



Helsinki Citizens' Assembly-Vanadzor

ALTERNATIVE REPORT ON IMPLEMENTATION OF THE UN CONVENTION ON THE RIGHTS OF PERSONS WITH DISABILITIES WITH A FOCUS ON MENTAL HEALTH

**(the second and third periodic reports
of the Republic of Armenia)**

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About the Organization

Helsinki Citizens' Assembly-Vanadzor is a non-governmental human rights organization whose activity covers the whole Republic of Armenia territory. One of the main directions of the Organization's activity is protection of the rights of persons with psychosocial and intellectual disabilities. Since 2007, Helsinki Citizens' Assembly-Vanadzor has been studying the state of the rights of persons with psychosocial and intellectual disabilities, raising current issues and conducting advocacy to overcome them. The Organization also provides free legal aid and represents persons with psychosocial and intellectual disabilities in court.

The Organization is a member of the Coalition for Inclusive Legal Reforms, which is engaged in protection of rights of persons with disabilities.

General Information

The report is compiled by the Helsinki Citizens' Assembly-Vanadzor non-governmental organization. In 2014, the Organization presented the UN Committee on the Rights of Persons with Disabilities an alternative report on the state of rights of persons with psychosocial and intellectual disabilities in the Republic of Armenia, which was followed by recommendations on the list of problems specified in the first report of the Republic of Armenia.

Below are the successful reforms - aimed at ensuring rights of persons with psychosocial and intellectual disabilities - made after presentation of the State report to the Committee on the Rights of Persons with Disabilities and publication of the Committee's concluding observations:

- A public monitoring group has been formed to conduct regular monitoring in psychiatric institutions, in accordance with the procedure established by the RA Law "On Psychiatric Aid and Service",
- On January 30, 2020, the RA Constitutional Court made a decision to recognize anti-constitutional provisions of a number of the Republic of Armenia laws not guaranteeing informed consent of minors and persons recognized incapacitated regarding their medical interventions,
- On May 5, 2021, the RA Law "On rights of persons with disabilities" was adopted
- On June 8, 2022, by order of the Minister of Health of Armenia, the 2022-2026 Action Plan for the Maintenance and Promotion of Mental Health was approved.

- On November 16, 2022, the Optional Protocol to the Convention on the Rights of Persons with Disabilities was ratified.

The main reforms relate to the legislative framework, whereas the practical steps necessary to ensure the rights of persons with psychosocial and intellectual disabilities are delayed. Particularly

- very few rights-based and needs-based services have been introduced,
- there is a great need for mental health specialists, especially in the provinces in the Republic of Armenia,
- the practice of recognizing persons incapacitated, as well as involuntary hospitalization and treatment continues,
- the Republic of Armenia`s Law "On ensuring legal equality" has not been adopted.

Moreover, the state is regressing in terms of ensuring the protection of rights of persons with psychosocial and intellectual disabilities, *inter alia*, by terminating the activity of the public monitoring group in care facilities and introducing the idea of limited legal capacity.

General principles and obligations (Articles 1-4)

The Mental Health Maintenance and Improvement Strategy was in effect in the Republic of Armenia from 2014 to 2019, but it was not implemented successfully. Issues regarding the rights of persons with psychosocial and intellectual disabilities were not addressed.¹ Particularly, affordable and quality mental health services and community-based services that meet the needs were not provided. Efforts to involve specialists and build capacity were neither effective nor targeted. Additionally, the public awareness campaigns about psychosocial and intellectual disabilities were not successful, as demonstrated by the persistent stigma and discriminatory attitudes among both the government officials and the general public.

Three years later, in 2022, as a result of the advocacy and active involvement of civil society organizations, the Action Plan for the Maintenance and Promotion of Mental Health was approved. The Action Plan was approved by order of the Minister of Health of the Republic of Armenia rather than by a government decree, which provides a higher legal status. This lower-level approval increases the risk of inconsistent implementation

¹ See "Report on the Implementation of 2014-2019 Strategy of Maintenance and Improvement of Mental Health in the Republic of Armenia", available at https://hcav.am/en/evaluation_mental-health-strategy_2014-2019/

and challenges to its authority. As of the last quarter of 2024, we can record that the state does not allocate sufficient financial resources for the implementation of the program relying mainly on the efforts and resources of civil society organizations.

