

DISABILITY EQUALITY IN **ARMENIA**



An update from the Lady Cox Rehabilitation Centre following the ethnic cleansing of Nagorno Karabakh



Humanitarian
Aid Relief Trust

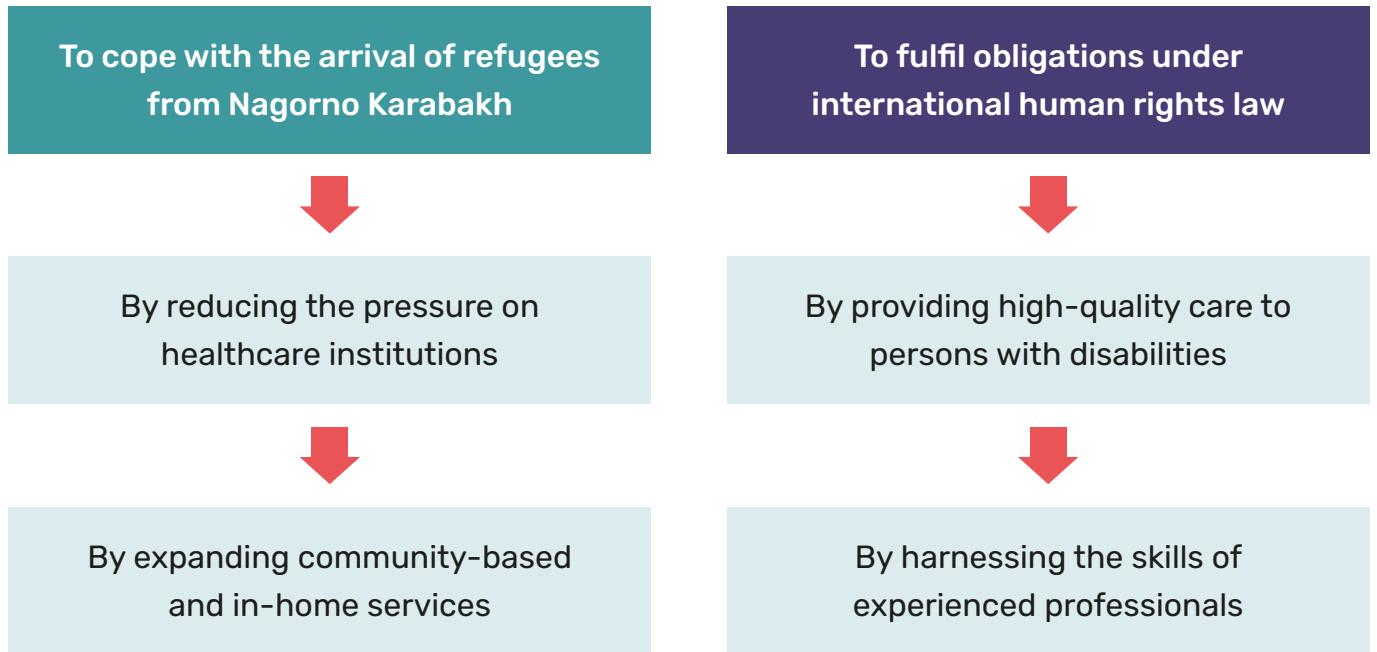
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The Lady Cox Rehabilitation Centre

Strengthening Armenia's long-term capacity...



Staff are committed to breaking down barriers for children and families.



Summary

Armenia's refugee crisis has a disproportionately negative impact on persons with disabilities. The Government has taken steps to address urgent concerns. However, State services are under-resourced and overstretched.

The Lady Cox Rehabilitation Centre, a non-Government organisation, is well placed to provide assistance. The Centre's team of doctors, nurses and therapists are known and trusted by displaced families, with a track record of delivering high-quality care to patients with complex needs.

Support for the Lady Cox Rehabilitation Centre will:

- ✓ Increase the independence and happiness of refugees with disabilities.
- ✓ Ensure continuation of care for displaced patients.
- ✓ Help to eliminate existing barriers (physical, institutional and attitudinal) to basic services.
- ✓ Ease the pressure on Armenia's existing healthcare institutions.
- ✓ Develop person-centred and community-based services in line with the Government's social-inclusion programme.
- ✓ Utilise the skills and knowledge of dedicated rehabilitation specialists.
- ✓ Broaden opportunities for healthcare professionals to maintain and increase their level of competence.
- ✓ Assist in tackling systemic oppression and creating a society where everyone is valued and treated equally.



