

MONITORING REPORT

OF THE STATE POLICY AND PROGRAMS AIMED AT PREVENTING GENDER-BIASED SEX SELECTION IN THE REPUBLIC OF ARMENIA

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The monitoring was carried out by the group of monitoring experts of the International Centre for Human Development.

Head of the Group of Experts:

Vahan Asatryan, Chief Technical Advisor of the Program (ICHD)

Expert:

Hamlet Gasoyan, Expert on Monitoring of the State Policy and Programs

CONTENT

1. Acknowledgments	5
2. Executive Summary	7
3. Foreword	10
4. Methodology	11
5. Monitoring Results	15
5.1. Actual data and counselling	15
5.1.1. Opportunities for combining work and childcare	16
5.1.2. Measures aimed at increasing the birth rate	20
5.1.3. Gender inequality	21
5.1.4. Measures for legislative restriction of sex-selective abortions	23
5.2. Advocacy and public awareness-raising campaigns	27
5.2.1. Advocacy and public awareness-raising campaigns implemented in 2017-2018	28
5.3. Affecting the State Policy	30
5.3.1. Actions aimed at affecting the state policy implemented in 2017-2018	31
6. Conclusions	32
7. Recommendations	33
8. Annexe 1 List of participants of the expert interviews	35
9. Annexe 2 The distribution of specialities and positions of doctors, who took part in the anonymous interviews	36

Acronyms

ICHD	International Centre for Human Development
MOH RA	Ministry of Health of the Republic of Armenia
MOLSA RA	Ministry of Labour and Social Affairs of the Republic of Armenia
NGO	Nongovernmental organization
RA	Republic of Armenia
SC RA	Statistical Committee of the Republic of Armenia (former National Statistical Service)
UN	United Nations
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund

Main Concepts

Abortion- Medical or surgical termination of pregnancy, starting from the moment of fertilization till the 22nd week of pregnancy.

State (public) policy, comprehensive combination of actions prescribed by the laws, other legal enactments, state strategies and financial priorities.

Sex ratio at birth, the ratio of the number of live-born boys to 100 live-born girls.

1. Acknowledgments

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of the National Institute of Health, named after Academician S. Avdalbekyan, MOH RA; Ms Armine Mkhitarian, Head of the Department of Social Support and Social Innovations of the National Institute of Labour and Social Research, MOLSA RA; Ms Lusine Sargsyan, Head of the Department of Legal Analysis of the RA Human Rights Defender's Office; Dr Irene Sargsyan, Education and Youth Expert of "Save the Children" Armenia Country Office; Ms Naira Arakelyan, Director of "Armavir Development Centre" NGO; Ms Ani Harutyunyan, Program Coordinator of the "Armavir Development Centre" NGO; Ms Nvard Manasyan, Gender Equality Officer, UNICEF; Ms Sevan Petrosyan, Head of "Caring for Equality" Program of the "World Vision" Armenia, for participation in the avid discussions and sharing valuable concepts Your advice and opinions have been invaluable.

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2. Executive Summary

1. The purpose of this report is to outline the results of policy monitoring for the period 2017-2018, as well as the programs implemented by civil society and international organizations aimed at preventing gender-biased sex selection. The report was developed using mixed methodologies for data collection and analysis. The main sources of data involved legal, regulatory and policy constituting documents which are pertinent to the state policy aimed at preventing gender-biased sex selection and sex-selective abortions; expert interviews with the representatives of competent and authorized state bodies and non-governmental structures, as well as anonymous in-depth interviews with the medical workers selected as a target group affected by the above-mentioned state policy.
2. Armenia has recorded a significant improvement in the sex ratio at birth within a comparatively short period of time and with a limited funding. Whereas the ratio of live-born boys to girls had been 115 to 100 in 2010, the ratio in 2017 was 110 boys to 100 girls. In spite of the stable positive trends recorded within the recent years, the sex ratio at birth still exceeds by four points the upper biological norm adopted by the UNFPA, that is the ratio of 102-106 boys to 100 girls. At the same time, specialists predict that the recorded achievement might be lost within a short period of time without continuous and comprehensive supporting measures.
3. Working women who consider themselves breadwinners of the family experience significant independence in decision-making. On the other hand, when a woman does not earn income her participation in decision-making for the household is limited. However, the complexities connected with combining employment and child-care very often force women to face a choice of either leaving the labour market, or postponing the pregnancy, or limiting the number of pregnancies.
4. The availability of kindergartens and day-care services (including for children with special needs) is exceedingly important for women in order to decide to have children and remain in employment. Consequently, a phase by phase solution has been recommended for expanding the currently available services for women on the basis of the UNFPA and ICHD joint research which was published in 2018. Taking into account the possible costs, potential sources of funding and the feasibility of implementing the suggested measures, it is recommended to develop day-care services for children under three years of age through enhancing the services of preschool institutions in Yerevan in the short-term perspective. It is estimated that only within the first two years of implementing the recommended measures, as the result of creating new early childhood day-care services for around 660 children, the contributions to the state budget of the Republic of Armenia will increase by around 250 to 300 million dram annually.
5. Over the course of the monitoring, collection of evidence has been continued, and activities caused by this and influence on public policy have been observed. In this respect, we must specifically highlight the actions aimed at improving the opportunities of women for combining work and childcare. Annexe 23¹ of the Government Decree No 534-N is a specific example of

¹ The Decree stipulates providing financial support from the state budget to individuals who seek employment while in parental leave to take care of children under three years of age, with the purpose of combining childcare along with employment, given that a parent wishes to return to work before the child reaches the age of two years.

these activities which is in line with the evidence collected during recent years. At the same time, mechanisms designed for the implementation of the Decree are fraught with problems and can create complications for the effective achievement of the goals stated above. Further monitoring of the program implementation can provide valuable data about the problems and difficulties that were revealed in the process of program implementation, along with the registered examples of the best practices. On the other hand, in future it will be important to increase the number of eligible beneficiaries for the state budget allowance stipulated by the Annexe 23 of the Government Decree No 536-N, as well as to take steps towards developing early childhood institutional day-care services that will enable to involve a sufficient number of target group individuals and to obtain observable changes.

6. The Government of the RA increased the amount of the one-time allowance granted to families for the birth of a second child, from 50,000 dram to 150,000 dram, as was established by the Decree No 1006-N of September 14, 2018, that was approved over the course of compilation of the current Report. However, the specialists who participated in the expert interviews have expressed ambiguous opinions about this decision. Whereas a number of public sector representatives who took part in the expert interviews acknowledged the possibility of positive consequences of direct financial transfers on the birth rate, the experts from the Civil Society Organizations expressed an opinion that the mentioned increase of allowance for childbirth by such a small amount cannot have any significant impact on family planning.
7. A number of studies attest the insufficient representation of women in political life, the lack of guarantees for their economic independence and horizontal and vertical discriminatory selection in the labour market. No sectoral programs were implemented in 2017-2018 with the participation of the Department of Family, Women and Children Issues of the Ministry of Labour and Social Affairs of the RA, although the Department had continued developing drafts of strategic programs.
8. The current legislative regulation on sex-selective abortions has had a certain positive impact. In particular, it speaks of the commitment of the State to combat the phenomenon. On the other hand, the volume and content of counselling, provided by doctors before the procedure of abortion, largely depend on their motivation, the system of values and personal standpoints, and that is fraught with certain risks. In this regard, the activities of the non-governmental bodies, in particular, the UNFPA training for the medical workers, including preparation of guidelines, informative leaflets and organising thematic training, have a particular importance.
9. Available studies attest that today individuals make decisions on whether to carry out a selective abortion in a comparatively unbiased, tolerant social environment. This is largely the result of the wide-scale public awareness-raising campaigns that have been implemented in the recent years. Although there has been a quantitative decrease in the number of public awareness-raising activities in 2017-2018, currently, there is no apparent need for wide-scale awareness-raising campaigns on the issue as there used to be in the past. However, taking into account prevailing gender stereotypes, it is hard to state whether the former achievements will not revoke as a result of the decrease in the number of public awareness-raising campaigns. On the other hand, whereas in the past the public awareness-raising campaigns were directed primarily at mitigating the pressure on women imposed by families and society, today there is a need for other messages. In particular, there is a need for increasing the value of the

girl child, endorsing the woman's role of an income earner, excluding gender discrimination, and increasing the birth rate. Such messages, in particular, were included in some public awareness-raising activities, which were accomplished in 2017-2018.

10. We can conclude that the measures for preventing sex-selective abortions implemented during 2017-2018 were predominantly directed at meeting the obligations taken by the Republic of Armenia in this sphere.
11. Chapter Seven of this Report presents recommendations on policy and programs aimed at preventing the gender-biased sex selection, and sex-selective abortions and crosscutting gender problems. Policy and program recommendations involve keeping the public policy consistent and comprehensive with the aims of the programme, continuing to implement monitoring activities and enhancing institutional cooperation.

