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**Report**

**Social Rights of Persons with Disabilities in Armenia**

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*In the framework of the Project*

*''Promoting the social rights of persons with disabilities by building the capacity of Armenian civil society organisations to engage with Council of Europe monitoring mechanisms''*

September 2017

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**Social Rights of Persons with Disabilities in Armenia**

1. **Introduction**

This report examines the gaps in the implementation of international human rights standards in Armenia in relation to a range of social rights of persons with disabilities: social assistance, education, work, accessibility, independent living and health. The standards considered are the Convention on the Rights of Persons with Disabilities and the revised European Social Charter, as well as other relevant instruments at the international and regional levels. The Convention on the Human Rights of Persons with Disabilities (CRPD) in particular reflects the interdependence of all human rights, not operating a clear distinction between civil and political rights on the one hand and social and economic rights on the other hand. Nonetheless, even the CRPD recognises that costly social and economic rights are subject to progressive implementation, meaning that States Parties have to demonstrate steady movement towards full compliance with the right in question.

This report was written by a team of two experts, one international and one Armenian, and is based mostly on desk research of available information regarding the situation of persons with disabilities in the fields considered. The authors also collected information from several meetings with representatives of various ministries, international organisations, local authorities in Yerevan, Vanadzor and Gyumri, as well as non-governmental organisations, during a visit to Armenia that took place from 19 to 24 June 2017.[[1]](#footnote-2) This report has two constraints. The first has to do with the sheer complexity of the thematic areas covered, which at the same time had to be presentedin abrief and accessible manner within the confines of the space available for the report. The second is that, despite occasionalinformation of the situation of persons with disabilities published as part of the Government’s annual reports, there still is extreme dearthin terms of systematic information on the social rights of persons with disabilities in Armenia. In these circumstances,the report sought to assess compliance in the broadest sense by relying on monitoring already carried out by the Committee on the Rights of Persons with Disabilities (‘the CRPD Committee’), the Committee for Social Rights and other international bodies, as well as to provide a sense of the most problematic issues in relation to each right in question.

The emerging picture is one of uneven compliance with international standards. Although Armenia has ratified most major human rights treaties, it has yet to upgrade its national legislation to the requisite level. Several essential pieces of legislation, including the law on anti-discrimination and the law on social protection of persons with disabilities are currently moving at glacial pace through adoption procedures. Armenia has engaged in several wide-ranging reform processes with financial and technical assistance from international donors,including most notably on achieving inclusive education, overhauling its system of certifying disability and social benefits, and on deinstitutionalization. For the rest, there are substantial issues of lack of compliance in relation to all rights considered, most evidently perhaps in relation to employment or accessibility. Additional efforts are required in all these areas.

This report is structured as follows. The second section looks at the reception of international human rights standards in the area of disability in Armenia. The third section examines the main crosscutting principles and doctrines derived from the CRPD, which are directly relevant in the process of examining compliance with substantive rights: the social model of disability, equality and non-discrimination, the principle of participation, data collection and monitoring, social and economic rights. The fourth to ninth sections consider each substantive right covered by this report: social assistance, education, work, accessibility, independent living and health. The tenth section presents recommendations. Each section includes a short introduction outlining the legal standards on the law in question, the conclusions of international bodies on Armenia’s compliance with its obligations under international treaties, a short presentation of the national legal framework and a selection of most prominent issues of compliance with respect to each substantive right. Finally, a selected bibliography is included at the end of the report.

1. **Reception of international law in Armenia**

Armenia ratified the CRPD in 2010 and submitted its first report on the implementation of its obligations on 21 January 2013. The CRPD Committee published its first concluding observationson Armenia on 8 May 2017,[[2]](#footnote-3) identifying numerous problems with implementation, some of which will be discussed below under each substantive section. Several non-governmental organisations as well as the Human Rights Defender submitted shadow reports on various aspects of the implementation of the CRPD in Armenia. Armenia is also party to the other major human rights treaties, including the Convention on the Rights of the Child or the International Covenant to Economic Social and Cultural Rights. However, it has not ratified the optional protocols to the CRPD, the International Covenant on Economic, Social and Cultural Rights, or the Convention on the Rights of the Child, giving individual victims the right to submit individual complaints.

Armenia ratified the revised European Social Charter on 21 January 2004 and accepted 67 of its 98 paragraphs. However, Armenia only accepted paragraphs 2 and 3 of Article 15 onthe right of persons with disabilities to independence, social integration and participation in the life of the community. This is of little practical consequence, as the first paragraph dealing with the right to education of persons with disabilities is effectively subsumed within the scope of Article 17 on the right of children and young persons to social, legal and economic protection, of general application, which Armenia accepted. On the other hand, Armenia has not yet ratified the Additional Protocol to the European Social Charter Providing for a System of Collective Complaints. The Committee for Social Rights often found the information submitted by the Armenian authorities in their regular reports to be insufficient, leading to findings of non-conformity with Article 15 of the revised Charter.[[3]](#footnote-4)

Armenia is a party to the European Convention on Human Rights and to Protocol 12 laying down the general prohibition of discrimination. There is no meaningful jurisprudence against Armenia on disability rights under that treaty. This may have a number of causes, most prominently the lack of legislation on discrimination, lack of awareness among persons with disabilities and their advocates about their rights and barriers restricting their access to justice. The judgment in a case brought by a wheelchair user dealing with fair trial touches on disability rights only obliquely.[[4]](#footnote-5) However, this may soon change, as at least two cases dealing with substantive disability rights issues - legal capacity and living conditions in psychiatric hospitals - are pending before the Court, have been communicated to the Armenian Government and are awaiting judgment.[[5]](#footnote-6)

Armenian authorities justified their refusal to ratify the various instruments setting out complaint procedures including the CRPD Optional Protocol and the Social Charter Collective Complaint Protocol, on the basis of the need to review internal legislation and practice and secure compliance prior to ratification.[[6]](#footnote-7) However, that would mean in effect a postponement sine die of ratification and depriving victims of desperately needed remedies. Furthermore, ratification may constitute a more effective incentive to secure compliance than a refusal to ratify.

1. **Relevant CRPD Principles**
2. **The obligation to review existing legislation and bring into line with the social model of disability**

The CRPD is based on the social model of disability,[[7]](#footnote-8) which postulates that the difficulties facing persons with disabilities are caused by the discriminatory barriers in society. In contrast, the discredited medical model of disability locates the source of these difficulties in the person’s physical or psychological impairments. Contrary to the medical model, which focuses on ‘fixing’ or ‘controlling’ the person, the social model requires States to remove societal barriers, treating the person as a subject of rights and holding governments to account for ensuring these rights. The definition of disability included in Article 1 of the CRPD (“persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.”), as well as the Preamble (viewing disability as an interactive process “between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others”) reflect the changing paradigm from the medical model to the social model of disability. This vision invites structural change at the national level, in that States Parties are required to examine the extent to which existing laws, practices or behaviours are in conformity with the social model of disability and implement the necessary changes.

Legislation in the area of disability in Armenia is somewhat out-dated, although some changes are slowly being introduced, including as a result of ratifying the CRPD. Article 29 of the Armenian Constitution prohibits discrimination on the basis of disability among other grounds. Persons with disabilities are also mentioned in relation to the right to social security, under Article 83, stating that “everyone shall, in accordance with the law, have the right to social security in case of maternity, having many children, sickness, disability, and accidents at work, need of care, loss of the bread-winner, old age, unemployment, loss of employment, and in other cases.” Article 86§8 provides that the main objectives of state policy are, among others, the implementation of programmes for disability prevention, treatment, rehabilitation of persons with disabilities and promoting the participation of persons with disabilities in public life.

The “Law on social protection of persons with disabilities” adopted in 1993 and modified subsequently several times is the main piece of legislation dealing with disability rights in Armenia. However, this law is mostly informed by the medical model of disability and has received extensive criticism. The authorities sought to replace this law with more modern regulations, inspired by the CRPD, but efforts in that respect have not yet been successful. Civil society have expressed concerns that even the new regulations are not fully compliant with the CRPD.

