United Nations Armenia Country Team Report prepared in accordance with paragraph 15(B) of resolution 5/1 of the Human Rights Council
For the Second Universal Periodic Review of the Republic of Armenia

I. INTRODUCTION

This report is a joint undertaking of the United Nations Country Team (UNCT) in Armenia for the period of second half of 2010 to mid-2014. It does not aim to be exhaustive but rather will highlight the main issues, which are addressed by the UNCT work in the country through Agencies' mandates. UNDP, UNICEF, UNHCR, UNFPA, OHCHR and WHO have contributed towards preparation of this report.

To strengthen its coordinated work in the human rights sector and in particular in the UPR process UN Armenia Office established in 2013 an internal Human Rights/UPR working group including respective UN Agencies represented in Armenia and supported broad consultations with participation of state institutions, civil society actors, HRDO and UN Agencies to discuss and analyze the situation, define the priorities and objectives, discuss mechanisms for implementation, etc. In addition broad based awareness raising seminars on UPR were conducted in the regions of Armenia for the CSOs and media representatives.

II. BACKGROUND AND FRAMEWORK

Scope of international obligations: Since gaining its independence in 1991, Armenia has been a signatory and has ratified more than 50 main International Human Rights Conventions and Protocols. In the period between the first and second cycles of UPR, Armenia ratified the Convention on the Rights of People with Disabilities in September 2010 and the International Convention for the Protection of All Persons from Enforced Disappearance, in January 2011; however, ratification of the Convention on Protection of the Rights of All Migrant Workers and Members of Their Families is still pending.

Accepted in May 2010 UPR recommendation to sign and ratify the 2nd Optional Protocol to the International Covenant to the Civil and Political Rights, aimed at abolishing the death penalty, the Protocol has not been signed or ratified by the time of this writing. In 1991 Armenia introduced moratorium on execution of death penalty, and abolished it in 2003 replacing with life imprisonment for all crimes.

Another related recommendation - to ratify the Rome Statute of International Criminal Court (ICC) - was also accepted, however in its midterm report the Government cited constitutional obstacles as a reason for not ratifying the Rome Statute. At this point, the Government has launched a new cycle for constitutional reforms, however, the final outcome of the reform process is under discussion.

The Republic of Armenia is one of the first republics of the former Soviet Union to ratify the *1951 Refugee Convention* and its *1967 Protocol* in 1993. Armenia also acceded to the *1954 Convention relating to the Status of Stateless Persons* and the *1961 Convention on the Reduction of Statelessness* in 1994. The first domestic refugee legislation was adopted in 1999, and has been subject to amendments since. The latest revised *Law on Refugees and Asylum,* which entered into force in 2009, incorporates most of the basic principles of refugee protection enshrined in the *1951 Convention*. However, there are also a number of deficiencies: for example, refugee status and asylum are defined as two distinct concepts, in a rather confusing manner; exclusion, cessation, cancellation, and revocation are also used interchangeably; and the specific situation of various vulnerable groups is not taken into account[1]. In 2014, the Government has reiterated its commitment to align national legislation in the field of migration more closely with that of the European Union.

Armenia acceded to the Convention on the Rights of the Child in 1992. The accession and subsequent ratification of the Convention set the start of the process of reforming legislative framework in the newly independent country as well as paved the way for the child care reform. The concluding observations by the Committee on the Rights of the Child (2013) acknowledged the amendments and supplements to the Law on the Rights of the Child (18 November 2009, 25 October 2010 and 23 May 2011) and to the Family Code (9 November 2004) including provisions on protection of the rights and legitimate interests of children. Armenia has

[1] At the first session of the UPR in 2010, Armenia accepted the recommendation to "continue its efforts to address discrepancies in the enjoyment of rights by vulnerable groups, including children with disabilities, refugee children and children living in rural areas" (para 93.15 of the Report of the Working group on the UPR)

ratified the Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography in June 2005 and the Optional Protocol on the involvement of children in armed conflict in September 2005. In 2010 September Armenia ratified the International Convention on the Rights of Persons with Disabilities. The Committee also welcomed the ratification of The ILO Convention No 182 concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labour and The ILO Convention No138 concerning Minimum Age for Admission to Employment in January 2006.

In March 2007 Armenia ratified the Hague Convention (No 34) on Jurisdiction, Applicable Law, Recognition, Enforcement and Cooperation in respect of Parental Responsibility and Measures for the Protection of Children and the Hague Convention (No 33) on Protection of Children and Cooperation in respect of Inter-country Adoption. In April 2008 Armenia ratified the Council of Europe Convention on Action against Trafficking in Human Beings. Despite the improvements in the legal framework relating to children's rights, the concluding observations by the Committee (2013) sees that the delayed adoption of some of these draft legislations has harmed the full and effective realization of children's rights in many areas. The Committee is also concerned about the inadequate implementation and enforcement of existing laws and regulations in the area of children's rights due to the lack of financial, technical and human resources.
Though Armenia is party to more than 50 Human Rights Conventions and Protocols, in general, awareness of International Human Rights Instruments and country's HR obligations is very low among the respective national institutions, including the judicial and law enforcement sectors. As a rule, the provisions of the UN HR Treaties are not referred to or applied in the court decisions.

