MILLENNIUM DEVELOPMENT GOALS: NATIONAL PROGRESS REPORT

ARMENIA 2015
The Millennium Development Goals National Progress Report was prepared by EV Consulting under the guidance of the United Nations Office in Armenia.
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In 2015, the United Nations member states completed the Millennium Development Goals process, aimed at improving living standards and livelihoods of the world’s peoples.

Despite the global economic crisis in 2009, which seriously affected the economy of Armenia, the Government of Armenia, using the scarce resources available, succeeded in achieving tangible results in implementing the Millennium Development Goals.

The Millennium Development Goals National Progress Report, which is being presented to a wider public demonstrates that, according to internationally defined indicators, Armenia has made considerable progress in terms of some goals – maternal and child mortality, and access to education and sources of drinking water. The Government of Armenia has partially achieved other MDGs, including reduction of poverty level and ensuring environmental sustainability, have seen considerable progress, despite not being fully achieved, including reduction of poverty level and ensuring environmental sustainability.

The registered results add impetus to the Government of Armenia’s efforts aimed at a more efficient utilization of available resources for the implementation of the 17 Sustainable Development Goals included in UN’s new 2030 Agenda for Sustainable Development.

We will take consistent steps towards nationalization and full implementation of the new agenda, thus contributing to overall progress in the sustainable development of the Earth and the whole of humanity.

Hovik Abrahamyan
Prime Minister of the Republic of Armenia
**LIST OF ABBREVIATIONS**

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>AIDS</td>
<td>Acquired immunodeficiency syndrome</td>
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<tr>
<td>AMD</td>
<td>Armenian Dram</td>
</tr>
<tr>
<td>CIS</td>
<td>Commonwealth of Independent States</td>
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<tr>
<td>DHS</td>
<td>Demographic and Health Survey</td>
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<tr>
<td>EBRD</td>
<td>European Bank for Reconstruction and Development</td>
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<tr>
<td>ECU</td>
<td>European Currency Unit</td>
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<tr>
<td>EECA</td>
<td>East Europe and Central Asia</td>
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<td>EEU</td>
<td>Eurasian Economic Union</td>
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<td>EU</td>
<td>European Union</td>
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<tr>
<td>GoA</td>
<td>Government of Armenia</td>
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<tr>
<td>GDP</td>
<td>Gross Domestic Product</td>
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<td>HIV</td>
<td>Human immunodeficiency virus</td>
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<tr>
<td>ICT</td>
<td>Information and communications technologies</td>
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<tr>
<td>ILCS</td>
<td>Integrated Living Conditions Survey</td>
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<td>IMF</td>
<td>International Monetary Fund</td>
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<tr>
<td>ITU</td>
<td>International Telecommunication Union</td>
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<td>MARPs</td>
<td>Most-at-risk populations</td>
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<td>MDG</td>
<td>Millennium Development Goal</td>
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<td>MMR</td>
<td>Measles, Mumps and Rubella</td>
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<td>MoH</td>
<td>Ministry of Health of the Republic of Armenia</td>
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<td>NEAP</td>
<td>National Environmental Action Program</td>
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<td>NIH</td>
<td>National Institute of Health</td>
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<td>NSS</td>
<td>National Statistical Service of the Republic of Armenia</td>
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<td>OECD</td>
<td>Organization for European Cooperation and Development</td>
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<td>PMTCT</td>
<td>Prevention of mother-to-child transmission</td>
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<td>PPP</td>
<td>Purchasing power parity</td>
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<td>RA</td>
<td>Republic of Armenia</td>
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<tr>
<td>SDG</td>
<td>Sustainable Development Goal</td>
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<tr>
<td>SRH</td>
<td>Sexual and reproductive health</td>
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<tr>
<td>STI</td>
<td>Sexual transmitted infection</td>
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<tr>
<td>TAR</td>
<td>Total abortion rate</td>
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<tr>
<td>TB</td>
<td>Tuberculosis</td>
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<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<td>USD</td>
<td>United States Dollar</td>
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<td>WHO</td>
<td>World Health Organization</td>
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Acknowledgements

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The team of consultants who prepared the report included: Gagik Gabrielyan (economic expert, team leader), Sevak Hovhannisyan (economic expert, project coordinator), Alen Amirkhanian (environmental expert and Director of American University of Armenia’s Acopian Center for the Environment), Hasmik Ghukasyan (social expert) and Lala Margaryants (healthcare expert).

EV Consulting and the authors’ team would like to thank the United Nations Country Team members for their guidance, for providing materials and reviewing this report and offering their valuable comments and suggestions, particularly: Varya Meruzhanyan (Acting Head of Resident Coordinator’s Office) and Garik Hayrapetyan (UNFPA Assistant Representative).

EV Consulting and the authors’ team would also like to thank all those organizations and individuals that so readily gave of their time and expertise, thereby making a significant contribution to the Report: in particular, Ministry of Foreign Affairs of the Republic of Armenia, National Statistical Service of the Republic of Armenia, Ministry of Labor and Social Affairs of the Republic of Armenia, Ministry of Health of the Republic of Armenia, National Center for Disease Control and Prevention, National Center for Tuberculosis Control of the Republic of Armenia, National Center for AIDS Prevention of the Republic of Armenia and the Secretariat for the National Council on Sustainable Development under the Prime Minister’s Office.

Note on Data

The National Statistical Service of Armenia (NSS), understanding the importance of reliable data to support the implementation of Millennium Development Goals (MDGs), started collecting the MDG indicators in 2004, immediately after the Government of Armenia (GoA) approved the MDG framework and nationalization of MDGs.

Thus, the data from 2004 onwards is the most consistent official data that can be used to accurately reflect the progress of the implementation of MDGs and the achievement of their targets. For a number of MDG indicators, historical data for the period of 1990 to 2003 was missing, or the data might have been collected or calculated with a differing methodology. In some instances this may affect the comparability of the data before and after 2004. For the purposes of comprehensive coverage, wherever data availability allowed, this report provides comparison with years before 2004 (with corresponding notes about the comparability of the data).

A particular note has to be made in relation to the data on poverty rates. Armenia has been using the World Bank methodology for determining the poverty rate through the Integrated Living Conditions Surveys (ILCS). Since 1996, the methodology has been changed three times – in 1998/99, 2004 and in 2009. The NSS re-estimated retrospectively and prospectively levels of poverty based on these methodologies to ensure comparability in historical data series. However, this re-estimation has not been comprehensive. The data on poverty rates based on the 2004 methodology is available for years 1998/99 and 2004-2012, while poverty data based on the 2009 methodology is available only for years 2004-2013.

1. **Executive Summary**

Over the course of the last decade, Armenia has undertaken wide ranging and comprehensive institutional, economic and social reform steps towards implementation of the Millennium Development Goals (MDGs). Overall, Armenia identified and committed to fulfil 16 national targets under the eight MDGs. For the measurement of the implementation or fulfilment of these targets, 65 indicators were identified in the process of MDG nationalization. Some of the national targets and indicators were not identical to the globally accepted targets and indicators, but were adapted to reflect the realities in the country.

Out of the total 65 indicators, Armenia achieved 22 indicators. There was, however, good progress towards 10 of the non-achieved indicators. Armenia did not achieve nearly half of the national indicators; a total of 30 out of 65 indicators. There are three indicators for which the measurement is difficult due to lack of accurate data or identified quantifiable measures.

The one-page scorecard at the end of this section (page 13) summarizes Armenia’s performance in relation to the MDGs, the targets under the MDGs and their respective indicators.

It is important to note that the assessment of the performance of the country towards meeting its commitment and achieving MDGs is made not in general terms, but in relation to achieving concrete national indicators committed by Armenia under each target.
MDG 1. Eradicate Extreme Poverty and Hunger

In eradicating extreme poverty and hunger, Armenia has achieved half of the indicators under MDG 1, while the rest are still to be achieved.

There has been substantial reduction of extreme poverty and hunger in the last two decades, yet the poverty level in the country remains high. Since 2004, the number of undernourished (extremely poor) has declined by 1.6 times, with the figure standing at 2.7% in 2013. However, nearly one third of the population still remains poor. In 2013, in monetary terms, the poor were people living with less than 3.2 USD a day, and extremely poor were people living with less than 1.9 USD a day. A worrying and alarming sign is that the proportion of children under-five years of age suffering from stunting and malnutrition has steadily increased since 2000. In 2010, nearly 5% of children were underweight, and 19% of them suffered from stunting. The level of poverty among children is 5.3 percentage points higher compared to the national average and has increased by 25% when compared to 2008 figures.

Armenia has had mixed results in ensuring productive employment and decent work for all, including women and young people. Between 2005-2014, overall unemployment was reduced from 31.2% to 17.6%, but still nearly 40% of all labor resources of the country are economically inactive. Also, 40.4% of 25-29 year olds, and 37.2% of 15-24 year old young men and women are neither in school/university or employed.1 Moreover, more than a quarter of employed people in Armenia are still poor, and the proportion of middle class workers, living with more than 4 USD per day, is only one third of the population, suggesting that the level of productivity in the economy is low.

MDG 2. Achieve Universal Basic Education

In ensuring universal basic education, Armenia has achieved one indicator out of five. In general, the enrolment ratio in education is high in Armenia, and almost the entire population is literate and has received some level of education. Access to education is universal for both boys and girls, with a higher ratio of girls’ enrolment in high school and universities. The gap between the gross enrolment ratios of the poor in universities to that of the non-poor population has decreased during the last decade. The enrolment ratio of the poor, as a percentage of the enrolment ratio of the non-poor, improved from 26% to 51% during 2005-2013. However, Armenia has not met its high targets committed to under this MDG, particularly in relation to the enrolment ratios in basic and high schools and to state budget allocations. In 2014, the level of public funding in terms of GDP ratio was 2.4%, which was lower than the ratio in 2000. An alarming tendency is the declining enrolment and increasing dropout rates from schools, especially from high school. In 2010-2013, the high school enrolment ratio reduced from 84.4% to 72.4%.

MDG 3. Promote Gender Equality and Empower Women

In promoting gender equality and empowering women, Armenia has not achieved its targets. Although men and women have equal access to education, with women being even more involved in higher education, women have difficulties in finding well-paid jobs, especially in the non-agricultural sector. In 2013, the employment rate of women was 46%, compared to 62% of men.

In effect, women in Armenia are significantly less engaged in decision-making positions in economic and business, as well as in political life of the country. Though the number of women deputies in the parliament tripled, it is still very low (11% of seats), and women have limited involvement in local government (2.1%), and practically no involvement in urban communities and regional governments.
MDG 4. Reduce Child Mortality

In reducing child mortality, Armenia is close to meeting its targets (one target achieved and good progress in the other two). National programs in immunization and child healthcare have helped to reduce child and infant mortality rates. Since 2010, Armenia achieved and maintained 97% of MMR (Measles, Mumps and Rubella) vaccination among children.

MDG 5. Improve Maternal Health

In improving maternal health, Armenia has achieved four of the six indicators. There was good progress in ensuring that 100% of births are attended by skilled health personnel and in improving antenatal healthcare coverage.

Between 2004-2014, there was a reduction in maternal mortality from 26.7 to 18.6 per 100,000 live births, but this rate is still about four times higher than the EU average.

Family planning still needs significant improvement. The abortion rate among women has decreased, but still remains high and negatively affects fertility.

MDG 6. Combat HIV/AIDS, Malaria and other Diseases

In combating HIV/AIDS, malaria and other diseases, Armenia has achieved three out of six indicators, and progressed in the rest of the indicators. The performance was effective in ensuring that since 2007 all registered people with advanced HIV infection, who are in need, have access to antiretroviral medicines, and all tuberculosis cases were detected and cured under directly observed treatment, short-courses. Armenia is a WHO-certified malaria free area, and there have been no new local malaria cases since 2006.

However, the target was not achieved in relation to tuberculosis cases. Also, an alarming sign is the steadily increasing number of people with HIV, and the fact that there is a low level of knowledge among the population of 15-24 year-olds about HIV/AIDS. In 2014, only 22.4% of this population possessed such knowledge.
MDG 7. Ensure Environmental Sustainability

In ensuring environmental sustainability, Armenia has achieved seven of the 16 indicators, and well advanced another two. Performance was good in: (i) increasing the stock of specially protected areas (up to 13% of the total area); (ii) increasing the level of Lake Sevan by over four meters and improving the cleanliness of its water; (iii) building waste water treatment plants – six plants were built between 2012-2015; (iv) improving the water supply to urban and rural population, with 17 hours-a-day centralized water supply in non-Yerevan urban and rural households in 2014 (from 7.4 hours in 2005).

However, in the eight years between 2005 and 2013, Armenia’s forest cover dropped from 11.2% to 9.7% of the country’s land area. This is a disturbing trend that requires rapid and determined action to reverse. While the proportion of the population using solid fuels (wood and dung) in 2013 stood at about half of what it was in 1996, this is still far from the target of less than 5% set by the national MDG process. Moreover, the number has been increasing since 2007. The targets have also not been achieved in reducing the ratio of urban slum households and in improving access to sanitation. In the last decade, there has been only a slight increase in the access to improved sanitation - 32% of the population still does not have access to improved sanitation.

MDG 8. Develop a Global Partnership for Development

In developing a global partnership, Armenia has achieved two indicators out of 12, and greatly improved in another two indicators. Armenia has met its targets in ensuring access to information and communication technologies in terms of the use of computers, mobile phone subscription and internet use.

However, Armenia has not been able to reach its eight indicators in relation to progress in freedom of press, government effectiveness and accountability, quality of regulation and rule of law, control of corruption and corruption perception. Progress in this sphere has been slow across these indicators, despite the institutional and legal reforms that the Government has undertaken in the last decade towards ensuring such a level of governance, political rights and responsibility and protection of human rights that would contribute to the sustainable development of the country.
From Millennium Development Goals to Sustainable Development Goals

2015 is the closing year of the Millennium Development agenda. With the purpose of furthering the MDGs and ensuring the continuity and sustainability of global efforts towards development, member countries of the United Nations adopted a Declaration setting a new agenda – the 2030 Agenda for Sustainable Development – on 25-27 September 2015, at the UN Headquarters in New York. The Declaration sets out 17 Sustainable Development Goals (SDGs), to replace and continue the eight MDGs.

In 2013, in the context of shaping the Post-2015 Development Agenda, the UN Armenia Country Team in partnership with the Government of Armenia, formed a Post-2015 Task Force, co-chaired by the First Deputy Minister of Territorial Administration, and the UNFPA Assistant Representative, with an aim to identify priorities for the next global sustainable development agenda. The participatory process used for prioritization, which in practice comprised of a series of town hall meetings, was essential for reflecting the perspective of all stakeholders and reaching consensus in the society about the SDGs and the mechanisms of their implementation. In addition, the National Council on Sustainable Development, in cooperation with international and national organizations, produced the Rio+20 National Assessment Report (2012) and the Post Rio+20 Strategy Plan (2015) that offered concept notes and action plans on key directions for sustainable development. Many of the challenges identified through this participatory process are in line with the Government’s Prospective Development Strategy for 2014-2025.

This report provides preliminary suggestions about SDG prioritization, based on the results of stakeholder discussions, the analysis of progress towards MDG implementation, the priorities defined in strategy documents of the Government, as well as the social and economic realities of Armenia.

In order to develop the suggestions, this report uses the following approach: (i) parallel to addressing the pressing social, environmental and other issues, it is critical to fight the root causes of those issues; (ii) in order to enhance the country’s ability and further its goals, it is critical to identify the key binding constraints and address them. Key binding constraints for Armenia are the level of funding available for economic and social programs; the effectiveness and capacity of the Government; the capability of the human capital, and knowledge and skills of the population necessary for developing and operating economic and social concepts and initiatives. A strong economy is essential for ensuring funds for economic and social programs. The key challenge for the Government and the society at large is to build a strong resilient economy, while continuing policy and institutional reforms essential for recovery and long-term development.

The suggested priority areas include:

1. Growth economy
2. Developing human capital
3. Improved governance (institutional modernization of the government system)
4. Gender equality
5. Health
6. Sustainable development (improved environmental protection).
### MDG 1. ERADICATE EXTREME POVERTY AND HUNGER

<table>
<thead>
<tr>
<th>Target 1. By 2015, reduce the poverty level to lower than 1990</th>
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<tbody>
<tr>
<td>Target 2. Halve, between 1990 and 2015, the proportion of people who suffer from hunger</td>
</tr>
<tr>
<td>Target 2.a. Achieve full and productive employment and decent work for all, including women and young people</td>
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</table>

### MDG 2. ACHIEVE UNIVERSAL BASIC EDUCATION

| Target 3. Ensure that, by 2015, every child will be able to complete a full course of high quality secondary schooling |

### MDG 3. PROMOTE GENDER EQUALITY AND EMPOWER WOMEN

| Target 4. Increase, by 2015, women’s participation in political decision making |

### MDG 4. REDUCE CHILD MORTALITY

| Target 5. Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate |

### MDG 5. IMPROVE MATERNAL HEALTH

| Target 6.a. Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio |
| Target 6.b. Achieve, by 2015, universal access to reproductive health |

### MDG 6. COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES

| Target 7.a. Have halted, by 2015, and began to reverse the spread of HIV/AIDS |
| Target 7.b. Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it |
| Target 8. Have halted, by 2015, and begun to reverse the incidence of malaria and other major diseases |

### MDG 7. ENSURE ENVIRONMENTAL SUSTAINABILITY

| Target 9. Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources |
| Target 10. Increase access to safe drinking water in rural areas |
| Target 11. Improve housing conditions by 2015 |

### MDG 8. DEVELOP A GLOBAL PARTNERSHIP

| Target 12. Ensure a level of governance, political rights and responsibility and protection of human rights that would contribute to the sustainable development of Armenia |
| Target 13. In cooperation with the private sector, make available, by 2015, the benefits of new technologies, especially information and communications |

### LEGEND

- **Target achieved**
- **Well advanced, i.e. target not achieved, but well advanced, and feasible to achieve in 1-2 years**
- **Target not achieved**
- **? data not available or not consistent, or the indicator not defined**
2. **Highlights of Economic Context**

During the last decade three major external factors/events have had a strong effect on economic and social life of Armenia:

- the global financial crisis in 2008;
- economic sanctions on Russia since 2014 (which is the major trade partner and market for migrant workers for Armenia), and consequent economic downturn in Russia;
- Armenia’s accession to the Eurasian Economic Union (EEU), which is expected to open new prospects for trade and economic development.

The economic and social life of Armenia was impacted significantly by the global financial crisis in 2008. After the crisis, seven years of double digit growth rates of the pre-crisis period were replaced by a 6.9% growth rate in 2008 and a severe 14.1% economic contraction in 2009. The country was struck by three simultaneous shocks - loss of export demand, a collapse of commodity export prices, and a sharp decline in remittances and private capital flows.

