INTRODUCTION

The objective of this second gender alert is to highlight the situation of the refugees with disabilities after the crisis through the information gathered from the civil society organizations (CSOs) that work on disability inclusion and social services, the organizations of persons with disabilities (OPDs) and the refugee women with disability.

The focus of this gender alert is on the gender-specific challenges and barriers to humanitarian assistance for women, men, girls and boys with disabilities in the six months following the displacement.

This exercise is a joint effort between UN Women and Disability Rights Agenda NGO and its network and aims to provide insight into the current situation facing refugees living with disabilities as one of the most marginalized groups in this crisis. The analysis was conducted through focus group discussions with five CSOs and OPDs, two key informant interviews and one focus group discussion with refugee women with disabilities in March 2024.

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1 Socio Demographic data in Karabakh, 2020 (website currently unavailable).
KEY FINDINGS

Documentation and information gaps

- The key challenge faced by refugees who are persons with disabilities is obtaining their disability certificate and relevant documents, as these records are required in order to receive disability benefit support while staying in Armenia. The information gap also contributes to these challenges, as according to refugee persons with disabilities, it is difficult to find streamlined and easy-to-understand information about the process. Most of the time, individuals are contacting the staff members of CSOs or OPDs with whom they are familiar to get the support. These procedures can be particularly daunting for those with intellectual disabilities or for those who are unfamiliar with the legal system, creating barriers to obtaining necessary support.

- Digital literacy is also a challenge as many processes are now online, and it can be difficult for persons with disabilities to navigate these platforms, even including the process to obtain Internet access. Moreover, platforms are not always accessible and easy to use, especially for blind persons who use screen readers. Hence, they have to physically go and seek support from the unified social service centres, which costs more because public transportation is less accessible.

- Armenia began using the International Classification of Functioning, Disability and Health in January 2024 to determine all applicants’ disability status. This system is different from the one used in Karabakh, which focused solely on health conditions. Hence, the refugees who need disability benefits or services such as personal assistance will have to undergo assessment using the new model. This change is still unclear to many, and trust is yet to be built towards the system among refugees. Additionally, there are concerns by the refugee population with disabilities, CSOs and OPDs that the disability determination process does not adequately assess the unique, intersectional challenges of being both a refugee and a person with disabilities.

- “I am blind, but I have been a teacher for 37 years. I really want to continue my profession here to support children who have visual disability, so I underwent the functionality assessment process so that I can have personal assistance to support me in finding a job as a teacher again. However, the process took so long and was so complicated and costly especially for me, [coming] to Yerevan for the first time. I am still not sure if I am eligible to receive this support, but I need to start to work to pay my rent and cost of living here.”

- Refugee woman with disability (57 years old)

The level of disability benefit support is linked to the disability category that the refugee obtains. For example, the financial support for those in the third group of disabilities (i.e. the new system’s medium functionality limitation) is AMD 36,000 per month. However, this amount does not cover all of the extra costs associated with disabilities, such as transportation or communication costs. It is also important to note that this amount is less than what was provided in Karabakh, making it difficult for individuals to manage their finances regarding their disability costs.

Access to services

- Limited access to unified social service locations, limited available information, transportation inequities, the launch of the new disability benefit scheme and the lack of social networks remain major barriers for persons with disabilities—both Armenian citizens and refugees. The public transportation system especially in Yerevan has become more accessible, yet it is still not universally designed. Therefore, persons with disabilities, especially those with physical disabilities, often need to use taxis to access rehabilitation services, clinics, social services, markets and schools, result-
ing in higher costs compared to using public buses or trains. Specifically, wheelchair-accessible taxis available in Yerevan can cost up to fifteen times more than average taxis.

- Specialized services, such as those for rehabilitation, are not as readily available for refugees with disabilities in Armenia as they were in Karabakh. The lack of specialized and individualized services increases these refugees' dependency on their families, thus decreasing their opportunities for an independent life. Furthermore, the list of assistive devices provided to refugees, similar to that for other citizens, is limited and does not include power wheelchairs.

- Accessible housing is a critical need for refugees with disabilities, yet it is often in short supply in Armenia. Finding accommodations that are equipped with ramps, handrails and other accessibility features is challenging, leaving many refugees with disabilities in living situations that do not adequately meet their needs and instead restrict their independence. Moreover, the scarcity of accessible housing raises the risk of institutionalization, further limiting their autonomy and integration into the community. Refugees have concerns regarding housing programmes, fearing that they will have no alternative but to choose segregated social housing options based on their disability, while those without disabilities will have their choice of other options.

- Children with disabilities are adversely affected by these challenges, as parents may choose not to send them to school or to engage in other activities, partly due to the cost and the lack of accessible schools that can cater to the needs of children with disabilities. A focus group discussion with a women's rights organization that works with women with disabilities revealed that refugee girls with disabilities were likely to discontinue their education after the displacement due to the costs for transportation as well as their parents' concerns about their safety in public spaces.

