CHAPTER II - The policy framework: overview of existing laws and regulations

A. Introduction

This chapter provides an overview of key documents on ageing and older persons in Armenia. During a desk study, these (as well as a number of other documents which referred to ageing as a side issue) were reviewed and commented upon. The observations made were discussed with Armenian partners and international experts. Based on the discussion, recommendations emanating from the document analysis were integrated directly into the development of the Strategy on Ageing and the Action Plan on Ageing and are also reflected in the chapter on Findings of the Field Study below (a list of documents reviewed can be found in annex 1).

B. Government action plan

The Government Action Plan, which initially was intended to cover the period from 2008 to 2012, is indicative of the overall priorities of the Armenian Government. Due to the economic crisis some amendments became necessary, and all ministries were asked to indicate what changes were needed in their area of work. At the time of writing, the revised Government Action Plan was with the Government for approval. In its initial format, the Action Plan defined six priority sectors, of which the sector on social security is most directly relevant to ageing. Within this sector, the focus is on reducing poverty; improving the effectiveness of the social protection system and increasing access to medical services for socially vulnerable groups; promoting equal rights for people with disabilities; working in support of families; and ensuring gender equality. There is an expressed commitment to decrease poverty among pensioners, for which considerable financial means are made available.

While there is a chapter on youth, ageing is not directly mentioned. It may be advisable in future to address issues affecting different age groups in a more integrated manner, e.g., under a rubric of "generational issues", to make sure that activities in favour of youth are not prioritized to the detriment of other age groups, including older persons.

C. Government anti-crisis action plan

In response to the global economic crisis, the Armenian Government issued an emergency plan to focus efforts on preventing and alleviating its potential consequences. The plan exists in parallel with the broader Government Action Plan. According to the Anti-Crisis Action Plan, the Government promotes public-private partnerships and business development, for example by simplifying tax administration and by establishing an innovation commission. Projects to be supported are in the areas of construction, infrastructure and energy. One item addresses social and economic issues and specifically underlines the Government's continued commitment to address demographic challenges. Under the leadership of the Ministry of Labour and Social Issues, activities in designing and approving the Strategy on Demographic Policy and a related Action Plan are expected to continue. Other activities will focus on developing a demographic information system and a unified monitoring system for demographic developments.

D. Strategy on demographic policy

The Strategy on Demographic Policy, adopted by the Government in 2009, analyses the main demographic developments and suggests policies to tackle the various challenges they pose. Among others, the document describes the situation with regard to population ageing and identifies strategic approaches and activities in response. Following the principles of MIPAA/RIS and in response to the specific situation in Armenia, three priority areas of action are defined: (1) developing and implementing an effective policy in response to

demographic ageing; (2) streamlining the social insurance system; and (3) developing social and healthcare services and improving older persons' quality of life. Under these areas a number of actions are recommended, which aim at maintaining and developing the working potential of an ageing workforce; encouraging lifelong education; making the labour market more flexible to facilitate employment of pensioners without creating conflicts between generations; promoting pensioners' active participation in public life; and developing social and health-care systems.

E. Pension reform programme and pension reform implementation schedule²

By a decree of 13 November 2008, the Government approved the Pension Reform Programme and the Pension Reform Implementation Schedule. Implementation of the pension reform is planned for 2008–2012. It foresees an annual increase in pension payments to ensure that they are equivalent to the minimal consumer basket. By introducing a mandatory funded pension system, the amount of the pension becomes linked to the individual's previous income.

The Programme envisages four pillars of the pension system. The baseline pillar is supposed to secure an income from the State budget equivalent to the minimal consumer basket for those who do not qualify for an occupational pension. The first pillar is based on social contributions paid by all employees, providing for those who have worked in the formal economy for a certain period of time. The second pillar is based on mandatory funded contributions and their investment gains. The third pillar is to secure additional income from voluntary funded pension contributions.

