

**Report of final evaluation of the joint SDG Programme**

**“Transforming Social Protection for Persons with Disabilities in Georgia”**

**Programme implemented by UNICEF, UNFPA, OHCHR, UN Women,  
WHO, UNDP**

**Programme funded by Joint SDG fund**

**Consultant: DEPA Consulting**

July 2022

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## ABBREVIATIONS AND ACRONYMS

BPFA -Beijing Platform for Action  
 CEDAW -Convention on the Elimination of all Forms of Discrimination against Women  
 CRPD –Convention on the Rights of Persons with Disabilities  
 CRC -Committee on the Rights of the Child  
 CSO -Civil society organization  
 CSW -Commission on the Status of Women  
 CwDs -Children with disabilities  
 OPDs – Organizations of Persons with Disabilities  
 GBV –Gender-based violence  
 JP -Joint programme  
 MDS -Model Disability Survey  
 MIA -Ministry of Internal Affairs  
 MoH -Ministry of Internally Displaced Persons from the Occupied Territories of Georgia, Labour, Health and Social Affairs  
 MoJ -Ministry of Justice  
 MoESD -Ministry of Economy and Sustainable Development  
 MIRD -Ministry of Infrastructure and Regional Development  
 MoU -Memorandum of Understanding  
 NGO -Non-governmental organization  
 OHCHR -Office of the United Nations High Commissioner for Human Rights  
 PDO -Public Defender’s Office  
 PwDs -Persons with disabilities  
 RCO-UN Resident Coordinator’s Office  
 SCA -Agency for State Care and Assistance for the (Statutory) Victims of Human Trafficking  
 SDG -Sustainable Development Goal  
 SRHR –Sexual and reproductive health and rights  
 SRH -Sexual and reproductive health  
 SSA -Social Service Agency  
 ToC -Theory of Change  
 TVET - Technical and Vocational Education and Training  
 TSA -Targeted social assistance  
 UN -United Nations  
 UN RC – United Nations Resident Coordinator  
 LRPD - Law on Rights of Persons with Disabilities  
 WwD – Women with Disabilities

## Executive Summary

### Background

This document is the final evaluation report of the Joint Programme (JP) “Transforming Social Protection for Persons with Disabilities in Georgia”. The evaluation was conducted by Development Evaluation Progress Assessment (DEPA) Consulting.

The JP, “Transforming Social Protection for Persons with Disabilities in Georgia” is funded by the Joint Sustainable Development Goal (SDG) Fund and implemented by six UN agencies in Georgia – UNICEF, UNDP, UN Women, WHO, UNFPA, OHCHR. The JP direct target groups are People with Disabilities (PwDs), parents of children with disabilities, human rights defenders (incl. NGOs, journalists, union leaders, whistle-blowers). The JP aimed to achieve three transformative results:

- Strengthen the legislative framework and the evidence-based policy environment and promote non-discriminatory social norms to enable all PwDs to enjoy their rights effectively.
- Strengthen systems to enable quality integrated services for PwDs, including revised social system entitlements, especially for children, women and young people.
- Expand the existing pilot of disability status assessment system based on the social model to one more region of Georgia.
- Improve capacities for data collection, monitoring and advocacy for the implementation of the Convention of Rights of Persons with Disabilities (CRPD, International Conference on Population and Development Programme of Action (ICPD PoA), Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), Beijing Platform for Action (BFPA), Universal Periodic Review (UPR), Commission on the Status of Women (CSW).

The project has formulated three outcomes to be achieved by June 2022:

1. By 2022, persons with disabilities, especially those from vulnerable groups, benefit from enabling environment through disability inclusive legislation, evidence-based policy, decreased stigma on disability and expanded employment opportunities.
2. By 2022, the social protection system, health and social services are transformed in line with the social model of disability to ensure social inclusion and equal rights for people with disabilities.
3. Persons with disabilities, especially those from vulnerable groups, are supported during - COVID-19 Pandemic via adjusted communication strategies, developing relevant guidelines, protocols, and policy documents to better respond to the needs of PwDs in the light of COVID- 19 outbreak.

### Final Evaluation objectives and methodology

The JP’s final evaluation aims to provide critical information concerning programme performance in light of the project’s three transformative results, its three outcomes, as well as to assess the relevance, effectiveness, efficiency, and sustainability of project activities. The overall period of implementation of the JP (December 2019 -June 2022) has been reviewed by this evaluation. The evaluation was based on the mix-method approach. In total, 45 KIIs and 8 FGDs were conducted within the framework of the evaluation.

**Relevance.** Overall, programme outcomes were relevant to the needs of PwDs, and relevant to national strategies and laws. Adoption of the LRPD (Law on Rights of Persons with Disabilities) in 2020 by the Parliament of Georgia was a timely replacement for the 1995 law on Social Protection of Persons with Disabilities. The LRPD adoption improved PwD rights guarantees on a national level, which is a transformation that will be sustained over time. The program was relevant to the ratification of the Optional Protocol of CRPD in May 2021 as well which was a major improvement in terms of PwD access to UN Mechanisms, and in particular the CRPD Committee.

JP was very successful at facilitating the process of the establishment of the Interagency CRPD Implementation Coordination Mechanism which is one of the strongest PwD participation mechanisms at the national level at this time.

Programme outcome two was relevant for transforming the existing system into a biopsychosocial model. The purpose of the activities conducted were a) to prepare relevant instruments and hand them over to the government to transform the system into the biopsychosocial model; b) mapping and analysing the services and its costs to improve the state of children with disabilities. However, these instruments should be implemented for adults with disabilities as well. The guidebooks and SOPs developed within the programme on SRHR and GBV were relevant to improve the state of women with disabilities. The capacity building of local municipalities and establishing social inclusion centres were relevant activities. Capacity development interventions provided to CSOs and activists working on the rights of women with disabilities were relevant to strengthen the capacity of women's CSOs on lobbying, advocacy and research and promoting the rights of WwD – a constituency oftentimes excluded by both government and mainstream CSO counterparts.

In addition, the programme design was successfully adjusted and relevant funds were directed to respond to the newly emerged needs of the PwDs due to the outbreak of COVID-19.