Exports and economic growth began to contract during the final quarter of 2008. GDP contracted by 14% in 2009 with a significant downturn in the economy. As a result, in 2009 budgetary revenues fell and poverty and social vulnerability increased sharply. Personal remittances from migrant workers (mostly from Russia), which play an important role in Armenia’s economy and are a major income source and a driver of consumption in Armenia, declined by about 25% in 2009. The effect of the financial crisis on rural and urban poverty has been dramatic.

Following a moderate 3.3% and 3.5% growth in 2013 and 2014 respectively, the expectations are that in 2015 it will further increase, but at a moderate rate, keeping in mind the recent six year regression in the construction sector (though the first six month statistics for 2015 show a tendency towards stabilization in this sector) in the country, a decline in commodity prices and the slowdown in Russia. The Government’s projections for the economic growth rate for 2015 (used for the State Budget), is 4.1%,\(^2\) though international organizations give more modest projections. The World Bank’s projection for Armenia’s economic performance in 2015 is 0.8% growth,\(^3\) and the International Monetary Fund’s projection is zero or modest growth,\(^4\) while the Economic Intelligence Unit forecasts 1.5% growth.\(^5\)

In 2013, the trade turnover between Armenia and its leading trade and economic partner Russia totaled 1 billion 445.3 million USD, which was 8.1% increase. Armenian export to Russia increased by 20%. At the same time, in 2014 and 2015 Armenian-Russian trade and economic relations were developing under conditions of the imposed sanctions on Russia and the devaluation of the Russian ruble. Meanwhile, the EEU, that started functioning in January 2015 (in accordance with the EEU Treaty), intends to lift barriers that will see mutually beneficial economic cooperation between the member states, including the Armenian-Russian trade and economic relations.

Thus, from January to July 2015, the volume of foreign trade contracted by 19.9%, though the trade balance improved due to a drop in imports by 26.7%, and exports remained unchanged compared to 2014, with weaker demand from Russia and the EU, a major underlying factor. Exports to the EU declined by 3.2% and imports fell by 35.4%.\(^6\) A slowing economy and declining remittances from Russia restricted import demand. Between January and July 2015, trade with Russia decreased by about 15% due to the reduction of exports by more than 35% and imports by 12.6%. Net remittances declined by 35.7% during first half of 2015 (year-on-year), driven by a decline of remittances from Russia.

In this economic context, the Government has implemented a broad range of comprehensive social and environmental programs towards improving the welfare of the society and betterment of the environment. The various aspects of and trends in Armenia’s social and environmental life are discussed in Section 3. They included, but were not limited to:

- development of the social security net;
- the fight against poverty;
- healthcare (including, child and maternal healthcare; and fight against HIV/AIDS, tuberculosis and other diseases);

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\(^5\) http://country.eiu.com/armenia

education (including introduction of a three-tier 12-year school system; and participation in the Bologna process);
environmental protection (including protection of Lake Sevan and enlargement of the protected areas);
improvement of living conditions and access to utilities and such services as water supply, sanitation, and gas supply;
promotion of gender equality;
protection of human freedoms and rights.

The economic downturns in 2008 and 2014 greatly affected the social life of the country, as well as the volume of Government funds available for social programs. For instance, the poverty level, which had been reducing steadily before the crisis, worsened after 2008 and increased from 28% to 32% by 2013. Similarly, the unemployment rate, which was steadily decreasing, has been going up and down since 2008. However, as of 2014 it was still higher than in 2008 (17.6% compared to 16.4%).

The key challenge for the Government in the medium term is to strengthen the economy and its resilience to external shocks, and create new opportunities for development. To build a strong economy it is critical that economic policies and programs are accompanied with reforms aimed at ensuring fair competition in the market and incentives for business generation and development; protection of social and economic rights; enhancing the human capital, strengthening of civil society; improvement of quality of regulation and rule of law; and reduction of corruption.

3. Armenia MDG Progress in Detail

This section provides a more detailed discussion of the progress of implementation of the MDGs in Armenia. It looks at and evaluates the performance in relation to the national targets, with their respective indicators. It presents the MDGs, the targets under each MDG, and the corresponding indicators at both the global and national levels. Together with a summary Scorecard on the fulfillment of each indicator, this section includes a brief discussion about the key underlying factors that affected MDG implementation, as well as the challenges that will need to be addressed on the way forward.
ERADICATE EXTREME POVERTY AND HUNGER
**GOAL 1. Eradicate Extreme Poverty and Hunger**

<table>
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<tr>
<th>GLOBAL TARGETS</th>
<th>GLOBAL INDICATORS</th>
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| **Target 1.A.** Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day | 1.1 Proportion of population below 1 USD (PPP) per day  
1.2 Poverty gap ratio  
1.3 Share of poorest quintile in national consumption |
| **Target 1.B.** Achieve full and productive employment and decent work for all, including women and young people | 1.4 Growth rate of GDP per person employed  
1.5 Employment-to-population ratio  
1.6 Proportion of employed people living below 1 USD (PPP) per day  
1.7 Proportion of own-account and contributing family workers in total employment |
| **Target 1.C.** Halve, between 1990 and 2015, the proportion of people who suffer from hunger | 1.8 Prevalence of underweight children under-five years of age  
1.9 Proportion of population below minimum level of dietary energy consumption |

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<tr>
<th>NATIONAL TARGETS</th>
<th>NATIONAL INDICATORS</th>
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</table>
| **Target 1.** By 2015, reduce the poverty level to lower than in 1990 | 1. Proportion of population below the 4.3 USD (PPP adjusted) per day, %  
2. GDP per capita compared to EU average per capita, %  
3. Family allowance budget expenditure to poverty gap ratio, %  
4. Income in the poorest quintile to the income of the richest quintile  
5. Ratio of poverty level outside capital to poverty level in capital |
| **Target 2.** Halve, between 1990 and 2015, the proportion of people who suffer from hunger | 1. Prevalence of underweight children under-five years of age, %  
2. Proportion of population below minimum level of dietary energy consumption, % |
| **Target 2.A.** Achieve full and productive employment and decent work for all, including women and young people | 1. GDP per person employed, in constant 2005 PPP 1,000 USD  
2. Employment to population ratio for persons aged 15 years and over (total, female and male), %  
3. Proportion of employed population living in poverty (national poverty line), %  
4. Proportion of informally employed in total non-agricultural employment, % |
# MDG 1: Scorecard*

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<tbody>
<tr>
<td>1. Proportion of population below 4.30 USD (PPP adjusted) per day, %</td>
<td>80.0</td>
<td>62.6</td>
<td>67.2</td>
<td>76.6</td>
<td>63.3</td>
<td>63.6</td>
<td>&lt;20</td>
<td>Not achieved</td>
</tr>
<tr>
<td>2. GDP per capita compared to EU average per capita, %</td>
<td>...</td>
<td>14.7</td>
<td>21.0</td>
<td>16.9</td>
<td>19.9</td>
<td>21.6</td>
<td>&gt;30</td>
<td>Not achieved</td>
</tr>
<tr>
<td>3. Family allowance budget expenditure to poverty gap ratio, %</td>
<td>33.0</td>
<td>24.5</td>
<td>41.2</td>
<td>29.3</td>
<td>49.3</td>
<td>41.2</td>
<td>&gt;50</td>
<td>Well advanced</td>
</tr>
<tr>
<td>4. Income in the poorest quintile to the income of the richest quintile</td>
<td>0.03</td>
<td>0.41</td>
<td>0.48</td>
<td>0.36</td>
<td>0.37</td>
<td>0.37</td>
<td>&gt;0.2</td>
<td>Achieved</td>
</tr>
<tr>
<td>5. Ratio of urban poverty level outside capital to poverty level in capital</td>
<td>1.1</td>
<td>1.6</td>
<td>1.8</td>
<td>1.7</td>
<td>1.6</td>
<td>1.5</td>
<td>&lt;1.2</td>
<td>Not achieved</td>
</tr>
</tbody>
</table>

**TARGET 1: BY 2015, REDUCE THE POVERTY LEVEL TO LOWER THAN IN 1990**

**TARGET 2: HALVE, BETWEEN 1990 AND 2015, THE PROPORTION OF PEOPLE WHO SUFFER FROM HUNGER**

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</thead>
<tbody>
<tr>
<td>1. Prevalence of underweight children under-five years of age, %</td>
<td>2.6 (2000)</td>
<td>4</td>
<td>4.7</td>
<td></td>
<td></td>
<td>&lt;1.4</td>
<td>Not achieved</td>
</tr>
<tr>
<td>2. Proportion of population below minimum level of dietary energy consumption, %</td>
<td>21</td>
<td>4.6</td>
<td>1.6</td>
<td>3.0</td>
<td>2.8</td>
<td>2.7</td>
<td>&lt;2</td>
</tr>
</tbody>
</table>

**TARGET 2.A: ACHIEVE FULL AND PRODUCTIVE EMPLOYMENT AND DECENT WORK FOR ALL, INCLUDING WOMEN AND YOUNG PEOPLE**

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</thead>
<tbody>
<tr>
<td>1. GDP per person employed, in constant 2005 PPP 1,000 USD</td>
<td>5.21</td>
<td>11.4</td>
<td>16.4</td>
<td>16.7</td>
<td>19.6</td>
<td>20.9</td>
<td>&gt;31</td>
</tr>
<tr>
<td>2. Employment to population ratio for persons aged 15 years and over, %</td>
<td>51.5</td>
<td>44.2</td>
<td>42</td>
<td>49.6</td>
<td>51.9</td>
<td>53.2</td>
<td>&gt;50</td>
</tr>
<tr>
<td>2.a. Employment to population ratio, female, %</td>
<td>45</td>
<td>39.5</td>
<td>39.2</td>
<td>41.1</td>
<td>45.2</td>
<td>45.8</td>
<td>&gt;45</td>
</tr>
<tr>
<td>2.b. Employment to population ratio, male, %</td>
<td>59.4</td>
<td>46.1</td>
<td>45.6</td>
<td>59.9</td>
<td>60.2</td>
<td>62.3</td>
<td>&gt;56</td>
</tr>
<tr>
<td>2.c. Youth (age 15-24 years) unemployment rate, %</td>
<td>65.6 (2001)</td>
<td>54.6</td>
<td>53.4</td>
<td>38.9</td>
<td>35.4</td>
<td>36.1</td>
<td>&lt;30</td>
</tr>
<tr>
<td>3. Proportion of employed population living in poverty (national poverty line), %</td>
<td>48.6</td>
<td>30.1</td>
<td>22.2</td>
<td>29.6</td>
<td>26.1</td>
<td>25.6</td>
<td>&lt;5</td>
</tr>
<tr>
<td>4. Proportion of informally employed in total non-agricultural employment, %</td>
<td>26.7 (2002)</td>
<td>22.9</td>
<td>22.6</td>
<td>20.7</td>
<td>19.3</td>
<td>19.6</td>
<td>&lt;16</td>
</tr>
</tbody>
</table>

*Figures on poverty pre 2008 are given based on the World Bank 2004 methodology, and figures for years starting from 2008 – World Bank new 2009 methodology (including 2008).**

Sources are indicated below, in the discussion of the indicators.
Context

Overall, Armenia has made significant progress towards poverty reduction over the last two decades. Economic development was the main driving force behind the poverty reduction process. More than a decade of uninterrupted economic growth until 2008 supported job creation and income generation, which in turn helped to reduce poverty. Social protection and social assistance mechanisms, including pensions and family allowances had a significant impact on poverty reduction, especially in relation to reducing the number of undernourished or extremely poor people (people suffering from inadequate dietary energy consumption). However, Armenia has been less effective in fighting general poverty. In 2013, 2.7% of the population was undernourished, and about one third of the population in the country was poor.

Figure 1: Source: NSS Household Survey (1999); and NSS MDG database

Two external factors have put Armenia’s future economic recovery at risk, and thus have had a significant negative impact on the progress of poverty reduction. Specifically, the global financial crisis in 2008, and the economic sanctions against Russia and the consequent economic downturn in Russia – a major economic and trade partner of Armenia. As shown in Figure 1 above, the share of the poor and extreme poor increased during 2008-2013.

Increased inflow of migrant refugees due to the deteriorating geopolitical situation in the region is another important factor that will have an impact on the social situation in Armenia. The influx of 17,000 persons displaced due to the conflict in Syria and smaller numbers from Ukraine seeking protection in Armenia, many of whom arrived in very destitute conditions, constitute an additional challenge for poverty reduction efforts.

While discussing the performance under MDG 1 – “Eradicate Extreme Poverty and Hunger”, it is important to make a distinction between the nationally and globally applied definitions of the poor. The Armenian definition differentiates between the poor and extremely poor, and the threshold used for these terms differ from those applied globally for the MDGs. There are two main levels of poverty defined:

- **Poor**, people living on less than 3.2 USD per day, i.e. those who are below the national poverty line. The national general poverty line is identified through the LCS of the NSS as the minimum subsistence level in the country. It includes the value of food and non-food products necessary for the satisfaction of basic needs. The general poverty line was defined at 39,193 AMD per adult equivalent per month for 2013. The average annual exchange rate for 2013 was 409.6 AMD for 1 USD. This implies 3.2 USD per day (39,193/409.6)/30.3 days).

- **Extremely poor**, people living on less than 1.9 USD. These are, in effect, undernourished people who are below the national minimum dietary energy consumption level. The national minimum dietary energy consumption level in monetary terms was 22,993 AMD or 1.9 USD in 2013. It is important to note that the national minimum dietary energy consumption level, in monetary terms, is greater than 1.25 USD per day – the global threshold accepted under the MDG framework. Respectively, the reduction of the proportion of people who suffer from hunger would differ depending on which threshold is used for evaluation.

When compared with the level of undernourished in 1999, the reduction was more than seven times.7

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7 See a note on comparability of data in page 6. The poverty rates for 1999 and 2004 were determined with a 2004 methodology, while 2008, 2010, and 2013 with a 2009 methodology. The comparability of data suffers from these methodological changes, though NSS provides adjustments to ensure consistency and comparability of data. However, this report presents these figures for illustration of tendencies for a possible broad time period (for MDGs).
Target 1. By 2015, reduce the poverty level to lower than in 1990

People living below the national poverty line: The proportion of the population living below the national poverty line, i.e. people living on less than 3.2 USD per day, declined from 56.1% to 32% in 1999-2013. Nevertheless, about one third of the population in Armenia (or 967,000 residents) were still poor in 2013. Moreover, the level of extreme poverty in 2013 was 1.7 times higher than in 2008.

People living with an income of less than 4.3 USD a day: A similar swing was seen also in relation to the development of the working middle class who, according to the MDG definition, are those who live on more than 4.3 USD a day (or 5 USD since 2008). The recovery of the economy in 2010-2013 helped to increase the share of people with income more than 4.3 USD per day to up to 36%.

Still, Armenia’s performance in this indicator lags behind the global performance. Globally, the number of people in the working middle class—living on more than 4.3 USD a day—has almost tripled between 1991 and 2015.

Poverty in the capital and outside: Most of the extremely poor (undernourished) people live in small urban settlements outside Yerevan. As the ILCS indicates, between 2008-2013 the poverty rate in urban communities increased more than in rural communities (4.6 percentage points against 4.2 percentage points), while the poverty in Yerevan increased more than in other urban areas (5.4 percentage points versus 3.5 percentage points).

Poverty gap and the poorest quintile: The poverty gap ratio is still very high, although it has been decreasing during 2010-2013. The resources allocated to social assistance are insufficient for covering the poverty gap. It is estimated that additional resources required to cover the gap would equal 2% of the GDP in 2013, assuming that the resources would be targeted and allocated perfectly. International experience suggests that effective targeting is extremely difficult, implying that significantly more resources are needed to cover the poverty gap.

An important characteristic of the situation in Armenia is the fact that income-based extreme poverty is four times higher than consumption-based extreme poverty (officially reported). There are several reasons for this, which include:

- higher inequality in income, compared to consumption distribution;
- underreporting of incomes, and or lack of accurate data about income;
- high ratio of informal jobs and income in the economy;
- high share of remittances as a source of income (in 2014, remittances accounted for about 20% of GDP).

The share of the poorest quintile in national consumption also decreased significantly between 2008 and 2013, proving the unequal distribution of economic growth among the population groups.
Figure 4: Source: NSS

Target 2. Halve, between 1990 and 2015, the proportion of people who suffer from hunger

**Undernourished people:** As noted above, the national threshold for undernourishment or extreme poverty (1.9 USD), in monetary terms, is greater than – the global threshold accepted under the MDG framework of 1.25 USD per day.

Overall, there has been a substantial reduction in the number of undernourished people.

The share of the population with an income of less than 2.5 USD has declined by 28%, since 2004. In 2013, the proportion of people with income less than 2.5 USD was 12.6%. The 2.5 USD threshold has been used in the MDG framework as the global threshold for poverty.

Figure 5: Source: NSS MDG database

In terms of people with an income of less than 1.25 USD, in Armenia, only 0.4% of total population was under this threshold in 2004. In 2013, this ratio was 0.3%, i.e. 25% reduction from 2004.

Children in the 0 to 5 age group are the most deprived group in terms of material poverty. In addition, households with three or more children are at a higher risk of being poor in Armenia. In 2013, compared to

8 NSS MDG Database.
2012, child poverty increased despite the reduction in general poverty level.9

In this regard, an alarming trend, which requires urgent attention and action, is the steadily increasing proportion of underweight children under-five years of age since 2000; according to periodic DHS surveys. Moreover, according to the DHS, the nutritional status of children in Armenia deteriorated between 2005 and 2010. The main nutritional problem is stunting and chronic malnutrition. In 2005, 13% of children in Armenia were suffering from stunting and in 2010 this indicator increased to 18%. Some potential reasons behind the deterioration in the nutrition situation include poor timing in the introduction of complementary foods and a variety of foods; inadequate knowledge of parents on nutrition issues; and the poor quality of counseling provided by healthcare providers. In spite of existing protocols, not all primary healthcare facilities properly check children’s weight and height during regular visits and the data is not recorded on growth charts.10

Target 2.A. Achieve full and productive employment and decent work for all, including women and young people

Employment opportunities: Unemployment has decreased considerably since 2001, from more than 38% to about 18% in 2014. However, Armenia’s ability to provide productive employment and decent work for all is still weak. During 2008-2014, the unemployment rate, in effect, did not improve and fluctuated between 16.5-19%.