Constitutional and legislative framework: The 2005 Constitution contains in its second Title, a Chapter on Fundamental Human and Civil Rights and Freedoms, which is articulated in 34 articles. In September 2013 the second round of Constitutional reforms was initiated in Armenia, the Human Rights section in line with others is subject to significant amendments. However, still public hearings and discussions of the first draft amendments are in process.

"The Concept of Gender Policy in the Republic of Armenia" has been approved by Government of the RA on February 11, 2010. On 20 May 2011, the Government adopted Registered Decision No. 19 "On the Approval of the Strategic Gender Policy Programme of the Republic of Armenia for 2011–2015". On May 20, 2013 the National Assembly of Armenia adopted the law "On Ensuring the Equal Rights and Equal Opportunities of Women and Men," as an important step to advance gender equality in compliance with CEDAW recommendations. This step was followed by an aggressive campaign launched by certain NGOs against the concept of "gender".
With the support of civil society organisations the Ministry of Labour and Social Affairs of the RA developed and submitted to the Government the draft law "On Domestic Violence" in 2013, however, it was shelved pending further discussion on the practicality of adoption of a separate law or inclusion of relevant chapters as amendments and supplements to the Criminal Code, the Criminal Procedure Code, Administrative Procedure Code and Code on Administrative Infringement of the RA as stipulated by 2012-2016 Strategic Programme of Legal and Judicial Reforms.

Institutional and human rights infrastructure and policy measures: The Human Rights Defender's Office (HRDO) in Armenia was established in 2004, as per Republic of Armenia Law on Human Rights Defender, adopted on October 21, 2003. The office was re-accredited to A status in May 2013. The HRDO has been recognized as an Independent National Preventive Mechanism (NPM) under the Optional Protocol to the Convention against Torture and Other Cruel, Inhuman and Degrading Treatment and Punishment (by Amendment to the Law of RA "On Human Rights Defender" in 2008).
The HRDO appointed in 2011 a focal point responsible for monitoring, protecting and promoting the rights of children in the HRDO, however, the public and children in particular, do not seem to be aware of the individual complaints mechanism of the HRDO. In 2013 the HRDO strengthened its regional presence by opening 6 regional branches with support of the OSCE and EU Delegation to Armenia Offices. In 2014 the HRDO received state budget allocation sufficient to keep functional only 3 regional offices, hence the other 3 were closed. The educational mandate of the HRDO is still realized on a low scale and needs to be strengthened.

Policy measures: In June 2012 the President of RA approved the Strategic Programme on Legal and Judicial Reforms 2012-2016. In April 2013 the Prime Minister approved the 2014-2017 Action Plan on implementation of the National Strategy on Human Rights Protection. Armenia has developed institutional and policy measures relating to the protection an promotion of the rights of the child: the National Programme for the Protection of

Children's Rights for 2013-2016; the Programme of State Support to Graduates of Child Care Institutions for 2004-2015; and the Programme on deinstitutionalization of children for 2004-2015.

The Ministry of Labor and Social Issues (MoLSI) developed a Policy Concept on Determining Disability based on Multi-Dimensional Assessment in line with WHO International Classification of Functioning, Disability and Health (ICF) which was approved by the Government in January 2014 and recognized as one of the three top priorities for MoLSI in 2014.
While Armenia reported through its Permanent Mission in Geneva on the development by the GoA of the Human Rights Education Action Plan for the School System (developed with support from UNDP in 2012), the Plan is pending formal adoption of the Ministry of Education and Science due, among other, to insufficient allocations from state budget for its implementation.

III. PROMOTION AND PROTECTION OF HUMAN RIGHTD ON THE GROUND

Cooperation with human rights mechanisms: Armenia submitted all of its overdue reports under international treaty bodies by 2013. Armenia extended a standing invitation to all Special Procedures since 1 May 2006; since then, two visits were undertaken by Special Procedures to Armenia: the Special Rapporteur on the situation of human rights defenders (2010) and the Working Group on Arbitrary Detention (2010).

Implementation of international human rights obligations:

1. Equality and non-discrimination

Up to now, there is no comprehensive legislation on discrimination in Armenia. In 2013 the HRDO prepared a draft Law on Anti-discrimination, however, this triggered a strong opposition from various groups including within the Government, and the draft was shelved for an uncertain period. To address this controversy, the Human Rights Action Plan 2014-17, includes the following steps as an entry point: *"Study the compatibility of the legislation of the Republic of Armenia with the norms of international law relating to the prohibition of discrimination and Discuss the appropriateness of adoption of a separate law "On the Fight against Discrimination".*
Manual on Human Rights and Tolerance was introduced in 2013 in the middle school (5-9th grades); the one for the high-school will be introduced in September 2014. Both Manuals were developed with support of UNDP and endorsed by the Ministry of Education and Science; they include lessons on human rights, diversity, dignity, environmental protection, tolerance, respect for plurality and other related issues.

