



# ARMENIA

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Health, Education, Equality, Protection  
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## ARMENIA KEY STATISTICS

STATISTICS AND INDICATORS	
Under-5 mortality rank	94
Under-5 mortality rate per 1,000 live births (2003)	33
Under-5 mortality rate average annual rate of reduction (%), 1990-2003	4.6
Under-5 mortality rate reduction since 1990 (%)	45
Infant mortality rate per 1,000 live births (under 1), 2003	30
Total population (thousands), 2003	3061
Annual no. of births (thousands), 2003	29
Annual no. of under-5 deaths (thousands), 2003	1
GNI per capita (US\$), 2003	950
Net primary school enrollment / attendance (%) (1996-2003)	97
% of infants with low birthweight 1998-2003	7
% of children who are exclusively breastfed (<6 months 1995-2003)	30
% of children who are breastfed with complementary food (6-9 months 1995-2003)	51
% of children who are still breastfeeding (20-23 months 1995-2003)	13
% of under-fives suffering from underweight (moderate & severe 1995-2003)	3
% of under-fives suffering from stunting (moderate and severe) (1995-2003)	13
% of households consuming iodized salt (1997-2003)	84
% of one-year-olds fully immunized against tuberculosis (2003)	92
% of one-year-olds fully immunized against DPT3 (2003)	94
% of one-year-olds fully immunized against polio3 (2003)	96
% of one-year-olds fully immunized against measles (2003)	94
% of one-year-olds fully immunized against hepB3 (2003)	93
% of under-fives with ARI (1998-2003)	11
% under-fives with diarrhoea receiving oral rehydration (1994 – 2003)	48
Estimated number of people living with HIV, 2003 (in thousands) low estimate	1.2
Estimated number of people living with HIV, 2003 (in thousands) high estimate	4.3

Source: *The State of the World's Children, UNICEF 2005*

## INTRODUCTION

Almost immediately after the collapse of the Soviet Union, Armenia was plunged into a period of deep economic and social crisis. From 1990 to 1993, the country's gross domestic product (GDP) contracted by half, the largest decline in the Commonwealth of Independent States (CIS) and one of the sharpest recorded by any country.

Ten years later, nearly a quarter of the country's population had emigrated in search of work and a better life abroad.

The impact of this decline has been so deep that until recently, approximately half of the country's population was living below the national poverty line with one in seven unable to meet their basic needs for survival.

Women are much more likely to be living in poverty than men, and children are the most likely to be exposed to its consequences than any other social group. Many parents, particularly the poorest and most socially disadvantaged from rural areas, are unable to register their children at birth, potentially depriving them of essential social services and increasing their vulnerability to human trafficking.

Thankfully, social indicators have gradually improved over the past decade and in many cases are better than those in other transitional countries. However, averages mask stark inequalities. While better off families in urban areas have access to quality health care services, the rural poor often do not. Household surveys indicate that the top 20 per cent of the population consume 3 times more health services on average than the lowest 20 per cent.



Public financing of primary health care remains inadequate, and the low morale of health care staff has also affected the quality of services. Rapid surveys also indicate that school absenteeism and drop-out rates in refugee and minority-populated areas are twice the national average. Children are frequently absent from school in the winter months since heating is often poor or non-existent.

While the incidence of HIV/AIDS remains relatively low, Armenia is part of a region with the fastest growth of infection and surveillance indicates that HIV is spreading rapidly in the country. Young people's awareness of HIV/AIDS and sexually transmitted infections (STIs) varies but even so, surveys indicate that even among those who are aware of the dangers, high risk behavior is prevalent.



Yet, despite the enormity of the challenges, there is reason for hope.

The Government of Armenia has adopted an ambitious ten year National Plan of Action (NPA) to address the needs and protect the rights of children. The NPA is linked to the country's Poverty Reduction Strategy Paper (PRSP) that lays the foundation for meeting the Millennium Development Goals (MDGs).

Working in cooperation with other members of the UN family as well as NGOs and donors, UNICEF's new country programme will focus on sustaining progress already made in accordance with the UN Development Assistance Framework for Armenia.

Throughout this publication, you will meet some of the Armenians that UNICEF is working with and for. With your continued support, we

will expand on these efforts in health, education, child protection and young people's health and development. Expectations are high for a better future that is now being written.

Sheldon Yett

UNICEF Representative,  
Republic of Armenia





## CHILD PROTECTION

**In the past decade, Armenia has made significant progress and introduced comprehensive reforms that positively affect the lives of children. However, the impact of economic decline in the early years of transition was so severe that at the beginning of 2005, approximately 44 per cent of the population was living below the national poverty line. In this environment, children are more susceptible and vulnerable to the consequences of poverty than any other age group.**

In many socially disadvantaged communities, parents are often unable to register their children at birth and continue to rely on public care institutions as their primary social safety net. Over 10,000 children are currently enrolled in 53 special/boarding schools and more than 900 children have been placed in 8 state-run children's homes (orphanages) although the majority has at least 1 parent.

For those children that have been admitted into an institution there is often little attempt to reintegrate them back into their families. Moreover, in later life, these children can find themselves at greater risk of being trafficked, abused or in conflict with the law.

Because of this reliance on institutional care for children from socially vulnerable families, with disabilities or those at risk, UNICEF has placed special emphasis on promoting a state policy on de-institutionalization and the prevention of institutionalization. By reforming the admission system for special schools, establishing five community-based alternative care centers throughout Armenia and promoting inclusive education as well as foster care, it is now less likely that children from vulnerable families will be placed in institutions.

Nevertheless, most kindergartens and schools are still unable to provide services to over 8,000

children registered as disabled in Armenia, the majority of which remain excluded from special and mainstream education. Thanks to UNICEF's support for programmes that promote inclusive education, however, over 250 children with disabilities have already been mainstreamed into pre-schools and basic educational facilities.

UNICEF was one of the first organizations to initiate studies into the phenomenon of trafficking in women and children from Armenia. In 2003, UNICEF published a survey into child abuse and neglect.

By supporting revision of the juvenile justice system, UNICEF has also promoted positive legislative changes including the introduction of alternative systems such as probation. Over 300 members of the police and judiciary, as well as NGOs and care providers in residential institutions have already gained a better knowledge of children's rights and their own responsibilities in this regard. Minors finding themselves in conflict with the law have never been guaranteed as much legal protection as they are today although more work is still needed.

Armenia acceded to the Convention on the Rights of the Child in 1992. In 2005 the country ratified Optional protocols to the Convention on the Rights of the Child on the sale of children, child prostitution and pornography as well as on the involvement of children in armed conflicts.