**Effectiveness.** Overall, JP outcomes were implemented effectively despite the COVID- 19 Pandemic and significant changes within the government of Georgia. Additionally, the programme effectively coordinated its recommendations to the Parliament when legislative reforms were being discussed in Spring 2020. The programme improved the legal environment for PwDs and the programme implementers believe adoption of LRPD and the legal changes introduced by LRPD were a breakthrough that created powerful legal obligations for the state to improve PwD rights and established specific timeframes for future reforms. Nonetheless, some of the respondents also say that LRPD only acknowledges CRPD principles in local legislation but does not set solid new requirements for overall improvement of PwD rights protection in Georgia that were not already there since CRPD ratification in 2013, and neither are the timeframes proposed by LRPD (for future reforms) adequate and acceptable as they are too lengthy.

Following the LRPD adoption, JP was very effective at providing technical support on LRPD Implementation Action Plans to multiple institutions over two years.

JP implementers believe the programme was very successful at facilitating the process of the establishment of the Interagency CRPD Implementation Coordination Mechanism too (one of the CRPD obligations) at the level of the Government of Georgia, but there are doubts about deficiencies in expert knowledge that hampers the Coordination Mechanism's full-fledged functioning.

To ensure PwDs are involved in LRPD enforcement, the programme effectively supported the development of a shadow report to CEDAW with PwD participation, amicus curiae preparation with PwD participation and preparation of thematic reports by the Ombudsman on PwD rights realisation with the involvement of the PwD community.

The programme was also very effective at creating training curricula about international PwD rights standards and new legal obligations related to PwD rights realization in Georgia through CRPD and national level legislation. Specifically, for the Police Academy and MIA staff, for personal assistants of special needs children and for the LAS training centre and LAS lawyers.

The programme achievement under Outcome 2 is significant in several dimensions. However, transforming the “medical model” into the social one requires more resources and further support as the reform is linked to different branches of government. The programme enabled the implementation of important basic steps to transform the model into the social one. One dimension of achievement under the outcome was to develop instruments for the biopsychosocial assessment of the model as well as the proposed procedure for the assessment and status determination based on the social model. Social and functional instruments were elaborated and finalised as a result of pilot activities. Furthermore, the general cost assessment of the model was elaborated.

Another important document elaborated under the output was the Concept Note on functionality and social needs. Additionally, the guidebook on how to make decisions through a multispecialty team was elaborated. Children with disabilities require a special assessment tool. This tool was also piloted within this outcome. The roadmap and the concept of the certification course to create and recreate a professional cadre within the proposed model was also formulated in close cooperation with MoH, local and international experts and PwDs. The rollout plan to move to the biopsychosocial model was also developed in line with the requirements of the LRPD and the results of the JP supported pilot activities.

The second dimension under Outcome 2 analyses social services related to PwDs. Under this outcome activities were mostly related to the services of children with disabilities. Analysis and mapping of social services provided in Georgia for children with disabilities was accomplished. The study of required goods, services and their costs for the families with children with disabilities was prepared. Based on these documents, recommendations to transform the system and related costs were elaborated. These are important contributions to transforming social services for children with disabilities. However, it does not include similar requirements for adults with disabilities. That could be continued in future projects/programmes. The ownership of developed documents is high within the MoH.

Women with disabilities are facing special problems and therefore have special needs to improve their condition. GBV and SHRH issues are the areas where women with disabilities require further support. However, these issues were not addressed at the policy level in Georgia before the programme. JP developed important documents, such as SHR Guidebook for women with disabilities related family planning and antenatal care SOP were also elaborated and approved by MoH. Additionally, instruments for social workers on how to identify GBV for women with disabilities were created. The governmental decree on social rehabilitation and child care was approved, where support to access SRH was introduced for PwDs residing in community services. The manual recommendations on effective participation in the investigation process of PwDs was developed and approved by MIA. Moreover, an accredited SHRH online training course was developed and 159 doctors (155 gynaecologists and 4 family doctors) already completed the trainings. Moreover, trainings were conducted for psychiatrists, gynaecologists to use the abovementioned documents. However, as revealed from the FGDs with psychiatrists and gynaecologists, also KIIs with MoH, further capacity-building activities are needed to effectively operationalize the policy documents elaborated within the outcome. The project contributed significantly to the availability of data and analysis on women and girls with disabilities, inter alia, important data on PwDs related COVID-19 pandemic was generated within the framework of the JP Rapid Gender Assessment of COVID-19 with special focus on analysing the impact of the coronavirus pandemic on women and girls with disabilities and their caregivers and were published. As a direct result of the JP up to 200 representatives of civil society organizations (among them, up to 100 women with disabilities) strengthened capacity on lobbying,

evidence-based advocacy, gender and disability issues and Georgia's first shadow report focusing on the rights of women and girls with disabilities was developed and submitted to CEDAW Committee.

Working with local municipalities was an important intervention under Outcome 2. UNDP, in cooperation with the Ombudsman Office trained members of disability councils in 17 municipalities. As a result, these municipalities have better action plans on PwD issues. However, further capacity-building activities are required to strengthen the process. In two targeted municipalities (Aklatsikhe and Shuakhevi) the assessment of local social services provided by municipalities reflect the planning process. Guidebooks were also developed to improve this planning process. Continuous trainings of staff were provided and resulted in successful capacity building of the staff. This positively impacted the process of social service delivery in targeted municipalities. Additionally, day centre capacities in these municipalities increased and are better prepared for effective functioning. Social inclusion centres were established in Ambrolauri and Khobi municipality as well as in Abkhazia within the framework of the programme.

The programme reached out the PwDs countrywide (including particular groups like women, CwD parents, PwDs with psycho-social needs) through supporting the national communication campaign related with COVID-19 as well as conducting supplementary interventions like various online platforms. Despite the fact that the evaluation is limited to measuring the effectiveness of COVID-19 related awareness raising activities at beneficiary level, it can be still assessed that the mechanisms and tools used by the programme were comprehensive, timely and tailored to the country's needs and circumstances.

Besides, as the evaluation results reveal, the programme has provided important support through elaboration of the concept of social rehabilitation distance services for children (>18) with disabilities and/or developmental risks, specialized protocols and guidelines for the medical personnel of mental healthcare providers, all of which are approved by the Ministry Order.

Several studies, assessments, and monitoring efforts were undertaken to mainstream PwD needs during the COVID-19 pandemic, which was partly used by the GoG. The evaluation team is inclined to conclude that there could be more use of recommendations derived from these studies/assessments during planning of the COVID-response and mitigation measures, however, as it appears, the changes of top positions in the central government (including the Prime Minister) have hindered this process to some extent.