Suggested questions:

- How much financial resources are planned to be allocated for the implementation of the Program of Measures for the Maintenance and Promotion of Mental Health for 2025-2026?
- What mechanisms are in place to assess effectiveness of training and awareness raising actions aimed at elimination of discriminatory attitudes?

Special rights (Articles 5-30)

Equality and non-discrimination (Article 5)

There is no unified effective policy aimed at overcoming discriminatory attitudes towards persons with psychosocial and intellectual disabilities. Both the legislative regulations and stigmatizing, discriminatory attitude of state bodies are problematic.

The Constitution and other domestic legal acts, including the Law "On the rights of persons with disabilities", enshrine elimination of discrimination based on disability; nonetheless, the separate law regulating the sphere of combating discrimination is still in the drafting phase. Certain legal acts prohibit persons with psychosocial and intellectual disabilities from applying for certain positions, such as judges, prosecutors, police officers etc.

State institutions' stigmatizing and discriminatory attitude towards persons with psychosocial and intellectual disabilities continues. Police officers and medical specialists avoid dealing with persons with psychosocial and intellectual disabilities. Moreover, in connection with the nature of their work, even employees of psychiatric institutions are subjected to stigma in medical institutions.

During recent years, officials have often used formulations labeling and degrading persons with psychosocial and intellectual disabilities in order to criticize one another ("psychotic", "mentally retarded", etc.). Moreover, representatives of the legislative body periodically present legislative initiatives promoting discrimination on the basis of psychosocial and intellectual disabilities. For example, in September 2020, representatives of both the ruling party and the opposition faction of the National Assembly announced a

process of proposing a legislative initiative to prohibit persons with “serious mental health conditions” from being appointed in high-ranking political positions.² The initiative was also supported by representatives of the largest faction in the National Assembly.

Some services for persons with psychosocial and intellectual disabilities (for example, home care service) are provided only in capital city Yerevan and are not available for residents of provinces. At the same time, about 60 persons receive home care services annually, which is not adequate to the need.

Suggested questions:

- What is non-adoption of the law regulating the sphere of combating discrimination conditioned by and when will it be adopted?
- What measures are implemented to ensure availability of services to all persons with psychosocial and intellectual disabilities?
- What measures are taken to eliminate stigmatization of persons with psychosocial and intellectual disabilities and how is their effectiveness assessed?

Children with disabilities (Article 7)

In recent years, the number of community-based services for children with psychosocial and intellectual disabilities has grown, however, they are still not enough. Lack of the relevant support in the community leads to restriction of children’s opportunity to be involved in the community and results in their isolation.

The Law of the Republic of Armenia "On the Rights of the Child", as a legislative act containing "lex specialis" norms, does not guarantee the right of a child under age of 16 to be heard in the field of psychiatric care. In particular, under Article 32 of the Law, the written informed consent to receive or refuse psychiatric intervention is given by the legal representative of the child under age of 16.

Suggested questions:

- How and when was the need for services necessary for children with psychosocial and intellectual disabilities assessed and what are the needs assessed?
- When and how will children with psychosocial and intellectual disabilities be provided with available community-based services in line with their needs?

² See “Discrimination based on disability is violence against the relevant person’s dignity”, Statement, Helsinki Citizens’ Assembly-Vanadzor, available at <https://hcav.am/en/statement-18-09-2020-1/>

- When and how is it planned to ensure the right of the child to be heard in accordance with his or her age and maturity?

Equal recognition before the law (Article 12)

The practice of recognizing a person legally incapable continues. Domestic laws, in particular, Articles 48; 98; 164; 193 of the revised version of the Constitution, Article 31 of the Civil Code of the Republic of Armenia, have not been amended.

Statistical data also evidence that the practice remains unchanged in this sphere. From 1 January 2010 until June 2012, the General Jurisdiction Courts of First Instance of the Republic of Armenia received 739 applications to recognize a person legally incapable, 447 of which (i.e., almost 60% of applications) were upheld. 73.6% out of 140 claims - on recognizing a person legally incapable – taken into proceedings in 2019 was upheld and only 6.4% was rejected.

As of September 2023, 109 (54.5%) out of 200 claims regarding the recognition of a person legally incapable have been satisfied.

Reasons for recognizing a person legally incapable are conditions such as taking ownership of their property, placing them in an institution and other personal, social-economic conditions.