Introduction

The ethnic cleansing of Nagorno Karabakh in September 2023 resulted in the exodus of over 100,000 people – 9,000 of whom are persons with disabilities. They fled to Armenia with minimal possessions and without access to essential equipment, supplies or assistive devices.

Before fleeing to Armenia, the majority of persons with disabilities in Nagorno Karabakh were registered as service users of the Lady Cox Rehabilitation Centre. The Centre was one-of-a-kind in Nagorno Karabakh. Founded in 1998, it was the only facility in the region to prioritise care for persons with disabilities or in chronic pain. Highly-qualified staff provided patients with individually-tailored treatment in a range of therapeutic environments.

Services included:

- Therapy (physio, speech, hydro, occupational);
- Home visits;
- Rehabilitation psychology;
- Full-day care for children with autism;
- Tuition in painting, ceramics, wood carving, pottery, music and sport.

The staff achieved enormous success in challenging negative attitudes towards persons with disabilities. They brought hope to patients and their families by providing long-term practical and emotional support. They restored a level of independence that helped individuals experience a fulfilling life.

Since their forced displacement from Nagorno Karabakh, staff and patients no longer have access to the Lady Cox Rehabilitation Centre. They aspire to re-establish the Centre in their resettlement country, Armenia.

TOP: In September 2023, more than 100,000 people fled from Nagorno Karabakh to Armenia (Photo by Siranush Sargsyan, CSI).

Challenges

What are the challenges facing refugees in Armenia?

The arrival of 100,000 refugees from Nagorno Karabakh places significant pressure on support services provided by the Armenian Government and international aid organisations.

Challenges include:



Aid

Refugees fled their homes with little-to-no belongings. Many are traumatised and in urgent need of psychosocial support and emergency assistance.



Income

Armenia has struggled with high unemployment for decades (about 11 per cent in 2023).² The further away refugees are based from the capital, the harder it will be to find jobs.



Housing

Even before the arrival of 100,000 refugees, Armenia faced a housing crisis. The lack of affordable housing in Yerevan, the capital, is likely to push refugees into remote towns and villages, where rent prices are lower but lodgings have fewer utilities.¹



Education

30 per cent of the refugees are children, a third of whom are under the age of six. The education system in Armenia is under-resourced and overstretched.³

“People with highly-complex needs have fled to Armenia in their thousands. There is now an urgent need to provide bespoke, accessible humanitarian assistance. Generic aid packages for food and NFIs [non-food items] will not go far enough to meet each individual’s complex needs.”

Sam Mason, Chief Executive of Humanitarian Aid Relief Trust (speaking in September 2023)

What are the additional obstacles facing refugees with disabilities?

Throughout the former Soviet bloc,⁴ persons with disabilities suffered discrimination, poverty and social exclusion. They were dismissed as ‘invalids’ and frequently side-lined from public life.⁵

Progress in this area has been made since Armenia gained independence in 1991.⁶ Yet persons with disabilities remain one of the country’s most disadvantaged groups.

Obstacles include:

- **Unsatisfactory rehabilitation services** due to limited State funding, lack of professional staff and an overburdened support services system overall.⁷
- **Insufficient number of community-based services** for people with psycho-social and intellectual disabilities; they have limited alternatives to receiving treatment in mental health institutions (where they may be confined for long periods of time) or they receive no support at all.⁸
- **Insufficient number of rehabilitation services for children with multiple or severe disabilities.** Most services are not provided regularly or continuously and do not offer the full scope of specialised treatments, such as physiotherapy, speech therapy and psychology.
- **Restricted access to education** (few schools are accessible for children with physical disabilities), compounded by inaccessible infrastructure, which contributes to a low employment rate.⁹ Textbooks, learning materials and programmes are rarely tailored to needs.¹⁰ Parents are also concerned by the lack of assistive devices for children with multiple disabilities and deafness.¹¹
- **Restricted access to cultural venues,** sport and leisure facilities, public transport and built infrastructure (including court buildings, polling stations and mental health centres), which lack basic physical accessibility standards.
- **Inadequate and precarious living arrangements,**¹² such as inaccessible bathrooms, or no lifts or ramps for those using wheelchairs or crutches.
- **Continuing stigma and social exclusion;** a hangover from Soviet rule.



