

Flygtningenævnets baggrundsmateriale

Bilagsnr.:	393
Land:	Armenien
Kilde:	The Coalition to Stop Violence Against Women
Titel:	Joint Stakeholder Submission
Udgivet:	september 2024
Optaget på baggrundsmaterialet:	22. juli 2025

Universal Periodic Review of the Republic of Armenia

49th Session

May, 2025

JOINT STAKEHOLDER SUBMISSION



Submitted by The Coalition to Stop Violence Against Women a registered non-governmental organization in Armenia that unites 10 local organizations working on women, LGBT, disability rights, and intersecting gender issues.

Contact persons: [Anna Hovhannisyan](#)(WRC) Web-page: <https://coalitionagainstviolence.am/en/>

Email address: anna@womenofarmenia.org Address: 119/2 Hovsep Emin, Yerevan 0012, Armenia

Introduction

1. This report examines key concerns, challenges, progress, and recommendations regarding gender-based violence (GBV) in Armenia. It draws on data provided by 10 member organizations of the Coalition to Stop Violence Against Women, a network that has been advocating for GBV prevention and awareness in Armenia for 14 years. The report sheds light on the diverse forms of GBV prevalent in the country, with a special focus on the unique needs of marginalized groups. The discussion on GBV has become even more critical in the wake of the recent conflict, starting in 2020. There is a general trend of increasing case reporting, more pronounced in Yerevan than in the regions.
2. The 2020 Nagorno-Karabakh conflict and subsequent escalations, culminating in the forced displacement of 100,000 people in 2023, have dramatically reshaped Armenia's socio-political landscape. Women have been disproportionately affected by these events, both in terms of their roles in society and their vulnerability to violence. The war not only displaced families but also placed women at the forefront of managing households under extreme stress. As men were either involved in the conflict or displaced, women took on increased economic and caregiving responsibilities, often with little support. This shift has heightened tensions in the home, leading to an increase in domestic violence as traditional gender roles were disrupted, and post-war trauma intensified. Moreover, the conflict exacerbated pre-existing inequalities, with marginalized women, facing heightened risks. Many of these women have limited access to services and protections, leaving them vulnerable to multiple forms of GBV.

Diverse Forms of Gender-Based Violence (GBV) in Armenia

Ratification of the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) by Armenia.

3. In 2020, the Armenian government received and accepted recommendations from at least ten countries to ratify the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention). In its mid-term report, the Armenian government emphasized progress in this area, noting that the Convention was signed in 2018. The government also outlined plans for further public awareness campaigns to support the eventual ratification process, acknowledging that more time is needed to ensure

proper understanding and implementation of the Convention across different sectors of society.

4. Although Armenia has signed the Istanbul Convention, there remain several reservations, one of the most concerning being the provision in Article 30, Paragraph 2. This provision obligates the state to provide adequate compensation to individuals who have suffered serious bodily harm or health impairment as a result of gender-based violence. The Armenian government has expressed reservations about this obligation, raising concerns about its capacity to ensure such compensation, which could undermine full implementation of the Convention and the protection of survivors.

5. Following the 2018 revolution in Armenia, which brought about a shift in political leadership, the anti-gender movement gained momentum, particularly in its opposition to the ratification of the Convention.

6. The anti-gender movement is largely politically driven and consists predominantly of individuals and groups who held power under the previous government. These include members of the former ruling Republican Party, who, despite having signed the Convention, now actively oppose its ratification, claiming they never intended to fully ratify it. The movement's leadership is not composed of grassroots activists or organizations, but rather well-funded NGOs and individuals with significant political influence.

7. Although opposition groups, positioning themselves as anti-gender advocates, have largely manipulated the discourse surrounding the Istanbul Convention, the Armenian government has also failed to make significant efforts to raise awareness about the core principles and true purpose of the Convention. Rather than actively countering the misinformation spread by these groups, the state has remained largely passive. This lack of response has allowed false narratives to take root, leading to widespread misconceptions about the Convention among the general public.

8. Opposition groups, in addition to distorting the purpose of the Convention, frequently target women's rights defenders, attempting to discredit their efforts and paint them as threats to traditional values. These attacks have created a hostile environment for activists advocating for gender equality and the protection of victims of gender-based violence. The government's inaction in combating these harmful narratives not only perpetuates misinformation but also places women's rights defenders at greater risk of public backlash and harassment.

