding for the disability sector is not always mentioned as a targeted activity**. In some instances, activities for persons with disabilities are covered under other budget lines. Accordingly, the main targeted activities prescribed by the 2017-2021 annual budgets are listed in Annex 5 of this report, showing activities and annual allocations, offering perspectives on the dynamics of change in specifically targeted activities and sub-sector allocations. The chart shows a steady increase in funding for most disability-related sectors between 2017 and 2021. In some areas funding doubled or increased three-fold between 2019 and 2021, such as daycare and social and rehabilitation services for adolescents and youth with mental health problems and those with disabilities, and for child and family support services and services related to paralympic sports. However, there are also sectors for which funding was substantially cut, such as for inclusive education in primary schools (reduced by 44 per cent) and secondary school (reduced by 42 per cent) and for inclusive education (40 per cent reduction). For some sectors no funding was allocated for the years 2020 and 2021; for example, for daycare services for persons with mental health problems, medical/social rehabilitation services, community-based services for children with disabilities or in difficult life situations, among others.

Additionally, no funds are allocated for the collection, processing or dissemination of statistical data and research information in accessible formats and technologies on persons with disabilities and their rights.

Although State budget reports are published on the Ministry of Finance website, the reports contain no analysis or assessment of how successfully the budget was utilized by each sector. Data allocated exclusively to the disability sector is not presented; neither in the budget planning phase nor in performance reports or budget explanations, and the available results contain only information on the expenditures incurred. The budget envisages both targeted measures for persons with disabilities and other relevant measures for vulnerable groups, including persons with disabilities. However, the allocations do not clearly define which part or what percentage of the budget is planned to be spent exclusively for the disability sector. Nor does the budget provide measurable indicators for assessing the extent to which specific systemic problems were resolved.

In light of the COVID-19 pandemic, macroeconomic forecasts for the government's interim expenditure programme for 2021-2023 were revised, and state budgets in different sectors were redistributed, although there was no targeted redistribution in the disability sector. While budget redistribution as a result of COVID-19 prevention activities is a globally recognized practice, the lack of activities targeted to meet the real needs of persons with disabilities in this process is problematic. Further budget redistribution was made, and relevant social assistance programmes developed to regulate social issues caused by the 2020 military conflict. As of the first quarter of 2021, payments of more than 15 billion AMD were made to eliminate the effects of large-scale military conflict in and around Nagorno-Karabakh and about 15 programmes were implemented, in which persons with disabilities were included as beneficiaries.

Major gaps:

- Lack of resources allocated to national monitoring mechanisms and to promote participation by OPDs in the monitoring process.
- No funding is allocated for the Office of the Human Rights Defender, despite this office's special mandate to serve as the monitoring body for implementation of the Convention under article 33.
- No funding is allocated in the budget for collection, processing and dissemination of statistical data and surveys on disability
- Despite a sustainable rise in funding for several areas during the last three years, there are also areas where funding was significantly cut or eliminated in 2019 and 2020.
- The budgeting process does not provide measurable indicators for assessing the impact of efforts to resolve specific systemic problems.

Recommendations

- 1) MOLSA in collaboration with the Ministry of Finance should develop indicators for assessing the effectiveness and impact of targeted, isolated, and real needs-based measures envisaged by the State budget in the disability sector.
- 2) Develop and introduce effective, affordable, and attainable tools for public oversight of the budget, in accordance with the principles of programme-based budgeting. These two recommendations should be raised with MoLSA, which can undertake further advocacy.
- 3) Provide adequate funding for the full functioning of the independent monitoring mechanism and ensure full participation by OPDs in the monitoring process. The Government should revise its budget policy to provide funding for the Human Rights Defender's Office, to allow it to fulfil its function under law and article 33 of the Convention as the body designated by Armenia to monitor its progress toward obligations under the Convention.
- 4) The Government should also add a budget line to fund projects on data collection and processing, including for public dissemination of research and survey publications concerning data processing.
- 5) It is recommended that the UN holds discussions with MoLSA to explore why certain areas, as indicated above, that come under the scope of the Convention are not funded under the annual budget.

8. Accountability and Governance

8.1. Use of tools by Washington Group for statistical data collection

According to the second and third Joint Periodic Reports of the Republic of Armenia on the Implementation of the Convention, submitted to the UN Committee on Persons with Disabilities on October 21, 2020: *“In the framework of the preparation of the October 2020 census in the Republic of Armenia, questions of disability and restrictions of participation were introduced in the census program, according to The Washington Group Short Set on Functioning questionnaire. It was tested during a pilot census conducted on October 3-12, 2019.”* The report further noted that the census was expected to yield data on persons with visual, hearing, mobility impairments and memory, communication and self-care problems (which can be disaggregated by gender, age, educational level, marital status, nationality, employment and other data collected during the census) . However, due to the 2020 military conflict with Azerbaijan and the outbreak of COVID-19 and subsequent national lockdown, the census did not take place.

This gap could be filled by applying the functional assessment system, which would facilitate the collection of expanded data on the functionality of persons with disabilities and their service needs, making it possible to develop a database upon which a relevant policy could be constructed. This step would be closely aligned with the 2021 Law On Functional Assessment of a Person (and corresponding government regulations not yet adopted). The Law calls for **the assessment of a person’s functionality to be carried out for the purpose of recognizing or rejecting the person as having a disability, based on an assessment of their health, activity level and participation, environmental obstacles, and determination of the degree to which the individual’s functionality is restricted, in order to determine the social services suited to the individual’s needs. According to the law, this process is to be carried out in alignment with the WHO’s ICF.** However, the tools and procedures required to guide practitioners’ application of the WHO classification system have not yet been introduced, although relevant government regulations are expected to be adopted in the coming months. Nevertheless, the Government, particularly MoLSA, has begun to introduce reforms to the disability assessment system. MoLSA is cooperating with the UNDP, UNICEF and the SOCIEUX+ on a technical assistance project, conducted under the European Neighborhood Policy, for which MoLSA announced in October 2021 a training-of-trainers programme to prepare a pool of trainers to carry out cascade training seminars on functionality assessment.

