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## **Navigating the Global-to-National Interface**

Roles, Dynamics, Contexts

Exploring the Impact of International Development Agendas on National Policy Shaping:

A Study of CRPD implementation in Armenia

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## ABSTRACT

*Objectives.* Armenia started the disability policy reforms since the ratification of the UN CRPD in 2010. The final laws however were adopted only in 2021 and are not fully in force till now. The objective of this study is to comprehensively investigate the influence of international development agendas on national policy-shaping. Additionally, the study seeks to gain a nuanced understanding of the complex processes involved in translating international norms and standards into national policies and practices, highlighting the actors, institutions, and governance mechanisms involved in the implementation of the CRPD and the adaptation of ideas, practices, and institutions to the local context.

*Methods.* A qualitative method case study applied a combined approach with the Global Governance and Policy Transfer analytical framework. Semi-structured interviews with 15 individuals were conducted.

*Main Findings.* Adoption of human rights-based disability legislation in 2021 is perceived as a significant step for Armenia by all the interested parties and at all levels. However, the regulatory framework and law enforcement mechanisms are missing or not sufficient. The country context also influences the resources and priorities. Furthermore, some issues existing in addition to disability-specific ones, are beyond the sector and require wider systemic and institutional improvements.

*Key Words:* CRPD, disability, PWD, SDG, policy-shaping, human rights, development, Global Governance, Policy Transfer, Armenia

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## LIST OF ABBRIVIATIONS

ARMSTAT	Statistical Committee of the Republic of Armenia
CRPD	Convention on Rights of Persons with Disabilities (the Convention)
CSO	Civil Society Organisation
CwD	Child(ren) with Disabilities
GA	General Assembly
GG	Global Governance
HRD	Human Rights Defender
ICF	International Classification of Functioning, Disability and Health
MDP	Millennium Development Goals
MLSA	Ministry of Labour and Social Affairs
OPD	Organisations of Persons with Disabilities
PT	Policy Transfer
PWD	Person with Disabilities
RA	Republic of Armenia
SDG	Sustainable Development Goals
SU	Soviet Union
UN	United Nations
UNDP	United Nations Development Programme
UNPRPD	United Nations Partnership on the Rights of Persons with Disabilities
WB	World Bank
WHO	World Health Organisation

# CHAPTER 1: INTRODUCTION

## *1.1. Motivation for Study*

International intervention, be it financial, technical, or advisory became an inseparable part of the developing track for many countries. It influences countries' development at different levels and dimensions, especially when it is part of nation-state commitment in global development agenda or policy implementation framework. However, it is not always easy to recognise the real role of international presence in countries' development process and outcomes. My previous professional experience in the development sector from my home country Armenia together with academic curiosity of a LUMID student determined the choice of the wide research topic, aiming to discuss the ways and level of influence of foreign actors, partnership nuances and their dynamics in adopting, nationalisation, and implementation of global development agenda<sup>1</sup>. In other words, this represents a classic instance of topic selection characterized by three primary categories of influence: personal, social, and academic (Hammett et al.,2015).

For the research feasibility purposes, the wider topic is narrowed down to focus on the international influence on disability policy-shaping in Armenia. The motivation behind the choice of disability policy is the ongoing interest and debates around the right-based disability policy in Armenia. The policy reform took place over a time span of ten years after the state ratified the United Nations (UN) Convention on Rights of Persons with Disabilities (CRPD) in 2010. In 2012 the first draft of the new law on the rights of persons with disabilities (PWD) was developed and in 2014 Ministry of Labour and Social Affairs of Armenia (MLFA) and the UN started cooperation leading to the adoption of International Classification of Functioning,

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<sup>1</sup> In context of development and human rights agendas, the words “international” and “global” are used interchangeably

Disability and Health (ICF) model. However, the new legal framework developed on the basis of CRPD and regulating different aspects of life of PWDs was adopted only in May 2021(NARA, 2021a,b).

Within this period multiple projects were initiated and implemented by the state, local organisations and in the framework of international cooperation. Number of projects directed to awareness raising, service provision, advocacy, and fulfilment of rights for PWDs were designed and implemented by a single actor or within state-civil society organisation (CSO) cooperation (UNPRDP,2021). PWDs, organisations of persons with disabilities (OPD) and the wider CSO sector were also involved in policy discussions and debates. However, despite some positive dynamics, many issues for 194,744 PWDs remain unaddressed or unsolved (ARMSTAT,2022a).

In light of these complex dynamics, this research seeks to illuminate the dependency of this process on a spectrum of local and global factors and to shed light on the multifaceted interplay between global agendas and national policymaking, with a specific focus on the realm of disability policy in Armenia.

## *1.2. Purpose and Research Questions*

The overall purpose of this study is to investigate the ways international development agendas and frameworks affect national policy-shaping. In this context it is important to see the big picture of actors, discuss partnership dynamics in the CRPD implementation process and how those changes contribute to national policy-shaping. In other words, a comprehensive and nuanced understanding of the complex processes involved in translating international norms and standards into national policies and practices. It can be done by identifying the actors, institutions, and governance mechanisms involved in the implementation of the CRPD on the one hand and by explaining how ideas, practices, and institutions are transferred and adapted to local contexts, on the other.



Here are my working research questions to explore and discuss the topic:

*1. How have the role of governmental ministries, CSOs and the international community changed during the process of implementation of the CRPD treaty in Armenia?*

*2. How can we understand the changing roles shaped the new disability policy in Armenia?*

### *1.3. Research Outline*

To answer the research questions the thesis suggests the following structure: the background of the case study is outlined in greater detail, followed by the literature review. Subsequently, the thesis elaborates on the wider theories and uses analytical framework. The next section explicates the methodological choices made and applied during the research process. Chapter 6 presents the analysis according to the Global Governance theory, furtherly discussing it in the Chapter 7 using concepts of Policy Transfer theory. Lastly, it culminates in concluding remarks and recommendations for future research directions.

## CHAPTER 2: BACKGROUND

### *2.1. Disability in international human rights and development system*

According to the World Health Organization(WHO), more than one billion people, or about 15% of the world's population, are estimated to live with some form of disability. This includes people with physical, sensory, intellectual, and psychosocial disabilities (WHO,2011). “Across the world, people with disabilities have poorer health outcomes, lower education achievements, less economic participation and higher rates of poverty compared to those not having disabilities. Difference is more visible in developing countries (Mitra et al.,2011).

While disability is primarily an individual experience (Krahn et al.,2015), it is also a shared reality as it impacts a significant number of people across countries and regions worldwide, affecting individuals' physical, mental, social, and economic well-being (Oliver,2013). Thus, it is beyond the individual level and requires quality services and accessible environment, laws, policies, regulations as well as cooperation frameworks in community, national and global levels (Shakespeare,2008).

Disability is an integral part of the international human rights and development system and has gained increasing recognition and attention in recent years. The UN has been at the forefront of efforts to promote and protect the rights of persons with disabilities and has developed a range of instruments and frameworks aimed at advancing their rights and well-being (UNPRDP,2021).

There are multiple tools internationally used to address different aspects of disability context but the main instrumental frameworks in current global toolkit are the Convention on the Rights of Persons with Disabilities(CRPD) and Sustainable Development Goals(SDG).

## *2.2. Disability in human rights agenda*

CRPD as a human rights treaty represents a significant milestone in the global recognition of the rights of persons with disabilities and aims “to protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all PWDs” (UNCRPD, 2006, Art.1). The history of the CRPD can be traced back to 1981, when the UN General Assembly(GA) adopted the Declaration on the Rights of Disabled Persons, which affirmed the rights of PWDs and called on governments to take action to ensure their full participation in the society (WHO,2011). Since then, continuous efforts have been taken in the development and adoption of a comprehensive framework that would allow to address disability rights and issues at the global and national levels. In 2006, the UN GA adopted the CRPD, which built on the work of earlier UN efforts to promote disability rights.

The CRPD has been instrumental in mainstreaming disability into the international human rights and development system and has been widely ratified by states around the world. It has also spurred the development of a range of policies, programs, and initiatives aimed at advancing the rights and well-being of persons with disabilities, both at the national and international levels (UN,2019).

As of April 2023, 186 countries have ratified the CRPD, indicating their commitment to its principles and objectives (UN,2023). Nonetheless, the execution of the CRPD displays disparities across different nations. Some countries have made significant progress in incorporating the convention's principles into their laws, policies, and practices, while others have struggled to make wider progress (WB,2023).

Some of the key areas where the CRPD has been implemented include Legal frameworks, Accessibility, Education, Employment, Social protection. However, many PWDs continue to face discrimination and exclusion, and there is a need for continued efforts to ensure that the principles of the CRPD are fully realized in practice (UN,2019).

### *2.3. Disability in development agenda*

Disability is increasingly recognized as an important issue in the international development system, and efforts are being made to ensure that persons with disabilities are included and their rights are respected in all development programs and initiatives (WB,2023). The inclusion of PWDs is essential for achieving the Sustainable Development Goals, which aim to promote inclusive and sustainable development for all, ensuring that no one is left behind in the quest for a better and more equitable world (UN,2019).

These efforts of course started before the SDG era. In 2000, the UN General Assembly adopted the Millennium Declaration, which included a commitment to promoting the rights of persons with disabilities. (WHO,2011). However, disability was not explicitly included as a target in the Millennium Development Goals (MDG), adopted the same year, though it was recognized as an important factor that could affect progress towards achieving these goals (UN,2015a). To address the issue of disability in the context of the MDGs, the UN included disability-inclusive language and called for disability-sensitive policies and programs to be integrated into the implementation of the goals (WHO,2011).

In 2015, after the UN launched a new set of goals, known as SDGs, disability was viewed as a cross-cutting issue, recognizing the importance of promoting the inclusion and participation of people with disabilities in all aspects of sustainable development (UN,2019). Disability is explicitly included in several of the SDGs, e.g., Goal 4: Quality education, Goal 8: Decent work and economic growth, Goal 10: Reduced inequalities, recognizing the importance of addressing the specific needs and experiences of PWDs in achieving sustainable development (See the list of goals and corresponding targets in Annex 1).

