

**Project Title:** Improving access to services and participation of persons with disabilities in line with the conceptual framework of UNCRPD and ICF – Armenia – Phase 2

**Project Number:** 00082043

**Implementing Partner:** RA Ministry of Labor and Social Affairs

**Start Date:** 14 August 2017 **End Date:** 14 August 2019

**Brief Description**

"Improving access to services and participation of persons with disabilities in line with the conceptual framework of UNCRPD and ICF – Armenia – Phase 2" Project is an extension of its first phase with an objective **to enhance access to services and to support inclusive environment for participation of persons with disabilities, including children with disabilities.**

Although significant progress and improvements have been achieved throughout 2014-2016, persons with disabilities continue to be the most disadvantaged group in Armenia. As of July 2016, 6.7% of the population in Armenia are recognized as having a disability status. Among them children with disabilities are arguably the most vulnerable group. About 1% of children are recognized and have a disability status, while according to the WHO estimation about 2.5 % of children have some form of disability.

The current model of disability certification is profoundly **medical**: the applicant is assessed only by doctors of the medical institutions (polyclinic, hospital, etc). Further, medical experts/doctors in Medical Social Expertise Commissions continue assessing the applicant and make a decision on eligibility for disability certification. As a result, only health issues are normally considered as basis for assessment and disability certification. In the context of various health conditions and injuries, medical diagnosis alone does not fully capture the status and may not fully predict service needs, neither at the level of individual treatment planning nor at the level of public health policy. Nationwide application of ICF implies a shift **from a "charity model" to a "human rights model"**. In line with the UNCRPD's view of disability, the ICF has a broader scope and requires accounting for environmental factors that influence functioning together with the other factors. The ICF supports rights-based policies and provides a framework and model that assist planning and communication across government and other sectors.

Building on the key results of the first phase of the Project, UNDP will continue to take the disability assessment/determination reform process further and ensure that the rights-based approach and gender mainstreaming are at the core of the process. The complexity of both the systemic change and the paradigm shift in the mind-sets hint that the reform implementation continues to be uneasy. Hence, the UN's presence is critical to ensure that the actual practice and further policy changes are in line with UNCRPD.

Phase 2 of the Project will contribute to the following results:

- (i) **ICF based disability assessment model is nationally applied** for the new applicants on a trial basis (17,000 estimated annual newcomers) evaluated and then expanded to the entire system;
- (ii) **Mechanisms**, such as information exchange between sectors to **ensure synergies and linkages** between the disability assessment and service provision systems of **healthcare, education and social sectors** are established;
- (iii) **Strengthened gender responsive service provision** system established;
- (iv) **Monitoring** methodology and tools **on the availability, access and affordability of services** (health and rehabilitation, education and social support) **to/for persons including children with disabilities** to ensure timely, gender sensitive and **reliable information** are in place;
- (v) **Data collection and cross-sectoral data management** through ICF so that State **policies/budgeting are better informed about persons with disabilities**, including children with disabilities supported.

The objectives contribute to Outcome 2 of the joint Programme on the "Citizen expectations for voice, development, the rule of law and accountability are met by stronger systems of democratic governance" and the Output 2.2: "Institutions and systems strengthened to improve protection of human rights".

Contributing Outcome:  
**UNDAF Outcome(s) 2:** By 2020, people's expectations for voice, accountability, transparency, and protection of human rights are met by improved systems of democratic governance.  
**CPAP Output 2.2:** Institutions and systems strengthened to improve protection of human rights.

<b>Total resources required:</b>	132,179.00 USD	
<b>Total resources allocated:</b>	132,179.00 USD	
	<b>UNDP:</b>	
	<b>PRPD:</b>	132,179.00 USD
	<b>Government:</b>	In-kind
<b>UNDP Parallel Funding:</b>		
<b>Unfunded:</b>		

Agreed by:

<b>Government</b>	<b>UNDP</b>
RA Minister of Labor and Social Affairs Print Name: Artem Asatryan 	UNDP Resident Representative in Armenia Print Name: Bradley Busetto 

## CONTEXT

The Government of Armenia embarked on the disability assessment/determination reform since 2014. The Ministry of Labor and Social Affairs (MLSA) developed a Policy Concept on Determining Disability based on Multi-Dimensional Assessment in line with WHO International Classification of Functioning, Disability and Health (ICF) which was approved by the Government in January 2014 and recognized as a national standard. In addition, the integrated social service reform, launched by the Government in 2012, has created an institutional platform to ensure feasibility and effectiveness of disability assessment reform. The Law on the Protection of the Rights and Social Inclusion of Persons with Disabilities, currently on the Parliament agenda, creates a legislative ground for this reform.

### National Framework:

Armenia has established institutional and legal grounds for revising its disability assessment/determination method. **New Model of Disability Assessment and Certification based on ICF and aligned with the CRPD was developed, tested and piloted in three regions of Armenia with 1,269 people. Based on the pilots, application of the model will start in September 2017 (according to government programme) reaching 17,000 people in the first year of implementation.**

For the first time, the **new disability assessment model** allows the applicant to **participate in the assessment process** and to **have a direct contribution to the decision making process** through **self-assessment**. According to the Ministerial decree pertaining to the new assessment process, **DPO representatives have an open invitation to participate during the assessment** as observers (upon consent of the applicant). Furthermore, by putting in place the systemic reforms necessary to facilitate a shift to an ICF based disability assessment system, a significant and positive transformation is evident in the understanding and attitudes of officials and professionals engaged in the disability assessment and social service delivery in Armenia. The reform process has also very importantly provided multi-stakeholder platforms for more informed public discourse on disability with meaningful participation of persons with disabilities and their representative organizations.

Grounds were laid **for strong alignment of MLSA reform process with the reforms in education and health sectors** carried out by Ministry of Education and Sciences (MoES) and Ministry of Health (MoH). Namely the MLSA led nation-wide efforts on **the transition to an ICF based disability assessment system**, on the comprehensive **de-institutionalization of children** including **children with disabilities and expansion of child developmental assessment system by MoES**, the introduction of **e-health system** by MoH to result in a **unified electronic information system for data management** (e.g., eligibility determination, individualized needs assessment and planning for service delivery and population of disability statistics).