9. While some politicians have occasionally expressed support for the ratification of the Convention in interviews, dating back to 2018, these statements have not been followed by meaningful action. In the aftermath of the 2020 war and amidst the ongoing socio-political instability, the ruling party appears hesitant to push forward with the ratification, fearing it may harm their public reputation. The Convention has become a politically sensitive issue, and the

government seems unwilling to confront the backlash that pushing for ratification could provoke.

10. Despite these challenges, it is crucial for the Armenian government to actively prepare society for the ratification of the Convention. The few awareness campaigns that have been launched so far have proven ineffective in addressing the deeply entrenched misconceptions. A comprehensive, long-term strategy is urgently needed to educate the public about the Convention's true objectives—namely, to protect women from GBV and domestic violence—and to counter the false narratives propagated by opposition groups.

11. Moreover, ratifying the Convention without reservations is essential. Any reservations, particularly regarding provisions such as Article 30, Paragraph 2, which guarantees state compensation for victims of serious bodily harm or health impairment, would weaken the Convention's full implementation and undermine the protection of victims.

Recommendations:

- Implement a sustained, comprehensive public awareness campaign to educate the population on the principles and objectives of the Convention.
- Ratify the Istanbul Convention without reservations, ensuring full protection for victims of gender-based violence, including state compensation for serious bodily harm.
- Take concrete measures to protect women's rights defenders from harassment and retaliation, ensuring their safety and ability to advocate freely.

Domestic Violence in Armenia

12. According to the RA General Prosecutor's Office, 508 domestic violence cases were recorded in 2023, with alarming incidents including murder and severe harm. Domestic violence support centers reported 1,758 individuals affected, including 1,514 women. There has been a notable rise in reported domestic violence, with the Women's Support Center (WRC) in Yerevan seeing a 238% increase in cases from 2020 to 2023. Femicide cases are also on the rise, with 7 reported killings in the first half of 2022 alone. While legislation addressing violence against women has improved, recent changes may dilute its effectiveness. Since 2020, the Ministry of Labour and Social Affairs has been partially subsidizing domestic violence support centers across all regions, establishing standards and mandatory training for service providers through WRC.

13. Significant changes to the Criminal Code in July 2022 introduced aggravating circumstances for violence committed by close relatives and criminalized psychological coercion,

physical coercion, and crimes against sexual freedom. Further legislative changes, effective July 2024, enhance protections for survivors and impose stricter penalties on perpetrators, including the removal of reconciliation provisions, recognition of intimate partner violence, acknowledgment of children as victims when witnessing violence, limited police warnings for initial offenses, expedited issuance of Emergency Protective Orders (EPOs), clearer definitions of domestic violence, a ban on virginity testing, guaranteed healthcare for victims, mandatory shelter access for victims with disabilities, weapon restrictions for offenders, and increased penalties for intimate partner and family member crimes, alongside the criminalization of stalking and repeat offenses.

14. The legal framework addressing domestic violence in Armenia is critically lacking, particularly in its understanding of the dynamics of power and control. This absence contributes to gaps in legislation that hinder the effectiveness of existing laws. Although the new Criminal Code introduced aggravating circumstances for violence committed by close relatives, it still does not criminalize domestic violence. The 2024 amendments, while a step in the right direction, inadequately address these issues. The change from "domestic violence" to "domestic and household violence" risks diluting legal protections, leading to misinterpretations of the law. For instance, disputes between family members can be misclassified as domestic violence, and victims who engage in self-defense are often treated as perpetrators, particularly when only minor injuries, such as scratches, are reported.

15. The police response to domestic violence has improved considerably since 2020, as indicated by an increase in EPOs issued, a reduction in attempts at reconciliation, and more frequent referrals to domestic violence support centers. However, the specialized police unit established in 2013 to handle domestic violence cases has been dismantled, and the formation of a unified police force in 2023 requires extensive training for 1,800 new community officers in domestic violence issues. Initial training sessions conducted in 2024 revealed a pervasive lack of understanding of the realities of domestic violence, along with persistent myths surrounding the issue. This indicates that while progress has been made within the police force, there remains a substantial need for sensitization among other law enforcement bodies, the judiciary, and relevant actors.