**Efficiency.** The programme was implemented efficiently, despite some lack of programme monitoring materials. Six UN agencies implemented the programme, which was very efficient considering the complex nature of problems of PwDs in Georgia. Therefore, each UN agency worked to solve different issues of PwDs under their mandate. This approach was very efficient for the successful implementation of the programme. Programme Steering Committee (SC) was established, and SC meeting was held twice per year, however, considering different areas of intervention and the high number of activities, the more frequent meetings of SC members probably would more positively influence the project.

The evaluation can conclude that the programme has been flexible and adaptive to the emergent needs and changed circumstances in term of responsiveness to adjust programme activities and re-allocate financial resources accordingly.

Annual reports were developed within the programme, according to the rules and the template of SGD Fund. However, as revealed from the KIIs with implementing agencies the template of the progress reports did not enable the inclusion of detailed information on implemented activities, which limited the implementing agencies' ability to document and report on achievements fully. The brief and summative

format of the progress reports has been a particular hindrance for the evaluation process as well, since the reports lacked necessary details about implemented activities. Besides, the programme was lacking a unified monitoring approach and tools, and subsequently this resulted in a lack of monitoring data.

The programme was impacted by COVID-19. Due to several lockdowns and the related stated emergency, some project activities were delayed or were not implemented. However, the programme managed to use adaptive management techniques to continue operations. Some activities, such as trainings or different meetings, were conducted online. The programme timeframe was updated and outcomes related to COVID-19 were added. This was a timely decision as COVID-19 negatively impacted the lives of PwDs and the programme contributed to a decrease in the negative impact of the pandemic.

**Sustainability.** LRPD adopted with JP advocacy will have sustained impact on policy planning and implementation in the future and specific deadlines set by LRPD will initiate different reforms (including one on PwD social model assessment) that should be constantly supported and observed. Both are solid guarantees for a positive dynamic to be sustained in policy areas in the future as PwD demands for human rights improvements are stronger. Additionally, LRPD bears strong potential for PwD rights to improve in Georgia using different litigation methods, as both legal professionals and PwDs are now strengthened in their knowledge on rights and opportunities to litigate. Special Plaintiff system use may also be intensified as a result of the programme.

Programme implementing organizations supported ratification of the CRPD Optional Protocol in May 2021 that will also be sustained in time. This is another improvement in the direction of PwD rights litigation and a change that will be sustained forever.

Another legal development supported and facilitated by the programme that can be sustained in time relates to the creation of the long-awaited Interagency CRPD Implementation Coordination Mechanism at the level of Government of Georgia.

As a result of the programme, Georgia has improved statistical data about PwDs. More specifically the programme improved data on women and girls with disabilities, which created a basis for evidence-based advocacy and public policy making. Working with such data also helped the programme to identify intersectional discriminations faced by women and girls with disabilities.

PwDs who benefited from the programme persistently advocate for their rights and the members of the WWD network believe their participation will be ensured in various Parliamentary discussions in the future.

The sustainability of transforming the system into the biopsychosocial model is inspired by the new LRPD, as it indicates that the system should be transformed, and a rollout plan should be approved by 2023. However, to ensure the sustainability of the interventions' results of the pilot, an assessment of the project will be necessary for the further involvement of international organizations and other stakeholders in the field. The assessment of social services for PwDs is an important document that reflects the current conditions of social service delivery. Significant research was conducted which explains the gaps in the services provided for children with disabilities. Further steps for improving the condition of children with disabilities and related costs were also elaborated. The MoH acknowledges the value of the document and necessary changes that should be made at the policy level. However, further advocacy is required to produce relevant policy changes for children with disabilities. For the improvement of future service delivery for the PwDs, similar activities are necessary for adults with disabilities.



Two SOPs developed under the programme for family planning for women with disabilities and antenatal care are approved by MoH. However, more training and capacity-building activities are required to make the SOP more operational. There is no major risk for sustainability of the free, accredited online course for medical professionals.

Local municipalities require further capacity building of council members on PwDs. Pilots implemented in Akhaltsikhe and Shuakhevi municipalities require further scaling up in other municipalities. There are no major risks for the social inclusion centre in Ambrolauri Municipality.

**Lessons Learned.** JP was implemented by six UN agencies. The agencies were operating on behalf of their mandates and with decades of experience of their sectors. This definitely positively influenced their work in relation to such complex issues as the improvement of the state of PwDs based on transformative changes. As the JP was implemented by six agencies, in some cases there was a lack of overall monitoring of the system. The programme was implemented over two years and it intended to achieve three transformative results. Significant achievements were made in relation to these goals. However, two years is a short time to ensure the sustainability of the programme's transformative results. Hastened legislative work at the Parliament of Georgia can benefit from special expertise and value provided by program interventions to ensure the high quality of legislative changes. For the LRPD to be enforced, awareness about PwD rights should increase.

**Recommendations.** Continue the work needed for LRPD execution on a national level. This recommendation applies to OHCHR and UNDP. Continue support for the improvement of the legal environment for PwDs. This recommendation applies to OHCHR and UNDP. Support OPDs advocacy work and their effective participation in decision making. This recommendation applies to OHCHR, UNDP, UN Women, UNICEF, and UNFPA. Support PwDs for better access to justice. This recommendation applies to OHCHR and UNFPA. Support the State Employment Agency to promote PwD employment among employers through wide campaigns and to implement proactive work for PwD employment by job coaching services. This recommendation applies to OHCHR and UNFPA. Support the MoH to continue transforming the medical model into the social one. This recommendation applies to UNICEF. Support strengthening the system related to women with disabilities on the issues on GBV and SRHR. This recommendation applies to UNFPA. Support local municipalities to improve social service delivery for PwDs. This recommendation applies to UNDP. Develop a unified approach to have reliable monitoring data. This recommendation applies to all UN agencies involved in the programme

## 1. Introduction

The joint programme (JP), “Transforming Social Protection for Persons with Disabilities in Georgia” was launched on January 1, 2020, and ends, as planned, at the end of June in 2022. The JP is funded by the Joint Sustainable Development Goal (SDG) Fund and implemented by six UN agencies in Georgia – UNICEF, UNDP, UN Women, WHO, UNFPA, and OHCHR. Direct target groups of JP are People with Disabilities (PwDs), parents of children with disabilities, human rights defenders (including NGOs, journalists, union leaders and whistle-blowers). Indirect target groups are women, children, youth, older persons, and minorities.