Through the development of legislation, policies and programmes, UNICEF assists the government in establishing the mechanisms to create a "protective environment" for all children in Armenia without exception as part of the National Plan of Action (NPA) for the Protection of Children's Rights and the Poverty Reduction Strategy Paper (PRSP).



## Child Abuse and Neglect

**Abandoned by her husband, a single mother appears close to another nervous breakdown. Living in one of the many metal *domiks* that define part of the urban landscape of Armenia's second largest city, Gyumri, she responds with violence when her two teenage daughters plead with her to stop "walking the streets."**

Back in the Armenian capital, another mother holds back her tears as she clutches the photograph of her youngest daughter. Isabella, captured on film at the age of eighteen months, will never get to celebrate her second birthday. Months earlier, while playing unsupervised on a dilapidated stairwell in one of Yerevan's sub-standard hostels, she was pushed by another child and fell seven floors to her death.

Yet, although the problem exists everywhere, there are many who would rather not admit that child abuse and neglect also occurs in Armenia, even though adverse socio-economic conditions can exasperate the situation. Children that fall victim to abuse and neglect increasingly play truant from school or beg on the streets and, in extreme cases, can end up in juvenile detention or residential care. Some even become easy picking for traffickers.

As a result, in a UNICEF commissioned survey published in 2003, the wall of silence that sometimes surrounds the problem of child abuse and neglect was finally broken down. The survey of over 2,000 respondents served as the basis for raising awareness among government officials and inter-agency committees.

In particular, the survey concluded that poor living conditions, unemployment and the psychological stress of living below the national poverty line had resulted in an increase in the number of cases of abuse and

neglect, not only in the family but also in schools and children's institutions. Alcohol and drug abuse was considered a major cause for the behavior of some parents towards their children.

Karen Harutyunyan, Coordinator of the Armenian National Task Force on the Prevention of Child Abuse and Neglect, however, stresses the need for caution when discussing such a sensitive issue and says that the problem also affects children from other strata in society. "We have to remember that today's parents are yesterday's children," he says, adding that abuse and neglect, albeit in different forms, exists even among financially secure families.

"Studies in many countries have repeatedly shown that victims of physical abuse during childhood have an increased risk of becoming violent offenders themselves," explains Sheldon Yett, UNICEF's Representative in Armenia. "Some evidence indicates that repeated psychological and emotional abuse can have an even greater impact on childhood victims than physical violence."

The National Task Force on the Prevention of Child Abuse and Neglect, a group that includes members from key ministries, NGOs and UNICEF, will therefore seek to address the problem through the development of a legislative framework for the early identification, registration, referral and treatment of child abuse as well as through the provision of training materials.

"Of course, parents still have the primary responsibility to safeguard their children from violence and neglect," says Yett. "However, to tackle this issue, a holistic approach is necessary. Community Outreach programmes need to be in place and those found guilty of



abuse should be held accountable. Community-based systems are essential and need to be expanded."

Through the development of such approaches, technical support will be provided to the local authorities and the programme presented to the wider NGO community. Draft regulations on child abuse and neglect will be submitted to Parliament and new ethical and professional guidelines for police and health care providers introduced. The proposed legislation also calls for the protection of the rights of child witnesses and victims of crime.

Until then, UNICEF has already supported the creation and development of various initiatives that will be crucial in any programme to address the problem. In 2002, UNICEF funded the establishment of a Community-based Care Center for Children at Risk in Gyumri and last year, the development of Outreach Services at

the Fund for Armenian Relief's Children's Reception & Orientation Center in Yerevan.

UNICEF also supported the Douleurs Sans Frontiers (DSF) International NGO in training health professionals working in the primary health care system in Yerevan and Gyumri to identify cases of child abuse and neglect.

However, according to Harutyunyan, the sensitivity of the issue still remains a stumbling block. As a psychologist formerly working for FAR, he says that at least 6-7 per cent of approximately 800 children working or living on the streets and at risk that were placed in the center were sexually abused. "There are children that have had very problematic experiences in boarding schools, in their neighborhoods and in their families," he says.

## De-institutionalization

**According to the Director, the majority of children enrolled into his boarding school situated somewhere in the Armenian capital stay on full-board. Yet, after its annual New Year Party, only two remained while others returned home for the holidays.**

In both cases, the children had seemingly been forgotten only because their parents were late to collect them. Moreover, out of 130 children attending a special school designated for children with learning difficulties, the majority showed no sign of any disability at all.

Instead, with 44 per cent of the population living below the national poverty line, many families still increasingly look to residential institutions to provide what the First Deputy Minister of Social Security, Ashot Yesayan, calls the "primary 'social safety-net' for their children."

More than 10,000 children in Armenia are currently enrolled into special schools with as many as 40 per cent staying on full board. Studies show that this reliance has led to the emergence of an "underclass of children marked by poverty, stigmatization and a lack of proper care and education who are likely to lack opportunity as adults."

In some of these schools, because children from vulnerable families receive an education intended for children with disabilities, their development is seriously hindered. At the same time, many children with disabilities remain excluded from educational facilities that were once originally intended to cater for their needs.

Yet, despite the common misconception that most children placed into residential care in Armenia are abandoned, few actually are. According to Naira Avetisyan, UNICEF's Child

Protection Officer, at least 70 per cent of children enrolled have families they could return to if socio-economic conditions improved. Many children instead come from single-parent households where the mother is divorced, widowed or separated from a husband working abroad or in prison.

"There are many reasons why children with parents are deprived of parental care in Armenia," explains Avetisyan. "First of all there is poverty, then centralization of special education within the boarding school system and finally, the absence of alternatives and community-based support services for vulnerable families at risk."

In 2000, UNICEF invited an international consultant to conduct a study on residential care institutions in Armenia.

Based on the recommendations of the report, alternatives to institutionalization were discussed in round table discussions with the Ministries of Health, Education, Social Welfare, Justice and Police. A three year plan of action was developed and UNICEF, the Armenian Government and NGOs collaborated together on the implementation of a work plan.

The main focus was to do everything possible to prevent the institutionalization of children and to create alternative models for children at risk from vulnerable families and those with disabilities. Several activities directed towards all of these objectives were implemented in Armenia from 2001-2004.

"In 2000, the majority of children in boarding schools were staying on full board" says Avetisyan. "Later the institutions started to support the reintegration of children back into their families although they were still not

attending mainstream schools. However, they were returning to their families in the evening."

