

**THE PROTECTION OF THE RIGHTS OF PEOPLE WITH DISABILITIES  
DURING THE COVID-19 PANDEMIC RESTRICTIONS IN ARMENIA**

**Research report**

**Table of contents**

List of acronyms.....	2
Research background .....	3
Research goal .....	3
Research method and sampling.....	4
<b>RESEARCH RESULTS.....</b>	<b>5</b>
Changes in CSO activities caused by COVID-19 pandemic .....	5
Changes in CSO activities caused by 44-day Artsakh war .....	6
The problems that PWDs faced due to the pandemic .....	8
State support for the PWDs during the pandemic .....	9
Protection of PWDs living in institutions during the pandemic.....	12
Assistance for PWDs provided by NGOs .....	12
Availability of COVID-19 treatment for PWDs .....	13
Provision of services delegated by the state .....	14
Access to information during the pandemic.....	15
Freedom of speech during the pandemic.....	18
Freedom of associations during the pandemic .....	19
Civic participation issues during the pandemic.....	20
Non-discrimination and inclusion issues during the pandemic.....	21
Protection of CWDs during the pandemic .....	22
Human rights and rule of law during the pandemic .....	23
<b>CONCLUSIONS .....</b>	<b>26</b>
<b>RECOMMENDATIONS .....</b>	<b>28</b>

### List of acronyms

AMD	Armenian Dram
BOH	Bridge of Hope
CSO	Civil Society Organization
CWD	Children with disabilities
DPO	Disabled people organization
MOLSI	Ministry of Labor and Social Issues
NC	National Commission dealing with issues of PWDs
NGO	Non-governmental organization
PWD	People with disabilities
SEN	Special educational needs
UN	United Nations
WHO	World Health Organization

## Research background

PWDs are one of the most excluded groups in the Armenian society. The WHO and various other UN agencies report that people with disabilities are being disproportionately affected by COVID-19 globally<sup>1</sup>. Following the COVID-19 sudden outbreak, a State of Emergency was announced in Armenia in March 2020. It resulted in huge changes on all the levels of political, economic, social, and everyday life in the country. Health institutions were heavily overloaded with infected people, the economics of the country suffered greatly from the unexpected challenges, many people stayed at home without income opportunities, movement restrictions and other distancing measures were introduced, and the government took strong control over the information concerning the situation.

Vulnerable groups including PWDs were - and still are - seriously affected by these changes and restrictions. CSO capacity to speak on their behalf was also impeded by the restrictions and new COVID & post-COVID realities. Armenian disability-rights civil society actors experienced shrinking civic space as well as human rights violations and restrictions as a consequence of the COVID-19 crisis.

The global crisis of COVID-19 has exacerbated existing inequalities and discriminatory attitudes towards PWDs. The situation became more threatening in Armenia because of the 44-day Artsakh war outbreak in September 2020, which resulted in huge human and territorial losses, humanitarian and social crisis. Thousands of young people got wounded during the war and became disabled.

## Research goal

Bridge of Hope NGO has initiated a study to find out to what extent the opportunities and scope of activities of CSOs dealing with the rights of PWDs have been limited, how effectively they have been able to protect their beneficiaries' (persons with disabilities, their families) rights during the pandemic and in times of crisis. The goal of the study is to understand the CSO limitations and violation of PWDs' rights caused by changes and restrictions provoked by COVID-19 pandemic and governmental measures to control it. The research will bring to the surface instances of human rights violations suffered by PWDs in Armenia during COVID-19, during the 44-day war in Artsakh, as well as the further shrinking of civil society space.

The research results will help Armenia become more knowledgeable concerning the provision of disability-inclusive responses adapted to situations of risk and emergencies. CSOs will become better equipped to report and respond to the issues related to disability and human rights violations.

The recommendations developed based on the research results will help to enable capacity development of Armenian disability-right civil society actors, strengthening the capacities of CSOs in studying and addressing the impact of restrictions imposed during COVID-19 on PWDs and the violations of the rights of CWDs and PWDs during the crisis and contribute to the protection of the PWD's rights.

---

<sup>1</sup> [https://www.who.int/docs/default-source/inaugural-who-partners-forum/english-covid-19-disability-briefing.pdf?sfvrsn=8a1aa727\\_1&download=true](https://www.who.int/docs/default-source/inaugural-who-partners-forum/english-covid-19-disability-briefing.pdf?sfvrsn=8a1aa727_1&download=true) & [https://www.ohchr.org/Documents/Issues/Disability/COVID-19\\_and\\_The\\_Rights\\_of\\_Persons\\_with\\_Disabilities.pdf](https://www.ohchr.org/Documents/Issues/Disability/COVID-19_and_The_Rights_of_Persons_with_Disabilities.pdf)

## Research method and sampling

**Semi-structured interview** method was chosen as the best matching to answer the research questions. The questionnaire included both open-ended and closed ended questions, which provided sufficient qualitative information and additional quantitative data. The representatives of 9 Armenian NGOs (5 of them are DPOs) working with PWDs were interviewed as having experience and expertise in facing and dealing with COVID and post-COVID realities and violations of the rights of their PWD beneficiaries during the pandemic. 6 out of 9 CSOs are located in Yerevan city, the other 3 – in Kotayk, Lori and Armavir marzes.

3 out of the 9 respondents are male.

The representatives of the following NGOs were interviewed during July 2021:

1. Skarp DPO
2. Echo DPO
3. Unison DPO
4. We can DPO
5. Spitak Baze DPO
6. Teach me more NGO
7. Equal opportunities and inclusion NGO
8. Huysi Metsamor NGO
9. Bridge of Hope NGO

## RESEARCH RESULTS

### Changes in CSO activities caused by COVID-19 pandemic

The activities of all the organizations were affected by the COVID-19 restrictions. All the NGOs working with PWDs in Armenia were affected as well. At the first stage, when the State of Emergency was announced in Armenia, the activities of all the NGOs decreased. Those providing the face-to-face services to their beneficiaries tried to resist the restrictions and continue to provide the services for their beneficiaries, but it was no more possible during the lockdown **March-August 2020**. The lockdown was more troublesome for those NGOs that provide therapeutic and rehabilitation services for PWDs, because the therapy and rehabilitation are continuous processes and any interruption may harm the process. Furthermore, the CSOs were deprived of opportunities to meet with government officials, NGO representatives, other key stakeholders, which also limited their participation to the decision-making process.

*“We launched a big project in February 2020. A wide range of service provision for CWDs, especially those with mental health problems, should had started in March 2020. But it had to be postponed because of the lockdown. So, we redesigned our project completely. Our donors gave us that opportunity and told us what could be changed. If we did not have that opportunity, we would simply stop the program because service provision would be impossible. The new project design brought new challenges. Our beneficiaries with behavioral problems could not sit in the same position for a long time and stay focused on the work with a specialist. So, we switched to individual online work. Using Zoom was also very difficult. Not all children knew how to operate a computer, not all of them even had computers, using smartphones would be even more difficult. But the CWDs had the help of their parents. We worked from 9 am 10-11 pm. Our team had to agree to this kind of work schedule, as there were no other options. The CWDs were all talking together, tripling the workload of our employees. We all believed that we should always be by the side of our children. Essentially, we were planning to organize a summer school for 70-75 children, but since we redesigned the whole program and switched to individual classes, only 40-43 children out of the 75 participated the project. And that was a serious problem for us in terms of program goals.” (We can DPO)*

*“We deal with health issues and rehabilitation. There is direct contact with the beneficiaries. During quarantine we continued to work with our beneficiaries, who attend our gym, but we were very passive. Our gym is open 4 times a week. We included very few people, followed the safety rules. A maximum of 2 people were training simultaneously at the gym. Since all the public institutions were closed, we tried to be open to those who were in a great need of rehabilitation with very little staff, very carefully following WHO’s recommendations on distancing and disinfection. The rehabilitation must not be interrupted. If beneficiaries miss some exercises, they can face a lot of problems. No one was infected, because we were following the hygienic rules.” (Skarp DPO)*

*“Our daycare center paused its activities during the quarantine. But we were doing home visits. Our programs need face-to-face communications. We can’t do therapy online. At first, we had some difficulties, then we tried to bring the children to the center and follow the COVID-19 prescriptions, keeping distance. We came back to the office in summer 2020. This gap badly affected the effectivity of our work and the outcomes for our beneficiaries. Our work was very inefficient.” (Huysi Metsamor NGO)*

