

REPRODUCTIVE SERVICES IN ARMENIA

country report

Reproductive health services

Reproductive health services include primary medical health care and specialized health care, which are implemented in 2 ways:

- a) in hospital, when it is necessary to take medical measures, namely diagnosis, medical treatment, permanent supervision and special medical care
- b) out-of-hospital, when the implementation of the above-mentioned services doesn't require hospital conditions.

Statistical data

The data of points 1 to 6 is provided by the Statistical Department of Ministry of Health for the year of 2002:

Pregnancies: the number of pregnancies was – 32.806; the number of delivery at term (partus maturus) – 3862, the number of premature birth (partus prematurus) – 1039.

Maternal mortality - 6

Infant mortality - 295

Mortality rates: prenatal mortality - 124, abortions- 0, underage pregnancies – 0.

Family planning policy

Family planning proceedings in Armenia are carried out on governmental level. Normally the family planning departments work in collaboration with maternity homes, policlinics, women's consultation centers. The overall number of those departments in Armenia is 75; in Yerevan – 22.

In 2001 the family planning departments got a support from UNFPA through the Ministry of Health, in the frames of which FPDs office repairs were organized, a great number of seminars were held for the staff, a number of contraceptives were distributed: hormonal pills, condoms and intrauterine devices.

Abortion services

The abortion in Armenia is legal. According to the regulation about the artificial interruption of pregnancy (abortus artificiales), the abortion surgery is allowed till 12 weeks inclusive, on women's voluntary basis. More than 15 weeks - on medical or social indication. In cases of more than 22 weeks - only by the resolution of the commission of the relevant medical institutions.

Abortion remains the primary method of contraception in Armenia. It is not free of charge. Officially the fee for abortion amounts about \$9, or \$11 with anesthesia, and about \$15 with analysis, which are compulsory (officially the minimal salary in Armenia amounts \$ 9). Since the doctor, doing abortion, gets salary amounting \$ 14, which is often delayed for months, he is forced to demand extra money from patients. Hence, de facto abortion is quite expensive. This is the reason that socially insecure women can't afford abortion and have to deliver a child. Afterwards, some of them, not being able to support them, abandon them in maternity homes.

The other way for patients not to pay money is that doctors register abortion as incomplete, which is considered to be an urgent operation and free of charge. In this case, the patient doesn't have to pay officially for the operation, but usually she pays the money to the doctor.

In order to earn money, doctors make abortions after their work time, when they are on duty.

(In both cases, i.e. doing incomplete abortion, and doing abortion when being on duty, abortions are not registered by doctor, which brings to incorrect statistics on abortions in the country.)

In the case when abortion is done out of work time (i.e. non-registered abortion), but in hospital

conditions, it remains safe though illegal. Since nowadays there is wide access to undergoing abortions in hospitals, the cases of criminal abortions are not so numerous.

Sex education

Officially there is no sex education in Armenian schools and Universities. Sex education is said to be implemented in schools from September 2004. We tried to find out from the member of our Advisory Board, who works at Ministry of Education, whether it's true or not. She said that nobody could confirm it officially yet.

Some sex education programs for teenagers, adolescents, students and other target groups of the society, are usually conducted by non-governmental organizations, including the Women's Rights Center.

Access to contraceptives

There is no permanent information about contraceptives on governmental level. Occasionally some information can be found on Russian and other foreign TV programs available in Armenia. However, some information is also available in pharmacies, women's consultation centers, hospitals.

There is no problem in Armenia in obtaining any type of contraceptives, though there is some problem in finding last generation hormonal contraceptives. People can purchase contraceptives from pharmacies both by prescription (hormonal contraceptives) or without it (other types), or apply to special family planning departments for obtaining them. In both cases the customer has to pay for the product though. As the contraceptives are not free of charge the socially insecure part of the society has no means to buy them, and usually the abortion becomes the only contraceptive for them.

The most popular type of contraceptives in Armenia are the condoms (also connected with the HIV/AIDS) and intrauterine devices. Recently, people began to apply to emergency contraceptives. Usually, the responsibility of protection from unwanted pregnancies lies on women.

Situation of adolescents

The sexual life of the adolescents is not very spread in Armenia compared with other countries like Russia or Ukraine. There is no law in Armenia forbidding the access to contraceptives for adolescents, but as their sexual life has a concealed nature, girls normally don't do it in an open way, and mainly boys buy contraceptives.

The abortion for adolescents under 18 years old is done only on their parents' written permission. According to the data for the year of 2002, the overall number of abortions among adolescents in Armenia has been 486 – 483 cases of girls under 19 years old, and 3 cases of girls under 15 years old.

Legal provisions concerning equality between women and men

There is no special law about the equality between women and men. De jure equal rights are stipulated in all legislation documents, including the RA Constitution.

Main field of activity of the organization

Women's Rights Center of Armenia deals with sexual and reproductive rights and health, domestic violence, trafficking in women.

Conclusions and recommendations

- Education and enlightenment are the basis of all the spheres of life including the sphere of sexual life, which is the guarantee of a healthy sexual life.

Therefore, the sexual education and enlightenment must be provided to the representatives of all the layers of society, disregarding sex, age, profession, social status, etc. The government is expected to organize it, by working out a National Plan.

The NGO sector can also play a great role in that work, taking part of that activity on its shoulders.

We look for support from donors to create a coalition from the representatives of governmental and non-governmental structures working on / related with the RSHR, to investigate that field and work out the National Plan, with a succeeding lobbying for its acknowledgement. The National Plan must undoubtedly make some changes in the legislation field, services and the ways of prevention of STD, abortion, unwanted pregnancies etc.

Another way is to directly implement a sex education programs, open relevant services, in particular for adolescents and the youth.

- The country's legislation must provide women's RSHR protecting their rights and interests and must find precisely worked out mechanisms for its implementation. For that purpose, the donor's support is necessary to carry out gender analyses of current legislation, find out discrimination articles, and start an advocacy process for their elimination.

It would also be interesting to realize a monitoring to find out how the current legislation works.

Unfortunately, a number of problems can be solved only on governmental level as most of them are related with the general socio - economic state of the country.

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