A gender-responsive Methodology for Individualized Service Delivery Planning was developed and linked to disability assessment, including healthcare, social protection, education and employment components (including vocational training and job market engagement). A country-wide mapping of organizations and their capacities was conducted to provide full-scale services to persons with disabilities and an **accessible website module with database and mobile application for facilitating access to services** was developed.

The local context, nevertheless, also presents several challenges to a full scale nationwide application of ICF based disability assessment system, including unavailability and low quality of some services, incomplete implementation of reforms in cross ministries and lack of synergies among them, resistance to paradigm shift, as well as persisting poverty in the country (persons with disabilities continue to remain as the most disadvantaged group in Armenia).

## INTERVENTION LOGIC

### PREVIOUS ACHIEVEMENTS

The current Project is an extension of “Improving access to services and participation of persons with disabilities in line with the conceptual framework of UNCRPD and ICF – Armenia –Phase 1” Project, implemented from October 2014 until May 2017. The current Project aims to build on the achievements and results as well as the lessons learnt from the previous phase.

Throughout implementation of its Phase 1, the Project achieved the following results:

- **New Model of Disability Assessment and Certification based on the ICF and aligned with the CRPD:**

The Project supported the development of a new model of disability assessment and certification based on ICF framework, in-line with CRPD principles. The new model was tested and piloted in three regions of Armenia with 1,269 people and will be applied starting September 2017 (according to the respective government programme).

**The multidimensional approach to assessment methodology** (based on ICF) **resulted in complete restructuring of the system and inclusion of social dimension in the assessment process**, as well as **set-up of multifunctional teams**. Participation of the applicant for disability status in the assessment process through a self-assessment, is accepted as a high priority already by the respective sector officials and makes part of the assessment process and the new organogram of the system and its procedures. This

is a significant achievement, as previously applicants were passive recipients of the outcome of the assessment process and had no say in the overall process. According to the revised procedures and Ministerial decree, applicants have a right to come to disability assessment with his/her doctor, and a DPO (Disabled persons' organizations) representative can also participate during the assessment process as an observer.

The **ICF based reform process led to radical changes** in the overall **system of disability assessment and determination. Transformation of the system started even earlier than anticipated. The Prime Minister has ordered a radical restructuring of the disability determination system** bringing it to a **multidimensional assessment process** (which is also in line with ICF based model approach), **strengthening the individual's role** in the assessment process and **reducing the citizen-decision making body interaction** to allow an **objective decision making process**.

With this radical restructuring process the Government comes one step closer to the nationwide application of the new model. Nonetheless, the transition to the ICF based model application will be implemented gradually to avoid social tensions and potential overburdening other social support and services schemes. The ICF based model will be applied starting September 2017 and will include 17,000 people (new applicants to the system) in the first year to be expanded to 72,000 on annual basis, including also those who are already on disability certification scheme, but re-assessed periodically. It is a challenging, multilayer and resource demanding and yet a very important reform process for the country.

- **Medical Social Expertise Committee for children was established**

Recognizing the specific needs of children with disabilities, another key achievement of the project was that based on multiple recommendations from observations of the testing process, a separate Medical Social Expertise Committee for children has been established.

- **Gender-Responsive Methodology for Individual Rehabilitation Planning**

A gender-responsive Methodology for Individual Rehabilitation Planning was developed and linked with disability assessment, including a training and job market engagement component. Assessment of the current IRPs from a gender lens was conducted and IRPs were improved based on the assessment results and the gender-responsive methodology. According to the revised methodology the MSECs will receive feedback on the status and results of the rehabilitation process from rehabilitation-providing organizations, which was not done before.

As a result of the country-wide mapping of organizations and assessment of their capacities to provide full scale services to persons with disabilities conducted by the Project, **accessible website module with database and mobile application** have been developed for persons with disabilities, including with hearing and visual difficulties. The next step is to ensure that adequate funding and staff are available to fulfil the needs for rehabilitation services throughout the country. Further, there has to be close cooperation with the Ministry of Education and Science (to ensure continuity with educational rehabilitation services), and Ministry of Health (to ensure sharing of data on rehabilitation).

**Mechanisms to building the systemic capacity to increase the opportunities for economic participation of persons with disabilities were assessed and to be incorporated into the relevant policy frameworks (draft Law, Social Inclusion Strategy) with support from UNIDO.**

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## II. STRATEGY

"Improving access to services and participation of persons with disabilities in line with the conceptual framework of UNCRPD and ICF – Armenia –Phase" 2 Project is an extension of its Phase 1, implemented with the financial support of PRPD.

The Project will build upon the platform of the 2016-2020 United Nations Development Assistance Framework for Armenia. The objectives contribute to **Outcome 2** on the "Citizen Expectations for voice, development, the rule of law and accountability are met by stronger systems of democratic governance" and the **Output 2.2:** "Institutions and systems strengthened to improve protection of human rights".

The overarching theory of change of the Project is that a comprehensive national application of ICF based disability assessment and service provision system will ensure that the core national institutions involved in the process chain will be strengthened to improve the protection the rights of persons with disabilities. This will be achieved by (i) establishing synergies and linkages between disability assessment and service provision systems of relevant sectors, (ii) establishing gender responsive services provision system (iii) developing monitoring methodology and tools on the availability, access and affordability of services, (iv) conducting data collection and cross-sectoral data management. Persons with disabilities will have their meaningful participation in the reform process either directly (through feedback provision mechanism) or indirectly (through participation of DPOs in the Project's Steering Committee).

