



Annual Report 2025



**Legal Aid Hotline
for the Right to Health**



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**providing free legal support to
women and queer persons**



Access to Healthcare is also Access to Justice

The Context

In 2025, access to healthcare remained uneven and fragile for many women and queer people. Administrative barriers, discrimination in medical settings, limited access to information, and fear of stigma continued to shape everyday experiences in the health system. For many people, especially lesbian and bisexual women, trans and queer people, refugees, people with disabilities, and people with mental health experiences, seeking care meant navigating systems that often felt unsafe or difficult to access.

In June 2025, the escalation of military actions in Iran increased cross-border requests for legal information and support related to access to healthcare. This was reflected in the number of people who contacted the hotline from outside Armenia, particularly from Iran.

Against this background, the hotline provided free, volunteer-based legal support in Armenian and, when needed, in English and Russian. Support was offered mainly by phone and online, and in complex cases also through face-to-face meetings.

Data Protection and Ethics

All data included in this report was collected with the knowledge and consent of the people who contacted the hotline, and is presented in an aggregated and anonymized form to protect their privacy and safety.

Data collection follows a do-no-harm principle and is used solely for accountability, learning, and advocacy.

About the Legal Aid Hotline

In 2025, Change Armenia’s hotline provided free legal aid to women and queer persons in relation to their right to health. All legal support is delivered on a voluntary basis, without any financial compensation and free of charge for service users. In total, the hotline received 297 contacts in 2025.

The primary language of legal support is **Armenian**. Depending on the context and the needs of callers, assistance in 2025 was also provided in **English** and **Russian**.

Legal aid was provided mainly **by phone and online** (via Signal, WhatsApp, and Telegram). When necessary, **face-to-face meetings** were also organized to enable deeper legal work.

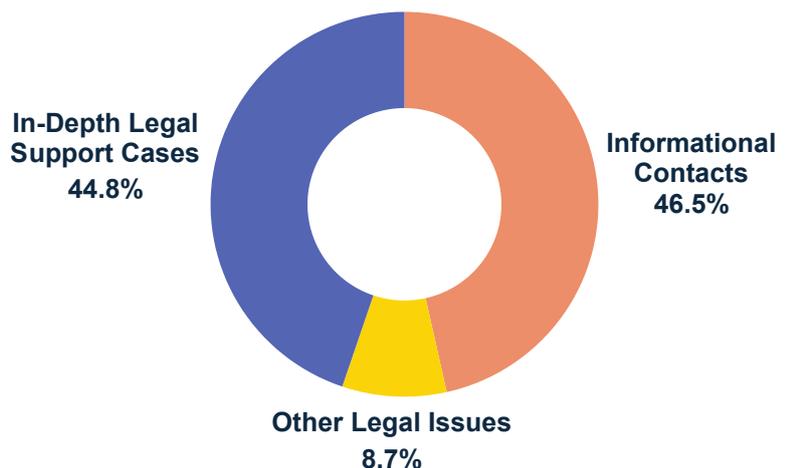
Starting from **October 2025**, the hotline operated **exclusively online**, and no in-person meetings were held.

Throughout most of the year, the hotline functioned **2 days per week (Mondays and Wednesdays)**. In **June 2025**, following the escalation of **military actions in Iran** and the resulting increase in urgent legal needs related to access to healthcare, the hotline operated **5 days a week** to ensure continuous access to support.

Hotline Contacts and Services in 2025

In total, the hotline received **297 contacts** in 2025. These contacts fall into 3 main categories:

1. **Informational Contacts**
2. **In-Depth Legal Support Cases**
3. **Other Legal Issues**



1. Informational Contacts

138 contacts ($\approx 46.5\%$ of all calls) were **informational** in nature. In these cases, a woman or queer person contacted the hotline once to receive legal information related to their **right to health**, including:

- **Mental health support and services**
- **Sexual and reproductive health and rights**
- **Services provided under state health programs and related entitlements**
- **e-health systems and digital health services**

For these informational contacts, the our team provided **accurate legal information**, recorded only **anonymous statistical data**, and **did not collect or store any personal identifying information**.

2. In-Depth Legal Support Cases

133 contacts ($\approx 44.8\%$) required in-depth and continued legal support. These 133 contacts represent unique callers and new cases.

Information on follow-up calls, repeated contacts, and subsequent applications related to these cases is not included in this report.