Karen (pictured) is paralysed and benefits from day-to-day care from his elderly parents. They pay \$500pm to live on the second floor of a block of flats, which is a building site with no lifts or ramps.

Among the refugees who fled from Nagorno Karabakh to Armenia in September 2023, around 6,000 are adults with disabilities and 3,000 are children with disabilities. They face disproportionate risk of abandonment and experience reduced access to essential services.

Additional obstacles include:

- **Emotional trauma** caused by a sudden change in their environment or loss of their usual caregiver.
- **Reduced family income**, making it harder to pay for heating in the winter and essential items, such as catheters, dressing materials, pressure relief mattresses, medical bed linens and adult nappies.
- **Delays or cancellation of care** due to long hospital waiting lists¹³ or mobility restrictions – some rural areas do not have ambulances to transport patients.¹⁴
- **Restricted access to rehabilitation services**, assistive devices and support networks.¹⁵

A significant gap exists between the need for holistic care and the number of services available to meet this need. Armenia's current rehabilitation centres cannot serve the demand.

“Not one person in Armenia thinks we have enough rehabilitation centres or in-home services for people with disabilities. Existing services cannot meet the high demand. This was the case even before the arrival of refugees.”

Vardan Tadevosyan, Director of the Lady Cox Rehabilitation Centre

When Vanya's family fled to Armenia, they were unable to bring his wheelchair. They quickly sourced a replacement (pictured) but it is uncomfortable and not customised to his needs. Vanya therefore stays in his bed for extended periods of time, which increases the risk of developing pressure sores.



Response

The Government has pledged to integrate displaced families into the Republic of Armenia – all refugees from Nagorno Karabakh are eligible for Armenian citizenship. Adults received a one-off payment of \$250 USD. They also received a monthly stipend of \$185 USD from October 2023 to March 2024. We have heard mixed reports about whether or not these payments will continue.

Housing

Most refugees have chosen to settle far away from the country's borders. Around 50 per cent live in Yerevan and another 30 per cent in the vicinity, where local authorities say there are far more refugees than available housing.¹⁶



The Government hope to ease the pressure on housing by incentivising refugees to settle in rural areas, away from the capital.

Ministers have drawn up plans to finance the purchase or construction of homes, where rent and land prices are lower than in towns and cities.¹⁷ However, rural areas have poor utilities' connections and require many layers of investment. The further away refugees are based from Yerevan, the harder it will be to find employment.

Any housing scheme should be sensitive to the reality that refugees are traumatised by ethnic cleansing from their homeland.

They continue to experience fear, uncertainty, anger and lack of trust. Many would prefer not to settle in rural areas, especially border regions that are vulnerable to further military attack. Others, however, would prefer to settle in rural areas similar to their living arrangements in Nagorno Karabakh, which might increase their chance of finding work to match their skills. In either case, the State should take time to gather and process information on the concerns, aspirations and proficiencies of refugees.



Disability equality

The Government has made considerable efforts to bring its legislation and policies in line with the standards and requirements of the UN Convention on the Rights of Persons with Disabilities.¹⁸ Recent initiatives include a package of disability-protection reforms (2014-17) and legislation on the Rights of Persons with Disabilities (2021).



Armenian law guarantees, in theory:

- Independent living;
- Reasonable accommodation;
- Access to services;
- Access to justice and equal rights.

The law also bans disability-based discrimination and treats refusal to provide reasonable accommodation as discrimination. Legal guarantees are reinforced by positive rhetoric and promises to construct the country's first of six Independent Living Centres for persons with disabilities,¹⁹ in addition to the State and non-State services that already exist.

These are steps in the right direction. However, good legislation and positive rhetoric have not resulted in meaningful outcomes for all. Many persons with disabilities continue to encounter significant barriers - physical, institutional and attitudinal.²⁰ The Government is unable to transform the law's standards into reality.

TOP: During a meeting with Narek Mkrtychyan, Minister of Labour and Social Affairs, we advocate on behalf of the staff and patients of the Lady Cox Rehabilitation Centre, accompanied by Kevork Kepenekian, a urologist at Merieux Foundation (Photo by MLSA).

Your Impact

Your support for Humanitarian Aid Relief Trust (HART) enables us to stand alongside the staff and patients of the Lady Cox Rehabilitation Centre.