*“Pandemic had a negative impact on the quantity and quality of our services and decision making. We tried to resist until it was strictly forbidden to organize offline events. Then we switched to the long-distance mode. The long-distance mode does not provide the opportunity for live communication with beneficiaries. Zoom platform cannot be considered as effective as live communication when you can assert your point of view. We were facing a very major setback.” (Unison DPO)*

*“The emergency situation and the pandemic were unexpected for everyone, everything was very vague, messy and unclear. Everyone went through that process in their own way.” (Echo DPO)*

*“When the quarantine was announced, we worked from home for 20 days. After that we realized that it would not be possible to work from home anymore, social workers should have direct contact with the beneficiaries. It was difficult for the organization because of financial and organizational issues. The organization had to pay for the taxis the employees took, because public transport was not working. It took about 2-2.5 months.” (Echo DPO)*

*“NGOs did not receive any support from the state, although our activities are aimed at state support. We did not even apply during COVID-19, because there was no regulation.” (We can DPO)*

The CSO employees also faced a lot of problems. Among those are:

- Problems with transportation to fulfill their work duties,
- Problems with wearing masks and breathing difficulties because of it,
- No support was introduced for the NGO employees, they were not included in the government “furlough” compensation provisions, they did not get any state support or tax benefits during the pandemic like the employees of private and state organizations did,
- Frustration because of missing offline activities and events.

In some cases, the changes in NGO activities, especially of DPOs, which are managed by PWDs, were caused by the personal illnesses and health consequences of COVID-19 infection.

*“Half of our employees got infected with COVID-19.” (Echo DPO)*

In common the quarantine and COVID-19 restrictions have had a negative impact on the activities, quality and quantity of the services and the participation in the decision-making processes. Consequently, the employees and the beneficiaries of the CSOs were affected.

### **Changes in CSO activities caused by 44-day Artsakh war**

CSOs operating in Armenia faced new challenges in September 2020 because of the outbreak of the 44-day Artsakh war. It multiplied the difficulties caused by the pandemic putting additional economic pressure on CSOs. Thousands of people were wounded and injured during the war. The number of PWDs increased. Unfortunately, no official data on people injured during the war and those who got newly disabled is available as of writing. The CSOs had to reorganize quickly to support different groups with a new vulnerability status: displaced persons and families from Artsakh, PWDs from Artsakh, soldiers who were injured and gotten disabilities during the Artsakh war, and those in need of therapy and rehabilitation. CSOs did not have any specific services and resources for these groups of people before.

In some cases the fathers of CWDs were drafted into the army during the war. That made the families more vulnerable. There is a need for revision of legislative regulations.

*“A single father of two children, one of them CWD, was drafted into the army. He said that he has CWD under his care, but nothing helped.” (We can DPO)*

The new vulnerable groups are in place because of the war. The proportion of people who need psychological help and support has seen an extreme increase. The emigrants from Artsakh have different needs. For example, some of them have professions, but they don't have equipment to be able to work. The soldiers injured during the war get very limited support from the state, they cannot return to their regular life yet.

*“We had the occupational training program for mothers of CWDs. It was emotionally very hard, because their husbands were in the war. We continued trainings to let those women come out of their homes and be busy with something, get a new profession. The risks of bombing were in place, but no shelters were available in our neighborhood. Anyway, we continued to work with 14 women.” (We can DPO)*

*“During the 44-day war our NGO was self-organized. We have enrolled families from Artsakh in our programs. There are a lot of evacuees in Metsamor. They are still here. They live in a hotel building and in different apartments. We were not ready for that kind of work. That was also emotionally difficult. We cooperated with the regional administration, local self-government bodies, included the children in our groups, other organizations applied to us, other support was also in place. We have organized group and camp work. There were vulnerable families among Artsakh families, children with disabilities, families related to loss. All of them need serious psychological support. That's why we found the people, and referred to the organizations that could help them. There were also people in need of wheelchairs and assistive equipment, there were pension issues for children and adults. We tried to work operatively with ministries, initiative groups and NGOs to support them.” (Huysi Metsamor NGO)*

*“We have soldiers, who have got disabled after the war. Our specialist visited 113 soldiers at their homes, we conducted need assessment and registered their problems.” (Huysi Metsamor NGO)*

*“Now we don't work with people injured during Artsakh war. Only after the treatment process soldiers will come to our organization for rehabilitation.” (Skarp DPO)*

The number of calls and applications to the CSOs has increased during and after the war. CSOs provided informational support for them and instructed on how and where they can apply to address their needs. In some cases, the applicants were referred to other specialists and organizations, which could be more useful on that stage.

CSOs needed to find resources, to review and/or redesign their services, to establish new services to redirect funds and services to support new beneficiaries. Skarp DPO has mapped the shelters during the war. There are no facilities and adjustments made for people with wheelchairs in the shelters and at the entrances.

Some cases of positive discrimination were mentioned by the interviewees during the research. Those are tending to stress the importance of the PWDs, who were injured during the 44-day war in Artsakh. For example: Yerevan Municipality announced that elevators should be installed in the

buildings where the wounded soldiers live at first. This was not considered as necessary and helpful measure by the PWD community.

*“That is kind of positive discrimination, but very unpleasant. The rights of the parent, who carries the child on his hands for 15 years, were ignored in order to respect the soldiers.”  
(Echo DPO)*

### **The problems that PWDs faced due to the pandemic**

PWDs have suffered more than other citizens because of the pandemic and war crises, because they were under the highest risk. Family members of PWDs have different contacts and it is practically impossible to stay isolated and prevent infection. PWDs face more difficulties to adapt to new situations: wearing a mask, disinfecting etc. Many of them have concerns about vaccination. On one hand they are **more at risk of getting infected**. On the other hand, since the outbreak of COVID-19 **PWDs face even more isolation than before**.

The most vulnerable groups among PWDs and their specific needs during the pandemic were also identified by the respondents.

In the case of **wheelchair users**, the mandatory wearing of gloves and masks, made everything much more difficult for them, because the wheelchairs are hand-held and it is practically impossible to drive them in gloves and in mask, because it requires as much effort as doing sports. No individual and need-oriented approach were exercised by the government to meet their needs.

**PWDs, who live alone**, were also identified as a high risk group. They could not use transport during the quarantine, shops and any other services were closed.

**CWDs** were strongly affected because of the switching of the educational services to the on-line mode. They were also deprived from day-care services provided by different organizations, communication was achieved online and mostly with parents, not with the CWDs themselves. The online lessons were very problematic for some of the CWDs. Especially for those with visual or hearing impairments, or other disabilities that make it difficult or impossible to look at a screen for a long time. For example: using the Zoom platform was impossible for them. Children with behavioral problems, PC or smartphone addictions, were getting therapy before the pandemic. The online education crippled the therapeutic work.

*“We stayed at home for 1,5 months, that affected our beneficiaries (children with autism) very much, they didn’t get therapy, and didn’t attend the lessons. Usually, we limit their access to computers, because they have communication problems. Because of online classes they have lost the skills that they have already developed before the quarantine.”  
(Teach me more NGO)*

For **PWDs with hearing impairments**, who practice lip reading, understand speech by visually interpreting the movements of the lips, face and tongue, should have been made exceptions for in the regulations concerning wearing masks. They were deprived of communication, because other people wear masks.

PwDs already faced major access barriers to healthcare, education, income and employment, and social support schemes. The management of the COVID-19 crisis is further exacerbating these challenges. The following restrictions introduced by the state as protective measures during the

pandemic affected different spheres of PWDs' lives and made it more challenging during the pandemic.

Respondents report that the PWDs experienced serious **financial problems because of the lockdown**.

**Rehabilitation centers were closed** and PWDs didn't get the rehabilitation services needed or they were postponed, which in some cases was unacceptable and strongly affected the health and rehabilitation process of PWDs.

**Scheduled surgeries were canceled**, which was also vital in some cases.

PWDs faced problems, when **public transportation was banned**, because they stayed isolated in their communities and couldn't reach out to any services they needed.

The **legal vocabulary** used by the media during the pandemic was not clear for the people and especially for the PWDs. It was not clearly explained.

