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ASSESSING THE IMPACT OF THE ECONOMIC CRISIS ON VULNERABLE COMMUNITIES

THE GOAL OF THIS NEEDS ASSESSMENT PROJECT IS TO PRODUCE A REPORT DETAILING THE NEEDS AND EFFECTS OF THE CURRENT ECONOMIC CRISIS RESULTING FROM THE PANDEMIC, AS WELL AS THE WARS OVER NAGORNO KARABAGH, ARMENIA AND UKRAINE, WITH REGARDS TO THE LIVES OF LGBTQI, SEX WORKER AND HIV AFFECTED COMMUNITIES IN ARMENIA.



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PREFACE

LGBTQI people, sex workers and HIV affected people are some of the most marginalized and vulnerable communities who are regularly discriminated against by all the sectors of the Armenian society. They represent a heterogeneous group with specific health, personal and economic needs. The COVID 19 pandemic, which was followed by the Nagorno Karabagh war in 2020, and Armenia - Azerbaijani war in 2022 has left a deep mark on Armenian society, but the effects have been felt within the LGBTQI and sex worker communities to a greater degree.

Notably, the effects of sanctions on Russia have been deepening the economic crisis in Armenia due to the heavy dependence of the Armenian economy on the Russian economy. Armenia's vulnerability has increased as a result of the war in the fall of 2020 and 2022. Now, Russia also provides peacekeeping operations on the borders and in Nagorno-Karabakh, an initiative supported by Armenian Prime Minister, who envisages its extension beyond 2025. Last July, he even requested reinforcements along the common border with Azerbaijan.

In these circumstances when Armenian society experiences more poverty, the vulnerable populations in Armenia become even more excluded from social and civic life and unable to protect themselves from discrimination in the work place, while seeking safe and secure housing, healthcare, harassment from their family members as well as violence and attacks by the extremist groups, transphobic, homophobic and whorephobic people.

During 2021-2022, the Right Side Human Rights Defender NGO have documented increased rights violations of LGBTQI people, sex workers and HIV affected people in Armenia in accessing unbiased healthcare, housing and jobs. According to our researches, many of our beneficiaries from these marginalized communities have suffered even more from the effects of the economic crisis because of the lack of work, secure housing, social assistance programs and inclusive healthcare services. Till now we continue to receive a number of requests from trans sex worker community and cis, trans and MSM HIV affected populations for humanitarian support with basic needs such as housing, food, healthcare and psychosocial support.

Despite all the humanitarian and social support provided by the NGOs working for addressing vulnerable communities' needs during the recent years, there has not been carried out needs assessment among the community with regards to housing, job and food insecurity in order to be presented to relevant decision making bodies in Armenia for advocacy of inclusion of vulnerable groups' in state support programs during challenging situations like pandemic, war, economic crisis, earthquake, political unrest, etc.

Thus, Right Side NGO has organized meetings with 300 people from the LGBTQI, sex workers and HIV positive communities from all 11 regions of Armenia (around 15 - 30 people per region) and carried out surveys among them on the concerns, issues and challenges affecting their life and well-being in the current socio-economic context of Armenia.

The goal of this activity is to have a detailed information about the needs and effects of the current economic crisis resulting from the pandemic, as well as the wars over Nagorno Karabagh, Armenia and Ukraine, with regards to the lives of LGBTQI, sex worker and HIV affected communities in the Republic of Armenia and to use the fact-based paper for advocacy purposes.

ANALYSIS

ABSTRACT

The LGBTQI, sex worker and HIV positive communities who basically have different sexual orientation, work, lifestyle, are facing discrimination, hate speech, hate crimes, exclusion from the society, thus quite often, meet with obstacles to satisfy their basic needs and requirements. LGBTQI individuals have to pretend as heterosexuals, sex workers are afraid to reveal about their work and HIV positive people try their best not to reveal their status to gain a place in Armenian society. There are many elements directing LGBTQI, sex worker and HIV positive communities to stress and disturbance that emerge as a result of stress. Social oppression is one of the outstanding elements. Many people attempt to live in compliance with Armenian traditions, customs and the principles of the religion embraced by the vast majority. Negative attitudes towards the communities stemming from the prejudice that they are mentally ill, deviant, immoral, or sinners. They have to pretend what they are not or take great risks by revealing their real identities or social status. Stigma and discrimination being a societal creation are not addressed properly on our local context which becomes the cause of self-stigma highly affecting on the mental and physical health of our beneficiaries. This exclusion and ostracism vary from the simplest personal relations to the most general social ignorance, exclusion, ostracism, working simultaneously together, and even violate the human rights and fundamental freedoms of the LGBTQI, sex workers and HIV positive community members.