3. FOREWORD

12. One of the main manifestations of gender-biased sex selection is the sex-selective abortion, which has caused a discrepancy in the demographic balance of a number of countries.² In recent decades, this phenomenon has developed into a serious challenge, particularly in India, China, Vietnam, Balkan and Southern Caucasian countries.³
13. The discrepancy in the sex ratio of newborns has gradually increased in the Republic of Armenia (RA) in the course of the years after the country declared independence in 1991. Thus, in 1995 the sex ratio at birth (the ratio of the number of newborn boys to 100 newborn girls) was above 110, whereas in 1998 it exceeded 115, and in 2000, respectively, it rose above 120. Later, however, there was a certain improvement in the sex ratio of newborns. As compared with the figure of 115 in 2010, the ratio has been 110 live-born boys to 100 live-born girls in 2017. (Chart 1).⁴
14. In 2012 it was predicted that it would take around 25 years to bring back the sex ratio at birth to the natural level⁵ in Armenia. However, the progress attained within recent several years has significantly excelled the anticipations. At the same time, in spite of the stable positive trend recorded within recent years, the sex ratio at birth continues to exceed the natural sex ratio by four points, remaining at 102-106, which still is above the upper threshold of the natural biological norm adopted by the UNFPA.
15. The main precondition stimulating gender-biased sex selection is discrimination against women, which results in undervaluing the girl child as a result of son preference. The other two preconditions are the availability of reproductive health and diagnostic technologies, and the low level of birth rate in general.⁶ It is a generally accepted opinion that the latter factor contributes to son preference when it comes to planning the sex of the first child in the family.⁷ As a matter of fact, all the three preconditions mentioned are present in Armenia.

² Bongaarts, J. & Guilмото, C. Z. (2015). How Many More Missing Women? Excess Female Mortality and Prenatal Sex Selection, 1970–2050. *Population and Development Review*, 41(2), <https://doi.org/10.1111/j.1728-4457.2015.00046.x>

³ UNFPA (2017, March 15) Gender-biased Sex Selection. Retrieved from <https://bit.ly/2L1FPOA>

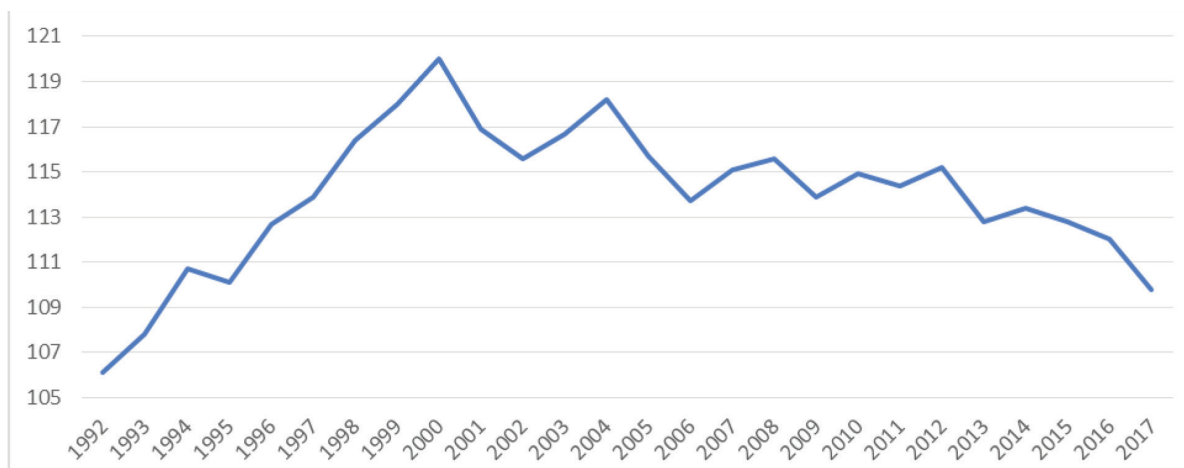
⁴ Data retrieved from SCO RA (National Statistical Committee of the Republic of Armenia), 2018

⁵ Guilмото C.Z. (2013). Sex Ratio Inconsistency of Newborns in Armenia: Demographic Data and Analysis. Republican Institute of Reproductive Health, Perinatology, Obstetrics and Gynaecology of the Ministry of Health of the RA, UNFPA and National Statistical Committee, Yerevan, retrieved from: <https://bit.ly/2zyt50L>

⁶ UNFPA Asia-Pacific Regional Office (2012). Sex Ratio Imbalance at Birth Rate and Current Fertility Patterns, Results and Political Sub-statements, Bangkok

⁷ ICHD (2016) Monitoring Report of the State Policy and Programs Aimed at Preventing Gender-biased Sex Selection and Sex-selective Abortions in the Republic of Armenia, Yerevan, retrieved from: <https://bit.ly/2MYKQrM>

Chart 1 Sex ratio at birth, 1992-2017.



Source: Statistical Committee of the RA.

16. The official recognition of the problem of gender-biased sex selection by political decision-makers and professionals took around three years in Armenia, starting from the period when the United Nations Population Fund (UNFPA) voiced the problem in 2011, till the first decree of the Prime Minister of the RA in 2014. The specialists have assessed the formerly implemented mechanisms as effective for affecting the state policy, including the dissemination of information on risks and negative consequences of sex-selective abortions, and public awareness-raising campaigns. Thus, the study “Sex imbalances at birth in Armenia: demographic evidence and analysis”, which was published by the UNFPA in 2013, predicted that in case of persistence of the prevailing trends in the sex ratio of newborns around 93,000 girls will not be born by 2060 in Armenia, which might result in unprecedentedly alarming social consequences. The results of this study became a fundamental argument that helped to convince the policy-makers of the country to recognize the existence of disproportionate sex ratio of newborns in Armenia as not only a human rights issue but also as a matter of national security. After the problem was identified, it was also incorporated in the framework of the state policy of maternal and child health protection and the program of combating the gender-based violence.⁸
17. The 2016 and 2017 Monitoring Reports on the state policy and programs implemented by international and nongovernmental organizations (NGOs) for preventing gender-biased sex selection demonstrate that Armenia has adopted a comprehensive policy for regulating the problem. The actions of legislative restriction and legal regulation were largely accompanied with public awareness-raising campaigns, intended to raise the value of the girl child, change the stereotypes feeding gender-based discrimination, engage the appropriate number of human resources and enhance institutional capacities.^{8,9}
18. The purpose of this Report is to summarize the results of monitoring of the implementation of the state policy and programs, as well as the programs implemented by nongovernmental and international organizations in 2017-2018 aimed at preventing the gender-biased sex selection and sex-selective abortions.

⁸ See reference 7.

⁹ Asatryan V. and Co-authors (2017) Monitoring Report of the State Policy and Programs Aimed at Preventing Gender-biased Sex Selection and Sex-selective Abortion in the Republic of Armenia, ICHD, Yerevan. Retrieved from: <https://bit.ly/2NCWidT>.

4. Methodology

19. The monitoring of public policy includes a series of actions which describe and analyse the process of its development and implementation, reveal the potential shortcomings, make corresponding recommendations and, in general, stipulate the accountability of the entities responsible for its implementation.¹⁰ The stakeholders of this process observe and evaluate the extent of adequacy of the policy development, adoption and implementation to the planned objectives, tasks, actions and results.
20. The policy change is a sophisticated process which is affected by mutual influence from diverse forces and actors. That is why the attainment of the planned observable results or the reiteration of the former success frequently fails in different scenarios. In this context, processing and using the information which was obtained in the course and in the aftermath of administering the changes become exceedingly important, specifically for assessing the performance, building on the lessons learned and improving the future work.¹¹
21. The first Monitoring Report was published in 2016, followed by the second Monitoring Report in 2017. The Reports observed and evaluated the national and sectoral public policies, strategic programs and action plans aimed at increasing the value of the girl child in the family and the society in the context of preventing gender-biased sex selection in Armenia. The above-mentioned Reports also contained policy recommendations addressing the policy decision-makers, civil society, law enforcers and international development partners, with the purpose of encouraging a wide discussion around the possible solutions of the problem.
22. We have used a mixed methodology of collecting and processing data for the development of this Report. In particular:
 - Systematized search and analysis of documents and legal enactments constituting the state policy and legal regulations to advocate for preventing gender-biased sex selection and sex-selective abortions;
 - Expert interviews with authorised and competent representatives from the state bodies and non-state institutions from the above-mentioned spheres; in-depth anonymous interviews with medical workers as a policy impact target group; and qualitative analysis of the obtained results. Expert interviews were conducted with seventeen individuals (see the list of interviewees in Annexe 1). In-depth anonymous interviews were conducted with twelve doctors from maternity hospitals in Yerevan (see the list of participants per specialities and the occupied positions in Annexe 2);
 - Systematized search of reports and studies of the relevant content published in 2017-2018 and discussion of the main findings;
 - Ad hoc inquiries of quantitative data from secondary sources, progress reports, unpublished analytical materials from organizations possessing these data and discussion of the retrieved data. Accordingly, statistical data on the sex ratio at birth was retrieved from the Statistical Committee, ICHD progress or current reports, midterm assessment results of program

¹⁰ Hardee, K. et al. (2012). "Linking Health Policy with Health Systems and Health Outcomes". Washington DC: Futures Group, Health Policy Project. Retrieved from: <https://bit.ly/2JfGwSB>

¹¹ See reference 7.

implementation from “World Vision” Armenia, program progress statements from the Ministry of Health of the Republic of Armenia (MOH RA).

23. The interviews were conducted in compliance with the pre-developed guidelines. The guidelines were developed by the author of this report and approved by the ICHD. The guidelines for interviews with doctors were discussed and approved by the representatives of the MOH RA and UNFPA. The qualitative analysis was performed in accordance with the steps of qualitative analysis described by *Elo & Kyngäs*.¹² We have tried to perform triangulation between the results obtained from different information sources (expert interviews, other studies, legal documents pertinent to the topic of preventing gender-biased sex selection) in order to ensure the credibility of the results.
24. We have used the same instruments for assessing the types of impact on policy and the results of impact, which were described in detail in the Monitoring Report of the ICHD of 2016, “State policies and programs for preventing gender-biased sex selection and sex-selective abortion in the Republic of Armenia”¹³ The types of impact on the policy in this Report are grouped to the point by the logic outlined in Table 1, i.e. *Actual Data (Evidence) and Counselling, Public Awareness-raising Campaigns and Advocacy, Lobbying and Negotiating*.