## *2.4. Disability situation in Armenia*

According to the data of Statistical Committee of the Republic of Armenia (ARMSTAT), there are 194,744 registered PWDs in Armenia, which is 6.5% of the whole population. (ARMSTAT, 2022 a). The statistics include 8,771 children under the age of 18, 6708 of them with special educational needs (ARMSTAT, 2020). The number of adults of working age, i.e., between the age of 18 and 63, is 101,196 which is more than half of the PWDs in the country (ARMSTAT, 2022 b). These figures reflect only the official statistics that include persons who were granted a first, second or third group of disability or the status of a child with disability (CwD) based on the medical model of disability. But even with the official statistics, which is less than half of the global 15% (WHO, 2011), this number of PWDs experience challenges in living their everyday lives and fulfilling their fundamental rights. Although Armenia has been making efforts and moved forward in disability policies and practices, especially after the country ratified CRPD in 2010, there is still a long way ahead to turn all the ideas into reality. In the current state of things, majority of PWDs still experience difficulties with accessibility to the physical environment, transportation, support services and information. There are also issues with inclusion and full participation in significant aspects of life as education, employment, participation in political life, culture and leisure (UN, 2021). Latest research reports that despite existing inclusive educational system, only 32% of the 6708 children with special educational needs, mainly children with relatively mild disorders, studying in the secondary schools showed 75% and more participation in all the classes (UNICEF, 2019). About 14% of the surveyed children with special educational needs who had severe functional impairments had up to 25% participation in online classes (ibid). As for employment, 71% of PWD population of working age are outside the labour force, another 5% out of those who seeks job has official unemployment status (ARMSTAT, 2022 b). In addition to this, it is also challenging to find employment for people not having disability but taking care of their children or

elderly members of the family with disabilities, which puts the PWDs and their families in extremely precarious situation(ibid). From the point of view of social protection, there are several services suggested by the state. However, main economic source, especially for unemployed population and children is disability allowance which can hardly be put into comparison with the monthly living expenses and additional expenditures connected to the disability (UN,2021). However, it is worth mentioning that despite existing challenges, the situation has considerably improved during last decade which makes space for further improvements with regards to the new right-based disability policy adopted in May 2021.

### *2.5. Disability in national policy of Armenia*

Armenia passed a long way in shaping the national disability policy, moving through different definitions, models, and approaches to disability. In the Soviet Union (SU), of which Armenia was a member, PWDs were perceived as persons with medical issues or “invalids”. The main approach to dealing with the disability question was “hiding” people either at home or in specialized institutions. They were receiving pension or were employed in workshops belonging to associations of specific kind of disability, as e.g., association of blinds or association of deaf people(Chaney,2020). Similar was the situation in the Soviet Republic of Armenia, where a group of PWDs that got their disability in Word War 2 were perceived as heroes, while the others, were stigmatised and excluded from the society.

Disability became more visible in Armenia after devastating Spitak earthquake of 1988, where 130,000 people were injured and around 20,000 got different types and groups of disability in a very short time (WB, 2019; Schott & Kalatas, 2014). That was a shock for the SU and the decision was made to accept the support from international community. Thus, the earthquake opened the door for the non-Soviet world to come to Armenia with humanitarian and medical support which also led to

the initiation of rehabilitation projects for PWDs. In that period locals started working for international organisations, and only later the first local organisations were established.

After the collapse of SU, newly independent countries initiated their development processes, however many of initial plans were still based on their previous experience and knowledge acquired during the decades of membership in the SU (Sumskiene et al.,2019). Naturally, as a post-soviet country, the first disability regulatory framework of independent Armenia was the Law on Social Protection of Disabled People adopted in 1993. With further editions and improvements, that brought more social components to the medical model of disability, the above-mentioned law was in force until May 2021. However, it is worth mentioning that both state and newly formulated SCO sector realised that the law was limited in its scope to cover all the aspects of PWD life.

The idea of policy reforms was on the table all the time, especially when disability was widely discussed and included in global development agenda. In this sense, the ratification of CRPD by Armenia in 2010 marked an important milestone in the promotion and protection of the rights of PWDs and in undertaking reforms to bring real needs, rights and national policy to speak to each other (UNPRDP,2021). Parallel to the state's commitment there was also increase of interest of international community to right based approach to disability. That support became more significant with increased understanding of intersectional nature of disability, presented in SDGs and included in programming, through promotion of equality and non-discrimination, accessibility, effective participation of PWDs in all aspects of life and supporting the state to develop disability-inclusive right-based policies and legislation.

One of the initial actions taken was the creation of a concept paper for the implementation of the Disability Comprehensive Assessment, using the WHO Principles of the International Classification of Functioning, Disability, and

Health(ICF). This concept paper was officially approved by the government in 2014, and subsequently, numerous reforms were carried out and put into effect before the adoption of the disability law in 2021(UNPRDP, 2021). These reforms primarily involved the MLSA overhauling the entire legal and administrative framework related to disability assessment, based on the WHO's ICF System, between 2014 and 2020. Additionally, the government approved the Comprehensive Program for Social Inclusion of Persons with Disabilities for the period of 2017-2021, which led to the review and modernization of construction norms pertaining to universal design and reasonable accommodations, aligning them with the standards set by the Convention. In 2019, the National Strategy for the Protection of Human Rights and Action Plan for 2020-2022 was adopted, which included several strategic measures aimed at promoting equality and non-discrimination, as well as protecting the right to healthcare and education (See the list of policy and strategy documents in Annex 2).

Multiple reforms finally resulted in the adoption of new disability legislation with two main laws adopted on 5 May 2021:i) The Law “On the Rights of Persons with Disabilities” ii) The Law “On Functional Assessment of Persons with Disabilities”. And though new laws are in place and in line with UN CRPD, they still lack regulations, procedures, and mechanisms to make them operational and duly accountable.



## CHAPTER 3: LITERATURE REVIEW

The following section primarily focuses on literature related to CRPD implementation from global to national level. This exploration is complemented by examination of disability within the realms of human rights and development agendas.

### *3.1. CRPD and the Globe*

Though nation-state is the one and first responsible for its public policy making, in our world of global agendas and universal goals often *“the nation-state has become too small for the big things and too big for the small things”* (Streeten,1997, p.194)

The first hint where to find information on CRPD implementation provides the treaty itself, stating that “each state party shall submit to the Committee of Rights of Persons with Disabilities (Committee) a comprehensive report on measures taken to give effect to its obligations and on the progress made in that regard”(UNCRPD, 2006,Article 35). Article 36 suggests that “state parties shall make their reports widely available to the public in their own countries and facilitate access to the suggestions and general recommendations relating to these reports” (UNCRPD, 2006, Article36). Thus, country reports and the Committee’s recommendations are the highest-level official communication presenting progress and issues in implementation of CRPD in 186 countries that currently ratified the Convention. Yet interest in CRPD is not limited to official reporting commitments. Due to its multi-actor and intersectional nature, the Convention is the focus of interest of different disciplines, providing single case reports, developing statistics and comparative analysis as well as positioning it in scientific discussions and debates.

Following the entry into force of the CRPD, in 2011 WHO and the World Bank(WB) conducted first ever world report on disability. The report defines disability being human rights and development issue, focusing on healthcare, education,

employment, inclusive environments, and accessibility(WHO,2011). In other words, the report refers to multidimensional aspects of disability, lists disabling barriers, explains CRPD scope and presents evidence to support the implementation of the treaty. Besides the recommendations for policymakers, practitioners and advocates operating at the local, national, and international levels, the report also encourages to strengthen the research on policies, physical environment, attitudes, etc., for further understanding, planning and better outcomes(ibid). Whether researchers followed the last recommendation or not, a solid number of studies focusing on different aspects of CRPD implementation as well as bringing examples from specific sectors or countries has emerged.

Since the development of CRPD text, a number of researchers started examining it, to explain or predict the CRPD implementation from the angle of opportunities and challenges, putting it in the bigger context of human rights and development while considering the paradigm shifts constituted in the concepts of the Convention (Mittler, 2015). By utilizing a social model framework and a human rights approach that recognizes disability as an environmental and human rights issue, the Convention created a "paradigm shift" in the way disability is perceived and approached (Kayess & French, 2008; Quinn & Degener, 2002). The shift shows PWDs as subjects rather than objects, emphasizing their inclusion as rights holders (Stein & Stein, 2014). Shakespeare (2014) discusses CRPD from the intersectionality point of view, showing the importance of compiling different factors in developing public policies based on a "new" model (Shakespeare,2014). The treaty was praised for comprehensively covering various aspects of disability as well as providing clear guidelines for each phase of its implementation (Lang et al., 2011; Stein & Lord, 2008). Unlike other human rights instruments, CRPD considers learning and social transformation as inseparable part of norm and policy internalisation, thus making human rights laws be seen as a process(ibid). However, there is critique on underestimating country-specific contextual factors and beliefs (political will, institutional capacity, stigma and prejudices), which can become real barriers and

hinder effective processes and outcomes (Lang et al.,2011). In practical application, the rights-based approach has often been confined within predefined frameworks established by authorities (Sonpal & Kumar,2012). The poor implementation of the CRPD can be also seen as a consequence of institutional ableism, which requires better monitoring mechanisms and stronger efforts for states to stay faithful to their commitments (Chaney,2020). Monitoring in the context of CRPD is often mentioned to be challenging since it is not easy to measure such a multidimensional phenomenon as disability, especially when it is not duly reflected in statistics (Priestley & Huete-García,2022). However, sufficient disability statistical data, which is one of the requirements of CRPD, can be helpful both for the national policy practices and can also be viewed from the lens of global governance perspective(ibid).

### *3.2. Disability rights as part of global development agenda*

*“The emergence of disability and development marks a historical shift in the global governance of disability that has shaped our relationships with disability in mainstream institutions”*

(Nguyen, 2015, p.83)

The indivisibility of disability rights and development is widely recognised in current international discourses and main sectoral international instruments. Besides recalling social and economic development, CRPD emphasises the importance of mainstreaming disability issues as an integral part of relevant strategies of sustainable development by the state. It also states that international cooperation, including international development programmes, is inclusive of and accessible to persons with disabilities (UNCRPD, 2006, Article 33a). On the other hand, disability has been included in various goals and targets of the 2030 Agenda for Sustainable Development (UN, 2015b). Both frameworks also talk about collaboration of state and non-state actors in local level and as a part of international cooperation (Tosun &

Leininger,2017). Thus, multiple dimensions and actors involved in these frameworks increasing interest towards the implementation of rights and development agendas and the topic stays under the researchers' loop. However, the researchers report that in reality disability issues remain inadequately addressed both by development NGOs and in the context of international cooperation due to poor enforcement mechanisms and strategies, lack of awareness and prioritization or expertise (Niewohner et al.,2020; Sonpal & Kumar,2012).