In this study, we examined the social problems the LGBTQI, sex workers and HIV positive communities from all 11 regions of Armenia go through and their current needs and requirements. Data were collected using semi structured interviews that included twenty-one open- and close-ended questions. We used qualitative research methods to assess the interviewees' perception of the social problems they encountered in the places they were living. The sample is composed of 300 LGBTQI, sex workers and HIV positive participants, residing in different cities and villages of Armenia. During the study all the questions were asked verbally and the answers were recorded and transcribed into written format directly. Those recorded answers were organized with codes and numbers. Additional questions were specified beforehand in order to obtain information or clarify previous questions. Throughout the interviews, after answering the question prepared before, for the reactions and the comments, participants were asked to wrap up their story on 5

sentences. Grouping was utilized to classify and encode the same reactions and comments and together with data collection, analysis was conducted with the assistance of these methods.

Our NGO findings demonstrate that LGBTQI people, sex workers and HIV positive individuals are exposed to verbal harassment and physical abuse, they are not accepted by the Armenian society and are not able to perform social activities in their regions of origin or in the places they have moved to. In today's Armenia, internal displacement from the conflict zones and immigration from Russia have increased on account of the situations LGBTQI, sex worker and HIV positive communities are exposed to. The community members have to leave their homes in the cases that they are ostracized from the social environment, exposed to attacks and hatred, their job opportunities are limited and they are deprived of having their own enterprise or family support.

Thus, through this study, we aim to find out the social problems the LGBTQI, sex worker and HIV positive communities encounter and their abilities to deal with such problems and when they cannot, their needs and requirements to continue their life.

SURVEY FINDINGS

The survey has covered LGBTQI, sex worker and HIV positive individuals across a wide age group. The median age of the respondents is 24 and the oldest age is 64 years. Every fourth respondent is in the age range of 18-25.

In this research, 22 of the participants are working in the hospitality and events management sector, 2 of them are working in the accountancy, banking and finance sector, 7 individuals do charity and voluntary work, 1 person is involved in creative arts and design, 5 people are working in the engineering and manufacturing sector, 9 of the respondents are working in the environment and agriculture sector, 3 of the participants are involved in the sector of information technology, 13 people are working in the leisure, sport and tourism sector, 16 of them are doing marketing, advertising and PR work, 3 individuals are involved in the media and internet sector, 8 people are busy with construction, 7 of them are in the public services and administration, 1 participant is in the retail sector, 5 of them are working in the education sector, 8 people are involved in the transport and logistics, 64 of them are sex workers, 14 of them are students, 112 of the respondents do not work.

The survey finds 7 in every ten people living in Armenian villages. Among the survey respondents 72% live with their family members or partners. The survey findings show that the housing situation of a substantial proportion of the respondents is unstable. 43% of the respondents has housing issues, they are living for rent or by living with families they are obliged to face hatred,

domestic violence, bad attitude or hide their status or characteristics. It is common for Trans sex workers to be homeless or living in overcrowded conditions or living in places which may be detrimental to their health and well-being. While discussing housing situation, one of the Trans sex workers living with HIV mentioned: “Paying the apartment rent is just exhausting me, I have no other choice than doing sex work even when I am feeling too weak, depressed or scared in order to have a roof over my head, to keep my existence”. 47.6% mentions that currently, because of the increase in apartment rents by 3-4 times in connection with the large number of Russians who have moved to Armenia, they are spending a major proportion of their income on housing which reduces the money they may have for other necessities of life, like buying hormones or medicines, taking HIV prevention measures, sustaining their well-being, etc.

The majority of the respondents (71%) mention that they speak only Armenian, only 13.6% speak English. It is possible that non-English speaking respondents could have been inadvertently discriminated while seeking education, work, career development.

The educational level of respondents ranges from the elementary school to the University level. 16.3% of the LGBTQI, sex worker and HIV positive communities have not completed high school education with no certificate or diploma. Only one out of four respondents have post-secondary education. 9.3% of the community members have University education.

The survey findings show that 47.6% of the respondents use drugs. According to them, they may engage in sex work as way to either purchase drugs or exchange a service for drugs. Some of the respondents engage in drug use as a means to cope with their problems or overcome trauma and chronic stress occurring during their work time.

Concerning the health situation of the respondents, only 24.3% rate their health condition as unchanged during and after COVID-19 pandemic and current political situation, 48.6% of the respondents have rated their health condition as worsened. In addition to asking about their health condition, the survey findings show that an overwhelming percentage (67.6%) of the community have some kind of health issues which are not being addressed properly because of increased level discrimination, hate speech, hate crimes and violence. Street based Trans sex workers are vulnerable to contracting infections and diseases by the nature of their work, the use of intravenous drugs poses additional health risks for them and they need regular health care and medical checks. 42% of the respondents do not have access to a regular medical doctor or emergency care with impartial and non-discriminatory attitude. 78% of the survey respondents say that they never disclose their gender identity, sexual orientation and the involvement in sex work to their healthcare provider because of stigma and oppression. According to the surveys, the community members need to have regular access to direct health care services to meet all their health needs. Access to health care provider whom they can trust in addition to getting treated during illness

without judgmental attitude, also, the support to get referrals to specialists and getting connected to other health resources such as health prevention and promotion services are equally important for the LGBTQI, sex worker and HIV positive community representatives.