### **State support for the PWDs during the pandemic**

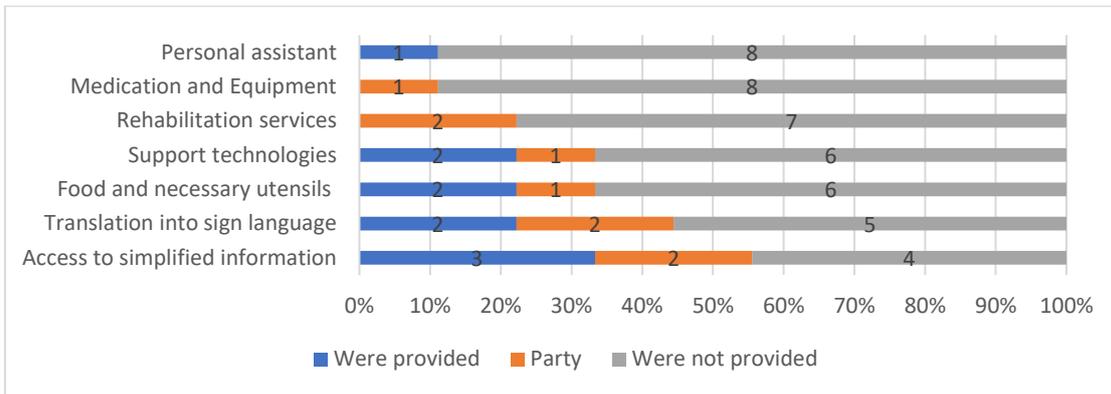
The Government of RA introduced 22 measures tending to neutralize the social sequences of the corona virus. None of those measures was targeting the PWDs. No special programs for PWDs were introduced during the pandemic either.

Most of the CSO representatives report that the availability of the different means of assistance for PWDs was not provided during the quarantine and the pandemic in Armenia. Medication and equipment, rehabilitation services were not provided at all. One respondent reported that personal assistants were provided, the other 8 have had a different experience – no personal assistants were available.

*“The family of a child with autism was infected, the father was taken to Aparan, and the mother had to be taken to the hospital too. She did not know where to leave her child. The state should provide support in such cases.” (We can DPO)*

The availability of support technologies, food and necessary utensils, translation into sign language and access to simplified information was provided to some extent (*See Diagram 1.*).

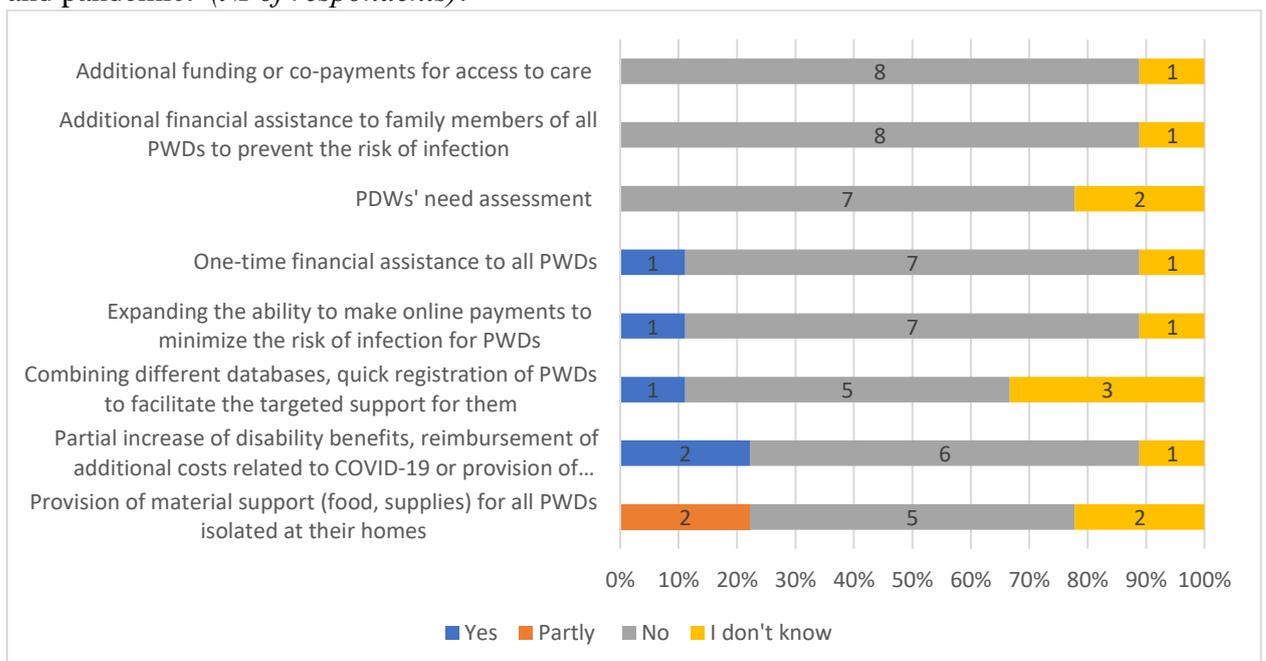
**Diagram 1.** The availability of the assistance for PWDs during the quarantine and pandemic (*N<sup>o</sup> of respondents*).



CSO representatives report very few social protection measures that were introduced by the government of RA to support PWDs since the outbreak of COVID-19. No additional funding or co-payment mechanisms were introduced for access to care. No additional financial assistance was provided for the PWD’s family members to prevent the risk of infection. No need assessment of PWDs was made. Lack of disaggregated data on disability is an obstacle to fully comprehend the magnitude of the outbreak’s impact and undervalues the life experiences and contributions of PWDs to the community.

One respondent reports that one-time financial assistance was provided for all PWDs by the state. One more respondent reports that the availability of online payments was expanded to prevent the risk of infection. Another respondent reports that different databases were combined and quick registration of PWDs was provided to facilitate the targeted support. 2 respondents report the partial increase of disability benefits and reimbursement of additional costs related to COVID-19. And 2 respondents report that the material support (food and utensils) for PWDs was provided by the state in cases when they applied to the state or claimed (*See Diagram 2.*).

**Diagram 2.** The social protection measures introduced by the government of RA to support PWDs since the outbreak of COVID-19/ availability of the assistance for PWDs during the quarantine and pandemic. (*Nº of respondents*).



Some of the respondents stressed that PWDs were deprived of additional state financial support during the pandemic, because they receive the state pension, which is considered support.

According to the RA law about State Pensions "a person entitled to various pensions financed from the state budget has the right to receive one pension of his choice"<sup>2</sup>. Thus, the PWDs decided to get their regular pension from the state and no additional state assistance was provided by the state to support PWDs during the pandemic.

5 out of 9 respondents report that RA government has not taken any measures to protect the lives, health and safety of **PWDs living in the community**. 3 respondents report that some, but not sufficient measures were taken by the government in this respect. And one respondent is not aware if the government has taken any measures.

*"Some masks and gloves were provided by the state." (Huysi Metsamor NGO)*

*"Government has done even less for the PWDs living in the community than for those living in institutions." (Unison DPO)*

*"If the PWDs called the hotline, they could get some support, but if the person could not call the hotline, they would not get anything." (Echo DPO)*

4 out of 9 respondents report that no **protective equipment was provided for PWDs** or certain groups of PWDs (face masks, gloves, disinfectants, disinfection of entrance doors, ramps or handrails, etc.) in their communities. 4 other respondents report that in their communities the protective equipment was provided for PWDs to some extent. And only one respondent has mentioned that significant protective equipment was provided for PWDs in their community.

*"Everything was disinfected at the school that my son attends. The school ramps were disinfected, children got masks twice a day. But I do not know about other places." (We can DPO)*

6 out of the 9 respondents report that no measures to protect the lives, health and safety of **PWD living in remote rural communities** were introduced by the government. One respondent answered that certain but not sufficient measures were taken. And 2 respondents are not aware of any measures taken by the government in this respect.

4 out of the 9 respondents report that there are **independent grievance mechanisms and advocates' services available for PWDs** in public or private institutions and in the communities. One of the respondents specified that only online grievance mechanisms are available. Another one answered that neither grievance mechanisms nor advocates' services are available for PWDs. 3 respondents couldn't answer the question.

*"We get about 50 calls a day and our lawyers are responding to the issues." (Huysi Metsamor NGO)*

*"The hotlines were so overloaded during the quarantine that it was impossible to contact them." (Echo DPO)*

*"The PWDs could claim in online mode. More people started to use online mode. If it is difficult for them, they try to find someone who can help them." (Echo DPO)*

*"There are some grievance mechanisms and legal support, but they are not really available and do not provide confidentiality." (Unison DPO)*

---

<sup>2</sup> ՀՀ պետական կենսաթոշակների մասին օրենք, հոդված 7, կետ 3, ընդունված է 22.12.2010 (<https://www.arlis.am/DocumentView.aspx?docid=64540>):

3 out of the 9 respondents report that they are aware of the cases when PWDs, their assistants and caregivers were **finned for violating emergency rules, not wearing masks**. The other 6 respondents were not aware of such cases.