Armenia achieved its MDG target of providing employment to more than half of the working-age population. However, the situation in relation to the employment of working-age people, especially the youth, is worrying. In 2013, nearly 40% of all labor resources of the country were economically inactive (of which 54% are workable people, 19% students, and 25% pensioners). Among the youth, 40.4% of 25-29 year olds, and 37.2% of 15-24 year old men and women are neither in school/university or employed.11

Armenia has not achieved its target of ensuring jobs for 70% of young people. The unemployment rate of young people is more than two times higher than the overall unemployment rate (36% vs. 17.6%).

Informal employment: Armenia has not achieved its target in relation to the level of informal employment, particularly, in the non-agricultural sectors of the economy. During the last decade, there has been only a small reduction in the level of informal employment in non-agricultural sectors12 (14% reduction from 2005 to 2013).

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9 The child poverty rate increased by 1.1 percentage points in 2013 compared to 2012, and the extreme child poverty rate remained unchanged - 3.3%, while the overall poverty rate in the country decreased by 0.4 and extreme poverty by 0.1 percentage points.
10 UNICEF Annual Report 2012 for Armenia, CEE/CIS.
12 In the agricultural sector of Armenia, the prevailing share of employment does not comply with the definition and main characteristics of formal employment.

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Figure 7: Source: NSS, Social Snapshot
The high ratio of informal employment implies: (a) less certainty and security for employees; and (b) lost tax revenues for the state budget. It skews and distorts the real picture concerning the income of the population, and thus, the picture of poverty in the country.

**Employment and poverty:** Armenia did not achieve its target to reduce the ratio of the employed poor to 5%. In Armenia, an alarming sign about the labor market and labor productivity is the fact that more than at the quarter of employed people are still poor, despite the fact that during the last decade, since 2004, real wages have increased by more than five times (see Figure 7). The proportion of middle class workers, living with more than 4 USD per day, is only one third of the population.

**Labor productivity:** Labor productivity, in terms of GDP per person employed, almost doubled during the last decade (2004-2014), however it is still notably far from the target of 31,000 USD. Armenia will not be able to achieve this target.

![GDP per person employed, USD](image)

**Figure 8: Source: NSS MDG database**

**Challenges and the way forward**

**External shocks challenge:** In Armenia, the fight against poverty suffered greatly from external economic shocks. The key midterm challenge for the Government is to mitigate the economic and social impacts of external shocks - the global financial crisis, and the economic downturn in Russia - while continuing policy and institutional reforms essential for recovery and long-term development. To this end, increasing the economy’s resilience to external shocks and creating new opportunities for development are important priorities.

**Pro-poor economic growth challenge:** The economic growth in the last decade between 2009 and 2013 was not pro-poor:

- more than one third of the country’s population is still poor;
- empirical data from the ILCS suggests that despite the increase in the total consumption of population by 0.9%, the consumption by the poor has decreased by 0.5%;
- the employment rate is lower among the poor;
- the share of the poorest quintile in national consumption also declined significantly between 2008 and 2013, proving the unequal distribution of economic growth among the population groups;
- Due to economic difficulties, the enrolment rate of the poor in education is lower.

Social programs have significantly supported the fight against poverty, especially extreme poverty. However, they were not sufficient for achieving sustainable poverty reduction. The challenge for the future is to ensure pro-poor economic growth.
The challenge of children suffering from malnutrition and stunting: A worrying and alarming sign is the increasing proportion, since 2000, of children under-five years of age suffering from stunting and malnutrition. Children under-five years of age are among the most deprived and vulnerable group of society, and their issues should be prioritized in the fight for poverty reduction. In addition, it is important that Armenia prioritizes the right to food and ensures access to nutritious foods for all.

Job creation and productivity challenge: Job creation has been and will be a challenge for Armenia. Nearly 40% of all labor resources of the country are economically inactive, and more than one third of young men and women are neither in school/university or employed. Moreover, Armenia will also have to tackle the challenge of increasing economic productivity, to ensure that employed people are not poor and earn a decent income for living. This challenge can be effectively addressed only through close public-private dialogue and cooperation.

Funding challenge: Ensuring sufficient funding for the implementation of all social programs, including the areas of poverty reduction, education, healthcare, gender equality, is always a critical factor for effective implementation, as well as for sustaining the results which have already been achieved. It is and will always be a challenge for any country.

As the process of MDG implementation has seen, downturns in the economic performance lead to a reduction of public revenues and thus, the availability of public funds for the implementation of social programs. This, in turn, affects the performance not only in the poverty indicator, but also in virtually all the social indicators. The fundamental and cross-cutting challenge of public funding can be addressed through creating more opportunities for economic growth and development.

This challenge equally applies to all the other goals discussed below.
ACHIEVE UNIVERSAL BASIC EDUCATION
## GOAL 2. Achieve Universal Basic Education

*The nationalized goal - “Achieve Universal High Quality Secondary Education”*

<table>
<thead>
<tr>
<th>GLOBAL TARGETS</th>
<th>GLOBAL INDICATORS</th>
</tr>
</thead>
</table>
| **Target 2.A.** Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling | 2.1 Net enrolment ratio in primary education  
2.2 Proportion of pupils starting grade 1 who reach last grade of primary  
2.3 Literacy rate of 15-24 year-olds, women and men |

<table>
<thead>
<tr>
<th>NATIONAL TARGETS</th>
<th>NATIONAL INDICATORS</th>
</tr>
</thead>
</table>
| **Target 3.** Ensure that, by 2015, every child will be able to complete a full course of high quality secondary schooling | 1. Gross enrolment ratio in basic school, %  
2. Gross enrolment ratio in upper secondary school, %  
3. Annual state budget expenditures on education to GDP, %  
4. Ratio of pupils and students possessing knowledge corresponding to the criteria set by the national and international education quality assessment system, %  
5. Ratio of gross enrolment ratio of poor population to the gross enrolment ratio of non-poor population in the professional education programs |

### MDG 2: Scorecard

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<tbody>
<tr>
<td><strong>ENSURE THAT, BY 2015, EVERY CHILD WILL BE ABLE TO COMPLETE A FULL COURSE OF HIGH QUALITY SECONDARY SCHOOLING</strong></td>
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<td></td>
</tr>
<tr>
<td>1. Gross enrolment ratio in basic school, %</td>
<td>92.8</td>
<td>93.6</td>
<td>93.5</td>
<td>91.6</td>
<td>94.8</td>
<td>92.6</td>
<td>92.0</td>
<td>&gt;99</td>
</tr>
<tr>
<td>2. Gross enrolment ratio in upper secondary school, %</td>
<td>80.0</td>
<td>80.0</td>
<td>81.9</td>
<td>84.4</td>
<td>74.1</td>
<td>74.0</td>
<td>72.4</td>
<td>&gt;95</td>
</tr>
<tr>
<td>3. Annual state budget expenditures on education to GDP, %</td>
<td>2.2 (2000)</td>
<td>2.7*</td>
<td>2.9</td>
<td>2.8</td>
<td>2.4**</td>
<td>2.3**</td>
<td>2.4**</td>
<td>&gt;4.5</td>
</tr>
<tr>
<td>4. Ratio of pupils and students possessing knowledge corresponding to the criteria set by the national and international education quality assessment system, %</td>
<td>...</td>
<td>...</td>
<td>...</td>
<td>...</td>
<td>...</td>
<td>...</td>
<td>...</td>
<td>No targets</td>
</tr>
<tr>
<td>5. Gross enrolment ratio of poor population to the gross enrolment ratio of non-poor population in professional education programs</td>
<td>0.26</td>
<td>0.57</td>
<td>0.51</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>&gt;0.3</td>
</tr>
</tbody>
</table>

*Source: NSS Social Situation in Armenia, and Social Snapshot and Poverty in Armenia*

*Education and science*

**GDP for 2012-2013 was revised according to the System of National Accounts 2008 international standard.**
Context

The international targets under MDG 2 – “Achieve universal primary education” – were not relevant for Armenia as the gross enrolment in primary school was almost 99% for both boys and girls. With this in mind, the nationalized MDG 2 defined targets to achieve universal basic education (grades 1 to 9), increase public spending for education, increase participation of poor in professional education and measure the quality of education.

Armenia has committed to reform the education system to bring it up to internationally-accepted standards. The Government of Armenia has undertaken a number of large-scale reforms towards the improvement of the quality of education and accessibility of education. Some key developments and reform efforts that shaped the current situation and contributed significantly to the improvement of the education system are briefly discussed below:

- joining the Bologna process;\(^\text{13}\) which provided wider preconditions for improving the quality of higher education and its recognition by European education sector. Armenia became a full member of the Bologna process in 2005;
- introduction of three-tier 12-years of secondary school system in 2011, instead of 10-year system. Basic education was defined as mandatory and free of charge. As of June 2017, all secondary education will be mandatory and free of charge (i.e. including high school);\(^\text{14}\)
- restructuring of the special education system and expansion of inclusive education (with support of UNICEF and other donors). The latter was introduced into mainstream schooling from 2005;\(^\text{15}\)
- to effectively meet the needs of society and the economy: (a) promotion of specialized vocational education and training system and its correspondence to European standards with the EU and UNDP support programs, (b) promotion of cooperation between universities and businesses;
- creation of student support funds to provide financial support to students in need;
- promotion of the wider use of ICT technologies for education and for enhancing management systems at secondary schools, vocational education centers and universities;
- institutional development necessary for the implementation of envisaged reforms, including the establishment and operation of such structures as: the National Assessment and Testing Center, the National Center for Vocational Education and Training Development, the Professional Education Quality Assurance Foundation, as well as National Information Center for Academic Recognition and Mobility, the Medical-Pedagogical-Psychological Assessment Center of Children, the Trainings National Foundation and other different education supporting centers to provide and protect the right of Armenian citizens to quality education;
- the World Bank financed the “Education Quality and Relevance” program, which provided significant support to the Government of Armenia with teachers’ trainings, improving their skills and attestation regulations, renovations of schools, furnishing and equipping high schools, as well as promoting the pre-school education, which is viewed as precondition for improving the quality of education at primary school and providing an equal start for all children. The program also supported the revision of curricula and the development and printing of new textbooks, which are provided free of charge to children from vulnerable families;\(^\text{16}\)
- a number of private initiatives supported by the Government in the education sphere, such as the establishment of the TUMO Center for Creative Technologies, AYB School, and the United World College Dilijan (UWC Dilijan).

Many of these reform efforts are still underway, and some of the expected key improvements and effects from the reforms are still to be achieved. The quality of education needs significant improvement. A number of (MDG related) indicators such as the increasing drop-out of students from mainstream schools and the low rate of enrolment of the poor in university education signify drawbacks in the system. In addition, the reduction of public funding allocated for the education during the last four years may put the success of reforms at risk.

\(^{\text{13}}\) The Bologna Process is a series of ministerial meetings, initiated in 1999, and agreements between European countries designed to ensure comparability, compatibility and coherence in the standards and quality of higher education qualifications and systems. Through the Bologna process, the European Higher Education Area (EHEA) was created in 2010. Armenia has become a full member of Bologna process in 2005. http://www.ehea.info/country-details.aspx?countryId=4.

\(^{\text{14}}\) Pre-2011, secondary education included primary school with grades 1 to 3; basic school for grades 1 to 8 and general secondary for 9-10 years of schooling. After the education reform of 2011, the school levels were defined as primary school with 4 years of education – 1 to 4 grades; basic school for grades 1 to 9 and high school for grades 10-12.

\(^{\text{15}}\) The main principles of the reform were stipulated in the Law on Education of Children with Special Educational Needs, 2005. In addition, according to the Law on Amendment of the Law on Mainstream Education, December 2014, special schools should be transformed to regional centers of pedagogical and psychological support to mainstream schools.

\(^{\text{16}}\) Children from families involved in means-tested Family Benefits Program.
Enrolment in basic and upper secondary school: Overall, the gross enrolment rate is high in Armenia with almost equal proportions for girls and boys. Almost the entire population of Armenia is literate: only 0.3% of the population did not receive any formal education. However, the high national targets in relation to gross enrolment in basic and high schools are not achieved yet, and if current tendencies remain, the targets of 99% and 95%, respectively, may not be achieved.

The proportion of students who completed primary school (i.e. pupils who reached grade five) continuously increased between 2000-2014. However, this tendency has reversed since 2005, and the 6% dropout rate from primary school in 2013 is alarming for Armenia.17

Basic education (grades 1-9) is mandatory in Armenia. After completing basic education, about 14%18 of youth aged 15-17 years did not continue their education.19 The progress in educational enrolment and attainment has been unstable and less effective in high school. The notable progress that had been achieved by 2010, (when there was an 84.4% enrolment ratio for upper secondary school, deteriorated with that figure dropping to 72.4% in 2013.

This is an alarming dropout rate, which in the medium- to long-run may weaken the level of education in the country, with consequent social and economic effects. Possible reasons for such an increased dropout rate from high school may include:

- difficulties related to the fact that after the transition to the new 12-year school system (from 2010-2011), high-schools are not mandatory, and in some instances there are difficulties related to accessibility of schools. As of 2017, 12-year general education will become mandatory and free of charge. This change may affect the enrolment rate in high schools, and may help to reduce the drop-out rate in general education;
- low motivation among the rural poor to continue education in high-school due to scarce job opportunities;
- calculation base may contain some bias because: (i) there is unreported emigration among this age group - the estimations are usually based on permanent population not actual, and/or (ii) some of the students dropout in order to enroll in professions/vocational school, instead of high school;
- children of poor families are less likely to continue their education and try to find jobs and earn money at an early age.

17 NSS MDG database.
18 The Ministry of Education’s estimates about the drop-out rate are lower - 5%. However this report used the official statistical figure - 14%. This discrepancy indicates that, among other things, there may be a need to revise the methodological approaches and procedures of compiling and processing of the data on enrollment in education.
19 According to the ILCS in 2013, only 1.5% reported that they did not want to study further, only 1.7% noted poor health as a reason for not continuing their education, and 1.7% reported that educational services were too expensive for them to continue studies.
An important drawback in education is the low enrolment rate among poor populations in schools. In 2013, the enrolment in basic education was 93% for children from non-poor households, compared to 89% for poor households (excluding the extremely poor), and 87% for extremely poor households. The dropout rate constituted 0.1% of the total students enrolled, with almost half of them stating poor living conditions of the family as a reason for dropping out.

**Gender equality in education:** Access to general education is universal for both boys and girls, with marginal inequality (figure 10).

At high school level, girls have a notably higher enrolment ratio. Reasons for this may be:

- boys start earning income for the family;
- low motivation among boys to continue education;
- the early out-migration of boys.

**Knowledge level of pupils and students:** The indicator on the ratio of pupils and students possessing knowledge corresponding to the criteria set by the national and international education quality assessment system is not tracked, as there is no target defined and information is not collected.

According to UNICEF data on the level of “repeaters”, the proportion of “repeaters” among pupils and students is low: in basic school it makes about 0.3% (among them 59% are girls) and 0.2% in primary school.

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20 In terms of gross enrolment in mainstream school, the enrollment constituted 86% in the poorest quintile and 91% in the highest quintile. Social Snapshot and Poverty in Armenia 2014.

21 “Repeaters” are pupils or students, who stay for a second year in the same class due to poor performance.


23 Social Snapshot and Poverty in Armenia 2014.
The effect of poverty on the enrolment in education has been notable. Enrolment in university education at the upper quintile was three times higher compared to that in poorest quintiles.\(^\text{24}\)

The gap between the gross enrolment ratios of the poor in universities to that of the non-poor population has decreased during the last decade. The enrolment ratio of the poor, as a percentage of the enrolment ratio of the non-poor, improved from 26\% to 51\% during 2005-2013. Thus, the relevant MDG target of 30\% has been achieved.

**Public spending on education:** In order to increase the accessibility and quality of education, the country’s pre-crisis development programs envisaged an increase in public spending on education. A steady increase in the share of public expenditures in education, reflective of growing GDP, was expected and a benchmark of 4.5\% of GDP by 2015 was targeted. However, the economic downturn in 2008 forced a reduction in public social spending and, particularly, in the education sector, which in turn hindered the proper implementation of reforms and achievement of targets. Despite the increase of public expenditure in nominal terms, its ratio to GDP decreased during 2008-2014.

Public spending on education continues to be one of the lowest in the EU and among OECD countries: it is 1.7 times lower compared to EECA and almost two times lower compared to EU countries in 2013.\(^\text{25}\)

Secondary education received the greatest share of public spending in education. Together with primary education, it consumed almost 65\% of state allocations to education. Professional education-vocational and training and university education together - consisted of only 18\%, with almost equal distribution of funds.

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\(^{24}\) Social Snapshot and Poverty in Armenia 2014.  
### Table 1: State Budget lines according to operational classification, 2013-2015

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</thead>
<tbody>
<tr>
<td>Total on education, billion AMD</td>
<td>103.1</td>
<td>115.8</td>
<td>125.5</td>
<td>100.0%</td>
<td>100.0%</td>
<td>100.0%</td>
</tr>
<tr>
<td>Pre-school</td>
<td>0.276</td>
<td>0.481</td>
<td>0.596</td>
<td>0.3%</td>
<td>0.4%</td>
<td>0.5%</td>
</tr>
<tr>
<td>Primary school</td>
<td>23.4</td>
<td>23.6</td>
<td>27.5</td>
<td>22.8%</td>
<td>20.4%</td>
<td>21.9%</td>
</tr>
<tr>
<td>General Secondary Education</td>
<td>48.2</td>
<td>53.0</td>
<td>54.2</td>
<td>46.8%</td>
<td>45.8%</td>
<td>43.2%</td>
</tr>
<tr>
<td>Basic school</td>
<td>30.6</td>
<td>30.5</td>
<td>36.3</td>
<td>29.7%</td>
<td>26.3%</td>
<td>28.9%</td>
</tr>
<tr>
<td>High school</td>
<td>17.6</td>
<td>22.5</td>
<td>17.9</td>
<td>17.1%</td>
<td>19.4%</td>
<td>14.2%</td>
</tr>
<tr>
<td>VET</td>
<td>6.2</td>
<td>7.5</td>
<td>11.4</td>
<td>6.0%</td>
<td>6.5%</td>
<td>9.1%</td>
</tr>
<tr>
<td>Higher Education</td>
<td>7.9</td>
<td>8.7</td>
<td>11.4</td>
<td>7.7%</td>
<td>7.5%</td>
<td>9.1%</td>
</tr>
<tr>
<td>Post-graduate Education</td>
<td>0.687</td>
<td>0.8</td>
<td>0.841</td>
<td>0.7%</td>
<td>0.7%</td>
<td>0.7%</td>
</tr>
<tr>
<td>Out curricula Education</td>
<td>2.8</td>
<td>3.6</td>
<td>4.7</td>
<td>2.7%</td>
<td>3.1%</td>
<td>3.8%</td>
</tr>
</tbody>
</table>

**Challenges and the way forward**

**Enrolment challenges**: increasing dropout rates from schools, (for both basic and high schools), especially amongst the poor, is alarming.