In 2019 research of UN Department of Economic and Social Affairs published Disability and Development Report that provides an overview of the selected SDGs from a disability perspective, bringing into discussion relevant international normative frameworks(UN,2019). The research focuses on good practices and challenges, highlighting the importance of good statistics and data for effective inclusion and leaving no one behind scheme(ibid).

Recent research on disability data went further in this direction, examining states' capacity and systems of disability-inclusive data collection, by looking into disability-related questions in national censuses and highlighting the importance of having disaggregated, internationally comparative data(Mitra & Yap,2021). Quality data is crucial for informed policy making and programming at local to global levels (Abualghaib et al.,2019), but it is also important from an intersectionality perspective, for targeted approach to PWDs who also belong to other marginalised groups and may experience greater barriers to accessing their rights(ibid).

Both frameworks are global governance instruments that shape and influence policies related to disability inclusion at both the global and national levels (Biermann et al., 2009). At the same time, these frameworks are powerful social constructions that shape the way we understand disability and development (Meekosha,2011).

### *3.3. CRPD implementation in Armenia*

The literature review on CRPD in the context of Armenia provides the following evidence. State reports and concluding observations of the Committee. Apart from the State reports, CSOs are also eligible to make shadow reports covering either specific or all aspects of CRPD, the right that was successfully utilised. More comprehensive information is provided in Situational Analysis of the Rights of Persons with Disabilities in Armenia, which touches upon aspects as equality and non-discrimination, inclusive services, accessibility, in sectors of healthcare, education, employment, etc.(UNPRDP,2021). The research lists the main groups of stakeholders and their progress in cooperation within the framework of CRPD(ibid). Data Gap Analysis was conducted by UNICEF to present the situation with CwDs and discuss the cross-sectoral exchange opportunities of the data (UNICEF,2019). Alongside with reports academic literature discusses implementation of CRPD in post-Soviet region from the point of paradigm shift from medical to human rights model, considering the official state reports versus specialist interviews in six post-Soviet countries(Sumskiene et al., 2019). The two-stage data analysis on disability rights and the implementation of a section of the CRPD revealed two main themes. The first theme pertained to differences in deeply rooted attitudes about disability, which were evident in the varying translations of CRPD terminology. The second theme highlighted a significant discrepancy between the eagerness of CSOs and the caution of policymakers in the process of implementing CRPD policies, showing difficulties in translating rights into practice(ibid). The same post-Soviet area was examined from the point of view of “frame alignment”, arguing that policy implementation has more chance when frames of key policy actors (government, CSOs) are aligned (Chaney,2020). And though countries of the region differ from each other, they share the same Soviet “heritage” rooted in some concepts as a model of disability, that make states less flexible in comparison with CSO sector(ibid). The literature review provides examples from disability employment which shows the linkages of high-rate unemployment in Armenia to structural and social factors

(Breen & Forwell,2020). PWDs in education is another topic, where the researcher Soorenian (2018) reflects on contrasts and parallels between the Armenian and British systems, in relation to disabled staff, students and the inclusion of children in the education system, highlighting accessibility issues together with attitude of society and self-perception of PWDs (Soorenian,2018).

Thus, these are some evidence from the country reflected in literature, which include statistical data, discuss some global and country-specific context, that supports this thesis with further data construction and analysis.

### *3.4. Situating the Research*

The existing body of literature delves into various aspects of international cooperation, global agendas, and CRPD implementation, offering insights from governance, actor, and localization viewpoints. These perspectives are integral to this thesis as they form its foundational concepts. However, a gap still exists in explaining the implementation of international frameworks across the continuum from the global to the local level. This gap influenced the selection of broader theoretical framework explored in the subsequent chapter. It also guided the endeavour to explore the processes involved in CRPD implementation, considering its inherent characteristics, established processes, and contextual variables that exert influence.

As a result, this study hopes to contribute to a holistic understanding of the intricate interplay between actors and factors in policy export-import processes. Such insights could prove valuable not only in the adoption and domestication of other international instruments but also in the operationalization of ongoing initiatives. In these pursuits, this research has the potential to foster enhanced cooperation within and between sectors, various actors, and diverse levels of collaboration.

## CHAPTER 4: THEORY

Global development and human rights agenda can be discussed in the context of international relations, political, global and development sciences, social sciences, and human rights. Refining the focus to the practical implementation of the CRPD and comprehending the ways in which direct and indirect international influences in tandem with local context shape national policies, underscores the choices of the approach. Considering intersectional and multidimensional origin of the topic, this thesis tends to employ Global Governance (GG) and Policy Transfer (PT) theories to guide the body of research knowledge.

Overall, these two theories are used here to explain the adoption of global policy trends by the nation-state and show how the changes in global agenda and country context can influence the processes and roles both in local and bigger cooperation schemes.

The following subsections describe the GG and PT theories and lay out key concepts and components that will constitute the analytical framework.

### *4.1. Global Governance Theory*

Global governance is one of the widely debated topics in academia, policy circles, and international relations. It encompasses discussions on the mechanisms, structures, and processes by which global issues are addressed and managed. Scholars and experts approach GG from different theoretical, disciplinary, and ideological perspectives, leading to diverse understandings and definitions. Michael Zürn defines it “the exercise of authority across national borders as well as consented norms and rules beyond the nation-state” (Zürn, 2018,p.3). Enderlein et al. (2010), see it as “the sum of regulations (policies, programs and decisions) brought about by actors (public and private), processes as well as structures” (Enderlein et al.,2010,p.2).

While there is not a single universally accepted definition, they all agree on multiple dimensions and actors involving interactions and decision-making at various levels, from local to global, and across diverse policy domains (Fioretos & Tallberg,2021). Still, one of the commonly cited and influential definitions of GG is provided by the Commission on Global Governance in its report titled "Our Global Neighbourhood"

*"Global governance is the sum of the many ways individuals and institutions, public and private, manage their common affairs. It is a continuing process through which conflicting or diverse interests may be accommodated and cooperative action may be taken. It includes formal institutions and regimes empowered to enforce compliance, as well as informal arrangements that people and institutions either have agreed to or perceive to be in their interest."*

(Commission on GG,1995).

Originally emerging in the post-World War 2 era as a response to the need for international cooperation to address global challenges, the concept of GG has evolved over time, reflecting changes in the global landscape, shifts in international relations, and new challenges faced by the international community (Triandafyllidou,2017). It gained traction in the 1990s with the increasing globalization of economic, political, and social processes (Rosenau & Czempiel,1992).

Over time and across different disciplines, the study of global governance has undergone an evolutionary process, leading to shifts in focus and the emergence of new combinations of concepts and variables. This evolution has resulted in the development of multiple concepts and frameworks within the broader field of GG theory, some of which are presented below.

Initially, GG was understood as primarily state-centric, emphasizing the role of governments in managing global affairs. The "Governance without Government" framework came to challenge the traditional notion as the exclusive domain of formal



governmental institutions. It emphasizes the importance of non-state actors, networks, and informal mechanisms in global governance processes (Rosenau & Czempiel,1992). However, despite recognition of the importance of non-state actors, Carin et al. (2006) argue that global governance theory may still be biased towards the state-centric approach which may limit participation of non-state actors in decision-making processes. This can perpetuate existing power imbalances leading to unequal distribution and uneven outcomes (Biermann et al.,2009), a potential area for critical theories to examine power dynamics, inequalities, and the role of dominant actors and structures.

Traditionally, together with the state, inter-governmental institutions like the UN have played a crucial role in GG. However, gradually there has been an increasing interest in the networks involved in the governance processes (Slaughter,2004). While institutionalists argue that institutions and regimes provide platforms for cooperation, coordination, and the resolution of collective action problems (Keohane, 2015), network governance theories focus on the interactions, collaborations, and information exchange among diverse actors. Some of them, as Transnational Advocacy Networks, highlight the role of NGOs, activists, and other actors forming transnational networks to advocate for specific causes to mobilize support for policy change and to influence GG (Keck & Sikkink,1998).

Krasner (1999) argues, that GG has moved beyond power politics and expanded to encompass normative frameworks, focusing on shared values, human rights, and global justice. To analyse this, constructivist theories highlight how shared understandings, identities, and norms influence the behaviour of states and other actors (Finnemore & Sikkink,1998). Moreover, there was a shift from issue-specific to cross-cutting approach, changing focus from specific issue areas(like trade or security) to the interconnectedness of global challenges and global public goods(ibid). These changes, however, put GG under critique for being too “wide” to have effective

enforcement mechanisms to avoid difficulties in implementation and compliance with global norms, rules, and agreements (Abbott et al.,2016).

The choice to employ the Global Governance (GG) theory in this research is rooted in its intrinsic alignment with the intricate dynamics of international intervention and national policy-shaping. Given the complexity of implementing international agendas like the CRPD at the national level, GG theory provides a lens to dissect the multifaceted roles of state and non-state actors, elucidating their cooperative and conflicting contributions to policy adaptation and implementation. By embracing GG theory, this research endeavours to untangle the nuanced web of global-to-local interactions and provide a deeper understanding of the forces shaping the implementation of disability-related international agendas within Armenia's unique context.