8.2. Barriers to participation using available data on persons with disabilities

Current legislation provides for a national statistical data system that collects data differentiated by **income, gender, age, ethnicity, geographical location, and other categories** (based on SDG targets 17.18). However, domestic legislation does not explicitly define disability as a distinct data collection category.

The UN Committee on Persons with Disabilities recommends that data collection on disability be undertaken with active involvement by persons with disabilities or organizations representing their

interests, including projects necessary to collect data and develop and introduce data systems. However, existing regulations and practice do not guarantee effective participation by persons with disabilities and their organizations in the decision-making process. For example, Government Resolution No. 1318-N of 12 November 2015 addresses *'On approving the procedure for participation of representatives of non-governmental organizations dealing with issues of persons with disabilities in the expertise carried out by the Joint Social Service'*. It provides the possibility for participation by NGO representatives as observers during medical/social examinations to ensure the transparency of the process. However, this mechanism is ineffective, as the procedures do not guarantee that data collected by observers will be included in reports or used effectively.

In this context it **should be noted that the lack of disaggregated data, along with consistent statistics and common criteria among competent authorities, leads to a situation in which statistics are mainly reflected as numerical indicators, while analytical data on the causes of problems is insufficient to conduct a comprehensive situation analysis.**

8.3. Lack of disaggregated data

Data on persons with disabilities is entered into the Registry of persons with disabilities information system, which summarizes data divided by **groups, gender, age, place of residence and degree of limitation of activities** of the person with a disability. The information system enables analysis to be carried out in accordance with the criteria listed above. Registration of assistive devices provided to persons with disabilities is carried out by an information system covering the provision of prosthetic-orthopedic and rehabilitation equipment.

Hence, data disaggregated by disability is virtually non-existent. For example, according to information from the Ministry of Health, it has never attempted to explore or quantify manifestations of inequality in the health system faced by persons with disabilities. Data disaggregated by disability status is also unavailable for maternal mortality, HIV rates, child malnutrition and other fields.

According to the Statistical Committee, data on disability are available through the following:

- **UN Sustainable Development Goal 1** (Indicator 1:3.1 - Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, pregnant women, newborns, work-injury victims, and the poor and the vulnerable (online data not available))
- **UN Sustainable Development Goal 4** (Indicator 4:5.1 - Parity indices (female/male, rural/urban, bottom/top wealth quintile, and others such as disability status, indigenous peoples and conflict-affected, as data become available) for all education indicators on this list that can be disaggregated)
- **UN Sustainable Development Goal 8** (Indicator 8:5.1 - Average hourly wage for female and male hired workers according to occupation, age group and disability (online data not available) and Indicator 8:5.2 - Unemployment rate, by sex, age, and persons with disabilities)
- **UN Sustainable Development Goal 10** (Indicator 10:2.1 - Proportion of people living below 50 per cent of median income, by sex, age, and persons with disabilities (online data not available))

- **UN Sustainable Development Goal 16** (Indicator 16:7.1 - Proportions of positions in national and local institutions, including (a) the legislatures; (b) the public service; and (c) the judiciary,

The Statistical Program for 2021, approved by National Council for Statistics Decision No. 23 of 28 December 2020, envisages collection and publication of statistical data on disability in the areas presented in the tables provided in Annex 6 of this report. However, information is not collected through interagency collaboration. For example, the 'Pyunik' information system is compatible with a number of other systems used in the sphere of social protection and enables data about a person to be periodically verified and updated. Nevertheless, the system is not used by all agencies, and thus does not offer an interconnected information system. This is a systemic problem. State agencies involved in or related to the social protection system have no experience with centralized or interconnected data collection and data exchange systems.

Thus, despite the commitments undertaken by Armenia in the context of fulfilling requirements for statistics and data collection laid out in Article 31 of the UN Convention, unified comparative statistical data in Armenia remains incomplete. Some disaggregated statistical data is available on the rights of persons with disabilities by sector; however, **the data are not reflected through uniform indicators/codes that appear and are used effectively by different sectors and different bodies**, which affects the efficient, comprehensive identification of real needs.

8.4. Independent monitoring mechanisms

The 2018 amendment to the Constitutional Law on the Human Rights Defender vested the latter with power to monitor application of the provisions of the UN Convention and prevent and protect against violations of the rights of persons with disabilities. The amendment also placed Armenia in compliance with the Convention's requirement of an independent monitoring body. In exercising the above function, **the Human Rights Defender considers it a matter of fundamental importance to cooperate with civil society organizations and human rights defenders**. Taking into account this basic approach, the Defender, through Order No. 11-A of June 17, 2020, established a Public Council for the Protection of the Rights of Persons with Disabilities that includes experienced NGOs and independent experts. Two important tasks of the Public Council are to contribute to ensuring protection of the rights of persons with disabilities and to strengthening cooperation between civil society representatives and the Human Rights Defender's office. For this purpose, Public Council members can present to the Human Rights Defender problems related to persons with disabilities and proposals aimed at their resolution. They can also participate in the implementation of field research. In Armenia there is effective cooperation between the Human Rights Defender and members of the Public Council for discussing, recording, and resolving sectoral issues. In the framework of these activities – in particular, systemic issues related to realization of the right to education of persons with disabilities – discussions have taken place on obstacles that emerged during the state of emergency and martial law; legal, practical issues related to the definition of disability status; appeals of commission decisions and possible solutions to those problems. In connection with these issues, the Human Rights Defender's office fulfilled its mandate by raising

these issues with relevant State bodies and making recommendations. Thus, it can be stated that the new solutions created under the Constitutional Law made it possible to further strengthen the influence of the Human Rights Defender through the involvement of doctors, psychologists, social workers, and other experts. The law also enabled broader involvement in the Human Rights Defender's activities by civil society organizations and independent professionals.