(i) Rights of People with Disabilities

Achievements and best practices: The Ministry of Labor and Social Issues (MoLSI) developed a Policy Concept on Determining Disability based on Multi-Dimensional Assessment in line with WHO International Classification of Functioning, Disability and Health (ICF) which was approved by the Government in January 2014 and recognized as one of the three top priorities for MoLSI in 2014.
Main issues/gaps: More than 180,000 people with disabilities live in Armenia today. According to official data, 8,000 of them are children. But the data of the United Nations Children's Fund (UNICEF) suggest that the number of children with disabilities may reach up to 12,000, as in some cases children's disabilities are simply not registered. A UNICEF research shows that 33 percent of children with disabilities do not engage in community life. People with disabilities still face intolerant attitude in the society and have extremely limited opportunities in almost all spheres of life. They are deprived of access to facilities and opportunities thus being unable to fully exercise their constitutionally guaranteed rights to education, work, free movement, etc. Though the Inclusive education system is widely implemented in the school education system, young people with disabilities have no possibilities to be involved in the tertiary education. People with disabilities are almost deprived of employment opportunities because of the limited or no possibility for physical access to the working space and no interest of the employers to hire them.
Recommendations: *(i) Introduce a comprehensive national framework against discriminatory practices towards various groups of population, including women, religious minorities, LGBT, people with disabilities, people living with HIV/AIDS, etc. (ii)* Strengthen human rights and tolerance education in the school system through active application of the HR/tolerance curriculum. (iii) Create possibilities for young people with disabilities to exercise their right for education in both school and tertiary education systems. (iv) Introduce a strong incentive/exemption system for employers and improve the legislative framework to allow equal opportunities of employment for people with disabilities.

(ii) Gender Equality

Achievements and best practices: During the reporting period the Government of Armenia adopted several important documents aimed to advance gender equality: the Gender Policy Concept Paper in February 2010, 2011-2015 Gender Policy Strategic Program of RA and 2011-2015 Strategic Action Plan to Combat Gender-Based Violence of the RA with their relevant annual plans. In May 2013, the National Assembly adopted the Law "On Equal Rights and Equal Opportunities of Women and Men in Armenia".
Prime Minister established the National Inter-Agency Committee to Combat Gender-Based Violence in Armenia in 2010 and revised the composition and the charter of the Women's Council under the Prime Minister which is currently recognized the national gender machinery; also a Gender Theme Group was established which is co-chaired by the Ministry of Labor and Social Issues, the UN and the OSCE and includes more than 35 entities representing the government, civil society and international organizations. Starting from 2011, the Government of Armenia established a practice of annual awards (including "Best Community Response to Gender Issues," "Best Women Entrepreneur" "Best Journalist Covering Gender Issues," etc.) thus affirming its commitment to advance gender equality, in particular at regional and community level.

Main issues/gaps: While Armenia has made commendable effort to establish the institutional, policy and legal framework to advance gender equality, gender gaps and inequalities continue to persist especially in the regions and among the most vulnerable. Women comprise about 52 per cent of the population and around 58 per cent of those with higher education; however, as of today the level of women's representation and meaningful participation in governance and decision-making is low: 11% per cent of the MPs (14 out of 131), 11 per cent of the ministers (2 out of 18), less than 10 per cent of deputy ministers (5 out of 65), no women among the 10 governors. Gender imbalance is even more obvious at local level, in city mayors' offices and the Local Self Governance (LSG) bodies: there is no women among 48 city mayors and, on average, females constitute about 0.5 per cent of the city council members; in their turn, only 2.5 per cent of the village community heads and 7.4 per cent of rural council members are women. Challenges still remain on defining discrimination and gender based violence in the national legislation and on creating referral mechanism for gender based violence victims. In Armenia, the notion of Gender Based Violence is barely known or acknowledged on a wider public scale. It is difficult to gauge prevalence of violence against women in Armenia largely because few cases are reported, particularly those of domestic violence.
Widespread gender stereotypes continue to persist: the adoption of the law on "Equal Rights and Equal Opportunities of Women and Men in Armenia" in May 2013 was followed by an aggressive campaign against the concept of "gender" with demands to call back the law and stop using the term "gender." In response, three packages of amendments to the GE law were submitted to the Parliament.

Recommendations: (i) Further actions are needed to advance the concept of gender equality in Armenia and ensure more active engagement of women in decision making levels. A full-fledged gender machinery need to be established and capacitated; career opportunities for women in public administration created; broader representation of women in local governance ensured. Country-wide awareness raising on the concept of gender equality should be implemented on regular basis. (ii) Establish measures to provide for equality of rights, opportunities and conditions between women and men and the elimination of discrimination against women; devote priority attention to effectively eliminating all forms of violence against women, especially domestic violence by improving legal provisions and adopting the Council of Europe Convention on preventing and combating violence against women and domestic violence; further activities aimed at gender mainstreaming in Government policies and programmes.