Together, we:

- Increase the independence and happiness of persons with disabilities;
- Eliminate barriers to basic services;
- Provide advice and support to caregivers and families.
- Utilise the skills and knowledge of dedicated rehabilitation specialists.
- Advocate for the principles of holistic person-centred care.

Since the ethnic cleansing of Nagorno Karabakh, we have prioritised support for the most vulnerable people.

Our current areas of operation are:

- 1 Home visits
- 2 Specialised burn care
- 3 Food security
- 4 Home renovation



“HART has been by our side continuously since the Centre was founded in 1998. It has been our main source of encouragement and the driving force behind our mission. Your support has helped us to provide lifechanging care to thousands of people with disabilities.”

Vardan Tadevosyan, Director of the Lady Cox Rehabilitation Centre

1

Home visits

Staff of the Lady Cox Rehabilitation Centre have adapted quickly to ensure the continuation of care for their patients. This includes people with autism, down's syndrome and cerebral palsy, as well as stroke survivors and amputees.

With financial support from HART and Christian Solidarity International, the Centre's staff visit 150-200 patients each month to provide service users with medical supplies and therapeutic care. Each beneficiary receives a bespoke healthcare programme designed by a rehabilitation physician, psychologist, speech therapist, physiotherapist, nurse and/or social worker.

This is the only Home Visits division (that we are aware of) for persons with disabilities in Armenia. If a similar service is being provided by either the State or an NGO, then it is not widely known to refugees from Nagorno Karabakh.



TOP LEFT: Hermine has Global Development Delay. She has settled with her family in Haykavan, where she benefits from monthly visits by staff of the Lady Cox Rehabilitation Centre.

BOTTOM LEFT: Edik's left ear was cut off by Azerbaijani soldiers in 1988. He suffered a spinal cord injury during the First Nagorno Karabakh War in 1992. "Nurses come to support people like me in Armenia, like they did when I was in Karabakh. This is a huge support because my family cannot afford supplies. Without help from the Centre, we would have to spend our pensions to get what we need."

RIGHT: Narine suffered a spinal cord injury at a young age. Your support for HART ensures she has continuing access to rehabilitation services, hygiene kits and medical supplies.

2

Specialised burn care

On 26 September 2023 – during the mass exodus of civilians – a fuel explosion killed at least 218 people and injured hundreds more. Victims had been queueing at an overwhelmed petrol station, desperate to leave Nagorno Karabakh after military violence by Azerbaijan.

Armenia's Burn Centre in Yerevan is a State-run facility that usually caters for one or two patients per week. Following the fuel explosion in Nagorno Karabakh, 20-30 patients are treated daily.

As the facility does not have the funding or staff to cope with the demand, specialists from the Lady Cox Rehabilitation Centre have stepped forward to fill the gap.



The therapy team from the Lady Cox Rehabilitation Centre carry out their intensive work in the outpatient department of the Burn Centre in Yerevan, supporting victims of the fuel explosion.

3

Food security

Before the mass exodus of civilians, Azerbaijan imposed a ten-month blockade of the Lachin Corridor. Armed military units stopped traffic in both directions, which prevented residents in Nagorno Karabakh from accessing essential goods and services. The flow of humanitarian cargo came to a complete halt.

HART warned at the time that life-saving supplies were “stretched beyond breaking point in Nagorno Karabakh... residents are on the brink of humanitarian catastrophe and fainting in the streets from hunger.”²¹

Azerbaijan lifted the blockade in September 2023, but only to allow traffic in one direction: the forced displacement of over 100,000 people. They arrived in Armenia hungry and exhausted, in urgent need of humanitarian assistance.



Slavik, aged 63, fled to Armenia with his three grandchildren. They arrived hungry and exhausted. Thanks to your support, he received essential food and hygiene supplies.

HART launched a partnership with the Tekeyan Centre Fund (TCF) to support refugees in Armenia. Between October 2023 and February 2024, TCF distributed 36,000kg of food and hygiene sets to 900 families.



Seda Khachatryan, Projects Manager of Tekeyan Centre Fund, prepares essential food supplies for refugees.



“Families fled from Nagorno Karabakh to escape death, war and hunger. Thanks to HART, families received food and hygiene items for their first months of displacement in Armenia. It might seem like a drop in the ocean, but people need this support to start a new life.”