Major gaps:

- Armenia's data collection and processing framework, managed by the National Statistics Committee, does not include a distinct category for disability.
- Comprehensive data on persons with disabilities and their service needs are not available in the national disability assessment system, hindering the possibility for developing a database and implementing a data-based policy.
- The current system of collection of general statistics on persons with disabilities lacks consistency and common criteria. In practice, the statistics are mainly reflected in numerical indicators, which do not reflect the substantive data needed to reveal the causes and nature of problems.
- The current system of data collection on persons with disabilities is aggregated. Data is collected under the following meta categories, disability group, gender, age, place of residence, degree of limitation of activities.
- The country lacks a unified, centralized comparative statistical data system. The current system offers fragmented and disaggregated statistical data by sectors, which are not reflected in uniform indicators/codes that appear and can be effectively used in different sectors and by different bodies.

Recommendations:

- 1) MOLSA and the National Bureau of Statistics should revise the current system of data collection to ensure compliance with the Convention's requirements on availability and accessibility of disaggregated data. It is recommended that the UN provides technical support consulting on reviewing the current system and recommending changes in the system. It is recommended that the UN cooperates with the Council of Europe of in Armenia as the latter has undertaken a similar project on non-discrimination and hate crime.
- 2) The Police of RA, the National Bureau of Statistics, MOLSA, MoESCS and the Ministry of Health should promote cross-sectorial data management and information exchange.
- 3) It is recommended that the UN approaches MOLSA to introduce unified tools for processing disaggregated data in the field of disability in accordance with UN Sustainable Development Goals and Convention requirements,.
- 4) MOLSA and the National Bureau of Statistics should ensure that a unified online platform is established allowing routine access to official data that is accessible to persons with disabilities at no cost.

- 5) It is recommended that UN provides technical and legal assistance to competent state bodies (e.g., MolSA) for mapping the existing mechanisms and regulatory frameworks for implementing recommendations 1–4. Such assistance might involve:
- a) a short-term project to map existing data collection mechanisms and frameworks, and their compatibility with the Convention. The UN should discuss this with the Council of Europe office in Yerevan, which implemented a similar project. provision of comparative information and good practice examples from other Member States,
 - b) study visit to a UN Member State by Armenian data collection experts and officials responsible for the development and operation of disaggregated and unified (interagency) data collection systems.
 - c) provision of a short-term consultant with expertise in data collection to assist Armenian authorities in the development of a centralized, disaggregated data collection system with a unified codification system.

9. Conclusion

The Armenian Government has made considerable efforts to bring its legislation and practice in line with the standards and requirements of the UN Convention on the Rights of Persons with Disabilities. It undertook major reforms of its legislation and relevant legal frameworks, which are still on-going, although several draft regulations and laws still await forwarding to competent bodies for adoption. In addition, the government has developed several policy papers based on the fundamental principles of the Convention, such as application of the social model of disability. In addition to these reforms, the Government has sought new opportunities for cooperation and partnership with OPDs, NGOs and international organizations and their various initiatives – such as the UNPRPD’s efforts to develop participatory and inclusive strategies and projects for persons with disabilities. Unfortunately, armed conflict in 2020 and the spread of COVID-19 significantly hindered these efforts. Authorities currently face the tremendous challenge of handling a fragile post-conflict and post-pandemic situation in which persons with disabilities were among the most affected vulnerable groups. While the authorities need resources to ensure that conditions meeting the fundamental principles of the Convention are finally put in place (e.g., the physical environment of public institutions), it should be noted that many other problems are systemic in nature, and thus call for organizational and managerial changes rather than financial resources. Current joint efforts by the government with CSOs and international partners offer a fresh perspective for meaningful progress on current reforms.

ANNEX 1. Statistical data on focus group discussions concerning minors

1. Focus group of Gegharkunik region- 14 children, consisting of:
5 children 1-6 years old,
5 children 7-10 years old,
4 children 11-14 years old,
of which 4 girls, 10 boys.
2. Focus group of Lori region- 22 children, consisting of:
3 children 1-6 years old,
5 children 7-10 years old,
6 children 11-14 years old,
4 children 15-18 years old,
of which 8 girls, 14 boys.
3. Focus group of Shirak region- 9 children and 1 adult, consisting of:
3 children up to 7 years old,
6 children 11-18 years old,
1 30 years old adult,
Of which 3 girls, 7 boys.
4. Focus group of Yerevan city – 109 children and 8 adults, consisting of:
8 children 13-16 years old,
36 children 5-7 years old,
4 children 7-10 years old,
33 children 8-12 years old,
10 children 11-15 years old,
18 children 2-4 years old,
8 18-24 years old adults
Of which 37 girls, 80 boys.

Three of the parents of the children who participated in the focus group discussion moved from Artsakh to Armenia.

ANNEX 2. List of leading organizations representing or defending the interests of persons with disabilities in the Republic of Armenia

▪ List of OPDs operating in Armenia

1. “Agate” Rights Defense Center for Women with Disabilities NGO, Gayane Grigoryan, agate.ngo@gmail.com
2. “Arev Yerekhaner” OPD (parents of children with Down Syndrome) - downchildren@gmail.com
3. “Armenian Association of the Blind” NGO - Rafik Khachatryan, armblind2000@yahoo.com
4. “Armenian Deaf Society” NGO - Grigori Grigoryan, armdeafsociety@gmail.com
5. “Astghatsolk” OPD – Piruza Stepanyan, sunny.piruza@mail.ru
6. “Autism National Foundation” OPD (parents of children with autism) - Hasmik Margaryan, mark-as@mail.ru; Syuzanna Petrosyan suzannapetrosyan@gmail.com
7. “Disability and Inclusive Development” NGO - Zaruhi Batoyan, idisability@gmail.com
8. “Disability Rights Agenda” NGO - Mushegh Hovsepyan, info@dra.am
9. “Easy Life’ Benevolent NGO - Suren Avdalyan, easylife17info@gmail.com
10. “Ekho” OPD - Seryozha Ohanjanyan, Seryozha@ekho.am
11. “Equal Rights, Equal Opportunities” OPD - Kamo Galstyan, kamo.galstyan.95@inbox.ru
12. “Full Life” OPD - Suren Maghakyan, suren@fulllife.am
13. “Harmony” NGO - Albert Abgaryan, harmoniangoo@yahoo.com
14. “Havat” OPD/NGO (parents of children with hearing difficulties) - Karine Harutyunyan, havatngo@gmail.com, Nelly Mosesova nmosesova@gmail.com
15. “Hay Mayrer” OPD (parents of children with Cerebral Palsy) - Narine Manukyan info@haymayrer.am
16. “International Child Development Center” OPD (parents of children with disabilities) - Lilit Seyranyan Seyranyan.l@mail.ru; icdc.child@mail.com
17. “My Way” center OPD (parents of children with autism) - Sona Petrosyan, sonaalex@mail.ru
18. “Skarp” NGO - Ashot Mkrtchyan, skarpngo@mail.ru
19. “Source” Foundation supporting children with disabilities and their families, OPD (parents of children with severe and multi-disabilities) - Marina Parazyan sourcefoundation1@gmail.com, Vehanush Gyulbangyan sourcefound.management@gmail.com
20. “Spitak Baze” NGO - Marine Asatryan, spitakbaze@gmail.com
21. “Step forward” OPD (parents of children with autism) - Arpine Ashotyan, arpine.ashotyan@gmail.com