1. Administration of justice, including impunity, and the rule of law

(i) Access to Justice

Main issues/gaps: The UPR recommendations to strengthen the work of the institute of public defense by providing free legal aid to the population was accepted by the Government of Armenia and Armenia registered certain progress in ensuring increase in the number of public defenders and expanding the categories of eligible groups of population for free legal aid. (changes in legislation provide that four new categories of people will be eligible to use free legal aid from 1 January 2014). However, "Assessment of State Guaranteed Legal Aid System in Armenia" conducted by UNDP in 2013 revealed that the population is poorly informed about the right for free legal aid. Participants of the system seem to be wary of spreading the message, fearing a substantial increase in the workload which may be impossible to cope with. Such a position impairs the access to justice particularly for vulnerable groups of population, even if, on paper, the

access is being expanded. The assessment also indicates unsatisfactory quality of work of most of the Public defenders.

Recommendations: (i) A wide-ranging public information campaign needs to be organized about broader possibilities to use state guaranteed legal aid services, especially in view of the recent legislative provisions. This campaign could be carried out in cooperation between the Chamber of Advocates and the Ministry of Justice, possibly involving other legal institutions as well. (ii) Bearing in mind the unsatisfactory situation concerning the quality of services of the public defender's office, it is recommended to consider some urgent measures for improving the situation, introducing quality control measures, results based budgeting for the system, capacity development of the public defenders.

(ii) Torture and other Cruel, Inhuman or degrading treatment and punishment

Main issues/gaps: The Armenian legislation prohibits torture, inhuman or degrading treatment, however, the national legislation criminalizing "torture" (article 119 of the Criminal Code) needs to be aligned with the definition of torture in accordance with Article 1 of the CAT and 2012 recommendations made by UN Committee against Torture. In its mid-term report Armenian Government states: *"… All articles pertaining to the concept of "torture" in the Criminal Code were supplemented. The mentioned amendments are under consideration at the National Assembly."*

Il-treatment in police custody persists: in 2012 the UN Committee against Torture expressed concern over the use of coerced confessions in trials and the failure to address in the course of trials the allegations of defendants that confessions have been obtained through torture.

Conditions in prisons are reported to amount to inhuman treatment. The 2012 recommendation of the UN Human Rights Committee that Armenia should pursue its efforts to improve conditions in places of detention and to reduce prison overcrowding, including through the application of alternative measures to imprisonment still not fully implemented. Alternatives to imprisonment, while envisaged in legislation, are not applied by judges in practices. Probation service framework is yet to be finalized and enforced.

Recommendations: (i) Armenia should finalize alignment of the definition of torture in the national legislation with CAT requirements as soon as possible. (ii) Measures aimed at prevention of torture should be introduced and applied in the law enforcement sector, including selection and, training of law enforcement officers, mechanisms of internal monitoring and introduction of independent accountability mechanisms for police forces to secure the full respect for human rights. (iii) Implement priority recommendations in the Concluding Observations of CAT from 2012, with particular reference to the following recommendations: a) Ensure audio- or videotaping of all interrogations in police stations and detention facilities as a further preventive measure, and to create an electronic protocol of detention immediately upon the de facto deprivation of liberty of persons in police stations. The State party should ensure access to these records by lawyers and relatives of those detained. b) Take concrete steps to ensure prompt, thorough and impartial investigations into allegations of torture and ill-treatment by law enforcement officials and military personnel and ensure that all investigations into crimes involving public officials are undertaken by an independent and effective body.

2. Rights of the Child

Achievements and best practices: (i) Health& Nutrition - UNICEF has initiated the development of a National Nutrition Strategy and Plan of Action for 2012–2015 with the aim of improving child nutrition. Intensive Neonatal Care units established in regional facilities have improved the access of the rural and disadvantaged population to newborn emergency interventions by reducing the referral of cases from remote areas to the capital, and increasing the survival of children. Inter-sectoral cooperation between the Ministries of Health, Education and Science (MoES), and Labour and Social Issues has been enhanced during 2013 by modeling integrated health services to school-age children and adolescents in three pilot sites. (ii) Education& Disaster Risk Reduction (DRR) - For improving the learning and inclusion of children with special educational needs, the International Classification of Functioning, Disability and Health has been introduced as a unified tool for assessing and certifying disability and special education needs. In partnership with UNICEF the government established the National DRR Platform for promoting DRR in education. (iii) Child Protection - The National Plan of Action for the Protection of Children's Rights (2004–2015) demonstrates the government's commitment to the deinstitutionalization process. UNICEF in cooperation with USAID, Save the Children, World Vision and with other local child protection NGOs is supporting the government in transforming several residential care institutions to alternative community based services based on the needs of the children and families. (iv) Social Protection - The Integrated

Social Services Reform (ISS) is an important step towards improving social protection services in Armenia and introduces professional Case Managers (CMs) at the territorial level, and the development of Local Social Plans (LSPs) at the regional level. CMs are working towards the reduction of poverty and vulnerabilities among children and their families by conducting individual social plans including mapping of needed services and support for each child and family. LSPs gate-keep and help to ensure the further development of a range of individual social services in the community.