One of the main priorities in addressing this challenge should be the sufficient allocation of funding and effective mitigation of risks associated with the transition to a 12-year secondary education system, especially aimed at ensuring access to high school for all.

**Education quality challenge**: due to the low quality of education in secondary schools, the majority of students hire tutors, parallel to their studies, to obtain adequate knowledge to pass university admission examinations. This has a number of negative effects:

- it demotivates students to attend school classes and students prefer to spend time with private tutors, instead of going to school;
- increased inequality in education: poor families cannot afford to pay tutor fees, and poor children become disadvantaged and less competitive at higher levels of education, since they have access only to comparatively lower quality school classes.

**Inequality challenges**: the existing inequality in enrolment of the poor and non-poor populations in professional education, including vocational and higher education. The enrolment at the upper quintile was three times higher compared to that in the poorest quintiles. There is also an increase in dropout rates from schools, especially among the poor. In addition to general poverty reduction, targeted public schemes should be designed/implemented to encourage and promote enrolment in education at all levels by all people. For instance, a partial solution could be provided in the form of public subsidies, such as scholarships, student loans and grants for students from vulnerable groups.

Consideration could be given to making 12-year general education mandatory, in which case, special attention should be given to ensuring accessibility of schools in rural areas.

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27 The cross-cutting challenge of public funding is discussed under the challenges of MDG 1.
PROMOTE GENDER EQUALITY AND EMPOWER WOMEN
GOAL 3. Promote Gender Equality and Empower Women

<table>
<thead>
<tr>
<th>GLOBAL TARGETS</th>
<th>GLOBAL INDICATORS</th>
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</thead>
<tbody>
<tr>
<td><strong>Target 3.A.</strong> Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015</td>
<td>3.1 Ratios of girls to boys in primary, secondary and tertiary education 3.2 Share of women in wage employment in the nonagricultural sector 3.3 Proportion of seats held by women in national parliament</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NATIONAL TARGETS</th>
<th>NATIONAL INDICATORS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Target 4.</strong> Increase, by 2015, women’s participation in political decision making</td>
<td>1. Proportion of women- members of National Assembly, ministers, governors, deputy ministers, % 2. Proportion of women community heads, % 3. Ratio of unemployment rate of women to the unemployment rate of men</td>
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</tbody>
</table>

MDG 3: Scorecard

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<tbody>
<tr>
<td>TARGET 4. INCREASE, BY 2015, WOMEN’S PARTICIPATION IN POLITICAL DECISION MAKING</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Proportion of women members of National Assembly, ministers, governors, deputy ministers, %</td>
<td>Source: Women and Men in Armenia</td>
<td>6.7</td>
<td>9</td>
<td>11</td>
<td>11</td>
<td>10.7</td>
<td>&gt;25</td>
<td>Not achieved</td>
</tr>
<tr>
<td>2. Proportion of women community heads, %</td>
<td>Source: Women and Men in Armenia</td>
<td>2.6</td>
<td>2.1</td>
<td></td>
<td></td>
<td></td>
<td>&gt;10</td>
<td>Not achieved</td>
</tr>
<tr>
<td>3. Ratio of unemployment rate of women to the unemployment rate of men</td>
<td>Source: Labor Market in Armenia</td>
<td>1.09</td>
<td>1.44</td>
<td>0.77</td>
<td>1.25</td>
<td>1.10</td>
<td>1.26</td>
<td>1.23</td>
</tr>
</tbody>
</table>
Context

The Constitution of Armenia guarantees fundamental human rights. The Law on Equal Rights and Equal Opportunities of Men and Women adopted on May 20, 2013 defines the guarantees and regulates the equal rights and equal opportunities for women and men in the political, social, economic, cultural and other spheres of public life. Armenia ratified the UN Convention on Elimination of All Forms of Discrimination against Women (CEDAW) in 1993. Armenia ratified over 50 conventions and other international legal instruments that seek to eliminate discrimination (also against women) and attain higher standards for democratic governance, gender equality and human rights.


Armenia has made progress in increasing the participation of women in the education system, especially in tertiary-level education, and in decision-making positions. However, gender inequality remains a major challenge. Women are not able to utilize the opportunities guaranteed by law: job opportunities, especially at political and managerial positions, are still limited for women, increasing the risk of unemployment and poverty.

A number of studies confirm that gender inequality remains a challenge in Armenian society. Almost two thirds of respondents from the first nationwide Gender Barometer Survey agreed that there is inequality among men and women in Armenia society, and only 8% disagreed with the statement. The majority of respondents also think that women’s rights are violated in all areas: family, politics, workplace and others. There are more men among high-level managers, while women make up more of lower-ranking employees and specialists. Women perform more work that corresponds less to their professional qualifications and knowledge. Compared to men, women are also less satisfied with their salaries and opportunities for professional development. Gender-based violence also occurs because of women’s inferior role in society as well as their economic dependence.

A recent UNFPA study about the level of sex imbalance at birth highlighted that in Armenia the sex ratio at birth has risen since independence and is estimated at 114 male births per 100 female births in 2011. It is frequently cited that the main reasons for gender inequality in Armenia are rooted in culture and are entrenched in the common traditional understanding and acceptance of roles that women and men have in the family, at the workplace, and in a narrow community of relatives or wider public.

Target 4. Increase, by 2015, women’s participation in political decision-making

**Education:** There is gender equality in terms of education enrolment. Education is universally accessible to all regardless of gender. Moreover, the higher the academic level, the higher the ratio of girls to boys. The higher the level of education amongst girls, the higher the probability that they will find employment. However, even with good education women face difficulty in finding well-paid jobs, or holding decision-making positions in both private and public sectors.

**Employment:** The rate of economic activity for women is lower than compared to that of men: about 55% vs. 72%, and this proportion has remained almost unchanged over the last decade. The real unemployment rate has been especially high among youths; it is higher than the average national unemployment rate by around 2.5 times (35% vs. 16%). More young girls than boys are neither in school/university nor employed. In 2013, as over the last decade, almost 37% of individuals aged 15-24 and 40% of those aged 25-29 were neither in school/university nor employed. The same indicators for young girls were 40% and 59% respectively.

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28 The Article 14.1: “Everyone shall be equal before the law. Any discrimination based on any ground such as sex, race, color, ethnic or social origin, genetic features, language, religion or belief, political or any other opinion, membership of a national minority, property, birth, disability, age or other personal or social circumstances shall be prohibited.”

29 “Gender Barometer Survey” conducted by Center for Gender and Leadership Studies of Yerevan State University with US-AID funding in December 2014.


Women with higher education have higher rates of unemployment than men with similar levels of education (20% compared to 13% of men in 2013). At the same time, it is noteworthy that the proportion of women participating in state-funded active labor market programs is twice as high when compared to that of men.\footnote{With elimination of unemployment benefits in 2014 the Government initiated almost 12 types of employment and labor market competitiveness promoting programs with a GoA resolution of 2014.}

Female-headed households are more likely to live in poverty than male-headed ones. In 2013, according to ILCS data, 36.4% of female-headed households lived in poverty, an increase of six percentage points since 2008. If female-headed households have children, the probability of being poor is higher by 14 percentage points. At the same time, there is no difference in poverty incidence among men and women.

Despite the considerable reduction of wage inequality since 2000, in 2013, in general, women still earned about 34% less than men. Wage inequality was the highest in the mining and quarrying sector (– 50%)\footnote{It should be noted that this wage difference is mainly due to the peculiarity of the mining and quarrying sector, which has objectively/traditionally been specific to men rather than women.}, and lowest in the arts, entertainment, recreation, food and beverage, hospitality, and agriculture sectors. Wage differences in manufacturing, financial and insurance activities were 40%, while in public administration, defense and health sectors this figure stood at – 30%.

**Women in political and government positions:** During the last decade, there has been an increase in the proportion of high-paid managerial posts in public and private sectors held by women, but it still remains very low (Table 2). Armenia still lags behind in achieving its indicators under the gender equality goal. Performance under this particular indicator has been one of the weakest.
Table 2. Share of women in political and government positions (%)

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<tbody>
<tr>
<td>Among members of the National Assembly,</td>
<td>4</td>
<td>6.7</td>
<td>9</td>
<td>11</td>
<td>10.7</td>
</tr>
<tr>
<td>Ministers, deputy ministers</td>
<td></td>
<td></td>
<td>10</td>
<td>11</td>
<td>11</td>
</tr>
<tr>
<td>President staff</td>
<td>39.2</td>
<td>36.6</td>
<td>37.6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Government staff</td>
<td>39</td>
<td>46</td>
<td>46.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community leaders</td>
<td>1.8</td>
<td>2.7</td>
<td>2.6</td>
<td>2.2</td>
<td>2.1</td>
</tr>
<tr>
<td>Judges and Lawyers</td>
<td></td>
<td>22</td>
<td>35</td>
<td>38</td>
<td>34</td>
</tr>
</tbody>
</table>

Source: NSS, *Women and Men in Armenia, 2014*

The participation of women in political and government positions remains very low. Women’s participation has increased in the Yerevan Municipality, the government staff and the parliament; however participation has been very low among regional government and community heads. In effect, women in Armenia are deprived of engagement in decision-making positions in economic and business sectors as well as in the political life of the country. Though the number of women deputies in parliament tripled, it is still very low (11% of seats). Women have limited participation in community governance (only 2.1% of community heads are women) and practically no involvement in regional government and urban municipalities.

Although there are notable positive changes and progress towards the promotion of women’s rights, Armenia still lags behind in implementing these commitments to ensure gender equality in political and government positions.

**Challenges and the way forward**

**Practical equality challenges:** The Constitution and the laws of Armenia guarantee gender equality in all spheres of economic and social life. However, women do not yet utilize equal opportunities and are in a disadvantaged position in Armenia. They have limited opportunity for active participation in political, economic and business decision-making in the country.

In Armenia, gender inequality remains a major challenge for the future.

It has to be kept in mind that this situation has historic and deeply entrenched cultural roots; therefore changing it will require time and consistent effort and cooperation among the Government, political parties, civil society organizations, educational institutions, and the public at large.

Although, not reflected in the MDG indicators, other important gender equality challenges include:

- **High level of sex imbalance at birth:** “in Armenia, the sex ratio at birth has risen since independence and is estimated at 114 male births per 100 female births in 2011. The three preconditions of prenatal sex selection are met in Armenia: the patriarchal structures of Armenian society that tend to favor boys over girls, easy access to prenatal technology which, combined with abortion, allows couples to avoid unwanted female births and the pressure of low fertility levels on the reproductive strategies of the couples”.36

- **Gender-based violence** which occurs also because of women’s inferior role in society and their economic dependence. In Armenia, intimate partner violence accounts for the greatest share of physical and psychological violence and controlling behavior and, probably, of sexual violence.37

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35 The cross-cutting challenge of public funding is discussed under the challenges of MDG 1.
4

REDUCE CHILD MORTALITY
GOAL 4. Reduce Child Mortality

GLOBAL TARGETS | GLOBAL INDICATORS
---|---
**Target 4.A.** Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate
1. Under-five mortality rate
2. Infant mortality rate
3. Proportion of one year-old children immunized against measles

NATIONAL TARGETS | NATIONAL INDICATORS
---|---
**Target 5.** Reduce, by two-thirds between 1990 and 2015, the under-five mortality rate
1. Under-five mortality rate, per 1,000 live births
2. Infant mortality rate, per 1,000 live births
3. Proportion of two year-old children immunized against measles

**MDG 4: Scorecard**

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</tr>
</thead>
<tbody>
<tr>
<td>1. Under-five mortality rate, per 1,000 live births</td>
<td>23.8</td>
<td>19.3</td>
<td>13.0</td>
<td>12.3</td>
<td>12.1</td>
<td>11.9</td>
<td>13.4</td>
<td>13.7</td>
<td>12.1</td>
<td>11.0</td>
<td>10.3</td>
<td>&lt;10</td>
</tr>
<tr>
<td>2. Infant mortality rate, per 1,000 live births</td>
<td>18.5</td>
<td>15.4</td>
<td>11.6</td>
<td>10.9</td>
<td>10.8</td>
<td>10.4</td>
<td>11.4</td>
<td>11.6</td>
<td>10.8</td>
<td>9.7</td>
<td>8.8</td>
<td>&lt;8</td>
</tr>
<tr>
<td>3. Proportion of two year-old children immunized against measles (MMR1)</td>
<td>95.2</td>
<td>91.1</td>
<td>91.5</td>
<td>92.0</td>
<td>94.5</td>
<td>95</td>
<td>97</td>
<td>97</td>
<td>97</td>
<td>97</td>
<td>&gt;96</td>
<td>Achieved</td>
</tr>
</tbody>
</table>

**Context**

Armenia is ranked as a country with average child mortality rates that are, as per the WHO classification, notably lower that the CEE/CIS average, but notably higher than in the EU average.

According to official statistics, there has been a stable trend of reducing child mortality in the period of 1990-2014, in terms of reducing both the rates of under-five mortality and of infant mortality. The national programs implemented by the Government of Armenia in the last decade towards the improvement of child healthcare have played a critical role in reducing child mortality in the country. This relates particularly to such overarching programs and strategies as:

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38 Target 5 (corresponding to Target 4.A in the global list of MDG indicators) is relevant for Armenia and therefore was not altered during the nationalization process. The only change made relates to the indicator that deals with the immunization rate, which was modified to cover other major diseases in addition to immunization coverage against measles (specified in the global list of MDG indicators).
39 In 2013, the average infant mortality in the EU-28 was 3.7 deaths per 1,000 live births, and the CEE/CIS average was 17. In 2013, the average rate of under-five child mortality in developed regions (under UNICEF classification) was 6 per 1,000 live births, and in CEE/CIS was 20 per 1,000 live births. Sources: Eurostat: http://ec.europa.eu/eurostat/statistics-explained/index.php/Mortality_and_life_expectancy_statistics and UNICEF, Levels and Trends of Child Mortality, 2014: http://www.unicef.org/media/files/Levels_and_Trends_in_Child_Mortality_2014.pdf, last accessed 27 Sept. 2015.
40 Improved child health was prioritized and reflected in national level strategic documents such as the Poverty Reduction Strategy and Sustainable Development Strategy, as well as in sector specific strategies.
The National Strategy on Maternal and Child Health Protection in Armenia for 2003-2015 (to be followed 2016-2020);
The National Strategy for Child and Adolescent Health and Development for 2010-2015 (to be followed by 2016-2020) with its action plan; and
The National Immunoprophylaxis Program for 2010-2015 (to be followed by 2016-2020).

The implementation of these programs has been supported by a number of other reform efforts such as: promotion of breast-feeding exclusively; Integrated Management of Childhood Illness (IMCI); introduction of child health certificate program; improved equipment of child reanimation centers; and the improvement of capacities of healthcare personnel. The Ministry of Health has adopted WHO guidelines for childhood immunizations. The national guidelines call for all children to receive vaccines against 12 antigens using nine routine vaccine formulations. Targeted diseases are tuberculosis, diphtheria, pertussis, tetanus, hepatitis B, haemophilus influenza type B, polio, measles, mumps, rubella, rotavirus diarrhea, and pneumococcal diseases.

A wide spectrum of healthcare improvement reform measures, together with effective immunization, implemented under these national programs contributed significantly to ensuring: (a) improved access to primary and hospital care for children; (b) high rates of child immunization against preventable infectious diseases; (c) development of neonatal and pediatric intensive care services in the regions (including provision of necessary equipment and tools); and (d) continuous improvement of the professionals’ knowledge and experience based on relevant international best practices.

The Government intends to continue and multiply reform efforts towards improving maternal and child health care in Armenia\textsuperscript{41} and to reduce infant mortality. Future efforts will be directed towards:

- promoting breast-feeding exclusively and preventing deficiency of micro elements,
- nation-wide implementation of prenatal and neonatal screening programs for detection of congenital metabolic diseases and other disorders,
- increasing immunization coverage of children by eliminating the current regional differences of immunization coverage and overall improved access to infant healthcare quality and services.

\begin{figure}
\centering
\includegraphics[width=\textwidth]{child_mortality_rate.png}
\caption{Source: NSS, 2014}
\end{figure}

\textbf{Under-five mortality rate}: Armenia has made significant progress in reducing the rate of under-five mortality and infant mortality; though it has not yet achieved the MDG target of less than 10 deaths per 1,000 live births. Since 1990, the under-five mortality rate has dropped by more than two times - from 24 to 11 deaths per 1,000 live births between 1990 and 2013. In 2013, the under-five mortality rate for boys was higher compared to the rate for girls - 12 and 10 per 1,000 live births, respectively.

\textbf{Infant mortality rate}: Similar to the under-five mortality rate, the officially reported infant mortality rate has declined by about half, dropping from 18.5 to 9.7 deaths per 1,000 live births between 1990 and 2013. However, Armenia has not achieved its MDG target of less than 8 deaths per 1,000 live births.

It can be noted that figures for 2009-2011 indicate an increase in the child mortality rate. This recorded increase was related to changes in the administrative registration requirements that took place in 2010, aimed at improvement of record keeping and registration procedures in relation to newborn deaths in the healthcare organizations and the civil registration system.

The reduction of child mortality has also been observed in alternative data obtained from the DHS, conducted every five years since 2000 - 2000, 2005 and 2010 - though the survey data showed higher infant and under-five mortality rates compared to the corresponding officially recorded data.

\textsuperscript{41} As indicated in the Prospective Development Strategy of the Republic of Armenia for 2014-2025.
Proportion of two year-old children immunized against measles: 97% of children in Armenia receive measles vaccinations (both MMR1 and MMR2). This vaccination rate has been steady and unchanged since 2010. The National Vaccination Schedule introduced a two-dose MMR vaccine program for children 12 months and six years of age. The high rate of immunization has improved child health and reduced under-five mortality.

Challenges and the way forward

**Infant and child mortality still remain high:** National programs of child healthcare improvement and immunization helped to reduce child mortality rate significantly, but it is still remains high compared to that of the EU. There has been good progress towards achieving the national MDGs, but they have not been achieved.

**Consistency in vaccination and healthcare services:** There are high rates of breaks/dropout in timely vaccination or postponement of one of the vaccinations in the set, which reduces the positive effects of immunization. Improved quality of service and enhanced communication between healthcare services and parents, as well as educating and raising the awareness of parents (especially in remote and rural areas) can help address this challenge.

It is critical also, together with vaccinations, to pay due attention to other directly linked aspects, such as:
- prenatal healthcare services,
- early childhood nutrition,
- disease identification and preventive techniques,
- some adolescent problems.