¹² Elo, S., & Kyngäs, H. (2008) The Qualitative Content Analysis Process. *Journal of Advanced Nursing*, 62 (1), 107–115. doi: 10.1111/j.1365-2648.2007.04569.x

¹³ For more details see pages 16-39 of this Report, retrieved from: <https://bit.ly/2MYKQrM>:

Table 1 Types of impact on the policy¹⁴

<i>Type of Impact</i>	<i>Where? With what means?</i>	<i>Results: What is to be measured?</i>	<i>How? With what methodology?</i>	<i>Instruments</i>
Actual Data / Evidence and Counselling	Discourse or debates around national and international policies; Formal and non-formal meetings.	Results; Comprehension and implementation; Impact	Study and analysis; Exchange of the “best practices”; Evidence backed by proofs; Provision of counselling ; Development and testing of new political approaches.	Evaluation of studies, summaries and internet sites; Data collection, reference analysis; interviews with beneficiaries; Assessment of the results by RAPID methodology (assessment of any particular impact on the change in the state policy); Case studies; The most significant change.
Public Awareness-Raising Campaigns and Advocacy	Public and political discourse; Public meetings, speeches and presentations; TV, newspaper, radio and other media.	The attitude and behaviour of the target groups; Focusing the attention of the media, formulating different issues and problems and framing them; Analyzing their impact	Public communication and campaigns; “Public education”; Messages; Counselling	Surveys, focus groups, direct queries; Assessment of media publications, Analysis of the frames of formulations; media coverage
Lobbying and Negotiating	Formal meetings; Semi-formal and non- formal measures; Accession to and participation in commissions and counselling boards	Actors; Relations; Political processes and institutions	Individual meetings and discussions; Interrelationship and mutual trust; Direct motivation and diplomacy	Recording, taking the meeting minutes; Studying human behaviour; Arranging interviews with opinion-makers and main information sources; Detailed study of the impact.

¹⁴ Adapted from 2016 Monitoring Report. See pages 16-39 of the Report, retrieved from: <https://bit.ly/2MYKQrM>:

5. Monitoring Results

5.1. Actual data and counselling

25. The Monitoring Reports of 2016 and 2017 described in detail the results of the formerly published studies about the prevalence of sex-selective abortions in Armenia, the causes and pertinent demographic data and discussed the usage of these data as an evidence base for attaining desirable changes in the state policy. This Report refers to the evidence base accrued after 2016 and the counselling accomplished in 2017-2018 while drawing parallels with the former achievements and difficulties.
26. Whereas the main purpose of the Reports published before 2014 was to articulate the possible negative consequences and to exert the recognition of the problem of gender-biased sex selection, the studies of the recent years have been focused mainly on analyzing the state policy aimed at preventing the problem, as well as on offering practical recommendations for solving it.
27. Research of the problem in 2017-2018 has been conducted mainly by the international development partners and nongovernmental organizations (NGOs).¹⁵ Within the same period of time, in the framework of the Global Program to Prevent of Son Preference and the Undervaluing of Girls, funded by the EU, a number of capacity building arrangements were accomplished for strengthening the national research institutions, including the preparation of a methodological guideline, organization of workshops and training. Also in the framework of the above-mentioned program the UNFPA has accomplished a number of actions including training for medical doctors on their role in prevention of gender-biased sex selection and for improving their counselling communication skills (the session was facilitated by psychologist).¹⁶
28. Participants of the expert interviews have stressed the importance of maintaining the continuity of generating monitoring reports on the problem.¹⁷ In particular, they have underlined the role of such reports in improving the accountability of the state policy, for evaluation of programs implemented in this area and offering impartial evidence. They have highlighted also the importance of developing clear mechanisms for monitoring and evaluating the state programs in the initial stages of development.¹⁸

¹⁵ Interviews with Armine Mkhitarian, Head of the Department of Social Support and Social Innovations of the National Institute of Labour and Social Affairs of the MOLSA RA, and Diana Andreasyan, Director of the Information and Analysis Centre and Head of the Health System Performance Assessment of the National Institute of Health, of the MOH RA.

¹⁶ Interview with Narine Beglaryan, the Coordinator of the UNFPA Global Program on Prevention of Son Preference and the Undervaluing of Girls in Armenia, funded by the EU.

¹⁷ Interviews with representatives of MOH RA, MOLSA RA, UNFPA, ICHD, "Save the Children" Armenia, "Armavir Development Center" NGO.

¹⁸ Interview with Irene Sargsyan, Expert on Education and Youth Issues of the Organization "Save the Children" Armenia Country Office.

5.1.1. Opportunities for combining work and childcare

29. The study “Prevalence and Causes of Sex-Selective Abortions in Armenia”¹⁹ published by the ICHD in 2017 (which used the same methodology as the similar one ²⁰ published in 2011) analyzes the prevalence of the phenomenon and its causes, as well as describes the changes recorded in the context of the gender-biased sex selection as a result of the state policy and programs implemented within 2011-2016. The results of this study are based on a survey of randomly selected women of age from 15 to 49 from 1,919 households, who have been pregnant at least once in their lifetime, as well as on the qualitative analysis of data collected from focus groups consisting of men, women and experts.
30. The comparison of results from these two studies, conducted in 2011 and 2017 respectively, demonstrates that the weighted average of women with no source of income was bigger in 2017, amounting to 68%, as compared with 40% in 2011. Accordingly, 71.2% of women who participated in the survey in 2017 identified their husbands as breadwinners in the family. At the same time, women with no source of income did not qualify themselves as unemployed (it was one of the optional answers in 2017), which speaks of a change in cultural perception in the society, where the main role assigned to women is child upbringing and the main role assigned to men is earning income.²¹
31. Working women, who consider themselves the main breadwinner or income earner of the household, are significantly freer in making decisions. In contrast, when women are not earning income, their participation in decision-making for the household is also limited.²² However, the difficulties of combining employment with childcare very often force women to face a choice of either leaving the labour market, or postponing pregnancy, or limiting the number of pregnancies. It is a generally accepted opinion that the last option is one of the most important factors in gender-biased sex selection.
32. The “Analysis of the policy and practices implemented in the social sphere for preventing gender-biased sex selection” published by the ICHD in 2016 provides recommendations based on legal documents constituting the state policy, the international experience of expanding possibilities of women for participating in the labour market and combining employment with childcare, and the study of the respective research projects accomplished in Armenia. The “Analysis” underscores the availability of kindergartens and extended day-care facilities or other childcare services for the working women (including facilities for children with special needs as an important condition for having children and preserving the employment.²³
33. The “Analysis of Public Policy on Extending Early Childhood Care and Development Services to Prevent Gender-Biased Sex Selection” published by the ICHD in 2017 continues giving recommendations and offering solutions for preventing the further decrease of the birth rate

¹⁹ ICHD (2017) Report: Prevalence and Causes of Sex-Selective Abortion in Armenia, Yerevan, retrieved from: <https://bit.ly/2NE9oav>:

²⁰ The Republican Institute of Reproductive Health, Perinatology, Obstetrics and Gynecology, the Ministry of Health of the RA and UNFPA (2011) Report: Prevalence and Causes of Sex-Selective Abortion in Armenia, Yerevan, retrieved from: <https://bit.ly/2tGzd1A>:

²¹ See reference 9.

²² See reference 19.

²³ Analysis of the Policy and Practices Implemented in the Social Sphere for Preventing Gender-biased Sex Selection, ICHD (2016), Yerevan. Retrieved from: <https://bit.ly/2vgYoaG>

and increasing the value and role of the girl child in the society and family. Report underscores the importance of developing early childhood day-care services, discusses the international experience in organizing day-care services for children of age younger than three years; describes the legal framework for the state policy and legal regulation of issues pertinent to the sphere, as well as the possibilities for respective service provision in the Republic of Armenia.²⁴

34. In 2017-2018, the UNFPA and ICHD have jointly made a study on Costing and feasibility analysis of public policy reforms on extending formal child care and development services as a policy instrument for son preference and the undervaluing of girls. The study analyzes feasibility and cost-effectiveness of reforming the state policy and programs for expanding early childhood and development services, including assessment of the impact of these services on the effectiveness of the policy solutions for preventing sex-selective abortions in the Republic of Armenia.²⁵
35. On the basis of the results of the above-mentioned studies, a phase by phase solution was recommended for expanding the framework of the available services. Taking into account possible costs, available sources of funding, and feasibility of realization in the short term perspective, it is recommended to develop day-care services for children of age younger than three years through expanding preschool institutions and services in Yerevan. It is predicted that only within the first two years of realization of the recommended measures, as a result of arranging early childhood day-care services for around 660 children, the tax contributions to the state budget of the RA will grow by around 250-300 million dram.²⁶
36. In the midterm perspective, it is recommended to develop and implement financial guarantees and funding mechanisms for the expansion of child day-care services and child day-care centres. Suggested solutions include, in particular, co-financing of the above-mentioned services by employers for their working mothers employees, subsidising services for families with low income and/or young families, tax exemptions or tax privileges in proportion to the cost of services provided to working mothers, giving grants to institutions which deliver day-care services for children in early childhood and/or funding through community budgets, etc.²⁷
37. In the long term perspective, the focus is shifted towards increasing the availability of child day-care services for children of age younger than three years through expanding the services of preschool institutions in Yerevan by 10% till 2025, and by 15 % till 2030.²⁷
38. The need for involving the Yerevan Municipality and big employers from the private sector has been underscored for implementing similar studies and presenting the results. When a woman is unable to return to the previous employment from childcare leave, the employers lose skills and experience important for their businesses. It is necessary to raise the awareness of employers on the possibilities of preserving their human resources, in particular, through

²⁴ Analysis of the State Policy Directed at Expanding Early Childhood Daycare and Development Services for Preventing Gender-biased Sex Selection, ICHD, (2017), Yerevan. Retrieved from: <https://bit.ly/2K4TFON>

²⁵ Interviews with representatives of the UNFPA and ICHD.