JP “Transforming Social Protection for Persons with Disabilities in Georgia” aims to address one of the largest gaps in Georgia’s social protection system in order to transform the situation of persons with disabilities (PwDs) in the country. The overall strategy of the project is to address one of the key factors leading to the social exclusion of people with disabilities in society, the societal and institutional medical approach to people with disabilities. This approach considers disability as an individual deficiency. Currently, the pertinent legislation outlines the diagnoses qualifying children and adults for disability status and does not take into consideration the overall health of a person. Introduction of the social model

of disability will be supported by addressing the data, legal and institutional frameworks, definitions of disability, related social protections, while simultaneously increasing societal awareness and stimulating change of social norms, providing support for empowering organizations for people with disabilities as important agents of change, and expanding employment opportunities for PwD.

Based on the abovementioned challenges the JP is committed to deliver three transformative results:

- Strengthen legislative framework and evidence-based policy environment and promote non-discriminatory social norms to enable all PwDs to enjoy their rights effectively; Strengthen systems to enable quality integrated services for PwDs, including revised social system entitlements, especially for children, women and young people.
- Expand the existing pilot of disability status assessment system based on the social model to one more region of Georgia.
- Improve capacities for data collection, monitoring and advocacy for the implementation of Convention of Rights of Persons with Disabilities (CRPD), International Conference on Population and Development Programme of Action (ICPD PoA), Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), Beijing Platform for Action (BFPA), Universal Periodic Review (UPR), Commission on the Status of Women (CSW).

This report presents findings based on the evaluation. It sets out the context of the evaluation, a description of the object of the evaluation, its overall purpose, objectives, and scope; the methodology; key findings; lessons learned, conclusions and recommendations. It summarizes the evaluation team's assessment of the relevance, effectiveness, efficiency, and sustainability of JP. The findings and recommendations in this report are intended to primarily serve JP implementing agencies, SDG Fund and other relevant stakeholders.

## 2. Context and Purpose of the Programme Evaluation

### 2.1 Challenges of PwDs in Georgia

About 15% of the world's population lives with some form of disability. The disability prevalence rate among women worldwide is 19.2%<sup>1</sup>. Women are more likely to experience disabilities due to relatively low economic status, access to education and other factors. In this context, while Georgia collects data on PwDs via census and other household surveys, policy making is underpinned by data created by administrative bodies. Policy formation relies on figures derived from administrative sources on recipients of disability pensions, which significantly underestimates the number of people experiencing various forms of disability. For example, 125,898 PwDs (of which 49,916 women and 10,969 children) are registered as recipients of disability pensions in 2019 which constitutes about 3% of the total population of Georgia - well below WHO global prevalence estimates. The official figure is particularly low for children and also contradicts the figure from the latest national census. The lack of data on the incidence of different types of disabilities makes it difficult to discern the actual extent of the problems and, as a result, the specific needs of Georgian PwDs and their families.

Georgia relies on the outdated “medical model” for determining disability status. Legislation outlines the diagnoses qualifying children and adults for disability status and does not take into consideration the overall health status of a person. The assessment process is conducted only by physicians and social needs

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<sup>1</sup> Terms of Reference for Local Organization for Evaluation of the Joint SDG Programme “Transforming Social Protection for Persons with Disabilities in Georgia”.

and circumstances are not considered. Similarly, the current assessment system ignores some developmental disabilities of infants and prevents them from accessing disability benefits. Moreover, the assessment process does not consider needs for assistive technologies or social services, or consider other barriers to participation.

**Legal and Policy environment.** The United Nations Convention on the Rights of Persons with Disabilities (CRPD) was ratified by Georgia in 2014. Georgia is a state party to a number of universal and regional human rights treaties, including major UN human rights instruments (ICCPR, ICESCR, CERD, etc.) and global action plans that directly or implicitly call for the inclusion of all PwDs and empowerment of all women and girls with disabilities. Examples include the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), the Beijing Declaration and Platform for Action, the International Conference on Population and Development Programme of Action (ICPD PoA), and the 2030 Agenda for Sustainable Development. On a regional level, Georgia is a state party to the European Social Charter and the European Convention for the Protection of Human Rights and Fundamental Freedoms and its optional protocols. In addition to international human rights instruments, the rights of PwDs are also guaranteed in the national legal framework. Safeguarding the equality of all citizens, the Constitution mandates the state to create special conditions for PwD to exercise their rights and interests (article 11). However, when starting the project, the legal and policy environment had some challenges outlined in the project document. These include:

- 1) The Law on Social Protection of persons with disabilities, which serves as the basis for state policy on social protection of PwDs and ensures equal enjoyment of rights by PwDs. However, the law is outdated. The Law on Medical-Social Expertise provides for the conceptual definition of disability, the basis for the determination of disability status, and basic provisions for employing medical-social expertise.
- 2) The Law on Gender Equality provides for equality between men and women in political, economic, social and cultural life and further calls for the provision of social assistance on an equal basis for men and women with disabilities. In 2020, the new law on PwDs was approved by the parliament of Georgia, the law is aligned with CRPD, and it replaced the 1995 law on Social Protection of Persons with Disabilities. The programme contributed to the improvement of the draft law. Based on the law, the government of Georgia is committed to transforming from a medical model into a social approach.

**Access to services.** Based on the project document, most of the social services and transfers for PwDs are provided or funded by the Social Service Agency (SSA), which is the implementing agency of the Ministry of Internally Displaced Persons from the Occupied Territories of Georgia, Labour, Health and Social Affairs (MoH). Some municipalities provide certain services for PwDs as well. However, despite some recent progress, the majority of PwDs, especially adults, do not have access to essential support services. This problem is particularly acute in rural locations where some municipalities have no social services for PwDs at all. The new law on PwDs also considers increasing the role of local municipalities in providing services for PwDs on the local level.

**Employment.** While the Government introduced several initiatives to empower PwDs and promote their employment, these initiatives had few tangible effects. The private sector also engaged in some initiatives (through CSR Club, etc.) that created a more favourable environment for PwDs' employment, yet these efforts are insufficient. Public stereotypes, stigma, lack of physical infrastructure, lack of qualifications for PwDs, and high unemployment rates due to the country's economic situation create severe obstacles to the employment of PwDs. As a result, in Georgia, PwDs tend to be economically excluded and are not active in the labour market.

**Accessibility.** While legislation requires that all public spaces should be accessible to PwDs, and fines for the failure to comply with these requirements are applied, before the JP started the technical regulations were controversial, faulty and did not have a universal design.