*“I was fined twice for not wearing a mask.” (Echo DPO)*

*“Our young beneficiary with hearing problems was fined for not wearing a protective mask. That was appealed, the fine was canceled with the lawyer’s support and due to her acquaintance at the NGOs. Otherwise, they would have to pay the penalty.” (Unison DPO)*

Respondents report also that some adjustments were done for the voters before the parliament elections on June 20, 2020. PWDs were allowed to vote with the help of an assistant. But there were no Braille leaflets for people with visual problems.

*“There was an election, and my son voted. He can’t write, but he has a signature. And he made the choice important for his life with the help.” (We can DPO)*

### **Protection of PWDs living in institutions during the pandemic**

2 out of the 9 respondents report that the RA government has taken significant measures to protect the lives, health and safety of **PWDs living in institutions**. 4 respondents report that some measures were taken by the government in this respect. 3 respondents are not aware if the government has taken any measures.

*“Certain but insufficient measures were taken by the government to protect the lives, health and safety of PWDs living in institutions. For example, the institutions did not even install the glass panes needed to protect the PWDs from visitors. In case there was protection, they could have been visited by their beloved ones.” (Echo DPO)*

*“One of our beneficiary parents has a son living in an institution. She was visiting him every week. But because of the quarantine she has not seen him for several months. This affected the relationship between him and the family. He has got serious psychological problems.” (We can DPO)*

5 out of the 9 respondents report that the government has **prohibited or restricted the removal of PWD from social care institutions** during the state of emergency. One respondent answered that the removal of PWDs was not prohibited. Other 3 respondents are not aware of any regulations regarding institutions. The decisions on the protective measures and restrictions were met by each of the institutions separately, and not by the government.

6 out of the 9 respondents report that the government has **restricted or banned the visits of family members, friends, or others to social care facilities** where PWDs related to them live. One respondent answered that no restrictions were exercised by the government. The other 2 respondents were not aware of any regulations regarding institutions.

### **Assistance for PWDs provided by NGOs**

Almost all the CSOs supported the PWDs during the pandemic using the resources got through private donations and benevolent funding. Many NGOs were providing food, hygienic products

and other necessary items for PWDs. Some also provided computers and tablets for children so that they didn't miss their online classes.

Some of the CSOs were reached out to by MOLSI during the war and some services were delegated to them by the state. For example: MOLSI informed Huysi Matsamor NGO that children with disabilities arrived from Artsakh without any special supplies, they left everything behind, had no wheelchairs, no walkers. The NGO started to help them, home visits to every child on the list were organized. 18 children were provided with auxiliary equipment.

*“Wheelchairs were mostly needed. They cost approximately 150 000 AMD. MOLSI delegated that activity to our NGO, because our organization works in two main directions: advocacy and support for the families of children with cerebral palsy. We have 200 beneficiaries with cerebral palsy all over Armenia.” (Huysi Matsamor NGO)*

Other NGOs mobilized their resources themselves during the war to reach out the people in need and help them.

*“During the war we were trying to help with wheelchairs and crutches. We were trying to fill the gap, help the displaced persons and wounded soldiers. In fact, nothing is done for them by the state. We applied to several other NGOs for support. We also tried to influence the MOLSI, in some cases it helped, and in some cases other NGOs solved the problem.” (Unison DPO)*

*“We distributed tablets for our beneficiaries so that they could attend their classes and trainings. We provided food aid and hygiene items. We provided food assistance for 200 beneficiaries twice during the pandemic. An open fundraiser was held, individuals and different organizations were donating.” (Echo DPO)*

*“We implemented 2 projects during the Quarantine. One grant was granted by the Embassy of Germany. We provided medicaments and sent the PWDs to the relevant medical institutions. Another project was granted by the Women's fund. We provided food and hygienic packages for the women and single people.” (Huysi Matsamor NGO)*

*“We provided protective and hygienic items (gloves, masks and disinfectants) for our beneficiaries with EU funding.” (Unison DPO)*

NGOs also provided some information for their beneficiaries on specific protective measures for people with different disabilities.

*“I made some translations from the WHO web-site on the protective measures for PWDs and distributed the translation amongst our beneficiaries.” (Unison DPO)*

### **Availability of COVID-19 treatment for PWDs**

PWDs are particularly at risk of contracting the virus and face even greater inequalities in accessing healthcare during the pandemic due to inaccessible health information and the cultural bias concerning the value of their quality of life and social value.

No cases when PWDs were denied to get treatment on the basis of their disability were reported by the respondents. 3 out of the 9 respondents stated that treatment was equally accessible for PWDs. The other 6 respondents mentioned that they were not sure if the treatment was equally

accessible for PWDs. Furthermore, the treatment approach was the same for all patients including the PWDs. But the PWDs need special treatment and care, which was not provided by medical institutions. The accessibility of the polyclinics and hospitals for PWDs was not provided as well.

*“Our young female beneficiary could not visit a gynecologist and sonography, because they were located on the second floor, and the polyclinic was not flexible enough in that respect. She received the service in another community and again in insufficient and inaccessible conditions.” (We can DPO)*

*“I was terrified because of my son, who has mental problems. What should we do, if he gets infected? If he had got infected, he would be alone at the hospital or at the intensive care unit. I am also a risk group representative. I was in a state of double risk. My son was also regularly getting information that someone was taken to the hospital. He was afraid that he would get infected and end up at the hospital alone.” (We can DPO)*

At the peak of the pandemic there were problems with the availability of the treatment at hospitals, and some of PWDs were getting treatment at home according to the doctors' prescriptions.

*“For example, when I got sick, I reported that my fever was not going down. I was isolated. It was getting worse. I went to a private hospital, where the treatment was prescribed immediately. But if I trusted the polyclinic, I would get pneumonia.” (Echo DPO)*

4 out of the 9 respondents report that the government has taken some measures to ensure that PWDs have access to general and specialized medical care in the same place as other patients, but those measures were not sufficient. 2 respondents report that no measures were taken by the government. And 3 respondents are not aware of the issue.

### **Provision of services delegated by the state**

6 out of the 9 CSOs targeted during the research don't get any financial support from the state, 2 get some financial support from the state and one of the CSOs has faced restrictions concerning state funding.

In this concern the following issue was raised by the CSO representatives during the study. Those NGOs, which have experience in providing the delegated services to the PWDs and get funding from the state, faced the problem caused by the new regulation on state funding and tenders for service-provider NGOs. Some of the CSOs have had funding from the state, they were delivering the delegated services to the particular group of PWDs and got experienced in that area, but due to new regulations and tender requirements the new funding was announced for all NGOs to apply and some of the experienced NGOs did not get the funding from the state and can't provide services for their beneficiaries, which is in conflict with the rights of PWDs and CSO development.

*“Delegated services are no longer provided. Tender packages were announced for NGOs. We were disadvantaged, because during that time other NGOs managed to receive quarterly support and they managed to prepare their tender packages, continued to receive their state funding. We've lost state financial support.” (Unison DPO)*

*“We have not won the tender this year. Now we have a program with the Ministry of Education. We apply for grants, if we win, we have state funding. We have worked for a year and we are already experienced in this field, the Ministry could include us in the mid-term budget expenditures. I have written to the Minister about my concerns. The answer*

*was that we can apply to another grant again. But we provide social and health services for PWDs, elderly care is a completely different service. We are not certified to provide such services. It is impossible. I think that the most experienced NGOs have to provide the delegated service in the field. The service-provider NGO shouldn't be changed every year. I think it is wrong to hold a competition every year. We provided social and psychological support for 30 beneficiaries. But this year new organizations won the tender. Their services are not established yet, but they received the funding. I think the procedure is wrong in this case. Now we have no plans, we work only 2 days a week. Our municipality supports us. We need facilities and specialists for those specific beneficiaries. In other words, the state did something, abandoned it halfway and gave funding to a new organization, which has just started to form a group. I think that is wrong, the effectiveness is zero, finances are "pulverized". If more competent and experienced organization have had won in our city Metsamor, I should understand, but I do not know the reason of granting the program to new and inexperienced NGO." (Huysi Metsamor NGO)*

At the same time the requirements for participation in tender procedures are very difficult for small NGOs, especially for the local NGOs operating in marzes. They cannot meet the requirements like standards of office conditions, or self-financing and co-financing issues. Because of the scarce resources they cannot directly participate in the tenders and biddings. Usually, international NGOs get grants and delegate their functions to local partners. The state does not try to support and empower regional NGOs. Local NGOs are disadvantaged, they cannot meet the tender requirements. This makes local NGOs uncompetitive.