The Armenian Government adopted several strategic programmes dealing with various issues facing persons with disabilities. The “Comprehensive programme on the social inclusion of PWDs for 2017-2021” adopted in 2016, highlights numerous problems in the areas of social protection, health, education, transportation or urban development, setting out more than fifty different actions to address these problems. A range of state bodies including the Ministry of Education and Science, the Ministry of Emergency Situations, the Yerevan municipality, the Urban Development Committee, the Ministry of Culture, as well as NGOs, are involved in the implementation of the programme, under the overall supervision of the Ministry of Labour and Social Affairs. Nonetheless, the Programmelacks clear provisions on monitoring and evaluation.

The CRPD Committee expressed several concerns of a general nature in relation to the legislative measures taken or which are being proposed with a view to implementing the CRPD.[[8]](#footnote-9) Thus, the CRPD criticised ''the use of the concepts of prevention and treatment of disability in the revised Constitution (art. 48) and in the newly adopted comprehensive plan for 2017-2021 on social inclusion of persons with disabilities'', stressing thefact that the draft law on the protection of the rights of persons with disabilities and their social inclusion was not in line with the CRPD, including with respect to the concept of disability, and providing for the prevention and treatment of disability and for legal incapacity; and the medically based determination of disability, which relies on impairments without considering social barriers and individual requirements for social participation. Consequently, the CRPD Committee called on the Armenian Government to review its legislation and plans referring to the prevention and treatment of disability and align them with the human rights-based model of disability; to review the draft law on the protection of the rights of persons with disabilities and their social inclusion to ensure that it is in line with the Convention and the Committee’s general comments; and to adopt a human rights-based concept of disability and ensure that disability determination focuses on the barriers to the social participation of persons with disabilities and refers to individual requirements, will and preferences.Actions to implement the requirements of the CRPD are foreseen in the Comprehensive Programme 2017-2021, in particular as regardsamending national legislation.

1. **Social and economic rights**

In the case of rights that require substantial public expenditure, States should plan to achieve compliance in a progressive, gradual manner, to the maximum of their available resources (Article 4§2 CRPD). Progressive realisation means that States parties have a specific and continuing obligation to move as expeditiously and effectively as possible towards the full realisation of the right in question. Retrogressive measures are not normally permitted unless they are temporary and limited to a period of crisis, necessary and proportionate, not discriminatory and comprise all possible measures to mitigate inequalities.[[9]](#footnote-10) States parties have a core obligation to ensure the satisfaction of minimum essential levels of the right in question, as well as to guarantee that relevant rights are exercised without discrimination.[[10]](#footnote-11) The obligation to ensure the core contents of the right and the prohibition of discrimination are immediately applicable and not subject to progressive realisation.

For its part, the European Committee of Social Rights has clarified that when the realisation of a right under the European Social Charter was “exceptionally complex and particularly expensive”, a government was permitted some flexibility but realisation of social rights must occur within a “reasonable time, with measurable progress and to an extent consistent with the maximum available resources.”[[11]](#footnote-12) Two decisions handed down by the European Committee of Social Rights that involved close scrutiny of progress made over a period of time in France in the area of education for children with autism provide a good illustration of how courts may approach the principle of progressive realisation.[[12]](#footnote-13)

1. **Equality and non-discrimination**

Article 3 of the CRPD elevates equality and non-discrimination to the level of a fundamental overarching principle that underpins all substantive rights. Article 5, which details the obligations related to equality and non-discrimination, conveys a vision of substantive equality that requires States Parties to engage in the process of transforming social structures, systems and ideas that keep persons with disabilities in a subordinated position. Each of the four sub-paragraphs of Article 5 deals with a different aspect of equality and non-discrimination. Paragraph 1 requires States Parties to ensure persons with disabilities are “equal before the law” and benefit from “equal protection of the law.” This implies for instance equal treatment by all law enforcement officers, or the removal from the law of all provisions that discriminate on the basis of disability.

Paragraph 2 requires States Parties to prohibit all disability-based discrimination, defined elsewhere as “any distinction, exclusion or restriction on the basis of disability which has the purpose or effect of impairing or nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field” (Article 2). Consequently, disability-based discrimination in the sense used by the CRPD, covers explicitly or implicitly direct and indirect discrimination, discrimination by association, structural or systemic discrimination,discrimination on the basis of perceived impairment, disability-based exclusion and segregation in any field of social life,disability-based violence,denial of access,denial of reasonable accommodation and failure to provide procedural accommodation in the context of access to justice.[[13]](#footnote-14) Article 5§3 refers to the obligation to provide reasonable accommodation, whereas Article 5§4 permits the adoption of positive action measures with a view to achieving or accelerating de facto equality between persons with disabilities. Notably, the CRPD also covers multiple discrimination, with specific provisions covering the specific detriment suffered by women with disabilities (Article 6) and children with disabilities (Article 7).

States Parties are duty-bound to take complex measures with a view to achieving substantive equality, including mainstreaming disability as well as disability-specific measures, in close consultation with persons with disabilities.[[14]](#footnote-15) In particular, States Parties should adopt comprehensive legislation on equality and non-discrimination, develop policies to prevent the exclusion of persons with disabilities and to combat discrimination against them, develop awareness raising programs that combat stereotypes and stigmatisation of persons with disabilities, collect relevant data and ensure proper monitoring of the effectiveness of legislation and policies on equality and non-discrimination.

Article E of the revised European Social Charter contains an explicit provision prohibiting discrimination, with the overarching role of ensuring the ‘equal effective enjoyment’ of the substantive rights set out therein.[[15]](#footnote-16) The reference to ”other status’ in Article E also covers disability. Paragraph 2 of Article 15 of the Revised Charter, focusing on employment in the context of the right of persons with disabilities to independence, social integration and participation in the life of the community, requires States Parties to have in place anti-discrimination legislation that should include the concept of ‘reasonable accommodation’.[[16]](#footnote-17) Paragraph 3 of Article 15, focuses on the positive action measures needed to achieve these goals in fields such as housing, transport, telecommunications, cultural and leisure facilities,which should be taken in consultation with “persons with disabilities and their representative organisations.”[[17]](#footnote-18) In effect, ‘Article 15§3 requires the existence of non-discrimination (or similar) legislation covering both the public and the private sphere in […] as well as effective remedies for those who have been unlawfully treated’.[[18]](#footnote-19)

In its Concluding Observations on Armenia, the UN CRPD Committee expressed concern in relation to the fact that multiple and intersecting forms of discrimination are not prohibited, that the anti-discrimination law does not provide for the concept of reasonable discrimination and about the lack of information on cases of disability discrimination.[[19]](#footnote-20) Consequently, the CRPD Committee recommended that the State party expedited the adoption of a comprehensive anti-discrimination legislation.

In its 2016 Conclusions on Article 15§2, the European Committee of Social Rights noted that Armenian persons with disabilities still lacked effective protection against discrimination in employment, pending the adoption of anti-discrimination legislation foreseen by the Government. Similarly, under Article 15§3, the Committee concluded that there was no anti-discrimination legislation to protect persons with disabilities that covered explicitly housing, transport, communications and cultural and leisure activities. Other international bodies, such as the European Commission against Racism and Intolerance,[[20]](#footnote-21) the Commissioner for Human Rights[[21]](#footnote-22)and the European Commission[[22]](#footnote-23) also called on the Armenian Government to adopt anti-discrimination legislation.

Armenia does not currently have comprehensive anti-discrimination legislation in place, although a process for its adoption has been in motion for several years, with various drafts having been circulated. Although several disparate anti-discrimination provisions are included in different pieces of legislation, they do not offer victims of discrimination sufficient protection or adequate access to justice, including in the area of disability. An expert study on these matters concluded that existing norms cover only a small portion of the concept of anti-discrimination, with fundamental notions such as discrimination by association, harassment, victimisation or affirmative measures missing, and other notions being construed in an exceedingly narrow fashion.[[23]](#footnote-24) Although individual legal and policy initiatives seemingly suggest the authorities’ acceptance of the need for positive measures or reasonable accommodations, their ad-hoc nature prevents citizens from relying on them as of right.