3. Other Legal Issues

26 contacts ($\approx 8.7\%$) concerned issues outside the core right-to-health focus, including sexual and gender-based violence, asylum and refugee procedures, property rights, labour rights, and children's rights.

In these cases, callers received primary legal information and were referred to relevant organizations. No personal data was collected or stored.

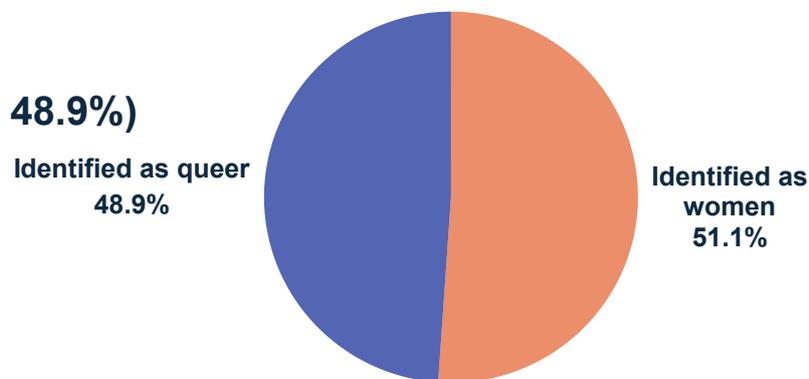
Profile of In-Depth Cases

- Gender Identity
- Age Distribution
- Additional Vulnerabilities and Lived Experiences
- Geographic Coverage of In-Depth Cases
- Channels of Contact and Case Handling
- Where Rights Violations Occurred
- Main Types of Complaints
- Discrimination in Medical Settings
- Legal Actions Taken
- Results of Legal Support

Gender Identity

Of the 133 individuals who received in-depth legal support:

- identified as women ($\approx 51.1\%$)
- identified as queer persons ($\approx 48.9\%$)

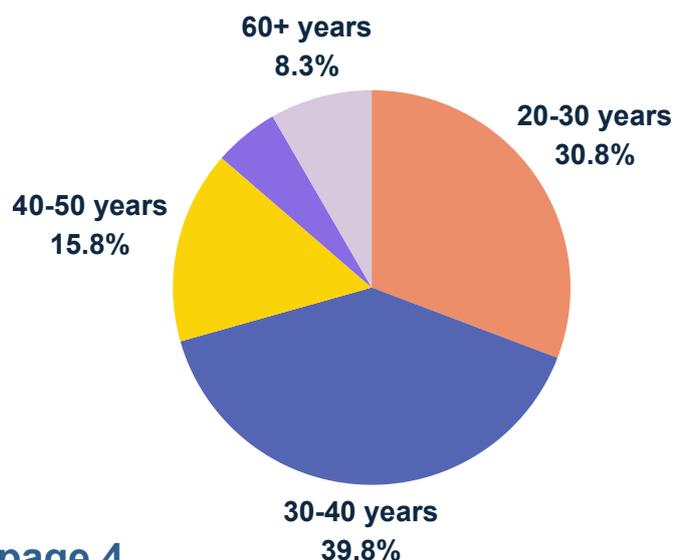


Among women:

- 53% identified as part of the lesbian | bisexual community.

Age Distribution

- 20–30 years: $\approx 30.8\%$
- 30–40 years: $\approx 39.8\%$
- 40–50 years: $\approx 15.8\%$
- 50–60 years: $\approx 5.3\%$
- 60+ years: $\approx 8.3\%$