*The objective of the programme is to enhance access to services and to support inclusive environment for participation of persons with disabilities, including children with disabilities, through achievement of the following results (where a key aspect is a legislative reform in line with CRPD Art 4.):*

**I. New ICF-CY based disability assessment model is nationally applied** for the new applicants on a trial basis (17,000 estimated annual newcomers) evaluated and **then expanded to the entire system.**

**II. Mechanisms**, such as information exchange between sectors to **ensure synergies and linkages** between the disability assessment and service provision systems of **healthcare, education and social** sectors are established.

**III. Strengthened gender responsive service provision system established.**

**IV. Monitoring methodology and tools on the availability, access and affordability of services** (health and rehabilitation, education and social support) to/**for persons including children with disabilities** to ensure timely, gender sensitive and **reliable information** is in place.

**V. Data collection and cross-sectoral data management** through ICF-CY so that State **policies/budgeting are better informed about persons with disabilities**, including children with disabilities supported.

#### **Outcome area I.**

**New ICF-CY based disability assessment model is nationally applied for the new applicants on a trial basis (17,000 estimated annual newcomers) evaluated and replicated to the entire system.**

The Project will support national application of the new model of disability assessment and ensure on-the-job coaching throughout the process for all participating sectors to embed a rights based understanding of disability in line with CRPD ensuring that a rights-based approach and gender mainstreaming are at the core of the process of the operationalization of the new systems and the linked delivery of services.

In order to ensure that there is a smooth transition to the new model of disability assessment and service delivery a **diversified advocacy campaign** will be implemented in close collaboration with the **Human Rights Defender's Office (HRDO) and respective committees of the Parliament and MLSA.**

#### **Outcome area II.**

**Strengthened gender responsive service provision system established.**

The ongoing **restructuring** process **expands the scope of services**, and brings **new actors** through establishment of **localized social service centers and multifunctional teams**. The Project will support **qualification of the current and new staff in health, social and educational sectors** at central and local levels with particular focus on gender responsive approaches.

Meanwhile the newly developed Individualized **Service Delivery Plans (ISDP) methodology** will need to **be fine-tuned with the final set of assessment tools ensuring gender mainstreaming and gender responsive ISDPs**. Together with expanding range of services the Project will tap into the issue of personal assistants and a need for compensation to family members (most often – mothers) taking care of children with disabilities and assisting adults with multiple disabilities.

The Project will also explore **reorganization of social support schemes to a large group of people, including children not** granted disability certification but in need for state funded healthcare or social protection services (targeted persons living under poverty or extreme poverty line).

#### **Outcome area III.**

**Mechanisms, such as information exchange between sectors to ensure synergies and linkages within the assessment and service provision systems of healthcare, education, and social sectors (social includes employment) are established.**

As people with functioning difficulties may interact with diverse professionals it is critical that all those involved in the disability assessment and service delivery process are basing their approaches and communication on common language and concepts and an identical data collection methodology. The information collected shall be disaggregated, as appropriate, and used to identify and address the barriers faced by women, men and children with disabilities in exercising their rights (CRPD Art31). Thus, the Project will establish **synergies and mechanisms within the assessment systems** of healthcare, education and social sectors **ensuring enhanced linkages**. A small group of researchers involved in UNPRPD Phase1 will guide the Republican Psychological-Pedagogical Center (RPPC) in the process of harmonizing the ICF based assessment tools and methodologies to enhance communication among professionals working with children. The process will assist healthcare, child development, education, habilitation and rehabilitation professionals and case managers in comparable environments to apply the ICF in similar ways.

### **Strengthening monitoring and data collection**

Monitoring methodology and tools on the availability, access and affordability of services (health, education and social support) to/for persons including children with disabilities to ensure timely, gender sensitive and reliable information on children with disabilities is in place.

The **analysis of pilot data revealed that children have more severe difficulties**. Lack of quality age and sex disaggregated data on children with disabilities is one of the biggest obstacles to understanding the barriers that children with disabilities face. **There will be a strong need to strengthen the system for tracking children and providing quality and timely services** (CRPD Article 7).

Specific attention will be paid to the legislation: **by-laws specifying information management and sharing systems, referral mechanisms and professional roles of the staff** in Psycho-Pedagogical Centers and MSECs for conducting assessment of activity, participation and environmental factors and applying collected information for planning appropriate services for children with disabilities will be **developed**.

Draft Law will be revised in line with CRPD (Art 4-1, 2, 3) and CRC with consideration of general comments and concluding observations of the Committees. Data collection and cross-sectoral data management through ICF and aligned to SDGs so that State policies/budgeting are better informed about persons with disabilities, including children with disabilities supported. Through unified data collection **establish basis for electronic information system for data management** (e.g., eligibility determination, individualized needs assessment and planning for service delivery and population of disability statistics) between the sectors (the “e-health” is in the process by Ministry of Health.)

**A task-force will be setup to revise the data collection mechanisms ensuring comparability of data from different sources/different agencies** for better **monitoring of all aspects of social inclusion of persons/children with disabilities**: health and rehabilitation services, education, employment, social services and community participation (CRPD Art 31, 26 and 7). This will be closely connected to SDG nationalization, implementation and data collection with particular focus on targets and indicators inclusive of persons with disabilities and SDG 17 in particular.

With respect to data collection, Washington Group short set of questions on disability and Washington Group – UNICEF Child Functioning Module for improved identification as well as systematic disaggregation across all sectors will be promoted and specific work will be conducted with the National Statistical Service. This work will be closely linked to the SDGs nationalization and data collection process. UNDP is the leading agency for Phase 2 of the Project and is the initiator of the SDG Lab at the Government takes data collection as one of priorities.

The Project team represented in two national subcommittees on SDGs 1, 3, 5 and 4, 8, 16, 17 will ensure that these two processes are closely linked.