22. "The Voice of Silence" OPD (parents of children with hearing disabilities) - Artashes Hovhannisyan, arthorama@gmail.com
 23. "Unison" OPD - Kristina Danielyan, unisonarmenia@gmail.com
 24. "We Can" OPD (parents of children with mental/intellectual disabilities) - Armine Saakyan, saakyan_armine@inbox.ru, Armine Avagyan aavagyan1976@mail.ru
 25. "White Cane" OPD - Vahe Arzumanyan, arzumanyan212@mail.ru
- ***Organizations consisting of parents and family members of children with disabilities and advocating for the children's interests and rights***
1. "Source Foundation Supporting Children with Disabilities and their families" OPD (provides rehabilitation and multi-profile services to children with disabilities and their families)
<https://www.facebook.com/SourceFoundation.am/>
 2. "Armenian Mothers" Charitable NGO (provides rehabilitation and a multiple services to children with disabilities and their families)
<http://haymayrer.am/am/about-ngo>, <https://www.facebook.com/hay.mayrer/>
 3. "We Can" OPD (advocates for the interests and rights of children and young persons with intellectual and developmental disabilities and their families)
<https://www.facebook.com/menqkaroxeng/>
 4. Astghavard NGO
<https://www.facebook.com/Astghavard>
- ***Service providers***
1. "Bridge of Hope" NGO (introduced inclusive education and community-based services to children with disabilities in the Republic of Armenia)
<https://bridgeofhope.am/hy/>
<https://www.facebook.com/bridgehope>
 2. "Emily Aregak" Center for Children and Youth with Multiple Disabilities in Gyumri (provides multi-profile services to children with disabilities to develop their physical and intellectual abilities, to foster self-care, social and life skills, and to prepare them for independent living as well as to include children and youth with disabilities and their families in society, and to promote equal treatment for them)
<http://emiliaregak.am/>, <https://www.facebook.com/emiliaregak/>
 3. "Arevamanuk" Family and Child Care Foundation in Gyumri (provides social and psychological, special pedagogical services to children and adults)
<https://www.facebook.com/ArevamanukFoundation/>
 4. "Khnamk/Care" NGO
 5. Astghatsolk OPD

http://sdi.am/about_us.html

<https://www.facebook.com/astghatsolkngo/>

▪ ***Alliances or associations protecting the rights of persons with different types of disabilities***

1. "Coalition for Inclusive Legal Reforms" (founded by "Agate" Rights Defense Center for Women with Disabilities NGO, which aims to promote the protection of the dignity, equal rights of and opportunities for persons with disabilities in Armenia)

<https://www.facebook.com/CoalitionforInclusiveLegalReforms/>

2. "National Disability Advocacy Coalition" (The Union of Legal Entities)-not active now

<https://www.facebook.com/disabilitycoalition/>

3. Armenian Network of Independent Living-not active now

<https://www.facebook.com/anil.armenia/>

▪ ***Organizations and associations in the country that provide services to persons with visual and hearing disabilities and advocate for their rights***

1. "Havat" OPD/NGO (Faith) Association of Mothers of Deaf Children
2. "Voice of Silence" OPD
3. "Harmony" NGO (dealing with the rights of blind persons)
4. "Disability and Inclusive Development" NGO
5. "Armenian Association of the Blind" NGO
6. "Armenian Union of Deaf People" NGO

▪ ***Organizations dealing with the issues of persons with intellectual and developmental, psycho-social disabilities***

1. "We Can" OPD
2. "Huysi Metsamor" NGO
3. "Prkutyun-mentally disabled children and young people center" NGO
4. "Jermik Ankyun" Foundation
5. "Disability Rights Agenda" NGO
6. "Spitak" Care House
7. "Dzorak" Care Center for persons with psycho-social disabilities NGO
8. "Care" NGO.

▪ ***Organizations dealing with the rights of girls and women with disabilities***

1. "Agate" Rights Defense Center for Women with Disabilities NGO in Gyumri
2. "Equal Rights - Equal Opportunities" OPD in Vanadzor

- ***Human rights CSOs and Coalitions actively cooperating with OPDs***
 1. Eurasia Partnership Foundation
 2. Helsinki Citizens' Assembly Vanadzor Office
 3. Transparency International Anti-Corruption Center
 4. Oxygen Foundation and other NGOs
 5. Open Society foundations Armenia
 6. Non-Discrimination and Equality Coalition of Armenia (NDEC)
 7. Coalition to Stop Violence against Women
 8. Protection of Rights without Borders NGO

- ***Main disability organizations cooperating with the Ministry of Labor and Social Affairs of the Republic of Armenia and Human Rights Defender office***
 1. "Armenian Mothers" Charitable NGO
 2. "Disability and Inclusive Development" NGO
 3. "We Can" OPD
 4. "Association of the Blind of Armenia" NGO
 5. "Step Forward" social OPD
 6. "Skarp" Health Center NGO
 7. "Agate" rights defense center for women with disabilities NGO
 8. "Equal Rights, Equal Opportunities" OPD
 9. "Faith/Havat" OPD for mothers of deaf children
 10. "Full Life" OPD
 11. "Salvation/Prkutyun" NGO
 12. "Child Development Fund"
 13. "Astghavard" NGO
 14. "Mayri" NGO
 15. "Ekho" Disability Rights OPD
 16. "Autism National Foundation" OPD
 17. "Voice of Silence" OPD
 18. "Mission Armenia" Charity NGO
 19. "Armenian Caritas" Charity NGO
 20. "Armenian Red Cross Society"
 21. "Armavir Development Center" NGO
 22. "Satar" NGO
 23. "Unison" OPD