*"We cannot apply for governmental grants. We have not had an office since 2020. We organize our meetings at the fire department of Spitak city. I have applied for state grants several times. I have an impression that they know in advance who will get the grant. I waste time getting to Yerevan, handing over the application package and returning to Spitak. I applied 2-3 times to no result." (White falcon DPO)*

Furthermore, the scope of delegated services should be expanded in the country so that those PWDs who can't get out of their communities and travel can receive at least some services in their own communities. It is especially true in times of pandemic, quarantine and isolation.

### **Access to information during the pandemic**

4 out of the 9 respondents mentioned that they have faced some difficulties when trying to find the information needed from governmental sources (including information on funding). One respondent answered that he has faced significant difficulties, another one also faced numerous difficulties. One respondent couldn't answer the question. And only 2 respondents mentioned that the difficulties were reasonable.

The lack of information during the pandemic was mentioned by all the interviewees. The information was very messy and inconsistent. The lack of information was in place in all the stages of the pandemic: the suspense on the risk of the infection, preventive and treatment measures, vaccination, lockdown and its consequences etc., were confusing for the CSOs, their activities and their beneficiaries. The information disseminated by official media was not sufficient to make decisions on future activities of CSOs and support programs for PWDs.

*“We did not understand what to do. We knew only very common things. As we are working in the field for a long time, we obtained information through personal connections.” (Skarp DPO)*

*“I can never find financial information. I couldn’t find information about when we could restart our activities. I wrote the letter and got the answer that way.” (Teach me more NGO)*

7 out of the 9 respondents report that PWDs did not get sufficient information on how to protect themselves from COVID-19 infection and what to do if they get infected. One respondent reports that some information was provided and only one respondent believes that the information provided was sufficient.

Since the spread of COVID-19 PWDs have faced exacerbated discrimination, including the denial of support services such as sign language and tactile interpretation. The rights of PWDs were directly impacted by the nature of COVID measures and information sharing. Official information and guidance was not shared in accessible formats, restricting PWDs’ equal rights to information and placing them at additional risk. PWDs did not receive sufficient information on how to protect themselves from COVID-19 infection and what to do if they did get infected. The information was not provided through means accessible for PWDs. Only common information disseminated through general means of information was available. PWDs received the common information on how to protect themselves from COVID-19 infection and what to do if they become infected.

COVID limitation measures (e.g. for distancing, etc.) were not adapted for different groups of PWDs, setting an unwelcome precedent for not taking specific needs into account and for a renewed “exclusion” of PWDs from both media/information space and policy. Nothing targeting specifically the PWDs needs was done. PWDs with different limitations were facing different challenges during the pandemic, which were not addressed.

*“No information on special precautions was provided by the state, i.e., how does PWD protection differ from non-PWD protection, such as wheelchair disinfection or distance control if a human wheelchair is pushed. Only the NGOs provided some information. I made some translations from the WHO website and disseminated it amongst our partners and beneficiaries.” (Unison DPO)*

A few means providing accessibility of the information for people with different disabilities were used by media to inform the PWD on COVID treatment and protective measures. 3 respondents reported that the information about protection measures from COVID-19 and the treatment was provided in Sign Language. One respondent reported that simplified information was available. Another one reported that the information was available in the form of slow sliding subtitles. One respondent reported that the information was available in different languages. 2 respondents mentioned that the information about protection measures from COVID-19 and the treatment was available for the PWDs living in institutions. One of the respondents answered that the information leaflets for visually impaired people were provided by the Human Rights Defender’s office in Armenia.

*“Sign Language Translation was provided by one of the TV channels.” (Skarp DPO)*

5 out of 9 respondents report that certain but not sufficient measures were taken by the government to make **the information concerning emergency restrictions, including restrictions on outside visits available for PWDs living in and outside of the institutions**. 1 respondent reported that significant measures were taken by the government. Another 3 respondents were not aware of such

measures. State organizations do not provide sufficient information for PWDs. They usually need help of other people or organizations, because they have to visit the state facilities several times to get sufficient information or support.

*“Information was disseminated only on television. But not all the rooms in the institutions are equipped with a TV. There are no posters about hotlines even in the corridors of those institutions.” (Echo DPO)*

The online platforms are not available for PWDs with reading and writing limitations.

*“For example, e-drafts.am is not available for PWDs with reading and writing problems. We have developed the Application for this group of PWDs, which was approved by the Ministry. But nothing is done to launch that program.” (We can DPO)*

One of the respondents stressed the importance of the hotlines available for PWDs. The Hotline for PWDs managed by Echo DPO get a lot of calls on the following issues: getting pensions, application for different social programs, application for the disability status and disability certificates. PWDs faced some difficulties, because the procedures of the Medical-Social Expertise were changing during the pandemic and the bureaucracy procedures became more burdening. According to the new law on the Rights Protection of PWDs adopted on 5<sup>th</sup> of May 2021 the functionality assessment will be used instead of disability group<sup>3</sup>.

*“Two of our beneficiaries faced the problem during the disability recognition process, because the regulation changed. And they were left between the old and the new regulations.” (We can DPO)*

No problems or restrictions to the internet access during the pandemic were mentioned by the interviewees. 5 respondents out of 9 report that they could freely use the internet both to receive and to communicate the information. 4 respondents have faced reasonable difficulties.

Not all the PWDs have internet access, they are not aware of social media, digital and internet tools and were not ready to use them. Mostly the elderly people were affected by that problem and couldn't use the digital tools effectively during the pandemic. Those younger got familiar with the new tools very quickly.

*“Not all PWDs have internet access, they cannot use the internet. Their benefits are very limited, they become 26,500 AMD, it is not enough to take care of their essential needs. Some of our beneficiaries ask us to find the information they need in internet. But they cannot apply directly. Internet access and smartphone are must-haves today. Without these tools you are really deprived of many things.” (White falcon)*

If working with state institutions CSOs usually ask their questions in written form and get official answers from the addressee within the specified time. Most of the interviewees stressed their dissatisfaction with the time needed to get an official answer, others stressed also the dissatisfaction with the answer itself, its inadequacy or fractionality.

*“We usually get answers for the official letters very late.” (Unison DPO)*

*“We applied to the government to build the city of children for the PWD. But we did not receive an answer.” (Skarp DPO)*

---

<sup>3</sup> Հաշմանդամություն ունեցող անձանց իրավունքների մասին ՀՀ օրենքը, ընդունված 2021 թ. մայիսի 5-ին (URL: <https://www.arlis.am/documentview.aspx?docid=152960>):

*“We can find the information we need online. We have got information on social issues, issues related to children, PWD benefits, etc. There have been cases when we applied to government officials online, and received the response online and in paper form. The questions related to human rights we referred to the hotline and got a sufficient answer.” (White falcon DPO)*

*“Our application for the people with reading and writing limitations was approved by the Ministry, but is not processed yet. We approached the deputy minister, she promised to consider it, but we still don’t have any feedback. I think that the government should be more consistent and dedicated to the programs approved by them.” (We can DPO)*

*“We apply to the state due to the difficulties in using the day care services by PWDs. We write letters to the ministry. For example, I wrote the application for a child with cerebral palsy, but it was too late, the school next to his house was already full, they did not accept him. He was sent to another school, which is a bit far from the house and it will be difficult for his parent to bring him there. The school that is closer is also more accessible than the distant one. So, we applied one more time to the Ministry. The case is in process.” (Echo DPO)*

*“Yerevan municipality can’t answer our questions. The monitoring department of Yerevan Municipality’s work is very substandard. I applied last year to the Yerevan Municipality for the lists of PWDs living in Yerevan. We wanted to send our volunteers to check the lists, but they replied that they cannot provide that information.” (Echo DPO)*

*“Sometimes local organizations are not aware of the information. You have to contact the ministry directly to get proper information. You have to take several steps before you get the information needed.” (Huysi Metsamor NGO)*

*“It would be good if the actual information was posted on the official website, in the news section, and not, for example, in the minister's status on Facebook. They need to get back to real life from Facebook.” (Unison DPO)*

Some of the interviewees also stress that the communication with state institutions became easier after 2018.