F. Law on state allowances

The Law on State Allowances that entered into force on 1 January 2006 defines different types of allowances and regulates their provision. State allowance can be granted either on a regular basis or as a lump sum. Four different types of State allowances are provided: (1) family allowances; (2) childcare allowances; (3) lump sum birth allowances; and (4) allowances to the families of National Heroes of Armenia killed on duty and persons decorated with the Military Cross. To receive an allowance, an adult family member has to apply to the regional authorities who have to decide each case within 30 days.

G. Law on social assistance

The Law on Social Assistance that entered into force on 1 January 2008 aims to help citizens in need. Social assistance may involve counselling, rehabilitation, financial or in-kind assistance, temporary shelter and care. The latter may include food, medical, sanitary and hygiene services, clothing and shoes and cultural, educational, recreational, outpatient and inpatient care, as needed. Care can be provided at home, in institutions or social rehabilitation day-care centres. Social assistance is provided based on a written application (including supporting documentation) from clients or their legal authorized representatives submitted to the relevant regional authority. The provision of social services is managed by regional and local bodies, whereas the development of national policies is overseen at the national level.

H. National programme to improve home-based social services for single older persons and persons with disabilities.

The goals of the National Programme to improve home-based social services for single older persons and persons with disabilities are to improve and expand home-based social services for older persons who live alone and for disabled persons and to coordinate the activities of organizations involved in the provision of home-based social services. The services include legal, medical and socio-psychological assistance. Home-

^{2.} Document number: N 1487.

^{3.} Document number: HO-205.

^{4.} Document number: N 485.

based services can be provided free of charge to persons of 75 years and above, to persons with disabilities who live by themselves or to families consisting of persons who are 75 years and above and/or persons with a disability and who do not have able-bodied adult family members. Home-based services can be provided for a fee to those not meeting these eligibility criteria. The implementation of the programme was foreseen in three phases, beginning in Yerevan (1998), then moving to major cities (1999) and finally expanding to other cities and areas (2000). The programme is funded by the national budget as well as international and local non-governmental organizations, charity organizations and individual donors.

I. Procedures for providing care to older persons and persons with disabilities:

A Government decision of 7 December 2006 outlines the procedures to be followed in relation to the provision of care to older and disabled citizens. It describes the steps in decision-making, placement and grounds for refusal or termination of services. Care can be provided at citizens' homes, in social institutions or in social rehabilitation day centres. Home-based services can include errands, medical assistance, socio-psychological assistance and legal counselling. Care is provided to persons who live alone and have reached the social pension age or to disabled persons aged 18 years or older who live alone. It is provided on the basis of a decision by the head of the appropriate regional social service agency.

Annex 2 of the decision lists conditions that provide grounds for refusing care. These include alcoholism or drug abuse, infectious skin diseases and sexually transmitted diseases, as well as active forms of tuberculosis; chronic mental illness accompanied by behavioural and adaptation disorders (psychosis, dementia, personality disorder, etc.) except when treated in specialized institutions, and oncological diseases in certain advanced stages, except when hospice care is provided.

J. Minimum standards of care and social services for older persons and persons with disabilities

A Government decision of 31 May 2007 outlines minimum standards for social care and support provided to older persons and persons with disabilities. For example, it sets out the minimum size (5 square metres) and maximum number of inhabitants (four) per room for institutions for older or disabled persons. It sets requirements for appropriate numbers of bathroom facilities and leisure areas. It defines minimum portions and energy values of food, as well as minimum quantities of clothing and bedding provided to residents of institutions. Standards for home-based care and social services refer to the kinds of services that have to be granted, e.g., home-based care, medical assistance, socio-psychological assistance and legal counselling. Four different service categories are designated: from sub-group A, referring to persons in need of constant care provided by another person, to sub-group D, referring to persons who are mainly in need of psychological assistance. The Government decision also contains provisions regarding the ratio of medical or social staff to clients in institutions, in social service centres providing home-based services and in social rehabilitation day-care centres.