16. Victim-blaming attitudes among judges, investigators, prosecutors, and forensic experts can diminish the experiences of victims and hinder thorough investigations. Even with the positive trend in police-issued EPOs, significant violations of EPOs and court-issued Protective Orders (POs) continue, often without legal repercussions. Moreover, the pattern of EPOs being overturned by the RA Administrative Court raises concerns about the legal protection available to survivors. Victims stress the importance of restricting abusers' freedoms; however, there is often resistance to removing perpetrators from their homes, with the justification that monitoring is easier if the perpetrator remains on the premises. This prioritizes logistical

convenience over victim safety, contrary to international jurisprudence.

17. New provisions in the Criminal Procedure Code allow for alternative preventive measures like house arrest and administrative control, which require electronic monitoring. Although these measures could effectively prevent recidivism in minor domestic violence cases, they are rarely employed. Several barriers continue to obstruct victims' access to justice, including inadequate safety considerations during victim interviews, a lack of adequate defense from prosecutors, and the absence of specialized judges overseeing hearings. Additionally, specialist service providers have reported that when depositions occur without the presence of the victim's lawyer, victims are often manipulated into downplaying the seriousness of their situations, leading to dropped claims.

18. Amendments in 2021 permitted remote interviews for survivors, but the lack of necessary technical equipment has hindered effective implementation. In-person interrogations frequently occur in the presence of both victims and abusers, which is both traumatic and unsafe. Investigators often dismiss domestic violence cases due to perceived lack of evidence, disregarding risk assessment results. Severe mental distress is often overlooked, with cases focusing predominantly on physical abuse. While there are some criminal proceedings for severe mental suffering, these remain rare and can be terminated due to lack of substantiation. Victims have described forensic examinations as traumatic and humiliating, with male forensic doctors often lacking sensitivity. There are also concerns about systemic corruption, as some forensic reports downplay the severity of injuries.

19. Procedural delays and gaps in Armenia's handling of domestic violence cases undermine victim protection and increase the risk of recidivism. Victims face significant challenges in accessing justice, including financial burdens related to court fees and a lack of compensation mechanisms for trial-related costs. For instance, victims may not be reimbursed for additional medical services if they avoid their registered polyclinic for safety reasons. Furthermore, the state imposes a court fee of 20,000 AMD for each child involved in residence claims, which can discourage victims from pursuing justice. The lengthy legal process—often taking 2-4 years—leaves victims unprotected and exacerbates psychological distress, frequently leading them to drop complaints or lawsuits. Additionally, claims involving protection orders are often unjustifiably returned, with legal time limits frequently violated.

20. Children in domestic violence situations are particularly vulnerable, yet legal protections for them remain inadequate. Between 2018 and 2024, of the 92 protective orders issued by the courts, only 52 effectively restricted abusers' access to children exposed to violence. Emergency interventions often fail to prioritize the child's welfare, allowing abusive parents continued access despite the trauma experienced by the child. The lengthy and ineffective legal processes can lead to cases being dismissed or suspended, which keeps children in the care of abusive

parents. Survivors entitled to alimony frequently struggle to receive support, particularly if the perpetrator is financially unstable. The challenges surrounding custody battles further compound victims' trauma, and delays in examinations can stretch for a year or more, complicating the enforcement of visitation rights.

Recommendations:

- Amend the Criminal Code to explicitly criminalize domestic violence, ensuring clear definitions and penalties to prevent misinterpretations and protect victims.
- Revert to using "domestic violence" in legal language to maintain clarity and specificity, emphasizing the power dynamics involved in abusive relationships.
- Incorporate terminology addressing coercive control into domestic violence laws to acknowledge and penalize this form of abuse effectively.
- Enhance the mechanisms for implementing and enforcing protective measures, ensuring victim safety is prioritized in all cases.
- Establish guidelines to prevent premature dismissal of cases and ensure sensitivity in handling domestic violence matters.
- Encourage the use of alternative preventive measures, such as house arrest and administrative control, for minor domestic violence cases.
- Enforce legal repercussions for violations of Emergency Protective Orders (EPOs) and Protective Orders (POs) to uphold victim safety.
- Provide necessary technology and training to facilitate remote interviews for survivors, minimizing trauma during the investigative process.
- Treat severe mental distress with the same seriousness as physical abuse, ensuring victims receive appropriate support and protection.
- Establish specialized courts for domestic violence cases with trained judges to ensure informed and sensitive judicial processes.
- Improve court management to prevent procedural delays and ensure timely processing of domestic violence cases.
- Increase the number of qualified forensic experts and locations for examinations, ensuring timely access to preserve evidence.
- Implement child protection measures in custody cases and ensure that children are not unnecessarily exposed to abusive situations.