### **Gender Mainstreaming**

The Project's Gender Mainstreaming Dimension will ensure that a gender equality prism is considered through technical support to the Government of Armenia at all stages of the reform process with specific attention to women and girls with disabilities. More specifically the Project will:

- i.. Ensure participation of at least 50% of female beneficiaries in project related task forces and decision-making
- ii. Ensure gender responsive approach with due consideration to the needs of women and girls with disabilities.
- iii. Formulate lessons learned on gender equality dimension to inform ongoing and future programming and results delivery.
- iv. Apply sex disaggregated indicators framework and inform the Government policy making process with gender specific data.
- v. Includes specifically gender equality dimension in the exit strategy.
- vi. Develop M&E mechanism to monitor all stages of the project in a gender responsive manner.

### **Advocacy**

As any social reform, the current reform of changing the disability assessment model is quite sensitive. Though it is opening access to and broadening the scope of services for persons with disabilities, it also limits access to disability certification and benefits for those groups who are socially vulnerable but do not quite meet the criteria based on multidisciplinary disability assessment. As a new process, it will need a strong communication and advocacy campaign to communicate the transition to people. The advocacy strategy will be based on CRPD principles and ICF language which respects the rights of every person and actively avoids labelling, stigmatization and discrimination. Advocacy activities will focus on participation of persons with disabilities.

Implementation of all components of the Project and the advocacy strategy will be strongly based on the CRPD **Committee's general comments** and the recent [Concluding Observations](#) of the Committee. The strong linkage between the SDGs framework and the Convention will be the guiding principle throughout the Project including in the materials produced and the day-to-day implementation process.

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## **III. RESULTS AND PARTNERSHIPS**

### ***Expected Results***

The Project will be implemented towards achievement of the following outcomes and outputs. It is aligned with UNDAF and CPD Outcomes and Outputs as well as (aligned with Outcome 2, Output 2.2 indicated below) and UNDP Strategic Plan 2014-2017.

**UNDAF Outcome 2:** By 2020, people benefit from improved systems of democratic governance and strengthened protection of human rights.

**CPD/CPAP Outcome 2:** By 2020, people's expectations for voice, accountability, transparency, and protection of human rights are met by improved systems of democratic governance.

**CPD/CPAP Output 2.2:** Institutions and systems strengthened to improve protection of human rights.

**Targeted areas:** Country-wide

**Beneficiaries and partners:**

Beneficiaries: People with disabilities in Armenia.

**Partners:** The Project will be implemented by UNDP and UNICEF in partnership with the RA Ministry of Labor and Social Affairs and in coordination and synergy with other line ministries and agencies, DPOs, CSOs as well as the international community active in the protection of the rights of persons with disabilities.

By the end of July 2019, the Project aims to achieve **the following results:**

1. At least 50% of target disaggregated by sex, benefiting from the new system of disability assessment accessing services as per the individualized service delivery plan.
2. At least 50% of children, disaggregated by sex, benefiting from early identification and intervention services.
3. At least 50% of children, disaggregated by sex, benefiting from the new system and accessing education.
4. Procedures and systems for determination of eligibility and development of the Individualized Service Delivery Plans are in place and operationalized. Nationwide application of the new model for the new applicants covering 17,000 persons in the first year is conducted.
5. National monitoring framework developed and applied to the new system of disability assessment.
6. At least 100 health sector staff trained on the new system of assessment, service delivery and referral mechanisms with focus on gender responsive service provision (disaggregated by sex).
7. At least 50 education sector staff trained on the new system of assessment, service delivery and referral mechanisms with focus on gender responsive service provision (disaggregated by sex).
8. At least 100 social protection sector staff trained on the new system of assessment, service delivery and referral mechanisms with focus on gender responsive service provision (disaggregated by sex).
9. At least 55 DPO and NGO run service centres' representatives trained on the new system of assessment, service delivery and referral mechanisms with focus on gender responsive service provision (disaggregated by sex).
10. The electronic information system for data management (e.g. eligibility determination, individualized needs assessment and planning for service delivery and population of disability statistics) system is designed and tested for the first time applicants.
11. Donor coordination meetings for ensuring shared vision during the reform process are conducted.
12. Legislative/policy framework and enforcement mechanisms are in place.

### ***Resources Required to Achieve the Expected Results***

Main resources required for the achievement of targets and results are human resources, including expertise on the rights of persons with disabilities, ICF methodology and knowledge of national and international framework of disability assessment. The Project will also need financial resources to solicit international and local consultancy services to conduct overall capacity development of engaged line ministries/agencies and DPOs.

### ***Partnerships***

The project will continue its main established partnership pathway, including national counterparts, as the MLSA and other line ministries, MSECs and DPOs.

Throughout implementation of the Project UNDP will support the MLSA in setting up a strong communication and advocacy campaign to communicate the transition to ICF based assessment system to the beneficiaries and the public at large. The advocacy strategy will be based on CRPD principles and ICF language which respects the rights of every person and actively avoids labelling, stigmatization and discrimination. Advocacy activities will focus on participation of persons with disabilities.

### ***Assumptions***

Overall, the Government commitment and political will to carry out the reform process creates conducive environment for the Project's implementation. This allows the Project to assume that provided effective synergies and coordination between the MLSA and among other line ministries and agencies, the Project will be implemented in due manner ensuring a gradual transition to a new model of disability assessment.

**Risks**

1. ICF based disability assessment model to be nationally applied on a trial basis is delayed.
2. Possible public complaints and campaigns against the new model of disability determination.
3. Major natural disaster, e.g. earthquake. Nagorno-Karabakh conflict escalation may disrupt the process too.