Armen Tsulikyan, Director of Tekeyan Centre Fund



20-30 burn patients treated each day



150-200 home visits each month



36,000kg of food and hygiene sets to 900 families

4

Home renovation

Homeless refugees seek safe and affordable accommodation. Rent prices are lower outside of Yerevan, but a large portion of the affordable housing stock is in a bad condition.

Common housing problems include:

- Insufficient energy insulation (roofs, windows, walls);
- Poor condition of gas, water and sewerage systems;
- Unhygienic conditions of bathrooms and kitchens;
- Inaccessible environments for persons with disabilities.

In November 2023, we partnered with TCF to trial a home-renovation project in Kotayk region. With your support, two buildings have been transformed: one single-family cottage; and one building large enough to house six families. Accommodation is provided rent-free for a three-year period, allowing time for families to earn an income and re-build their lives in Armenia.

The land connected to each property offers opportunities for cultivation. Residents are equipped with farming tools, poultry and seeds to increase their independence and long-term financial stability.



The Tekeyan Centre Fund renovates a small cottage in Nor Artamet village, Kotayk Province, for the Danielyan family, who lost their son and son-in-law during the 2020 war in Nagorno Karabakh. The family can live here without paying any rent for three years.



Next Steps

There is a clear need to increase the delivery of community-based and in-home services. Alongside humanitarian assistance for refugees in general (in partnership with the Tekeyan Centre Fund) we will prioritise support for persons with disabilities (in partnership with the Lady Cox Rehabilitation Centre).

What is the vision?

An Armenia where everyone is valued and treated equally.

We strive to play our part in meeting the needs of persons with disabilities - to maximise their comfort and, wherever possible, increase their independence to help them experience a fulfilling life.



“After we fled from Nagorno Karabakh, our patients found themselves in a difficult situation. They do not have good living conditions or proper financial means. They are in a difficult psychological state. That is why our support is absolutely necessary. The Rehabilitation Centre is always next to them.”

Narine Avanesyan, Nurse

TOP: Vardan (left) says: “Our vision is created and shared with people who draw on, work in, and provide care and support. It is a vision for all of Armenia, not only the displaced people of Nagorno Karabakh.”

Which possible operating models could be implemented to achieve the vision?

• Social model of disability

We adopt the social model of disability. This means we believe people are disabled by barriers in society (physical, institutional and attitudinal) - as opposed to the medical model of disability, which suggests people are disabled by their impairments and differences.²² The social model helps us identify obstacles that make life more difficult for persons with disabilities. When we remove these obstacles, we increase independence and participation in education, work, homelife and recreation.²³ It creates equality.

• Local partnership

We place special emphasis on responding to humanitarian crises at the local level and strengthening collaboration with humanitarian actors. Locally-led solutions build confidence and capacity within communities to tackle the challenges they are facing. Their involvement promotes long-term, sustainable change.

For over two decades, we have cultivated a strong partnership with the staff and patients of the Lady Cox Rehabilitation Centre. We believe they are best placed to identify, understand and fulfil their own needs. They should be at the helm of their own development.

Vardan Tadevosyan, the Centre's Founder and Director, advocates on behalf of his staff and patients. He has a firm understanding of their concerns and aspirations, which are reflected in our shared vision (page 14).

• Sensitivity in decision-making

Vardan engages frequently with stakeholders (caregivers, service users, other rehabilitation centres, potential donors and government bodies) whose viewpoints are required to ensure agreement over the best way forward.

He recognises the importance of acting swiftly to retain top talent and for the sake of his patients' wellbeing. He also understands the need to develop programmes in a sequential manner - one step at a time - to guarantee we have the resources to build the required capabilities.

• Continuation of home visits

The Centre's primary operating model is already underway: the Home Visits project. The project existed in Nagorno Karabakh for several years before the forced displacement of civilians, so staff have a clear grasp of what is required. The project is necessary because patients who require in-person assistance can no longer visit the Centre (it is located behind a closed border); they are displaced in different locations across Armenia, without meaningful access to State-run or other services.

The Home Visits project is an important first step to achieving our vision. It chimes with the priorities of the Government, who are trying to change Armenia's approach to disability rehabilitation: from long-stay institutions that segregate persons with disabilities to the development of community-based services that offer flexible and personal assistance.