- Remove financial burdens related to court fees for victims and establish compensation mechanisms for trial-related costs to encourage access to justice.
- Revise courtroom protocols to protect children from re-traumatization during testimony and ensure they have appropriate support throughout legal proceedings.
- Conduct an in-depth analysis of the legal mechanisms and implementation practices within the DV law, as well as identify the obstacles faced by survivors and assess the adequacy and objectivity of the actions of authorized bodies as prescribed by the law.
- Provide comprehensive training for authorized bodies, particularly the police, prosecution, investigative committee, courts and also guardianship and trusteeship bodies, in working with survivors of violence.

Sexual Violence in Armenia

21. Following Armenia's 2020 UPR recommendations, the ratification of the Council of Europe's Lanzarote Convention marked a significant step toward aligning Armenia's legal framework with European child protection standards. The Convention requires criminalization of all forms of sexual offenses against children, including online exploitation, and mandates comprehensive victim protection, offender prosecution, and preventive measures. However, the practical implementation of the Convention remains inadequate, with critical gaps in child-sensitive procedures, prevention of secondary victimization, and support services. Consequently, there have been few tangible improvements in the treatment of survivors and in addressing the systemic issues within Armenia's justice system.

22. The underreporting of sexual violence against children is widespread in Armenia, primarily due to societal stigma, victim-blaming, and fear of retaliation. Cultural norms that emphasize family honor and traditional gender roles contribute to the silence around these issues, with girls particularly burdened by the fear of social ostracization. Survivors, especially in rural areas, often remain silent to protect themselves and their families from shame. The fear of retribution further discourages reporting, particularly in cases of intrafamilial abuse, where the child is dependent on the abuser and lacks assurance of safety from authorities. Families often opt for private resolution rather than involve law enforcement due to these concerns.

23. The absence of a unified and comprehensive reporting system exacerbates the problem. Data on sexual violence is fragmented across multiple agencies—law enforcement, social services, and healthcare—resulting in discrepancies and incomplete records. Furthermore, the lack of training among police, healthcare professionals, and judicial officers means that cases are often misclassified, poorly investigated, or settled informally, hindering the understanding of the

full scope of the issue.

24. The pursuit of justice for survivors is marred by procedures that often lead to secondary victimization. Law enforcement and judicial practices lack gender- and child-sensitive approaches, subjecting survivors to multiple interviews, confrontations with perpetrators, and invasive forensic examinations without adequate psychological support. Such practices violate the standards for child-sensitive justice outlined by the Lanzarote Convention and can retraumatize the survivors.

25. The limited reach of specialized non-governmental organizations like the Sexual Assault Crisis Center (SACC) highlights the broader problem of underreporting. Between 2022 and 2023, SACC recorded 23 cases of sexual violence against minors, 20 involving girls. With only 7 cases reported in 2024 as of August, these numbers reveal a fraction of the actual problem, given SACC's limited capacity and lack of state funding. This indicates that the real prevalence of sexual violence against children is likely much higher.

26. Additionally, there is a serious deficit in specialized support services. Armenia lacks dedicated shelters and mental health services specifically for children affected by sexual violence, leading to inadequate care and inappropriate placements. Marginalized groups, such as children with disabilities and those from minority communities, face even greater barriers due to inaccessible services and a lack of child-centered support structures, highlighting the need for systemic reform.

27. An especially distressing part of the forensic examination process for survivors is the continued practice of virginity testing, despite its lack of scientific validity and condemnation by international health bodies. According to Provision 6 of the Ministry of Health's Order No. 87-N, forensic exams assess the "sexual condition" of the victim, including determining "virginity." This invasive procedure is conducted even when the reported sexual violence does not involve penetration, adding unnecessary trauma to the survivor and perpetuating harmful myths about sexuality and consent. The World Health Organization condemns this practice as a human rights violation, and its use contradicts the Lanzarote Convention's call for child-sensitive and trauma-informed procedures.