Approximately a fourth of the respondents (26%) mention that they cannot access social services provided during the crisis (like pandemic or war) because they are afraid that their data (name, gender marker in the documents, health or work status, gender identity or sexual orientation) will / may be disclosed, that they may be discriminated by the social service providers, and in some cases the community members lack proper documents to access services.

Many sex workers mention that during crises there are a number of NGOs that suggest social and humanitarian support, but there are gaps in the services provided by them, there is a need to have services during the night time or near the places they are living as they lack safe transportation or are afraid to be seen, attacked and discriminated during the daytime. According to them, it is also important to get enough information through peer workers about the different types of services and supports that they could use during the challenging times as it is difficult to follow all the information on the social media.

65.6% of the respondents mention that there is a need for hotlines not only for legal support, but also psychological and peer support, as most of the attacks, sexual and physical assaults happen during the nighttime and they usually need someone to talk with at night when they are scared or in panic, when they feel depressed or face difficulties.

And finally, the LGBTQI, sex worker and HIV positive community members have mentioned about personal barriers which hinder them from accessing direct or indirect services suggested during crises, i.e., urgent priorities acquiring necessities such as food and shelter, previous experiences of trying to get services, police warrant, etc.

SUGGESTIONS BY RESPONDENTS TO IMPROVE THEIR SOCIAL SITUATION AND WELL-BEING

During the interviews, the LGBTQI, sex worker and HIV positive community members were asked for their suggestions to improve their well-being. The suggestions are mostly connected to improve existing laws and policies, raise the societal awareness on gender identity, sexual orientation, human rights and fundamental freedoms, HIV/AIDS and sex work.

The majority of the interviewees particularly mentioned about the need to make the services provided by the state bodies, CSOs and individuals more inclusive, accessible, available and also to introduce some new services that could serve their unmet needs and requirements. They

highlighted the need for inclusive, accepting, understanding, non-judgmental, compassionate and caring service providers who see the community members as human beings, individuals who deserve support and care, just like everyone. The community members mentioned that they required increased support from the policemen, health care providers and social services sector to enable them to access the different services during crises.

The respondents also emphasized that the NGOs providing support to the communities employ peer workers and peer educator, social workers and case managers who are a part of the community and informed enough to reach out to them and provide appropriate support as needed because they knew first-hand the issues confronting the community members, their struggles and urgent needs.

One of the other suggestions was to keep the suggested help and provided services accessible for the afterhours when they could use the services without fear or discomfort.

Another advice was to increase the community's access to safe spaces and drop-ins during nighttime which would protect them from attacks and help them to sustain their well-being.

CONCLUSION

The survey findings clearly reveal that the LGBTQI, sex worker and HIV positive community members are facing significant challenges in Armenia.

There is much more work to be done to ensure that the community have the resources, information and care they want and need from a culturally competent, affordable, affirming, inclusive and accessible sexual and reproductive health care system.

The high rate of housing instability because of discrimination and violence against the community members wherein many are forced to live in extremely poor situations, constantly moving from their homes to parks, dormitories and shelters often makes them more insecure and isolated from the mainstream society which limits their ability to get the services, resources needed for their health and wellbeing. They experience dangerous living conditions and are often victims of physical and sexual assaults, violence by transphobic, homophobic and whorephobic people and harassment from the law enforcement bodies.

Many of the survey participants live in constant fear of gender-based violence and attacks which negatively impacts their physical and psychological health. Often times, the LGBTQI, sex worker and HIV positive community members who feel continuous pressure, bias and stigma, postpone or limit their interactions with health care service providers to avoid judgmental situations or discriminatory attitude despite the fact that the Armenian health care system is meant to provide equal access to health care to every person.

Moreover, as a result of the survey, there is a need for legal and policy changes and shift of societal attitude towards the community members to decrease stigmatization, hate crimes, hate speech and improve access to fundamental human rights and freedoms for the community members.

Ensuring equity in all facets for the LGBTQI, sex worker and HIV positive people with multiple disadvantages requires prioritizing them as a marginalized group and increasing their social inclusion and access to social rights through different advocacy and awareness raising activities.

Finally, the organization of the community members as a group or movement could be an effective way to improve their socio-economic status and change their perception about themselves.