#### *4.2. Policy Transfer Theory*

To delve into the nuances of localisation of global agenda this research invites policy transfer theory to be the part of analytical framework. PT is an interdisciplinary field that draws on insights from many disciplines to understand the process of the transfer and all the factors around it (Dolowitz & Marsh,1996). It is a wide umbrella for many concepts of policy entrepreneurship as policy learning, policy diffusion, lesson drawing, policy translation, etc. and among others can discuss mechanisms, actors and processes involved in policy export-import (Evans, 2009; Stone, 2012). Dolowitz & Marsh define the policy Transfer as follows:

*“Policy transfer is a process in which policies, administrative arrangements, or institutions that exist at one time or place are used to develop knowledge about policies, administrative arrangements, and institutions at another time or place” (Dolowitz & Marsh, 2000,p.344)*

The early roots of policy transfer theory can be traced to the work of scholars such as Richard Rose, who coined the term "lesson-drawing" in the 1980s (Rose,1991), and

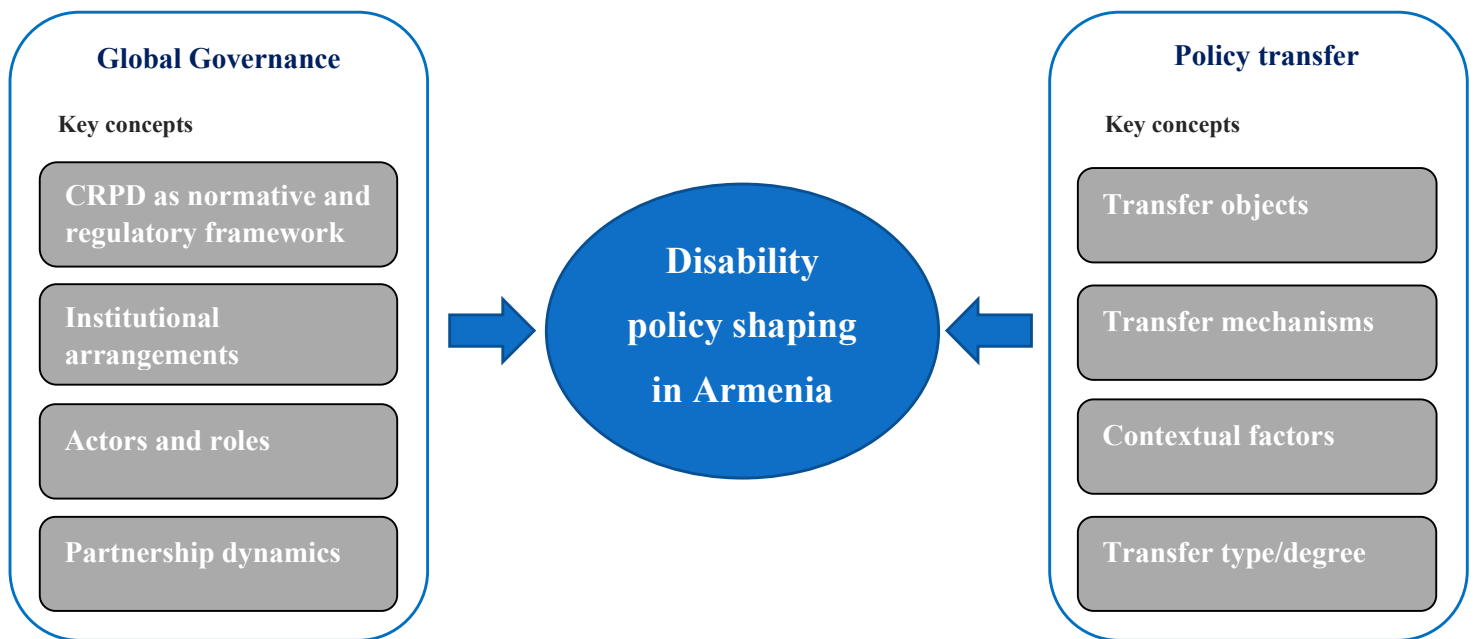
Christopher Pollitt, who developed the concept of "borrowing across boundaries" (Pollitt,2003). These early contributions laid the groundwork for the subsequent development of the theory. It gained further attention and recognition as a field of study in the 1990s and 2000s, with the publication of influential works by scholars such as Diane Stone, Claire Dunlop, and Michael Howlett. These scholars explored the concept of policy transfer in different contexts, including international organisations, supranational entities, and national governments, and developed theoretical frameworks to explain the process of policy transfer. The role of policy transfer in contemporary policymaking is appreciated by many authors from the perspective of learning from experiences of other countries and jurisdictions without reinventing the wheel (Dolowitz & Marsh,1996; Stone,2012). Policy transfer theory is also recognized for its understanding of the multi-actor nature of the processes, and context friendliness (McCann & Ward,2012).

While policy transfer theory has been widely used to analyse policy change and innovation in various policy areas, it is not without its limitations and critique. Though theory is not blind to political and administrative factors, which is basic for successful policy entrepreneurship(Howlett & Mukherjee,2014), it may not adequately consider ethical dimensions of policy-shaping, including issues related to social justice, equity, and human rights. Policymakers need to ensure that transferred policies are aligned with ethical principles and do not perpetuate existing inequalities or violate human rights(ibid). At its core, PT theory suggests that policies and practices are rarely developed in isolation, but are instead shaped by a variety of factors, including political, economic, and social contexts, though some aspects of the theory (as policy diffusion) have been criticized for overlooking contextual complexities and power dynamics, focusing more on simple transfer of policy ideas and practices (Dolowitz & Marsh,2000). This may happen because terms "policy transfer" and "policy diffusion" are often used interchangeably. And though they both refer to the process by which policies, ideas, practices, or knowledge are

spread from one context to another, there are slight differences between their focus, scope of transfer, intent and agency (Cairney & Oliver,2017).

### 4.3. Building the Analytical Framework

As can be seen from the abovementioned, the intersectional and multidimensional nature of CRPD gives multiple ways to approach it. To understand the CRPD implementation in the context of disability policy-shaping in Armenia, this thesis integrates GG and PT theories to contribute to the analysis. Recognizing the extensive scope of both theories, the following concepts have been singled out to construct the analytical framework, aiming to address the questions that underlie the formation of foundations, roles, and policies.



**Figure 1. Analytical framework of the study (Author’s construction)**

Theoretical concepts involved in analysis are from the toolkit of GG and PT theories. Both theories contribute to exploring each of the questions, investing views from different angles.

GG shed light on the dissemination of the CRPD as an international normative framework. It examines the role of actors in shaping and promoting disability rights standards. PT, on the other hand, explores how these global norms are transferred to nation-states, including the policy ideas, practices, and experiences that are shared and adopted. GG focuses on the institutional arrangements and governance structures, considering how these institutions shape and guide the implementation of the CRPD, while PT targets interactions between international, national, and civil society actors. PT examines how nation-states learn from the experiences of other countries and adapted policy approaches to their own contexts. GG complements this by examining the broader governance structures, funding mechanisms, and international cooperation that support policy transfer and implementation efforts. Both GG and PT recognise the importance of contextual factors. GG considers broader political, social, and economic contexts within which disability policies are implemented. PT delves deeper into contextual factors as political will, institutional capacity, cultural norms, or emergency junctures.

## CHAPTER 5: METHODOLOGY

### *5.1. Research Design*

The research was designed as qualitative, utilising a case study approach to comprehensively address the research questions. Qualitative exploratory methods were employed for data analysis, with a particular emphasis on analysing the primary qualitative data gathered through semi-structured interviews (Creswell, 2013). These interviews served as the foundation of the study, providing rich and in-depth insights into the topic. In addition to the primary data, secondary sources such as laws, political documents, reports, surveys, and existing research were also employed. These secondary sources served multiple purposes, including triangulating the findings, testing the reliability of the primary data, and verifying the empirical findings (Silverman, 2011). By examining the interrelationships between the activities studied and the contextual factors, a comprehensive understanding of the topic was achieved.

The research design has shaped a better understanding of the connections between available data in official national and international sources and empirical data collected within this research. It helped to investigate the role of global agendas and their enforcement mechanisms in sectoral policy-shaping processes in the observed geographic location.

After initial desk research and preparation to field, the actual qualitative data collection started. The fieldwork was not a mere collection of data, but also provided different dimensions and nuances, structure and settings, enabling the researcher to step into the environment that allows to see and hear much more from what is visible on the surface (Patton, 2015). Semi-structured interviews were used to collect data, as this method allows flexibility in the order of questions ensuring a good flow of the

interview and the opportunity to explore themes as they emerge during the conversation (Dunn,2008). Furthermore, considering different institutional representation and professional backgrounds of the participants, idiosyncratic approach was adopted (Gomm et al.,2000), to maintain the relevance of the questions to receive more insightful information.

## *5.2. Data Collection and Sampling*

The research sample includes 15 respondents in total representing state actors, international organisations, CSOs (including OPDs) and consultants. The diverse composition of the sample relates to the multidimensional and multidisciplinary origin of the CRPD, and actors involved in different aspects of its implementation. Representation of multiple actors aimed to get a better overview and detailed understanding of policy reform, implementation and influences standing behind it.

First, key actors related to CRPD implementation were mapped and communicated. The initial contact and majority of interviews were made with key informants in government, international organisations and CSOs as a generic purposeful sampling. Afterwards the informants' engagement was ensured by the principle of chain-referral or snowball sampling (Saldaña,2021).

Considering that the data collected from a sample size of 15 can be subjective and not easy generalisable, the main findings were checked against policy documents, reports and evaluations, as well as with websites and social media platforms.

In-depth semi-structured interviews were used to collect data, using initially classified main themes. The interviews employed an inductive approach, where questions were used to elicit the respondents' opinions on influence of local and global context, structural and contextual factors on policy actors and process dynamics, and

their linkage to policy outcomes. To do so, the respondents<sup>2</sup> were asked to think back to reconstruct the events to find causalities (Bryman,2012).

Interviews were conducted in February-March 2023, convenient for participants' hours and locations. They took on average 60 minutes (ranging from 40-90 minutes). The interview overview can be found in Table 1.

Four participants were known to the researcher from previous professional networking. 13 out of 15 interviews were conducted in person and only two through online videoconference. In-person interviews took place in two cities, Yerevan and Gyumri, where interviewees are based and work. Interviews were conducted in Armenian language.

Interview Number	Informant Category	Duration of Interview
1	Senior trainer/Consultant	52:20
2	State Representative	56:04
3	State Representative	57:07
4	International Partner	88:00
5	State Representative	39:22
6	CSO	67:11
7	CSO	90:12
8	Representative of Independent Body	61:57
9	International Partner	54:12
10	CSO	39:38
11	CSO	49:21
12	Senior trainer/Consultant	41:06
13	CSO	38:41
14	Sectoral Service Provider	76:52
15	State Coordinator	42:17
<i>Table 1: Informant Overview</i>		

<sup>2</sup> As all interviewees represent parties highly interested in involved in different aspects of CRPD implementation, “key informant”, “interviewee”, “respondent” will be used interchangeably



Before starting the interview, the researcher read the consent form that stated the purpose of the research, procedures, and confidentiality. The researcher emphasised participants' liberty to interrupt their contribution at any time and without any risk to their identity disclosure. All interviews were recorded with participants' consent. No participant required or was interested in validation, however, all of them are interested to have the final version of the thesis after its publication.