Main issues/gaps: Malnutrition among women and children and high levels of obesity among children under 5 years of age are noted, particularly in rural areas. Neonatal and perinatal mortality rates remain high due to insufficient equipment in neonatal departments and inadequate training of staff. Furthermore, there is a lack of coordination among key sectors in addressing adolescents' health issues. According to the latest MDG report the country is unlikely to achieve the MDG Goal 2 (universal primary education). 18 per cent of children with disabilities do not go to school, and in rural areas this proportion increases to 23 per cent. Children with disabilities living in orphanages have almost no access to mainstream education and many communities, especially in rural areas, still do not have a pre-school. Assistance to parents in difficult circumstances is weak as institutionalization of children remains the key option for alternative care of children, increasing their risk of being subjected to ill-treatment and violence. The National Commission for the Protection of Children's Rights, established in 2005 as a coordinating body, is not functioning effectively, while the inter-sectoral coordination among ministries and agencies at regional and local levels is not adequate. Furthermore, the access to and quality of alternative measures to the formal justice system need to be enhanced, while children, being in penitentiary institutions, may be subjected to solitary confinement.
The MDG progress report also showed that the country was unlikely to achieve the national targets for Goal 1 (poverty and hunger) by 2015. The child poverty rate has increased due to the economic crisis, with children with disabilities being among the hardest hit, and only 54.3% of extremely poor families and 4.1% of poor families receiving family benefits. The programmes and strategies targeted at children often lack adequate financial resources, as well as regular assessment, while mostly relying on international organizations' funding. There has been a significant decrease in budget allocations for child rights issues, in particular in the areas of health and education and there is a lack of information on a child rights based perspective in the budgeting process.

Recommendations: (i) Regional disparities related to nutrition and out of pocket payments in the health sector need to be reduced, while more attention on improving adolescent's health services and ratifying new laws on breastfeeding and flour fortification is needed. (ii) Legal and policy revisions towards the progressive elimination of the special education system and the full implementation of inclusive education, are needed, as well as the strengthening of pre-school education in terms of coverage, quality, and accessibility. (iii) The allocation of resources for service provision to alternative care services in a decentralized manner needs to be increased, which will also enhance the de-institutionalization process, as well as the cooperation among all social services to provide effective support to vulnerable children and families. (iv) The current child protection system needs to be revised in the context of the ongoing ISS reform for better responding to the needs of the children and families, based on the individual responsibilities of social workers. The use of corporal punishment should be prohibited in all settings, while it is recommended to develop a national strategy to prevent and address all forms of violence against children. Furthermore, a comprehensive legal framework on juvenile justice is recommended, as well as ensuring access to and quality of alternative measures of the formal justice system. Furthermore, measures need to be taken to ban solitary confinement of children in penitentiary institutions.

3. **Refugees and asylum seekers -** As of 31 December 2013, Armenia hosts 77 asylum-seekers and 3,132 refugees. 2013 saw State Migration Service (SMS) issue 632 asylum decisions, of which 459 were positive. As of December 2013, there were 29 asylum-seekers from Iran, Lebanon and a number of African countries whose applications were pending either with SMS or the courts. According to the Government of Armenia since the start of the conflict in Syria until spring 2014, approximately 16,000 persons displaced due to the conflict have at some stage sought protection in Armenia of whom 12,000 remain in the country. The majority of those arriving are of ethnic Armenian background and many have subsequently acquired Armenian citizenship. Of the 12,000, some 615 have been recognized as refugees (and this figure is included in the total number of refugees mentioned above). According to the official statistics provided by the Armenian police, the number of documented stateless persons was 56 at the end of 2013. However,

from a survey that UNHCR Armenia commissioned in 2012, it appears that there may be more stateless persons or persons with undetermined nationality (a total of 124 individuals were identified within 1,000 surveyed households).