Recommendations:

- Develop gender- and child-sensitive investigation protocols to prevent secondary victimization. Eliminate invasive practices such as repeated interviews, forced confrontations, and virginity testing, and ensure proper recording of investigative actions to minimize trauma to survivors.
- Establish a centralized system for comprehensive tracking of cases of sexual violence, disaggregated by age, gender, and other vulnerabilities. Improved data collection will

address underreporting and provide a clearer understanding of case prevalence and trends.

- Expand access to specialized support services, including shelters, counseling, and free legal aid tailored to the needs of children, particularly those from marginalized groups. Implement preventive mechanisms to detect sexual violence and address child marriage, ensuring systemic accountability for law enforcement and community actors.
- Provide targeted training for law enforcement, judicial officials, healthcare workers, and social service providers on trauma-informed, child-sensitive approaches to sexual violence cases. Introduce comprehensive sexuality education that focuses on consent, healthy relationships, and gender equality to prevent sexual violence and address harmful societal norms.

Various forms of GBV facing marginalized women

Lesbian, bisexual and trans (LBT) women

28. It appears that the state makes no efforts to raise public awareness about sexuality and the prohibition of violence. The public still has negative attitudes towards gay, lesbian, bisexual, and trans persons, while violence at home is normalized and rationalized in society.

29. The law enforcement system does not have a remedy mechanism that would enable the protection and safety of a person who reports against family members. After the adoption of the DV law, certain progress has been noticed regarding the preventive actions taken by law enforcement bodies. However, in the case of LBT persons, effective remedies are still lacking. A person who suffers domestic violence does not feel safe even when turning to law enforcement, because there are no guarantees that they will not be forced back to the family of abusers upon whom they are also often financially dependent. Even the state care institutions, such as temporary shelters for minors as well as guardianship bodies don't have capacity to treat LGBT people properly and sensitively, according to their needs. Consequently, applying to the shelters provided by the state and hope for child-centered care is not a guarantee that children becoming victims of domestic violence will find care and protection.

30. Though according to the latest amendments of the DV law the term "Partner" has also been defined, LGBT+ couples still refrain from reporting the cases of partner abuse to law-enforcement bodies. Some cases documented during the last year can be found in the Annual report of Pink Armenia. The main reason is to avoid victimization, mocking and degrading treatment. The recommendations below, related to the measures that need to be undertaken to

address domestic violence properly, include the specific attention of law-enforcement bodies towards partner abuse.

31. Educational institutions not only do not undertake any measures to ensure the protection of the pupils, but moreover, they themselves are the direct offenders. Often, LGBT+ pupils are not directly removed from the educational institution, but not finding support and security they need, they must voluntarily stop attending the given institution. In many cases, the victims, being excluded from school, do not want to continue their education being psychologically depressed.

32. Pink Armenia documents around 40-50 cases of violation of human rights of LGBT people in conjunction with discrimination related to their sexual orientation or gender identity each year.

33. At the same time, very few cases are being reported to law-enforcement bodies. The main reason for this is lack of trust towards police and investigative authorities, based on the several factors, such as:

- Mistreatment by law-enforcement agencies, mockery, and justification of violence;
- Dissemination of information related to the personal life of victims by the authorities investigating the case, including within families;
- Ineffectiveness of investigating cases leading to impunity; and
- Fear of facing more violence as a result of filing a complaint.

34. Transgender people still have no access to gender-affirming procedures. Hormonal therapies and gender-affirming surgeries are excepted from the list of the medical services being provided in the country. However, surgeries are being registered as body correction and are being carried without proper hormonal therapy and post-surgery care.

Recommendations:

- Adopt a comprehensive anti-discrimination law, which will provide sexual orientation and gender identity as protected grounds, will define jurisdiction for non-governmental organizations in cases of protection of public interest, as well as a procedure for the formation and operation of an independent equality body;
- Monitor the sensitive treatment of LGBT+ persons by law enforcement agencies in case of domestic violence;
- Conduct separate statistics on domestic violence cases towards LGBT+ people.

- Conduct periodic trainings for the administration and teaching staff of educational institutions on sexuality, a sensitive approach to LGBT+ people, and supporting self-recognition and self-expression at a difficult age for them;
- Include sex reassignment surgeries in the list of medical services provided by the country and create comprehensive transgender care system within healthcare system;

Women living with disabilities

35. Women with disabilities face various forms of discrimination, including intersecting and multiple forms of discrimination in different spheres of life, including in public services. The 69% of persons with disabilities who report having ever encountered discrimination, 62% are women.