According to Avetisyan, this was a major achievement because linkages with the family were not only maintained but also strengthened. "Parents understood that they had certain responsibilities towards their children," she says. "Even so, because mainstream schools were unable to provide services for children from vulnerable families, they were still stigmatized by being placed in an institution."

Of as much concern is that out of 10,000 children attending special schools in Armenia only less than 4,000 have disabilities. Many children with disabilities are instead left out of the education system and have not been integrated into society. UNICEF therefore supported government attempts to integrate them into mainstream education starting with inclusive pre-schools and later, with inclusive schools.

In particular, UNICEF supported the Ministry of Education and NGOs such as Mission East, World Vision and Bridge of Hope in establishing inclusive education models that have now been expanded throughout Armenia. Nevertheless, Avetisyan says that there are still many obstacles to overcome.

"There is still not enough awareness in society regarding the needs and capacities of children with special needs or of families at risk," she says. "Therefore, during these years, a major component has been education. In all our projects, booklets and leaflets have been produced for parents as well as service providers in community centers."

Mentalities are changing, however, and especially among decision-makers. This was a great success, says Avetisyan, because in the

past the general consensus was that an institution was the best place for children with disabilities or from vulnerable families.

Now, the Armenian Government is interested in de-institutionalization through family reintegration, foster care and the prevention of institutionalization through community-based support centers. It has also developed a law that obligates the state to provide support to "graduates" from Children's Homes once they reach the age of 18.

"Even if you create excellent conditions in the institution, when the children leave this artificial environment they have no life skills or the capacity to deal with daily problems," Avetisyan says. "For example, studies show that as a result, many of these children end up in conflict with the law and some girls become prostitutes and are more prone to trafficking."

Avetisyan is also quick to point out that there is an additional need to limit the large and influential Armenian Diaspora's seemingly endless ability to financially support institutions it mistakenly supposes accommodates orphans. "The importance of strengthening vulnerable families by providing them with job opportunities has to be emphasised rather than supporting the institution," she says.

"The problem of children in institutions is probably one of the most important issues to address as it violates the most basic rights of the child – to grow up in a family environment," Avetisyan concludes. "The majority of children in boarding schools and children's homes are not orphans.

They have parents and the right to live with their families. Nothing can replace the importance of that environment – not even the best institution."



## Community-based Care Centers

**Sixteen years after the 1988 earthquake devastated Armenia's second largest city, Vartouhi Petrosyan lives in one of the several hundred *domiks* (temporary metal containers) that make up the urban landscape of modern-day Gyumri.**

Unemployment is 2 to 3 times higher than the national average and 60 per cent of the population lives below the poverty line. Like many others living in Gyumri, Vartouhi's family has no electricity or water and lives on a staple diet of potatoes, pasta and bread. She has been particularly hit by the desperate socio-economic situation because she is a single mother.

Fourteen years earlier, however, after surviving the earthquake that killed her parents and eldest brother, Vartouhi had a promising future. In 1990, she enrolled at Yerevan State University and was in her third year studying linguistics when her future husband "kidnapped" her, a tradition that is still sometimes practiced in Armenia.

After they married, the newlyweds moved to Russia but when their relationship failed seven years later, Vartouhi Petrosyan returned to Gyumri. Unemployed and penniless, she arrived with her two children, Svetlana, now aged 13, and Emma, aged 11.

"When we came back, my daughters could speak only in a mixture of Russian and Armenian," she says. "They couldn't attend school because we didn't have any money to buy books or even clothes. When my children were hungry and there was no food, I beat them out of desperation. I wanted to commit suicide. We couldn't even heat our home."

However, when it was discovered that Svetlana and Emma weren't attending school,

Geghanush Gyunashyan, Director of the Shirak International Association's Community-based Care Center for Children at Risk, acted immediately to assist the family.

The Center was established in 2002 with the assistance of UNICEF to support families with children found unaccompanied and working on the streets or that are unable to attend school simply because they are poor. Fifty children aged between 6 and 15 are registered at the center although more attend on an irregular basis. Like Svetlana and Emma, twenty of the children come from single parent families.

At the Center, a staff of 2 social workers, 2 teachers, a nurse, doctor, psychologist and 10 volunteers cater for the children's needs. They learn handicrafts and receive assistance with their school work.

"The Center is the only reason why we survive," says Vartouhi Petrosyan. "In order to receive food my children attend a boarding school but they don't like it there. After classes finish at 2pm, they go to the Center and stay until 6pm. They like spending their time at the Center. Geghanush is like a second mother to them."

When Svetlana and Emma first visited the center they couldn't even read. Now, thanks to access to equipment at the center, Svetlana says she wants to become a computer programmer. However, although Svetlana and Emma now receive an education, that is not to say that the family's situation has otherwise improved.

In April, Vartouhi Petrosyan was admitted into hospital after the psychological pressure of living below the national poverty line took its toll. "She was beating her children and walking around with a knife," says Gyunashyan. "We took her to the psychological center and they



said that she was dangerous and had to be taken to hospital."

One month later, after Vartouhi received treatment, Svetlana and Emma were reunited with their mother. Without support from the Shirak International Association, the experience might have torn the family apart. Like many other children in the same situation, 13-year-old Svetlana has already aged beyond her years.

"I am ready to work to look after my mother," she says. "My dream is to have a strong family. I don't want to be a burden to my mother because I know how difficult it is to find food."

Gyunashyan says that none of the children in her care have otherwise been separated from their families. As a result of poverty there has been a significant increase in the number of children from vulnerable families enrolled into specialized boarding schools and children's

homes originally intended for children with disabilities or those without parents.

"This initiative is essential for the development of a state strategy on alternative care to prevent the institutionalization of children at risk," adds Naira Avetisyan, UNICEF's Child Protection Officer.

"The role of the local authorities and community must be encouraged to ensure the sustainability of such initiatives as part of a state policy on children and families at risk."

## Outreach Services

**Like many other pensioners, Vahe's grandfather struggles to survive on a pension that does not even cover the price of bread. To one side, with a newborn child still swaddled in her arms, his daughter stands motionless, devoid of any emotion as a social worker and psychologist from the Fund for Armenian Relief's Outpatient Service assess whether seven-year-old Vahe should be removed from his family.**

One week earlier, the Armenian Commission of Minors contacted FAR with concerns that the child was deprived of appropriate parental care. An assessment team from the Outpatient Service was immediately dispatched. "When we visited the family we could see that the shelter, if we can call it that, where Vahe was living was dangerous for his health," says Lusine Khachatryan, the social worker assigned to his case. "Because of this, an early intervention had to be made."