## 2.2. JP Description

### 2.2.1. Programme Background

Six UN agencies (UNICEF, UNDP, WHO, UNFPA, UN Women and OHCHR) under the leadership of UNICEF and overall coordination of RCO have developed a Joint Programme (JP) for transforming the social protection system for people with disabilities in Georgia.

This JP "Transforming Social Protection for Persons with Disabilities in Georgia" aims to address one of the largest gaps in Georgia's social protection system to transform the situation of persons with disabilities (PwDs) in the country. The program's overall strategy addresses one of the key factors leading to the social exclusion of PwDs in society - the societal and institutional medical approach to people with disabilities, which considers disability to be an individual deficiency. Currently, the legislation outlines the diagnoses qualifying children and adults for disability status and does not consider a person's overall state of health. The introduction of the social model of disability will be supported by addressing the data, legal and institutional framework, and definition of disability and related social protections while simultaneously increasing societal awareness and stimulating the change of social norms, providing support for empowering organizations of PwDs as essential change agents and expanding employment opportunities for PwDs. Based on the abovementioned challenges the JP is committed to deliver three transformative results:

- Strengthen the legislative framework and evidence-based policy environment and promote non-discriminatory social norms to enable all PwDs to enjoy their rights effectively. Strengthen systems to enable quality integrated services for PwDs, including revised social system entitlements, especially for children, women, and young people.
- Expand the existing pilot of disability status assessment system based on the social model to one more region of Georgia.
- Improve Capacities for data collection, monitoring, and advocacy for the implementation of the Convention of the Rights of Persons with Disabilities (CRPD, International Conference on Population and Development Programme of Action (ICPD PoA), Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), Beijing Platform for Action (BFPA), Universal Periodic Review (UPR), Commission on the Status of Women (CSW).

### 2.2.2 Programme Linkages with SDGs

The programme is in line with SDG targets adjusted to Georgia. It mainly contributes to the following targets presented in table 1 below:

*Table 1 - SDG targets contributed by the JP*

1.3. Implement appropriate measures to achieve substantial coverage of the poor and the vulnerable by 2030;
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3.7. By 2030, ensure universal access to the sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes;
5.1. End all forms of discrimination against all women and girls everywhere;
5.6. By 2030, ensure universal access to sexual and reproductive health and reproductive rights as agreed following the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences;
8.5. By 2030, implement effective state policy in order to achieve productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value;
10.2. By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status;
10.3. Ensure equal opportunity and reduce inequalities of outcome, including by eliminating discriminatory laws, policies and practices and promoting appropriate legislation, policies and action in this regard;
6.7. Ensure responsive, inclusive, participatory and representative decision-making at all levels;
17. By 2020, enhance capacity-building support to Georgia to significantly and timely increase the availability of high-quality, timely, and reliable data disaggregated by income, gender, age, race, ethnicity, migratory status, disability, geographic location, and other relevant characteristics of national context.

### 2.2.3 Programme Outcome and Outputs

All of the JP’s outcomes and outputs are in line with the UNDAF outcomes and can be grouped under the focus areas of democratic governance, jobs, livelihood, social protection and health. In particular, the project contributed to UNPSD 2016-2020 OUTCOME 1: By 2020 expectations of citizens of Georgia for voice, rule of law, public sector reforms, and accountability are met by stronger systems of democratic governance at all levels and to UNSDCF 2021-2025: Outcome 2 By 2025, all people in Georgia have equitable and inclusive access to quality, resilient and gender-sensitive services delivered in accordance with international human rights standards. The JP specific outcomes and outputs are the following:

**Outcome 1:** By 2022, persons with disabilities, especially those from vulnerable groups, benefit from enabling environment through disability inclusive legislation, evidence-based policy, decreased stigma on disability and expanded employment opportunities.

- Output 1.1: Legislative framework and evidence-based policy environment are strengthened and non-discriminatory social norms promoted to enable all PwDs effectively enjoy their rights.
- Output 1.2: Capacities for data collection, monitoring and advocacy improved for the implementation of CRPD, ICPD PoA, CEDAW, BFPA, UPR, CSW.

**Outcome 2:** By 2022, the social protection system, health and social services are transformed in line with the social model of disability to ensure social inclusion and equal rights of people with disabilities.

- Output 2.1: Gender-sensitive disability assessment and status determination system transformed based on social model.
- Output 2.2: Systems strengthened to enable quality integrated services for PwDs, including revised social system entitlements, especially for children, women and young people
- The COVID-19 outbreak created additional challenges for people with disabilities that required more focused intervention from all UN agencies. Hence, the work plan was revised, and the funds repurposed to fit better the new needs PwDs have during the pandemic.

**Outcome 3:** Persons with disabilities, especially those from vulnerable groups, are supported during the COVID-19 pandemic via adjusted communication strategies, developing relevant guidelines, protocols, and policy documents to better respond to the needs of PwDs in the light of COVID-19 outbreak.<sup>2</sup>

- Output 3.1: Relevant content for CwDs and their parents are formulated and disseminated via digital platforms on the issues of handling emotional and behavioural challenges, sensory stimulation and so forth in the COVID-19 related circumstances;
- Output 3.2: The rights and needs of women and girls with disabilities are addressed through the provision of small grants to women.
- Output 3.3: Protection of Rights of PwDs in response to COVID-19 including through disseminating information, providing distance supervisory and psychological services and necessary guidelines and protocols to the medical personnel.
- Output 3.4: Protection of rights of PwDs in response to COVID-19 effects, including developing the monitoring report and designing online courses for PwDs.

#### 2.2.4 Programme Target Groups

The main target of the programme are PwDs. Moreover, the programme focuses on Human Rights Defenders Working on PwD issues, including women and girls, youths, and children; ensuring PwDs representatives of minority groups and PwDs living in rural areas, older persons, and parents of children with disabilities. The overview of the program's target groups indicates that the program aims to cover almost all vulnerable groups linked with disabilities. However, the project's work plan and progress report indicate that most of the project's target groups were influenced indirectly through the elaboration of legal and policy documents, research conducted, and training provided. Although some activities focused on enhancing the capacity of PwDs, for instance, special VET education courses were prepared, and PwDs participated in courses to increase their employment. A special centre opened in Ambrolauri that provides services for PwDs, among other achievements.

#### 2.2.5 Programme stakeholders

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<sup>2</sup> The third outcome was added after the project design document modification for the project's second year. The outcome was added to response challenges caused by the COVID19 outbreak.