²⁶ Analysis of the feasibility, cost efficiency and usefulness of expanding early childhood daycare and development services for preventing sex-selective abortion, ICHD, Summary, Yerevan, 2018. Retrieved from: <https://bit.ly/2PmFMi2>

²⁷ See reference 26.

the development of institutional services for early childhood day-care, the establishment and maintenance of which is useful and expedient particularly for the employers.²⁸

39. Representatives of the MOLSA RA, who have participated in the expert interviews in the framework of this Report, indicated that they are well aware of the actual facts and evidence presented in the reports published by the ICHD, UNFPA and other partners, and have highlighted the importance of maintaining the labour market competitiveness of women in their childcare leave and facilitating as much as possible their return to employment. The expert on gender issues from UNICEF Armenia also highlighted the direct link between the availability of early childhood day-care services and new child planning in the family.
40. In this respect, it is necessary to discuss the changes that have taken place in the state policy in 2017-2018.
41. The RA law on changes and amendments in the RA Law “On Employment” was adopted in December 2017. The enactment of the order stipulated by the Government of the RA²⁹ states that individuals seeking employment, while in childcare leave for children of age younger than three years, are entitled to receive a subsidized support for organizing childcare concurrently with employment, given that they recommence employment before the child has reached the age of two years. The change made in the above-mentioned law allowed the Government to adopt in June 2018 the Government Decree No 534-N of April 17, 2014, , Annexe 23 of which stipulates the order of providing subsidized support to individuals seeking employment and in childcare leave for children of age younger than two years, for organizing child day-care concurrently with employment, given that they recommence employment before the child has reached the age of two years (hereinafter Government Decree No 534-N, Annexe 23).³⁰
42. Annexe 23 of Government Decree No 534-N stipulates that subsidies shall be provided from the state budget of the RA to individuals seeking employment and in childcare leave for children of age younger than three years, for organizing the child day-care concurrently with employment, in case they recommence employment before the child has reached the age of two. This subsidized support is granted to beneficiaries for not longer than 11 months per year, for each child of two years and younger, as a compensation for the services of the nanny, or services of a paid preschool child day-care institution, or as a compensation of the 50% of the payment for monthly day-care services of contractual character but in the amount not exceeding the minimum monthly salary established by the Law (55,000 dram as of August 2018).
43. To be eligible for the above-mentioned program, a beneficiary must be registered in any of the Territorial Centres of the State Employment Agency. The annual state program of employment made subsidy provisions for 200 individuals in 2018. In case the number of applications for the subsidy exceeds that figure, the preference will be given to the following individuals:
 - Individuals whose average nominal (before taxes) monthly salary does not exceed the national average monthly salary of the previous year, estimated and published by the SC RA (195,000 dram as of 2017);
 - Members of the families that are involved in the family benefit social programs;

²⁸ Interview with Vahan Asatryan, Head of the Department of Research and Development of ICHD.

²⁹ The Law entered into force on 01.01.2018: Retrieved from: <https://bit.ly/2ArhYqE>

³⁰ The Annexe was adopted on 08.06.18 No 665-N: Retrieved from: <https://bit.ly/2LFj5Zb>

- Individuals who have two and more children of age younger than two years;
 - Individuals who have three and more children;
 - Caretakers of children with disability;
 - In case of inability to evaluate the above-mentioned conditions, or in cases of applicants with equivalent conditions, the preference shall be given to the individuals with a longer term of registration in the Territorial Employment Centres.
44. Participants of the expert interviews expressed contradictory opinions about Annexe 23 of the Government Decree No 534-N. Despite of the fact that the interviewees agreed about the positive impact of giving working mothers the opportunity for combining work with childcare on women's decisions about having more children, they also expressed concern on a number of problems connected with this Government Decree.
45. In accordance with its definitions and rationale, Annexe 23 of the Government Decree No 534-N is in effect an employment promoting program,^{31,32} whereas conceptually, the Decree was not intended to address the employment in general but aimed to facilitate the return to employment and to expand the opportunities of mothers who already have jobs.^{31,33} The content of the Decree is therefore creating confusion between “job seeking” and “returning to the employment” during the process of verifying the eligibility of beneficiaries.^{31,32,33} In particular, yet another controversy is the preference of individuals with a longer term of registration in the Territorial Employment Centres. Women, who have employment and are satisfied with it, are less likely to apply to the employment centres with the purpose of seeking a job. Another problematic feature is the clause which is granting preference to those who are already involved in the family benefit programs, because many of these individuals either have not been employed before, or even if they had been employed, they would have most probably avoided having a registered employment so as to not lose the eligibility for receiving the family benefit.³¹
46. Participants of the expert interviews also indicated that the currently designated average salary of the eligible beneficiaries is rather low. Thus, in case of a nominal salary of 195,000 Drams before taxes, after deduction of the income tax, the social security tax and the “stamp tax” a person will receive 142,000 dram of net income. Taking into account the prevailing range of 80,000-100,000 dram of average fee for a babysitter and the condition that half of it is to be paid by the beneficiary (40,000-50,000 dram), the motivation of mothers with an average salary under the amount of 195,000 dram to recommence the previous employment is ambiguous. On the other hand, babysitter services or child day-care institutions which provide day-care services for children with disabilities or special needs are significantly more expensive. In this respect, it is recommended to raise the threshold of the average salary of eligible beneficiaries up to 250,000 dram.³¹
47. Representative of the Division of Employment of the Department of Labour and Employment of the MOLSA RA, which has prepared the final draft of this Decree and is coordinating its implementation, had a different interpretation of the above-mentioned questions. She believed

³¹ Interview with Armine Mkhitarian, Head of the Department of Social Support and Social Innovations of the National Institute of Labour and Social Affairs, MOLSA RA.

³² Interview with Vanik Babajanyan, Head of the Division of Demography, MOLSA RA.

³³ Interview with Vahan Asatryan, Head of the Department of Research and Development of ICHD.

that Annexe 23 of Government Decree No 534-N applies only to those mothers, who have been employed previously (parents). Mothers who do not have prior employment, or those mothers, who have already returned to their jobs from the childcare leave are not eligible for this program. Moreover, priorities described in the Decree will be taken into account by the Territorial Centres of Employment only after the benefit recipient lists will exhaust the number of eligible nominations. However, there are no clearly formulated functional definitions for the statements: “in case more people will apply for the program than it can afford”. It was stated also that the specific threshold of an average salary of beneficiaries was chosen to give advantage to more vulnerable individuals of the society.³⁴

48. The representative of the Department of Labour and Employment of the MOLSA RA stated that awareness-raising work was done so as the potential beneficiaries of the program would register in advance in the Territorial Employment Centres. Although the program was launched on July 7, 2018, the Agency has already received numerous calls and has information that the potential beneficiaries of the program have started to register in the Territorial Employment Centres since January.³⁴
49. It is worth noting that the summary of comments and recommendations to the draft of the program contained concerns specifically expressed on a number of ambiguous issues like: the low threshold of salaries of the eligible beneficiaries; the preferential condition of a longer term of registration in the Territorial Employment Centres; the low probability of involving people from groups that are not competitive in the labour market; the higher rates of payment for nannies or paid preschool institutions for day-care services for children with disabilities or special needs; the exclusion of the possibility of involving a family member as a paid nanny.³⁵

5.1.2. Measures aimed at increasing the birth rate

50. In the context of preventing sex-selective abortion, the available studies also discuss the effectiveness and expediency of financial, social and other motivating instruments used in different countries with the purpose of raising the birth rate.³⁶
51. The MOLSA RA has developed a range of program recommendations in 2017-2018 aimed at motivating the raise of the birth rate in the RA. Thus, the Department of Labour Demography of the MOLSA RA has developed the draft of a project titled “Strategic concepts for enhancing the demographic situation in the RA by 2040”. The project outlines the main approaches of the MOLSA RA for encouraging the birth rate, including the remuneration of income tax in proportion with the number of children in the family, the improvement of housing conditions, financial incentives and other instruments. The draft of the project was submitted to the Government of the RA in April 2018, however, after the change of the Government, it was sent back to the MOLSA RA. The discussion of the above-mentioned program concepts can recommence after clarification of the upcoming agenda of the government programs.³⁷

³⁴ Interview with Naira Bouboushyan, Chief Specialist of the Division of Employment of the Department of Labour and Employment, MOLSA RA.

³⁵ The Joint Site for Circulation of Drafts of Legal Documents: Recommendations by OxyGEN Fund for Protection of Rights of Youth and Women and Liana Babajanyan. Retrieved from: <https://www.e-draft.am/projects/692/digest>

³⁶ See reference 22.

³⁷ Interview with Vanik Babajanyan, Head of the Division of Demography, MOLSA RA.