### **Freedom of speech during the pandemic**

5 out of the 9 respondents answered that they could freely share their position and opinion in public without being constrained by pressure from any government agency. 4 respondents mentioned that there were reasonable difficulties. CSO representatives interviewed do not report any case of pressure from government agencies. They can freely express their position in public. Mostly social media is used to express the position in public.

*“There were some conflicts during the pandemic, I criticized some government bodies because no proper need assessment was made, but there was no pressure. I wrote that no research has been done for 3 years after the Prime Ministers’ statement that we don’t know who is rich and who is poor. So, I blamed the government for doing nothing. They reacted and I insisted on my opinion, because for two years the MOLSI did not make any need assessment.” (Echo DPO)*

*“I try not to politicize the organization. For example, if I wrote an article criticizing the mayor during Serzh Sargsyan’s government, police could visit me. Now it is not like that anymore. I was free then, and I am free now, it was just more unpleasant then.” (Echo DPO)*

*“It is better than ever before. Then it was an atmosphere of fear that somebody should be fired or cut off from benefits, today it is not like that anymore. We have not faced any cases of pressure or coercion. We are free to express our opinion even if it does not correspond to the position of the state.” (White falcon DPO)*

*“During the war, we received the statement not to provide support items before the disability status is officially granted. That contradicted the statements of state officials. I wrote a Facebook status without tagging the persons. Next day the first deputy minister reacted and offered to solve the problem. It was really solved in hours. Before that nothing was solved for weeks. Of course, they wrote the personal letters to me asking to contact them in case it was needed. So I did the next time, the deputy minister said he would do it, but he did not. Then I called him using his personal mobile number, he promised again, but did not do anything either.” (Unison DPO)*

*“We don’t get any financial support from the state since 2019, so we have no problem with pressure, we are completely free to express our opinion in public. We do not have financial dependence on the state. It is good on one hand; on the other hand, it is bad that we don’t get support. (Unison DPO)*

Simultaneously, CSO representatives state that the freedom of speech for PWDs cannot be achieved before the accessibility of public spaces is not provided. Yerevan public spaces are not accessible, but the situation is worse in other regions.

*“It was discussed a lot about the accessibility of the city for the PWDs after the war, but nothing was done. My nephew was injured in Shushi, they could not even operate on him in Armenia, they sent him to Germany. Everything that could have been done in advance should not be left for later.” (Echo DPO)*

*“PWDs depend on other persons because public spaces and buildings are not accessible. They often choose not to go out or not to act.” (White falcon DPO)*

3 out of the 9 respondents report that the CSOs are fully protected from political harassment in cases of opposition to or protesting against state policy. 2 respondents believe that CSOs are mostly protected. 4 respondents couldn’t answer this question, but did not mention any examples of the governmental pressure.

### **Freedom of associations during the pandemic**

7 out of the 9 interviewees mentioned no constraints to exercise their freedom of associations during the pandemic. There was no fear of persecution by government agencies because of their associations and demonstrations. Only 2 respondents faced reasonable difficulties with organization and participation to demonstrations. Either way, all the respondents state that they don’t have any political agenda, so their gatherings and demonstrations can not have any political connotations.

*“On June 12th we participated in an event dedicated to Autism Day, organized by Bridge of Hope. Information about autism was presented. There were no constraints.” (Equal opportunities and inclusion NGO)*

*“We have never faced problems. We don’t have a political agenda.” (Huysi Metsamor NGO)*

*“We organized the gathering as an awareness-raising event. There were no problems.” (Echo DPO)*

*“There were 2 initiatives. One initiative was during the war: to go to the military commissariats to motivate others to come; the idea was that even handicap people are joining the volunteers. But I didn’t like that initiative and we didn’t join it. Another initiative was after the war: to make a protest action in front of the Russian embassy to firmly request the return of the Armenian prisoners. I also denied our participation. I was totally free to decide. No pressure was in place. We don’t have a political agenda. All our employees have different political views.” (Unison DPO)*

7 out of the 9 respondents answered their NGOs were able to operate independently and avoid state interference. One respondent reported reasonable difficulties, another one couldn’t answer the question.

*“We were approached several times to get involved in the political processes, but we consistently denied those kind of offers. That would make us dependent on them.” (We can DPO)*

### **Civic participation issues during the pandemic**

Civic participation to the decision-making process was not fully provided, NGOs had limited influence on decision-making processes on emergency state and the rights of PWDs were not fully respected.

4 out of the 9 CSOs targeted during the research could freely and easily protect the rights and interests of their beneficiaries without fear of government interference. 4 CSOs faced reasonable difficulties. One of the respondents couldn’t answer the question.

The experience of the CSO representatives with the participation in the emergency discussions, decision-making processes (for example, public consultations, committee work, participatory event planning, etc.) is mostly negative. 4 out of 9 respondents report that they have never participated in the emergency discussions. One respondent reports some difficulties, another one – significant difficulties. Only one CSO has fully participated in the emergency discussions, another one with reasonable difficulties. One respondent couldn’t answer the question.

4 out of the 9 CSOs did not influence the decision-making processes, one CSO influenced the decision-making processes with significant difficulties, another one - with some difficulties, 2 CSOs - with reasonable difficulties. One respondent couldn’t answer the question.

*“During the pandemic, even social support programs were not run by MOLSI, but by the government. No NGO has participated in any decision-making or service design. I am the member of the Public Council of the Human Rights Defenders’ office. I am also a member*

*of the public council of the municipality. But only the Human Rights Defenders' office works normally, they respond to our letters very quickly.” (Echo DPO)*

*“I am a member of the National Commission dealing with issues of PWDs<sup>4</sup>, but the commission has never met in that regard (emergency situations), there have not even been any electronic inquiries.” (Skarp DPO)*

Unison DPO was rejected from the NC since 2018 after being the member of it for decades. They were not invited and informed by any state body on the change in the composition of the current commission. This was at least a mean of direct communication with the MOLSI for the CSO, where important questions could be raised and discussed.

*“Active NGOs like us have been excluded from the NC since 2018. After that I have lost connection, regardless of COVID. During this time government invited me to some discussions twice, but I was used to participate in discussions 1-2 times a month. It is the new practice of discussion only with the close persons and not the publicity.” (Unison DPO)*

Huysi Metsamor NGO has different experience. They have participated once to the committee work, but the impact on decision-making is not clear yet.

*“The NC was just created. I participated for the first time to the discussion of the commission on Friday. I don't know how it will go on. But NGO participation is an important issue. It's a good sign that NGOs are on board. There has not always been an impact on decision-making, but we were participating.” (Huysi Metsamor)*

### **Non-discrimination and inclusion issues during the pandemic**

In Armenia the DPOs - in addition to defending the rights of persons with disabilities and their families - are also service providers to support social inclusion of their target groups. The intersection of multiple exclusionary factors (like gender, age, poverty) resulted in multiple discriminations and significantly restricted access to services.

CSO representatives report that there are less opportunities of civic participation for **women with disabilities** in terms of their rights protection, equal role and influence on decision-making. 4 out of 9 respondents answered that women with disabilities have less civic participation than men, 3 respondents mentioned that civic participation of women with disabilities is limited, one of the respondents answered that women's civic participation is very limited, one respondent couldn't answer the question.

The reasons for gender inequality of PWDs are the gender stereotypes in Armenian society.

*“We have female teenage beneficiaries. Women with disabilities are more passive than men with disabilities. Families with female CWDs are more vulnerable than those with male CWDs. That is based on common gender stereotypes. But there are also cases of female beneficiaries, who are very active.” (Echo DPO)*

---

<sup>4</sup> ՀՀ վարչապետի որոշումը հաշմանդամություն ունեցող անձանց հարցերով զբաղվող Ազգային Հանձնաժողով ստեղծելու, ազգային հանձնաժողովի աշխատակարգն ու անհատական կազմը հաստատելու եվ ՀՀ վարչապետի 2006 թվականի հոկտեմբերի 10-ի n 747-ն որոշումն ուժը կորցրած ճանաչելու մասին (URL: <https://www.arlis.am/documentview.aspx?docid=53534>):

*“Boys with mental problems are treated differently. The girls with the same mental problems are stereotyped. The young woman who has better academic knowledge than the man with the similar problem was recognized as incapacitated person.” (We can DPO)*

*“The situation of women with disabilities is similar to the women who have no disabilities. Some of them manage and overcome the discrimination and succeed.” (Huysi Metsamor NGO)*

*“It is easier for male PWDs. The neighbor's son or child help them. The woman does not want to cause any trouble for other people, relatives or children. She remains silent at her home.” (White falcon DPO)*

*“There are no restrictions for active women with disabilities. There are no problems for women with disabilities NGO leaders. But women with disabilities living in the communities are silent, their voices are not heard.” (Unison DPO)*

At the same time the fact that CSO is led by a woman contributes to funding. In this case, the rights are equal and access to funding is provided. In other cases, there are a lot of limitations for women with disabilities in all areas.