Lacking even a birth certificate, the police later complete all the necessary documentation before transporting him to the Fund for Armenian Relief's Children's Reception and Orientation Center – effectively a "clearing house" for vulnerable children at risk in the Zeytun district of the capital. Since the center was opened in February 2000, more than 700 children have passed through its doors.

In May 2004, UNICEF funded the Center's Outpatient Service.

Two hours later, when Vahe arrives at the FAR Center, he undergoes a medical checkup before being quarantined. Although otherwise healthy, scars on his back show that he has recently suffered from scabies. As a matter of precaution his hair is also sprayed with a chemical that will kill any lice before showering, perhaps for the first time in his life.

Vahe then changes into a clean set of clothes and settles down in the recently-constructed and purpose-built isolation wing that will accommodate him for the next few days.

Karine Hayrapetyan, the center's pediatrician, says that she has noticed a significant deterioration in the health of children brought to her in the past year. "There were cases of tuberculosis before," she gives as an example, "but they were passive. This year, however, not only have cases been active but they have increased. The fact that we've had cases of syphilis in children as young as twelve also says something about the situation in Armenia."

"There has been an increase in the number of cases of parental negligence where children are abused within the family," says Armen Pashinyan, the Outpatient Service's psychologist. "Now we will try to address the family's psychological situation to see if it is possible for them to take him back but of course, it's going to be impossible to build a "paradise" for him at home."

UNICEF's Child Protection Project Assistant, Arman Darbinyan, knows this reality only too well. Less than a month ago, he visited another family with the FAR Outpatient Service.

"The situation was very, very bad," he remembers. "You couldn't say that the conditions were fit for anyone to live in. The family was living in something like a derelict train wagon that was about four square meters in size. There was only one bed to accommodate 3 people – a 3-year-old boy, his 21-year-old disabled brother and their mother who was an alcoholic. There was nothing else."

It was also suspected that in order to make ends meet, the mother was working as a



prostitute but the main concern was that her youngest child was neglected. Every night, her friends would gather in this tiny living space to smoke and drink vodka. Although admittedly happy by nature, the boy was under-developed and could hardly speak. He also had tuberculosis.

"It was a pity," says Darbinyan, even though he is glad to notice a marked improvement in the child who still remains temporarily in the FAR Center. "Despite the situation, the mother and child were very attached to each other and she cried when he was taken away. On the other hand, the conditions were very bad and he was definitely in danger."

In the past, and in lieu of fostering options, children at risk would eventually end up in a Children's Home or Boarding School, but Sarkis Movsisyan, Head of the Social Department at the FAR Center, says that the service will

instead try to facilitate and support the reintegration of children back into their families.

According to Movsisyan, approximately 65 per cent of children have been successfully reintegrated since 2000 and the new Outpatient Service should increase that percentage in the future.

"The Case Management, Harm Reduction and Monitoring Outpatient Service for Children at Risk and their Families service is really beneficial to the work of this Center," he says. "We are trying to help children remain with their families and in this respect, the monitoring aspect of the service is important to reduce the risk of them falling into neglect again. This service will definitely help us prevent that in the future."

## Inclusive Education

**According to official statistics, there are over 8,000 children with disabilities living in the Republic of Armenia, many of which have been isolated from society and are excluded from mainstream education.**

But thanks to an initiative supported by UNICEF, the stigma attached to disabilities in Armenia is slowly disappearing. Hundreds of children who would otherwise have been denied a proper education can now study alongside those without any disability at all.

"We are creating equal opportunities and access to education for children with disabilities," says Susanna Tadevosyan, President of the Bridge of Hope NGO. Established in 1996, the organization continues to expand based on its experience to date. In addition to supporting inclusive education for children with disabilities in five regular schools in the Armenian capital, for example, Bridge of Hope also provides community-based services through Child Development Centers in Dilijan, Ijevan, Berd and Noyemberian.

The four centers that cater for over 400 children are located in Armenia's north eastern region of Tavoush which was chosen because it also suffered the most from cross-border shelling during the conflict with neighboring Azerbaijan over the disputed territory of Nagorno Karabakh. It is also one of the poorest in the Republic.

Unlike other regions in Armenia, there were also no soviet-era specialized boarding schools situated in the region to cater for children with disabilities. As a result, not only were disabled children denied access to mainstream education but they were also prevented from receiving any kind of education at all. Many weren't even taught at home.

"We started to identify the families of children with disabilities and then set about mobilizing the parents," says Tadevosyan. "We identified the children through the local social services but even so, some families continued to hide their disabled children from the community, especially those living in villages."

While the centers cater for children aged from 3 years of age to 18, some children aged 14 or 15 had never even attended school before. "It is very difficult to educate these children," says Tadevosyan, "but it is certainly not too late."

"My daughter was born with Cerebral Palsy," says one mother whose child has benefited from the work of the organization. "Relatives tried to convince me that my daughter, Ashkhen, wasn't normal and would destroy my life and that of my family. My husband abandoned me and I was left alone."

Ashkhen grew up in isolation and was deprived of the opportunity to interact with other children until she was later enrolled into a specialized boarding school that offered only a watered-down curriculum for children with learning disabilities. Ashkhen returned home on weekends. In 1996, however, when her mother heard about Bridge of Hope, she was eager to find out more.

"When I entered the center, the first thing I noticed was that there were non-disabled children there," she says. "I never thought that disabled and non-disabled children could relate to each other." Sixty per cent of the children that attend are not disabled and of those that are, nearly half are diagnosed with cerebral palsy and a third with Down's Syndrome.

Over the years, while still attending the specialized school, Tatevik says that Ashkhen developed quickly, becoming more



communicable and confident. In 1999, at the age of 15, Bridge of Hope helped Ashkhen make the move to a regular school close to where she lives. She is now one of the most active and high-achieving children in her class.

UNICEF started collaborating with Bridge of Hope in 1998 and continues to support the NGO with technical support for its community-based centers. "UNICEF is like a resource center for us," says Tadevosyan, "especially when it comes to advocacy and lobbying work. In fact, it is very important for us to have this support because we feel empowered."

However, sustainability is the key and Tadevosyan also says that it is the goal of the NGO to partner with local authorities and communities. The model they are creating for inclusive education in Armenia has also attracted the attention of NGOs hoping to achieve similar results in neighboring republics.

And the impact is certainly felt in Armenia. Five years ago, Bridge of Hope established a monthly magazine which is distributed to 50 regular schools in Yerevan and Tavoush. Both children with and without disabilities provide the content for the magazine and are involved in every aspect of its production.