Achievements and best practices: (i) The reception by the Government of Armenia of persons displaced from Syria, - UNHCR welcomes the reception by the Government of Armenia (GoA) of persons displaced from Syria. According to the Government of Armenia about 16,000 persons displaced due to the conflict in Syria, primarily of ethnic Armenian background, have sought protection in Armenia at one stage or another. The Government has, in principle, taken a very generous approach in offering Syrian Armenians a choice between three protection options namely by way of (i) simplified acquisition of citizenship, (ii) accelerated asylum procedures which resulted in a 100 per cent recognition rate, or (iii) privileged granting of short, mid-term or long-term residence permits. The Government has made efforts to coordinate all of these interventions and the President has appointed the Minster of Diaspora to lead the coordination. A monthly inter-agency Commission meets to review programmes. UNHCR enjoys observer status in this Commission and is given the possibility to share its views and recommendations. The Government acknowledges the limits of its own resources and line with its international obligations has continued to request and is facilitating the provision of additional international assistance. (ii) Legislative framework - The latest revised *Law on Refugees and Asylum,* which entered into force in 2009, incorporates most of the basic principles of refugee protection enshrined in the *1951 Convention*. There remain however a number of gaps in the law that may indirectly affect the quality of refugee status determination procedures. These were highlighted in a recent report by UNHCR[2]. In recognition of these concerns, the authorities have committed to introduce legislative amendments in 2014 and a joint UNHCR/Government drafting group has been established. UNHCR has also welcomed the commitment by the authorities to introduce legislation that will allow for the issuance of ICAO-compliant Convention Travel Documents to refugees. (iii) Prevention and Reduction of Statelessness and Protection of Stateless Persons - UNHCR notes with appreciation the long running cooperation of the Armenian authorities in efforts to revise the *Law on Citizenship of the Republic of Armenia* with a view towards further enhancing safeguards and protection against statelessness and reducing statelessness in Armenia. In 2013, the Government of Armenia also committed to adopt a Law on Statelessness, which will provide for the protection of stateless persons under national law as well as for status determination procedures. As of May 2014, the draft law had been circulated within the Government and is pending its endorsement to be sent to the Parliament for adoption.

Main issues/gaps: (i) Access to the territory and non-penalization of asylum-seekers Some challenges remain with regard to access of asylum seekers of non-Armenian background to the territory of Armenia and to the asylum procedures. These were highlighted during participatory assessments undertaken with Syrians in February 2014, when a number of families of mixed backgrounds (ethnic-Armenians married to non-Armenians) described their experiences at the borders of Armenia. However, contrary to earlier years, there were no confirmed reports of *refoulement* in 2013 or 2014 and UNHCR was able to negotiate access to the territory in all known cases. While the *Law on Refugees and Asylum* provides for access to territory and to asylum procedures for asylum-seekers arriving or present in the country in an irregular manner, the *Criminal Code (Article 329)* does not explicitly exempt asylum seekers from criminal liability. This has led to the detention of asylum seekers and initiation of criminal proceedings in a number of cases, though UNHCR regularly intervenes in such situations and could negotiate release from detention in some cases. Draft legislation aiming to overcome this shortcoming is under preparation and the recommendation in the UPR process can contribute to moving forward on these draft amendments. (ii) Absence of a national strategy for local integration - Acknowledging the outstanding need in this area, in 2011 during the Ministerial Intergovernmental Event on Refugees and Stateless Persons in Geneva, Armenia pledged to continue efforts aimed at solving social-economic issues of the remaining refugees from Azerbaijan. Following research efforts in 2013 and a national conference on integration, in 2014 Armenia has decided to establish a dedicated integration unit within the State Migration Service. This preparatory effort still needs to be translated into a national strategy on integration and follow-up action. UNHCR very much welcomes the approach taken. Durable housing solutions remain one of the priority concerns of all groups

[2] Asylum Systems Quality Initiative in Eastern Europe and South Caucuses: Gaps Analysis Report Armenia, UNHCR Armenia, December 2013

of displaced populations in Armenia. UNHCR mitigates this challenge, inter alia, by way of rental subsidy scheme for persons displaced from Syria seeking protection in Armenia. While Armenia did its utmost to generate donor support, it did not transpire and Armenia reports that it does not have sufficient budgetary resources to address these needs. (iii) Prevention and Reduction of Statelessness and Protection of Stateless Persons - Notwithstanding Armenia being a State party to the *1954 Convention relating to the Status of Stateless Persons* and the *1961 Convention on the Reduction of Statelessness* since 1994, with regards the protection of stateless persons, there is no designated administrative authority competent to deal with stateless persons, including the identification of stateless persons or the conduct of formal statelessness determination procedures. The Passport and Visa Department of the Armenian Police is the authority currently issuing documentation ("residence certificates") to stateless persons residing in Armenia. However, there are no procedures that guide the Department through the process of determining whether the applicant for a document of a stateless person is in fact stateless. Armenia also lacks a statelessness monitoring mechanism. As such, the protection of stateless persons is further marginalized by the lack of an effective database and sufficient statistics regarding stateless persons in Armenia.