- ***Organizations promoting inclusive sports in Armenia***
 1. "Armenian Camp" NGO
 2. "Skarp" NGO
 3. Armenian Association for the Disabled "Pyunic" NGO

4. "Full Life" OPD
5. "Armenian Table Tennis federation of disabled people" NGO

- ***Public Council under the Human Rights Defender's Office***

1. "Autism National Foundation" OPD
2. "Bridge of Hope" NGO
3. "Equal Rights, Equal Opportunities" NGO
4. "We Can" OPD
5. "Satar" NGO
6. "Arev Yerekhaner" OPD
7. "Armenian Table Tennis federation of disabled people" NGO
8. Arabkir United Children's Charity Foundation
9. EKHO - Disability Rights OPD
10. "Full Life" OPD
11. "Agate" Rights Defense Center for Women with Disabilities NGO
12. "Voice of Silence" OPD
13. "Unison" OPD
14. Bari Mama Charitable NGO
15. International Center for Human Development NGO
16. "Emily Aregak" Center for Children and Youth with Multiple Disabilities in Gyumri
17. "Armenian Mothers" Charitable NGO
18. "Source Foundation Supporting Children with Disabilities and Their Families"
19. "Arevamanuk" Family and Child Care Foundation in Gyumri
20. Individual expert-Hayk Mkrtchyan
21. Individual expert-Alik Hakobyan

Annex 3: UNCT partnerships and programs on disability inclusion

A) Over the past 2 years the UNCT-led capacity building efforts for national stakeholders on disability inclusion, some examples listed below:

- **Inclusive Programming and Data Collection workshop.**- Target audience: UN staff, Policy makers, CSOs and OPDs. Topics covered: Inclusive Programming with focus on SDGs and UNCRPD frameworks.
- **SDGs, Disability Sensitive Data Collection and Disability Surveys** - Target audience: UN staff, National Statistical Committee, Policy makers, CSOs and OPDs.

Topics covered: Methodology of collecting data on disability. How to Build a National Statistical System that can Promote Inclusion.

- **Gender equality and disability** - Target audience: UN staff, Policy makers, practitioners, service providers and OPDs.

Topics covered: Data on gender and disability, globally vs Armenia. Addressing the social inclusion of women and girls with disabilities, Armenia and experiences of other countries.

In addition, UNCT as part of the UNPRPD funded project on disability assessment reform, conducted number of trainings for more than 1000 practitioners and 100 policy makers and OPDs - on disability inclusion, disability multidisciplinary assessment, service provision and programming.

B) Below presented 3 examples of how the UNCT has systematically involved OPDs in activities of joint programs, e.g., planning, implementation, monitoring and evaluation.

In order to ensure disability mainstreaming UNDP and UNICEF are closely collaborating with local OPDs in planning, monitoring and implementation of disability-focused projects and projects in general to ensure inclusiveness. Periodic meetings are organized with OPDs and CSOs promoting the rights of persons/children with disabilities to discuss implementation of disability reforms, bottlenecks in mainstreaming education, social protection and health services, and promote meaningful participation of underrepresented groups. Innovative approaches of participation, such as Design Workshop were applied where persons with disabilities were designing the policy response and programmes based on their needs. OPDs are also active participants of UNCT organized discussions on UN Treaty bodies recommendations and design of national strategies and action plans in the human rights area.

Within the framework of “EU 4 Gender Equality: Together against gender stereotypes and gender-based violence” joint regional project that is being implemented by UNFPA and UN Women UNFPA in Armenia prioritized support to women with disabilities facing economic insecurity, particularly in times of crisis. The idea and necessity to conduct such activities came directly via consultations with CSOs and DPOs working in the area of rights of women with disabilities and women who have disabilities.

Hence, in the frame of the small grant awarded to “Agate” Rights Defense Center for Women with Disabilities a series of online capacity building training will be conducted on different topics, that include: - COVID-19 pandemic, safety guidelines; - Sexual and reproductive rights of women with disabilities; - GBV/ DV and institutions/and shelters that provide services to victims of violence; - Gender and disability: discrimination, equality; - Effective task and time management; - Effective self-presentation skills;- Customer service skills.

Thus, all above-mentioned activities will support expanding employment opportunities for women with disabilities in Armenia.

C) Existing agreements between the UNCT, government, and civil society pertaining to disability inclusion.

Given that formally the Projects are countersigned by the National Directors (Government) and UNCT for implementation, the joint projects on disability issues might be considered as the agreements, which include:

1. “Improving access to services and participation of persons with disabilities in compliance with UNCRPD and based on ICF - Armenia, Phase 2” (2017-2019) was a collaborative effort among UN agencies (UNICEF, UNDP and WHO), signed with the Government and implemented in partnership with OPDs.
2. UNICEF contractual agreement with the National Pedagogical Psychological support center, the National Center of Education Technologies to mainstream education programmes, to strengthen appropriate services and support to children with special education needs, including children with disabilities, and to promote disaggregated data collection.

In 2018, in the frame of the UNPRPD project, the partnership focused on disability inclusion was established between UNICEF, MoLSA, Full Life OPD and local NGOs, to conduct awareness raising activities through the country and promote UNCRPD, inform on disability reform, including introduction of the functional assessment and voucher system for provision of assistive devices.

D) List of joint programs focused on disability inclusion that are currently being implemented by UN or that concluded within the last 2 years.

“Improving access to services and participation of persons with disabilities on the conceptual framework of UNCRPD and ICF - Armenia, Phase 2” (2017-2019) was a collaborative effort among UN agencies (UNICEF, UNDP and WHO) aiming to contribute to the progressive fulfilment of the rights of persons with disabilities so that they receive services and support in accordance with their needs and have increased participation in social and economic life.