The duty to provide reasonable accommodation, currently regulated in a confusing and incomplete manner, illustrates the shortcomings of the current legal framework.[[24]](#footnote-25) There is no duty to provide reasonable accommodation as such, although several vague provisions in the Labour Code and the Law on Social Protection of Persons with Disabilities may be interpreted as providing for such an obligation in certain circumstances. For example, Article 19§1 of the Law on Social Protection of Persons with Disabilities’ provides that ‘all employers shall ensure the establishment of working conditions, in accordance with individual rehabilitation programs for the employed persons with disabilities’. This type of provisions does not have a clear scope or content and does not confer a justiciable right upon those potentially entitled to reasonable accommodations.

1. **Principle of participation**

The need to ensure the meaningful involvement of persons with disabilities in any decisions that concern them is an overarching theme of the CRPD. The Preamble states that persons with disabilities should have the opportunity to be actively involved in decision-making processes regarding policies and programs that concern them. One of the general principles of the CRPD is the full and effective participation and inclusion in society of persons with disabilities (Article 3).Furthermore, States Parties have an obligation to “closely consult with and actively involve” persons with disabilities and their representative organisations in “the development and implementation of legislation and policies to implement the present Convention” and in other decision-making processes, including national implementation and monitoring (Article 4 (3), Article 19(c), Article 29, Article 30, Article 32, and Article 33(3)).

The CRPD Committee expressed its concern in relation to the Armenian authorities’ “insufficient and selective consultation of representative organisations of persons with disabilities, including the lack of appropriate support and reasonable accommodation, when drafting disability-related legislation, policies, strategies and action plans.”[[25]](#footnote-26)Consequently, it recommended taking measures to ensure the full and equal involvement of persons with disabilities, in all their diversity, by providing appropriate support and reasonable accommodation in case of need.

1. **Monitoring and data collection**

Article 31 and 40 of the CRPD erect an innovative legal framework for monitoring and implementation at both the national and international levels. Thus, Article 31 requires States Parties to collect “appropriate information” making it possible “to formulate and implement policies to give effect tothe CRPD. Article 33 requires States Parties to designate a focal point within government on implementation and to designate a mechanism “to promote, protect and monitor implementation of the present Convention.”

The revised European Social Charter also has data collection components. For example, Article 30 on the right to protection against social exclusion requires States Parties to adopt an overall and coordinated approach, which should consist of an analytical framework, a set of priorities and measures taking account of the problems' nature and extent, so as to prevent and remove obstacles to access to fundamental social rights, an approach that cannot be implemented without collecting statistics.[[26]](#footnote-27) The decision in a case against Belgium provides a good illustration of the scope of the obligation to collect data under Article 30 in the context of state provision for individual with high support needs.[[27]](#footnote-28)

In its Concluding Observations on Armenia, the UN CRPD Committee expressed concern in relation to the lack of disaggregated statistical data on the situation of persons with disabilities in the State party, hindering the implementation of the CRPD.[[28]](#footnote-29) Consequently, the Committee recommended that the Armenian authorities “developed systematic data collection and reporting procedures that are in line with the Convention, and collect, analyse and disseminate disaggregated data on the characteristics of its population with disabilities, including sex, age, ethnicity, type of impairment, socioeconomic status, employment and place of residence, and on the barriers that persons with disabilities face in society.” Under Article 33, the CRPD Committee expressed concern about the lack of resources allocated to the national monitoring mechanism and the insufficient participation of organisations of persons with disabilities in the monitoring process, calling on the Armenian authorities to take adequate remedial measures.[[29]](#footnote-30)

Armenia does not currently have a monitoring mechanism in accordance with Article 33§2 of the CRPD. One version of the draft Law on Protection of the Rights and Social Inclusion of Persons with Disabilities envisages designating the Human Rights Defender as the monitoring mechanism. Notably, the Human Rights Defender acts already as the National Preventative Mechanism in conformity with the Optional Protocol to the UN Convention against Torture, in which capacity it monitors places where persons with disabilities are detained among others. There are various mechanisms of consultation with civil society in Armenia, including persons with disabilities, at the regional and national level, with various degrees of effectiveness. A mechanism of coordination led by the Ministry of Labour and Social Affairs and involvingvarious officials and representatives of civil society exists at the national level. However, its effectiveness is in doubt and there are plans for overhauling it.

1. **The Right to Social Assistance**

Article 22 of the Universal Declaration of Human Rights recognises the right to social security, whereas Article 25 provides that everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control. Subsequent human right treaties also contain provisions on the right to social security, coupled with non-discrimination clauses.[[30]](#footnote-31) Article 28 of the CRPD requires States Parties to take appropriate measures to ensure that persons with disabilities and their families benefit from an adequate standard of living, including adequate food, clothing and housing, and to the continuous improvement of living conditions. In that sense, the second paragraph of Article 28 refers specifically to access to clean water services, appropriate and affordable services, devices and other assistance for disability-related needs, social protection programmes and poverty reduction programmes, public housing programmes and retirement benefits and programmes.

The Special Rapporteur on Disability Rights emphasised that social protection for persons with disabilities needs to move from the traditional approach based on the medical model of disability which treated the person as unable to work, cope independently or participate in society, towards intervention systems that promote active citizenship, social inclusion and community participation.[[31]](#footnote-32) In that sense, social protection is instrumental to achieving independent living, in line with Article 19 of the CRPD. States Parties should provide social protection programmes that cover disability-related expenditures, to prevent a significant deterioration of standard of living and to prevent poverty.[[32]](#footnote-33)

According to the Article 15 (“The right of persons with disabilities to independence, social integration and participation in the life of the community”) of the revised Social Charter, States Parties undertake to promote the full social integration and participation of persons with disabilities in the life of the community in particular through measures, including technical aids, aiming to overcome barriers to communication and mobility and enabling access to transport, housing, cultural activities and leisure. In order to give meaningful effect to this undertaking, States Parties must take the following measures in particular:

* Mechanisms must be established to assess the barriers to communication and mobility faced by persons with disabilities and identify the support measures that are required to assist them in overcoming these barriers;
* Technical aids must be available either for free or subject to an appropriate contribution towards their cost and taking into account the beneficiary’s means. Such aids may for example take the form of prostheses, walkers, wheelchairs, guide dogs and appropriate housing support arrangements;
* Support services, such as personal assistance and auxiliary aids, must be available, either for free or subject to an appropriate contribution towards their cost and taking into account the beneficiary’s means.[[33]](#footnote-34)

The European Committee of Social Rights’ decision in *International Federation for Human Rights (FIDH) v. Belgium* provides a useful illustration of the manner in which Article 15 applies in relation to the particular context of provision for persons with high support needs in Belgium. The European Committee of Social Rights found two violations of Article 14§1 on the right to benefit from social welfare services of the revised Charter. The first violation consisted in the Belgian authorities’ failure to provide persons with high support needs sufficient places in care and accommodation centres, corresponding to their state of health and particular lifestyles. The second consisted in the lack of institutions giving advice, information and personal help to persons with high support needs in the Brussels-Capital Region of Belgium. Notably, the Committee stated that Article 15§3 required States Parties to ensure that the social services took action to implement the home adaptations necessary to permit integration and dignified existence of persons with high support needs within the family and social environment.[[34]](#footnote-35)

Although the European Convention on Human Rights does not guarantee the right to housing as such, some of its aspects come within the scope of the right to respect for home under Article 8 or the right to peaceful enjoyment of possessions under Article 1 of Protocol 1. *Guberina v. Croatia* is a particularly interesting example of disability-based discrimination in the context of housing.[[35]](#footnote-36) The case concerned the discriminatory denial of a request for a tax exemption normally available to first time homebuyers as long as they bought their house in order to satisfy their housing needs, and if their previous home lacked ‘basic infrastructure’. The applicant was the father of a child using a wheelchair who lived in an inaccessible building and who wanted to move to accessible accommodation. The authorities justified their decision on the fact that lack of accessibility did not pertain to ‘basic infrastructure.’ The Court held that there was a violation of the prohibition of discrimination (Article 14) in conjunction with right to fair enjoyment of possessions (Article 1 of Protocol 1), emphasising the key role of accessibility for persons with disabilities.