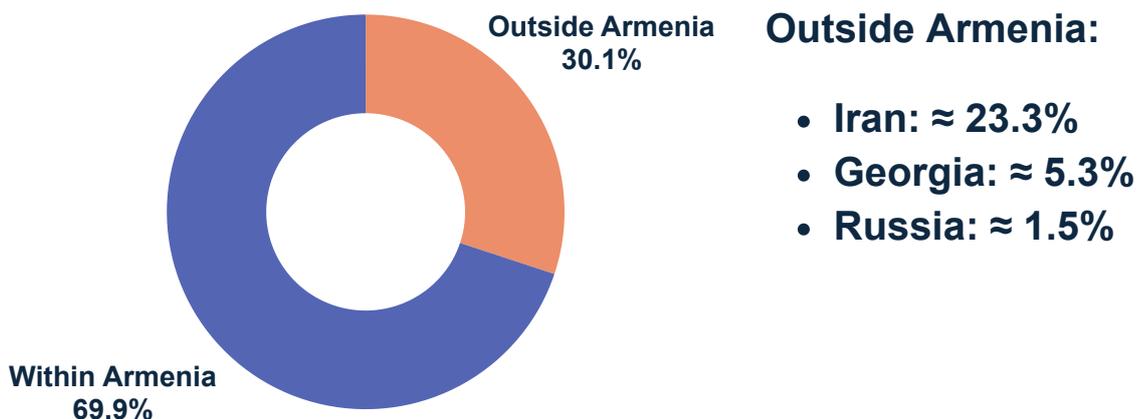
Additional Vulnerabilities and Lived Experiences

Among the **133 individuals** who received in-depth legal support in 2025:

- **≈ 6.0%** of individuals reported having a **disability**,
- **≈ 16.5%** of individuals identified as **refugees**,
- **≈ 19.5%** of individuals reported lived experience with **mental health challenges**.

These figures highlight that a significant proportion of people seeking legal aid in relation to their right to health are facing **intersecting vulnerabilities**, where legal barriers to healthcare are compounded by displacement, disability, and mental health-related challenges.

Geographic Coverage of In-Depth Cases



Within Armenia:

- **Yerevan: ≈ 40.6%**
- **Kotayk: ≈ 9.8%**
- **Shirak: ≈ 6.0%**
- **Tavush: ≈ 5.3%**
- **Armavir: ≈ 3.8%**
- **Syunik: ≈ 3.0%**
- **Lori: ≈ 1.5%**



Channels of Contact and Case Handling

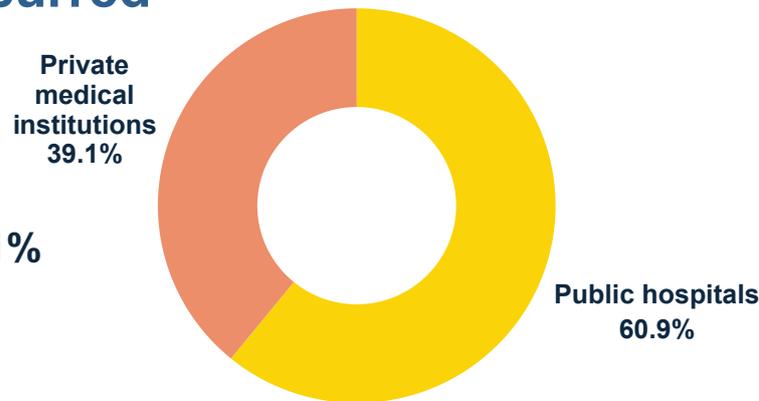
- **Direct phone calls:** ≈ 42.1%
- **Online messengers** (Signal, WhatsApp, Telegram): ≈ 57.9%

In ≈ 51.9% cases the initial contact was followed by **face-to-face meetings**, as the complexity of the case required deeper and more sustained legal work.

Where Rights Violations Occurred

Out of the 133 in-depth cases:

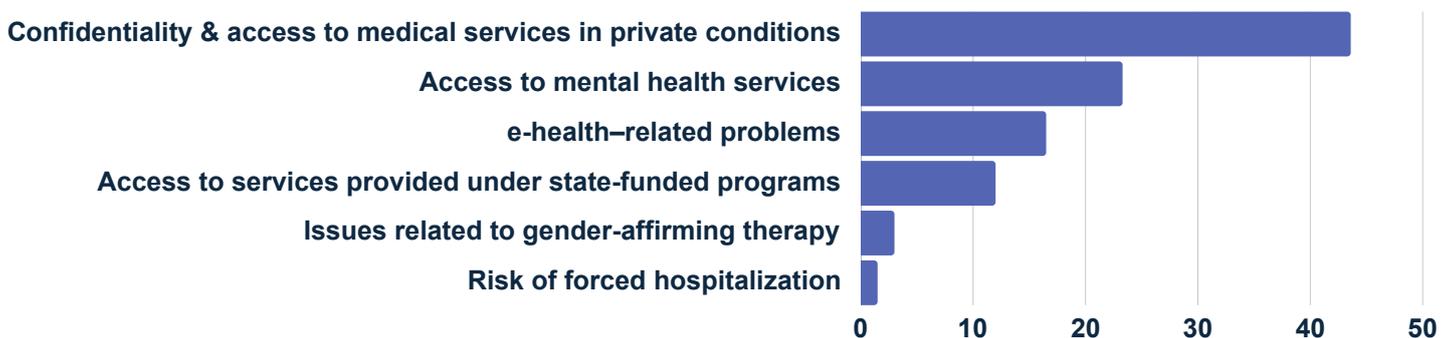
- **Public hospitals:** ≈ 60.9%
- **Private medical institutions:** ≈ 39.1%