"The magazine aims to raise awareness and change the attitude towards disabilities," says Tadevosyan. "Through it, we can involve all children in advocating the rights of the child as well as change society's perception of those with disabilities."





## EDUCATION

**Education has always been traditionally prioritized by the state and local communities in Armenia although socio-economic conditions and over-staffing have contributed to the emergence of significant problems since independence was declared in 1991. With public expenditure on education falling from 2.2 per cent of GDP in 1999 to 1.9 per cent in 2002, absenteeism and drop out rates remain high for children from vulnerable families and 25 per cent of children do not continue studies after grade 8.**

Children from vulnerable communities, including those from ethnic minority groups, often enter school with a poor grasp of the Armenian language and face additional problems such as the lack of basic school supplies and textbooks in their mother tongue. Attendance rates for children from refugee and minority communities are half the national average and UNICEF's first priority has therefore been to respond to the most immediate needs of schools and kindergartens in the five most disadvantaged regions of Armenia such as the supply of educational materials and teacher training.

In 1996, ownership of pre-school institutions was transferred to local government and communities that often lacked the necessary financial resources, knowledge and ability to maintain them. Although attendance was not mandatory during the Soviet era with only 47 per cent of eligible children enrolled, the figure has since dropped to 25 per cent, the lowest in the CEE/CIS.

Studies show that preschool education has a decisive impact upon the emotional and physical development of children. Because of this, UNICEF will support the government with the implementation of a comprehensive

programme for preschool childcare, education and development during 2005.

By supporting the development and introduction of new policies and strategies, decrees and regulations, UNICEF will also support the government in improving the quality of existing services as well as introducing low-cost alternative services for vulnerable communities in Armenia. It is also supporting the development of parental education to improve the level of home-based education for those currently not attending pre-school.

More than 2,000 caregivers have already been trained in child-centered pre-school teaching and care practices. Alternative services have been successfully piloted in 5 preschools in the Ararat region and resulted in the enrolment of over 180 children who did not previously attend. There are also five parental resource centers in the Gegharkunik region of the republic.

Although there is generally no gender disparity between the sexes, in national minority communities, girls are more likely not to continue studies after grade 8. Moreover, because educational institutions receive funding on a per capita basis, lower attendance figures are often not reported. As part of its new country strategy, UNICEF is assessing the ability and capacity to monitor school drop out rates on both the national and local level.

The Life Skills project is one of several educational reform initiatives that have been undertaken in Armenia since the adoption of the 1995 Constitution, which affirmed the right of all citizens to free education, and the 1999 Law on Education that proposed the humanization of education with a focus on the



development of the individual as well as human rights and civic consciousness.

UNICEF-supported Life Skills is a shift from a teacher-centered, knowledge-driven process of schooling to one where knowledge, skills and values are seen as interrelated and where pupils are considered a vital part of learning process. Acceptance of the significance of Life Skills at the national level has been confirmed by its inclusion in the recently revised national curriculum that will guide reforms in the area of education in Armenia for the foreseeable future.

UNICEF-supported Life Skills contributes to the gradual development of a fully functioning democracy in Armenia and related to this goal, UNICEF also supports the training of school directors and school boards in the country. The new system in place since reforms of the financial administration and management of

schools were introduced in 1998 requires that school management be conducted through boards comprising of teachers, parents and the local community.

Now, with support from UNICEF, the Ministry of Education and Science has officially endorsed guidelines to allow student councils to participate in the management of schools. In 2004, UNICEF also devised the conceptual standards for child-friendly schools and, in 2005, will finalize criteria to ensure a safe and enabling school environment for all children. This will contribute to the improvement of the educational system as well as school facilities in Armenia.

## Pre-School Education

**It might seem a little early for Heghine Suvaryan to make use of the parental resource center established at her local kindergarten but that is precisely what the expectant mother is doing. Although she won't give birth until November, by browsing through reference material in a room furnished, equipped and supplied by UNICEF, she is already thinking ahead.**

Opposite sits Keghetzig Kocharyan, a mother of two. Her eldest child didn't attend kindergarten but her six-year-old daughter, Sona, is now in her final pre-school year. "I can see the difference," she says. "Because my son never attended kindergarten he wasn't prepared for school. Even his hand wasn't prepared [for writing]. It was difficult for him at first."

Marine Soukhudyan, UNICEF's Education Project Officer, knows this only too well.

"When children aren't in possession of the basics for entering school, it is more difficult for them to adjust to this new environment and they are less communicative with their teachers and peers," she says. "They have already been deprived of the opportunity to open their minds to explore, compare and learn. That is one reason why there are only two to five good pupils on average in every class at schools in Armenia and why many children are unable to fully grasp the curriculum presented."

In order to address this problem, the Armenian Government now intends to make enrollment in pre-school classes mandatory for children at the age of five. Because most kindergartens are rigid and inflexible, the plan is to make them more child and parent-friendly with hours and services designed to cater to the needs of parents and their children. This should encourage higher figures for enrollment and attendance.

UNICEF will also support efforts to specifically target parents and improve the level of home-based education in communities without any kindergarten or pre-school facility at all.

In Vanadzor, the two mothers certainly appear relaxed in this setting and totally at ease. At first glance this might be considered as normal a kindergarten as any to be found in the West but appearances can be deceptive. Although the kindergarten in Armenia's third largest city can accommodate 120 children, only 75 of 107 currently enrolled attend on a regular basis. Winter is the most difficult time when the cost of heating taxes an already overstretched budget.

Nevertheless, attendance is higher than at most kindergartens in Armenia. In this residential district of Vanadzor, for example, only 30 per cent of eligible children attend kindergarten or pre-school classes. Receiving just \$4,000 per year from the community budget to cover the cost of salaries and utilities in addition to the \$5 per month fee that most parents have to pay, it's amazing that this kindergarten is operating at all.

Yet, despite adverse economic conditions, the kindergarten can be considered a success in a country where only 2 out of 10 children are enrolled in any form of pre-school educational facility. What makes it different, however, is the approach taken by the staff. Rather than complain about a lack of resources, new methodologies introduced by UNICEF are quickly taken on board by a staff that is eager to learn and adapt.

Outside the Director's office, traditional Armenian dolls made by the staff with materials supplied by parents decorate the walls. Downstairs, a class of six-year-olds plays checkers with the tops collected from dozens of



soft drink bottles. As sad as it might sound, the tops are actually quite colorful and appealing. To one side of the room sit cardboard traffic lights that will later be used to teach the children about road-safety.