Risk Analysis/Risk Log

#	Description	Date Identified	Type	Impact & Probability (Scale 1 min. - 5 max.)	Countermeasures / Mngt response	Owner	Submitted, updated by	Last Update	Status
1.	ICF based disability assessment model to be nationally applied on a trial basis is delayed	June 2017	Organizational	I=4 P=3	UNDP starts its component with a preparatory phase in 2017, to support and ensure timely preparation for the application of the new system.	Project Coordinator	DG Portfolio Analyst		
2.	Possible public complaints and campaigns against the new model of disability determination	September 2014	Other (policy/strategic)	I = 4 P= 5	UNDP together with UNICEF and MLSA will continue throughout the project lifetime public discussions on the new model of disability determination to get support of the leading civil society representatives for successful integration of the new model.	Project Coordinator	DG Portfolio Analyst		
3.	Major natural disaster, e.g. earthquake. Nagorno-Karabakh conflict escalation may disrupt the process too.	Ongoing	Environmental	I = 4 P=2	Potential need for deviation from the original plan for the project implementation due to possible transfer of attention (human and financial resources) to the emergency response and early recovery efforts  The ongoing DRR programme in UNDP Armenia can provide the necessary expertise.	Project Coordinator	DG Portfolio Analyst		

### **Stakeholder Engagement**

The main stakeholders of the Project are MLSA, MoH, MoES and other line ministries, MSECs, DPOs. . Information exchange, coordination of efforts and subject-matter collaboration will be continued within this group of stakeholders. The National Committee on the Rights of Persons with Disabilities which is inclusive of the above mentioned group of stakeholders will partner with the Project on a broader term.

At the project level, efforts will be continued to involve stakeholders from other international organizations, diaspora as well as individuals, both locally and internationally who are potentially interested in contributing to the full realization of the rights of the persons with disabilities. The project will also build synergies and possible collaboration schemes with regional centres providing services to persons with disabilities, including children with disabilities. The Project will also aim at creating linkages/cooperation with the parents and parent organizations for children with disabilities.

### **Target Groups:**

The Project will target the following groups:

1. Persons with disabilities, including children with disabilities;
2. MLSA, MoH, MoES and other line ministries - UNDP will provide tailored capacity development modules for this target group;
3. Yerevan based and regional MSECs - UNDP will provide tailored capacity development modules for this target group to increase their understanding of ICF methodology with focus on gender responsive service provision;
4. DPOs – UNDP will provide capacity development modules for this target group on the new system of assessment, service delivery and referral mechanisms with focus on gender responsive service provision.

### **South-South and Triangular Cooperation and Knowledge**

The Project has been active in exchanging information, practices and knowledge globally (e.g. Georgia, Moldova, Taiwan, Cyprus, Russia, etc). In the framework of the first phase of the Project, UNDP and UNICEF supported MLSA with organization of an international conference on ICF which served as an excellent platform for knowledge sharing and set-up of new platforms for cooperation. The Project envisages further expansion and outreach to other countries in the region and beyond for experience sharing and opening of new partnership opportunities. The role of international consultants to be engaged in the second phase of the Project is going to be especially crucial for further cooperation and knowledge generation.

### **Sustainability and Scaling Up**

The sustainability of the Project is ensured by the government ownership. The policy has been approved by an official Government Decree and the reform has been announced as a priority by Government Programme and MLSA. After the successful completion of the Project, the model will be scaled-up nationwide as per the Government's approved timeline.

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## **IV. PROJECT MANAGEMENT**

### **Cost Efficiency and Effectiveness**

- Procurement of goods and services will be ensured in compliance with UNDP Standard Operational Procedures, which envisage acquisition of appropriate quality goods and services at the most competitive/lowest price at the market.
- The Project will employ the minimum staff, which, as in the previous phase, will directly implement the programmatic components (including Project Coordinator), with minimum level of outsourcing of specific subject matter expertise.
- The Project has formed partnership and synergies with other stakeholders. One of the strategies that the project will seek is merging of financial and technical resources with partners to achieve the objectives in most cost-effective way. Examples can include (but not limited to) joint actions with MLSA, UNICEF, USAID, DPOs etc.

### **Project Management**

The Project will be implemented on national scale including field work in the regions of Armenia. The project team will be based in Yerevan with outreach to regions/communities for specific programmatic/monitoring activities. The Project management will be ensured through supervision from the UNDP Armenia Democratic Governance Portfolio. The Project will be implemented jointly with UNICEF in partnership with the MLSA, including consultations and joint implementation of activities. The Project will also build synergies with projects targeting youth and women with disabilities, including children with disabilities of other UN projects.

<b>Intended Outcome as stated in the UNDAF/Country [or Global/Regional] Programme Results and Resource Framework:</b> By 2020, people benefit from improved systems of democratic governance and strengthened protection of human rights. <b>CPD/CPAP Outcome 2:</b> By 2020, people's expectations for voice, accountability, transparency, and protection of human rights are met by improved systems of democratic governance									
<b>Outcome indicators as stated in the Country Programme [or Global/Regional] Results and Resources Framework, including baseline and targets:</b> <b>CPAP Output(s) 2.2.</b> Institutions and systems strengthened to improve protection of human rights.									
<b>Applicable Output from the UNDP Strategic Plan:</b> Output 2.3: Capacities of human rights institutions strengthened. Indicator: Extent to which operational institutions have the capacity to support fulfilment of nationally and internationally ratified human rights obligations									
<b>Project title and Atlas Project Number:</b> Improving access to services and participation of persons with disabilities in line with the conceptual framework of UNCRPD and ICF – Armenia – Phase 2" ; 00082043									
EXPECTED OUTPUTS	OUTPUT INDICATORS	DATA SOURCE	BASELINE		TARGETS (by frequency of data collection)				DATA COLLECTION METHODS & RISKS
			Value	Year	Year 2017	Year 2018	Year 2019	FINAL	
<b>Output 1</b> The ICF based model of disability assessment and determination has been rolled out nationwide on a trial basis and linked to a coordinated assessment and service delivery system across education, health and employment	1.1 Procedures and systems for determination of eligibility and development of the Individualized Service Delivery Plans are in place and operationalized	Policy documents, Government AP 2017, Expert opinion, report with analysis of nationwide pilot and recommendations Incl. beneficiary satisfaction survey Disability data electronic system	Not available	2017		Available			Regular update of data on the number of tested persons to be run by the Project's WG, monitoring of the application of ICF based model of disability assessment, regular meetings with WG  RISK: possible risks associated with analysis of the applicants' data