Main Types of Complaints

The primary issues raised in these cases were:

- **Confidentiality and access to medical services in private conditions:** ≈ 43.6% of cases
- **Access to mental health services:** ≈ 23.3% of cases
- **e-health-related problems:** ≈ 16.5% of cases
- **Access to services provided under state-funded programs:** ≈ 12.0% of cases
- **Issues related to gender-affirming therapy:** ≈ 3.0% of cases
- **Risk of forced hospitalization:** ≈ 1.5% of cases



Discrimination in Medical Settings

In $\approx 70.7\%$ cases, callers reported having experienced discrimination in medical institutions.

Legal Actions Taken

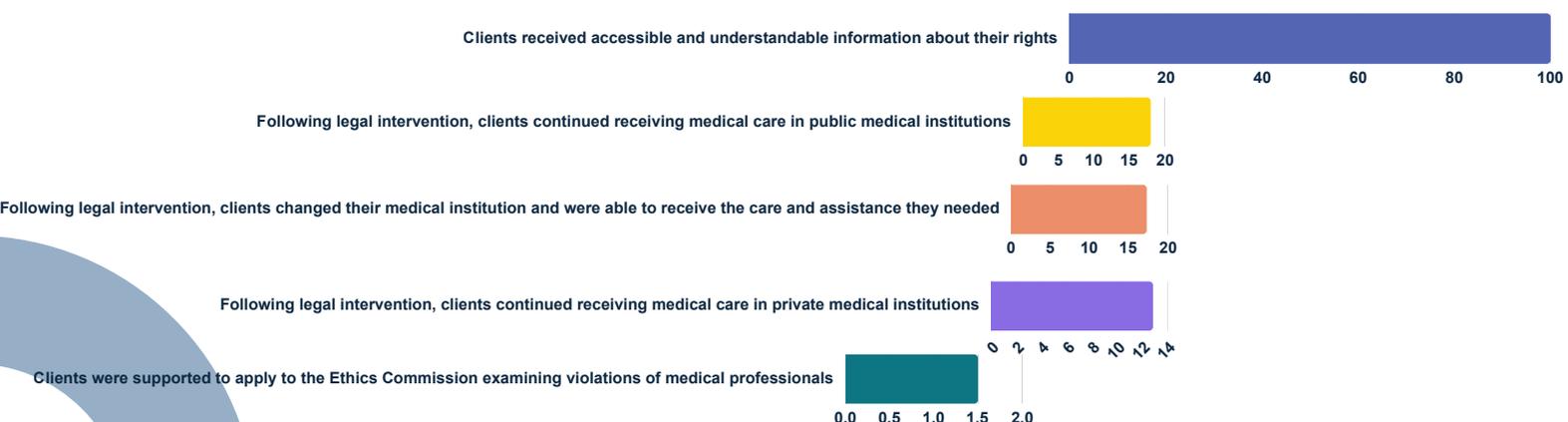
As part of legal advocacy and casework:

- In $\approx 40.6\%$ of cases, formal letters were sent to state authorities
- In $\approx 15.8\%$ of cases formal letters were sent to private medical institutions

Results of Legal Support

As a result of legal assistance in 2025:

- 100% of clients received accessible and understandable information about their rights,
- In $\approx 12.8\%$ of cases, following legal intervention, clients continued receiving medical care in private medical institutions,
- In $\approx 18.0\%$ of cases, following legal intervention, clients continued receiving medical care in public medical institutions,
- In $\approx 17.3\%$ of cases, following legal intervention, clients changed their medical institution and were able to receive the care and assistance they needed,
- In $\approx 1.5\%$ of cases, clients were supported to apply to the Ethics Commission examining violations of medical professionals' codes of ethics.





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