In its Concluding Observations on Article 28, the UN CRPD Committee expressed concern in relation to the fact that the majority of persons with disabilities in Armenia lived in poverty, including in rural and remote areas, that the available social allowances were insufficient to cover the minimum necessary for an adequate standard of living and the additional expenses related to disability, and that the State Party did not take appropriate measures to increase the accessibility of social protection programmes, including public housing.The CRPD Committee consequently asked the Armenian authorities to take the necessary remedial measures.[[36]](#footnote-37)

In 2016, the European Committee of Social Rights mentioned, in relation to Article 15§3 of the revised Social Charter, that the Armenian authorities failed to provide information on how the rules on the accessibility of buildings for persons with reduced mobility are applied in practice, what remedies are available, and whether financial assistance was provided to convert existing housing.[[37]](#footnote-38)This was sufficient to establish non-conformity with Article 15§3. On the issue of financial aid to increase the autonomy of persons with disabilities, the Committee noted that the situation was unchanged since its previous report published in 2012. In that report, the Committee noted that under the 1995 Law on State pensions, persons with disabilities received an insurance (contributory) pension (in case they had been working before becoming disabled) or a social (non-contributory) disability pension (in other cases).[[38]](#footnote-39) That was sufficient to establish compliance with Article 15§3 in that respect.

A 2016 UNICEF study[[39]](#footnote-40) that examined deprivation among children in Armenia in regard to multiple dimensions, including housing, utilities, clothing, education and leisure, reported that 64 percent of children are deprived in two or more dimensions, with 82 percent deprivation in rural areas. In terms of monetary poverty alone, 36 percent of children are poor and 3 percent are extremely poor. Poverty is more likely to affect children: although children represent only 22 percent of the total Armenian population, children represent 26 per cent of the poor population and 30 percent of the extremely poor.

Under Article 30 of the Law on State Benefits, children with disabilities are entitled to a disability allowance amounting to 18000 AMD (approximately equal to 37 USD). Under Article 10 of same law, the period of time a carer (usually one parent) spends caring for a child with disability is considered as length of service, but not more than 10 years. The current level of social assistance available to children with disabilities does not cover their basic living needs.[[40]](#footnote-41)UNICEF reported that 54 percent of Armenian children with disabilities and their siblings live in poverty.[[41]](#footnote-42)

Notably, the Armenian government is currently implementing a reform of provision in the area of social protection, which aims to integrate all disability benefits and provide them in one place.[[42]](#footnote-43) This process, which started in 2012 and is expected to end in 2019, will create additional service centres in Yerevan as well as in the regions.

Although Armenia lacks a government strategy to deal with the housing issues of vulnerable groups, it has implemented projects for vulnerable groups on an ad-hoc basis. People with disabilities and with partial mobility are often included in definitions of ‘vulnerable groups’ found in government policy documents.[[43]](#footnote-44) There is no policy making housing subsidies generally available to low income-housing households.[[44]](#footnote-45) Armenia does not have a clear policy on social housing.[[45]](#footnote-46) The concepts of “socially vulnerable”, “social housing” or “affordable housing” lack authoritative definitions although they are used relatively frequently in official documents.[[46]](#footnote-47)

There are disparate legal provisions on housing for persons with disabilities, although implementation is often poor. Article 32 of the Law on Social Protection of Persons with Disabilities provides that local government, enterprises, institutions and organisations, including specialised enterprises of educational and practical internship which use the work of persons with disabilities shall, in course of distributing housing, take into account the needs of persons with disabilities, including proximity to the workplace or relatives’ place of residence, the rehabilitation institution or domestic service facilities. The construction of housing provided to persons with disabilities must take into account their particular needs. According to the Law on Urban Development, the government ensures the accessibility of residential, social and industrial buildings and structures for persons with disabilities.

There have been several pilot projects to develop innovative models of social housing for vulnerable persons, including persons with disabilities, although they often lack sustainability and do not generate consistent state policy. For example, during 2006-2008, a new model of social housing was introduced in Armenia with financial assistance from the Swiss Agency of Development and Cooperation and local municipalities. Two social housing apartment buildings for refugees and other vulnerable people were built in Goris and in Yerevan.[[47]](#footnote-48) A social housing policy was introduced which however did not cover persons with disabilities specifically, and several more houses built in Maralik in 2012.

1. **The right to education**

According to Article24§1 of the UN CRPD, States Parties must ensure the realisation of the right of persons with disabilities to education through an inclusive education system at all levels, including preschool, primary, secondary and tertiary education, vocational training and lifelong learning, extracurricular and social activities, and for all students, including persons with disabilities, without discrimination and on an equal basis with others. The UN CRPD Committee has clarified that inclusive education is a “fundamental right of all learners”, a principle that acknowledges all students’ individual requirements and potential, a means of realising other human rights and the result of a continuing process to accommodate the needs of all students in the school environment.[[48]](#footnote-49) Non-discrimination in education for children with disabilities includes the right not to be segregated, the provision of reasonable accommodation and individualised support, and the accessibility of the educational system. Furthermore, education in all its components has to meet minimum quality standards, with the aim being to ensure that “no child leaves school without being equipped to face the challenges that he or she can expect to be confronted with in life.”[[49]](#footnote-50)

Article 15 (the right of persons with disabilities to independence, social integration and participation in the community) and Article 17 (the right of children and young persons to social, legal and economic protection) of the European Social Charter also cover the right of children with disabilities to education, expressing a marked preference for inclusive education. The European Committee of Social Rights has heard a number of collective complaints regarding the failure to include children with disabilities in any type of schooling and the provision of inferior education in segregated environments.[[50]](#footnote-51) The Committee stressed the importance of individualised support and the existence of measurable progress toward the goal of inclusive education.

Article 2 of Protocol 2to the European Convention on Human Rights on the right to education benefits children with disabilities among others. On 23 February 2016, in the case of *Çam v. Turkey*, the European Court of Human Rights ruled that denying a blind teenager access to music school constituted a breach of her right to education in conjunction with the prohibition of discrimination.[[51]](#footnote-52) On this occasion, the Court emphasised that inclusive education is the best means for ensuring the principles of universality and non-discrimination in education, called on states to pay particular attention to the needs of children with disabilities, and stated that the failure to provide reasonable accommodation is a type of discrimination banned under Article 14 of the European Convention on Human Rights.

The UN CRPD Committee noted in its 2017 concluding observations[[52]](#footnote-53) on Armenia that despite the positive trends towards inclusive education many children remained in segregated educational settings without the necessary support. In addition, there was a lack of accessibility and reasonable accommodation for children with disabilities in mainstream schools, a lack of sufficient support and training for administrative and teaching staff with regard to inclusive education, or of a comprehensive strategy to promote inclusive education in urban and rural areas. Consequently, the Committee asked the Armenian Government to take adequate remedial measures. For its part, the Committee on Economic, Social And Cultural Rights urged the Armenian Government to take additional measures to expand access for persons with disabilities, in particular as regards transportation and physical access to educational institutions […], and provide “reasonable accommodation” for persons with disabilities, as well as to accelerate the implementation of its inclusive education reform plans.[[53]](#footnote-54)

In its 2015 conclusions[[54]](#footnote-55) on Armenia’s compliance with Article 17§2 of the Revised European Social Charter, the European Committee of Social Rights noted approvingly the legislation recently adopted at the time on reform of the education system with a view to including children with disabilities. Nonetheless, it asked the Armenian Government for additional information as regards whether the legislation would explicitly protect persons with disabilities from discrimination in education, and regarding statistics on children with disabilities in mainstream schools, reserving its position on this point in the meantime.