### *5.3. Data Processing*

Data processing was done in several rounds and steps following the steps and considerations of coding qualitative data outlined by Bryman (2012). First, due to the language of interviews (Armenian), transcription process involved also translation, which was done manually. In this process, information was listened and read through multiple times resulting in singling out interesting and important notes even before starting the actual coding. After the interviews were translated, transcribed and quality-checked not to miss out any important data, it was read through again with making margin notes and separating key words. With the increase of number of codes, the connections and relationship between them and possible duplications were examined, with simultaneous attempts also to check connections with some theoretical concepts.

The second approach to the data was guided by the theory, which was chosen based on the primary coding and testing. The employed analytical framework guided the coding of data using a generic holistic approach (Saldaña,2021). The coding was done according to theoretical concepts with a holistic approach, suggesting 'theory-theme-categories-codes' scheme, for deeper exploration of the interconnectedness and complexity of the data.

## *5.4 Ethical Considerations*

Ethical considerations should be central in every stage of the research. The role of the researcher is, by conscious and informed activities, eliminate or mitigate possible occasions. This is usually done by following main ethical principles as informed consent, voluntary participation, protection of personal data, reciprocity, etc (Bryman, 2012), which was followed both in pre-interview communication and the subsequent stages.

Ethical issues may arise in different phases of the research and may be displayed in different ways, considering the type of organisation and the position of interviewee. Researcher cannot ignore power dynamics, should be respectful and should avoid doing any harm for the research participants. Sometimes respondents share a piece of information marking it as “not for public” or “this doesn’t reflect my organisations official position”. In such cases, researcher should not push the respondent in interview stage being responsible for not causing unnecessary risks or inconveniences in later stages of data analysis or publication (Creswell,2013b)

Gatekeepers’ possible influence on the research, with their efforts to regulate whom the researcher can meet and what information can access, should also not be forgotten (Scheyvens, 2014).

In this specific case when the topic of interest is disability policy and when some of the interviewees are and/or represent persons with disabilities it is significant for the researcher to consider the sensitivity of the topic and familiarize herself with the respective concepts, behaviour and vocabulary. Stigmatisation is a form of discrimination that is often present in the language. Thus, while designing and conducting the research and during the analysis and reporting, it is important to use disability-friendly appropriate language.

### *5.5. Positionality and reflexivity*

Going into the field means becoming part of the process together with interviewees constructing not only data but sometimes also ethical reality (Palmer et al.,2014). The acknowledgement of the researcher's role as co-constructor, emphasises the importance of understanding or revisiting own positionality and reflexivity.

Acknowledging that any research is never fully neutral (value-neutral, background, interests-free, etc), it is important to understand how different aspects can influence the research process and results. In the case of the present thesis, the research was home-based, with common culture, language, deeper knowledge of own society as an advantage, however, it is not a guarantee to automatically become an "insider"(Desai & Potter,2006). The knowledge of the country context together with some understanding of the sector and, network due to previous professional experience, provides easier access to the field. However, depending on the type of organisation, researcher may have different experiences. In the case of state bodies, the representatives of responsible sectors and institutions act as the first line standing at the gates, who mostly choose to open the gates rather than keep them closed. However, as Bryman fairly mentions (2012) gaining access be it easy or not, may be considered as a political process, which can pursue the aim of trying to influence the research in one way or the other. In the case of this research, it came as a suggestion about the representation of certain list of actors, "the best actors" involved in the case. In a non-formal discussion, researcher was also told, that some of the questions will not be answered in official interviews or will differ from reality. The points from this so-called "backyard research" became part of research process observation and were perceived as something in between positionality and politics (Bryman,2012; Creswell, 2013). Without forgetting about the possible influences, own and others' biases, in mind also was kept researcher's different roles, from data collector and creator to the key instrument of research(ibid).

## *5.6. Limitations*

Every method, especially used in a specific context has its limitations, however, acknowledgment of limitations can be useful both to position the present work and to consider it for future improvements.

The first limiting factor is the time available for the study, which limited the number of interviews with different actors that could provide wider perspectives. The gap was filled by the literature review, written communications, social media posts and news, analysis, reports and statistics.

The secondary data, however, provides other limitations, i.e., little time for a deep understanding of cross-sectoral analysis or research. Low quality of disability data is both limitation and, at the same time, one of the findings of the thesis.

In the ethics section gatekeeper's "regulatory role" in research process was mentioned as a possible ethical issue. Likewise, chain-referral and snowball sampling can prove being possibly bias and limiting.

Inductive approach in interview process contributed to too much data generating, which is limitation in relation to the short time and scope of the paper.

Finally, the language of interviews. Interviews were conducted in Armenian, which yielded in shorter data collection period, though made the process of transcript considerably long, as data was also translated into English, and quality checked.

## CHAPTER 6: ANALYSIS OF FINDINGS

Prior to the presentation of findings and delving into the analytical part of this study, it is important to outline the structure of this chapter and how it addresses the research question. The chosen case study is complex due to the intersecting aspects and multiple dimensions. First, it presents global and national agendas in policy, development, and human rights context. Second, it brings in CRPD treaty, both as a legally binding and normative instrument. Third, it refers to multilevel governance with all interconnections of actors between and within these levels. Finally, it tries to explore how processes, mechanisms and agency yield social construction and policy outcomes.

The chapter presents an overview of the analysis of disability policy-shaping in Armenia with research questions in mind which ask:

- a) How have the role of governmental ministries, CSOs and the international community changed during the process of implementation of the CRPD treaty in Armenia?*
- b) How can we understand the changing roles shaped the new disability policy in Armenia?*

The theories will contribute in different ways and extent. The first part of the analysis will be done with the help of GG theory with an attempt to understand how the CRPD as a normative framework and institutional arrangement has influenced the partnership dynamics and role changes of the key actors involved in the disability policy-shaping. In doing this, first, the normative and regulatory nature of CRPD will be discussed. With the second step actors and institutions involved in the CRPD implementation and policy-shaping will be identified. After that, the whole process of policy reforms, from CRPD implementation to law adoption, will be divided into periods for a better understanding of roles and dynamics across the

periods. The second part of the analysis is constructed in the Discussion chapter. Concepts of PT theory will be used to group and discuss concepts and events analysed in this chapter into different categories and elements of transfer. It will come to complement the GG theory by examining why, how, and what was transferred between global and local jurisdictions and how it relates to the role changes and policy outcomes.

### *6.1. CRPD as institutional arrangement and normative framework*

While talking about disability policy and practices, all the respondents pointed out the importance of CRPD as a central framework and “the starting point for the mindset and policy reforms” (Interview 3). For some participants it is an important instrument in their working toolkit, a guideline regulating many aspects of their work processes, content, and relationships (Interviews 2,9,11). For the others, it is a platform for cooperation, advocacy, and right promotion. For a big segment of the population, as some interviewees believe, it is hope, expectations and opportunities for everyday lives and long-term changes (Interviews 6,7,10,14).

All the respondents agree that as an institutional arrangement, the CRPD provides a structured framework for a nation-state to implement and monitor the rights of PWDs. It creates obligations for state parties to adopt legislative, administrative, and other measures to promote and protect the rights. The CRPD also encourages cooperation with international actors, the involvement of civil society organisations and persons with disabilities in the decision-making processes related to disability rights. Generally, the main parties bringing the CRPD from global-to-local level are the UN with its agencies and the nation-state governments. In the case of the Republic of Armenia (RA), the state’s representative focal point is the Ministry of Labour and Social Affairs. The Ministry is responsible for coordinating and overseeing the implementation of the CRPD within the country. It serves as the main contact point for matters related to the Convention and works in collaboration with

relevant government agencies, CSOs, and other stakeholders to ensure the effective realisation of the rights of PWDs in Armenia (Interviews 2,3,6,15). In the opinion of some respondents, however, despite its huge efforts, MLSA has limited resources to do equal coordination among all the actors and activities (Interviews 2,3,5,15), because:

*...new collaborations need more coordination and content work, but when the number of involved specialists stays the same while their obligations continuously increase, it becomes a real burden for already overloaded department offices (Interviews 2&3).*

This, together with high turnover of workforce in the state structures, is one of the many examples, that can be included as a challenge when reporting to CRPD Committee (Interview 2). Composed of independent experts, the Committee serves as the monitoring body for the Convention. It reviews the reports submitted by state on the implementation of the CRPD, engages in a constructive dialogue with state parties, and provides guidance on interpreting the provisions of the Convention. Understanding the importance of the Committee as a monitoring mechanism, some interviewees reported it being “slow and too bureaucratic” (Interview 10). In addition, though the Committee’s recommendations have moral and political weight, they are not legally binding, which may slow down the process of addressing them at national level (Interviews 7,8). Quicker but not always more effective are “local monitoring forces”- Human rights defender’s (HRD) office as national monitoring body and NGO/OPDs- which mobilise their resources to solve single cases as well as use their channels to exert pressure on the state to improve laws, regulations, or services to address issues in country level (Interviews 6,7,8,10,11).

As an institutional arrangement, CRPD itself highlights the importance of developing good working, inclusive laws in nation-states (UNCPRD, 2006). With the ratification of CRPD in 2010, all the stakeholders, but especially PWDs and OPDs hoped for quick changes in the disability legislation, as it was no longer only “the

matter of a minority group in the country with bigger problems”, but also internationally regulated commitment of the nation-state (Interview 6&10). Law drafting processes started forthwith ratification, aiming to bring the legislation and CRPD talk to each other, but the final right-based laws were adopted only 11 years after. It was possible to make reform in a shorter period, but contextual factors together with the “honest acknowledgement of practical capacities, resources and attitudes” delayed the processes (Interview 11). And even after that long period laws and especially the set of regulations necessary for its full and effective enforcement are not perfect and, in some episodes, do not fully support human rights approach (Interview 8). Though it is worth mentioning, that despite concerns about regulatory aspects and mechanisms of new disability legislation, all the interview participants emphasise the significance of having these laws. Moreover, two of the respondents remarked:

*Yes, we were looking forward to having those laws on the table, but we do not see it as a mere political outcome. It is rather a process that irreversibly changed ideas, perceptions and approaches in different levels and dimensions (Interview 6).*

*Indeed, the norms and ideas embedded in CRPD are not only reflected in all steps of disability policy reform and in current disability legislation. They also create the environment in which the processes are boiled, and decisions are made (Interview 10).*

Observations in the process of data collection provided evidence of the dual understanding of CRPD by all interviewed key informants. Those, who represent the main parties in CRPD implementation or by mandate are responsible for any disability-related component planning or execution, showed detailed understanding of the treaty structure, concepts and mechanisms. All interviewed participants are well familiar or even bearers of the Convention’s ideas and norms. It is more vivid when it comes to language and terminology. Evidence was shown both in the process



of interviews as well as studying materials published or disseminated by the institutions they represent. Study of the recent disability laws also shows their compliance with the CRPD concept and language. However, the above-mentioned reflections of the Convention are mostly from official documents and sectoral professionals and may differ from comprehension of CRPD among wider professional authorities and the general population.