sectors involving systematic monitoring and evaluation of the process.	1.2 Availability and application of monitoring framework for the new system of disability assessment	Monitoring reports	Not available	2017		Available			Regular follow-ups with monitoring expert (s) to ensure a comprehensive framework is developed  RISK: No risks associated
<b>Output 2</b> Strengthened gender responsive service provision system established	2.1. Number of health staff trained on the new system of assessment, service delivery and referral mechanisms with focus on gender responsive service provision (disaggregated by sex)	Pre and post tests Training reports and list of participants	0  NB.149 in Phase I	2017	30	71	0	101	Monitoring of training events Surveys among beneficiaries Analysis of post-training evaluation results  RISK: No risks associated
	2.2. Number of education sector staff trained on the new system of assessment, service delivery and referral mechanisms with focus on gender responsive service provision (disaggregated by sex)	Pre and post tests Training reports and list of participants	0	2017	5	45	0	50	Monitoring of training events Surveys among beneficiaries Analysis of post-training evaluation results  RISK: No risks associated
	2.3. Number of social protection staff trained on the new system of assessment, service delivery and referral mechanisms with focus on gender responsive service provision (disaggregated by sex)	Pre and post tests Training reports and list of participants	170	2017	20	80	0	100	Monitoring of training events Surveys among beneficiaries Analysis of post-training evaluation results  RISK: No risks associated
	2.4. Number of DPO and NGO run service centers' representatives trained on the new system of assessment, service delivery and referral mechanisms with focus on gender responsive service provision (disaggregated by sex)	Training reports and list of participants	145	2017	10	45	0	55	Monitoring of training events Surveys among beneficiaries Analysis of post-training evaluation results  RISK: No risks associated

<b>Output 3</b> Expanding to other sectors and cross-sectoral synergies in place	3.1. The electronic information system for data collection, disaggregated by sex, (e.g., eligibility determination, individualized needs assessment and planning for service delivery and population of disability statistics) is operational and aligned with SDGs data collection and monitoring	Link to the system	Fragmented data collection on disability in health, social and education information system	2017	Draft package of decrees in Gov	Package of decrees adopted by Gov	Final decree adopted	Frequent monitoring of the functionality of the electronic information system for data collection  RISK: possible delay with the launch of electronic information system for data collection related to other e-systems (e-health, etc.)
	3.2 Coordination and collaboration mechanisms for the key actors for a shared vision and unified policy and delivery of services to ensure the rights of persons with disabilities	Gov and/or Ministerial decrees  Protocols of donor coordination meetings  Protocols for Project's WG meetings	Steering committee established in Phase 1	2017	Draft package of decrees in Gov	Package of decrees adopted by Gov	Final decree adopted	Gov and/or Ministerial decrees on setting up the necessary coordination mechanisms and working groups.  RISK: other form of regulation of these activities may be chosen
	3.3. Legislative/policy framework and enforcement mechanisms are in place for cross-sectoral coordination for identification, assessment and development of support schemes for persons and children with disabilities and strong referral mechanisms for those who are left out of the system	Laws, by-laws, decrees	No basis for cross-sectoral coordination and data sharing mechanisms	2017	Draft package of decrees in Gov	Package of decrees adopted by Gov	Final decree adopted	Constant follow-up with the adoption of laws and decrees pertaining to the rights of persons with disabilities  RISK: the decrees may be not necessarily inclusive of all related areas

## V. MONITORING AND EVALUATION

In accordance with UNDP's programming policies and procedures, the Project will be monitored through the following monitoring and evaluation plans:

## Monitoring Plan

Monitoring Activity	Purpose	Frequency	Expected Action	Partners (if joint)	Cost (if any)
Track results progress	Progress data against the results indicators will be collected and analysed to assess the progress of the Project in achieving the agreed outputs.	In the frequency required for each indicator.	Slower than expected progress will be addressed by Project management.	UNDP, UNICEF, MLSA	
Monitor and Manage Risk	Identify specific risks that may threaten achievement of intended results. Identify and monitor risk management actions using a risk log. This includes monitoring measures and plans that may have been required as per UNDP's Social and Environmental Standards.	Quarterly	Risks are identified by Project management and actions are taken to manage risk. The risk log is actively maintained to keep track of identified risks and actions taken.	UNDP, UNICEF	
Learn	Knowledge, good practices and lessons will be captured regularly, as well as actively sourced from other projects and partners and integrated back into the project.	Monthly	Relevant lessons are captured by the Project team and used to inform management decisions.	UNDP, UNICEF, MLSA	
Annual Project Quality Assurance	The quality of the Project will be assessed against UNDP's quality standards to identify project strengths and weaknesses and to inform management decision making to improve the project.	Annually	Areas of strength and weakness will be reviewed by Project management and used to inform decisions to improve project performance.	UNDP, UNICEF, MLSA	
Review and Make Course Corrections	Internal review of data and evidence from all monitoring actions to inform decision making.	At least annually	Performance data, risks, lessons and quality will be discussed by the Project board and used to make course corrections.	UNDP, UNICEF, MLSA	
Progress Report	A quarterly progress report will be presented to the Donor consisting of progress data showing the results achieved against pre-defined targets.	Quarterly		UNDP, UNICEF, MLSA	
Project Report	Annual and a Final Project Report will be submitted to the Donor, Project Board and key stakeholders, consisting of progress data showing the results achieved against pre-defined annual targets at the output level, the annual project quality rating summary, an updated risk log with mitigation measures, and any evaluation or review reports prepared over the period.	Annually and at the end of the Project for the final report		UNDP, UNICEF, MLSA	

## Evaluation Plan

In accordance with the programming policies and procedures outlined in the UNDP User Guide, the Project will be monitored through the following:

Within the annual cycle

- On a semi-annual basis, a quality assessment shall record progress towards the completion of key results, based on quality criteria and methods captured in the Quality Management table below.
- An Issue Log shall be activated in Atlas and updated by the Project Manager to facilitate tracking and resolution of potential problems or requests for change, when necessary during the Project implementation period.
- Based on the initial risk analysis submitted (page 7), a risk log shall be activated in Atlas and regularly updated by reviewing the external environment that may affect the Project implementation.
- Based on the above information recorded in Atlas, annual Progress Reports as well as regular (e.g. quarterly) written updates on Project progress shall be submitted by the Project Manager, using the format agreed upon with the partners.
- A Lesson-learned log shall be filled in when necessary to ensure learning and adaptation within the organization, and to facilitate the preparation of the Lessons-learned Report at the end of the Project, if necessary
- A Monitoring Schedule Plan shall be activated in Atlas and updated to track key management actions/events.
- On-going site visits will be conducted by both Project Team and Project Assurance to monitor implementation and address current issues.