Armenia embarked on an ambitious program to reform its education system by gradually ensuring all mainstream schools are fully inclusive by 2025, including by turning most (if not all) special schools into pedagogical-psychological support centres.[[55]](#footnote-56) Article 38 of the revised Armenian Constitution guarantees the right to education and prohibits discrimination.TheLaw on General Education, as revised in 2015,specifies under Article 3, that inclusive education is the mechanism to guarantee the right of all children to education, based on maximum participation in the educational process,and the provision of adequate conditions and an adapted environment for each child, taking into consideration their development peculiarities, and including those with specific educational needs.Furthermore, the Law of the Republic of Armenia on the Rights of the Child, enables each child to attend a school in their neighbourhood. Under Article 26, the Law provides for individual education plan, teachers’ assistants, a range of accommodations to facilitate education for children with disabilities, financial support, free medical and psychological services, as well as the opportunity to receive basic and professional education, employment, social rehabilitation, and a “full” life, by strengthening their self-confidence and facilitating participation in the community.[[56]](#footnote-57)

Currently, 284 out of 1,384 schools in Armenia have been designated as ‘inclusive schools,’ enrolling 6,700 children with special educational needs. The process of reformto date focused on quantity rather than quality, with many children with special educational needswho are schooled in inclusive schools not being provided with suitable individualised support. Many children are integrated only formally, attending reduced hours, being present in school but not actually receiving any education, or being forced to accept home education. Furthermore, parents often have to compensate the absence of specialised support by accompanying their children in school, potentially sacrificing their ability to hold on to a job. Parents also report experiencing difficulties with after school care, given the almost complete shortage of day centres or other support options for children with disabilities. Kindergartens are mostly unable to accommodate children with disabilities, whereas the prospects of continued enrolment beyond compulsory education ending in ninth grade is doubtful. The rates of enrolment in higher education are also reportedly very small, with higher education establishments being mostly physically inaccessible.

The poor performance of inclusive schools is due to a number of factors, including the prevailing lack of physical accessibility even in inclusive or special schools, the lack of reasonable accommodations and the lack of additional services such as speech therapy. The process of inclusion is hampered by a scarcity of didactic and human resources, such as accessible educational material, modified ways of teaching, modified curricula, or specialised auxiliary personnel, although these problems are gradually being addressed. Although there has been considerable improvement in terms of professional and public attitudes towards children with disabilities, some degree of stigma and discrimination persists.

Some children with disabilities are excluded from all forms of education, whereas others attend segregated schools providing inferior education. Thus, it is estimated that 20 to 30 percent of children with disabilities neither attend school nor receive home education, particularly in rural areas. As of December 2016, there were 20 special schools in Armenia. Parents have a legal right to choose special schools over mainstream schools for their children, with that choice being motivated by the actual or perceived shortcomings of the latter. However, in addition to education provided being of inferior quality, enrolment in a special school often involves travelling long distances or living at the school, which may aggravate the child’s isolation. There are currently 670 children in state orphanages, of whom 70 percent have disabilities. Most of these children go to special schools, receive limited education inside the orphanage, or in some case receive no education at all, with very few attending mainstream schools.

1. **The right to work**

Article 27 of the UN CRPD on the right to work of persons with disabilities provides a detailed legal blueprint for State obligations in relation to work and employment, drawing from similar language in the Universal Declaration of Human Rights (Art. 23) and the ICESCR (Art. 6).[[57]](#footnote-58) It states that persons with disabilities have a right to work on an equal basis with others, including the right to the opportunity to gain a living by work freely chosen or accepted in a labour market and work environment that is open, inclusive and accessible, comprising public and private sectors. This objective shall be accomplished by a range of measures, including legislative measures, such as providing adequate protections against discrimination based on disability in the area of employment, improving accessibility and providing reasonable accommodation in the work place and taking positive measures to promote employment opportunities for persons with disabilities. Article 27 of the CRPD is complemented by other relevant instruments and authoritative interpretative commentaries adopted at the global level, including the ICESCR[[58]](#footnote-59) and the relevant instruments adopted under the aegis of the International Labour Organisation.

In Europe, Article 15§2 of the revised European Social Charter enjoins States Parties to promote the access to employment of persons with disabilities with the aim of facilitating the exercise of their right to independence, social integration and participation in the life of the community. Accordingly, States Parties shall take measures with a view to facilitating access to employment and job retention in the “ordinary working employment”, as well as adjusting working conditions to the needs of persons with disabilities. Article 15§2 foresees the possibility of organising sheltered employment where other options in the open labour market have been exhausted.

In its Concluding observations on Armenia, the UN CRPDCommittee expressed concern in relation to the significant unemployment rates among people with disabilities and the lack of adequate policies and programmes to address the situation, calling for adequate measures to be taken in that respect.[[59]](#footnote-60)

In its latest report on Armenia published in 2015, the European Committee of Social Rights noted that the Armenian Government did not submit sufficient information regarding the level of employment among persons with disabilities, the existence and functioning of judicial and non-judicial remedies for disability-based discrimination, and the implementation of programmes and measures implemented with a view to bolstering employment among persons with disabilities. Accordingly, the European Committee of Social Rights concluded that the situation in Armenia is not in conformity with Article 15§2 of the Charter on the ground that it has not been established that persons with disabilities are guaranteed effective protection against discrimination in employment.

The Law on employment, which entered into force in 2014, includes provisions that refer specifically to persons with disabilities, who qualify as “non-competitive unemployed persons in the labour market”, eligible for certain measures of support to facilitate their employment. Thus, in addition to measures of support generally available to the unemployed, there are several facilities specifically tailored for persons with disabilities such as the right to job placement within their dedicated quota and the right to reasonable accommodation in the work place. The law provides for a mandatory quota of disabled employees that was supposed to apply by 2016 for the public sector and by 2017 for the private sector. The state committed to pay the salaries of those employed as part of the quota for a fixed period of time from a special extra budgetary fund.

The Law on social protection of persons with disabilities, although mostly out-dated and steeped in the medical model of disability, contains a modicum ofguarantees against disability discrimination in the area of employment, including for example a ban on any refusal to hire or refuse the promotion of a person with disabilities, or the obligation to provide certain accommodations based on the treatment plan of the person in question. The Comprehensive programme on social inclusion of persons with disabilities 2017-2021 also includes several measures in the area of employment, including programmes for specialised training, recovery of working skills, job coaching, and work place adaptation.

State Employment Service Agencies are primarily entrusted with implementing state policies aimed at supporting persons with disabilities in the area of employment, including by maintaining a database of persons looking for employment. Non-governmental organisations are also running various support services in the area of employment, such facilitating the relationship with employees,or hiring persons with disabilities among others. Notably, between 2012 and 2016, Save the Children and USAID implemented the Livelihood Improvement through Fostered Employment (LIFE) for People with Disabilities Program designed as “an effective model for provision of employment of persons with disabilities”, including awareness raising, integrated training, job placement and stakeholder capacity building components.[[60]](#footnote-61) The programme successfully piloted alternative initiatives aimed at bridging people with disabilities to employment, including supported employment, on-the-job training, self-employment or social enterprises. However, the program had to be suspended due to lack of funding, leaving two hundred persons with disabilities without work. In the absence of government support, many private sector initiative lack sustainability and do not leave a lasting legacy.

Several legislative projects in the area of employment of persons with disabilities are currently in preparation, as follows:

* a law on protecting the rights of persons with disabilities and their social inclusion, with more detailed provisions on disability-based discrimination, to replace the outdated law currently in place;
* a new methodology to certify disability based on the principles of the International Classification of Functioning of the World Health Organisation;
* a law on anti-discrimination, as discussed above, that would also cover disability-based discrimination.