On its own, however, the Home Visits model cannot meet the complex needs of refugees with disabilities - many of whom would benefit from visiting a Rehabilitation Centre to improve their quality of life, for example: day-care for children with additional learning needs; hydrotherapy to reduce discomfort and increase or maintain functional ability and activity; an inpatient facility for people with conditions like stroke or traumatic brain injury, who require an intensive rehabilitation programme. These services exist in Armenia but they are either unsatisfactory or overburdened.



Rehabilitation Centre

Vardan Tadevosyan is exploring the possibility of establishing a new Rehabilitation Centre to close the gap between patients' needs and access to services. A project like this is no small undertaking. We are committed to partnering with him every step of the way.

A new Centre would need to be located:

- Where there is a need;
- Where no other disability rehabilitation centre exists;
- Within a community outside the remit of the Government's proposed Independent Living Centres;
- Where many refugees with disabilities have chosen to settle;
- With good roads and easy access for staff, service users and their families;
- Either in a town, or very close to the edge of a town, with feasible utilities' connections.

Vardan is in the process of reviewing one property that meets this criteria. It is a medium-sized guest house, donated and rent-free for a fixed period, that would require renovation before serving patients' needs. Alongside the Home Visits project, the guest house would provide essential physiotherapy, occupational therapy, speech therapy and psychology.

Vardan has also been approached about a plot of land, donated and rent-free, that is a short walk from the guest house.

He is in consultation with LOOK Architectural Company, as the land appears to be a reasonable location to construct a new Rehabilitation Centre. This would be a large-scale project, with space for 18 in-patients, therapy rooms, a hydrotherapy pool, an art classroom and conference centre for continuous education. Once the Centre is established, the guest house would become a dedicated Day-Care Centre for children with autism.

TOP: Staff of the Lady Cox Rehabilitation Centre are among the country's most highly-qualified specialists.

Morale and identity

A new Centre would represent a beacon of hope to the displaced population.

Having been forced to flee their homeland, the Centre would become a tangible and reassuring symbol of their heritage - rooted in the values of compassion, dignity and quality of care. It would help to preserve the refugees' cultural identity and keep alive a sense of Artsakh (the local name for Nagorno Karabakh). This is especially important for persons with disabilities as they experience limited opportunities to forge new lives and new identities in Armenia.

Plans to re-establish the Lady Cox Rehabilitation Centre

Phase 1



Home Visits

Phase 2



Home Visits



Treatments*

Phase 3



Home Visits



Day-care**



Rehabilitation Centre



ABOVE: Vardan Tadevosyan shares concept designs for a new Rehabilitation Centre in Armenia.

The three phases are not fixed. Plans may change according to circumstances.

* *Treatments: Physiotherapy, Occupational Therapy, Speech Therapy, Psychology*

** *Day-Care Centre for children with autism*

Beyond a Rehabilitation Centre

Over a 25-year period in Nagorno Karabakh, the Lady Cox Rehabilitation Centre developed into an internationally-recognised Centre of Excellence. It became a regional leader, with limited resources, to which other centres looked to model their approach.

“Vardan and his team have a proven track record of increasing the independence and happiness of persons with disabilities. It is within their capability to achieve the same in Armenia.”

Dr John Eibner, Christian Solidarity International

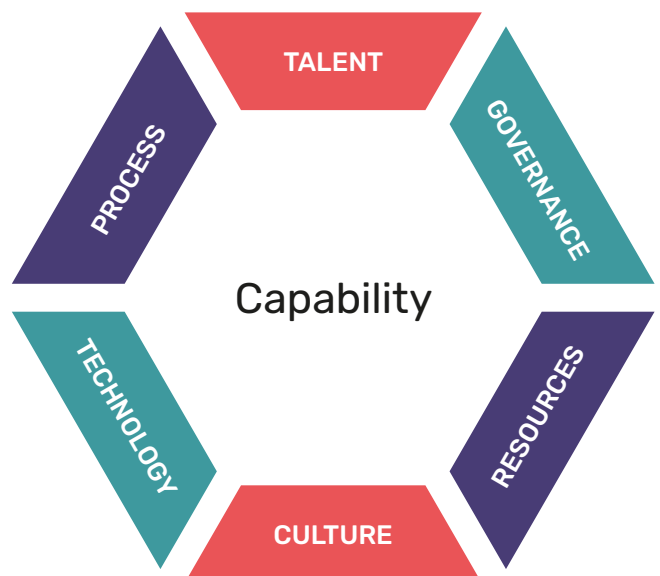
A new Centre would replicate these world-class standards. It would become a focal point for professional development and a catalyst for widening good practice in the areas of accessibility and rehabilitation.