VI. MULTI-YEAR WORK PLAN <sup>12</sup>

EXPECTED OUTPUTS	PLANNED ACTIVITIES	Planned Budget by Year			RESPONSIBLE PARTY	PLANNED BUDGET		
		2017 Y1 USD	2018 Y2 USD	2019 Y3 USD		Funding Source	Budget Description	Amount in USD
<b>2.2. Institutions and systems strengthened to improve protection of human rights.</b> Output 1: The ICF based model of disability assessment and determination has been rolled out nationwide on a trial basis and linked to a coordinated assessment and service delivery system across education, health and employment sectors involving systematic monitoring and evaluation of the process.	<b>Roll out of ICF based model of disability assessment and determination:</b> 1.1 Establish mechanisms to ensure synergies within the assessment systems of health, education and social sectors 1.2 Provide on-the-job coaching and mentoring to integrate the new model and the ICF-CY based thinking and approach into assessment 1.3 With the Republican Pedagogical Psychological Center harmonize all tools, methodology and criteria for eligibility of services (and	5,000	8,000	0	UNDP	PRPD 11924	71200 International Consultant	13,000
		3,000	6,000	1,000	UNDP	PRPD 11924	71300 Local Consultants	10,000
		1,500	4,000	0	UNDP	PRPD 11924	71600 Travel	5,500
		2,000	3,000	0	UNDP	PRPD 11924	74200 Audio Visual Production	5,000
		400	470	200	UNDP	PRPD 11924	74500 Miscellaneous	1,070

<sup>1</sup> Cost definitions and classifications for programme and development effectiveness costs to be charged to the project are defined in the Executive Board decision DP/2010/32

<sup>2</sup>Changes to a project budget affecting the scope (outputs), completion date, or total estimated project costs require a formal budget revision that must be signed by the project board. In other cases, the UNDP programme manager alone may sign the revision provided the other signatories have no objection. This procedure may be applied for example when the purpose of the revision is only to re-phase activities among years.

	allowance) for children under 18	973	1,643	84	UNDP	PRPD 11924	Facilities & Administration	2,700
	1.4 Develop monitoring methodology and tools on the availability, access and affordability of services to/for children with disabilities to ensure timely, gender sensitive and reliable information on children with disabilities							
	1.5 Prepare and conduct a diversified advocacy campaign to bring the change to people and ensure smooth transition from the old to the new system of disability assessment based on the ICF	2,000	2,000	0	UNDP	PRPD 11924	Trainings Workshops & Conferences	4,000
		<b>Sub-Total for Output 1</b>						<b>41,270</b>
Output 2: Strengthened gender responsive service provision system established	<b>Strengthen gender responsive service provision system</b>	4,000	3,000	0	UNDP	PRPD 11924	71200 International Consultants	7,000
	2.1 Reorganize the system and conduct requalification trainings for the current and new staff in health, social and educational sectors, including at central and	0	2,000	2,000	UNDP	PRPD 11924	71300 National Consultants	4,000

	local levels on a rights based approach to disability assessment and service delivery	1,500	0	0	UNDP	PRPD 11924	74200 Audio Visual Printing Production	1,500
	2.2 Conduct targeted trainings on gender mainstreaming and development of gender responsive ISDPs (individualized service delivery plans) for all responsible actors	300	400	200	UNDP	PRPD 11924	74500 Miscellaneous	900
	2.3 Setup mechanisms and operational manuals for full-fledged operation of the newly established bodies* including strong referral mechanisms	546	868	154	UNDP	PRPD 11924	75100 Facilities & Administration	1,568
	2.4 Support to strengthening the system for tracking child related data and providing quality and timely services to children with disabilities	2,000	7,000	0	UNDP	PRPD 11924	75700 Trainings Workshops, Conferences	9,000
	2.5 Explore and test possibilities to integrate targeted and quality pre-service training courses including the adoption of gender responsive approaches to prepare social workers and occupational therapists							
	<b>Sub-Total for Output 2</b>							<b>23,968</b>

Output 3: Expanding to other sectors and cross-sectoral synergies in place	3.1 Support data collection and cross-sectoral data management through ICF so that State policies/budgeting are better informed about persons with disabilities, including children	1,000	1,500	3,000	UNDP	PRPD 11924	71300 Local Consultant	5,500
	3.2 Develop and test electronic data exchange between respective agencies/units on disability assessment and rehabilitation planning in one region	1,000	1,130	0	UNDP	PRPD 11924	74200 Audio Visual print production	2,130
	3.3. Develop institutionalized interagency collaboration for identification, assessment and development of support schemes for persons and children with disabilities; develop strong referral mechanisms for those who are left out of the system	400	500	200	UNDP	PRPD 11924	74500 Miscellaneous	1,100
	3.4 Develop by-laws specifying professional roles and responsibilities of the staff in Psycho Pedagogical Center and Medical Social Expertise associated with identification, referral and collaboration in addressing the needs of persons with disabilities and children with disabilities	168	219	224	UNDP	PRPD 11924	74500 Facilities & Administration	611
	<b>Sub-Total for Output 3</b>							

