

# ARMAVIR HEALTH PROGRAM FOR REFUGEES FROM ARTSAKH

INTEGRATED MULTI-COMPONENT HEALTHCARE  
SERVICES IN ARMAVIR MARZ'S 16 RURAL COMMUNITIES:

2024 - 2025

FIDEC ARMENIA

## Health Care Challenges in Armenia

-  Armenia's public health spending remains one of the lowest in the world (1.4% of GDP), with the highest out-of-pocket health expenditure, with 85% coming straight from the patient or their families.
-  Basic Benefit Package (BBP) covers only primary visits to the family doctor, but does not include advanced medical examinations, lab tests, and medication.
-  Low prioritization of health issues results in reluctance to undergo full medical check-ups.
-  Rural communities lack access to up-to-date medical services mainly due to financial barriers.
-  Morbidity and mortality from chronic diseases continuously increase due to lack of culture of routine preventive visits to the family physician.

**FIDEC Armenia's Community Health Care Programs provide access to quality, free-of-charge, and comprehensive medical services.**

# Armavir Province: Home of the Artsakh Health Program

For many years following the 2020 war in the unrecognized Nagorno-Karabakh (Artsakh) Republic, health issues have been the primary concern for the Artsakh population.

The 9 months of blockade, and later, the displacement, particularly the mass arrival within a single week in September 2023, has left many refugees traumatized, wounded, and in dire need of comprehensive support.

Since October 2023, the Armenian government has registered more than **115,183** refugees from the Karabakh region.



**The Artsakh healthcare program is now being carried out in the Armavir Province, providing essential medical care and support to refugees as they work to heal and rebuild their lives.**

# Health Care Needs and Social Integration of Armenian Refugees from Artsakh

-  Despite the comprehensive list of services offered by Armenia's Ministry of Health, refugees from Artsakh tend to avoid visiting doctors unless facing urgent health conditions.
-  Preventive care is often neglected, leading to undiagnosed and untreated health issues that could be managed or prevented with regular medical check-ups.
-  30 percent of the refugee population have still not been registered in the national e-Health system (ARMED), therefore not having access to the healthcare provided by the Government of Armenia.



# FIDEC Armenia's Community Health Program

By building on the Shirak Health Program's successful model, In November of 2024, FIDEC Armenia Foundation launched an **Integrated Community Health Screening Program** to provide targeted, high-quality free-of-charge medical services to refugees from Artsakh settled in **16 rural communities of Armavir Province**.



# INTEGRATED COMMUNITY HEALTH SCREENING PROGRAM FOR ARTSAKH REFUGEES AND VULNERABLE POPULATION OF ARMAVIR MARZ'S RURAL COMMUNITIES

**Location:** Armavir Marz

**Target 16 Communities:** Aragats, Tsaghkalanj, Aghavnatun, Doghs, Amberd, Lernamerdz, Gai, Aknashen, Haykashen, Metsamor, Geghaker, Tsaghkunq, Tsiatsan, Hovtamej, Lernagog, Shenik.

**Ambulatories:** Aragats, Gai, Aghavnatun, Geghaker, Lernagog

## **Target Beneficiaries**

250 male and female aged 40-75, with 75% of Artsakh refugees and 25% of vulnerable local population not covered by Government's Basic Benefit Package (BBP).

**Budget:** 121,074 | \$484/beneficiary

**Duration:** 6 months

-  Screen for coronary heart diseases, arterial hypertension
-  Provide chronic patients with anti-hypertensive and anti-cholesterolemia medication for 3 months.
-  Educate about hypertension prevention and control; provide tonometers.
-  Screen for diabetes and iron-deficiency anaemia
-  Improve diabetes management; train on a healthy diet, provide glucometers.
-  Screen for breast, gynecological, colorectal, prostate, thyroid, and lung cancers; manage all identified cases, including surgeries and medication, unless covered by BBP.

# Prevalent Health Issues Among Artsakh Refugees



## Cardiovascular diseases:

- 1.1. hypertension
- 1.2. coronary heart disease



## Diabetes



## Breast-related diseases:

first chance for women to undergo mammography.



## Thyroid Diseases



## Anemia, iron-deficiency



## Gynecological diseases



## Urological diseases

# Results: Coronary Heart Disease, Arterial Hypertension

## Diagnosis

**72% high blood pressure  
(40% first- time diagnosed)**

**57% hypercholesterolemia  
(80% were unaware)**

## Treatment & Control

**Patients with hypertension  
and hypercholesterolemia  
received 169 tonometers and  
medication for 3 months.**

## Education

**119 beneficiaries with high  
blood pressure were trained  
on hypertension control  
and healthy lifestyle.**



# Results: Diabetes Control

## Diagnosis

66 diabetic patients  
50% first time diagnosed



## Treatment & Control

66 glucometers and 66  
packs of strips distributed  
to all diabetic patients.



## Education

125 beneficiaries and other  
community members with  
diabetes received training on  
diabetes control, healthy diet  
and care.



# Results: Women's Health

## Diagnosis

**93 (75%) women had gynecological problems, requiring anti-inflammatory treatment and/or surgical intervention.**



## Treatment

**81 women received anti-inflammatory medication to treat diagnosed conditions.**

**27 follow up investigations led to 3 surgical interventions.**



## Education

**Individual counseling on benefits of early diagnosis and treatment.**



# Results : Cancer Screening and Prevention

## Diagnosis

Contributed to the country's cancer prevention strategy by organizing screenings for refugees on breast, gastrointestinal, prostate, thyroid, and lung cancers.

**Colorectal:** 10 patients had occult blood in stool.

**Mammography:** 28 women had abnormal results.

**Prostate:** 9 men had PSA deviation.

**Thyroid:** 146 (59%) abnormal blood tests & sonography.

**Lung:** 9 heavy smokers passed low-dose CT of lungs.



## Treatment

**Colorectal:** 7 patients underwent colonoscopy.

**No colorectal cancer detected.**

**Mammography:** Abnormal cases referred to a mammologist; 3 women passed breast biopsy; 2 women underwent breast MRI, 1 woman passed breast CT with contrast.

**Two cases of breast adenosis are underwent surgeries.**

**Prostate:** 9 cases referred to an urologist's consultation and passed additional examinations.

**No prostate cancer detected.**

**Thyroid:** Endocrinologist's consultation and additional tests revealed **one case of confirmed thyroid cancer operated.**



# Mission Accomplished in Armavir. Now, Let's Extend Our Reach to Ararat Marz!



*"When there is health,  
there is hope!"*



**HELP US PROVIDE ESSENTIAL HEALTH CARE FOR ARTSAKH REFUGEES.**

**SCAN TO DONATE**

[www.RunningforArmenia.com](http://www.RunningforArmenia.com)



# LET'S HELP ARMENIANS PRIORITIZE HEALTH!

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# LET'S SAVE LIVES!

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