The Republic of Armenia Government's decision N 1030-L 2021 of June 24 in 2020-2022 Action Plan of National Strategy for Human Rights Protection envisaged to ensure the right of persons with psychosocial and intellectual disabilities to make decisions in questions concerning themselves, including by introducing support-based decision-making mechanism.³ On November 2, 2022, the draft decree of the Government of the Republic of Armenia, "On the Revision of Legal Regulations related to the Institute of Legal Incapacity and Approval of the Action Plan for the Introduction of a Supported Decision-Making Mechanism", was even put up for public discussion on the unified website for publication of legal acts' drafts. However, the draft was not approved due to internal resistance, lack of will to completely eliminate legal incapacity. The measure was not implemented. Moreover it was not included in the next action plan of 2023-2025.

Moreover, on October 28, 2024, a draft was circulated on the same platform, which proposes to amend the Civil Code of the Republic of Armenia to provide an opportunity to

³ See "Elimination of the institute of recognizing persons incapacitated on the agenda", Helsinki Citizens' Assembly-Vanadzor, available at <https://hcav.am/en/gov-24-06-2021/>

recognize a person not only as completely legally incapable, but also as having limited legal capacity, “if the mental disorder does not fully affect the citizen’s ability to understand the meaning of his or her actions, foresee their consequences, or manage them.” In other words, instead of working to replace the institution of legal incapacity with a Supported Decision-Making Mechanism, the institution of limited legal capacity is being introduced, based on the recently published report delegated by the Council of Europe office in Yerevan.

Suggested questions:

- What steps are taken to eliminate the institute of recognizing persons legally incapable and what timeframe is set for it?
- What are the guidelines according to which changes are to be made?
- How will involvement of persons with psychosocial and intellectual disabilities, their family members and civil society representatives, in the process be ensured?

Access to justice (Article 13)

Though the Committee expressed its concern regarding unaffordability of services, no solution has been given in terms of the obligation of a person to pay state duty to appeal the judgment on involuntary treatment or recognition as legally incapable. Moreover, the financial burden has increased by thus making justice more unaffordable and unavailable. According to the amendments made to the Republic of Armenia`s Law “On state duty” in 2021, rates for claims, applications, appeals against judicial acts increased four times on average, whereas no state duty is required for claims to recognize a person incapacitated. Judicial practice is also worrisome. In 2018-2020, in more than 20% of cases, persons being recognized legally incapable did not participate in judicial sessions, and their right to be heard was not ensured.

The National Assembly of the Republic of Armenia has manifested a differentiated approach to persons who have the power to make an application to eliminate judgments regarding involuntary hospitalization of a citizen in a psychiatric organization and subjecting the citizen to involuntary treatment. If a person recovers sooner than established by the judgment regarding subjecting the citizen to involuntary inpatient psychiatric treatment, the medical organization has the right to apply to court to eliminate the judgment on subjecting the citizen to involuntary hospitalization (part 1 of Article 270.1 of the Civil Procedure Code of the Republic of Armenia); whereas, during

the proceedings of recognizing legal capacity of the person recognized legally incapable and eliminating restriction of the citizen's legal capacity, the incapacitated person can himself apply to restore his legal capacity. It should be noted that on October 28, 2024, a draft amendment to the Civil Procedure Code of the Republic of Armenia was circulated, according to which the right to apply to court is also granted to a person and his legal representative.

The Law "On psychiatric aid and service" establishes the right to legal aid while a person is in a psychiatric organization, including public protection established under the Law "On advocacy" (clause 17 of part 1 of Article 5). During 2021-2023, 121 persons applied for legal aid (120 of whom were from the same institution). Accordingly, only 11 percent of approximately 1,100 persons receiving treatment and care in psychiatric institutions have applied for legal aid within 3 years. Moreover, only one of the 7 institutions has ensured the requirement of providing a state-ensured advocate through the Office of Public Defender.

Suggested questions:

- Before elimination of systems of involuntary hospitalization, treatment and recognizing persons legally incapable, how will be guaranteed non-payment of state duty by persons or their representatives for appealing final judicial acts regarding recognizing a person incapacitated, and involuntary hospitalization, examinations and/or treatment?
- How will the right to legal aid since the moment of restriction of freedom be ensured irrespective of existence of an application by the relevant person or his/her official representative?