52. The Department of Demography of the MOLSA RA has developed a draft of the RA Law “On Multiple Families” in 2017. The law is aimed at encouraging multiple children in families through clarification of the legal status of the families with many children and assuring social security by corresponding support from the state.³⁸ According per MOLSA representative, a number of NGOs and potential beneficiary families with many children had actively participated in the process of development of the draft law. The draft law was approved by the Government in November 2018 and sent for a preliminary hearing to the National Assembly of the RA, however, it was sent back to the Government.³⁷
53. In the course of development of the Report, the Government adopted a Decree No 1006-N, on September 14, 2018, , about the increasing the amount of the benefit paid to families for the birth of the second child from 50,000 Drams to 150,000 Drams. The Decree entered into force on October 1, 2018 ³⁹
54. A number of representatives from the public sector who have participated in the expert interviews gave mainly positive assessment to the role of such direct financial transfers for encouraging the birth rate,^{40,41} although some concerns were expressed that the state can affect with its financial support only on the time of planning for a next child.⁴⁰ There was an opinion that as compared with the direct financial transfers the solution of the housing needs would have been much more effective.⁴² At the same time, an expert from the civil society insisted that such increase of the childbirth benefit cannot possibly have any essential impact on the number of children planned by families. And if the activity assumes to support the socially vulnerable families, it would be more expedient to provide these financial benefits through the system of family benefits.⁴³ Another expert on gender issues stated that although the financial support to women is supposed to lighten up their burden, however, the definitive approach to a woman as to a “reproductive” entity is unacceptable, and moreover, will have no impact whatsoever on preventing gender-biased sex selection.⁴⁴

5.1.3. Gender inequality

55. Previous studies and reliable evidence allow us to insist that son preference in Armenia is stipulated exclusively by the patriarchal structure of the society and the unequal distribution and value of the roles and responsibilities between men and women. The unequal size of remuneration for the same work done by men and women and disproportionate participation in the political life of the country are the factors which confirm the existence of inequality.
56. The ongoing research program “Gender-biased sex selection in Armenia”⁴⁵ was launched in 2013 by the Swiss National Committee of the UNICEF and the Zurich University with the

³⁸ The Draft is retrieved from: <https://www.e-draft.am/projects/407/about>

³⁹ Decree of the Government of the RA of September 14, 2018, No 1006-:. Retrieved from: <http://www.arlis.am/DocumentView.aspx?docid=125318>

⁴⁰ Interview with Vanik Babajanyan, Head of the Division of Demography, MOLSA RA.

⁴¹ Interview with Karine Kouyoumjian, Head of the Census and Demography Department of the SC RA.

⁴² Interview with Armine Mkhitarian, Head of the Department of Social Support and Social Innovations of the National Institute of Labour and Social Research, MOLSA RA.

⁴³ Interview with Vahan Asatryan, Head of the Department of Research and Development of ICHD.

⁴⁴ Interview with Sevan Petrosyan, Head of the Program “Caring for Equality”, “World Vision” Armenia.

⁴⁵ Interview with Nvard Manasyan, Gender Equality Officer, UNICEF.

participation of the Armenian NGO “Women’s Resource Centre”. Although the preparatory work for the program had started in 2013, the bulk of the research was done in April 2016. The purpose of the research was to reveal the deep underlying reasons for gender-biased sex selection in Armenia and analyze social norms causing this phenomenon. The research was conducted among 300 households in three regions of Armenia, which respectively had the highest, average and lowest rates of sex selection practices. The research instruments will allow to conduct a study of the practice of sex-selective abortion from two viewpoints, namely, the value of the girl child and the decision-making capacity of women in the family. The results will allow to reveal the hidden discrimination of the girl child among husbands and mothers-in-laws. The results will also help to plan future advocacy and public awareness-raising activities of the UNICEF, and support the partner state structures in developing new recommendations for the state policies and regulations.

57. The majority of participants in the expert interviews emphasised the role of gender inequality as one of the key factors that lead to e gender-biased sex selection. It was stated that this problem, along with gender inequality and the low number of women delegates in the National Assembly, have the same roots.⁴⁶ It was also stated that Armenian women are made to believe that having sons enhances their importance and role in the household.⁴⁷
58. The representative of the MOLSA RA Department responsible for developing gender policy, stated that in 2017-2018 the Department had not participated in any sectoral programs.⁴⁸ However, the Department has continued drafting strategic programs. In particular, in 2017 the Department has developed the draft of the procedural decision on “Approving the strategy and action plan for 2017-2021 for sustaining equal rights and equal opportunities for women and men in the Republic of Armenia”, which was not accepted by the Government, first because of the requirement to change some formatting definitions and later because of the change of the Government itself. Currently, the draft of the document for 2018-2022 is in circulation and shall be discussed by the new Government.⁴⁹
59. The study “Men and Gender Equality in Armenia” conducted by the UNFPA in 2016⁵⁰ shows gender discrimination reflected in disproportionate participation of women as compared to men in the political life; lack of economic security and vertical and horizontal discrimination in the labour market. The first voluntary report of Armenia on the Sustainable Development Goals states that the salary of women is on average 34% lower than the salary of men.⁵¹
60. The expert, who is responsible for developing the gender policy of the MOLSA RA, also agreed that there is a vertical and horizontal discrimination in the labour market. Thus, women generally occupy lower positions than men. However, the expert did not agree with the statement that women and men in Armenia receive different salaries for the same job.⁴⁹ In this respect, the working report of the World Bank Group, published in 2018, states that the

⁴⁶ Interview with Sevan Petrosyan, Head of the Program “Caring for Equality” “World Vision” Armenia.

⁴⁷ Interview with Nvard Manasyan, Gender Equality Officer, UNICEF.

⁴⁸ Interview with Armenuhi Tanashyan, Deputy Head of the Department of Family, Women and Children Issues and Head of the Division of Women Issues, MOLSA RA.

⁴⁹ See reference 48.

⁵⁰ Vladimir Osipov and Zina Sargisova, 2016. Men and Gender Equality in Armenia, UNFPA, Yerevan.: <https://bit.ly/2vCVtdl>

⁵¹ Official Facebook page of the UN Armenia Country Office.: <https://bit.ly/2OrsH6y>

average gender gap between salaries per hour of work is 20% in Armenia. The Report also states that women are often employed part-time and are scarcely involved in the spheres and positions with high salary rates. It is recommended to develop a policy aiming to balance time required by family and employment, including through the enhancement of childcare services. The authors of the report also think that in order to eliminate the gender gap in salaries it is necessary to increase the number of women who occupy high-level managerial positions.⁵²

61. The representative of the Human Rights Defender's Office stated that, although there are no evident discriminatory norms in the acting legislation, and the law "On Ensuring Equal Rights and Equal Opportunities for Women and Men" was adopted in 2013, nonetheless, the law has a predominantly declarative character. In this regard, the gender inequality does not need only legislative regulation, but also is the result of improper exertion and disadvantages of regulations.⁵³

5.1.4. Measures for legislative restriction of sex-selective abortion

62. The ICHD analysis of the acting policies and practices for preventing gender-biased sex selection in the healthcare sector conducted in 2016 gives a detailed account of the experience in a number of countries about restricting sex-selective abortion through legislation.⁵⁴
63. The 2016 RA Law "On Making Amendments in the Law of the RA "On Human Reproductive Health and Reproductive Rights" prohibits sex-selective abortion, since it was not explicitly prohibited in the previous edition of the legislation.⁵⁵ The Law states that abortion of 12 to 22 weeks pregnancy shall be allowed exclusively for medical reasons (including cases with the probability of hereditary diseases connected with the sex), or in case of existence of social indications and with the written consent from the woman. If there are no medical and social reasons, or in cases not included in the list of accepted reasons, including the cases with gender-biased characteristics, the termination of a 12 to 22-week pregnancy is prohibited.
64. The law also prescribes that termination of pregnancy can be performed only in healthcare institutions with corresponding licenses for respective medical practices. Immediately before the abortion, doctors must provide women with free counselling about the possible negative consequences of abortion. Immediately after the abortion, doctors must provide women with free medical and social counselling about the choices of measures for avoiding unwanted pregnancy, all of which is to be stated by the doctor in the medical file of the woman who had applied for abortion and must be confirmed by her signature.
65. The "Code of Administrative Offences of the Republic of Armenia", with corresponding modifications sets up the administrative responsibility for violation in the procedure of performing abortion.⁵⁶

⁵² Rodriguez-Chamussy, L., Sinha N., Atencio, A. (April 2018) The Economics of the Gender Wage Gap in Armenia. Policy Research Working Paper 8409. World Bank Group. <https://bit.ly/2oiaXzJ>

⁵³ Interview with Lusine Sargsyan, Head of the Department of Legal Analysis of the Human Rights Defender's Office of the RA.