The Director is also keen to point out the trees and shrubs outside that were planted and nurtured by the children. Although there has been no instruction to raise environmental awareness among these pre-school children, it is of vital importance that they do. Vanadzor was devastated by the 1988 earthquake and deforestation has occurred on a massive scale.

However, Robert Stepanyan, the Head of the Department of Information Analysis and Development at the Ministry of Education and Science, resigns himself to the fact that this kindergarten is representative of only 20 per cent of those in the republic. Even in the Soviet era, enrollment stood at just 45 per cent of eligible children with most parents viewing

kindergartens as more of a "repository" than as somewhere necessary for child development.

"There are a number of other reasons for the current situation," explains Stepanyan. "The main reason, of course, is that communities do not have the financial resources to maintain their local kindergartens. In addition, some parents cannot even afford the small monthly fee charged for their children to attend. Others are unhappy with the level and quality of services offered."

But Stepanyan is confident that the situation will change. UNICEF and the World Bank are already establishing a working group to resolve the many problems facing kindergartens and pre-schools in Armenia. By introducing a revised curriculum and a new set of standards, Stepanyan also believes that kindergartens such as the one in Vanadzor will no longer be the exception rather than the rule - even if financial resources are lacking.

## Life Skills

**A teenager is infected with HIV during a contaminated blood transfusion yet, despite contracting the virus that causes AIDS through no fault of his own, is ostracized by his friends, classmates and teachers.**

What would you do if that teenager was your friend? Would you be willing to offer your moral support? And what if that teenager wasn't your friend but in actual fact, were you? How would you expect to be treated?

This is just one of many scenarios presented to children attending Life Skills classes that are now taught in most schools as part of the national curriculum in the Republic of Armenia. The classes are part of a UNICEF-developed framework to develop a rights-based, interactive and participatory educational system.

Characterized as "inclusive, healthy and protective for all children," lessons in developing skills that are relevant to the "real world" also allow schoolchildren the opportunity to formulate and express their own opinions on issues that might otherwise be ignored or inadequately covered by other, more mainstream classes.

In School No. 120 in the Erebuni District of the Armenian capital, for example, as skills-based education has been shown to be more effective in promoting healthier lifestyles, the classes offer children the only opportunity they have to learn about the risk of infection from HIV/AIDS.

Moreover, interactive teaching methods also improve individual assertiveness and communication skills that can be utilized in later life. Indeed, an independent report commissioned by UNICEF in 2001 assessed the project positively, supporting UNICEF's opinion that "possessing life skills is critical to young

people's ability to positively adapt to and deal with the demands and challenges of life."

As a result, Life Skills classes will be extended to every school in the Republic during 2005.

Yet, despite the benefits, not everyone was happy when Life Skills classes were first introduced in Armenia. Six years ago at School No. 120, for example, many parents were instead shocked to discover what their children were learning.

In fact, teacher Karine Harutiunyan says that there was even resistance to teaching Life Skills from other teachers, including the school's Director. Despite her training, by touching upon sensitive subjects such as trafficking, alcohol and drug abuse as well as the environment, she says that she was instead accused of being a 'provocateur.'

"There was a lot of resistance at first but now there is none at all," she says. "When parents first heard about these classes they made many complaints but now, some even say that they would like to participate."

Turning back to her class, Karine Harutiunyan instructs the children to form separate groups of four to discuss the given scenario that has already been read out aloud from a teacher's manual produced and supplied by UNICEF.

After discussing the scenario, the children then pass a pomegranate to each other, taking turns to express their own opinion. There are no right and wrong answers, the children later explain. Instead, they are simply being given the opportunity to formulate ideas and to express themselves.

And it is this point that Harutiunyan wants to stress the most.



Not only is the pomegranate considered a symbol of national significance in Armenia, she says, but it also represents democracy. "Beneath a tough outer shell, the seeds are all equal," she explains, adding that children not only talk about their own rights but also those of others.

And such an approach in a country which still faces a long and difficult transformation away from a totalitarian past is of vital importance.

Even today, more than a decade after independence was declared from the former Soviet Union, many citizens still lack the confidence or ability to demand that their voices be heard. Indeed, some even lack the inclination to do so.

Such attitudes, however, may now be changing.

"In this class we are allowed the freedom to think," says 14-year-old Samuel. "Because we're not given marks, we don't have to worry that by expressing our own ideas and opinions we'll be later told that we're wrong."

"It's very offensive if someone ignores your opinion," adds Anoush, another 14-year-old in the same class. "Nobody has the right to ignore me."





## HEALTH

**In the years following the devastating earthquake that hit northern Armenia in 1988, infant formula was imported into the republic as humanitarian assistance and distributed free of charge through polyclinics. As a result, levels of breastfeeding were substantially reduced.**

This drastic decline was blamed on the shortage of food, economic hardship and the continuous stress that had endured since the collapse of the Soviet Union. Mothers with young infants were reporting insufficient breast milk and turned to infant formula because they lacked confidence in their breastfeeding capabilities while living under such adverse conditions.

Studies show that exclusive breastfeeding up until the age of six months provides the best nutrition and protection from illnesses for infants. As a result, UNICEF began to support the implementation of a programme to promote breastfeeding in Armenia through the training of health providers in maternity units and parental education. The rate of exclusive breastfeeding for 6 months increased from 0.7 in 1993 to 30 per cent in 2000.

In addition, there are now 15 baby-friendly hospitals out of 55, a UNICEF and World Health Organization (WHO) initiative that encourages maternity wings in Armenia to become centers for the support of breastfeeding. UNICEF has extended the programme to include polyclinics so that the continuity of breastfeeding practices that mothers acquire at the maternity level can be ensured.

Although the Armenian Government has adopted some clauses of the International Code of Marketing Breast Milk Substitutes, there is no comprehensive law although UNICEF is working with the Ministry of Health and

National Assembly to introduce legislation governing the marketing of breast milk substitutes.

The decrease in the rate of infant mortality in Armenia can be directly attributed to the implementation of the breastfeeding, immunization programs and Integrated Management of Childhood Illnesses (IMCI). IMCI is an approach to child health that focuses on the well-being of the whole child. IMCI aims to reduce death, illness and disability, and to promote improved growth and development among children under five years of age. IMCI includes both preventive and curative elements that are implemented by families and communities as well as by health facilities. The major components of these programmes include UNICEF's procurement of vaccines, essential drugs and supplies, training of health providers and parental education.

UNICEF is now assisting Armenia in the development of a strategy to eliminate measles and provides vaccines against measles, mumps and rubella (MMR) as well as other preventable diseases for the national immunization schedule. Access to immunization services in Armenia is high and national coverage exceeds 90 per cent.