- Parents of refugee children with disabilities choose to stay in Yerevan because of the specialized centres and services available for their children. However, the rent and living costs are higher than in the marzes; for this reason, some parents are considering moving away from the Yerevan area. This decision could negatively impact the children, especially children with autism, as they may have to be at home without services, which could worsen their quality of life.

- The issue of institutionalized refugees with disabilities or elderly persons who were living independently in Karabakh remains concerning. Despite the principles outlined in the Convention on the Rights of Persons with Disabilities, Armenia still needs to complete its deinstitutionalization plan, which commenced in 2019. Efforts should be made to finalize the set-up of its community-based services that support independence and facilitate the transition from institutional settings to community-based living environments, in line with their rights and preferences.

**Social norms**

- Refugee women with disabilities, if unmarried, mostly live with their families, as their parents believe that they have to stay close to their relatives for their own safety. This leads to a lack of social interaction, limited engagement in educational or professional opportunities and restricted mobility, as their family members often need to accompany them and make decisions on their behalf. It has been reported that this situation existed before the displacement and has been exacerbated by the new environment and its many unknowns.

- Due to multiple barriers faced following displacement—such as transportation, perceptions on safety, the scarcity of schools able to support their children, language and cultural differences, and the fear of discrimination on the basis of disability—the parents of children with disabilities choose to keep their children at home and take care
of them themselves. Hence, the CSOs found that there are sizeable numbers of children and adolescents with disabilities who do not attend school. The awareness and attitude of the parents need to be changed, as children with disabilities are part of society and have the right to education and development.

Local CSOs supporting refugees with disabilities have reported that fewer men with disabilities seek support compared to women with disabilities. Additionally, it is more common for women to approach CSOs on behalf of their male relatives in need of assistance due to disability-related issues. However, it seems that there are now actually more men with disabilities as a result of the conflict.

During the interviews, refugee women expressed that men often have difficulty accepting their disabilities and the need for support from others, due to the traditional gender norms that position them as the leaders of the family and the community. Consequently, there is a need for mental health and psychosocial support that is gender-sensitive and based on a human-rights approach to disability for all individuals acquiring disabilities.

In the interviews with CSOs and persons with disabilities, it was reported that discrimination towards persons with disabilities, especially those with intellectual disabilities, is a significant challenge in Armenia. Women with intellectual disabilities are at a higher risk of violence, exploitation and abuse.

“A man has disabilities, the woman will have to take care of him and do more work to earn money and take care of the home.”

— Refugee woman with disabilities (44 years old)

The health conditions of refugees with disabilities are sometimes neglected due to a lack of financial support. It is crucial to prioritize, via various state programmes, the overall health of these individuals by ensuring that they have access to necessary medical care and treatments. Additionally, special attention should be given to the reproductive and sexual health of women with disabilities, which are often overlooked aspects of well-being.

Social isolation is a common issue for deaf refugees, who may find it difficult to participate in community activities due to the lack of accessible information. This isolation can lead to feelings of loneliness and exclusion, impacting their mental well-being. Additionally, efforts need to be made to provide sign language interpretation that is culturally sensitive, ensuring that deaf refugees can fully engage with and access the age-appropriate support and services available to women, refugees and persons with disabilities.

Access to employment opportunities

The majority of refugees with disabilities are unemployed and received support from state benefits before the displacement. As the disability benefit in Armenia is considered less than that in their previous situation, many refugees with disabilities need to seek employment or livelihood options that can financially support their settlement. The lack of understanding among employers and companies about engaging with persons with disabilities is the main barrier to including them in the workforce.

The interviews with CSOs revealed that refugee men with the same disability condition as refugee women are more likely to gain employment and integrate into society. This discrepancy may stem from prevailing perceptions and stereotypes that view women with disabilities as less capable.

Some refugees with disabilities who were employed before the crisis expressed a desire to continue working in Armenia. The interviews revealed that a young, deaf refugee woman is employed at one of the Armenian OPDs. This suggests that there are opportunities available for persons with disabilities, but there is also a need to support job matching.
Participation in decision-making processes

- The needs of refugees with disabilities are yet to be met in many regions. The voices of these marginalized groups should be heard. CSOs and OPDs are working with their limited resources to support both the refugees and local populations to ensure social cohesion, but the gaps are still significant.

- According to the CSOs, there is a notable lack of disability-inclusive and disability-specific international cooperation in Armenia. This lack of cooperation results in a fragmented approach to addressing the needs of refugees with disabilities and limits the effectiveness of international efforts.

- Refugees with disabilities, including girls and women with disabilities, often face barriers to participating in decision-making processes that affect them. Encouraging and backing OPDs, initiatives led by refugees with disabilities and other refugee-led organizations can guarantee that persons with disabilities among refugees have a say in the decision-making processes.