Recommendations: (i) Reiterate importance of the principle of *non-refoulement* and call upon Armenian authorities to grant asylum seekers access to the territory and asylum procedures irrespective of the ethnic background. (ii) Make necessary amendments to Article 329 of the *Criminal Code* to harmonize it with the *Law on Refugees and Asylum*, and to ensure that asylum-seekers and refugees are not detained in violation of Article 31(1) of 1951 Convention. (iii) Armenia should be encouraged to pursue its efforts of drafting a national integration strategy and the related action plan to strengthen the mainstreaming of refugee integration within a broader range of government agencies and activities. (iv) Armenia should be encouraged to investigate alternative and innovative ways of providing durable housing solutions to displaced populations, including by involvement of the private sector, creation of employment options which include provision of housing and establishment of social housing schemes. (v) Building on legislative initiatives to be adopted in 2014, it is recommended to establish a stateless status determination procedure at a national level serving effective implementation of the 1954 Convention related to the Status of Stateless Person. (vi) Establish an effective database and sufficient statistics regarding stateless persons in Armenia. (vii) Accede to the Council of Europe 1997 European Convention on Nationality and the 2006 Convention on the Avoidance of Statelessness in Relation to State Succession.

4. Right to health

Main issues/gaps: Armenia does not have sufficient natural resources for generating revenues for human development. The adopted policies and strategies declare that human development has to be based on population health status and well-being, which may guarantee productivity and economic growth. Armenia has entered the new millennium with an orientation to the internationally recognized policies and strategies, including those in the health sector. Armenia recognizes the basic health values, which include: (i) Health as the basic human right; (ii) Equity in health and solidarity in the actions aimed to improve health indicators; (iii) Social responsibility and involvement of individuals and institutions in health sector development. In conformity with the said values, Armenia identifies the following internationally recognized health policy objectives: (i) Promote and protect the people's health over the whole life; and (ii) Reduce the incidence of the leading diseases and injuries, and to mitigate the sufferings caused by them.

In practice, however, not all obligations of the government have been fulfilled. The Basic Benefit Package (BBP) comprising the basket of publicly financed services, which includes the list of priority services and the groups of population, entitled to get free use of those services. BBP has to guarantee the right of entitled population for free services. However, from the very day of its establishment, the BSP has been regularly reviewed, with the list of services and the entitled groups changed accordingly. Due to the insufficiency of financial resources, the list of health services funded by the state has been retrenched, incorporating only certain priorities and priority groups. The experience with introducing and implementing BSP financing mechanisms has shown that it is not perfect, fails to actually guarantee free medical care, does not contribute to the development of the health system, and is not likely to inspire confidence among the population and the health workers.

Health as basic human right implies protection of health from negative factors, mitigation of risks to the health of population and individuals. Government institutions have poor expertise and technical capacities for risk and impact assessment for political, economic, social and environmental determinants of health.

Reproductive health

Achievements and best practices: In 2008 Armenia introduced new state reforms on reproductive health, which had a positive impact on improvements in SRH area. The reforms addressed funding of maternity care services provided within the package of state budget funded services. Considering maternal and neonatal health as a top priority, in 2008 the Government of Armenia substantially increased (almost doubled) budget allocations for perinatal services. As part of reproductive health care reforms "State Maternity Certificate" was introduced entitling pregnant women to receive free delivery care services. The antenatal and delivery care services were free of charge even before 2008; however, access to free services increased substantially after July 2008, when the reforms took place. As a result of these reforms the access of women to quality antenatal care has also significantly increased. Furthermore, there is a sharp decline in the proportion of women who paid for the last antenatal care visit.

Taking into account favorable political background (the new president identified the improvement of the access to and quality of reproductive health services as one of the main priorities for the health sector) UNFPA Armenia initiated advocacy and policy dialog with the MOH and other relevant stakeholders to support the Government to establish a reliable RH commodity security structure to ensure secure contraception supply, particularly for the most vulnerable as well as to increase consumer demand for modern contraceptives. In 2014 USAID provided $ 800,000 to UNFPA to introduce TMA in the country as well as MoH committed to ensure provision of contraception to the most vulnerable population and allocate funds.

Main issues/gaps: However, there are still some major gaps to be addressed. For example, before 2013 pregnant women were deciding by themselves in which maternity to receive care and generally were giving preference to maternities in Yerevan, which increased disparities between maternities of regions and capital and brought to concentration of funds in Yerevan maternities. Health care personnel of regional maternities were underpaid and demotivated to work in regions. At the end of year 2012 UNFPA supported MoH's initiative in development of mechanism on localization of the state certificate of maternity care and introduction of referral system aimed at enhancing capacities of regional maternity care providers and improving quality of maternal care provided locally. As a result starting from 2013 "State Maternity Certificate" was localized based on place of living of pregnant women and an accurate referral mechanism by levels of maternities for pregnancies with pathologies was introduced.