Liberty and security of person (Article 14)

The practice of involuntary hospitalization and treatment, as well as long-term isolation in care centers and psychiatric institutions of persons with psychosocial and intellectual disabilities, including persons recognized incapacitated, continues. The Law on "Psychiatric aid and service", adopted in 2020, enshrines a person's involuntary hospitalization and treatment "with the purpose of preventing the danger posed by the person with mental health problem (including for his/her or other persons' life or health)" (Article 24). In case of having a legal representative (including in case of being recognized incapacitated), *even voluntary aid and service* is implemented with the

consent of the legal representative, with some exceptions: “a child aged 16 or above or a person recognized incapacitated in a manner provided for by law gives a written informed consent or refusal regarding psychiatric interventions (except for cases provided for by law), if 1) in the psychiatrist’s opinion, a child aged 16 or above or the person recognized incapacitated in a manner provided for by law is able to understand possible consequences of psychiatric interventions or lack of psychiatric interventions; 2) that information will not harm the child aged 16 or above or the person recognized incapacitated in a manner provided for by law; 3) it will facilitate provision of psychiatric aid and service” (Article 17).

According to the official webpage of the Judiciary of the Republic of Armenia 289 cases of involuntary treatment were concluded between 2012 and 2017. A judgment upholding the claim regarding involuntary treatment was issued in 226 cases (78 percent of cases). Only around 1 percent of those decisions were appealed. Between 2018 and 2023 652 cases of involuntary treatment were concluded. A judgment upholding the claim was issued in 494 cases (75.8 percent of cases). Only 2 percent of those decisions were appealed.

Often, persons give consent only formally: a person’s “forced” consent becomes a precondition for being discharged from a psychiatric institution sooner. Besides, involuntary hospitalization and treatment of a person is sometimes conditioned not by his/her health state, but rather, by the caregiver’s personal interest.

Suggested questions:

- What steps are taken to eliminate involuntary hospitalization and treatment and in what timeframe is it envisaged to make legislation in line with the Convention requirements?
- What are the guidelines in line with which changes are to be made?
- How will involvement of persons with psychosocial and intellectual disabilities, their family members and civil society representatives in the process be ensured?

Freedom from torture or cruel, inhuman or degrading treatment or punishment (Article 15)

There is a high risk of psychiatric institutions being used as a mechanism of punishment: a person may appear in a psychiatric institution due to his/her sexual orientation or religious affiliation, and the potential of their involuntary treatment might be considered.

Moreover, restraint measures are used towards persons in psychiatric institutions in order to punish them. The Human Rights Defender recorded a case, when a person was held in the physical restraint room for 7 days and slept on a physical restraint bed throughout those 7 days. Moreover, that very person and other persons receiving treatment and care in the department, as well as representatives of the medical staff, considered that person's isolation and restrictions imposed on him as use of punishment.⁴

Ill-treatment in institutions is also manifested in the lack of decent living conditions. In both psychiatric and care institutions, situations that degrade the dignity of persons from the point of hygiene provision have been recorded, such as several toilets without any separation from each other, the absence of hygiene items in the toilets, more than one person using the same shower at the same time, having the patients cut toilet paper to a certain amount/length every day, etc.

The lack of adequate personal care conditions makes women particularly vulnerable. For example, the lack of 24/7 hot water in some institutions is a significant concern for women, especially during menstruation, and the sharing of personal hygiene items (such as bath sponges) raises serious concerns about the spread of infections. Women are also vulnerable in terms of personal grooming and appearance. Many have their hair cut by staff who lack hairdressing skills, leading to undesirable results, such as cuts that are too short. The main justification for short haircuts is hygiene, but such an approach ignores women's fundamental right to control their appearance.

Violence, including violence against children with psychosocial and intellectual disabilities, is continuous in state care institutions.⁵

Suggested questions:

- What measures are taken to eliminate the practice of using psychiatric institutions as punishment?
- What steps will Armenia take during the transition away from psychiatric hospitals to ensure in institutions access to clean and private bathing facilities, including hot water, eliminate the practice of sharing hygiene items, and respect their autonomy

⁴ See Annual report on the activities of the human rights defender of the Republic of Armenia as the National Preventive Mechanism during the year 2020, page 44, available at <https://www.ombuds.am/images/files/bec457b51025c26ae7716dc50241ced8.pdf>

⁵ See Alternative Report on Implementation of the UN Convention of the Rights of the Child by the Republic of Armenia submitted by Helsinki Citizens' Assembly-Vanadzor and The World Organisation Against Torture, available at https://hcav.am/wp-content/uploads/2024/03/Alternative_Report_CRC_HCAV_OMCT.pdf

over personal grooming by providing access to trained staff and necessary hair care products?