## *6.2 Actors, roles, timeframes*

In the past, the legislation of Armenia included provisions for some aspects of lives of PWDs, although the approaches and understanding of disability were significantly different from the current mainstream perspective. Being based on the medical model of disability, the law of 1993 was directed mainly to social protection. People who had chance to visit other countries or learn about other approaches were inspired by new ideas and practices around it. Among them, PWDs and their families were first to point out the limitations of the legal framework (Interviews 6&10). With the representation of international community and emergence of local CSOs, PWD needs were better mapped and defined, bringing together different aspects, sectors, and institutions (Interviews 3,6,13,14). In that context the idea of CRPD and its adoption by country was perceived as an opportunity for reforms and new legislation, to remove the obstacles PWDs experienced in everyday life (Interview 13). Consequently, reform was undertaken, though it took longer period than any of the parties could imagine. Furthermore, the majority of the interviewees mentioned that the process is hard to describe as linear, rather “a long time of ups and downs within which the efforts and actions took different pace and progress” (Interview 14). As for actors involved in the process, all the interviewed participants named state, international actors and CSOs as three main groups. Based on this pattern the role changes of key stakeholders (institutions and actors) in the process of CRPD implementation will be analysed and presented for three main group of actors within three separate time periods. Before the presentation according to these categories,

it is worth to display what actors are seen as part of each group and how the time slots are demarked.

*State Actors:* In their wider range state actors include the office of Prime Minister, National Assembly and its sectoral committees, Ministry of Health, Ministry of Education, Science, Culture, and Sport, State Urban Development Committee. However, the main responsible for disability policy and practices in Armenia is Ministry of Labor and Social Affairs, with its state agencies and local executive bodies. Some institutions are reorganized or renamed over time, but they still belong to the same sector or jurisdiction (Interviews 3&15).

*International community:* International actors are presented in three main sub-groups: global intergovernmental organisations as UN with its agencies and bodies, multilateral international organisations, as EU and WB, bilateral organisations as embassies and single-country international development agencies. Respondents also mention transnational disability advocacy networks and INGOs, which are seen both as international actors and CSOs (Interviews 6&7).

*Civil society organisations:* The list of CSOs mentioned in interviews includes NGOs, Foundations, OPDs, disability rights coalitions and networks, HRD Office. Moreover, OPDs are classified as rights advocacy or service providers, organisations for children or adults, disability-specific or cross-disability (Interviews 3,4,6,8,11,12).

*Timeframes:*

In its newer history Armenian government has partnered with numerous local, international, and transnational organisations in a range of sectors, including economic development, education, human rights, and social inclusion. These partnerships involve various forms of collaboration: funding, service provision and capacity building, technical assistance, and joint programming. Partnerships and projects evolved through time with changing agendas and contexts both at local and global levels. Changes in programme architecture and partnership dynamics in disability area is more noticeable since the ratification of CRPD in 2010. Post-CRPD

course (2010-present) can be conditionally divided into three smaller time segments based on intervention construction, degree of agency and policy progress (Interviews 2,3,4,5,6,8,9,10). First three years (2010-2013) can be considered as time of preparations or Inception, the period in the middle (2014-2017) was time of new partnership establishment, experiments, testing and trying, and gradually, latest period (2018-2021) was time of revolutions both in country and in disability policy.

### *2010-2013: Inception*

The newly ratified Convention brought to the table new concepts and definitions, not quite circulated among the state institutions. The task was not only to familiarise themselves with the HRB approach embedded in the treaty, but there was also a need for the responsible ministry to understand how to integrate it into the national policy (Interview 9). To understand that, for MLSA was crucial to assess needs, map resources, get and compile cross-sectoral data from other government ministries and own agencies (Interview 2). The assessment was needed not only for the general idea but also for strategic planning and budgeting. Another reason for quick mapping was the initiation plan, which is part of monitoring mechanism of CRPD and is due to be submitted to CRPD Committee 2 years after ratification (Interview 8).

Cooperation with UN was in the stage of early establishment. In the absence of relevant policies and strategies, and due to lack of general awareness of new concepts and expertise, the state did not see its needs and was open to learning, to meet undertaken commitments. This state of things put UN and other internationals in a stronger position of having more resources and power “to show the state partners the right direction” (Interviews 2&8). Talking about that period, one of the interviewees remembered:

*We were blind, yet eager to get any information and skills, that would help us to translate the definitions, explain the mechanisms and help to mobilise already scarce (human) resources (Interview 3).*

CSO sector, namely OPDs mostly working within the scope of service provision, and little employment in advocacy, also had scarce awareness of new concepts. The skills or experience to practice different roles stipulated by the Convention were not in place either. Besides, there was little cooperation between public and CSO sector (Interviews 6,10,12). In this context international community already working separately with the government and NGOs, also acted as a connector between state and CSOs, creating platforms for awareness raising and experience exchange (Interview 2). Alongside with that, international actors were disseminating CRPD concepts and language throughout the country, campaigning directly or through local CSOs, thus bringing new ideas into the wider public discourse (Interview 14). A very good example of multilevel cooperation was USAID funded project coordinated by Save the Children and implemented by three local organisations with the expert support of a foreign partner. The project with focus on PWD economic rights, brought together MLSA employment agency, employers and their associations, NGOs, OPDs and of course PWDs. Other components of the project include cooperation with vocational educational and training institutions (both teachers and students), professional orientation centre, journalists, etc.(Interviews 3,6,14). As one of the interviewees noted:

*...it was a successful cooperation with so many different stakeholders and components, bridging sectors and organisations, disseminating ideas of inclusivity, accessibility, equality and non-discrimination. It was one of the first attempts to practice functionality assessment and social entrepreneurship. It is so much pity that short memory of institutions didn't make opportunities to keep and share that valuable experience (Interview 3).*

#### *2014-2017: Trying and Testing*

It was a long period of improvements and reforms supported by many grant projects and international cooperation at different levels (Interviews 2,10,11,12). Main work at national level started with cooperation between MLSA and different UN agencies

under the umbrella of the United Nations Partnership on the Rights of Persons with Disabilities (UNPRPD). The period of 2014-2017 was about the improvement of the existing laws but also start for new initiatives. Among the first steps, a concept paper for ICF was developed and approved by a government resolution in 2014. Following that, MLSA studied the WHO ICF, and with international technical support, developed age- and gender-sensitive assessment toolkits and methodological guides (Interviews 2,3,5,8). In addition, as part of the UNPRPD-funded project on disability assessment reform, a number of trainings for practitioners, policymakers and OPDs were conducted on disability inclusion, disability multidisciplinary assessment, service provision and programming, widening knowledge on the right-based model and introducing ICF (Interviews 1,2,4,9,12).

*It was a time of learning, trying, and testing. We were checking ideas and hypotheses, exchanging experiences, zooming in and out, working day and night to move forward and to make things tangible (Interview 5).*

The period was important for the partnership perspective. All the new knowledge and experience exchange strengthen partnerships among all actors and within the sector. In that period, especially after SDGs were set, disability was included in many CSO projects giving more opportunities for cooperation. For example, the disability assessment toolkit developed by MLSA was piloted in NGOs/OPDs as part of their grant projects. In the framework of grant projects, many CSOs were equipped with tools and knowledge, later used to provide state-delegated services for PWDs (Interviews 6, 13,14). Another point bringing CRPD and SDGs in CSO projects was the Universal Inclusive Education (UIE) reform launched by the state in 2016, aiming to enhance access to education and eliminate the isolation of children due to their special educational needs (Interviews 4,11,12,14; UN Armenia, 2021, p.34). For CSOs, this was also a period when they became part of CRPD monitoring processes by developing shadow reports in alternative to the first country report.(Interviews 4&7).

Without diminishing the importance of the abovementioned, all the participants refer to the beginning of 2017, when the government adopted the five-year Comprehensive Programme for Social Inclusion of PWDs, as a real start for the development of the main laws. Going back to that point one of the interviewees remembered the enthusiasm they had for real change:

*Now it is official, we are not going under another cycle of improving the social protection law by adding or deleting articles, we are changing it to align with the requirements of the CRPD and human rights concepts (Interview 6).*

### *2018-2021: Last push*

The 2nd phase of reforms was more productive, based on the experiments and experiences from the earlier stages. However, processes really gained momentum since the beginning of the year 2018.

As the informants mentioned, in 2017 law was drafted and put for public hearings. Due to the Velvet Revolution of 2018, however, the adoption of the law was first delayed, then cancelled. What happened after was described by all interviewees as “unprecedented change. Majority of high and mid-level officials had to leave their employment and were replaced with “new faces” (Interviews 6,7,10).

*...though these faces were not unfamiliar to the disability professionals and PWDs. These were people working with /for them, doing advocacy or being vocal every time rights were violated or ignored (Interview 10).*

CSO activists, including PWDs, meaning people with CSO and disability knowledge and experience, “those who know the underwater part of the iceberg”, now came to hold the decision-making positions. (Interviews 4,7,8,11,15).

*It was so inspiring and touching, when you see a woman, who was one of those young girls putting a symbolic signature back in 2010, to express her support and solidarity for the CRPD idea, now enters the responsible ministry in the role of first face (Interview 6)*

That was not just a role change, that was the whole shift of sectors. Does it mean that with that shift CSO sector was better represented in disability sector? The lived and professional experience of new officials influenced both the partnership styles and network engagement. It changed both public and CSO sectors' understanding, assumptions, expectations, and the whole dynamics of cooperation. "Sector shift" brought new perspectives in the decision-making picture but detained political processes.

*New people with better sectoral but weaker administrative knowledge came to delete everything and start from scratch (Interview 9).*

This once again proves systemic problems of the state institutions, where institutional memory is weak, where personal factor stays prior to the institutional one (Interviews 6,7,10).

Nevertheless, the new government kept commitment to the CRPD implementation, reaffirming it in the Programme of Activities for 2019-2023. Roadmap on Reform of Disability Assessment and Introduction of the Functional Assessment was developed shortly after the 2019-2023 plan and came to put timecodes to make the process more organised and traceable (Interviews 1,4,5,12). Laws were drafted very quickly, discussed with PWDs, their organisations and multidisciplinary committees. But by the time they were ready for final public discussion 2020 came with its huge challenges: first Covid-19 pandemics, then armed conflict, with all consequences for the country and a big burden on the social sector and MLSA. (Interviews 2&3).