Output 4 Programme Implementation	<b>4. Programme Implementation, Monitoring and Evaluation</b> Conduct effective coordination, administration and monitoring of project activities Prepare and submit all necessary reports as well as the project-management related documents, maintain project's risk/issue logs and the results matrices. Conduct regular monitoring visits and inform respective stakeholders on observations. Develop partnerships and ensure coordination with stakeholders in the area of the rights of persons with disabilities	15,000	25,000	5,000	UNDP	PRPD 11924	71400 Cont. Serv. – Ind	45,500
		500	500	0	UNDP	PRPD 11924	71600 Travel	1,000
		316	632	0	UNDP	PRPD 11924	72200 Equipment and Furniture	948
		100	240	0	UNDP	PRPD 11924	72300 Materials & Goods	340
		100	300	100	UNDP	PRPD 11924	72500 Supplies	500
		1,000	1,000	1,200	UNDP	PRPD 11924	73100 Rental & Maintenance Premises	3,200
		500	500	0	UNDP	PRPD 11924	73400 Rental & Maintenance of Other Equipment	1,000

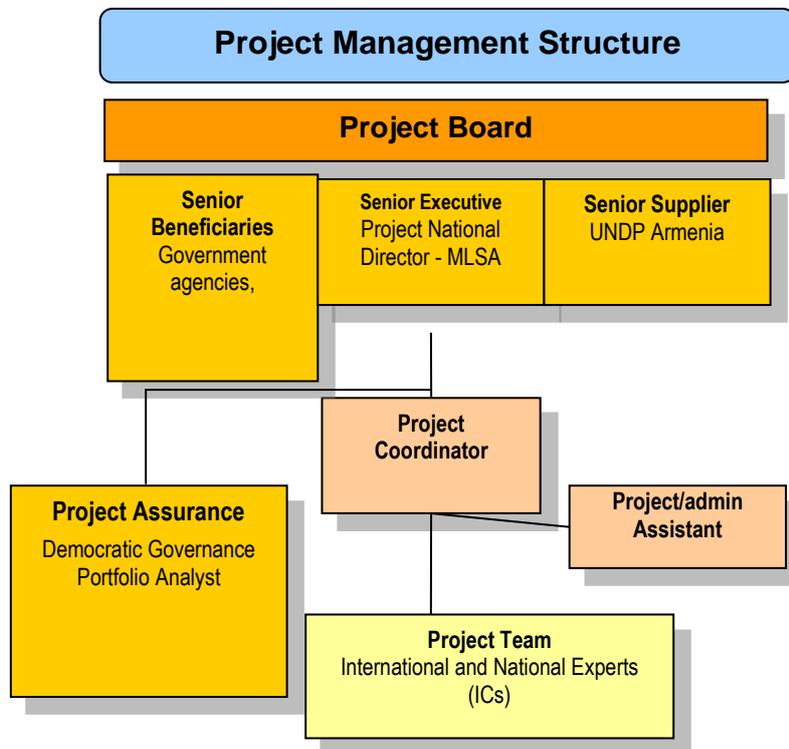
		300	500	544	UNDP	PRPD 11924	73500 Miscella neous	1,344
		1,247	2,007	514	UNDP	PRPD 11924	75100 Facilities & Administ ration	3,768
		<b>Sub-Total for Output 4</b>						<b>57,600 USD</b>
<b>TOTAL PRPD</b>								<b>132,179 USD</b>

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## VII. GOVERNANCE AND MANAGEMENT ARRANGEMENTS

**Programme Coordination and Steering:** This Project is part of a bigger Project implemented together with UNICEF, UNIDO and WHO. UNDP's share of the project is put into the current Project Document as per the UNDP guidelines. It will be headed by a Project Coordinator. S/he will be supported by a Project Assistant part-time.

Below is the Management structure for UNDP's part of the project as per UNDP guidelines.



The Management Team and the WG will meet on frequent basis to report on the activities, to find joint solutions to programmatic, operational and management issues, and identify issues to be directed to a higher-level decision-making.

Each UN agency will have its distributions of roles and responsibilities. For more information about the overall project and management arrangements, please consult the joint Project Document attached as Annex 1.

**UNDP Project Time Frame:** UNDP "Improving access to services and participation of persons with disabilities in line with the conceptual framework of UNCRPD and ICF – Armenia – Phase 2" Project will be implemented during the period of July 2017 – July 2019

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## VIII. LEGAL CONTEXT AND RISK MANAGEMENT

The Project will operate under: Government Entity (**Support to NIM**) modality, which implies:

1. Consistent with Part VI on Programme Management of the Country Programme Action Plan (CPAP) 2016-2020 between the Government of Armenia. UNDP as the Responsible Party shall comply with the policies, procedures and practices of the United Nations Security Management System (UNSMS.)
2. UNDP agrees to undertake all reasonable efforts to ensure that none of the project funds

are used to provide support to individuals or entities associated with terrorism and that the recipients of any amounts provided by UNDP hereunder do not appear on the list maintained by the Security Council Committee established pursuant to

resolution1267 (1999). The list can be accessed via [http://www.un.org/sc/committees/1267/aq\\_sanctions\\_list.shtml](http://www.un.org/sc/committees/1267/aq_sanctions_list.shtml). This provision must be included in all sub-contracts or sub-agreements entered into under this Project Document.

3. Consistent with UNDP's Programme and Operations Policies and Procedures, social and environmental sustainability will be enhanced through application of the UNDP Social and Environmental Standards (<http://www.undp.org/ses>) and related Accountability Mechanism (<http://www.undp.org/secu-srm>).

4. The Responsible Party Partner shall: (a) conduct project and programme-related activities in a manner consistent with the UNDP Social and Environmental Standards, (b) implement any management or mitigation plan prepared for the project or programme to comply with such standards, and (c) engage in a constructive and timely manner to address any concerns and complaints raised through the Accountability Mechanism. UNDP will seek to ensure that communities and other project stakeholders are informed of and have access to the Accountability Mechanism.

5. All signatories to the Project Document shall cooperate in good faith with any exercise to evaluate any programme or project-related commitments or compliance with the UNDP Social and Environmental Standards. This includes providing access to project sites, relevant personnel, information, and documentation.