- What steps are taken to protect children with psychosocial and intellectual disabilities against possible violence, and how is effectiveness of those steps assessed/what results have been recorded?

Living independently and being included in the community (Article 19)

Persons with psychosocial and intellectual disabilities continue residing in care or psychiatric closed institutions, deprived of the opportunity to exercise the right to live independently and be included in the community.

Though the foundation of deinstitutionalization policy was laid in Armenia in 2013, no care institution has so far been dissolved for the sake of deinstitutionalization; moreover, due to shortage of community services, there are queues to be accepted to institutions. There is a limited number of community based services. According to the information provided by the Ministry of Labor and Social Affairs of the Republic of Armenia, as of December 2024, 69 people with mental health conditions and intellectual disabilities are provided with 24-hour care in the community in the format of small group homes (whereas the number of people with mental health conditions in large care institutions is 619). Beside the fact that these services are available only in Yerevan and four out of 10 marzes, small group homes do not serve their purpose of adapting a person for the independent life in the community.

Moreover, small group homes resemble institutions, since they are designed for 8-20 people, whose ability to make decisions about their lives, leave the group home and lead an independent life is limited due to the lack of a network of community-based services and necessary support.

In the conditions of lack of community-based services and substantive steps towards their introduction, unification of psychiatric institutions and state funding of reconstruction projects of those institutions become even more worrisome. In 2021, the Government of the Republic of Armenia USD 100 million program of reconstructing National Center of Mental Health Care was approved, and yet, only about USD 320.000 was provided to state-subsidized 12 community services.

Suggested questions:

- When is it envisaged to develop and approve a deinstitutionalization strategic program in the mental health sphere?
- Is the need for community services necessary for persons with psychosocial and intellectual disabilities assessed? What are those services?
- How much money is to be provided for introduction and activity of community services in 2025-2026?

Respect for home and the family (Article 23)

The current Family Code provides for provisions on limiting parental rights, terminating adoption if a person has mental health conditions, and allowing for the dissolution of marriage if the person is recognized legally incapable. Although in November 2024, the draft Law of the Republic of Armenia "On Making Amendments and Addenda to the Family Code" was submitted for public discussion, which repeals the provisions on terminating adoption and terminating parental rights on the basis of mental health problems, it is not clear when the draft will be adopted, and whether in that edition.

Suggested questions:

- What steps will Armenia take to ensure that parents are not separated from their children based on their own or their child's disability or mental health condition, in alignment with CRPD principles?

Education (Article 24)

Despite the declared policy of inclusiveness and actions taken to implement it, persons with psychosocial and intellectual disabilities are actually deprived of the opportunity to get proper education in line with their needs.

General education schools do not have sufficient specialists with the relevant skills. Inclusion of the parent thus becomes a necessary condition for the child to be in school. Moreover, though it was planned to shift to general inclusive education by 2022 by thus stopping education of children with disabilities, including children with psychosocial and intellectual disabilities, in special schools, they still function as schools for those children.

Programs of secondary vocational and higher educational institutions are general and do not take into account individual needs and requirements of persons with disabilities. One

of the reasons is that educational institutions are not involved in their development and decision-making process.

Suggested questions:

- What steps are taken to ensure that persons with psychosocial and intellectual disabilities receive quality education in line with their individual needs and requirements throughout all stages of education?
- Is it envisaged to stop/change the activity of special schools? In what direction and timeframe?
- What mechanisms are to be used to assess impact of the measures taken and what are the lessons learned and measures to be taken to avoid them later?

Health (Article 25)

Psychiatric institutions continue to be the main method of providing psychiatric aid. Moreover, those institutions are not accessible in 5 out of 10 provinces of the Republic of Armenia.

The issue of having enough psychiatrists and psychotherapists is particularly worrisome in provinces. According to 2022 statistical data, 51 out of 97 working doctors of the psychiatric profile are in Yerevan. 14 out of 15 working psychotherapists are in Yerevan, one in Shirak. The number of working child psychiatrists in the entire republic is 9: 8 in Yerevan, one in Shirak. In other words, 9 out of 10 marzes of the Republic of Armenia do not have psychotherapists and child psychiatrists.