**Methodology challenge:** Child mortality indicators need significant improvement, particularly in terms of the implementation and registration of international standards of definition of child mortality.

---

42 The cross-cutting challenge of public funding is discussed under the challenges of MDG 1.
IMPROVE MATERNAL HEALTH
GOAL 5. Improve Maternal Health

GLOBAL TARGETS | GLOBAL INDICATORS
---|---
**Target 5.A.** Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio | 5.1 Maternal mortality ratio  
5.2 Proportion of births attended by skilled health personnel

**Target 5.B.** Achieve, by 2015, universal access to reproductive health | 5.3 Contraceptive prevalence rate  
5.4 Adolescent birth rate  
5.5 Antenatal care coverage (at least one visit and at least four visits)  
5.6 Unmet need for family planning

NATIONAL TARGETS | NATIONAL INDICATORS
---|---
**Target 6.A.** Reduce, by three quarters between 1990 and 2015, the maternal mortality ratio | 1. Maternal mortality, per 100,000 live births (3-year average)  
2. Proportion of births attended by skilled health personnel, %

**Target 6.B.** Achieve, by 2015, universal access to reproductive health | 1. Adolescent birth rate, live births to women 15-19 years old per 1,000 women in age group of 15-19  
2. Antenatal care coverage (at least one visit)  
3. Antenatal care coverage (at least four visits)  
4. Unmet need for family planning, total, %

MDG 5: Scorecard

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</tr>
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<tbody>
<tr>
<td>1. Maternal mortality, per 100,000 live births</td>
<td>40.0</td>
<td>33.0</td>
<td>27.0</td>
<td>19.0</td>
<td>15.0</td>
<td>39.0</td>
<td>27.0</td>
<td>9.0</td>
<td>14.0</td>
<td>19.0</td>
<td>22.0</td>
<td>18.6</td>
<td>&lt;10</td>
</tr>
<tr>
<td>2. Proportion of births attended by skilled health personnel, %</td>
<td>98.6</td>
<td>96.8</td>
<td>99.5</td>
<td>97.8</td>
<td>99.7</td>
<td>99.9</td>
<td>99.9</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>&gt;99.5</td>
</tr>
<tr>
<td><strong>TARGET 6.B. ACHIEVE, BY 2015, UNIVERSAL ACCESS TO REPRODUCTIVE HEALTH</strong></td>
<td></td>
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</tr>
<tr>
<td>1. Adolescent birth rate, live births to women 15-19 years old per 1,000 women in age group of 15-19</td>
<td>69.1</td>
<td>34.6</td>
<td>29.8</td>
<td>26.8</td>
<td>25.5</td>
<td>25.7</td>
<td>27.6</td>
<td>28.3</td>
<td>26.4</td>
<td>26.0</td>
<td>22.7</td>
<td>23.4</td>
<td>&lt;30</td>
</tr>
<tr>
<td>2. Antenatal care coverage (at least one visit)</td>
<td>92.3</td>
<td>93.6</td>
<td>96.0</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td>&gt;98</td>
</tr>
<tr>
<td>3. Antenatal care coverage (at least four visits)</td>
<td>64.7</td>
<td>70.9</td>
<td>91.0</td>
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<td></td>
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<td>&gt;80</td>
</tr>
<tr>
<td>4. Unmet need for family planning, total</td>
<td>11.8</td>
<td>13.3</td>
<td>21.0</td>
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<td>&lt;7</td>
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</table>

Source: for Target 6A – NSS, for target 6B – MoH, and NSS Demographic and Health Survey
Context

Most maternal deaths are avoidable, as the healthcare solutions to prevent or manage complications are well known. Improving access to antenatal care in pregnancy, skilled care during childbirth, and care and support in the weeks after childbirth help reduce maternal deaths significantly.

The maternal mortality indicator is considered the key integral variable reflecting maternal health status. Since 1989, Armenia has been applying the WHO definition for maternity mortality.43

Maternal health is a priority in the Government’s policy agenda. Armenia’s policies and programs on maternal health are implemented together with the child health programs, described in the previous section. National programs aim at providing neonatal, antenatal and perinatal quality health care and early detection and prevention of high risk diseases among women. In addition, maternal and perinatal health issues with all other interrelated fields, such as family planning, contraception and safe abortion, infertility and reproductive tract cancer are addressed under the National Strategy on Reproductive Health Improvement (with its action plan) for 2007 – 2015 (to be followed by 2016-2020).

Targeted policies for maternal health improvement have been implemented, which ensures that all births are attended by skilled health personnel, including: (a) the so called “birth certificates” program (“obstetric care state certificate program”), which introduced mandatory consultations, and free and accessible obstetric care services; (b) the introduction and enhancement of emergency service; (c) the introduction of “mobile healthcare services” to improve accessibility of services in remote rural areas.

Government action led to increased access to and use of quality, reliable and safe contraceptive means; increased involvement of Primary Health Care providers in family planning counseling and contraceptive prescription; decreased use of abortion as a birth control method and a reduced rate of induced abortion. Important reform efforts towards improving access to reproductive health care included: (a) the introduction of abortion with medicines; (b) the creation of over six dozens family planning offices; (c) the allocation of funds from the state budget for the procurement of contraception starting 2015.44

These measures contributed notably to the reduction of abortions in Armenia from 1.8 per woman in 2005 vs. 0.8 in 2010. This is considerably lower than the rate of 2.6 in 2000. More married women reported the use of modern methods of family planning.45 For instance, the use of male condoms by married women has doubled over the past 10 years (15 percent in 2010 versus 8% in 2005 and 7% in 2000).46

Despite these achievements, the maternal health situation in Armenia still needs significant improvement. The maternal mortality rate in Armenia is several times higher than in the EU. Although the total abortion rate (TAR) is decreasing, the abortion rate is still high and abortion is often used as a main family planning method.

Target 6.A. Reduce, by three quarters between 1990 and 2015, the maternal mortality ratio

The data on maternal mortality is on triennial basis, in compliance with the WHO recommendation. According to the WHO recommendation, if a country’s population is under-five million, the maternal mortality rate is estimated on average triennial basis.

The average triennial rate of maternal mortality during recent years demonstrates a sustainable decrease. In 2011-2013, it was 1.5 times lower than the average CIS level, but exceeded the EU average by a factor of almost 3.7.

Armenia is far from achieving the MDG target for reducing the maternal mortality to less than 10 per 100,000 live births.

43 WHO defines the maternity mortality rate as the death of the pregnant women, child delivering or delivered women from the first day of gestation through the 42nd post-partum day inclusive per 100,000 live births.
45 27% in 2010 vs. 20% in 2005.
46 Demographic and Health Survey.
Armenia MDG Progress in Detail

Armenia MDG Progress in Detail

45

45

Armenia has met its target in relation to the proportion of births attended by skilled health personnel. Since 2008, when the obstetric care “certificate program” was introduced, the proportion of births attended by skilled health personnel is 100%.

Concerning the indicator on adolescent birth rate (live births per 1,000 women in aged 15-19), there has been a significant reduction - from 69.1 in 1990 to 23.4 in 2014, Armenia has achieved its target in this indicator.

The other two indicators measure the access to antenatal care. There has been improvement in these two indicators during the period from 1996 to 2010. According to the 2010 DHS, antenatal care coverage (of at least four visits) on the country level increased from 65% from 2000 to 91% in 2010, while antenatal care coverage (at least one visit) rose to 96%. Armenia partly achieved this target, and it is feasible that the target will be fully met in the short-run.

Challenges and the way forward

Maternal mortality still remains high: During 2004-2014, there was reduction in maternal mortality from 26.7 to 18.6 per 100,000 live births, but this rate is still about four times higher than the EU average. Ensuring the consistency and continuity of the ongoing reform efforts will be critical for further improvement of maternal health and reduction of maternal mortality. Improved quality of service and enhanced communication between the healthcare services and parents, as well as awareness raising and education of parents (especially in remote and rural areas) will be necessary for addressing this challenge.

Family planning challenges: Family planning needs significant improvement. The level of knowledge, especially among youths and adolescents about sexual and reproductive health issues, needs to be improved in order to reduce abortion and sexual transmitted infection (STI) rates. High abortion rates and the high incidence of STI negatively affect fertility rates in Armenia.

The promotion of effective contemporary contraception methods, together with improved accessibility, affordability and quality of reproductive healthcare service, and enhanced communication between the healthcare services and parents, as well as awareness raising and education of parents, will be required to address this challenge.

47 The cross-cutting challenge of public funding is discussed under the challenges of MDG 1.
COMBAT HIV/AIDS AND OTHER DISEASES
## GOAL 6. Combat HIV/AIDS and other Diseases

<table>
<thead>
<tr>
<th>GLOBAL TARGETS</th>
<th>GLOBAL INDICATORS</th>
</tr>
</thead>
</table>
| **Target 6.A.** Have halted by 2015 and begun to reverse the spread of HIV/AIDS | 6.1 HIV prevalence among population aged 15-24 years  
6.2 Condom use at last high-risk sex  
6.3 Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS  
6.4 Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years |

| **Target 6.B.** Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it | 6.5 Proportion of population with advanced HIV infection with access to antiretroviral drugs |

| **Target 6.C.** Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases | 6.6 Incidence and death rates associated with malaria  
6.7 Proportion of children under-five sleeping under insecticide-treated bed nets  
6.8 Proportion of children under-five with fever who are treated with appropriate anti-malarial drugs  
6.9 Incidence, prevalence and death rates associated with tuberculosis  
6.10 Proportion of tuberculosis cases detected and cured under directly observed treatment, short-course |

<table>
<thead>
<tr>
<th>NATIONAL TARGETS</th>
<th>NATIONAL INDICATORS</th>
</tr>
</thead>
</table>
| **Target 7.A.** Halt, by 2015, and begin to reverse the spread of HIV/AIDS | 1. People living with HIV, 15-49 years old, percentage  
2. Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS |

| **Target 7.B.** Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it | 1. Proportion of population with advanced HIV infection with access to antiretroviral drugs |

| **Target 8.** Have halted by 2015, and begun to reverse the incidence of malaria and other major diseases | 1. Number of new malaria local cases  
2. Tuberculosis incidence, per 100,000 population  
3. Proportion of tuberculosis cases detected and cured under directly observed treatment, short-course |
## MDG 6: Scorecard

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</thead>
<tbody>
<tr>
<td><strong>TARGET 7.A. HAVE HALTED BY 2015 AND BEGUN TO REVERSE THE SPREAD OF HIV/AIDS</strong></td>
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</tr>
<tr>
<td>1. People living with HIV, 15-49 years old, percentage*</td>
<td>&lt;0.01</td>
<td>&lt;0.02</td>
<td>&lt;0.03</td>
<td>0.03</td>
<td>0.04</td>
<td>0.04</td>
<td>0.06</td>
<td>0.07</td>
<td>0.08</td>
<td>&lt;0.04</td>
<td>Not achieved</td>
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<tr>
<td>2. Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS**</td>
<td>....</td>
<td>....</td>
<td>....</td>
<td>20.4</td>
<td>18.7</td>
<td>22.4</td>
<td>&gt;80%</td>
<td>Not achieved</td>
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<tr>
<td><strong>TARGET 7.B. ACHIEVE, BY 2010, UNIVERSAL ACCESS TO TREATMENT FOR HIV/AIDS FOR ALL THOSE WHO NEED IT</strong></td>
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<td></td>
</tr>
<tr>
<td>1. Proportion of population with advanced HIV infection with access to antiretroviral drugs</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>Achieved</td>
</tr>
<tr>
<td><strong>TARGET 8. HAVE HALTED BY 2015 AND BEGUN TO REVERSE THE INCIDENCE OF MALARIA AND OTHER MAJOR DISEASES</strong>&lt;sup&gt;49&lt;/sup&gt;</td>
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<td></td>
</tr>
<tr>
<td>1. Number of new malaria local cases (AR)</td>
<td>0</td>
<td>329</td>
<td>6</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>Achieved</td>
</tr>
<tr>
<td>2. Tuberculosis incidence, per 100,000 population (HS 2014)</td>
<td>16.6</td>
<td>44.4</td>
<td>48.5</td>
<td>47.0</td>
<td>45.9</td>
<td>44.1</td>
<td>40.6</td>
<td>36.3</td>
<td>37.4</td>
<td>34.6</td>
<td>34.7</td>
<td>&lt;30 Well advanced</td>
</tr>
<tr>
<td>3. Proportion of tuberculosis cases detected and cured under directly observed treatment, short-course, percentage</td>
<td>18.5 (1995)</td>
<td>83.0</td>
<td>99.8</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>Achieved</td>
</tr>
</tbody>
</table>

N.B. Figures for years before 2010 were compiled in a different format: 2000 - 7% of female and 8% of male, 2005 – 15.8% of female and 8.9% male; 2010 – 15.8% of female and 8.9% of male (Source: NSS DHS survey).


49 Figures under this target for 2000 and 2005 correspond to 1999 and 2004 respectively.
Context

The registration of HIV cases in Armenia started in 1988, while the first National Program on HIV/AIDS Prevention was adopted for 2002-2006. As of 1 August, 2015, there were 2,118 HIV cases registered in the country among citizens of Armenia, and this number has been steadily increasing during the last two decades. In 2014, 334 new cases of HIV infection were registered, which exceeds the number of HIV cases registered annually in the previous years. The main modes of HIV transmission are through heterosexual practices (64.2%) and intravenous drug use (26.4%). Additionally, there are also registered cases through homosexual practices, as well as mother-to-child HIV transmission and transmission through blood.

The measures implemented within the framework of national programs on HIV/AIDS prevention to reduce the transmission of HIV and to stop the spread of the HIV/AIDS, have not been able to stop the increase of HIV cases. A key factor for this situation has been the fact that in Armenia labor migration has been the main source of HIV infection, with 73% of registered HIV cases been associated with migration. In addition, until the late 2000s the strategies of fighting HIV/AIDS did not address the migration aspect sufficiently.

HIV surveillance has been improved in the country. HIV preventive programs are being implemented in 100 towns and rural communities among populations most vulnerable to HIV, i.e. among migrant workers and their family members. A mobile medical team and a mobile medical and diagnostic clinic are operating, providing HIV-related medical services, including on-site HIV testing. A HIV Counseling and Testing System is in place in Armenia and is mainly integrated in the existing health care system. Provider-initiated HIV counseling and testing has been widely integrated in health care settings.

The National Tuberculosis Control Program for 2007-2015 (to be followed by 2016-2020) aims at reducing TB morbidity and mortality, and to curb the development of MDR-TB in Armenia. The National TB Control Program strengthened essential elements of the DOTS (directly observed treatment, short-course) strategy to prevent drug resistant TB, scaling up capacity for the management of drug resistance, increasing the TB case detection rate, providing comprehensive social and psychological support to patients, providing diagnostic and “through care” services to seasonal migrants, increasing the capacity for providing home treatment for eligible cases and involving the primary healthcare system.

To prevent malaria reintroduction, the Armenian Government approved a decree on the National Program for the Prevention of Entry and Spread of Malaria in Armenia, 2011-2015 aiming to guarantee the current epidemiological situation through:

- strengthening the management system for the malaria reintroduction prevention actions;
- improving policy in cross-border and international cooperation;
- improving malaria epidemiological surveillance system in the country;
- vector-control actions, based on ecological, epidemiological and social-demographic situation;
- taking prophylactic measures among the high risk population (tourists, migrants, foreign students);
- health education of population on malaria prevention measures;
- recruitment of specialists needed in malaria control and their further trainings.

Due to comprehensive preventive and anti-epidemic measures of the state program autochthonous malaria cases have not been registered in Armenia up to now. As a further step towards the eradication of infectious diseases, the Government has adopted a Program on Control of Vectors of Infectious Diseases.

50 National Program on HIV/AIDS Prevention (the first program was for 2002-2006); currently the third National AIDS Program for 2013-2016 is being implemented.

51 To be followed by a program for 2016-2018.
Target 7.A. Have halted by 2015 and begun to reverse the spread of HIV/AIDS

As of 1 August, 2015, there were 2,118 HIV cases registered in the country among citizens of Armenia, including 40 cases of HIV infection among children. Males constitute the major proportion of HIV cases – 1,463 cases (69%). 655 cases of HIV infection were registered among females and children, with the proportion being 31% and 1.9% respectively. 53% of the HIV-infected individuals belong to the 25-39 age group at the moment of the HIV diagnosis receipt.

By the end of 2014, the estimated number of people living with HIV in the country was about 3,800. Between 2012-2014, about 59% of HIV cases were migrant workers infected abroad, who then infected their sexual partners (who make up 14% of the HIV infected).

The number of registered cases has been increasing yearly. As reported by the National AIDS Center, the proportion of 15-49 year olds living with HIV increased from 0.01% (in 2000) to 0.08% in 2014.

According to the Behavioral Surveillance conducted among youth in 2010, 2012, 2014, comprehensive and accurate knowledge about HIV/AIDS in the age group of 15-24 years old population is still low, although there is 2% increase in 2014 compared with 2010.

Target 7.B. Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it

Since 2007, there has been 100% access to antiretroviral (ART) medicines for HIV/AIDS. ART is accessible for all eligible registered patients and who gave their consent to receive it.

As a result, HIV testing accessibility expanded and HIV detectability improved to more than 95% of pregnant women. Additionally, all TB patients are being HIV tested.

Target 8. Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases

As a result of activities undertaken in recent years within the framework of the 2007-2015 National Tuberculosis Control Program the epidemiological situation improved.

Since 2007, the tuberculosis incidence per 100,000 population recorded a steady decline from 47.4 to 34.7 in 2014. Although the incidence rate has decreased, it is higher than the 16.6 in 1990. This increase is partially attributable to the deterioration of socioeconomic conditions, as well as accelerated migration flows. There is a lack of awareness and knowledge among migrants.
In 2013, the most infected age groups were 25-34 and 45-54. Due to the improved healthcare system, cases of death notably decreased in Armenia during 2007-2014 from 175 to 46. (National Center for Tuberculosis Control, MoH).

Since 2007, the proportion of tuberculosis cases detected and cured under directly observed treatment short course has constantly remained 100%.

Since 2006, there have been no registered autochthonous cases of malaria in Armenia. In 2011, Armenia was certified by WHO as a malaria free country. According to the comprehensive preventive and anti-epidemic measures of the state program, no autochthonous malaria cases have been reported in Armenia. Since then, there were seven registered malaria cases imported from Africa.

Challenges and the way forward

Increasing number of HIV/AIDS cases: An alarming sign is the steadily increasing number of people with HIV, and the fact that there is a low level of knowledge about HIV/AIDS among the population aged 15-24. In 2014, only 22.4% of this population possessed sufficient knowledge. Between 2004-2014, 67.3% of registered HIV cases were among the most-at-risk populations.