In 2002, the World Health Organization certified Europe as a polio free region. This also included Armenia where the last case of polio was registered in 1994. In acknowledgement for the role it played in eliminating the disease from the country, the Armenian Government made special mention of UNICEF.

Armenia is considered an endemic zone for Iodine Deficiency Disorders (IDD) which jeopardizes the mental and physical health of children and affects the reproductive health of women. Another less visible consequence of



IDD is a level of mental impairment that lowers intellectual prowess at home, at school and at work.

During the Soviet era, salt in Armenia was iodized but the quality of equipment and the standard of iodization was so low that beginning in 1995, UNICEF supported the procurement of new equipment as well as potassium iodate which is used for salt iodization. As a result, the consumption of iodized salt has risen to over 80 per cent.

UNICEF has also assisted in the development of guidelines and protocols to prevent the transmission of HIV from parent to child. UNICEF supported the training of a team of 26 national trainers in 2004 and organized a training session on the Prevention of Parent to

Child Transmission of HIV/AIDS (PPTCT) for 82 heads of regional ante-natal care services and chief gynecologists.

Through cooperation with the Government and other national and international counterparts, UNICEF will continue to ensure that the progress achieved is sustained and expanded to meet the Millennium Development Goal of reducing child mortality by two thirds by 2015.

## Integrated Management of Childhood Illnesses

**Eighteen days after his birth, rapid breathing concerned a young infant's mother so much that she immediately sought medical attention. With a temperature of 38.5° centigrade, the doctor diagnosed Hovik, now aged 5 months, with pneumonia. Thanks to early intervention, a life was probably saved. Years earlier, however, the story might have been different.**

When Armenia declared its independence in 1991, few realized that expenditure on social services, and health in particular, would be drastically reduced. Still suffering from the devastating effects of earthquake and war, infant mortality rose alarmingly in the post-soviet Republic.

In 1998, official statistics reported that one third of children that died from pneumonia in Armenia had not received any treatment in the 24 hours preceding their deaths. In 2001, according to the Armenian Ministry of Health, over 20 per cent of infant deaths occurred at home or on the way to hospital.

In response to this situation, UNICEF decided to implement a strategy known as the Integrated Management of Childhood Illnesses (IMCI) in Armenia. Since 1996, the strategy has been successfully implemented in over 80 countries. After orientation meetings held in October 1999, training for IMCI began in May 2001. The following year, additional training was carried out in Martuni, a district situated in Armenia's north-eastern Gegharkunik region which, until recently, had one of the highest rates of infant mortality in the Republic.

"This is a highland region," says Dr. Lena Hovannisyanyan, Senior Pediatrician and Deputy Director of the Polyclinic in Martuni. "The winters are very harsh and last seven or eight

months. There is no industry and living conditions are very poor."

By consulting a chart that conforms to international standards adapted for use in Armenia, nurses can identify the most common symptoms of illnesses that children under the age of five might suffer from and can respond to their immediate needs.

"First the nurse checks if any symptoms are listed in the red section of the chart because these are the serious problems," explains Hovannisyanyan. "Then they check the yellow section which lists conditions that can be treated without hospitalization if the proper medicines are prescribed. Finally, symptoms that can be treated at home without medication are listed in green."

Another important component has been to raise awareness among parents themselves – especially in a region where conservative traditions still play an important role in family life. In the past, some mothers would seek treatment only upon the advice of other family members rather than the recommendation of trained medical professionals. Now, mothers feel empowered enough to make decisions based on what they have learned from IMCI.

"Before the program, mothers would take up our time with questions and concerns but now they know how to treat their children if they display minor or less serious symptoms," says Karine Grigoryan, a District Pediatrician and Trainer for IMCI,

"Medical personnel are now very self-confident and competent," adds Dr. Hovannisyanyan, "The number of unnecessary hospitalizations has even decreased because nurses can identify if and when it's possible to treat a child at home." There have been other improvements as well.



For example, the number of children suffering from acute dehydration has been significantly reduced.

According to Hovannisyan, the reduction in the number of cases of acute dehydration is almost entirely down to the introduction of Rehydron and other drugs provided free of charge by UNICEF for IMCI in the first year. Immunization with vaccines incorporated into the National Immunization Schedule provided with UNICEF support has also played an important role.

"If you went to the hospital a few years ago, you would see about ten children suffering from dehydration. Now, thanks to IMCI and Rehydron, it's unlikely that you'll see any. The introduction of Rehydron was really a revolution."

"Before the programme there were many serious cases here," agrees Karine Manoukyan,

a nurse in the village of Zorakar on the outskirts of Martuni. "So serious was one case of dehydration in a three-year-old girl that her parents thought that she would die. By chance, we ran into the parents and thanks to IMCI, could administer the correct treatment in time."

But IMCI has also resulted in other less visible achievements. "Another change has been that for many years we were unable to expand our knowledge and acquire new skills," says Manoukyan. "IMCI has helped us upgrade both our knowledge and skills as well as encourage our own professional growth. Now we feel like real pediatricians."



## Young People's Health & Development

**As of April 2005, there were 304 officially registered cases of human immunodeficiency virus (HIV), including 57 under the age of 24, among citizens of the Republic of Armenia. However, the real number is believed to be 10 times higher. Professionals in the fields of health, education, social welfare and other sectors to whom young people could turn for help are rarely trained in matters of sexuality, sexual and reproductive health or in the counseling of young people.**

In this environment, sexually active young people are at a greater risk of unwanted pregnancy, induced abortion, sexually transmitted infections (STIs), HIV, and the associated social and health consequences of these risks. The lack of education and services is even more risky for disadvantaged groups of adolescents such as those who are institutionalized or deprived of a family environment.

Until recently, the importance of sexual education for young people in Armenia was largely ignored. It has not been incorporated into the secondary school curriculum and no related teacher-training syllabus exists. As a result, parents and other family members, as well as the larger community, are unable to effectively support young people in this rapidly changing environment.

Although attitudes in society towards those diagnosed with HIV are changing, there is still discrimination. UNICEF is working in partnership with other local and international organizations to change this situation. UNICEF seeks to strengthen the capacities of young people aged 10-18 in preventing infection from HIV/STIs through peer education, youth friendly health services, and life skills based education.

UNICEF is also supporting programmes and activities that seek to increase young people's access to information so that they can better protect themselves from HIV and STIs. The Young People's Health and Development project aims to achieve this goal as well as help young people identify situations that place them at risk.