The project's main stakeholders are the Ministry of Internally Displaced Persons from the Occupied Territories, Labour, Health and Social Affairs (MoH), Parliament of Georgia, Ministry of Justice (MoJ), Ministry of Internal Affairs (MIA), Ministry of Economy and Sustainable Development (MoESD), Ministry of Infrastructure and Regional Development (MRDI), Administration of Government (Human Rights Secretariat of Administration of Government of Georgia), Inter-Agency Commission on Gender Equality, Violence against Women and Domestic Violence, Judiciary, Georgian National Statistics Office, Public Defender Office, Local Municipalities, Private Sector, Organizations with Persons with Disabilities (OPD)s / SCOs, Academia, Media, Social Health Service providers, PwDs, UN agencies: UNICEF, UNDP, OHCHR, UN Women, UNFPA, WHO.

## 2.2.6 Programme implementation arrangements

JP was implemented by 6 UN agencies with the overall coordination of the RCO office. At the initial stage of the project, the steering committee (SC) was established. The SC included the main stakeholders of the programme. During the lifespan of the project, the SC held two official meetings.

## 2.3. Overall Objective and Scope of evaluation

The final evaluation covers the period of the JP implementation, which includes activities implemented throughout Georgia during the 30 months from January 2020 to June, 2022. Findings and recommendations based on this evaluation will inform the Joint Programme team, Joint SDG Fund and relevant stakeholders on:

- Accomplishment of the main expected results of the JP;
- Contribution to improving the situation of vulnerable groups identified in the JP document;
- JP's contribution to SDG acceleration;
- JP's Contribution to UN reforms;
- Scalability and sustainability of the JP interventions.

The purpose of this evaluation is knowledge and evidence generation and high-quality lessons learned (learning). The ToR of the evaluation is presented as Annex 1.

The final evaluation objective of the JP is manifold that aims to:

- Examine the conceptual underpinnings and design of the JP, including its underlying Theory of Change (ToC), and provide an assessment of how the JP activities and approaches were effective in meeting the needs of people with disabilities; Based on the analysis, the ToC will be reconstructed retroactively.
- Assess the relevance, effectiveness, efficiency, and sustainability of the JP from its inception to its completion, with the focus on its ability to respond to the needs of people with disabilities;
- Assess to what extent the main transformative results were accomplished during the JP implementation using the ToC, in terms of: (i) coordination, collaboration and organizational structures formed for transforming the social protection of persons with disabilities in Georgia (ii), quality and delivery of the proposed activities within the JP (iii), consultation and participation with the disability community to promote the participatory approaches within the JP; (iv) the internal M&E system;
- Examine to what extent the JP activities influenced the improvement of the situation of vulnerable groups identified in the JP document;
- Assess to what extent the JP contributed to the SDG acceleration and UN reforms;

- Document and provide recommendations regarding lessons learned, good practices and innovations that can be applied within other programmes.

### **Evaluation Questions**

Evaluation evidence will be judged using OECD/DAC criteria of relevance, effectiveness, efficiency and sustainability, as well as equity, gender equality and human rights considerations. The Evaluation Design Matrix (presented in Annex 2) indicates the evaluation questions, indicators, relevant data collection methods and sources of information. Indicator-related quantitative data will be collected through desk review of programme documents, such as project monitoring data and data related to key indicators that measure change at the output and outcome levels.

### **Evaluation Scope**

The evaluation scope covers JP implementing agencies, programme stakeholders and target groups. The geographical scope of the project is national, excluding the regions of Abkhazia and South Ossetia as the GoG does not exercise effective control over these areas. Particularly, field visits were conducted in the following municipalities: Ambrolauri, Shuakhevi, and Akaltsikhe. Due to time limitations the field visits were not conducted in Khobi Municipality where a social inclusion centre was established. Moreover, the capacity building activities for municipalities implemented by PDO with support of UNDP were not assessed through interviews/FGDs with local municipal representatives.

### **Evaluation rationale**

The evaluation assists the JP implementing agencies to draw conclusions from the implementation of the JP as a joint effort of several agencies, its main achievements, lessons learned and recommendations. It also serves to inform stakeholders about the overall results of the JP implementation.

## **3. Evaluation Methodology and limitations**

The methodology was in line with the evaluation approach and the guidance provided in the UNEG Guidelines, professional evaluation standards in accordance with the UNEG Norms and Standards for Evaluation, Ethical Guidelines for Evaluation, Code of Conduct for Evaluation in the UN System, and Guidance on Integrating Human Rights and Gender Equality in Evaluations.

On a practical level, this entails mainstreaming of human rights and gender equity perspectives into the methodological approach and all evaluation phases, including the evaluation criteria and questions, indicators, and the data collection plan. More specifically:

- Collection of sex disaggregated data and information;
- Inclusion of perspectives of (diverse groups of) women (especially women and girls with disabilities) and men in data collection processes;
- Reflecting on limitations with regard to the participation of certain gender identity groups in the research process;
- Avoiding perpetuating negative gender norms in the survey and interview questions;
- Applying participatory approach for data collection, analysis, and validation processes that include diverse stakeholders.

The evaluation design has been carried out following a participatory and consultative approach ensuring close engagement with government counterparts, local municipalities, UN agencies, and other key civil society stakeholders.

The final evaluation was conducted based on the Mixed-Methods Approach. The evaluation team used the following research methods in order to achieve the above given objectives: desk research (including



secondary data analysis), key informant interviews and focus group discussions. More details about the methods are discussed in following sections.

Data sources of this evaluation are the following:

- Programme documents, national policies and strategies, legislation
- Programme implementing agencies,
- Government representatives, Parliament of Georgia, local municipalities, Public Defender Office, DPSs
- Programme beneficiaries

The evaluation was based on qualitative research methods and document review. Thematic qualitative data analyses methodology and the document review approach was also used for data analyses. Particularly, transcripts of FGDs and KIIs were prepared and analyses using the thematic analyses method and desk review were the first entry point to analyse the data.

### 3.1. Desk Research

The desk research lasted from the beginning of the evaluation until the end. It included an analysis of primary and secondary data. During the kick-off meeting with the JP implementing agencies, the evaluation team requested key documents from the agencies. The team obtained additional documents during fieldwork.