The impact of most measures prescribed in the above-mention laws and policies is unknown, but likely to be very limited. A study published in 2013 cites an extremely high rate of unemployment among persons with disabilities at 92%, despite the measures of support adopted by the Government[[61]](#footnote-62) The most significant barriers to employment of persons with disabilities were the employers’ negative attitudes as well as a lack of knowledge about their needs and about available State-provided incentives in this area, the lack of supportive governmental policies, the lack of employment opportunities and bureaucratic inertia and red tape. Discrimination in this area has a clear gender component, with women less likely to be employed than men. Another report noted the lack of employment opportunities because of limited or absent physical access to workplaces.[[62]](#footnote-63)

The Government has not made available up to date information regarding the unemployment rate among persons with disabilities, or the number of beneficiaries of the various measures of support that are theoretically available, which are not effectively monitored. However, anecdotal evidence suggests that unemployment rates remain very high. According to information provided by NGOs, the other measures of support available do not work as intended. For example, employers who hired people with disabilities under salary compensation plans tend to fire them upon expiry of the contract, signing new employment contracts with other persons with disabilities instead.[[63]](#footnote-64) In the absence of clear protections against disability-based discrimination in the area of employment, victims lack any remedies, law-enforcement professionals lack the enabling legal framework and there is an almost complete dearth of relevant case law.

1. **Right to accessibility**

Accessibility is an indispensible pre-requisite of independent living and social participation, and of the ability to enjoy human rights in general. Accessibility is one of the “general principles” set out in Article 3 of the UN CRPD and as such is a crosscutting concern for all rights included in the CRPD. Article 9 of the CRPD focuses on accessibility specifically, demanding that States Parties take measures “to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communication technologies and systems, and to other facilities and services open or provided to the public, both in urban and in rural areas.” Notably, the CRPD is the first human rights treaty to refer explicitly to information and communication technology (ICT). Accessibility should be provided to all persons with disabilities regardless of the type of impairment in question.[[64]](#footnote-65) The right to access for persons with disabilities requires the adoption and implementation of accessibility standards, whereby “barriers to access to existing objects, facilities, goods and services aimed at or open to the public shall be removed gradually in a systematic and continuously monitored manner, with the aim of achieving full accessibility,”[[65]](#footnote-66) including through the use of new technologies.[[66]](#footnote-67) All new goods, products, services and technologies should be designed and provided in accordance with the principle of universal design, thus facilitating full access to all people, including persons with disabilities. The CRPD Committee clarified that denial of access in the form of inaccessible facilities should be considered a discriminatory act.[[67]](#footnote-68) Notably, the CRPD Committee identified several violations of the Convention in a case brought by persons with visual impairment complaining that automatic teller machines (ATMs) in Hungary were inaccessible.[[68]](#footnote-69)

Accessibility is one of the five rights based priority areas included in the Council of Europe “Disability Strategy 2017-2023 – Human Rights: a reality for all.”[[69]](#footnote-70) Article 15§3 of the Revised Social Charter refers implicitly to accessibility in requiring States Parties to take measures “to overcome barriers to communication and mobility and enabling access to transport, housing, cultural activities and leisure. For its part, the European Court of Human Rights acknowledged, in the above-mentioned case *Guberina v. Croatia*, that an inaccessible flat severely impaired [adisabled child’s] mobility, threatening his personal development and ability to reach his maximum potential, and making it extremely difficult for him to fully participate in the community and the educational, cultural and social activities available for children, as well impairing his and his family’s quality of life.[[70]](#footnote-71)

In its concluding observations on Armenia, the UN CRPD Committee mentioned approvingly the adoption of the Law on road transport, in 2016, which is aimed at increasing the physical accessibility of public transportation for persons with disabilities.[[71]](#footnote-72)Nonetheless, there were several areas of major concern in relation to Article 9, referring to “the overall lack of accessibility for persons with disabilities in the State party”, the lack of implementation of existing accessibility norms and standards, the lack of sanctions in the Code on Administrative Offences for breaches of accessibility norms and standards, and the lack of monitoring mechanisms at the State level to ensure the effective implementation of such norms and standards. Accordingly, the Committee asked the State Party to take adequate remedial measures, including by “adopting a time-bound accessibility strategy and plan of action and ensure their implementation and monitoring in close consultation with persons with disabilities through their representative organisations.”

During the latest reporting round in 2016, the European Committee of Social Rights noted that since the Armenian authorities failed to submit sufficient information on whether persons with disabilities had effective access to communication and media services, to different means of transport and to housing, the situation in Armenia was not in conformity with Article 15§3 of the Charter.[[72]](#footnote-73) In one of the very few disability-related cases against Armenia in Strasbourg, *Shamoyan v Armenia*, the European Court of Human Rights found a violation of the right to a fair trial under Article 6 of the European Convention on Human Rights on account of barriers restricting the access to justice of an indigent wheelchair user who initiated proceedings against a neighbour aimed at obtaining permission to build an access ramp to facilitate entrance to the multiple occupancy house where they both lived.[[73]](#footnote-74)

Although different pieces of legislation specify that newly built or renovated infrastructure should comply with accessibility standards,[[74]](#footnote-75) the lack of accessibility is widespread in Armenia. The situation is comparatively better in Yerevan, where major construction work has taken place over the past several years.[[75]](#footnote-76) The authorities tried to ensure that new construction work took into account the needs of persons with disabilities, with mixed results. Some public transport in Yerevan is now accessible. The authorities mostly focus on ramps to the detriment of other features that have to be accessible, including access to upper floors or toilets. As a result, many of the newly built government buildings have a ramp at the entrance, but are mostly inaccessible for the rest. Some recently fitted ramps are unusable, not complying with the requisite construction standards.[[76]](#footnote-77)

Major cultural, sports leisure and recreation venues, as well as many governmental buildings remain inaccessible to persons with disabilities. Most public facilities such as schools or universities[[77]](#footnote-78) or even those used predominantly by persons with disabilities such as residential institutions are widely inaccessible. In the case of educational facilities, lack of accessibility hinders the implementation of ambitious reform plans. Inaccessible polling station during elections results in the disenfranchisement of persons with disabilities, hindering their ability to participate in public life. There is a dearth of accessible parking bays for persons with disabilities. Prisons are mostly inaccessible. The level of accessibility for people with sensory disabilities is even lower, including with respect to access to information from public media or the Internet. Accessibility levels are lower in the outer districts of Yerevan as well as outside Yerevan. Interregional public transport remains mostly inaccessible.

The Comprehensive programme on the social inclusion of persons with disabilities 2017-2021 contains a range of actions pertaining to accessibility, including modernising and revising the urban development norms, assessing current levels of accessibility, monitoring compliance with construction standards, improving accessibility of public transport and access to information. Construction standards only cover the needs of persons with physical disabilities, and not of those with intellection and psychological disabilities.The authorities do not monitor the level of compliance with accessibility standards and no sanctions are available for lack of compliance. The result is that a lot of new infrastructure is being built that is inaccessible without fear of any repercussions. Armenia lacks a comprehensive plan to gradually improve the accessibility of facilities and services open to the public, with adequate benchmarks and sufficient funding.

1. **Right to live independently**

Article 19 of the CRPD recognises the right of persons with disabilities to live independently and be included in the community, with choices equal to others. Community living is instrumental to achieving “full and effective participation and inclusion in society,” one of the principles that the CRPD is based on (Article 3). The right to live in the community requires States Parties to “take effective and appropriate measures to facilitate full enjoyment by persons with disabilities of this right and their full inclusion and participation in the community.” Article 19 identifies three essential components of independent living: persons with disabilities should be able to choose their place of residence and where and with whom to live; they should have access to a range of in-home, residential and other community support services, including personal assistance; and they should have access to mainstream community services and facilities.[[78]](#footnote-79) Article 19 is closely connected with other Articles of the CRPD, such as the right to equal recognition before the law, which bans any interference with legal capacity and requires that persons with disabilities be provided with the support they need with decision-making, as well as with Article 28 on the right to an adequate standard of living and social protection.