“EU 4 Gender Equality: Together against gender stereotypes and gender-based violence” joint regional project funded by European Union. Project is implemented by UNFPA and UN Women. Main objective is to fight gender stereotypes and work in the area of prevention of GBV. In terms of working

in the area of protection rights of persons with disabilities and social inclusion (including women with disabilities who are survivors of GBV) the main objective of the project is to provide capacity development and technical support to women with disabilities aiming at enhancing their economic opportunities and social inclusion (overall duration of the project is 2020-2023, and the activities in regards to protection and promotion of rights of persons with disabilities and social inclusion are envisaged and implemented in year 2020).

“Stronger Services for Equal Participation and Inclusive Development in Armenia” UNDP-UNICEF joint project supported by the Russian Federation, with duration of 3 years, starting in 2020. The goal of the project is to Foster equal access to quality targeted services for children and adults with disabilities and their families in rural and urban areas and enable persons with disabilities to fulfill their right to social inclusion and participation. The project has four main objectives focused on improving access to services, establishment of a policy framework to support the modernized and strengthen multi-disability services at community level, strengthen capacities at national and local levels, and raising awareness on disability issues.

“Future Today: Empowering women, youth and children for deepening democracy in Armenia” a UN-joint project (UNICEF, UNFPA, UNDP) funded by European Union implemented in 2020-2023. The project has components focused on disability inclusion, particularly: empower adolescent girls and boys, including vulnerable and adolescent with disabilities to actively engage in development of their communities; and improve access to affordable inclusive early childhood development and care services in remote communities to empower women more actively engage in income generation, political and community life.

E) Notable achievements to advance disability inclusion at country level where the UNCT has been involved.

1. Disability assessment reform - UNCT (UNDP, UNICEF, WHO) support through UNPRPD funded project to Government reform changing disability assessment from medical to biopsychosocial and rights-based model of disability assessment based on ICF and in line with principles of the CRPD, aiming at disability inclusion at all levels. The reform was also significant in changing completely the mindset to disability inclusion, as well as providing space for persons with disabilities for the first time to have a say and participate in decision making through self-assessment.
2. In 2015 UNFPA Armenia CO in partnership with HRDO has conducted a public Inquiry and published a Report on public inquiry into enjoyment of sexual and reproductive health rights in Armenia, where special attention has been paid at assessing accessibility of SRH services for women with disabilities. Data generated within the report has served as the basis for policy advice and advocacy. As a result both the National Human Rights Strategy and Action Plan (2020-2022) as well as Gender Strategy and Action Plan (2019-2023) have dedicated actions envisaged aiming at increasing accessibility of services for people with disabilities, including by providing capacity building support for medical personnel.

3. UNICEF continuously provides technical support in mainstreaming inclusive education both in school and preschool levels. The new Law on Preschool education promoting the accessible and quality inclusive education and care was approved by the Government in May 2020. During this year, the education system in Armenia, like other country systems in the world, is being affected by the risks associated with COVID-19. In the face of school closures, the Government of Armenia almost immediately put into action an online learning system adopting a mix of digital and non-digital platforms. These include social media, online platform and TV education programmes, including one national TV channel, YouTube and cable TV channels. The National Center of Education Technologies under the Ministry of Education, Science, Culture, and Sports launched a distance learning platform - heravar.armedu.am to ensure continuity of learning in secondary schools. The effort was supported by international organisations, including UNICEF-GPE funding. As a result of UNICEF-NCET partnership during March-May 2020, the last quarter of the academic year about 400 video-lessons were recorded and broadcasted, three self- paced online courses for teachers on digital tools and pedagogy were developed and uploaded onto the e-school website. While the Ministry has resources and tools to organize distance learning, COVID- 19 crisis revealed that children with special education needs and children with disabilities do not have access to assistive technology or support services. In addition, teachers and inclusive education support teams do not feel confident to facilitate online learning and have not used technologies in their classrooms, teaching or professional support. To address the issue, around 150 video lessons were supported by Armenian sign language translation for ensuring accessibility of the materials for children with hearing impairments as part of UNICEF-NCET joint project.
4. Starting from 15 September 2020 overall 397,607 students started their school year according to the Guideline of Organization of Activities in Public Education institutions in the conditions of coronavirus disease (COVID-19) adopted by the MOESCS According the guidelines students with special health conditions who are in the risk group as well as students with special educational needs who can't wear masks, which is mandatory in schools should continue their schooling online. Currently about 2700 learners declared that they will not be able physically attend their community schools, being identified as a risk group. The Ministry requested the newly established Distance Learning Center of the National Center of Educational Technologies establish a centralized learning platform for organization of the general education lessons for 1-12 grades online according to the national curriculum. Any student who may not be able/or will prefer to continue schooling online will get an opportunity to register into this platform and follow the distance learning according his/her grade course. The registration is open and the number of participants will increase, as the students can register for receiving distance learning throughout the semester. While state funding is provided for recording and preparing online lessons for all grades and subjects, the budget for enhancing accessibility of learning materials is not planned.

ANNEX 4. Key policy papers

The key policy documents, adopted by the Government of Armenia, are provided in the subsections 2.3. and 2.4. of the report. The most important of those documents, as policy documents, are as follows:

Laws:

- 1) The Law “On the Rights of Persons with Disabilities” adopted on 5 May 2021.
- 2) The Law “On Functional Assessment of Persons with Disabilities” adopted on 5 May 2021.

The Law on the Rights of Persons with Disabilities is the first comprehensive statutory law paper on the rights of persons with disabilities based on the social mode of disability. The law provides contemporary definitions of such important concepts as disability, accessibility, reasonable accommodation, universal design, discrimination on the basis of disability and many other important concepts in line with the UN Convention on the Rights of Persons with Disabilities.

The Law on Functional Assessment of Persons with Disabilities is the first statutory law document by which the system of functional assessment of persons was established for determining the status of disability, including the relevant services, based on the human rights (social) model of disability.

