



To: Health Professional Network  
From: Health and Human Rights Team  
Date: 29 October 2008

## **Health Professional Action Domestic and Sexual Violence in Armenia**

Thousands of women in Armenia are regularly subjected to violence within their families. Research conducted by Amnesty International in 2007-2008 has established that domestic violence is a widespread problem in Armenia. Our research, as well as that of Armenian organizations, also found evidence of sexual violence and sexual harassment, which remain significantly underreported. Survey data has suggested that more than one in four women in Armenia may at some time experience physical violence at the hands of husbands or other family members, with much higher figures reported for psychological forms of violence.

Some initial steps have been taken by the Armenian government towards establishing appropriate national mechanisms to counter the problem. However, Amnesty International is concerned that current legislation, mechanisms and procedures are failing to provide victims of domestic and sexual violence with access to either justice or the medical, psychological, legal and social support services necessary to rebuild lives. For the longer term, there is a need – as well as a legal obligation – for the state to take action to radically change deeply rooted social attitudes justifying domestic and sexual violence against women.

### **Inadequate Healthcare System**

Many women in Armenia who need medical treatment as a result of domestic violence do not seek medical assistance. According to health workers interviewed by Amnesty International, even those who do seek care often do not disclose the cause of their injuries. This may be out of shame or the belief that medical personnel will not be able to help them. This creates a need for health workers to correctly identify domestic violence when they encounter it, and to be trained in how to respond appropriately. Medical personnel are legally required to report domestic violence and do not need the consent of the victim in order to do so. However, in reality few cases of domestic violence are reported by health professionals. In the words of an ultrasound unit director:

*We see the evidence of domestic violence: bruises on pregnant girls, bruises off the face [i.e. on the body] so no one will know. But women will not disclose the violence in front of their husbands, and quite often the husbands ring us up later and explain that she fell in the street... Sometimes we call the police, but they treat this as normal. One policeman told me: 'this is normal, this is an Armenian family'. We report just two to three cases a year.*

Amnesty International interview with a health worker, Yerevan, 1 July 2008.

Medical personnel do not routinely receive training on how to identify and respond to domestic violence and there does not appear to be an effectively functioning procedure for cross-referral between health professionals encountering domestic violence and the relevant law enforcement personnel. Such cross-referrals as do take place tend to occur via personal contacts, rather than through a formal referral system. Health workers in Yerevan reported having no contact with support services or NGOs in the field of domestic violence. NGO activists further reported the prevalence of attitudes hostile to women seeking medical care as a response to family violence. The director of one NGO providing psychological counselling to survivors of family violence reported that “we haven’t found a psychologist who is not sexist, macho or homophobic”.

For more background information on the issue, please see the following AI Materials:

- 48-page report in English and Armenian *No Pride in Silence: Countering Violence In the Family in Armenia* (AI Index: EUR 54/004/2008). **Embargoed for 13 November 2008.**
- Eight-page campaigning summary in Armenian, English, French and Spanish *No Pride in Silence: Domestic and Sexual Violence Against Women in Armenia* (AI Index: EUR 54/005/2008). **Embargoed for 13 November 2008.**
- Appeal case sheet on survivor of domestic and sexual violence Greta Baghdasaryan in Armenian, English, French and Spanish (AI Index: EUR 54/007/2008). **Embargoed for 13 November 2008.**
- A press release accompanying the launch of the report and the campaigning summary in English and Armenian.
- A web-action based on the case of Greta Baghdasaryan in English.

### **Recommended action**

Please write to the Minister of Health in Armenia below:

- explaining that you are a health professional concerned about human rights;
- expressing concern that thousands of women in Armenia are regularly subjected to violence within their families which is a serious breach of their human rights;
- welcoming initial steps taken by the Armenian government towards establishing appropriate national mechanisms to counter the problem. However, express concern that more action is needed to provide these women with access to justice and medical, psychological, legal and social support services necessary to rebuild their lives;
- highlighting that, for the longer term, there is an urgent need for the state to take action to radically change deeply rooted social attitudes justifying domestic and sexual violence against women;
- urging the Health Minister to ensure that all women who have been subjected to violence are given access to redress and reparation, including compensation and psycho-social and medical rehabilitation, as specified by the Committee on the Elimination of Discrimination against Women in their General Recommendation 19 and the Council of Europe’s Committee of Ministers in their Recommendation Rec (2002) 5;
- calling on him to ensure that doctors, nurses, midwives, medical students and forensic medical practitioners are trained in the identification of and appropriate response to domestic and sexual violence;
- calling on him to translate, disseminate and include in training syllabuses for health professionals the 2003 Guidelines for medico-legal care for victims of sexual violence, produced by the World Health Organization;
- urging him to enact a range of measures raising awareness of family violence as a crime and human rights violation and challenging the justification of violence against women, including public service announcements informing women of their rights and measures that specifically target men and boys with the message that domestic violence is a common criminal offence and a human rights violation;

- thanking the Health Minister for his consideration and asking him to inform you of any measures taken or planned to eradicate domestic and sexual violence in Armenia.

As this is a long-term action and there is no fixed deadline for sending the letters, please try to send letters via post, rather than via email or fax.

#### **Addresses**

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Please also send copies to diplomatic representatives of Armenia accredited to your country.

If you receive no reply within six weeks of sending your letter, please send a follow-up letter seeking a response. Please send copies of any letters you receive to the International Secretariat, attention of Health and Human Rights Team, 1 Easton Street, London WC1X 0DW or e-mail: [health@amnesty.org](mailto:health@amnesty.org)