Although Armenia has achieved remarkable progress in AIDS and TB in the last ten years, with every person known to be HIV positive and in need of treatment accessing therapy, the country faces a major sustainability challenge in regard to its HIV/AIDS response. The next HIV grant of the Global Fund, if signed, will still be a 50% reduction as compared to the previous years, and the country will need to provide 40% in co-funding as well as purchase a significant portion of the treatments required. The current gap and prospect of the Global Fund’s grant’s interruption, combined with the growth of identified HIV cases and the overall slowing of economic growth in the past two years, are raising concerns. The achievements of Armenia’s response are at risk if the transition from donor funding to Government financing is not ensured; at least for the funding of antiretroviral medicines and possibly opioid substitution therapy (OST).

Migrant workers are the main importers of the disease (more than 73% of HIV cases registered in 2012-2014 were associated with migration), and their number has increased during recent years. The level of labor migration will not decrease in the future, and thus, in order to reduce HIV infection it is important to ensure early diagnosis, awareness and knowledge raising (among not only the most-at-risk-population, but also others), promotion of client-initiated HIV testing and counseling. Improved quality of service and enhanced communication with the population, as well as awareness raising and education of parents, can help to address this challenge.

52 The cross-cutting challenge of public funding is discussed under the challenges of MDG 1.
ENSURE ENVIRONMENTAL SUSTAINABILITY
GOAL 7. Ensure Environmental Sustainability

<table>
<thead>
<tr>
<th>GLOBAL TARGETS</th>
<th>GLOBAL INDICATORS</th>
</tr>
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</table>
| **Target 7.A.** Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources | 7.1 Proportion of land area covered by forest  
7.2 CO2 emissions, total, per capita and per 1 USD GDP (PPP)  
7.3 Consumption of ozone-depleting substances  
7.4 Proportion of fish stocks within safe biological limits  
7.5 Proportion of total water resources used |
| **Target 7.B.** Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss | 7.6 Proportion of terrestrial and marine areas protected  
7.7 Proportion of species threatened with extinction |
| **Target 7.C.** Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation | 7.8 Proportion of population using an improved drinking water source  
7.9 Proportion of population using an improved sanitation facility |
| **Target 7.D.** By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers | 7.10 Proportion of urban population living in slums |

<table>
<thead>
<tr>
<th>NATIONAL TARGETS</th>
<th>NATIONAL INDICATORS</th>
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</table>
| **Target 9.** Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources | 1. [Energy use (kg oil equivalent) per 1,000 USD GDP (PPP)]*  
2. Proportion of land area, covered by forests, %  
3. Ratio of area protected to maintain biological diversity to surface area, %  
4. Carbon dioxide emissions per capita, in metric tons  
5. Consumption of ozone depleting CFCs [and HCFCs]** (ODP tons)  
6. Proportion of population using solid fuels  
7. Elevation of Lake Sevan above sea level, meters  
8. Average translucence of Lake Sevan  
9. Average dissolved oxygen content in Lake Sevan, mgO2/l  
10. Number of towns served by wastewater treatment plants |
| **Target 10.** Increase access to safe drinking water | 1. Average daily duration of centralized water supply in urban [and rural]** (non-Yerevan) households, hours  
2. Proportion of population without access to safe drinking water in rural areas, %  
3. Proportion of rural population using transported water to the total number of rural water users, % |
| **Target 11.** Improve housing conditions by 2015 | 1. Ratio of urban slum households (urban households living in non-conventional dwellings), per 1,000 households  
2. Proportion of population with access to improved sanitation, %  
3. Proportion of communities with more than 300 households with access to reliable natural gas supply,% [Proportion of residential units with gas supply, %]* |

(*) Indicator was included in the original 2005 list of national indicators but deleted from the 2010 progress report. The 2015 report includes it back in.

(**) Elements or the entire indicator changed for the 2015 progress report as data for the indicator as originally stated not available.
### MDG 7: Scorecard*

#### TARGET 9: INTEGRATE THE PRINCIPLES OF SUSTAINABLE DEVELOPMENT INTO COUNTRY POLICIES AND PROGRAMS AND REVERSE THE LOSS OF ENVIRONMENTAL RESOURCES

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</thead>
<tbody>
<tr>
<td>1. Energy use (kg oil equivalent) per 1,000 USD GDP (PPP)(^53)</td>
<td>295</td>
<td>207</td>
<td>177.2</td>
<td>137.8</td>
<td>134.2</td>
<td>127.7</td>
<td>129.2</td>
<td>130.5</td>
<td>131.2</td>
<td>295</td>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>2. Proportion of land area, covered by forests, %</td>
<td>--</td>
<td>11.2</td>
<td>10.3</td>
<td>10.3</td>
<td>10.3</td>
<td>10.0</td>
<td>9.7</td>
<td>9.7</td>
<td>--</td>
<td>≥11</td>
<td>Not achieved</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Ratio of area protected to maintain biological diversity to surface area, %</td>
<td>--</td>
<td>10</td>
<td>11</td>
<td>10</td>
<td>13</td>
<td>12</td>
<td>12</td>
<td>12</td>
<td>13</td>
<td>≥13</td>
<td>Achieved</td>
<td></td>
<td></td>
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<tr>
<td>4. Carbon dioxide eq. emissions per capita, in tons</td>
<td>7.04</td>
<td>1.79</td>
<td>2.26</td>
<td>2.38</td>
<td>2.74</td>
<td>2.43</td>
<td>2.48</td>
<td>2.82</td>
<td>3.08</td>
<td>--</td>
<td>&lt;3.5</td>
<td>Well advanced</td>
<td></td>
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<tr>
<td>5. Consumption of ozone depleting CFCs [and HCFCs] (ODP tons)</td>
<td>--</td>
<td>25.7</td>
<td>87.0</td>
<td>29.4</td>
<td>18.4</td>
<td>24.9</td>
<td>7.1</td>
<td>7.5</td>
<td>5.7</td>
<td>4.5</td>
<td>3.2</td>
<td>0</td>
<td>Well advanced</td>
</tr>
<tr>
<td>6. Proportion of population using solid fuels</td>
<td>59.9</td>
<td>36.5</td>
<td>25.6</td>
<td>21.7</td>
<td>23.2</td>
<td>30.5</td>
<td>36</td>
<td>33.4</td>
<td>34.5</td>
<td>--</td>
<td>&lt;5</td>
<td>Not achieved</td>
<td></td>
</tr>
<tr>
<td>7. Elevation of Lake Sevan above sea level, meters</td>
<td>1897.81</td>
<td>1896.51</td>
<td>1897.66</td>
<td>1898.25</td>
<td>1898.85</td>
<td>1899.23</td>
<td>1899.23</td>
<td>1899.91</td>
<td>1900.13</td>
<td>1900.11</td>
<td>1900.16</td>
<td>≥1903</td>
<td>Not achieved</td>
</tr>
<tr>
<td>8. Average translucence of Lake Sevan, meters</td>
<td>--</td>
<td>5.6</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>--</td>
<td>8.5</td>
<td>11.5</td>
<td>11</td>
<td>≥9</td>
<td>Achieved</td>
<td></td>
</tr>
<tr>
<td>9. Average dissolved oxygen content in Lake Sevan, mgO(_2)/l</td>
<td>--</td>
<td>--</td>
<td>5.8</td>
<td>8.1</td>
<td>7.1</td>
<td>7.2</td>
<td>8.8</td>
<td>--</td>
<td>10.1</td>
<td>10.6</td>
<td>9.8</td>
<td>&gt;8</td>
<td>Achieved</td>
</tr>
<tr>
<td>10. Number of towns served by wastewater treatment plants</td>
<td>21</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>3</td>
<td>3</td>
<td>6 (with 2 plants in early 2015)</td>
<td>5</td>
<td>Achieved</td>
<td></td>
</tr>
</tbody>
</table>

\(^53\) The data is from the MDG Database reported by the RA NSS. The database did not specify the year for which inflation adjustment is made. The authors presume that not mentioning the adjustment year is an oversight and that the GDP figures are in fact adjusted for inflation over time and not only PPP.
### TARGET 10. INCREASE ACCESS TO SAFE DRINKING WATER

1. **Average daily duration of centralized water supply in urban [and rural] (non-Yerevan) households, hour**  
   - 1990: 7.39  
   - 2000: 10.98  
   - 2005: 12.1  
   - 2008: 13.01  
   - 2009: 14.03  
   - 2010: 15.02  
   - 2011: 16  
   - 2012: 16.61  
   - 2013: 17.02  
   - **Target:** >16  
   - **Achieved**

2. **Proportion of population without access to safe drinking water in rural areas, %**  
   - 1990: 35.6  
   - 2000: 27.2  
   - 2005: 15.2  
   - 2008: 7.6  
   - 2009: 6.4  
   - 2010: 6.5  
   - 2011: 6.3  
   - 2012: 9.2  
   - **Target:** <5  
   - **Achieved**

3. **Proportion of rural population using transported water to the total number of rural water users, %**  
   - 1990: --  
   - 1998/99: 17.8  
   - 2000: 10.6  
   - 2005: 4.1  
   - 2008: 3  
   - 2009: 0.6  
   - 2010: 0.4  
   - 2011: 0  
   - **Target:** <1  
   - **Achieved**

### TARGET 11. IMPROVE HOUSING CONDITIONS BY 2015

1. **Ratio of urban slum households (urban households living in non-conventional dwellings), per 1,000 households**  
   - 1990: --  
   - 2000: --  
   - 2008: --  
   - 2010: --  
   - 2011: --  
   - 2012: --  
   - **Target:** <5  
   - **Not achieved**

2. **Proportion of population with access to improved sanitation, %**  
   - 1990: --  
   - 1999: 57.9**  
   - 2000: 65.1  
   - 2005: 67.0  
   - 2008: 66.7  
   - 2009: 69.1  
   - 2010: 69.2  
   - 2011: 69.6  
   - 2012: 68.0  
   - **Target:** >85  
   - **Not achieved**

3. **Proportion of residential units with gas supply, %**  
   - 1990: --  
   - 1999/2000: 47  
   - 2005: --  
   - 2008: --  
   - 2009: 73  
   - 2010: --  
   - 2011: --  
   - 2012: 77  
   - **Target:** N/A  
   - **N/A**

*Sources: Various, see sources for each indicator in discussion section for each indicator.*

*Note: (*) Data for the different years may not be comparable as definitions may have changed.*

** This is for year 1999 according to 2005-2009 MDG Progress Report.
Context

As of 2015, Armenia has ratified 22 international environmental agreements. Over the past 15 years, Armenia has utilized resources made available by the Global Environmental Facility (GEF) to implement the obligations of these international environmental agreements.


Armenia has developed and adopted two National Environmental Action Programs (NEAPs), policy and programmatic framework documents, and a set of documents that articulates the country’s national and agricultural development priorities while ensuring environmental sustainability. Armenia introduced sustainable development as curriculum in state universities, and published several textbooks on the topic. An important tangible positive environmental outcome from a decade-and-a-half of legislative development and international support has been the expansion of specially protected areas in the country. Armenia now has two more national parks and four more state sanctuaries. Additionally, in 2014, Armenia adopted a list of 232 natural monuments in several of the marzes (provinces). These advancements are taking place within the framework of the Convention on Biological Diversity. Armenia plans to continue adopting lists of natural monuments for the remaining marzes by 2016 and develop a unified system of biodiversity monitoring and real estate cadastre by 2020.

State of Specially Protected Areas in Armenia, 2015

<table>
<thead>
<tr>
<th>National parks</th>
<th>State reserves</th>
<th>State Sanctuaries</th>
<th>Natural monuments and protected landscapes</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 parks added in 2009</td>
<td>3 today</td>
<td>4 added since 2007</td>
<td>List of 232 natural monuments approved in 2014</td>
</tr>
<tr>
<td>Arpi Lake National Park</td>
<td></td>
<td>Zangezur</td>
<td>2010 start of work on Gnishik Protected Landscape.</td>
</tr>
<tr>
<td>Totals 4 parks with</td>
<td></td>
<td>Zikatar</td>
<td></td>
</tr>
<tr>
<td>Dilijan National Park</td>
<td></td>
<td>Khor Virap</td>
<td></td>
</tr>
<tr>
<td>Lake Sevan National Park</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 today</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arpi Lake National Park</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arevik National Park</td>
<td>Erebuni</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dilijan National Park</td>
<td>Khosrov Forest</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lake Sevan National Park</td>
<td>Shikahogh</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Totals 27 today</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Another example of significant progress has been increasing the elevation of Lake Sevan and improving the water quality of the Lake by two parameters: dissolved oxygen and translucence. These improvements follow the establishment of the Lake Sevan Commission (established by Presidential Decree in 2008) with its annual action plan and funneling of international financial resources to the construction of wastewater treatment plants for major upstream communities in the lake basin. By 2012, wastewater treatment plants were built for the Gavar, Martuni, and Vardenis municipalities, from where wastewaters flow to Lake Sevan.

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54 These include the Armenian Government’s “Draft Strategy on Sustainable Development of Armenia’s Agriculture” (2004); the Strategy on Food Safety Policy (2005) and the updated version of the “Strategy on Sustainable Development of Armenia’s Agriculture” (2006). Moreover, in November 2010, the 2010-2020 Strategy of Sustainable Development of Armenia’s agriculture was approved by the Government of Armenia.

55 To name some of them: “The Sustainable Human Development Concept: Theory and Practice”, designed to be used in universities of the CIS countries; “The Worldwide Process of Sustainable Development and Armenia: Gained Experience, Challenges and Achievements”.

In preparation for the 3rd National Communication on Climate Change (2015), Armenia developed a Greenhouse Gas Inventory for 2010, which offers updated CO2 emissions estimates dating back to the year 2000. The latest year for which data is available is 2012. According to the new Inventory (which will be updated every two years), Armenia has increased its per capita CO2 emissions but has remained significantly below the maximum 2015 target of 3.5 tons per person set nationally when the MDGs were being localized.

In compliance with its obligations on the Montreal Protocol, Armenia has nearly eliminated its use of ozone depleting gases. It has completely phased out consumption of CFCs from 196.5 (ODP) tons in 1996 to none by 2010.57 It is now in the process of phasing out HCFCs. Its use of HCFCs was down to an insignificant amount of 3.15 ODP tons in 2014. It is likely that Armenia will achieve or come very close to eliminating ozone-depleting gases by 2015.

Armenia’s economy has also become less energy intensive. In 1997, Armenia used 295 kg oil equivalent (kgoe) of energy to generate 1,000 USD of its GDP. In 2013, 131 kgoe (almost a third) of energy was used to generate the same GDP. Likely sources of this trend are Armenia’s investment in energy efficiency and pursuit of less energy-intensive economic sectors (e.g. services and IT).

Armenia is in the process of finalizing and adopting its 2nd National Energy Efficiency Action Plan (NEEAP), which highlights priority areas for energy efficiency investments. Armenia also is taking part in the EU-led Covenant of Mayors through which local authorities adopt energy efficiency policies and programs. To date, 10 municipalities in Armenia have committed to developing sustainable energy action plans (SEAPs).58

The Prospective Development Strategy of the Republic of Armenia for 2014-2025 states that “parallel to the government’s efforts for improving the rates of economic growth, measures should be taken to reduce as much as possible the associated environmental risks” (p. 131). The 15 key priorities outlined in the ADS include legislative reforms, management and governance capacity building (including for specially protected areas, forests, and water basins), environmental impact assessment and monitoring capacity, increase in environmental fees and tariffs, continued work on Lake Sevan, legal mechanisms for promoting “green” innovation, education and awareness, among others.

Target 9. Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources

\[\text{Forest coverage, } \%, \text{ 2015 target } >11\%\]

\[\begin{array}{cccccccccccccc}
8.5  & 9   & 9.5 & 10  & 10.5 & 11  & 11.5 & 12  & 12.5 & 13  & 13.5 & 14  & 14.5 & 15 \\
\end{array}\]

Figure 26: Source: Armenian MDG Indicators Database, NSS. Downloaded August 24, 2015 from http://armstat.am/en/?nid=180

Ratio of protected area: In the last 15 years, Armenia has increased its stock of specially protected areas, primarily for biodiversity conservation. The NSS in its Armenia MDG Indicators Database reports that in 2013 13% of the surface area of the country was designated as protected areas. This was up from 10% in

the early 2000s.\textsuperscript{59} In 2009, two national parks (Arpi Lake and Arevik) were added to the two existing national parks (Lake Sevan and Dilijan). In addition, four new state sanctuaries (Khor Virap, Zangezur, Zikatar, and Khustup) brought the total number of state sanctuaries to 27. Finally, in 2014, Armenia adopted a list of 232 natural monuments subject to protection. Armenia’s progress in increasing its specially protected areas is highly commendable. However, due to data inconsistencies described in the footnote section, the authors find it difficult to determine if the MDG 2015 target of having 13\% of Armenia’s territory as protected areas has been achieved.

**Forest coverage:** According to official statistics reported in the MDG Indicators Database, from 2005 to 2013, a mere eight years, Armenia’s forest cover dropped from 11.2\% to 9.7\% of the country’s land area. This is a loss of 450 square kilometers of forest cover, equivalent in area to two cities of Yerevan. The forest cover statistics, however, are wrought with controversy.\textsuperscript{60} Despite the issues with publicly available data, all seem to agree on the downward trend of the forest coverage in Armenia. This is a disturbing trend that requires rapid and determined action to reverse.

**Proportion of population using solid fuels:** According to annual household surveys, Armenia nearly halved the share of the population using solid fuel (wood and dung) from 62\% in 1996 to 35\% in 2013. While an important progress, there is a significant gap to the MDG 2015 target of less than 5\%. It is not likely that Armenia will achieve the goal. More disturbing, however, is that since 2008, the trend has reversed. There was a constant decrease reaching 22\% in 2008 but the use of solid fuel increased to 35\% by 2013.