Another issue remains the quality of maternal and new-born care services provided in maternities of the country. According to the international experts' reports the key clinical guidelines at national level and, particularly, diagnostic and therapeutic clinical protocols at facility level, based on international standards are lacking. In addition, adequate tools and systems to ensure consistency and continuity of care within the services and across the various levels of the health systems are not in place. Diagnosis and management of complications, as well as appropriate infection prevention measures, are often substandard with respect to established international standards, both in obstetric and neonatal care. In 2011 MoH issued a decree on "Regulation on types of clinical standards, functions of responsible structures for standardization, structural and financial mechanisms, development of clinical standards, systematic revision, its implementation and control". However, currently there is lack of revised and optimized clinical guidelines/protocols and pathways on specific clinical conditions and complications. Existing few national RH guidelines do not correspond to international standards and are purely presented and implemented in health care facilities. One of the main challenges of increased access to and utilization of quality family planning services in the country has been poor commitment of the Government to invest in affordable and accessible reproductive health commodities, especially contraceptives. The lack of funds allocation for procurement of contraceptives has been always explained by competing health priorities and concerns about the impact of family planning on the birth rate in a country with an already declining population.

Recommendations: Improve maternal and neonatal care which requires a combination of health system reforms and policies regarding several issues, such as stewardship issues, including the improvement of data collection and use, the development of a good information system, and a greater attention to the roles and rights of the patients; resource generation, including update human resources plan, training appropriate number of health professionals with right skills mix, with special regards to midwives and nurses, building new health facilities vis-a-vis renovating existing ones, and providing basic and relevant equipment at all levels; service delivery, including regionalization of care and perinatal referral system particularly for pregnant women at risk and sick newborn babies, and implementation of evidence-based care

5. Right to development

(i) Population and Development

Achievements and best practices: Based on the Ageing Survey results conducted in 2008 and in order to ensure the implementation of the Strategy on Population Ageing and Social Protection of Elderly and its Action Plan (2012-2016) have been developed and approved by N17 Protocol Decree of the Government of RA on 02.08.2012, which was one of the key achievements of year 2012.
Other key achievements are conduction of Pilot Census in 2010, Armenia Population Census in 2011 and integration of census data into the broader statistical system by National Statistical Service of RA jointly with the UNFPA. These efforts are very crucial for evaluating progress towards achieving the national MDGs targets by 2015.

Main issues/gaps: There is lack of coordination between different state and non-government actors in order to effectively implement the Strategy on Population Ageing and Social Protection of Elderly and its Action Plan (2012-2016) as well as other different programs in the field of ageing.

There is also lack of state budget allocation in conduction of post-census activities such as publication of Census results and creation of Armenian database of private households addresses based on the 2011 Population Census.

Recommendations: Establish effective coordination mechanisms between different state and non-government actors as well as operational monitoring and evaluation system to ensure effective implementation of the 2012-2016 Strategy on Population Ageing and Social Protection of Elderly and its Action Plan.

6. Right to privacy, marriage and family life

(i) Family planning

Achievements and best practices: The Government of the Republic of Armenia has declared 2014 the Year of Family, stressing once again the Government's commitment to families. For the first time the issue of prenatal sex selection was raised with and acknowledged by the Armenian Government; the media took the topic to a wider audience; the general public, the civil society, other international organizations started speaking about it. Currently the issue of prenatal sex selection is a hot topic. Armenia became the first country in the region to gather reliable national data on prenatal sex selection, to inform government policies regarding the issue. Armenia is successfully fulfilling its international obligations as per the Parliamentary Assembly of the Council of Europe Resolution 1829 on prenatal sex selection - first among the other countries indicated in the Resolution (Georgia, Azerbaijan, and Albania). The Armenian Government is already taking steps towards elimination of prenatal sex selection in the country. A coalition including a large number of international donors and NGOs was build to work on the issue in a cooperative manner. Parliament hearings on skewed SRB were held on May 20, 2014. Revision of the Law on Reproductive Health and Reproductive Rights has been put in circulation banning information about sex of fetus until 30 weeks of pregnancy.

Main issues/gaps*:* The serious challenge in this area is the current skewed sex-at-birth (SRB) ratio as a result prenatal sex selection in favor of boys. In 2010, UNFPA focused attention to a fact that according to official statistical data, starting from 1993 the SRB ratio in Armenia has been 110-120 boys to 100 girls (114-115 in 2013), while the accepted normal biological ratio is 102-106 boys to 100 girls. Following UNFPA 2011 and 2012-2013 studies confirmed that prenatal sex selection is the reason behind it. As a result, since early 1990s Armenia was "missing" 1400-2000 women annually. The preference for boys over girls on average is about six times higher. Armenia has one of the highest levels of birth masculinity observed anywhere in the world (third after China (118) and Azerbaijan (116)). Continued skewed SRB rates will result in almost 93,000 "missing" women or gender gap by 2060. It will have negative impact on marriage and may also be cause for further out-migration. Thus, because of skewed SRB, Armenia's population will reduce by additional 80,000 inhabitants (it corresponds to the annual number of births over two years) by 2060.
Recommendation: Further steps such as additional research, awareness raising, advocacy, and behavior impact activities, as well as capacity building for medical professionals, priests, community workers and government representatives, along with integration of sex selection as a distinct gender component in national population policies, and a review of related policies and legislation with a view to introduce a package addressing prenatal sex selection.