Government Resolutions:

- 3) Concept developed by MLSA for “Introduction of the Model of Assessment of Disability on the Bases of the Principles of International Classification of Functions of the WHO Based on Comprehensive Assessment of a Person”
- 4) The Comprehensive Program for Social Inclusion of Persons with Disabilities for 2017-2021 and Measures to Ensure the Implementation of the Program.
- 5) The Resolution No.650-L of the Government “On Approving the Program of Activities of the Government of the Republic of Armenia for 2019-2023”
- 6) The Resolution No.1601-L of the Government “On Approving the 2021 Annual Program for Social Inclusion of Persons with Disabilities and the List of Measures”.
- 7) The Resolution no 1621-L of the Government “On Approving the Annual Plan for 2022 and the List of Measures for the Social Inclusion of Persons with Disabilities”.

Following the adoption of the Concept (doc.1 above), initiated by MLSA and adopted by the Government in 2014¹¹, a number of reforms were undertaken and implemented led mainly by the MLSA before the law on disability was adopted in 2021. Namely, between 2014 and 2020, the MLSA reformed the entire disability assessment legal and administrative framework based on the WHO's international Classification System. On the basis of the government program of 2017-2021, mentioned above, construction norms on universal design and reasonable accommodations were reviewed and modernized to bring them in line with the Convention standards. Similar reforms were done with respect to legal frameworks regulating accessibility of the public transportation.

¹¹ See RA Government Protocol Decision N 1 as of the January 9, 2014. Available at: <http://www.e-gov.am/protocols/item/347/>

ANNEX 5. Program funding for disability in recent 5-year period according to 2017-2021 Laws on the State Budget

Name of Activity/Allocation	Amount provided by the state budget in AMD				
	2017	2018	2019	2020	2021
Illness and disability allowances from the budget	2,659,238.2	2,501,916.3			
Services related to the disability sports (para-sports)	9,000.0		9,000.0	29,832.7 ¹²	104,080.2
24-hour care services for the elderly and the persons with disabilities over 18 years of age	2,176,210.5		2,148,776.6	2,512,293.2	2,512,293.2
Provision of day care services for the children with disabilities at the inclusive kindergarten N 92 of Malatia-Sebastia administrative district of Yerevan and N 5 inclusive kindergarten in Stepanavan	32,248.5				

¹² Adaptive Sports Services

Day care services for children with disabilities in inclusive kindergartens			38,1 11.9		
Treatment, rehabilitation, education and employment provision for children with autism and other developmental disorders	81,79 6.0	75,51 4.0	75,5 14.0	81,68 9.0	81,00 2.8
Providing employment and socio-psychological services to adolescents and youth with autism at daycare center			26,6 66.9	85,02 2.4 ¹³	85,02 2.4
Provision of homes and housing improvement for homeless families of fallen (deceased) soldiers and for servicemen with disability of 1 st , 2 nd and 3 rd categories		324,8 19.0		500,0 00.0	
Assistance to servicemen with an acquired disability and to families of the fallen soldiers ¹⁴			420, 000. 0		420,0 00.0

¹³ Social and psychological support for persons with autism at a day care center

¹⁴ Description of the activity: one-off social security payments to the servicemen that acquired disability in their service in RA defense, rescue and RA investigation services and to the families of the fallen (deceased) soldiers

Assistance to persons with disabilities			1,18 2,57 7.0	1,177 ,849. 9	1,193 ,337. 7
Developing state policy in the health care sector, coordination and monitoring of programs ¹⁵			970, 339. 0	991,8 78.8	991,8 78.8
Services for provision of orthoses and spinal support for the children with disabilities			51,1 36.0		
Organizing summer recreation for the schoolchildren ¹⁶			480, 624. 0	501,1 76.0	
24-hour care services for the elderly				30,00 7.9	30,00 7.9 ¹⁷
Social attendance in their homes for the single elderly and the disabled ¹⁸			130, 368. 2	236,9 21.3 ¹⁹	236,9 21.3

¹⁵ The objective of the program is to maintain human and public health: improving public health to prevent disease, disability and mortality.

¹⁶ Description of the activity: organizing summer recreation for 7 to 13 year old children of the military servicemen and the militia that acquired a disability, without parental care and from ill-provided families.

¹⁷ 24-hour care services for the elderly and those with disabilities above 18 years of age in Lori marz.

¹⁸ Description of the activity: Social services at their homes for the single elderly people in Armenia: counseling, social psychological and medical assistance provision in compliance with evaluated social needs (needs permanent care – regular or partial).

¹⁹ Social services in their homes for the elderly and the disabled.

Social attendance for single elderly people with disabilities in their homes and in day care centers for the elderly			202,742.2	210,902.5 ²⁰	210,902.5
Provision of services to persons with disabilities at employment support centers			9,777.9		
Partial reimbursement of wages to employer of uncompetitive persons in the job market and provision of financial assistance to the person accompanying the disabled			34,650.0	42,840.0	42,840.0
Providing one-off reimbursement to employer of uncompetitive persons in the job market			242,500.0	207,500.0	207,500.0
Provision of homes and improvement of housing conditions to the homeless families of fallen (deceased) soldiers, of 1 st , 2 nd , 3 rd disability category			500,000.0	500,000.0	500,000.0

²⁰ Day care services for the elderly and persons with disabilities.

Pensions for military officer personnel and their families' members			27,5 10,4 88.7	30,13 3,718 .5	30,13 3,718 .5
Military remuneration for military private personnel and their family members			559, 085. 7	621,9 60.0	621,9 60.0
Description of the Work Pensions Initiative			222, 863, 933. 4	246,4 72,03 2.3	246,4 72,03 2.3
Developing state policy in the field of social protection, program coordination and monitoring			5,54 6,93 3.8	5,546 ,065. 3	5,612 ,121. 1
Child and Families Support Services			303, 590. 2	545,8 02.1	545,8 02.1
Social care services for children with disabilities and in difficult life situations			4,44 4.5		
Temporary care services for children in difficult life situations				52,77 2.6	470,8 86.1

Community services for children with disabilities and in difficult life situations			4,888.9		
Community services for children with disabilities			7,111.2		
Assistance for people with disabilities			1,182,577.0	1,177,849.9	1,193,337.7
Provision and repair of technical means of support for the persons with disabilities			831,242.6		
Medical-social rehabilitation services			111,462.0		
Repairing the support tools of the persons with disabilities				8,100.0	8,100.0
Mental health rehabilitation services			70,100.2	70,100.2	