\textsuperscript{59} Data used here for percentage of Armenia’s territory designated as protected areas is from the Armenia MDG Indicators available on NSS website (http://armstat.am/en/?nid=180, accessed August 25, 2015). It should be noted, however, that there are inconsistencies:

a) Between these numbers and the ones presented in the Armenia’s Statistical Yearbooks (NSS). Table 158 (p. 203) of the 2014 Statistical Yearbook reports land designated as “specially protected areas” constituting smaller share Armenia’s territory than the shares reported in the MDG Indicators Database. The Yearbook, for instance, states that in 2013 Armenia’s protected areas covered 331,700 hectares or 11.2\% of Armenia’s land area. The MDG Indicators Database, on the other hand, reports 13\% of the country’s land area as “specially protected” land. There is discrepancy between the two sets of data for at least 2009 to 2013, the years checked by this author. NSS experts interviewed stated that the data source for this Statistical Yearbook information is the RA Land Cadastre annual land balance sheet published at http://cadaster.am.

b) Between these numbers and the land balance sheet prepared by the RA Land Cadastre (http://cadaster.am/page/land_balance, accessed August 27, 2015). The land balance sheet data on specially protected land shows a smaller share of the country’s land being in that category than the Armenia MDG Indicators Database. This is despite the fact that the land balance sheet includes national parks, state reserves, and state sanctuaries but also recreation and health zones as well as historical and cultural lands.

c) Within the tables of the NSS publication Environment and Natural Resources of the Republic of Armenia 2013. In a table called “Main indicators on specially protected areas, 2013” (p. 34), the total area of state sanctuaries (one of the designations qualifying as a protected area) is 111.5 thousand hectares. Pages 39-41 of the same report have a list of RA state sanctuaries with surface areas totally 117.6 thousand hectares.

The NSS should work with appropriate agencies to address these inconsistencies.

\textsuperscript{60} The forest cover statistics are wrought with controversy. The following highlight a few of the salient challenges with the numbers on forest coverage:

a) The statistics used for forest coverage in the Armenia MDG Indicators Database is percentage of forest cover of the country’s forestland (also known as Forest Fund) as reported in the land balance sheet of the RA Land Cadastre. The issue arises from the fact that forests exist in other land categories, such as specially protected areas and community settlements. The data used in the MDG Indicators Database, however, does not account for this. This may lead to a systematic undercount of forest coverage in the country.

b) The coverage with forests of land that is designated as forestland may be over-counted. Landsat analysis of forests coverage in Armenia indicates that Armenia had no more than 8.3\% forest cover in 2001 (see Moreno-Sanchez, R., Sayadyan, H., R. Streeter, and J. Rozelle. 2007. “The Armenian forests: threats to conservation and needs for sustainable management.” In: Ecosystems and Sustainable Development VI. WIT Press. Southampton, UK. pp 113-122). This is in sharp contrast to the 11.2\% reported by the Armenia MDG Indicators Database.

c) There is also inconsistency with numbers reported in Armenia MDG Indicators Database and forest coverage numbers in a database published by the Food and Agriculture Organization (FAO) (Global Tables (English version) downloaded from http://countrystat.org on September 6, 2015). The statistics for Armenia the Trends in Extent of Forests 1990-2010 show the following forest coverage in Armenia: 1990, 347k ha (11.7\% of Armenia’s territory); 2000, 304k ha (10.2\%), 2005, 283k ha (9.5\%), 2010, 262k ha (8.8\%).

The Government of Armenia and NSS should work with appropriate agencies to address these inconsistencies. It is important to highlight that the July 28, 2005 Government Decision 1152-N established the State Forest Monitoring Center SNCO. This Center has been equipped with satellite imaging and remote sensing capabilities funded by the German government. It is unconscionable that in 10 years reliable data on forest coverage and quality is not publicly available.
Carbon dioxide emissions: Armenia has increased its per capita CO₂ emissions but has remained significantly below the maximum target of 3.5 tons per person. In preparation for the 3rd National Communication on Climate Change, Armenia has developed a Greenhouse Gas Inventory that it will update every two years. The latest data available in the Inventory is for 2010. The 2012 data is expected next year.

Energy intensity: Armenia’s economy has become less energy intensive. In 1997, Armenia used 295 kg of oil equivalent (kgoe) of energy to generate 1,000 USD of its GDP. In 2013, 131 kgoe (almost a third) of energy was used to generate the same economic output. Likely sources of this trend are Armenia’s investment in energy efficiency and pursuit of less energy-intensive economic sectors (e.g. services and IT).

Armenia has nearly eliminated its use of ozone depleting gases, from 197 tons in 1996 to 7.5 tons in 2013. Globally, the use and availability of ozone-depleting gases have been declining. Armenia cannot purchase them internationally and it is obligated by its international agreements not to produce them. It is likely that Armenia will achieve the target of zero CFC use by 2015.
Lake Sevan level: Armenia has increased the level of Lake Sevan by about four meters from the low of 1,896.32 meters above sea level in 2002 to 1,900.12 in 2015. Armenia MDG 2015 target is to elevate the surface of the Lake to 1,903 meters. Armenia will not achieve this goal as raising the level of the Lake will result in submersion of some of the infrastructure and economic assets. The Armenian Government has not expressed a readiness to incur such costs.  

Average annual level of dissolved oxygen in Lake Sevan, (mg/l). MDG target - 8mg O2/liter

Lake Sevan water quality (dissolved oxygen and translucence): The cleanliness of Lake Sevan (as measured by translucence and dissolved oxygen) is reported as improved. According to Environmental Impact Monitoring Center (EMIC) data, for the three years, 2012 to 2014, average dissolved oxygen (mg of oxygen per liter) has been 10.1, 10.6, and 9.8, all higher than 8 mg per liter target for 2015. Lake Sevan’s translucence is also reported as improved. For 2012-14, the translucence has been 8.5 meters, 11.5 meters, and 11 meters respectively. The last two measurements have been above the MDG 2015 target of more than nine meters. By 2012, wastewater treatment plants were built for Gavar, Martuni, and Vardenis municipalities, all upstream from Lake Sevan.

62 A different target for the level of the lake Sevan was set in the law on “Approving the Annual and Comprehensive Activities on the Recovery, Protection, Regeneration and Use of the Ecosystem of the Lake Sevan”, of December 14, 2001. According to this law the level of the Lake Sevan was to be increased from 2003 to 2030 at a rate of 21.6 cm per year. The elevation of the lake was cited as 1896.66 m at the end of 2001. This implies that by 2015, the lake’s level should reach 1899.28 meters (=1896.66 + [21.6*13 years]). This target has been achieved. However, this report evaluates the implementation of MDGs, which set the target at 1903 meters. This target was not achieved.
Wastewater treatment: There are six sewer treatment plants operating in Armenia today. Five of these plants offer mechanical treatment only. These include new plants in Vardenis, Martuni, and Gavar (together part of the Lake Sevan Environmental Project) as well as the rehabilitation and re-operation of plants in Dilijan and Jermuk. In addition, there is an artificial lagoon in Parakyar village near Yerevan. The 2015 MDG target was to have five plants in the country. Armenia has surpassed its goal of having five treatment plants by 2015.

Table 3. Armenia’s Wastewater Treatment Plants in Operation

<table>
<thead>
<tr>
<th>Municipality</th>
<th>Wastewater Treatment Type and Level</th>
<th>Year placed in operation</th>
<th>Funding sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gavar*</td>
<td>New construction, conventional, mechanical only</td>
<td>2012</td>
<td>EBRD – Lake Sevan Environmental Project; RA government</td>
</tr>
<tr>
<td>Martuni*</td>
<td>New construction, conventional, mechanical only</td>
<td>2012</td>
<td>EBRD – Lake Sevan Environmental Project; RA government</td>
</tr>
<tr>
<td>Vardenis*</td>
<td>New construction, conventional, mechanical only</td>
<td>2012</td>
<td>EBRD – Lake Sevan Environmental Project; RA government</td>
</tr>
<tr>
<td>Parakyar**</td>
<td>New construction, artificial lagoon – mechanical &amp; biological</td>
<td>2014</td>
<td>UNDP GEF Small Grants Program, Armenia; Global Water Partnership DFID WACDEP Program; Parakyar Municipality; JINJ LTD Armenia</td>
</tr>
<tr>
<td>Dilijan*</td>
<td>Rehabilitation, conventional, mechanical only</td>
<td>2015</td>
<td>EBRD – Armenia’s Small Municipalities Water Project; EIB; NIF; RA government</td>
</tr>
<tr>
<td>Jermuk*</td>
<td>Rehabilitation, conventional, mechanical only</td>
<td>2015</td>
<td>EBRD – Armenia’s Small Municipalities Water Project; EIB; NIF; RA government</td>
</tr>
</tbody>
</table>


Target 10. Increase access to safe drinking water

In the past 15 years, Armenia has increased access to safe drinking water for its population. This target was tracked by three indicators: number of hours of water availability to households, access to centralized water supply to rural areas, and share of rural population using transported water. Armenia has shown progress on all these indicators.

Daily duration of water: According to data reported by the water service provider to communities outside the capital Yerevan, the annual average number of hours of drinking water available to non-Yerevan areas has been steadily increasing to 17 hours per day. There is no independent verification of these numbers. The MDG 2015 target was to have 16 hours of drinking water supply per day for communities outside of Yerevan.

Access to safe water in rural areas: According to annual household survey data, Armenia has made progress in making safe drinking water in rural areas available to a greater portion of the population. In 2000, 36% of rural area populations did not have access to safe drinking water (centralized water supply). In 2013, 4% did not. The MDG 2015 target was to have less than 5% of the population without access to safe drinking water. It is highly likely that the same levels will be maintained for 2014 and 2015.

Transported water in rural areas: Annual household surveys suggest that of the less rural population are using transported water today than they were 15 years ago. In 1999, 18% of the rural population was using transported water. As of 2013 almost no rural communities use this source.63 The MDG 2015 target was to have less than 1% of the rural population relying on transported water.

63 There is, however, anecdotal evidence that some urban communities, especially Armavir in the Armavir Marz, prefer to purchase trucked-in water for drinking.
Target 11. Improve housing conditions

MDG 7 also included improving housing conditions as a target. Three national indicators were selected: ratio of urban households living in slum housing per 1,000 households, proportion of population with access to improved sanitation (flush toilets), and community access to natural gas.

**Urban slum households:** The ratio of urban households living in slum housing (defined as those living in non-conventional dwellings) stands at 28 to 1,000 urban households (or more specifically, 14,091 out of total of 511,065 urban households). This is according to the 2011 Population Census of Armenia (Table 8.1 of the Living and Housing Conditions chapter of the findings report)\(^{64}\) where housing types of urban households are divided into conventional (houses or parts of houses, apartments or parts of apartment buildings, and cottages) and shelters/temporary dwellings, dormitories, and other dwellings. These latter three types of housing are aggregated to represent “non-conventional” housing, the proxy for “slum” housing. It is not entirely clear what previous progress reports considered as “non-conventional” housing. Hence, it is difficult to compare.

![Share of dwellings with gas supply, %](image)

**Access to improved sanitation:** According to MDG Indicators Database and armdevinfo.am, the proportion of the population with access to improved sanitation (i.e., access to flush toilet) has increased slightly from about 60% in 2000 to 70% in 2013.\(^{65}\) Given that Armenia over the past 13 years has had an average improvement of 1% per year, the MDG 2015 target of more than 85% of the population having access to improved sanitation is not likely to be achieved.

**Gasified residences:** According to the annually published Housing and Public Utilities reports of NSS, by the end of 2014, 77% of all dwellings (which includes apartment units and single-family detached homes) in the country were gasified.\(^{66}\) There was an urban-rural disparity, with 87% of urban dwellings and 56% of rural dwellings gasified. When compared with 2005, gasification of dwellings has increased both in rural and urban areas, though the growth has been faster in urban areas.

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\(^{64}\) See Table 8.1 of the Population Census 2011 results on Living and Housing Conditions (http://www.armstat.am/file/article/1.63ijaq_8-811-908.pdf).

\(^{65}\) Source: Social Snapshot and Poverty in Armenia publications – Non Monetary poverty section, NSS.

\(^{66}\) The indicator identified in the Armenia 2005 and 2010 was “Proportion of communities with more than 300 households with access to reliable natural gas supply, %”. The authors of this report, however, could not find readily available data sources for that indicator. The decision was made to identify the number of housing units gasified as a proxy for availability of gas supply to communities around the country.
Challenges and the way forward

The Prospective Development Strategy of Armenia for 2014-2025 warns that “... it is especially important that parallel to the government’s efforts for improving the rates of economic growth, measures should be taken to reduce as much as possible the associated environmental risks” (p. 131). The Prospective Development Strategy warns of environmental risks associated with:

- expansion of the mining industry,
- illegal forest logging,
- overexploitation of water resources due to rapid development of subsectors using underground water resources and as a result of climate change,
- increased desertification risk.

This is a good starting diagnosis of environmental dangers facing Armenia. There are, however, more environmental concerns that should be added to this list. These include but are not limited to: managing the health of Lake Sevan (including its aquatic life and water quality beyond dissolved oxygen rates); effectively monitoring and managing forests; monitoring and managing biodiversity; monitoring and managing specially protected areas; monitoring and enforcement of environmental regulations; monitoring and cleanup of water and soil, especially in mining communities as well as lands deteriorated due to poor agricultural practices; industrial pollution and solid waste management; and strong emphasis on education and awareness about the environment.

The Prospective Development Strategy recognizes some of the broader issues. It outlines 15 key environmental priorities including legislative reforms; management and governance capacity building (including for specially protected areas, forests, and water basins); environmental impact assessment and monitoring capacity; increase in environmental fees and tariffs; continue work on Lake Sevan; legal mechanisms for promoting “green” innovation; education and awareness; among others.
DEVELOP A GLOBAL PARTNERSHIP FOR DEVELOPMENT
### GOAL 8. Develop A Global Partnership For Development

<table>
<thead>
<tr>
<th>GLOBAL TARGETS</th>
<th>GLOBAL INDICATORS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Target 8.A.</strong> Develop further an open, rule based, predictable, non-discriminatory trading and financial system. Includes a commitment to good governance, development and poverty reduction both nationally and internationally.</td>
<td>Some of the indicators listed below are monitored separately for the least developed countries (LDCs), Africa, landlocked developing countries and small island developing states. <strong>Official development assistance (ODA)</strong>&lt;br&gt;8.1 Net ODA, total and to the least developed countries, as percentage of OECD/DAC donors’ gross national income&lt;br&gt;8.2 Proportion of total bilateral, sector-allocable ODA of OECD/DAC donors to basic social services (basic education, primary health care, nutrition, safe water and sanitation)&lt;br&gt;8.3 Proportion of bilateral official development assistance of OECD/DAC donors that is untied&lt;br&gt;8.4 ODA received in landlocked developing countries as a proportion of their gross national incomes&lt;br&gt;8.5 ODA received in small island developing states as a proportion of their gross national incomes</td>
</tr>
<tr>
<td><strong>Target 8.B.</strong> Address the special needs of the least developed countries. Includes: tariff and quota-free access for the least developed countries’ exports; enhanced program of debt relief for heavily indebted poor countries (HIPC) and cancellation of official bilateral debt; and more generous ODA for countries committed to poverty reduction.</td>
<td><strong>Target 8.C.</strong> Address the special needs of landlocked developing countries and small island developing States (through the Program of Action for the Sustainable Development of Small Island Developing States and the outcome of the twenty-second special session of the General Assembly)</td>
</tr>
</tbody>
</table>
| **Target 8.D.** Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term. | **Target 8.E.** In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries | **Target 8.F.** In cooperation with the private sector, make available the benefits of new technologies, specially information and communications | **NATIONAL TARGETS** | **NATIONAL INDICATORS**<br>1. Freedom of press index, absolute value<br>2. Voice and accountability, governance score<br>3. Political stability, governance score<br>4. Government effectiveness, governance score<br>5. Regulatory quality, governance score<br>6. Rule of law index, governance score<br>7. Control of corruption, governance score<br>8. Corruption perception index, rank<br>9. The ratio of tax revenues in GDP, %

**Target 12.** Ensure such level of governance, political rights and responsibility and protection of human rights that would contribute to the sustainable development of Armenia
Target 13. In cooperation with the private sector, make available, by 2015, the benefits of new technologies, especially information and communications.

1. Telephone mainlines and cellular subscribers per 100 population
2. Personal computers in use per 100 population
3. Internet users per 100 population

MDG 8: Scorecard

<table>
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</thead>
<tbody>
<tr>
<td>1. Freedom of press index, absolute value</td>
<td>64</td>
<td>66</td>
<td>61</td>
<td>62</td>
<td>&lt;+30</td>
<td>Not achieved</td>
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<tr>
<td>2. Voice and accountability, governance score</td>
<td>-0.41</td>
<td>-0.57</td>
<td>-0.86</td>
<td>-0.60</td>
<td>-0.55</td>
<td>&gt;=+0.83</td>
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<tr>
<td>3. Political stability, governance score</td>
<td>-0.80</td>
<td>-0.12</td>
<td>-0.02</td>
<td>+0.07</td>
<td>-0.21</td>
<td>&gt;=+0.43</td>
</tr>
<tr>
<td>4. Government effectiveness, governance score</td>
<td>-0.57</td>
<td>-0.14</td>
<td>-0.16</td>
<td>+0.07</td>
<td>-0.17</td>
<td>&gt;=+0.37</td>
</tr>
<tr>
<td>5. Regulatory quality, governance score</td>
<td>-0.13</td>
<td>+0.13</td>
<td>+0.31</td>
<td>+0.23</td>
<td>0.22</td>
<td>&gt;=+0.62</td>
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<tr>
<td>6. Rule of law index, governance score</td>
<td>-0.46</td>
<td>-0.45</td>
<td>-0.29</td>
<td>-0.31</td>
<td>-0.32</td>
<td>&gt;=+0.11</td>
</tr>
<tr>
<td>7. Control of corruption, governance score</td>
<td>-0.65</td>
<td>-0.61</td>
<td>-0.63</td>
<td>-0.47</td>
<td>-0.44</td>
<td>&gt;=+0.12</td>
</tr>
<tr>
<td>8. Corruption perception index, CPI score*</td>
<td>2.5</td>
<td>3.1</td>
<td>2.9</td>
<td>3.6</td>
<td>3.7</td>
<td>&gt;5</td>
</tr>
<tr>
<td>9. The ratio of tax revenues in GDP, %</td>
<td>14.8</td>
<td>14.0</td>
<td>20.3</td>
<td>21.9</td>
<td>21.9</td>
<td>&gt;=22.5</td>
</tr>
</tbody>
</table>

Source: (1) World Bank, Worldwide Governance Indicators; (2) NSS – MDG database; (3) NSS – Annual Reports on Social and Economic Situation; (4) ITU database; (5) Freedom House ranking of “Freedom of Press”.

* Until 2009 CPI scores were presented in the scale from 0 to 10. Since 2009, Transparency International revised its scoring scale to be from 0 to 100. Armenia’s CPI score for 2013 was 36. For compatibility purposes this figure is divided by 10, to get a comparable number.