The right to live independently is incompatible with practices such as abandonment, institutionalisation and isolation within the community. It bans forced institutionalisation and requires a shift from segregated institutional living arrangements to living in the community and taking control over one’s life. States Parties are required to adopt adequately funded strategies for deinstitutionalisation with clear time frames and benchmarks, in cooperation with organisations of persons with disabilities.[[79]](#footnote-80)

The implementation of the right to live independently raises particular challenges in the case of children with disabilities, often subject to early institutionalisation in the absence of support services in the community and because of poverty. According to Article 9 of the Convention on the Rights of the Child, children (including those with disabilities) have a right not to be separated from their parents unless it is necessary for the best interest of the child. Article 23§1 provides that all children with disabilities should enjoy a life in dignity with conditions that promote self-reliance and facilitates active participation in the community. The Committee on the Rights of the Child expressed its concern at the high number of children with disabilities placed in institutions and urged States Parties to set up de-institutionalisation programmes for children with disabilities.[[80]](#footnote-81) Article 25 of the CRPD bans the separation of children from their parents on the basis of disability and requires State Parties to “prevent concealment, abandonment, neglect and segregation of children with disabilities.” In order to achieve these goals, States Parties should “undertake every effort to provide alternative care with the wider family, and failing that, within the community in a family setting” in case the immediate family is unable to care for a child with disabilities, and “provide early and comprehensive information, services and support to children with disabilities and their families.”

In Europe, Article 15 of the revised European Social Charter requires States Parties to take measures “with a view to ensuring to persons with disabilities, irrespective of age and the nature and origin of their disabilities, the effective exercise of the right to independence, social integration and participation in the life of the community” Article 15§3 in particular requires positive action aimed at realising these goals, in fields such as housing, transport, telecommunications, cultural and leisure facilities. The Committee clarified that these measure “must not be pursued in isolation and should be programmed to complement each other, on a clear legislative basis.”[[81]](#footnote-82) In 2012, the Council of Europe Commissioner for Human Rights published an issue paper on the right of people with disabilities to live independently and be included in the community, analysing the normative contents of the right to live in the community and providing a roadmap for its correct implementation.[[82]](#footnote-83)

In its concluding observations on Armenia, the UN CRPD Committee expressed concern about the slow pace of the deinstitutionalisation process, about the large number of children and adults with disabilities still living in residential institutions and about the very limited support to enable them to live independently within the community.[[83]](#footnote-84) Accordingly, the Committee recommended that Armenia expedite the deinstitutionalisation process, including by closing down the remaining institutions, and that support services be developed, including personal assistance to facilitate independent living. In relation to Article 23, the Committee expressed concern about the lack of services for families that have members with disabilities, and called on the Armenian authorities to take the necessary remedial measures, including by ensuring access to personal assistance and mainstream services.[[84]](#footnote-85) The Committee also drew attention to the situation of children with disabilities, in particular the high rate of institutionalisation, the lack of state support, including early intervention, the high poverty rate, the insufficiency of measures to encourage adoption, the neglect, violence and abuse, and the stigmatising attitudes against them.[[85]](#footnote-86)In its latest concluding observations on Armenia, the Committee on the Rights of the Child drew attention to the high numbers of children with disabilities in institutionsand who remained institutionalised into adulthood, due to the lack of family support and alternative family and community based care options, adequate care and services, especially detention and rehabilitation services.[[86]](#footnote-87)

Armenia does not currently have in place modern legislation on the provision of community based services, which are quite scarce and concentrated in larger urban centres. Most existing community-based services are provided by NGOs and therefore subject to the vagaries of available funding.[[87]](#footnote-88) As of 2014, approximately one thousand adults with disabilities were living in long-stay institutions.[[88]](#footnote-89)

A survey carried out in 2012[[89]](#footnote-90) concluded that:

* 5% of boys and 7% of girls with disabilities never leave home or leave only to visita doctor;
* 12% of children with disabilities do not have any friends; children with intellectual and combined disabilities are the loneliest – 1 in 5 (20%) do not have friends, whereas only half have any friends among children in their neighborhood
* 1 in 3 children with disabilities (33%) do not take part in community events (weddings, event celebrations, etc.); children with intellectual and combined disabilities are the most excluded – approximately half of them do not participate in such events;
* 8% of children with disabilities attend a daycare center; 11% receive services from NGOs.

The vast majority of children with disabilities housed in orphanages, residential special schools or night boarding institutions have at least one living parent. Although these institutions provide different living arrangements, they share in common the fact that children live long periods of time or permanently far from their families, resulting in emotional hardship and developmental delays. Children living in institutions do not acquire the skills required to live independently in the community, suffering potentially a loss of opportunities or even lifelong institutionalisation. In addition, there are very few community-based services to support the process of transition from orphanages to community living, and those that exist are mostly run by NGOs.[[90]](#footnote-91) The authorities’ informal practice of fully depriving all persons with intellectual and psychosocial disabilities of legal capacity upon reaching adulthood contravenes the right to live independently.

Residential care institutions serve as the location where most public social services are provided, meaning that most children are placed there due to difficult circumstances in their family or community (poverty, unemployment, inadequate shelter, parents’ health problems, disability in the family, single parenthood, and other issues).[[91]](#footnote-92) In addition, disability allowances and other benefits are not sufficient to cover the basic living requirements of families of children with disabilities.[[92]](#footnote-93)

The concentration of services in the institutions and the corresponding lack of services in the community serve to reinforce the process of institutionalisation. Although the Government is implementing a deinstitutionalisation programme, this does not benefit institutions where children with disabilities are housed. Alternatives to institutionalisation such as foster care or adoption are insufficiently developed.[[93]](#footnote-94)

Research undertaken in Armenia identified significant differences between the treatment of girls and boys with disabilities, with differences most prevalent in regional towns.[[94]](#footnote-95) Boys received more visits from family members (23 percent of the boys were visited by their parents once a week or month vs. 15 percent of girls), and boys visited home more frequently than girls (among the 10 percent of children who spend holidays at home, roughly 2/3 were boys and 1/3 were girls). Girls with disabilities were consistently more likely than boys to be out of school and were more likely to be taken to orphanages.

1. **Right to health**

The UN CRPD requires that States Parties “take all appropriate measures to ensure access for persons with disabilities to health services that are gender-sensitive, including health-related rehabilitation.” Notably, the CRPD establishes that disability is not necessarily a medical condition, while medical care related to their disabilities should not be presumed to be the primary need of persons with disabilities in terms of health care.[[95]](#footnote-96)Notably, Article 25 has specific provisions on informed consent, sexual and reproductive health, quality health care and specialised services, training of health professionals, which constitute different aspects of equal access to health care that States Parties should pay particular attention to. Article 25 on the right to health should be read in conjunction with other related provisions including those on habilitation and rehabilitation (Article 26), accessibility (Article 9) or independent living (Article 19).

The CRPD Committee expressed concern in relation to the lack of awareness among Armenian medical professionals of the rights of persons with disabilities; the fact that health-care services and facilities, including emergency services and HIV/AIDS prevention, treatment, care and support programmes, remain inaccessible and unavailable to many persons with disabilities; the lack of accessibility of medical services and facilities for women with disabilities, particularly in the area of sexual and reproductive health and asked the Armenian authorities to adopt adequate remedial measures.[[96]](#footnote-97)Under Article 26, the CRPD Committee asked the State Party to create accessible, comprehensive habilitation and rehabilitation services and programmes, such as early intervention, providing comprehensive, multidisciplinary and individualised support for persons with disabilities, especially women and children.[[97]](#footnote-98)

The Committee on the Elimination of Discrimination against Women also highlighted the issue of the women’s limited access to basic health-care services and sexual and reproductive health services, including modern contraceptives, and to the treatment of cancer of reproductive organs.[[98]](#footnote-99)

Notably, the Armenian Human Rights Defenderalso highlighted the lack of accessibility of health facilities, particularly in rural areas, and thelack of training among health professionals on working with persons with disabilities in its Annual Report for 2016.