36. According to the local order, law enforcement, judicial bodies and psychosocial services take records on domestic violence cases, whether or not the person has disability. These rules, however, do not require specification of the type of disability and the scope of assistance needed.

37. At the same time, law enforcement and judicial bodies do not keep disaggregated records on other forms of violence against women with disabilities, while surveys fail to present disaggregated data and any mentioning of the experiences of persons with disabilities and specifically of women with disabilities. Disaggregated statistics on deaths of women with disabilities and investigation of these cases is not kept by institutions of care and health services either.

38. Since 2020, with partial funding from the state, support centers operate for survivors of domestic violence in all regions of Armenia. Not all the support centers and all the law enforcement and support and protection bodies are adequately accessible for persons with disabilities. Only two shelters for survivors of domestic violence are not fully accessible either. The support centers and shelters, the staff of state support bodies and law enforcement (police, investigative and prosecution servants), judges are not equipped with adequate professional knowledge and personnel to interact with women and children with disabilities, to appropriately respond to their needs and to effectively provide remedies.

39. Information on the hotline services of the support centers is not widely disseminated, while the services of the hot lines are not adequately accommodating the needs of all disability groups. For persons with hearing disabilities, the hot line service is practically inaccessible if they want to use it independently.

Recommendations:

- Maintain statistical data on cases of violence against women with disabilities, including domestic violence, violence and ill-treatment at institutions disaggregated by gender,

age, type of disability, place of residence and other at-risk factors related to discrimination. Maintain records on the investigation of these cases and charges brought against perpetrators.

- Ensure adequate and timely investigation of all the cases of violence against women with disabilities, by holding perpetrators accountable.
- Train law enforcement, judicial officials, and support staff on the specific needs of women with disabilities.
- Ensure that shelters and hotlines are physically and communicatively accessible.
- During emergencies, ensure the accessibility of support mechanisms for all women with disabilities.

Women living with HIV

40. Armenia criminalizes HIV transmission through HIV-specific provisions in the Criminal Code 2021. This Code replaced the Criminal Code 2006, which criminalized both HIV transmission as well as perceived 'exposure'. The criminalization of HIV leads to the violation of the rights of people living with HIV, to the increase of stigma and discrimination in society, and hinders the fight against AIDS. According to the data of the Investigative Committee of the Republic of Armenia, from 2009 to 2022, under Article 123 of the Criminal Code of the Republic of Armenia, a total of 13 crimes were registered, for which 7 people were convicted (4 men, 3 women). The criminalization of HIV conflicts with international human rights norms and impedes efforts to combat stigma and uphold the dignity of individuals.

41. According to the 2023-2025 Action plan deriving from the Human Rights Protection National strategy, adopted in 2023, the "Law on Ensuring Equality" must be adopted in 2024. The draft has already been published, and several discussions have been organized by the Ministry of Justice, RA, however, the concern related to the draft is the absence of the health status as a protected ground that will be an effective mechanism to combat discrimination towards people as well as women living with HIV. This omission weakens the legal protection for people, including women living with HIV, against discrimination.

42. The findings of the research on GBV against women living with HIV and women use drugs' reveal that gender-based violence affects the groups at individual, community, institutional, and societal levels. Most cases occur at the personal level, where 84.3% of respondents were abused by their partners and 61.7% experienced violence in their parental homes. At the community level, 57.3% faced violence from partners and 30.7% from relatives, with some also reporting violence at work (13.9%) and by friends (9.5%). These findings

demonstrate Armenia's failure to protect women against GBV as mandated by international obligations.

43. Real World, Real People social NGO documents around 15-20 cases of violation of human rights of people living with HIV including several cases of domestic violence. There are reports of physical, and psychological violence, neglect, or other offenses against women. In particular, after finding out about a woman's HIV status, the husband, or his mother, or family members begin to put psychological pressure on the woman; by scolding, insulting, blaming, avoiding contact, or showing other forms of discrimination or violence.

44. The violations recorded by the organization occur most often in health facilities, where women find themselves in a more vulnerable situation. They, in particular, have been shown medically refusing to provide necessary medical care and services by healthcare workers in institutions, showing a differentiated approach to patients, as well as imposing additional money and (or) other conditions unequal to other people for medical surgical intervention. Women during pregnancy are in a more dangerous situation, which has risks related to sexual and reproductive health. In particular, the doctors refused to carry out the pregnancy after being informed about the person's HIV status or the medical secret was disclosed illegally which causes serious health issues.