**ITU database gives a different numbers for these indicators.

68 http://www.armstat.am/?mid=180

Context

During the last decade the Government has undertaken comprehensive reform efforts towards strengthening democratic institutions in Armenia and improving the quality and effectiveness of public governance. Some of the major initiatives include:

- Establishment of an e-governance system, available from all government websites at www.e-gov.am, which provide transparency to all aspects of governing and plays a critical role for improving public governance and reduction of corruption risks;
- The Integrated Social Services System was introduced in 2010 launching one-window services for the population;
- Reforming the Law on Procurement, to decentralize the system of procurement, reduce conflict of interests between the participants of the procurement process and improve the procurement service via introducing procurement specialists;
- Reforming the public service system, i.e. the Law on Public Service, to define the codes of ethics for public servants and high-ranking officials; requirement for the declaration of property and income; establishment of the Ethics Commission for High-Ranking Officials;
- Tax reforms, such as: the introduction of electronic tax services, the introduction of an automated system of risk management and selection of taxpayers subject to inspection. Personified Record Keeping System where introduced in 2014, allowing the taxpayers to track their taxes and accumulations in their personal pension accounts;
- State registration of legal entities was improved significantly in 2010;
- The introduction of social security numbers in 2005 and their further improvement to public identification numbers in 2012 improved the linking of different state administrative databases and tracking the services to population;
- Electronic payment terminals for state duties, administrative fines and other payments, stipulated for rendering passport services where installed at passport divisions;
- The adoption of the anti-corruption strategy in 2003 and further revision in 2009 and 2014 (together with a number of supporting policy documents), though its effectiveness has been questioned among civil society and the general public at large. To further the Government’s efforts, an Anti-corruption Council and Expert Task Force were created in February 2015, which approved a new Anti-corruption Strategy in its first meeting in July, 2015. In September 2015, a working forum was established to facilitate dialogue and cooperation between the Government, civil society and international organizations.

Target 12. Ensure such a level of governance, political rights and responsibility and protection of human rights that would contribute to the sustainable development of Armenia

A wide range of institutional reforms implemented during the last decade improved Armenia’s indicators in this area. These included progress in freedom of press, government effectiveness and accountability, quality of regulation and rule of law, control of corruption and corruption perception. However, progress in this sphere has been slow across all the indicators, and Armenia has not been able to reach its targets. It is unlikely to achieve them by the end of 2015.

Target 13. In cooperation with the private sector, make available, by 2015, the benefits of new technologies, especially information and communications

Information and communications technologies (ICT) have become widely available and accessible to the population of Armenia. In 2013, the number of computer and internet users per 100 population increased to about 50% and over 67%, respectively. There were 132 mobile telephone subscribers per 100 people. Armenia reached this target under MDG 8.

71 The Concept Paper on Fight against Corruption in the Public Administration system was adopted (Protocol Decision No 14 of the Sitting of the Government of the Republic of Armenia); In December, 2014, Second compliance report on Armenia was adopted during the 66th Plenary Meeting of the GRECO. GRECO congratulates Armenia on the substantial reforms carried out to suitably address all nineteen recommendations of the Third Round Evaluation related to the “Incriminations (ETS I73 and 191, GPC 2)” and “Transparency of Party Funding”.
Challenges for building a truly free and fair environment for economic growth. During the last two decades, Armenia has made considerable progress towards improving its performance in the indicators under MDG 8, such as good governance, development of democratic institutions, and freedom of expression. However, these indicators remain one of the major challenges for Armenia in the medium term. The progress that has been made is far from being satisfactory for the development of a sound civil society and an effectively functioning market economy.

The process of implementation of the MDGs has demonstrated that the major precondition for providing a sustainable solution to the social, environmental and other issues is a strong, well-functioning and resilient economy.

The Armenian economy can function well and provide sustainable growth, but only if there is a truly fair environment with equal opportunities for all.
4. SDG PRIORITIZATION

Global SDGs

The SDGs, which are included in the Declaration of the Heads of State and Government and High Representatives, were adopted at the UN Sustainable Development Summit in New York on 25-27 September 2015.22

1. End poverty in all its forms everywhere
2. End hunger, achieve food security and improved nutrition, and promote sustainable agriculture
3. Ensure healthy lives and promote wellbeing for all at all ages
4. Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all
5. Achieve gender equality and empower all women and girls
6. Ensure availability and sustainable management of water and sanitation for all
7. Ensure access to affordable, reliable, sustainable and modern energy for all
8. Promote sustained, inclusive and sustainable economic growth, full and productive employment, and decent work for all
9. Build resilient infrastructure, promote inclusive and sustainable industrialization, and foster innovation
10. Reduce inequality within and among countries
11. Make cities and human settlements inclusive, safe, resilient and sustainable
12. Ensure sustainable consumption and production patterns
13. Take urgent action to combat climate change and its impacts (taking note of agreements made by the UNFCCC forum)
14. Conserve and sustainably use the oceans, seas and marine resources for sustainable development
15. Protect, restore and promote sustainable use of terrestrial ecosystems, sustainably manage forests, combat desertification and halt and reverse land degradation, and halt biodiversity loss
16. Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels
17. Strengthen the means of implementation and revitalize the global partnership for sustainable development

As stated in the Final Outcome Document on the SDGs: all countries “will work to implement the Agenda within own countries and at the regional and global levels, taking into account different national realities, capacities and levels of development and respecting national policies and priorities. We will respect national policy space for inclusive and sustainable economic growth, in particular for developing states, while remaining consistent with relevant international rules and commitments.”

SDG nationalization process in Armenia

On the way to shaping a global development agenda, Armenia was among first 50 countries to hold national consultations on the post-2015 development agenda. In partnership with the Government of Armenia, the UN Armenia Country Team formed a Post-2015 Task Force, co-chaired by the First Deputy Minister of Territorial Administration, and the UNFPA Assistant Representative, and initiated a series of town hall meetings that brought people together from all sectors of society to discuss the national development priorities for the next fifteen years.

The meetings stimulated dialogue among participants and ensured that no perspective or opinion was overlooked. More than 3,000 people were consulted and over 2,000 ideas and recommendations on the future development agenda were shared. The findings of the nationwide discussions about Armenia’s development priorities fed into the preparation of the global development agenda.73

Many of the challenges identified through this participatory process are in line with the Government’s Prospective Development Plan for 2014 to 2015 adopted on March 27, 2024.

The National Council on Sustainable Development in cooperation with international and national organizations produced the Rio+20 National Assessment Report (2012) and the PostRio+20 Strategy Plan (2015). The Government of Armenia is currently discussing the latter. The PostRio+20 Strategy Plan offers concept notes and action plans on 11 key directions essential for sustainable development, including energy efficiency and renewable energy, mining, green economy, green cities, solid waste, and education, among others. Importantly, the challenges and development prospects identified and areas for development and challenges the country is facing that were voiced and agreed to during the town hall meetings were, to a large extent, in line with the priorities included in the Government’s Advanced Development Plan for 2014 to 2025 adopted on March 27, 2014.

Approaches and principles for prioritization

This section presents the main approaches and principles suggested for the prioritization of the SDGs in Armenia, based on which the SDG priority directions have been identified in this report.

1. **Address the root causes of the issues**

In parallel to addressing pressing social, environmental and other issues, it is critical to address not only the consequences, but also the root causes of those issues. This approach is focused on preventing the problems, as well as ensuring the sustainability of the results of implemented reforms.

For instance, under the MDG process in Armenia, the availability of funding was essential for addressing poverty, child and maternal health issues. However, the sustainability of solutions to such alarming issues as child stunting and malnutrition and disruption of child vaccinations depend not only on the size of funding, but quite significantly on the level of education and knowledge among parents and the general public. The same applies to gender issues, the solution of which depends very much on the level of education and awareness and perceptions among the population. Thus, for consistent and sustainable problem solving it is critical to improve the knowledge/education level among the population and develop human capital.

2. **Identify and address binding constraints**

The ability of a country to achieve its social and economic development goals is limited by binding constraints. In order to enhance the country’s ability and further its goals, it is critical to identify the key binding constraints and address them. Based on the MDG performance, key constraints in Armenia include:

- Availability of funds to implement economic and social programs. As noted earlier, ensuring sufficient funding for the implementation of all social programs, including poverty reduction, education, healthcare, gender equality, is always a critical factor for effective implementation and sustaining the achieved results. It is and will always be a challenge for any country;
- Effectiveness of the Government to design and implement economic and social development policies and programs, to collect tax revenues and manage them, to set realistic targets, and to effectively prioritize and allocate funds to programs;
- Capability of human capital, and knowledge and skills of the population necessary for developing and operating economic and social concepts and initiatives.
As shown in the chart above, a strong economy is needed for the generation of funds. To operate effectively and grow, the economy needs a sound business and social environment and the correct incentives for business generation and growth, as well and innovative and highly skilled human capital. Additionally, good governance is necessary for ensuring a sound business and social environment.

3. **Learn from MDG implementation process and ensure consistency and continuity of MDGs**

Some of the MDGs are yet to be achieved. For consistency and continuity, it is important to not lose the link with the MDGs.

In addition, the indicators tracked for MDGs failed to fully capture all of the social and environmental risks, failed to meaningfully track the synergies between economic growth, social security and development and environmental sustainability. These are challenges that should be addressed in the upcoming process of adapting and localizing SDGs for the 2015-2030 period.
Identification of effective and, at the same time, realistic indicators is essential for MDG implementation. In some instances, Armenia’s MDG indicators were not met, despite the general good standing in a particular area. This refers specifically to the indicators on education and environment protection.

4. Sustainability of economic, social, and environmental achievements

In Armenia, economic development and the fight against poverty as well as the implementation of programs in education, healthcare and other social areas suffered greatly as a result of external economic shocks. The key midterm challenge for the Government is to mitigate the economic and social impacts of external shocks - the global financial crisis, and the economic downturn in Russia - while continuing policy and institutional reforms essential for recovery and long-term development. To this end, it is critical to increase the economy’s strength and resilience to external shocks, and develop human capital capable of creating new opportunities for development.

5. Synergies with the challenges and priorities identified through civil society dialogue

The participatory process is necessary for ensuring that stakeholder views and interests are effectively reflected in the prioritization process and target setting. It is important that ongoing process should be continued. Up to this point, the following priority areas have been identified through town hall meetings:

1. Growth and Employment
2. Addressing Inequality
3. Food security
4. Environmental protection for sustainable development
5. Good Governance
6. Health

6. Synergies with the Government priorities set out in the ADS

The Prospective Development Strategy of the Republic of Armenia for 2014-2025 sets out the following four national priorities:

- growth of employment;
- development of human capital;
- improvement of social protection system; and
- institutional modernization of public administration and governance.

Environmental sustainability is not directly referred to as a priority, but it is a cross-cutting issue that could be part and parcel of these national priorities. Growth of employment can take place through green growth policies.

Preliminary suggestions for priorities

Taking into account Armenian realities, as well as the series of stakeholder consultations, the following priorities have been identified, with indication of relevance to and alignment with SDG 17. They are identified based on the approaches and principles discussed above, and are grouped based on the logical framework depicted above.

1. Growth economy

The process of implementation of the MDGs has demonstrated that a major precondition for the sustainable solution of social, environmental and other issues is a strong, well-functioning and resilient economy.

A critical moment for ensuring economic growth will be related to the Armenian Government’s ability to establish a truly fair environment with equal opportunities for businesses and investment. Fair competition and supportive business and investment environment will be a priority for stimulating economic activities and promoting productivity growth.
The alignment of this priority with SDG 17 is as follows:

- It is directly linked with SDG 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment, and decent work for all, and SDG 9: Build resilient infrastructure, promote inclusive and sustainable industrialization, and foster innovation.
- It is indirectly linked to the SDG 10; Reduce inequality within and among countries, particularly in terms of ensuring equal opportunities for social, economic and political inclusion of all.
- It will contribute to job generation for the population to earn income, and thus, help to fight poverty (SDG 1 and SDG 2) and to the generation of funds to support the implementation of all the other SDGs. It will be important to ensure adequate labor remuneration to eliminate the working poor phenomena.

2. Development of human capital

Education is a cross cutting sector and has a positive multiplier effect on progress across all development areas.

The alignment of this priority with SDG 17 is as follows:

- It is directly linked with SDG 4 - Ensure inclusive and equitable quality education and promote life-long learning opportunities for all.
- It is a cross-cutting issue and indirectly will support the implementation of other SDG, including health and education, urbanization and peaceful life, sustainable development and environment.

The education system should not be isolated from real life and its associated challenges in the economy and society. It should dynamically reflect, in a timely manner, the social, economic and political needs of the country.

Proper links between education and business entities should be clearly regulated and became mandatory for supporting the youth with job placement. Special stress should be put on linking vocational education with labor market’s needs, making them more flexible in preparing specialists needed for the country.

3. Improved governance (institutional modernization of the government system)

Good governance is a cross-cutting factor and is necessary for designing and implementing economic and social development policies and programs; collecting tax revenues and managing them; setting out realistic targets and effective prioritization; and allocating funds to social and economic programs.

This priority is directly linked with SDG 8 – “Promote sustained, inclusive and sustainable economic growth, full and productive employment, and decent work for all.”

In particular, areas to be addressed shall include:

- The ability to establish a truly open business and investment environment in the country, which will support business generation and growth. It is essential that the Government effectively promotes the development-oriented policies that support productive activities, decent job creation, entrepreneurship, creativity and innovation, and encourage the formalization and growth of micro-, small- and medium-sized enterprises, including through access to financial services;
- Reduced corruption;
- Governance and regulation effectiveness;
- Further enhancement of the use of ICT to improve the accessibility, speed, transparency and management of GoA programs and spending. Access to information about services available and eligibility criteria, as well as of outcomes of the programs to wider public and media is among main preconditions for improved performance of GoA agencies.
- Improvement of client services provided by public servants; attitudinal change towards their beneficiaries and provisions for reducing direct contact between decision makers and beneficiaries prove to be effective tools against corruption.
- Effective program design and budgeting. Effective quantitative and qualitative indicators should be developed to track regularly the effectiveness, and efficiency of government interventions, and be used to justify the importance of state-funded programs based on outcomes.
- Enhanced capacity in providing targeted support based on needs and turning from passive social support programs to promotion of labor market participation.
4. Gender equality
Gender equality should remain one of the main priority areas. In effect, women in Armenia have limited opportunities to hold decision making positions in economic and business sectors, as well as in the political life of the country. Women also face more difficulty in finding well-paid jobs.

This is directly aligned with the SDG 5 – “Achieve gender equality and empower all women and girls”. The targets and indicators under MDG 3 – “Promote Gender Equality and Empower Women” - shall continue to be priorities, and shall be further amplified and complemented by additional targets to ensure equal opportunities for women in economic and business as well as civil and political life of the society.

The main areas requiring attention should include:
- Ensuring equal job opportunities for women and men, including their presence in decision making positions, and equal access to well paid jobs;
- Ensuring awareness among the pupils, students and the general public about the concepts of gender and gender equality;
- Participation of women in political decision making, including participation in the Parliament, the central and regional government bodies and in local self-governance;
- Reduction of all types of violence against women and girls in the public and private spheres, including all trafficking and sexual and other types of exploitation;
- Ensuring universal access to sexual and reproductive health and reproductive rights;
- Eliminating harmful practices, such as child, early and forced marriages.

5. Health
A healthy population is critical for achieving sustainable development of the society and the economy. This area is reflected in the SDG 3. “Ensure healthy lives and promote well-being for all at all ages.” Similarly, in the area of “gender equality”, the targets and indicators under MDG 4, MDG 5, and MDG 6 shall continue to be priorities, and shall be further amplified and complemented by additional targets to ensure availability as well as accessibility of quality healthcare for all.

For ensuring accessibility of quality healthcare for all, i.e. achieving universal health coverage, it is important to address a number of inter-linked and mutually supporting aspects: (a) ensure adequate public funding for the development of the healthcare system; (b) create an environment supportive to the development of a good quality and affordable private healthcare system; (c) further develop the health insurance system to effectively cover financial risks. The main areas requiring attention should include:
- Improved maternal health/reduction of maternal mortality;
- End the epidemics of AIDS, tuberculosis, malaria and other diseases;
- Improved child health;
- Universal access to sexual and reproductive healthcare services;
- Ensuring universal health coverage, including financial risk protection, and access to quality healthcare services and access to safe, quality and affordable essential medicines and vaccines for all;
- Enhanced funding sources and mechanisms for healthcare system;
- Development of a health insurance system that can provide effective incentives for both the healthcare service providers and the population.

6. Sustainable development (improved environmental protection)
To ensure sustainable development, it is essential that there is a clear understanding that economic growth and sustenance of environmental health are not different, independent pursuits. Not only should there be a concerted effort to identify the synergies and overlaps between economic and environmental policy, but serious monitoring and compliance institutions need to be developed as a matter of national priority.

Based on the forgoing analysis of MDG’s, the review of Armenia’s development strategy and policy documents74, and the results of multi-stakeholder in-country discussions75 several directions and approaches for localization of SDG 17 have emerge:
- While there is always room to improve legislation and technical norms, Armenia’s challenge for the coming 15 years is to strengthen its governance and institutional capacities.

- Special focus should be placed on the mining, fishing, and forestry sectors of the economy, monitoring and adequately governing their use of, and impact on, natural resources.
- There is also recognition that the green-growth and green-economy principles should be integrated into Armenia’s economic and employment growth policies. Jobs in the “green” fields tend to be knowledge-intensive and high paying.
- Following the successful examples of many economies, there should be focus on decoupling of natural-resource use and economic growth. Use of energy, water, and land per unit of GDP should decrease. There are ample success stories around the world from which Armenia can learn.
- Many are also calling for adequate pricing of natural-resource use and incurred damages. Armenia has made progress on incorporating ecosystem thinking and valuation into its policy discourse. Concerted efforts should be made to translate these into pricing and financial mechanisms.
- The success of increasing the number and overall surface area of specially protected areas should be followed by concerted effort to manage these protected areas and their biodiversity.
- Trends of deforestation, desertification, and water overexploitation have to be reversed. The focus should be on restoration.
- Lake Sevan should continue to be the subject of concerted policy and programmatic focus. High-level focus should also be placed on forests, salinized lands, and underground water resources.
- Solid waste management, percepts of circular economy, sustainable production and consumption should be linked and advanced.
- Emphasis on education and awareness of citizens, civil servants, and businesses on the environment and the relationship of human activity to the natural environment should be amplified.

7. Data

Among the primary preconditions for measuring progress towards the targets, the collection of quality, accessible, timely and reliable disaggregated data is of great importance. It is recommended if before setting up the benchmarks for SDG targets the National Statistical Service established a clear methodology and relevant division for collecting the necessary data using the same comparative methodology over time. The methodology should be also linked with international approaches for measuring the same indicators. Certain actions are needed to ensure that the data necessary for measuring the progress, achievements and challenges during the timeframe of defined targets in the Prospective Development Strategy of the Republic of Armenia and International SDGs alike are clear, understandable and have reliable sources or estimation methodologies.