*Of course, 2020 causes complex situations and priority shifts but also urged policy actors to finalise and adopt laws, though it was clear that more time will be required to develop regulatory frameworks and allocate funds to put the laws in force (Interview 2).*

To the question "Was the country ready for new legislation" the answer was "Yes and no". No, because alongside regulations, there are issues that hinder the implementation of all provisions of law, including general accessibility, inclusive

services, data on PWDs, etc. Armenian legislation lacks a distinct non-discrimination law, national monitoring mechanisms are also poor. Yes, because - no legislation and society can be developed in vitro and, at some point, put together. With current political will, knowledge, and skills, however, it is possible to succeed starting from the present point and building on it (Interviews 3,5,6,8,9,12,13).

*These laws are good enough to start with to break the vicious circle. There is still a long way to go, but it is easier when you know the directions and goals (Interview 5).*

During the whole period of the reform, CSOs were part of policy discussions and debates. Opposite to earlier stages when they tried to force their participation, now they were invited to discuss, consult, and advise. Nevertheless, there is a lack of established mechanisms that would enable to assess degree to which the recommendations, opinions, and observations of OPDs are considered or accepted in relation to sectoral documents and legal acts (Interviews 7&8).

CSOs continue their monitoring role in the implementation of CRPD doing it solely or as a part of a network or a coalition (Interview 10). The best example of such is the Coalition of Inclusive Legal Reforms, established within an EU project. It reports everything that opposes the requirements of national and international disability legislation and advocates for less represented groups as people with mental disabilities, PWDs in care institutions (Interviews 7,10,11). CSOs are also part of the Public Council which was established in 2019 between OPDs and NGOs by the HRD Office, the official monitoring body in country level. Though the Council strengthened cooperation between CSOs and the Defender's office, CSO participation is not on everyday basis, thus making this cooperation less effective (Interviews 7,10).

There is a redistribution of roles between the state and CSOs, with delegation of part of the social services for PWDs to the CSO sector. In earlier stages, service providers were just preselected by MLSA list of CSOs, whereas later the cooperation was built in more transparent conditions. Certified organisations of certain profile from the



pool are competing in a tender to provide the best service for PWDs, based on their specific needs identified by the MLSA (Interviews 2,6,11,12,13). State-CSO cooperation will expand also in community level, where CSOs provide their space and skills to establish community-based independent living centres, with the financial support of UN agencies.

The role of MLSA also changed over the time, evolving from passive policy receiver to active importer and agent (Hulicka et al.,2023)

*Now with a comprehensive understanding of CRPD and HRB approaches and with more democratic processes of decision-making one of the big roles of the state is coordination (Interview 2).*

Considering intersectionality and multiple dimensions of disability, the coordination is complex and not fully achieved yet (Interview 10). The segment where MLSA succeeds is intra-organisational, i.e., coordination among the departments and agencies, at national and subnational levels. The full picture of NGOs/OPDs and the projects they implement is not considered as “part of the task” (Interview 7). However, there is some coordination of CSOs directly working with MLSA. Coordination is also done through committees and working groups established or facilitated by MLSA. An example of such an intersectional coordination body is the National Commission for PWDs coordinating the activities carried out by various agencies and organisations, including OPDs and civil society. Despite these examples, all the respondents shared a common concern about weak coordination capacities which in many ways hinder the effective process of CRPD and national disability policy implementation. Among other pushback factors interviews single out monitoring mechanisms, institutional memory, staff capacity and turnover (Interviews 6,7,10,11).

## CHAPTER 7: DISCUSSION

Policy transfer theory is used for further discussion. The application of PT in a sequential manner allows for a comprehensive examination of findings, offering a holistic perspective on the process of policy development and the influence of structural and contextual factors on policy transfer.

The concepts of PT were widely discussed in scientific literature, however, due to the big umbrella of the theory, approaches and definitions may slightly differ from author to author. To escape the confusion, the concepts will be explained before using them in discussion.

### *7.1. Transfer objects*

In the context of PT, objects include policies or policy elements, approaches and practices that can enhance the development, adoption and implementation of policies (Huang et al.,2022)

In case of the CRPD, with ratification, the treaty itself is becoming a transfer object. Considering the multiple dimensions and intersectional nature of the Convention, different elements can be discussed as transfer objects. First, CRPD itself provides legal and policy approaches and ideas. As we can see in the analysis, in Armenia first objects of transfer were the language and content of the treaty. Understanding of the concepts of accessibility, equality, non-discrimination, inclusion, etc. made it easier for different actors to value the role of the HRB approach to education, employment, social protection, health, and other areas covered by the CRPD. Talking from the perspective of institutional arrangements, collected data shows examples of intersectional working groups, commissions for policy development, coordination and discussion, as well as establishment and reorganisation of monitoring bodies to

ensure compliance with the CRPD. Knowledge and expertise are another transfer objects, mentioned by interviewees. In analysis we can see how experience changes not only improved understanding of the topic, but also strengthened partnership between policymakers, practitioners, and experts in the field of disability rights. In the case discussed in this thesis, we also have an example of the model as a transfer object. In the smaller picture, it is the ICF assessment model, which since 2014 has been big part of policy reform and one of the two laws adopted in 2021 is on ICF assessment social model of disability versus long practiced medical model. This brings us back to CRPD, with the involvement of which the HRB model of disability resulted in a ‘paradigm shift’ and became a transfer object for overall disability new understanding (Mittler,2015)

## *7.2. Transfer mechanisms*

Policy transfer can occur through various mechanisms, which facilitate the flow of ideas, practices, and knowledge from one context to another. Transfer mechanisms come to support the transition processes and adaption of transfer objects (Duncan, 2009).

For experience exchanges can be used such platforms as conferences, workshops, seminars, and collaborative projects, where ideas and best practices are exchanged. Interview participants mentioned that such events are often organised by UN agencies and CSOs in the framework of their grant projects. More rarely it is organised also by state (Interview 11,12). Technical assistance and capacity building is reported to be the most popular mechanism of policy transfer. Technical assistance programs involve the provision of expertise, resources, that were provided to the state within the whole process of policy reforms. It includes trainings on general interpretation of CRPD and capacity improvement on specific narrow topics (Interviews2,5). It also includes consultancy and support in developing

methodological guidelines and other toolkits to invest in the further success of the policy and practices. Together with technical assistance, policy dialogue is also mentioned as a sufficient mechanism of transfer and learning. It was especially effective in the process of understanding how to construct and operationalise the ICF model (Interviews1,5,12). Experience of number of countries was discussed, giving opportunity to learn from each other's experiences, challenges, and success (Interview 5). For CSOs, policy entrepreneurship is often practiced especially in advocacy context (Mintrom,1997). The establishment of the Coalition for Inclusive Legal Reforms is one of the fresh examples of such entrepreneurship. Putting efforts together give opportunities not only for the mobilisation of local forces but also involving other coalitions and associations at international level. A good example shared by one of the interviewees is involvement of the International Disability Alliance in advocacy efforts for Armenia. As a result of this cooperation number of ambassadors visiting the event on international disability rights day expressed their solidarity, with disability rights promotion, and asked the state bodies to be more consistent in their commitments in this respect (Interview 6).

These are some of the mechanisms, which can work individually or in combination to facilitate the transfer of policies and practices. The choice of mechanism depends on the specific policy issue, the actors involved, and the context of the transfer process (Page, 2020).

### 7.3 Contextual factors

*“Context emphasises the policymaking environments that constrain and facilitate action”. (Cairney et al., 2022)*

Here it is suggested to divide contextual factors into two groups:

- 1) Context or mode of transfer, that influences the transfer of policy ideas and practices
- 2) Country-specific contextual factors, i.e., facilitating factors and obstacles

In earlier literature the context in which policy transfer occur, or simply saying the reasoning behind it, was ended into two answers. Either it is imposed by some conditions or is determined by self-awareness and conscious choice. Treaties, however, fall into the third category that Dolowitz and Marsh (2000) define as “combination transfer”. And indeed, in the case of the CRPD it can be discussed both as binding with conditionalities. At the same time, the Treaty was ratified voluntarily, and the country took the commitment also voluntarily. This combination type can be viewed from the point of view of CRPD monitoring mechanisms where, “despite the political and moral weight, it does not envisage legal responsibilities, but comes with recommendations and sufficient time to meet them” (Interview 4). The same can be said about SDGs as a separate framework, but also as a part of the current global agenda. Both with CRPD and SDGs the country is bound by agreements, but at the same time acknowledges the opportunities to develop, parallelly not neglecting the chance to make image and look good in the eyes of powerful partners (Interview14).

2. Country-specific factors can also be grouped into two: long-term/systemic factors and “emergency” factors.

Data analysis revealed some factors that can influence the transfer process. Among them the most repeated is lack of institutional memory, because of which “with every

new position holder the law drafting process started from the scratch” (Interview 9). The reason for this is the fact that nothing was documented and archived in a sufficient way, and there is no responsibility for not doing that (Interview 15, Hulika et al.,2021). Another factor highlighted in the analysis is coordination, including donor, stakeholder, resource coordination as well as cross-sectional coordination. This is about capacity and skills, as well as about partnership and resource management (Interview3). Poor coordination is a risk for effective implementation, but it also affects cross-sectoral components of the law (UNPRDP, 2021). Policy actors and especially state institutions mention high turnover of staff as another hindering factor. Low salaries and a big workload are not attractive. This is a threat to knowledge and skill transfer and causes spending of more time, energy, and financial resources.

“Emergency” factors for the latest part of the policy reform period are Covid-19 and armed conflict both in 2020. They slowed down the processes both in the actual period of their duration and due to their huge negative consequence afterwards. On both occasions priorities changed according to urgency, keeping PWD legislation on hold, whereas one of the most vulnerable groups was waiting. Because of armed conflict more than 1500 young persons got disabilities, which alongside emotional and moral pressure was a huge financial burden on the state (UN Armenia, 2021). Furthermore, the state decided to make quick changes to the law, so that it could address the needs of military PWDs. In this situation UNDP promoted the idea of assistive technologies, the wide integration of which was opposed earlier by the state (Interview 9). During this period, CSOs used any cooperation opportunity to support military PWDs and their families. It was a quick mapping of needs and resources, showing that there are few organisations and services that can deal with mental health (Interview 11).