The following type of documents were analysed during the evaluation:

- **Program documents, progress reports,**
- **Laws, By-laws, Ordinance, Decree**
- **MoU, Strategies, Action Plans**
- **Studies, reports, recommendations.**

The detailed list of documents analysed are presented in Annex 3. The findings of the desk research exercises were an important part of the evaluation. Moreover, they helped develop Key Informant Interviews (KIIs) and Focus Group Discussion (FGDs).

### 3.2. Key Informant Interviews (KII)

In the inception phase of the project, the evaluation team requested lists of KII respondents from the JP implementing agencies . Each JP implementing agency provided a list of recommended respondents. The list of KII respondents was reviewed and merged. The detailed list of KIIs is provided in Annex 4. The KIIs were conducted with representatives from the following institutions:

- **Category I -JP Implementing agencies:** UNICEF, UNFPA, OHCHR, UNWOMEN, WHO, UNDP. under overall coordination by RCO. (8 KIIs)
- **Category II -Governmental Bodies:** Advisor to the Prime Minister on human rights (3), Ministry of IDPs, Labour, Health and Social Affairs, Parliament of Georgia, State Care agency, State Employment Agency, Office of the Public Defender of Georgia, Ministry of Education and Science, Ministry of Economy and Sustainable Development, Administration of Government of Georgia, Ministry of Internal Affairs, Police Academy, Administration of Government of Georgia, Legal Aid Service, National Statistics Office of Georgia **(19 KIIs)**.

- **Category III - Local Municipalities:** Representatives of Shuakhevi, Akhaltsikhe and Ambrolauri Municipalities (3 KIIs)
- **Category IV - NGO/SCOs/Academia, Consulting Companies:** Partnership for Human rights (PHR), NGO Association Anika, Women from Georgia, Women and Reality, Women’s Fund, Platform for the rights of Women and Girls with disabilities, Association of Young Economists of Georgia, ACT, Georgian Association of Social Workers, Tbilisi State Medical University, Project experts/trainers. (15KIIs)

45 KIIs were conducted with implementing partners and stakeholders (please see the list of respondents in annex 4) during fieldwork.

Based on documents provided to the project and communication with JP implementing agencies, KII guides were prepared for each abovementioned category, which are detailed in Annex 5. The guides were designed considering OECD/DAC criteria and evaluation questions defined by the ToR. Additionally, project objectives, indicators, theory of change and research questions of the JP were considered.

Some of the KII interviews were conducted online, while others were conducted offline.

### 3.3. Focus Group Discussions (FGD)

Focus Group Discussions (FGD) were conducted with target groups directly benefiting from the project. For this purpose, at the initial stage the JP implementing agencies were asked to provide the list of FGDs targets that should be addressed during the field phase. Additional consultations were held with representatives of UNFPA and OHCHR to further target the focus group participants. Representatives of programme beneficiaries with disabilities and OPDs/CSOs working on PwD and gender related issues were participants in the focus groups. Identified FGDs are presented in the Table 3.

*Table 3– Conducted FGDs*

<b>1 FGD</b>	OPDs and PwD activists involved in trainings and other activities
<b>1 FGD</b>	Lawyers of Legal Aid Service
<b>1 FGD</b>	Representatives of local NGOs and self-government bodies of Akhaltsikhe Municipality
<b>1 FGD</b>	Representatives of Self-government bodies of Shuakhevi Municipality
<b>1 FGD</b>	frontline specialists - health professionals, case managers and functional assessment specialists - involved in the pilot of the biopsychosocial model of disability assessment and status determination system
<b>1 FGD</b>	Network of Women with Disabilities
<b>1 FGD</b>	A gynaecologist who participated in the programme trainings
<b>1 FGD</b>	A psychiatrist who participated in the programme trainings

In total **8 FGDs** were conducted. Two of them in the regions of Georgia. 6 FGDs were conducted online. Two more FGDs were included in the FGD list provided from the UN agencies and integrated in the inception report. The first was Personnel of the Ambrolauri Social Inclusion Centre, recommended by UNDP. However, when the researcher from DEPA Consulting visited Ambrolauri Social Inclusion Centre, only one of three employees was in attendance and the other two were not available. Thus, an interview was conducted instead of the focus group discussion. The second one was PwDs who graduated from vocational education courses, recommended by UN OHCHR. Later on, UN OHCHR provided personal stories of VET course participants, but due to time limitations the decision was made to analyse these stories to assess the effectiveness of the intervention.

An FGD guide was prepared and is presented in Annex 5.

57 participants participated in the FGDs - 10 men and 47 women.

In the inception phase the evaluation team defined the sampling strategy, which ensured coverage of diverse beneficiaries of the project. Gender issues were also considered where possible.

### 3.4. Field Observation

Three project target regions were visited during the fieldwork phase. The evaluation team visited Shuakevi, Akhaltsikhe, and Ambrolauri municipalities. These municipalities were the target of JP activities. In addition to the KIIs and FGDs conducted in the municipalities, the research team observed the facilities established for PwDs that directly or indirectly benefited from the JP.

### 3.5. Ethical Consideration

The elaboration of research instruments was based on ethical considerations and the standards of UNEG, as some respondents of KIIs and FGDs were PwDs. The evaluation team sent research instruments to the bioethical commission in the National Centre for Disease Control and Public Health (NCDC). After receiving ethical clearance, the evaluation team conducted interviews under mandatory ethical clearance. The document of ethical clearance is presented in Annex 6. During fieldwork issues such as confidentiality and informed consent were considered.

During the evaluation, we consulted the following groups of people:

- **Category I -JP Implementing Agencies**
- **Category II -Governmental Bodies**
- **Category III - Local Municipalities:**
- **Category IV - NGO/SCOs/Academia, Consulting Companies**
- **PwDs, DPOs, Gynaecologist, Psychiatrist**

All respondents were informed about the goal of the evaluation, as well as issues of anonymity and confidentiality. Some personal data was collected for the purpose of organising data collection. Pseudonymisation of interview recordings and notes/transcripts was used as part of the research procedures, however it cannot be excluded that some of the information contained therein, even if not explicitly referring to a specific person, could be traceable to an individual.

The evaluation, including in particular its data collection component, was designed with ethical considerations in mind. In order to more comprehensively address these considerations, maximize the benefits of participation and prevent or minimize the possible harms, we also developed an ethical protocol. Some of the safeguards that we applied the course of research include:

- Cooperation with UNICEF;
- Minimization of data collection, in particular with respect to personal data collection;
- Informed consent procedure;
- Creation of a safe environment for interactions with participants;
- Response procedures for safety concerns and grievances;
- De-identification of data through pseudonymisation or anonymisation,
- Minimization of access to data, and other physical and procedural data protection.