In 2005, UNICEF will provide technical support for collecting and analyzing behavioral data to better understand the context of vulnerability and the types of risky behavior that young people aged 10-18 engage in. This will provide the basis for developing and implementing appropriate interventions to improve the health of young people by minimizing the risk of HIV infection and contribute to the prevention of its spread in Armenia.

Recommendations on reducing risk and preventing HIV infection in infants and young children were also developed for the Ministry of Health.

## Peer Education

**Any visitor to School No. 43 in the Armenian capital might easily mistake Veronica Seropyan for a teacher. Yet, standing in front of 13 pupils aged between 14 and 16, there is something different about her class. The ubiquitous red ribbons adorning the children's t-shirts perhaps provide a clue.**

Seropyan isn't a teacher but a member of the AIDS Prevention, Education and Care (APEC) NGO charged with the task of training 1,400 schoolchildren as peer educators by May 2005. Through interactive teaching methods, discussion and games, the children learn about the danger of infection from HIV/AIDS.

Peer education has been found to be an effective method in reaching a specific target group that might otherwise not listen to someone older or from a different social background. In the summer, 120 of the most promising educators will attend a summer camp to expand their knowledge still further.

"We talk about the history of the disease," says Seropyan, "and how it is spread, what effect it has on the immune system as well as the biological and psychological development of teenagers. Later, they will pass that knowledge on by talking with friends and classmates."

And there is a reason why APEC has chosen to target this particular age group. Although Armenia is considered a country with a low prevalence of HIV/AIDS, the number of those infected is growing. Last December, the United Nations warned that the republic faces a "potential disaster" if nothing is done to stop its spread.

Moreover, while only 57 of 304 officially registered cases of HIV/AIDS among Armenian citizens were aged less than 24, surveys of youth and especially students indicate that

even though there is a high level of awareness regarding the importance of practicing safer sex, behaviour can be just the opposite.

Therefore, in 2001, UNICEF supported a pilot project implemented by APEC in Armenia's southern-most Siunik region to alert young people to the danger of HIV/AIDS. Round-table discussions were held with school principals and representatives of the local authorities. It was also decided to conduct a survey of youth in the region. The results were alarming.

While respondents knew of the dangers of HIV/AIDS, very few knew about preventative measures. Instead, most teenagers received their information from unreliable sources such as films or from friends who lacked a comprehensive understanding of the disease. The survey was repeated in 2003 and APEC decided to start training peer educators.

Although the initial reason for engaging in AIDS education was to prevent new infections from occurring, the need to reduce the stigma and discrimination often attached to the disease was also identified. In many countries, talk of HIV is often accompanied by ignorance, resentment and hatred by those who consider themselves to be least at risk.

"The reality is that HIV/AIDS affects everyone," says Emil Sahakyan, UNICEF's Information and Communication Officer. "However, because many people think that it will not affect them, they don't take precautions. At the same time, informing people in the wrong way creates fear, stigma and discrimination."

As a result, on World AIDS day in 2003, UNICEF also funded APEC's campaign to raise awareness of HIV/AIDS through the mass media. The campaign sought to promote tolerance in society towards those living with



the disease and resulted in the distribution of 80,000 leaflets, 2,500 calendars and 4,500 red ribbons. A 1-minute video clip was also shown on 16 television stations in the republic.

In 2004, UNICEF also funded a summer school organized by APEC to increase the capacity and knowledge of existing peer educators. In total, 96 students were involved. Participants received up-to-date information, booklets and leaflets and were awarded with certificates at the end of six training sessions.

In 2005, UNICEF will also support the establishment of youth friendly health services throughout Armenia.

Meanwhile, because APEC's work has been so successful and is constantly being expanded, the NGO has now decided to concentrate solely on education and preventative activities. An offshoot of the NGO, Real World – Real People,

will concern itself with people living with HIV/AIDS.

"I can't say that Armenia is very open in discussing such issues," says Artak Mushegyan, President of the NGO, "but the situation is changing. We need time to understand how important it is to speak about this problem which is why we also stress the importance of educating parents and teachers as well."

## Freedom of Expression

**At the age of 14, Gor Baghdasaryan, a young filmmaker working with the Manana Youth-Cultural non-governmental organization in Yerevan, won the first-ever 1-Minute Video Junior Award organized by UNICEF's Young People's Media Network, the Sandberg Institute and the European Cultural Foundation.**

His film, "Children must live without War," was selected by the Oscar-nominated film director, Karim Traidia, as the best one-minute film in the junior category. "Gor's film had a very straightforward message, a great script and an interesting style of filming that captures the eye from beginning to end," said Traidia during the awards ceremony held in Amsterdam on 10 November 2002.

Three years later, now with many more films under his belt, the young filmmaker has the unmistakable air of a serious artist about him.

"I tend to focus a lot on war because Armenia has had many problems with conflict," responds Baghdasaryan when asked why he chose to make a film with an anti-war message. "When I grew up," he explains, "the war with Azerbaijan was continuing and, from my own experience, I can understand why it isn't good for children to live during times of conflict. I'm not sure if my films will change anything but it's very important that they have an effect."

However, things might have been different without encouragement from Manana, a youth-educational cultural center founded in 1995 in the Armenian capital. Although the organization began by encouraging children to write articles and poems about their lives and surroundings, it later expanded to incorporate photojournalism, filmmaking, web design, publishing and painting. Numbers vary from year to year but on average, approximately 50

children aged between 6 and 18 participate in the organization's activities.

"At first, there was only one club for journalism but when the other clubs opened, filmmaking became my favorite," remembers Baghdasaryan. "That's why I decided to become a Director. While I liked the idea of telling a story in writing, it is more effective to tell it through images. I like to realize the ideas that I have in my head through film."

Emil Sahakyan, UNICEF's Information & Communications Officer in Armenia, says that the international organization first started to work with Manana in order to promote the involvement of children and young people in the media. "In 2003, within the framework of the International Children's Broadcasting Day (ICDB), students from Manana developed scenarios and produced a series of 1-minute videos entitled 'My Hero'," he says.

However, the films that were made for Armenian television also found a larger, more international audience. In March 2004 at the Videotivoli Film Festival in Finland, out of 80 films selected for screening from 400 works submitted, 10 were from the "My Hero" series. The same month, "End of the Line," a film produced as part of UNICEF's "Leave no child out" campaign, was shown at the Palma de Mallorca film festival for professionals where Baghdasaryan was also invited to attend as a guest.

But, despite this success in the form of recognition from the international film community, perhaps Manana has also managed to succeed on a more personal level. "I have learned many things here," says Baghdasaryan, "and I am not sure what the future would hold in store for me if I wasn't involved with Manana."



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