⁵⁴ Report retrieved from: <https://bit.ly/2PLV552>

⁵⁵ Adopted on June 29, 2016. Retrieved from: <https://bit.ly/2MYFjVG>

⁵⁶ Adopted on June 29, 2016. Retrieved from: <https://bit.ly/2PJS8lf>

66. Basing on the statements of the Law of the Republic of Armenia “On Making Amendments in the RA Law “On Human Reproductive Health and Reproductive Rights”, the Government of the RA has adopted the Decree “On approving conditions and SOP for performing abortion” in 2017.⁵⁷ The Decree prescribes medical and social indications for abortion, as well as the standard procedure for performing abortion. In this regard the most debated statement of the Law is that doctors should give the “three-day waiting period” to women who apply for abortion for making final decision.
67. The first Monitoring Report (2016) stated a diversity of opinions expressed by specialists on regulating sex-selective abortions by legislative prohibition. The legislative regulation of the problem in general was accepted positively, and was a clear statement from the Government and the public that sex-selective abortion is ethically condemnable and legally prohibited. At the same time, it was noted that legislative regulation alone will not produce the anticipated results.
68. The participants of the expert interviews expressed doubts whether the approach of solving the problem through disciplinary and punitive measures will bring effective results. Imposing legal responsibility made the problem less latent, and showed that fighting the phenomenon should primarily target the elimination of its deep underlying causes. On the other hand, taking into account the dynamic growth of medical technologies, it is now possible to detect the sex of the foetus in much earlier stages of pregnancy.⁵⁸
69. The discussion on “three days waiting period” before having an abortion, which was adopted by the Decree of the Government in 2017, is also notable, The MOH adopted this approach based on the experience of other countries that have already implemented a similar practice. The representative of the MOH RA noted the expediency of a comprehensive measures against sex-selective abortion and the corresponding attempt of using legislative mechanisms for regulating the problem was also mentioned⁵⁹
70. Meanwhile, individuals who work in the field of defending women’s rights object that the probability of biased counselling within the “three-day waiting period” could create additional risks for stigmatizing abortion. It was noted that marginalized and poor women are likely to suffer rather than benefit from this regulation, as the “three-day waiting period” might become an obstacle for receiving medically safe abortion services.⁶⁰
71. A number of participants of the expert interviews conducted within the framework of this Report noted that women who apply for sex-selective abortion often come from communities where they are exposed to certain psychological pressure of their families where having a son has a specific significance, which means that the “three-day waiting period” and counselling

⁵⁷ Decree of the Government of the RA of February 2017, No 180-N. Retrieved from: <https://bit.ly/2PcNvz2>

⁵⁸ Interviews with representatives of the Human Rights Defender’s Office, ICHD, UNFPA, UNICEF, Department of Health System Performance Assessment of the Information and Data Analysis Centre of the National Institute of Health, named after Academician S. Avdalbekyan, MOH; anonymous interviews with doctors.

⁵⁹ Interview with Karine Saribekyan, Head of the Department of Mother and Child Health Protection, MOH RA

⁶⁰ Ani Gilozyan. Gender Policy in Armenia. Study of Strategies for Legislation, Antidiscriminatory Gender Advocacy and Community Development, 2017, Yerevan. Retrieved from: <https://bit.ly/2MYDbNU>.

will most probably have no essential impact on their decision.^{61,62} Even so, every individual is entitled to receive complete information about the method of medical interference, its possible consequences, advantages and disadvantages before undergoing to any medical intervention, and has the right for making a completely informed decision.⁶³ In this regard, it was stated that the counselling provided before abortion must give complete information about possible consequences and risks to health and must be free of any elements of psychological pressure.⁶²

72. It is worth noting that the participants of the expert interviews did not speak of any actual data or evidence of cases which would confirm the “three-day waiting period” created obstacles and/or limitations for women seeking medically safe abortion services in Armenia.
73. It is worth mentioning as well that after the adoption of the RA Law “On Making Amendments in the RA Law ‘On Human Reproductive Health and Reproductive Rights’” and the Government Decree of 2017 “On approving the conditions and SOP for performing abortion”, there has been no monitoring for revealing whether these specific legal regulations were exercised to full extent and what achievements or complications resulted from their implementation.
74. Below we present the information provided by doctors who have participated in our anonymous in-depth interviews. All participants of the interviews in their everyday work come in contact with either medical procedures of abortion, or with its associated work, counselling and/or arrangements for performing abortion.
75. It is notable that none of the participating doctors allowed us to voice-record the interviews, even on the promise that the voice-recording will be destroyed immediately after transcribing. Some doctors refused to participate in the interview for different reasons (once they learned that the participation is voluntary), with an evident concern that there could be a hidden element of inspection under the pretence of an interview.
76. Doctors mostly stated that although the number of applications for abortion, in general, and the number of applications for sex-selective abortion, in particular, has notably decreased, they still encounter women in their practice, who apply specifically for sex-selective abortion. The participating gynaecologists noted that they do not perform sex-selective abortion in their medical institution. Interestingly, the majority of participants stated that although they personally do not perform such abortions, however, they have heard of doctors (from other medical institutions) who are infamous for practising abortion at late stages of pregnancy (including sex-selective abortion).
77. Some doctors have confirmed that, although the sale of the medicine Cytotec (Misopristol) is allowed only by medical prescription in Armenia, they have encountered, albeit not frequently, patients who use Cytotec without medical prescription for inducing abortion at home. The improper use of Cytotec can cause numerous complications, including haemorrhage and

⁶¹ Interview with Sevan Petrosyan, Head of the Program “Caring for Equality” of the International Relief, Development and Advocacy Organization “World Vision” Armenia.

⁶² Interview with Lusine Sargsyan, Head of the Department of Legal Analysis of the Human Rights Defender’s Office of the RA.

⁶³ Interview with Narine Beglaryan, Coordinator of the “Global Program to Prevent Son Preference and the Undervaluing of Girls” UNFPA Armenia.

incomplete abortion. After banning the sales of the medication without prescription in 2016, yet another study has shown that the medicine can still be bought in pharmacies without prescription.⁶⁴

78. The doctors who participated in the interviews were mostly aware of the procedures prescribed by the Government Decree of 2017 “On approving the conditions and SOP for abortion”, in particular, of the SOP, the permissible terms of abortion (either per request, or per medical and social indications), the “three-day waiting period”, the obligatory counselling before and after abortion. As expected, the doctors with supervisory authorities (Head of Department/Unit and/or Director of Maternity Hospital) were more aware about the content of the Decree, as compared with the only practising doctors who did not have supervision. A number of practising gynaecologists were not well aware about the social indications for performing abortion, e.g. the form of application written by a woman who wants to have an abortion (they were aware that the woman must sign in her medical file but were not aware, or did not mention, that the written application is legally required); the prerequisite of a collegial decision on abortion in case of existence of medical and social indications.
79. There was a notable difference in the content and amount of information given to pregnant women by gynaecologists during the counselling before the abortion. Whereas all doctors who participated in the interviews had indicated that they provide information about the possible health risks and procedures, a number of other participants added that they try to “convince women in a friendly and not pressing manner to not have an abortion”, and one participant noted that she had spoken to her patient about the ethical side of abortion, qualifying it as a sin.
80. The gynaecologists who participated in the interviews noted that immediately after performing an abortion they provide free counselling about the FP methods to avoid unwanted pregnancy. However, many participants were doubtful about the effectiveness of such counselling. Thus, some doctors told about cases, when women have had multiple abortions. One of the doctors noticed that the Armenian society, in general, there is a distrust with regard to using some contraceptives, for example, the hormonal contraceptives.
81. A frequently expressed opinion during the interviews was that it is necessary to take into account the financial motivation of the doctors, especially when discussing the about abortion. One gynaecologist frankly noted that she provides counselling aimed at preventing of abortion free of charge, whereas she would be paid for performing the abortion.
82. The opinions of doctors in respect of the effectiveness of legislative restrictions in preventing sex-selective abortions are vary. Many doctors have noted that in their medical practice, although not frequently, they have encountered cases when after the “three-day waiting period” women do not come back to have an abortion. Doctors believed that although some women would continue their pregnancy and visit the relevant Women’s Consultation, others, most probably, would apply to other medical institutions for abortion.

5.2. Advocacy and public awareness-raising campaigns

83. One of the important directions of the state policy for preventing gender-biased sex selection were the public awareness-raising campaigns on the prevalence, causes and consequences

⁶⁴ Gasoyan, H., Babayan, R., Abou Cham Sh., Mkhitarian, S. (2016) Report of the Public Inquiry into the Status of Sexual and Reproductive Health Rights in Armenia. United Nations Population Fund, Yerevan, Armenia. DOI: 10.13140/RG.2.2.29168.15365

of the phenomenon, which was implemented in 2014-2016. Awareness-raising campaigns were actively implemented in May 2015 in the framework of the State Program for preventing sex-selective abortions adopted by the joint order of the Minister of Health and the Minister of Labour and Social Affairs of the RA.⁶⁵

84. Current studies indicate that the past efforts directed at preventing sex-selective abortions have generated positive outcomes. The study on “The Prevalence and Causes of Sex-selective Abortion in Armenia”⁶⁶ published by ICHD in 2017 (which was largely based on the methodology of another study published in 2011⁶⁷) speaks of alleviation of the pressure on women in the families and the social environment affecting their decision to have a sex-selective abortion. As compared with the data collected in 2011, according to which 59.3% of the inquired women stated that the social environment prefers sons, in 2017 the same indicator was 36.7%. Correspondingly, 45.3% of respondents (women) in 2011 stated that their families had a preference for a male child, whereas this indicator dropped to 12.9% in 2017. Evidently, the public opinion on “son preference” has changed within 2011-2017. While speaking publicly of the preference of a male child was acceptable in the past, it is recognized as unfavourable in the present. In this respect, the individuals who face a decision on having a sex-selective abortion presently find themselves in a comparatively neutral environment with less social pressure.
85. The participants of the expert interviews conducted in the framework of the present Monitoring Report stated that the number of public awareness-raising activities has significantly decreased in 2017-2018 as compared to the previous years.⁶⁸ The experts assure that at present there is no need for such a wide-scale public awareness-raising campaigns as it might have been necessary in the past. At the same time, if in the past the public awareness-raising campaigns were mostly aimed at alleviating the pressure exerted on women by their families and society, there is now a need to spread other messages. In particular, the messages must also aim to increase the value of the girl child, endorse the income-earning role of a woman and boost the fertility rate.⁶⁹ It is also necessary to involve the most stable and reliable sources of information, including educational institutions, the Armenian Apostolic Church, and other institutional partners.⁷⁰ It has been noted that the messages of the further awareness-raising campaigns must primarily address the concerns and issues of the rural communities.⁷¹ Nevertheless, it is worth mentioning that the current prevalence of gender stereotypes and the sex ratio at birth of first-born children make concern that the achievements recorded in this area are irreversible that is due to the cutting of awareness-raising activities. This concern has been explicitly expressed by the ICHD in its publications on public policy analyses and other documents.⁷¹

⁶⁵ For details see the First Monitoring Report (2016). Retrieved from: <https://bit.ly/2MYKQrM>

⁶⁶ See reference 18.