45. Women living with HIV have reported incidents of medical confidentiality breaches, where their HIV status was disclosed without consent: 34.5% experienced violence in healthcare facilities, 17.2% in educational institutions, and 10.6% by police; public spaces (17.5%) and cultural venues (14.2%) were also common sites of violence.

46. Women face stigma, discrimination and violence in all spheres of their lives, which negatively affects the economic and psycho-social well-being of women. Only a small proportion of the 274 target group representatives have ever sought out support and effectively exercised their rights. This is mainly due to a lack of trust in state institutions and fear of being stigmatized. Due to "Stigma Index 2.0" over half of the women reported that they were not able to achieve personal and professional targets. It was harder for them to talk about their status, and they were the most exposed to feelings of shame due to their HIV status. Women were verbally abused because of their HIV status 5 times more often than men living with HIV.

47. Women living with HIV rarely report violence against them or other types of reports to law enforcement agencies. The main reason for this is a lack of trust in the police and investigative agencies, based on several factors, such as the dissemination of information about their HIV-positive status by the investigating authorities, including within families. This reluctance to report is exacerbated by privacy violations committed by law enforcement, violating the right to access justice.

Recommendations:

- Adopt a comprehensive anti-discrimination law that explicitly includes health status as a protected ground to ensure protection against discrimination, particularly for people living with HIV and women.
- Decriminalize the transmission of HIV, and align its Criminal Code with international human rights standards, focusing on intentional harm to human health rather than stigmatizing individuals living with HIV.
- Conduct periodic training for the healthcare workers on HIV, transmission of HIV, anti-discrimination and related issues.
- Conduct public awareness activities on HIV, HIV transmission, tolerance and gender-sensitive approaches.

Women Drug Users

48. Drug users face systemic stigma and discrimination across various aspects of life, with women disproportionately affected. The discrimination manifests in familial, social, and institutional contexts, subjecting them to gender-based violence (GBV) from family members, partners, and community members.

49. The findings from the report show that GBV impacts women: 84.3% of women reported being abused by their partners, and 61.7% experienced violence in their parental homes. 57.3% faced violence from partners and 30.7% from relatives. Violence also extended to the workplace (13.9%) and from friends (9.5%).

50. Further examination reveals that 71.5% of women in the target group experienced violent treatment by their parents during childhood. In the last 12 months, 81.5% of respondents reported being abused by their husbands or partners, with many suffering both physical injuries and psychological trauma. These findings reflect widespread impunity for domestic violence and failures in protection mechanisms.

51. At the institutional level, gender-based violence against women in opioid therapy (OT) manifests through the denial of services, and women are often coerced into feelings of guilt and shame. The societal level exacerbates the problem, as women are subjected to humiliating and insulting comments, which restrict their participation in public life and reinforce victim-blaming.

52. There are no accessible services designed specifically for the prevention of drug use or for social-psychological rehabilitation for women in opioid therapy, and the existing services are not gender-sensitive. Women in opioid therapy are excluded from shelters for abused women, due to the absence of state regulations that ensure their protection and the lack of adequate

opportunities and resources in these shelters.

53. As a rule, many women are introduced to drug use by their partners, followed by exposure to various forms of violence and involvement in illegal drug trafficking or coerced provision of sexual services. Despite being victims of multiple forms of violence and exploitation, women avoid reporting these incidents to the police due to a lack of trust in law enforcement and concerns over the privacy of their personal data.

54. There are no developed or accessible gender-sensitive services for women of reproductive age, both from the perspective of realizing their right to sexual and reproductive health and their broader socio-economic and general health rights. Furthermore, overdose prevention drugs, such as naloxone, are not available, exposing women to unnecessary risks of overdose and death, which is contrary to WHO recommendations on ensuring access to essential medicines.

Recommendations:

- Ensure gender-sensitive, accessible healthcare services for women who use drugs and women living with HIV, including services related to sexual and reproductive health.
- Provide specialized shelters for abused women who use drugs, as well as harm reduction programs that align with WHO guidelines and CEDAW obligations.
- Establish comprehensive monitoring mechanisms to document human rights violations and ensure access to justice for victims of violence.