Further steps to achieving our vision include:

- The roll-out of the Home Visits project to boost de-institutionalisation and serve higher numbers of people within their communities;
- Increased learning opportunities for nurses and therapists across Armenia to refine their competencies;
- An inclusive kindergarten suitable for any child, including children with disability, autism or other additional learning needs;
- ‘In-between’ cottages for families to live in for short periods of time, to demonstrate how their homes can be adapted to improve the quality of life of persons with disabilities.

Which capabilities are required to implement each operating model?

- **Talent (competencies and skills):**
Experienced nurses, doctors and therapists.
- **Governance (roles, policies and compliance):**
Operational requirements, accessibility regulations, accountability and continuing education.
- **Resources (material requirements):**
Land, building, vehicles and equipment.
- **Culture (attitudes, values and conversations):**
Holistic person-centred care.
- **Technology (software, hardware and other tools):**
IT capabilities.
- **Process (set of activities that drive outcomes):**
Bespoke assessment, treatment and management by which an individual is supported to achieve their maximum potential for physical, cognitive, social and psychological function, participation in society and quality of living.





"We need to collaborate. We are always here. We are here 24/7." Narek Mkrtychyan, Minister of Labour and Social Affairs (right) speaks to Vardan Tadevosyan about designs for a new rehabilitation centre in Armenia.

What are the options to acquire each of the required capabilities?

- **Employment** i.e. hire and train own professionals as opposed to contracting to buy-in services or over-dependence on volunteers.
- **Charitable gifts** such as the guest house, rent-free for a fixed period, and the donated plot of land.
- **Grants** from international trusts and foundations.
- **Fundraising** including from the Armenian diaspora, individual donors and organisations who share our commitment to disability equality.
- **Government-backed finances** to maximise collaboration, to ensure support for the construction/renovation of buildings, and to provide long-term operational development.

"My team is our greatest resource. Their presence in Armenia, their high-level experience, and their commitment to disability equality mean we already have the capability to serve. The capability is already here. We just need the investment."

Vardan Tadevosyan, Director of the Lady Cox Rehabilitation Centre

Recommendations

Disability equality remains an aspirational goal for the Armenian Government. Yet most services are not provided regularly or continuously and do not offer the full scope of specialised treatments. There is limited access to high-quality care.

We urge the Government and international stakeholders to:

- **Support the re-establishment of the Lady Cox Rehabilitation Centre** with a sufficient budget to ensure long-term operational development.
- **Consult and actively involve staff and service users** of the Lady Cox Rehabilitation Centre in the implementation and monitoring of emergency relief for persons with disabilities.
- **Provide refugees from Nagorno Karabakh with an adequate standard of living** and full access to basic services – with additional support for persons with disabilities, including access to information, support networks and assistive devices.
- **Accelerate efforts to close or reform long-stay institutions** that segregate persons with disabilities from their communities.
- **Prioritise the development of community-based services**, such as the Home Visits project, which offer flexible and personal assistance.
- **Establish monitoring mechanisms** with the involvement of persons with disabilities to improve accessibility standards.²⁴
- **Whilst integrating displaced families from Nagorno Karabakh**, ensure the preservation of their distinct cultural identity.

“The State should ensure a favourable environment for the establishment and operation of organisations representing persons with disabilities.”

UN Partnership on the Rights of Persons with Disabilities, Situational Analysis in Armenia (November 2022)

Terminology

We use the name Nagorno Karabakh throughout this report, which is known locally as Artsakh.

We use person-centred language (e.g. persons with disabilities) to emphasise the person not the disability.

When referring to persons with disabilities, we avoid dis-empowering language such as ‘suffers from’, ‘a victim of’, ‘confined to’, ‘afflicted with’. We also try to avoid medical labels such as ‘patient’, unless the person is under medical or rehabilitative care.