⁶⁷ See reference 19.

⁶⁸ Interviews with the representatives of the Organization “Save the Children” Armenia Country Office, UNOI, ICHD, International Relief, Development and Advocacy Organization “World Vision” Armenia, “Armavir Development Center” NGO.

⁶⁹ Interviews with representatives of the UNICEF, UNFPA, MOLSA RA, ICHD, “Armavir Development Center” NGO.

⁷⁰ Interviews with representatives of the UNICEF, Organization “Save the Children” Armenia Country Office and the ICHD.

⁷¹ Interviews with Naira Arakelyan, Director, Ani Harutyunyan, Program Coordinator, NGO “Armavir Development Centre”.

5.2.1. Advocacy and public awareness-raising campaigns implemented in 2017-2018

86. Within the monitoring period (2017-2018), the UNFPA has accomplished awareness-raising work in Yerevan, Aragatzotn, Armavir and Gegharkunik in the form of the staged puppet performances, which were aimed at changing the gender stereotypes and increasing the value of girls. These performances were organized in cooperation with a number of NGOs.
87. The UNFPA stresses the importance of the dialogue between medical workers and women as being crucial for preventing sex-selective abortion, and thus has carried out awareness-raising work among medical workers. In particular, a guideline and advocacy flyers were developed for gynaecologists and ultrasound specialists. UNFPA has also developed and delivered training to 45 medical workers from Yerevan. In the course of compiling the present Report, the UNFPA has already started organization of capacity building training for regional obstetrician-gynaecologists and ultrasound specialists. The UNFPA is planning also to work with the State Birth and Marriage Registration Agency of the Ministry of Justice and the Armenian Apostolic Church in 2019.
88. The UNFPA has produced a series of TV programs which were broadcasted on national and regional TV channels, has organised meetings with youth, in particular, with high school students and students of the American University of Armenia and thematic discourses with the members of the National Assembly and experts.⁷²
89. The ICHD, with the funding from the EU, and in cooperation with the organization “Save the Children”, “Armavir Development Centre” and Martuni Community Women’s Council has prepared thematic radio and television programs in the framework of the program “Combating gender-biased sex selection in Armenia” implemented in 2017, which were broadcasted by the national and regional TV channels. In the course of 2017-2018, the ICHD has continued moderating the work of a thematic “Facebook group” page.⁷³ The group has made around 90 thematic blog releases between December 2017 and June 2018. In the near future, the ICHD is planning to prepare one more video material targeting the problem, with funding from the EU and with the support of the UNFPA in the framework of the Global Program to Prevent Son Preference and the Undervaluing of Girls.⁷⁴
90. Within the same period of time, the “World Vision” Armenia, with the funding from the “World Vision USA”, continued implementing the program “Caring for Equality”. The goal of the program is to change stereotypical attitudes, prevent the development of stereotypes and behaviours which are harmful for women and girls and foster the creation of an environment where girls and boys are born and esteemed equally. In the framework of the Program, couples and young individuals participate in a 14-week module, during which they discourse around the themes of building family relations on mutual respect; the proper acknowledgement of the

⁷² Interview with Narine Beglaryan, the Coordinator of the “Global Program on Prevention of Son Preference and the Undervaluing of Girls” UNFPA Armenia.

⁷³ Retrieved from: <https://goo.gl/9FLqDD>

⁷⁴ ICHD Program reports of 2017 and 2018.

role of women in the society; parenting and other related themes. The Program is conducted in a number of regions of Armenia and in the Kanaker-Zeitun community of Yerevan.⁷⁵

91. The intermediate assessment of the program “Caring for Equality” demonstrates that the couples and young individuals who participate in the program have a lesser discriminatory attitude towards gender issues. In cases of witnessing violence, the program participants express significantly more concern as compared with non-participants, which signifies the change in the social attitude. At the same time, the statistical research shows no noticeable difference of parental behaviour in responses to the issues among the parents who participated in the program and those parents who did not.⁷⁶
92. The NGO “Armavir Development Centre”, with the funding from the Canadian Government, carried out awareness-raising work in 10 communities over the course of 2017-18. The representatives of the NGO have stated that the program was largely based on the materials and the capacity of trained specialists available within the framework of the 2017 program “Combating gender-biased sex selection in Armenia”⁷⁷. The program was funded by the EU and implemented by the ICHD jointly with “Save the Children” Organisation, “Armavir Development Centre” and Martuni Community Women’s Council.
93. In 2018, the UNICEF, together with the “Caucasian Research Resource Centre Armenia” conducted a study the purpose of which was to reveal patterns of media behaviour of men and women and to describe the prevailing social norms around gender issues. The results of the study will allow the UNICEF and its partner organizations to launch better-targeted public awareness-raising projects aimed at changing behavioural patterns.⁷⁸

⁷⁵ Interview with Sevan Petrosyan, Head of the Program “Caring for Equality” of the International Relief, Development and Advocacy Organization “World Vision” Armenia.

⁷⁶ Progress Report Presentation of the Program “Care for Equality”, 2018, Yerevan.

⁷⁷ Interviews with Naira Arakelyan, Director, and Ani Harutyunyan, Program Coordinator, of the NGO “Armavir Development Centre”.

⁷⁸ Interview with Nvard Manasyan, Gender Equality Officer, UNICEF.

5.3. Affecting the State Policy

94. The two previous monitoring reports have assessed as effective the mechanisms that have been implemented for affecting the state policy, after the UNFPA articulated the problem of sex-selective abortion in 2011 and the Prime Minister of the RA responded to it in 2014.
95. Majority of participants in the expert interviews which were conducted in the framework of this Report continue to assess the cooperation between the state structures and the international and local development NGOs for preventing gender-biased prenatal sex selection as positive. It is worth mentioning the positive attitude of the representatives of the state structures towards the consistency of the presented evidence and the efforts exerted by the UNFPA and the ICHD.⁷⁹
96. Participants of the expert interviews have articulated a number of other problems. In particular, they observed that the state bodies seem to become complacent too soon as a result of the improved sex ratio at birth.⁸⁰ In conditions of the general decline in the birth rate, the present achievements can be lost in a very short period of time.^{80,81} Sex-selective abortion is one of the most severe expression of gender discrimination which requires a continuous and comprehensive response from the state.^{80,82} It is worth noting that the civil society organizations do not always agree on the same approaches in combating gender-biased sex selection. A vivid example of such disagreement is the negative attitude of the Armenian organizations defending women's rights to the attempts of legislative regulation of abortion.⁸³
97. A representative from the ICHD observed that the political developments and governmental elections that took place in Armenia in 2017 and 2018 have slowed down the adoption of a comprehensive action plan by the state bodies.⁸⁴
98. The interviews conducted with the representatives of the MOLSA RA and ICHD in the framework of this Report allow us to assume that sometimes depending on which state agency is responsible for formulating a document for the state policy (for example Annexe 23 of Government Decree 534-N), it can significantly deviate from the primary logic of the given policy because of discrepancies in interagency priorities and inconsistency of interagency coordination.
99. The representative of the MOH RA expressed an opinion that it is necessary to clarify the stakeholders' roles in the framework of the jointly implemented action plans.⁸⁵ The representative of the Human Rights Defender's Office of the RA observed that the state structures would sometimes present such programs which are too spacious and apparently

⁷⁹ Interviews with Armine Mkhitarian, Head of the Department of Social Support and Social Innovations of the National Institute of Labour and Social Affairs of the MOLSA RA; Vanik Babajanyan, Head of the Division of Demography of the MOLSA RA; Naira Bouboushyan, Chief Specialist of the Division of Employment of the Department of Labour and Employment of the MOLSA RA, and Karine Saribekyan, Head of the Department of Maternal and Child Health Protection of the MOH RA.

⁸⁰ Interview with Nvard Manasyan, Gender Equality Officer, UNICEF.

⁸¹ Interview with Vahan Asatryan, Head of the Department of Research and Development of ICHD.

⁸² Interview with Sevan Petrosyan, Head of the Program "Caring for Equality" of the International Relief, Development and Advocacy Organization "World Vision" Armenia.

⁸³ See reference 60.

⁸⁴ Interview with Vahan Asatryan, Head of the Department of Research and Development of ICHD.

⁸⁵ Interview with Gayane Avagyan, Head of the Division of Reproductive and Maternal Health Protection of the Department of Mother and Child Health Protection, MOH RA.

not feasible because of the lack of specific formulations and implicitly conglomerated actions. A vivid example of the above said is the draft action plan for the guaranteed legal equality for men and women.⁸⁶

100. Last but not least, the collection of data by nongovernmental organizations was sometimes hindered by overzealous administrative attitude. For example, the ICHD representatives noted that in the framework of collecting data for the assessment of the feasibility and cost-effectiveness analysis of implementation of the state policy and programs to prevent son preference and the undervaluing of girl, it had been necessary to collect certain financial data from respective kindergartens of Yerevan. However, the NGO had faced difficulties and had not received adequate support from the Yerevan Municipality for accessing this information within relevant period of time.