Several pieces of legislation contain provisions pertaining to the right to health in the context of disability. The Comprehensiveprogramme on social inclusion of persons with disabilities 2017-2021 has actions aimed at improving the quality of rehabilitation procedures, training the medical professionals working with persons with disabilities, providing free medicine and improving the accessibility of medical facilities. The Plan of Actions for the National Strategy on Human Rights Protection 2014 includes severalrelevant provisions such as preserving and improving mental health (action 73) or organising the medical assistance and services to persons with disabilities (action 75).[[99]](#footnote-100) According to the Law on Medicines, persons with disabilities enjoy the right to have access to privileged and free medications.

Women with disabilities suffer particular disadvantage when seeking access to sexual and reproductive health services, particularly if they live in rural areas. An inquiry carried out in 2014 established that health workers do not have guidelines on how to deal with women with disabilities seeking abortion or post-abortion care, information on these procedures is not available in accessible formats, and that health care provision is often undermined by stereotypes and prejudice.[[100]](#footnote-101)Women with disabilities are also discriminatedwhen giving birth, in that they do not receive assistance on an equal basis with others, partially because of a lack of specialist skills among medical professionals. The state does not collect any information on pregnant women with disabilities and does not develop any programs to improve this area of health care.

Several non-governmental organisations reported evidence of a particularly alarming practice involving parents of children with disabilities who are given advice to abandon their children in state care upon birth. Human Rights Watch documented one such case of two parents who had a child diagnosed with Down syndrome.[[101]](#footnote-102) Shortly after birth, the parents agreed to leave their child in state care, upon advice from their family doctor, who told them that the child was seriously ill and only had several days to live. Six years later, the parents were surprised to find their child had not died and that in fact she lived in an orphanage. The family was reunited. Once she was at home, the child made great progress in terms of her physical development.

Persons with disabilities experience difficulties in accessing health care and medicines that the state has committed to provide free of charge or at a heavily discounted price. Thus, the process of accessing specific health care such as laboratory investigations or care that involves modern technologies is extremely arduous, while at the same patients are often charged unofficial fees in contravention of the law. Furthermore, the state offers relatively limited rehabilitation services and programmes, while information about services provided by non-governmental organisations is often unavailable. Individual rehabilitation programs are often limited to a process of allocating assistive equipment and technology.[[102]](#footnote-103) However, the supply of wheelchairs for example is often inadequate, with many persons with disabilities having to rely on non-governmental organisation-run repair shops for refurbished second hand wheelchairs.

Psychiatric care is concentrated in closed establishments, or otherwise available only in Yerevan.[[103]](#footnote-104)Outside Yerevan, there are no meaningful community-based psychiatric services. Psychiatric services lack a steady supply of good quality medication, which should theoretically be provided free of charge. This is a source of concern, particularly as there is an overreliance on medication in psychiatric establishments. Persons with psychosocial disabilities are not adequately informed about their health condition, diagnosis, the medical interventions proposed and the effects of treatment. Psychiatric hospitals experience high patient mortality rates due to inadequate somatic treatment and care.

1. **Recommendations**

*International law*

* Urgently ratify the Optional Protocols to the Convention on Human Rights of Persons with Disabilities, the Convention on the Rights of the Child and the International Covenant to Economic Social and Cultural Rights, as well as the Additional Protocol to the European Social Charter Providing for a System of Collective Complaints;
* Ensure that the Draft Law of the Republic of Armenia on Social inclusion and Protection of Rights of Persons with Disabilitiesis fully in compliance with the CRPD and expedite its adoption procedure, as foreseen in the Comprehensive Programme 2017-2012;
* Ensure that the ComprehensiveProgramme on the social inclusion of PWDs for 2017-2021 has strong monitoring and evaluation components if necessary by revising it and proceed to monitor and evaluate the implementation of the actions set out therein;

*General principles*

* Review national legislation with a view to ensuring it is fully compliant with the social model of disability, in particular the definition of disability in various pieces of legislation;
* Expedite the process of adopting comprehensive anti-discrimination legislation that covers disability as a prohibited ground and including notions such as ‘reasonable accommodation’ and ‘multiple discrimination’ in line with the UN CRPD and European human rights standards;
* Provide legal professionals and public servants with training on national and international standards in the area of equality and non-discrimination in relation to disability;
* Ensure that persons with disabilities in all their diversity are actively and fully involved in all governmental decision-making that concerns them;
* Develop adequate processes for collecting relevant and comprehensive data on the enjoyment of social rights by persons with disabilities;
* Establish a monitoring mechanism in line with Art. 33§2 of the CRPD and ensure it is adequately resourced to fulfil its mission;
* Ensure that the focal points and mechanisms of coordination function effectively and in line with Article 33§1 of the CRPD;

*Social Assistance*

* Ensure that social protection programmes cover the basic costs of living of persons with disabilities as well as additional disability-related costs;
* Continue the process of reform aimed at establishing integrated social services and ensure it covers all territory of Armenia by its expected finishing date in 2019;
* Ensure all newly built housing, and in particular social housing, is accessible and plan for improving the accessibility of existing housing stock;
* Establish a social housing system in Armenia and ensure that persons with disabilities are included among its beneficiaries;
* Develop the social rental housing sector;
* Introduce a housing allowance for those who cannot afford to secure housing on the open market;
* Coordinate interventions in the areas of housing, employment, social security and health care;

*Education*

* Continue the process of reform of the system of education in order to ensure equal access for children with disabilities;
* Ensure maximum inclusion for all children with disabilities including children with high support needs, or children currently studying at home;
* Ensure each child receives individualized support, including reasonable accommodations, assistive devices, teaching assistants and other professionals or adapted curricula and assessment tools;
* Ensure children receive support outside school, including transportation or after school clubs, so that parents do not have to give up their jobs to provide support;
* Ensure quality training, specialised educators and staff;
* Ensure kindergartens become inclusive environments for children with disabilities;

*Work*

* Evaluate the design, implementation and impact of existing incentives aimed at encouraging employment among persons with disabilities, including reserved employment schemes, partial compensation of salaries, tax exemptions or vocational education, with a view to ascertaining whether the existing legal and policy framework needs improvement or adjustment to achieve its objectives;
* Adopt additional measuresto encourage employment among persons with disabilities in the public sector;
* Integrate a gender perspective in all programs aimed at promoting employment among persons with disabilities;

*Accessibility*

* Adopt a comprehensive strategyfor ensuring full accessibility, with clear benchmarks, sufficient funding and robust monitoring procedures;
* Ensure that standards and norms are adopted that apply to all public infrastructure, information and communications and all other goods and services intended for public use;
* enforce existing norms and legislation robustly, including by applying sanctions where new and inaccessible infrastructure is being built or renovated;

*Independent living*

* Develop strategies and action plans on deinstitutionalisation that cover all children and adults with disabilities without discrimination;
* Develop a range of services in the community, such as early intervention and other preventive services, foster care, family support services, personal assistance, supported living, supported employment, inclusive education, and personal budgets;
* Develop individual plans for deinstitutionalisation and provide support and provide individuals and communities with support during transition;

*Health*

* provide health professionals with training on working with persons with disabilities and adopt ethical guidelines, or include provisions on ethical behaviour of health professionals in the existing codes ofethics;
* improve the availability and accessibility of health care services and facilities for all persons with disabilities throughout the country, including on matters of sexual and reproductive health as well as in residential institutions and psychiatric hospitals
* create accessible, comprehensive habilitation and rehabilitation services and programmes;
* ensure a steady and free of charge supply of good quality medication without any discrimination or abuse;
* to ensure that women with disabilities benefit from legal protection against discrimination, particularly in the area of sexual and reproductive rights

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