Civic engagement opportunities for **poor and economically insecure PWDs** in terms of their rights protection, equal role and influence are also limited. 4 out of 9 respondents report that the civic participation of poor and economically insecure PWDs is limited, other 4 respondents think – it is very limited, and 1 respondent answered that PWDs don't have civic participation at all.

*“Poor people with disabilities are either not aware of their rights or have exaggerated expectations. For example, they believe that the state is obliged to send them to Germany for treatment or they believe that the state has nothing to do with them.” (Unison DPO)*

*“Poor people and PWDs with low income don't believe that the law is written for them. They see themselves as victims, family benefits are considered as a charity from the state, but not the implementation of the law. That is why they are very passive. Disability contributes to the deepening of poverty because their problems are different.” (Echo DPO)*

*“The situation is worse in case of poor PWDs. Poor people adapt to their status and benefits, they don't look for the better chances, it is very difficult to achieve any changes while working with them. These persons lose their faith. And they are waiting for support and benefit. Poverty is reproduced, because people don't get full services.” (Huysi Metsamor NGO)*

4 out of the 9 respondents report that certain but not sufficient measures to protect the lives, health and safety of **elder PWD** living either in the institutions or in the communities were taken by the government. 2 respondents answered that no measures were taken by the government. And 3 respondents are not aware of any measures taken by the government. For example, supermarkets stated that the elder people should shop before 12:00 and all other people later during the day. Thus they were trying to protect the elderly clients.

### **Protection of CWDs during the pandemic**

4 out of the 9 respondents report that no measures to protect the lives, health and safety of **CWDs** living either in the institutions or in the communities were taken by the government. 3 respondents

answered that certain but not sufficient measures were taken. And 2 respondents are not aware of any measures taken by the government.

*“Nothing has been done by the government for CWDs. Parents couldn’t use Zoom platform and it was very hard for them. Education should not be switched to online platforms. The state, the CWDs and their parents were not ready for that.” (Echo DPO)*

5 out of the 9 respondents report that no **measures to support the families of CWDs** were introduced by the government. 3 respondents answered that certain but not sufficient measures were taken. And one respondent is not aware of any measures taken by the government.

*“The families of CWDs were finding funds themselves. Vulnerable and poor families received support from the state. Institutions were also active.” (Huysi Metsamor NGO)*

Students with disabilities are facing even more barriers during the pandemic on account of the absence of required equipment, accessible materials and support necessary to permit them to follow online school programs. 4 out of the 9 respondents report that the government has not introduced any measures to ensure that **CWDs attend their schools (special or general)**. 4 respondents think that the measures introduced by the government were not sufficient. And one respondent is not aware of the issue.

*“CWD were deprived of the opportunity to participate in the lessons, the schools went online, but the children could not join the class, the teachers did not have enough skills to use the Zoom platform and include children with SEN in the process. Therefore, 88-89% of the children were left out of the educational services. Furthermore, when offline lessons started at schools, the gap of knowledge was not filled, CWDs did not receive additional services.” (We can DPO)*

*“CWDs were allowed to join the lessons online, and not to come to school. There were masks, and disinfectants for everyone.” (Huysi Metsamor NGO)*

Most of the CSO representatives are concerned about the education of CWDs living in the institutions. They state that they have had limited access to the education during the quarantine.

*“There are institutions that have 2 PCs for 130 children.” (Echo DPO)*

*“One of the boarding schools decided to close up, another decided to continue the work. There was no unified decision by the state in that regard. In other words, the state is unable to make decisions concerning vulnerable groups.” (Huysi Metsamor NGO)*

### **Human rights and rule of law during the pandemic**

The most marginalised people often endure multiple deprivations, which perpetuate injustice and entrench obstacles to the full realisation of their human rights. 8 out of the 9 respondents report that the rights of PWDs in Armenia are not fully respected. Only one of the respondents evaluates the limitations that the PWDs face as mild.

The CSO representatives don’t believe that the rule of law is effectively exercised in Armenia. 5 out of the 9 respondents think that the rule of law is exercised with some limitations, 2 respondents think that limitations are mild, 1 respondent thinks that there are significant limitations, another one thinks that the rule of law is not exercised at all in Armenia.

*“We helped 2 PWD beneficiaries to find employment through the state employment agency during the last 2-3 months. We had to explain to the employers that it is about the rights of PWDs and not about their money.” (White falcon DPO)*

The most important problem that affects the rights of the PWDs in Armenia is that there is no accessible environment and free movement possibility for PWDs. These rights are very limited or not exercised at all. There are some ramps in Yerevan capital city, but mostly not matching the standard requirements and not usable. Some adjustments are made in public transport, but accessibility is still a major issue in Armenia.

Another reason for PWD rights violation is that no proper need assessment is done by the state institutions. That’s why the government is not able to address the needs of PWDs.

The right to education is essential for exercising the rights of PWDs as a whole. Most of the schools in Armenia are inclusive. The total inclusion is planned for August 2025. Nevertheless, there are a lot of problems with inclusive education either.

*“The idea of inclusive education is very good. The law is well written, but there are implementation problems. That’s why inclusive education is not so successful yet.” (Echo DPO)*

*“The written laws often do not work, because there are no sufficient resources.” (Huysi Metsamor NGO)*

*“At some schools a cabinet system is exercised; pupils are sent from one classroom to another during the day. It is impossible for CWD to move from one floor to another. That is why parents want to take their child out of school and prefer home teaching.” (Echo DPO)*

The rights of the parents of PWDs are also disregarded. Lack of services for CWDs results in the situation, when parents have to take on the full responsibility for the child’s care and education, invest their time and money. As a rule, they lose their education and employment opportunities.

*“If a parent wants to work, but he has to take care of the CWD, that is a problem. If he does not work, his financial situation becomes worse and that affects the child. I think that it was a wrong decision to close the special schools. Some years ago parents could choose if the child goes to an inclusive school or to a special needs one. For example, some CWDs attend an inclusive school only twice a week. What should the parent do in this case? The parents’ rights are violated. I do not think that a child, who attends the school only twice a week, really enjoys their right to education.” (Huysi Metsamor NGO)*

*“I have a CWD, he has grown up, he is already mature, but he is unemployed. I am also an actor in the field of NGOs and PWD rights protection, but I cannot find employment for him, he is still under my care. There are a lot of families that have CWDs and don’t have a vision for the future. The parents of CWD also face problems with exercising their rights. We say that disability is not a verdict, but it is a verdict that an educated parent can’t work. Parents’ rights are violated. Why do they go abroad? Because their rights are fully realized there.” (Huysi Metsamor NGO)*

Some regulations and laws to protect the rights of PWDs are of declarative character. The politicians use them to achieve their populist goals and get more votes. But that hardly changes the situation for PWDs.

*“We had a Minister of Social Affairs with disabilities. In fact, that does not matter, it does not change the situation. It was just used to show: we have a female minister in a wheelchair.” (Unison DPO)*

The new law on the Rights Protection of PWDs was adopted in May 2021, but no one felt the difference or development<sup>5</sup>.

---

<sup>5</sup> Հաշմանդամություն ունեցող անձանց իրավունքների մասին ՀՀ օրենքը, ընդունված 2021 թ. մայիսի 5-ին (URL: <https://www.arlis.am/documentview.aspx?docid=152960>):

## CONCLUSIONS

The COVID and post-COVID reality triggered the necessity to realize the challenges that the PWDs face because of the infection outbreaks. Research results show that PWDs are among the hardest hit groups during the COVID-19 pandemic.

The COVID-19 situation has put at risk the sustainability of CSOs. All the CSOs working with PWDs in Armenia were affected by the COVID-19 restrictions: their activity decreased, the services provided by CSOs were canceled or redesigned. CSOs operating in Armenia faced new challenges in September 2020 because of the outbreak of 44-day Artsakh war. Many of them had to reorganize quickly to support different groups with new vulnerability status: displaced persons and families from Artsakh, PWDs from Artsakh, soldiers injured and got disabled during Artsakh war. The number of people who need psychological help and support has extremely increased. The war, quarantine and COVID-19 restrictions have had negative impact on their activities, quality and quantity of the services and the participation to the decision-making processes. Consequently, the employees and the beneficiaries of the CSOs were affected.