Printing of books with special fonts for the visually impaired persons with disabilities, notebook preparation, and “talking books” recording services			9,78 6.6	9,786 .6	9,786 .6
Ensuring implementation of the programme of Services for persons with disabilities			3,45 5.5	3,120 .8	3,120 .8
Medical support services for mental and narcological patients			2,77 1,98 9.1	2,515 ,293. 1	2,931 ,989. 1
Day care services for people with mental health problems			13,6 50.1		
Home care services for people with mental health problems				14,44 8.3	14,44 8.3
24-hour care services for people with mental health problems			12,4 44.6	37,78 7.7	37,78 7.7

Diagnostic and rehabilitative treatment services for the children with mental, psychic (behavioral), hearing, physical (movement) and other developmental disorders			307,283.9	400,303.8	320,303.8
Day care social and rehabilitation services for adolescents and youth with mental issues and disability			28,117.5	87,524.7	87,524.7
Socio-psychological support for children and young people with disabilities at a day center			11,555.7	28,896.6	
Organization of training courses for the parents of children with disabilities					2,564.1
Provision of certificates for acquiring hearing aids and wheelchairs			90,190.0	952,823.1	
Age and Disability Allowances for cases of losing the breadwinner			19,824,936.6	20,640,215.7	25,395,417.8

Funeral allowance for the beneficiary in case of death of the breadwinner of the age or disability pensioner			4,89 7,40 0.0	4,402 ,000. 0	4,456 ,804. 0
Assistance to the servicemen with acquired disability and the families of the fallen soldiers			420, 000. 0	420,0 00.0	420,0 00.0
Compensation for air transportation services for the disabled and the veterans and participants of the Great Patriotic War in the CIS area			22,0 00.0	22,00 0.0	15,00 0.0
"The Best Athlete with a Disability" Contest organization			16,9 45.3	16,94 5.3	11,88 1.0
Establishment of inclusive education system nationwide			1,59 0,48 2.5	2,469 ,887. 2	2,638 ,494. 3
Development of state policy in the field of education and science, program coordination and monitoring			887, 718. 5	1,857 ,385. 0	1,741 ,507. 5

Inclusive education in primary schools			420,034.3	218,170.9	121,118.2
Inclusive education in secondary schools			582,629.0	340,908.9	196,266.6
Inclusive education in high schools			63,933.9	56,091.8	33,273.4
Safe School			1,170,125.7	1,706,708.4	1,127,042.0
Pedagogical-psychological support services and organization of education for children with special educational needs			1,514,968.5	2,019,031.5	2,219,203.0
Full renovations of buildings and constructions within the framework of the second program of the social protection sector administration, supported by the World Bank			786,117.6	2,298,014.2	598,313.1

ANNEX 6. The Statistical Program for 2021, approved by decision No. 23 of December 28, 2020 of the National Council for Statistics, envisages statistical data collection and publication also in the field of disability

**Official statistics by economic segments, subsegments, and spheres
EMPLOYMENT MARKET²¹**

Employment (index) code	Statistical Work Name	Type of statistical document or other materials (sources) that are the basis for performance (index development)	Statistical Work (index)		
			coverage (by sector, type of activity, territorial distribution, number of employees, etc.)	freque ncy	Completion of execution (processing) (date or day after the reporting period)
WORK ACTIVITY AND UNDERUSE OF THE EMPLOYEE					

²¹Classifier number according to Decision No. 23 of December 28, 2020 by the National Council for Statistics.

141016	Number of people with disabilities and without disabilities in the job market (average year) ▪ Work Resources ▪ Number and Structure of the Workforce ▪ People with disabilities involved in employment, by employment types ▪ Employment ▪ Other activities not considered as employment ▪ Workforce underuse rates, including unemployment ▪ Number and Structure of population Outside the Workforce	Workforce sample research questionnaire	by country, city / village, gender, age group, educational level, economic activity status (employed, unemployed, out-of-work population)	Annually	2022 Fourth Quarter
141017	Level of participation in the labor market for people with disabilities and without disabilities ▪ Workforce participation level (average year) ▪ Level of employment ▪ Level of participation among disabled people in other activities not considered as employment ▪ Level of workforce underuse, including unemployment	Workforce sample research questionnaire	by country, city / village, gender, age group, educational level	Annually	2022 Fourth Quarter

HEALTHCARE AND SOCIAL SECURITY					
520003	Regarding Registered People with Disabilities	Form 1	By country, regions and the city of Yerevan,	Semi-annually	40
520005	Activities of Social Protection Institutions for Older and Disabled Persons	Form 1 soc. serv.	By the country	Annually	April 20
520017	People with mental and behavioral disorders	Form 37	By the country	Annually	July 6
520018	People with mental and behavioral disorders (without alcohol psychosis, alcoholism, drug addiction, and substance abuse)	Form 61g	By the country	Annually	July 6
520040	Benefits for Old Age, Disability, and Loss of Breadwinner	Form 2 - benefits	By country, regions and the city of Yerevan,	Semi-annually	40

Exchange of statistical information with international and other organizations in the form of questionnaires

United Nations Statistics Division

Information	Frequency	Number of Pages	Date of Submission
Questionnaire on Human Capacity and Disability Statistics for the United Nations Statistical Yearbook	annually	electronic	as required
Global Indicators of Sustainable Development Goals		Electronic	

United Nations Education, Science, and Culture Organization

Information	Frequency	Number of Pages	Date of Submission
Scientific and Experimental Development Questionnaire	annually	10	August

U.S. National Center for Health Statistics

Information	Frequency	Number of Pages	Date of Presentation
Washington Group Questionnaire on Disability Statistics	Annually	Electronic	as required
Disability Data for Selected GDP indicators		Electronic	as required

Washington Group on Disability Statistics

Information	Frequency	Number of Pages	Date of Presentation
Annual National Action Report questionnaire on Disability Statistics	Annually	Electronic	as required
Disability Statistics Questionnaire	Annually	Electronic	as required