Another “emergency” factor was observed in 2018, when due to the revolution and government change, many CSO representatives moved to the public sector. It cannot be considered as CSO sector’s wide participation in decision making, because understandably “the moment they came into power, they changed their sector”

(Interview 10). However, the post-revolutionary sector shift can be considered as a facilitating factor for PT, at least from the perspective of bringing ideas and actors close to each other, and building stronger relations, for better cooperation and partnership.

#### *7.4. Type or degree of transfer*

In the context of policy transfer, "Copying," "Emulation," "Combination," and "Inspiration" are four types or modes of transfer that capture different levels of replication, adaptation, and innovation in the transfer process (Huang et al.,2022). These degrees range from just policy “copying” as the lowest degree and “inspiration” as the highest (Dolowitz &Marsh,2010).

Considering the long period of reforms, since 2010, as well as all the evidence of evolution in comprehension, efforts, roles and partnership dynamics revealed in analysis, the researcher dears to make an assumption that all the above mentioned resulted in “Inspiration” type of policy transfer, reflected in two laws adopted in 2021.

Indeed, CRPD and its concepts were used as a starting point for developing own solutions. It is particularly obvious in the development process and outcome of ICF assessment tools and law. Since 2014, when the ICF idea was first presented, policy actors passed long and interesting way to make the model work at its best. Tens of transfer objects were discussed; hundreds of mechanisms were used. Tools and manuals were developed with the participation of different actors. They were tested within different projects in many organisations, around the country, with the involvement of multidisciplinary groups of experts. Then feedback was collected, which served as new ideas for inspiration and a new round of work (Interview 1,5,12). Experience of a number of countries was examined for inspiration, but also to inform the specialists about the opportunities the ICF itself provides.

*It was interesting that every country that ratified the CRPD can take its own path in putting ICF into action. Some countries use it in health systems, others*

*use it in insurance. Some emphasise the environmental component others functional ones. That's the reason that we don't speak about mere localization of the methodology but about the creation of a new model based on examples from other countries and the ICF description itself. (Interview5)*

While the focus of inspiration-type policy transfer is primarily on the transfer of ideas and inspiration, it often involves the active engagement of policy actors who are instrumental in shaping and implementing the policies (Huang et al.,2022). The process can lead to shifts in the roles, attitudes, and behaviours of policy actors as they learn from the experiences and practices of other contexts. This may involve rethinking their existing approaches, adopting new perspectives, and collaborating with different stakeholders.

Overall, the involvement of key actors and international arrangements is first of all a requirement of the Convention and a part of mandate adopted by the state (and UN) from the moment of ratification of CRPD. During the whole period from ratification till the present-day CSOs, international actors and donors are part of the process, directly or indirectly contributing to partnership dynamics and policy-shaping processes. Cooperation with CSOs and especially with OPDs is also stipulated by CRPD. However, nothing is constructed in a vacuum, everything develops and evolves with every new experience or change of variables. This case proves that even in the case of embedded norms and arrangements, with changing global agendas and local contextual factors, all the main actors gain new roles within already set institutional arrangements or due to role changes develop new responsibilities and structures for full participation and contribution to the national policy.



## CHAPTER 8: CONCLUSION

### *8.1. Summary of Analysis and Discussion*

*CRPD and national laws:* CRPD is widely referred to as the main regulatory and normative framework in the context of disability policy-shaping. The HRB approach and concepts of CRPD are not only in focus of sectoral professionals but also are widely disseminated and popularised across the country. The adoption of disability laws in 2021 is perceived as a significant step, however frequent reference to CRPD shows its dominant position. One of the reasons for it is that the regulatory framework and law enforcement mechanisms are missing or not sufficient. A particular issue is poor or absent monitoring mechanisms, which hinder transparent and accountable implementation.

Some other factors identified as obstacles in the period of CRPD implementation are viewed as risks for the effective implementation of new legislation. The main observed obstacles can be divided by governance levels and actor roles.

*State:* Coordination is one of the hindering factors in multilevel and intersectional contexts. MLSA's role includes partner coordination, donor coordination, resource coordination, process coordination. Though some mechanisms and efforts are in place, coordination still stays not fully effective. One of the reasons for poor coordination is human resources management and turnover in state institutions. Due to high workload and low salary, state institutions stay unattractive, thus causing unfilled positions and HR stress. High turnover also causes additional expenses, due to capacity building costs. Employers' capacity is also an issue present and influencing the process. Alongside employees, institutions also lack administrative capacity and structural regulations. A generally observed problem is institutional memory, meaning things are not duly documented and archived, which result in inconsistency and lack of causality.

*CSOs:* CSOs and especially OPD's participation range of roles is considerably increased, especially after the Velvet Revolution of 2018. In some cases, as with monitoring, policy discussions, consultancy, their participation is visible. However, the influence level of that participation is not traceable, as no monitoring mechanisms are in place to evaluate it. In the current stage, participation can be evaluated only from the quantitative spectrum. Within local and international networks however, CSOs are more active, with more opportunities for advocacy and policy pushing. In social service provision, the roles of CSO and state are distributed, and selection and delegation processes being transparent and open.

*International organisations:* The change in roles of international organisations is also obvious. Started from the role of connector and also knowledge and fund holder in a superior role, now it developed into real partnership relations, with consideration of needs and best benefits for direct stakeholders, human rights and democratic processes. International actors', especially UN agencies' role is significant in importing new knowledge and providing technical assistance, however, unlike the initial stages of CRPD implementation, this support also comes to answer the needs of state and CSO actors.

## *8.2. Theory and Research Question Revisited*

The overall purpose and guiding research questions of this study have been to investigate the ways international development agendas and frameworks affect policy-shaping processes in nation-state, with the example of CRPD implementation and Disability policymaking in Armenia. Applying analytical framework built with combination of Global Governance and Policy Transfer concepts gave more holistic overview of the matter in question. It gave an opportunity to look closer at the impact of international development agendas and contextual factors on national policy-shaping, trying to understand actors, partnerships, and policy dynamics.

The applied framework helps identify factors, such as data and collaboration, which are outside of the framework but are as important as any other factor described within the theoretical construct. The major findings of this study are consistent with the results of other studies on the localisation of global agendas, CRPD implementation as well as its supporting and hindering factors. The reality is that there cannot be perfect environment for introducing new legislation as well as, even perfect law itself is not the outcome but rather the part or even the start of the process.

### *8.3. Critical Reflections for Future Studies*

Recalling the limitations of generalisability of findings due to the small sample size of this study, a representative qualitative survey of the international influence on national policymaking with a bigger range of actors and factors, as well as improvement of administrative and up-to-date data on disability will provide generalizability and more holistic picture to findings as an important base for decision making.

Future studies can benefit from conducting comparative analyses between different nation-states to further explore the variations in policy-shaping processes and the implementation of international development agendas. This can provide valuable insights into the contextual factors that influence policy outcomes and shed light on best practices and lessons learned.

Conducting longitudinal studies can provide a deeper understanding of the long-term effects of international development agendas on policy-shaping processes. By examining policy changes over time, researchers can assess the sustainability and effectiveness of implemented policies and identify factors that contribute to their success or failure.

Future studies should strive to incorporate an intersectional lens and consider the diverse experiences and perspectives of marginalized groups within the context of policy-shaping. This can help identify any gaps or biases in current policies and highlight the need for more inclusive approaches to policy development and implementation.

Developing robust evaluation frameworks can enhance future studies by enabling the assessment of policy outcomes and impact. By measuring the effectiveness of implemented policies and identifying areas for improvement, researchers can contribute to evidence-based policymaking and enhance the accountability of policy actors.

#### *8.4 The Road Ahead*

Armenia went through a long process of disability policy reforms and adopted new legislation in 2021. Being more inclusive both in policy-shaping and implementation would be a real benefit for the PWDs in all aspects of their life. A better regulatory framework, better coordination and monitoring mechanisms will be beneficial for all interested parties and will provide opportunities for further effective cooperation for goals and real change. So, instead of implementing separate components within different time periods, jurisdictions and projects, bringing them together will give better chance for resource management and improvements.

Human rights and well-being need to be prioritised especially those of the directly impacted, ensuring their physical, economic, and social security, equality and inclusion. The environment should be created to eliminate obstacles and for fulfilment of those rights at all levels, from individual to global.

Finally, appropriate planning and coordination and the state's role in it, without underscoring the role of other policy actors, is crucial to guide the country towards CRPD and SDG concepts and goals.

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## ***ANNEXES***

### ***Annex 1: Main Disability Inclusive SDGs***

<b>Goal/target</b>	<b>Description</b>
SDGs 1 and 2	poverty and hunger
SDG 3	health and well-being
T 3.7 &5.6	sexual and reproductive health and reproductive rights
SDG 4	education
SDG 5	gender equality and empowerment of women and girls with disabilities
SDG 6	availability of water and sanitation
SDG 7	access to energy
SDG 8	employment and decent work
T 9 c	access to ICT
SDG 10	inequality
SDG 11	inclusive cities and human settlements
T 1.5, 11.5 & SDG13	disasters, shocks, and climate change
SDG16	violence against persons with disabilities, inclusive societies and institutions, representative decision-making, birth-registration, and access to justice and to information

Source: Disability and Development Report, UN, 2018



## *Annex 2: RA Key Policy Papers Regulating Disability Sector*

#	Name	Date of Adoption
1	The Law “On the Rights of Persons with Disabilities”	5 May 2021.
2	The Law “On Functional Assessment of Persons with Disabilities”	5 May 2021.
3	Concept developed by MLSA for “Introduction of the Model of Assessment of Disability on the Bases of the Principles of International Classification of Functions of the WHO Based on Comprehensive Assessment of a Person”	
4	The Comprehensive Program for Social Inclusion of Persons with Disabilities for 2017-2021 and Measures to Ensure the Implementation of the Program	
5	The Resolution No.650-L of the Government “On Approving the Program of Activities of the Government of the Republic of Armenia for 2019-2023”	
6	The Resolution No.1601-L of the Government "On Approving the 2021 Annual Program for Social Inclusion of Persons with Disabilities and the List of Measures".	
7	The Resolution no 1621-L of the Government “On Approving the Annual Plan for 2022 and the List of Measures for the Social Inclusion of Persons with Disabilities".	

Source: UNPRPD Country Report, Armenia, 2021