Proper prevention and control of physical diseases in psychiatric institutions, as well as the right of persons receiving treatment and care in psychiatric institutions to treatment in the conditions of the Covid-19 pandemic was not properly ensured in general medical centers. Moreover, in the conditions of the Covid-19 pandemic, psychiatric service of persons with indications to be hospitalized and treated was not ensured, either.⁶

Suggested questions:

⁶ See The RA psychiatric institutions in the conditions of COVID-19 (part 2): The State of Control and Prevention of Somatic Diseases, Report, A public monitoring group, available at https://hcav.am/wp-content/uploads/2021/10/Report-Somatic-health-care-in-psychiatric-hospitals_English_final_011221-1.pdf

- How is availability of quality inpatient and outpatient psychiatric mental health services going to be ensured in line with the relevant needs, including in emergency conditions?
- What measures are taken to ensure availability of services for treatment of physical illnesses of persons with mental and intellectual disabilities, including in emergency conditions?

Adequate standard of living and social protection (Article 28)

Having attained the age of 18, children in child care institutions under the Ministry of Labor and Social Affairs of the Republic of Armenia continue to live in the institution or are transferred to care institutions for adults or stay at the orphanage as a result of the lack of support services in the community. As of December 2024, 610 students live in the 5 operating orphanages, of which 234 are adults with disabilities. Moreover, out of 250 students in the Kharberd specialized orphanage, only 45 (18 percent) are minors.

The state implemented a program to provide apartment purchase certificates to orphans who have reached the age of 18 during the years 2019-2022. During those years, 281 purchase certificates were provided to former orphanage graduates.

However, there is no data regarding the number of certificates provided to persons with disabilities having attained the age of 18, since the Ministry of Labor and Social Affairs does not hold statistics for that line. Moreover, on 28 October 2021, the Republic of Armenia Government made a decision, which is discriminatory in terms of rights of persons with disabilities. Particularly the decision deprives them of the right to choose a residence place and contradicts the Convention on the rights of persons with disabilities. In particular, the Republic of Armenia Government's decision 1774-N establishes that "beneficiaries who do not have self-service capabilities" do not have the right to get an apartment purchase certificate.

In 2023 the program to provide a certificate for the purchase of an apartment was suspended, nevertheless such discriminatory attitude by the state towards persons with disabilities is problematic.

According to the Law on State Allowances disability benefits in Armenia are determined based on the degree of functional limitation. The minimum amount of disability benefit provided by the state to persons with disabilities is 92 USD (the maximum amount is 100 USD). The cost of the minimum consumer basket in the third quarter of 2024 is about

197 USD according to the composition, structure and energy of food products calculated by the Ministry of Health and about 147 USD, calculated according to the methodology of the World Bank. In both cases, the minimum pension is less than the minimum consumer basket (in the first case by 53.3%, in the second case by 37.4%).⁷

Moreover, lack of services deprives at least one family member of a child with disability of the opportunity to work, which negatively affects the family's financial security and thus also the well-being of children.

Suggested questions:

- When is the introduction of community-based services envisaged, which will prevent residence of 18-year-old persons with psychosocial and intellectual disabilities in care institutions?
- What was the substantiation for adopting the Republic of Armenia Government's decision depriving orphans who have reached the age of 18 of the right to choose a residence place?
- In what timeframe is it envisaged to make disability pension commensurate with at least the minimum consumer basket cost?

Participation in political and public life (Article 29)

According to Article 48 of the Constitution and Article 2(4) of the Electoral Code persons recognized legally incapable still do not have the opportunity to exercise their right to vote. In particular, the Constitution establishes that "citizens of the Republic of Armenia having attained the age of eighteen shall have the right to elect and the right to participate in the referendum", except persons declared, upon civil judgment of the court having entered into legal force, as having no active legal capacity, as well as persons sentenced and those serving the sentence, upon criminal judgment having entered into legal force, for a grave criminal offence committed intentionally. A similar provision has been enshrined in the Electoral Code of the Republic of Armenia.

Suggested questions:

- What steps are taken to guarantee suffrage of all persons with psychosocial and intellectual disabilities?

⁷ 1 USD is 390 AMD

Views and analyzes presented in the report are those of the authors and do not necessarily reflect views and positions of donor organizations.