K. Ensuring access to the social, transport and business infrastructure for persons with disabilities⁷

A Government decision of 16 February 2006 outlines procedures to facilitate access to social, transport and business infrastructure for persons with disabilities and people with limited mobility. In the case of newly built public buildings and facilities, accessibility for people with special needs should be ensured. Public facilities should be provided with all necessary equipment and conveniences to ensure unconstrained access. In case of renovation of public buildings and facilities, they should, to the extent possible, be adapted to

^{5.} Document number: N 1874.

^{6.} Document number: N 730.

^{7.} Document number: N 392.

the special needs of persons with disabilities and people with limited mobility, to ensure their unconstrained access and movement on the premises. Social and public services should be relocated to areas which are easily accessible and, if this is impossible, buildings should be made barrier-free. In addition, the Minister of Urban Development is requested to develop construction norms and standards for buildings and facilities accommodating the needs of people with limited mobility.

L. Conclusion: ageing in the Armenian policy agenda

Ageing and the situation of older persons in Armenia is clearly of concern to the Government and has been firmly placed on the political agenda. Given the challenges faced by other population groups, including youth, the overall challenge of ageing-related policies is to achieve an age-inclusive framework providing equal opportunities for all age groups. Policy in favour of older persons should not be to the disadvantage of the youth and working-age population, and vice versa.

Both the Government Action Plan (outlining its overall priorities) and the Second Poverty Reduction Strategy Paper⁸ (2008) express a strong commitment to reducing poverty among pensioners, focusing on bringing contributory and social pensions to a level that ensures a minimum living standard. Accordingly, the Government has adopted the pension reform⁹ which foresees the introduction of the multi-pillar pension system. Other documents regulate specific subject areas such as social assistance, home-based services or access to buildings, and thus make provisions that are relevant to older persons, among others. What has been missing so far is an integrated policymaking framework that considers all relevant aspects systematically and their interrelatedness.

The Strategy on Demographic Policy, acknowledging ageing as one of the biggest challenges, calls for the development and implementation of a more comprehensive policy in response to population ageing. Responding to this request, the Ministry of Labour and Social Issues has taken steps to develop a Strategy and Action Plan which specifically address different aspects of ageing. Both documents will be submitted to the Government for approval. Based on the insights gained in connection with its Road Map project in Armenia, UNECE provided a major substantive input to the drafts of both the Strategy and the Action Plan.

Given the consequences of the global economic crisis, it remains to be seen how activities proposed in these documents can be sustained financially. While previously growing dynamically and above expectations, the GDP at market prices was about 15% lower in 2009 than in 2008 (National Statistical Service of the Republic of Armenia 2010). The national budget was frozen, and an anti-crisis Action Plan entered into force. Nevertheless, it was announced that activities in the area of ageing were to remain untouched.

⁸ Government of the Republic of Armenia Decree, N 1207-N, 30 October 2008, on the Republic of Armenia sustainable development programme, Yerevan, October 2008.

^{9.} Government of the Republic of Armenia, Decree N 1487-N, 13 November 2008, on Approving the Republic of Armenia Pension Reform Programme and Pension Reform Implementation Schedule.

Recommendations

- 1. Adopt and implement the National Strategy on Ageing and its Action Plan, which provide a comprehensive national policy framework to guide action in all areas relevant to population ageing.
- 2. Achieve an age-inclusive and gender-sensitive policy framework that aims at providing equal opportunities regardless of age or gender.
- 3. Avoid discrimination in service provision to the detriment of those most vulnerable by removing discriminatory clauses in existing laws which exclude certain groups from service provision. It can be assumed that people with a history of alcoholism and drug use or sexually transmitted or other infectious diseases, including HIV/AIDS, may be especially in need of care and support, and where no such care can be provided through the common system, alternative specifically targeted services should be provided.