References

1. Habitat for Humanity, 'Housing poverty in Armenia', see www.habitatforhumanity.org.uk/country/armenia as at 19 April 2024.
2. Azatutyun.am, 'Record-Low Unemployment Recorded In Armenia', 24 January 2024.
3. Access to early-childhood education is identified as a critical need under the Refugee Response Plan (October 2023 - March 2024) coordinated by the Armenian Government and the United Nations.
4. Armenia was under Soviet rule for 71 years, from 1920-1991.
5. "The invalids in the post-war period... were left to the mercy of fate, people were ashamed of them, turned away from them, hid them with an unpleasant feeling of guilt and a sense of the ugliness of life - everything was done to keep them out of the official gala picture of peace-time life", according to Gudkov, Lev (2005) *The Fetters of Victory: How the War Provides Russia with its Identity*, *Neprikosnovennij Zapas* 40-41, page 4.
6. For example, the Law on Social Protection of Persons with Disabilities (1993); the National Strategy for Social Protection of Persons with Disabilities (2005); ratification of the UN Convention on the Rights of Persons with Disabilities (2010); a package of disability-protection reforms (2014-17); the Law on the Rights of Persons with Disabilities (2021); a revised disability assessment system (2023); efforts to implement personal assistant services (2024).
7. Written Submission by the Disability Rights Agenda and the European Disability Forum on the Status of Institutionalisation of Individuals with Disabilities in Armenia, 8 October 2023.
8. Situational Analysis of the Rights of Persons with Disabilities: Armenia: Country Brief, United Nations Partnership on the Rights of Persons with Disabilities (UNPRPD), November 2022.
9. All levels of the education system face challenges, such as the lack of physical accessibility, transportation support and assistive devices, insufficient availability of textbooks and curricula adapted to children with additional needs, and lack of access to arts and cultural activities led by specialists skilled in working with children with additional needs.
10. Op cit, UNPRPD Country Brief, November 2022.
11. Loc cit.
12. Rural areas in particular face a shortage of medical professionals, equipment and supplies, see: Open Letter by the European Disability Forum, 'Nagorno-Karabakh: Protection and Safety of Persons with Disabilities', 18 October 2023; Project Hope, 'Urgent Health Needs of Refugees in Armenia', 18 October 2023.
13. State institutions caring for the elderly and persons with disabilities have seen a 25 per cent rise in residents since the refugee crisis, according to Mushegh Hovsepyan from Disability Rights Agenda, see: International Crisis Group, 'Armenia Struggles to Cope with Exodus from Nagorno Karabakh', 4 March 2024.
14. Sahakyan S, Muradyan D, Giloyan A, et al. (2024) 'Factors associated with delay or avoidance of medical care during the COVID-19 pandemic in Armenia: Results from a Nationwide Survey', *BMC Health Service Research* 24, Article no. 20.
15. Op cit, Open Letter by the European Disability Forum, 18 October 2023.
16. Op cit, International Crisis Group, 4 March 2024.
17. Reports suggest that funds for refugees to finance the purchase or construction of homes could be set at 3 million AMD (about \$7,400) per person, so a family of four would receive 12 million AMD.
18. The Ministry of Labour and Social Affairs (MLSA) is mandated to oversee the implementation of the UN Convention on the Rights of Persons with Disabilities. The Office of the Human Rights Defender is mandated to hold the MLSA to account, as well as to prevent violations of the rights of persons with disabilities and offer them protection.
19. During our meeting with the MLSA, the Minister of Labour and Social Affairs shared plans to construct six state-funded Independent Living Centres, starting with a Centre in Metsamor, east of Yerevan. Initial estimates suggest it will take two or three years to construct and cost 1.5 billion AMD (about 3.8 million USD).
20. For example, the law on the Rights of Persons with Disabilities (2021) says that all public and industrial buildings should have been reconstructed by now to ensure accessibility for persons with disabilities. Yet inaccessible buildings continue to be built with State funds. The pre-school education law (2020) says that services should have been updated to improve access to education. Yet physical inaccessibility remains a problem.
21. HART Press release, Humanitarian Supplies 'Stretched Beyond Breaking Point' in Nagorno Karabakh, 20 September 2023.
22. Under Soviet rule, the medical model of disability was taken to its extreme. Persons with disabilities suffered discrimination, poverty and social exclusion. They were dismissed as 'invalids' and frequently side-lined from public life.
23. As emphasised by Scope, the disability equality charity in England and Wales.
24. Such as ISO-21542 on the usability and accessibility of the built environment, which is aligned with the European Standard EN-17210.



Vanya, a chess champion with cerebral palsy from Nagorno Karabakh, wins his match against HART's CEO Sam Mason.

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