5.3.1. Actions aimed at affecting the state policy implemented in 2017-2018

101. In March 2017, as part of the EU-funded “Combating gender-biased sex-selection in Armenia” program, the ICHD organized a three-day meeting which was attended by around 40 representatives from the line ministries, international development organizations and local NGOs. The program was implemented in cooperation with “Save the Children”, Armavir Development Centre and Martuni Community Women’s Council. During the meeting, the participants discussed relevant issues, best practices and outlined the next steps for combating gender-biased sex-selection. Prior to the event in February 2017, a round table was organized for stakeholders to discuss international experience in combating sex-selective abortions, the participation of women in the labour market and the international experience in organization of early childhood day-care.
102. In the framework of the same program, ICHD organized a conference in April 2017 during which the representatives from the state and the civil society were updated on the actual findings around the problem and discussed the recommendations on the next steps, particularly in relation to the problem of availability of early childhood day-care services, existing possibilities and the potential effect of enhancing the availability of the above-mentioned services on the women’s opportunity to combine work and childcare.⁸⁷
103. The MOH RA, MOLSA RA and ICHD have signed a memorandum of cooperation for drafting a midterm national action plan on preventing sex-selective abortions (non- medical reasons) on August 14, 2017.⁸⁷
104. ICHD has also organized a coordinating meeting with the representatives of responsible institutions in the framework of the Global Program to Prevent Son Preference and the Undervaluing of Girls” on July 25, 2018. The meeting discussed the midterm national action plan for preventing gender-biased sex selection for 2018-2022 in order to finalize the document.⁸⁸

⁸⁶ Interview with Lusine Sargsyan, Head of the Department of Legal Analysis, of the Human Rights Defender’s Office of the RA

⁸⁷ ICHD Program Report of 2017.

⁸⁸ ICHD Program Report of 2018

6. Conclusions

105. Activities for preventing gender-biased sex-selection accomplished in 2017-2018 were primarily directed at fulfilling the obligations made by the RA in this field.
106. In a comparatively short period of time and with rather limited funding it has been possible to register a significant improvement in the sex ratio at birth in Armenia. Whereas the sex ratio at birth in 2010 was 115 boys to 100 girls, in 2017 the number has been 110 boys to 100 girls. Apparently, the indicator has not yet reached the upper threshold of the natural ratio of 102-106 boys to 100 girls. At the same time, the experts affirm that the recorded achievements can be lost in a short period of time if the comprehensive activities will not continue.
107. Representatives of the state and civil society have adopted instruments of legal regulation into a comprehensive policy which combines public awareness-raising activities aimed at increasing the value of girl child, preventing discrimination by empowering and expanding human resources and institutional capacities required for successful accomplishment of these activities.
108. Available studies indicate that today individuals make decisions on sex-selective abortions in environment which is relatively favourable from social pressure. This is mainly attributed to the previously accomplished wide-scale public awareness-raising activities, although, there has been a noticeable decline in the number of public awareness-raising activities in 2017-2018. Perhaps in the present, there is no need for such wide-scale public awareness-raising activities as there used to be in the past. At the same time, in conditions of the currently prevailing gender stereotypes, the irreversibility of the previous achievements, given the decrease in the number of public awareness-raising campaigns, is concernable. Furthermore, whereas in the past the public awareness-raising campaigns were primarily directed at mitigating the pressures on women exerted by families and society, today there is a need for other messages. In particular, there is a need for increasing the value of the girl child, endorsing the woman's role as an income earner, eliminating gender discrimination and increasing the fertility rate.
109. The accumulation of evidence and the activities that affect the public policy continued during the monitoring period. In this regard, the activities for improving the opportunities of women to combine work with childcare are especially important. One of the specific examples of such activities is Annexe 23 of the Government Decree 534-N, which is consistent with the actual data collected within the last years. At the same time, the mechanisms adopted for the implementation of the Decree are questionable and can create difficulties for the effective achievement of the stated goals. Further monitoring can provide valuable data about the difficulties arising during the program implementation and the accumulated best practices. In order to achieve observable results in the future, it is important to increase the number of beneficiaries stipulated by the budget of Annexe 23 of the Government Decree 534-N, and take steps towards development of early childhood day-care institutional services to be able to involve more beneficiaries from the target groups.
110. The current legal regulations on sex-selective abortions have a certain positive impact. In particular, they affirm the commitment of the Government to combat this phenomenon. On the other hand, the quality of counselling provided by doctors before abortion depends primarily on their motivations, individual values and personal approaches to the patient, which is risky.

7. Recommendations

111. The suggestions and recommendations on the policy and programs aimed at preventing gender-biased sex selection and sex-selective abortions, as well as crosscutting gender-related problems are described. These suggestions address a wide group of role players, including state bodies, civil society organizations and international development partners.
112. In order to guarantee the sustainability of the results for prevention of gender-biased sex selection and sex-selective abortions, it is necessary to maintain the continuity of comprehensive public policies and programs. In particular, it is necessary to accomplish the following activities:
- **Adopt a midterm national action plan for prevention of gender-biased sex selection and sex-selective abortion for 2018-2022, which will serve as a road map for the future activities in the field;**
 - **Continue the discourse around the collected evidence with the purpose of developing public policies, in particular, by using the results of the costing and feasibility analysis of the policies on extending formal child care and development services, and the results of other available studies;**
 - **Focus attention on developing policies aimed at enhancing the women's opportunities to combine family care and employment;**
 - **Apply a systematized and comprehensive approach to ensure equal opportunities for women and men are guaranteed by the state policy, including promoting women's participation in the political and economic life, and career development with higher paid jobs and holding managerial positions in the labour market;**
 - **Formulate new messages based on the data acquired through systematized work and available studies, in particular, messages to increase the value of the girl child in society, exclusion of all types of gender discrimination, affirmation of the income earning role of the woman and increasing the fertility rate, while concurrently involving institutional partners in the public awareness-raising and advocacy activities, including educational institutions and the Armenian Apostolic Church;**
 - **Continue empowering the public opinion lobbyists, decision-makers and main role-players. This includes training for doctors from obstetrical and gynaecological medical institutions so that they can provide objective and complete counselling.**
113. At the same time, it is necessary to continue the monitoring of implemented activities for conducting performance assessment and for building on the lessons learned, to improve the future work in this area. In this regard, we recommend the following actions:
- **Plan and include monitoring in the yearly plan of actions of the relevant stakeholders, both governmental and civil society organizations;**
 - **Develop SMART indicators while drafting the state (public) programs;**
 - **Keep the focus on difficulties revealed during the implementation of Annexe 23 of the Government Decree 534-N and the best practices for making the future programs more productive and large-scale.**

114. Last but not least, it is necessary to enhance the current institutional cooperation. Although the parties concerned do have a common goal in this sphere, nevertheless, there are disagreements about the ways of attaining it. To that end, we recommend to continue and encourage the have more meetings and discussions with line working groups.

8. Annexe 1 List of participants of the expert interviews ⁸⁹

NAME, SECOND NAME	POSITION, ORGANIZATION
Ani Harutyunyan	Program Coordinator of the “Armavir Development Centre” NGO
Armenuhi Tanashyan	Deputy Head of the Department of Family, Women and Children Issues and Head of the Division of Women Issues, MOLSA RA
Armine Mkhitarian	Head of the Department of Social Support and Social Innovations of the National Institute of Labour and Social Research , MOLSA RA
Gayane Avagyan	Head of the Division of Reproductive and Maternal Health Protection of the Department of Mother and Child Health Protection, MOH RA
Diana Andreasyan	Director of the Information and Data Analysis Centre and Head of the Health System Performance Assessment of the National Institute of Health, named after Academician S.Avdalbekyan, MOH RA
Irene Sargsyan	Education and Youth Expert, “Save the Children” Armenia Country Office
Lusine Sargsyan	Head of the Department of Legal Analysis, of the Human Rights Defender’s Office, RA
Karine Kouyoumjian	Head of the Census and Demography Department of the SC, RA
Karine Saribekyan	Head of the Department of Mother and Child Health Protection, MOH RA
Naira Arakelyan	Director of the “Armavir Development Centre” NGO
Naira Bouboushyan	Chief Specialist of the Division of Employment of the Department of Labour and Employment, MOLSA RA
Narine Beglaryan	Program Coordinator of the “Global Program to Prevent Son Preference and the Undervaluing of Girl ”, UNFPA Armenia
Nvard Manasyan	Gender Equality Officer, UNICEF Armenia
Shushanik Sargsyan	Specialist of the Department of Health System Performance Assessment of the National Institute of Health, named after Academician S.Avdalbekyan, MOH RA
Vahan Asatryan	Head of the Department of Research and Development, Member of the ICHD Board of Directors
Vanik Babajanyan	Head of the Division of Demography, MOLSA RA
Sevan Petrosyan	Head of the Program “Caring for Equality” of “World Vision” Armenia

⁸⁹ The interviews were conducted from July 6 to August 6 of 2018.

9. Annexe 2 The distribution of specialities and positions of doctors, who took part in the anonymous interviews ⁹⁰

Gynaecologists	10	Including those who perform abortions	8	Including those who have supervisory function over the gynaecologists who perform abortions (head of division, and/or head of maternity hospital)	2
Allied health professionals (e.g. ultrasound specialists)	2	Including those who provide medical counselling to patients who plan to have a abortion	2	Including those who have supervisory function over the gynaecologists who perform abortions (head of division, and/or head of maternity hospital)	0
<i>Total number of doctors who participated in the interviews:</i>					12

⁹⁰ The interviews were conducted from August 7 to August 17 of 2018.