The CSO employees faced many problems because of the lockdown and restrictions: health problems, public transportation ban, difficulties with wearing masks, but they did not get any support from the state.

PWDs have suffered more than other citizens because of pandemic and war crises, they were on the top of infection risk, they faced even more isolation than before, they faced health problems because the rehabilitation centers were closed and the scheduled surgeries were canceled. The lockdown and COVID-19 restrictions suspended or tremendously weakened the access to healthcare, employment or educational services for PWDs.

The following most vulnerable groups of PWDs affected by the pandemic were identified during the research: wheelchair users, PWDs with hearing, visual and mental problems, CWDs and PWDs living alone.

No sufficient measures to protect the lives, health and safety of CWDs and support their families were introduced by the government. Online education was not accessible for many groups of CWDs: children with hearing and visual problems, mental disabilities and behavioral problems. Not all families had the equipment they needed and internet access.

Only one measure to protect the lives, health and safety of elder people was taken: the supermarkets were open only for them before 12:00 and all other people could shop later during the day.

None of the governmental support measures introduced during the pandemic targeted the PWDs. PWDs were deprived of additional state financial support during the pandemic, because they receive state pensions.

There were cases when PWDs, their assistants and caregivers were fined for violating emergency rules, not wearing masks.

No cases when PWDs were denied to get treatment on the basis of their disability were reported during the research. But the treatment approach was the same for all the patients including the PWDs. PWDs need special treatment and care, which was not provided by medical institutions. The accessibility of the polyclinics and hospitals for PWDs was not provided as well.

The lack of information affected all groups of PWDs and CSOs. The information was very messy and inconsistent. PWDs did not get sufficient information on how to protect themselves from COVID-19 infection and what to do if they get infected. The information was not provided through means accessible for PWDs. A few means of providing accessibility of the information for people with different disabilities were used by the media to inform the PWD on COVID treatment and protective measures: sign language and slow sliding subtitles on TV, some simplified information, leaflets for visually impaired people provided by the Human Rights Defender's office in Armenia.

CSO representatives could freely share their position and opinion in public without being constrained by pressure from any government agency using mostly social media. But the freedom of speech for PWDs cannot be achieved before the accessibility of public spaces is not provided.

CSOs did not face any constraints to exercise their freedom of associations during the pandemic. They were able to operate independently and avoid state interference.

Civic participation to the decision-making process was not fully provided, NGOs had limited influence on decision-making processes concerning emergency state and the rights of PWDs were not fully respected.

There are fewer opportunities of civic participation for women with disabilities in terms of their rights protection, equal role and influence on decision-making than for men. The reason are the gender stereotypes in Armenian society. Civic engagement opportunities for poor and economically insecure PWDs are also limited.

The rights of PWDs in Armenia are not fully respected. There is no accessible environment and free movement possibility for PWDs. No proper need assessment is done by the state institutions. That's why government is not able to address the needs of PWDs.

The rights of the parents of PWDs are also disregarded. Lack of services for CWDs results in the situation, when parents have to take the whole responsibility for the child's care and education, invest their time and money. As a rule, they lose their education and employment opportunities.

The NGOs, which have experience in providing the delegated services to the PWDs and get funding from the state, faced the problem caused by the new regulation on state funding and tenders for service-provider NGOs and were rejected of the tenders. The requirements for participation in tender procedures are very difficult for small NGOs, especially for the local NGOs operating in marzes. They cannot meet the requirements.

Almost all the CSOs supported the PWDs during the pandemic using the resources got through private donations and benevolent funding. They were providing food, hygiene products and other necessary items for PWDs. Some also provided computers and tablets for children so that they didn't miss their online classes.

The failure to address the exclusion of PWDs and their families from the full cycle of prevention, treatment and recovery from COVID-19 will have had a significant impact on the overall fight against the pandemic and its social-economic effects.

## RECOMMENDATIONS

The following recommendations were derived based on the study results. The implementation of these recommendations will improve the work of CSOs dealing with PWDs in Armenia and the right protection of the PWDs in Armenian society.

### General recommendations

- The availability of public spaces for all groups of PWDs should be improved.
- The individual assistance institute for PWDs should be established.
- The specified System of Procedures for the protection of the different groups of PWDs in times of pandemic should be developed. The wheelchair users, people with hearing and mental disabilities and visually impaired and other groups of PWDs should be targeted.

### Aftermath of war

- The mobilization regulations concerning the fathers of CWDs or PWDs should be reviewed. So that they get legally released from compulsory military service.
- Psychological support mechanisms for war veterans, survivors and their dependents should be developed.

### Access to information

- A unified online comprehensive digital platform for sharing data on PWDs with different stakeholders should be created. CSOs, donor organizations, ministries, other state institutions should have access to this platform. It has to be equipped with clear mechanisms for information dissemination and real-time updates. Later it can be also managed interactively to have actually updated information from different stakeholders.
- Parallely to the database the principle of one window should be applied. So that the CSO representatives and PWDs can get the information according the disability and social support available all in one place. So that the applicant does not have to contact different agencies.
- The mechanisms of quick answers to questions and applications from PWDs and respective CSOs should be developed by the state institutions.
- Recurrent need assessment mechanisms of PWDs should be established.
- Adjustments of the information, media and anti-COVID measures to the needs of people with different disabilities (people using wheelchairs, people with hearing disabilities and visually impairments, mental disabilities, children with different limitations etc.) should be done.
- Online platforms, applications and official web-sites should be adjusted for the use of PWDs with visual disabilities, mental disabilities, reading and writing limitations based on international standards and approaches.
- Cooperation between different stakeholders: CSOs, local self-government bodies, local and international organizations, state institutions should be improved. Organizations working with PWDs should cooperate with each other and share information. So that every organization is aware of what others are doing. That will make the processes of referral and PWDs' support more consequent and effective.
- The legal vocabulary used during the pandemic should be introduced to PWDs so that they have equal access to the information.

## **Freedom of associations**

- The freedom of associations could be achieved, if the state:
  - does not arrest civic activists,
  - does not use violence against civic activists,
  - does not make civic activity a performance,
  - responds to complaints with dignity, especially if there are PWDs involved.

## **Civic participation**

- The meetings of NC should be held systematically at least quarterly.
- The government officials should immediately organize meetings with CSO representatives working with PWDs to discuss the lessons learnt during the pandemic, quarantine, war and emergency situations and make decisions.
- The government should discuss any emergency situation with CSOs, organize public consultations and include the CSOs in those discussions. The participatory decision-making will contribute to the targeted protection of PWD rights.
- Local NGOs should be involved in need assessment and creation of unified online interactive database based on the need assessment results.

## **Non-discrimination and Inclusion**

- Awareness raising programs should be launched for poor PWDs.
- Awareness raising programs should be launched for women with disabilities.
- Awareness campaign breaking social stereotypes about women with disabilities should be launched.
- More accessibility to University level Education for PWDs should be provided, especially for female PWDs.
- Employment opportunities for PWDs should be increased.
  - Different work places should be adjusted so that PWDs have jobs and can take care of themselves and their families,
  - The online platform or other operational unit matching employers and job seeking PDWs should be developed.
  - Proper need assessment, professional orientation and training for PWDs to match with employment opportunities is needed. The need assessment should be done using an individual approach.
- The bureaucratic procedures should be simplified for PWDs.

## **Rule of law**

- Monitoring mechanisms and practices for law implementation should be established and improved.
- Inclusive education practices should be monitored and improved in every school with special attention to the children with SEN attending the schools.
- Special schools should be preserved as an additional resource for education of CWDs with severe disabilities.

## **Delegated services**

- Equal treatment to all NGOs should be practiced by the state during tenders to avoid protectionism and patronage.
- Services for PWDs should be delegated by the state to a particular NGO for a long time. The tender procedure for NGOs announced every year don't provide sustainability and

continuity of the services for PWDs. The often change of service provider is not effective in terms of meeting PWDs' needs. The NGOs get specialized in the particular area to work with the particular group of PWDs. Then they are forced to drop out and let inexperienced NGOs get grants and step in. The financing of delegated services and services provided on the tender basis should be differentiated. The services that require more experienced service providers should be delegated.

- The scope of delegated services should be expanded in the marzes of Armenia so that PWDs, who can't get out of their communities, can receive services in their own communities.