### 3.6. Evaluation Limitations

In most of these sorts of assessments there can be some limitations, particularly exacerbated by the COVID-19 crisis. Apart from the characteristic evaluability issues, such as access to inputs, constraints in terms of time and resources, and other limitations have been identified.

A very short timeline was provided for the evaluation. In particular, 11 weeks were dedicated for the evaluation. It included an inception phase, field work and the process of writing an evaluation report. To address these challenges, the DEPA Consulting team dedicated two evaluation specialists and two researchers to conduct the evaluation within the tight timeline. To overcome the time limitations the evaluation team conducted fieldwork and the drafting of the evaluation report at the same time.

The tight timeline also limited the involvement of all stakeholders in the evaluation process. However, all main stakeholders provided by UN agencies were approached.

The direct project beneficiaries were PwDs; however, only some PwDs were personally involved in project activities. Therefore some of them were interviewed or took part in focus group discussions. This remains a limitation of the evaluation. Due to time limitations it was not possible to conduct FGDs in regions where ethnic minorities are located as was noted in the ToR.

Two evaluators and two researchers were included in the evaluation process. To avoid inter-rater reliability bias, the findings of the evaluations were discussed between the evaluation team and based on these discussions final findings were elaborated.

## 4. Findings

### 4.1. Theory of Change

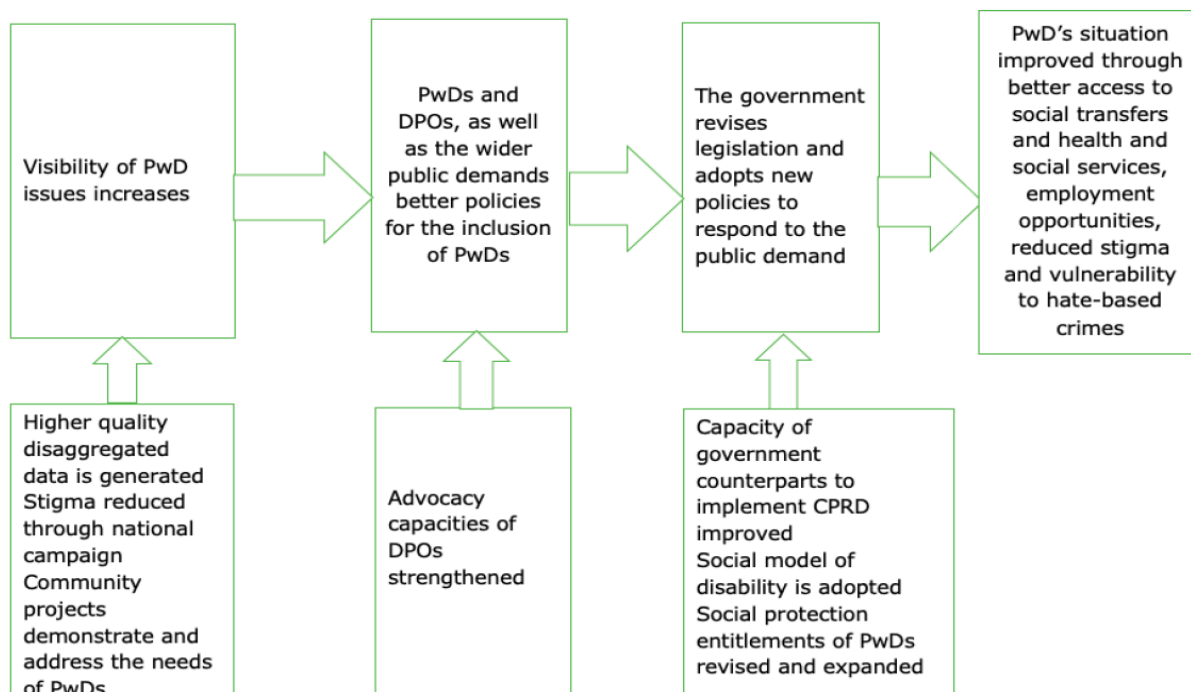
The theory of change of the JP was the following: actions need to be taken in two directions simultaneously in order to bring sustainable societal change and tackle obstacles that hinder the ability of PwDs to effectively enjoy their rights to social protection, healthcare, education, employment and societal participation:

- Top-down: through policies, legislation and institutions that are reformed and capable to conform with the norms stipulated in the CRPD; and
- Bottom-up: through strong empowerment of PwDs to claim their rights.

The JP includes a combination of top-down and bottom-up approaches as a crucial condition for achieving sustainable changes and for transforming the quality of life of PwDs.

Based on above mentioned assumptions the scheme of the Theory of Change was developed and stated in the programme document and is presented in Table 4 below.

Table 4. Theory of Change



The bottom-up and top-down approaches are also considered. This framework considers macro level changes, such as legislative, governmental involvement and micro level changes such as enhancement of the capacities of PwDs. However, the micro- level changes, such as empowerment of institutions' capacities working on PwDs needs to be reflected. For instance, the programme increased the capacities of psychiatrists, gynaecologists, front line specialists and local government institutions which are not implicitly reflected in the Theory of Change.

As was previously mentioned the programme was impacted by the outbreak of COVID-19, therefore the third outcome was added to the updated project document and the budget was adjusted accordingly. Based on retrospective changes, it can be said that the theory of change was not updated accordingly and assumptions were also not reflected.

The analysis of the Theory of Change indicates that the main pillars, such as public awareness, legislative changes, and empowerment of PwDs were covered by the framework. Particularly, the elements and logic of the results chain is the following: the JP will contribute to increase visibility of PwDs in Georgia through improving data collection on PwDs, analysis of the data and dissemination of information. Furthermore, it will support capacity building of DPOs especially in the regions of Georgia. The next element of the results chain is work with the government to elaborate, formulate and implement new policies and legislation in line with the principles of the CPRD and as a result increase the inclusion of PwDs. Furthermore, based on the improved Government policies and legislation, support a number of transformational changes for PwDs. These include enhanced opportunities for participation in public life, better financial security and employment opportunities, better access to various social and health services, reduced stigma and vulnerability to hate-based crimes. Cumulatively, these changes lead to a better fulfilment of the right of PwDs.

Different respondents during fieldwork outlined that the implementation of the project was negatively affected by certain social-political events, such as parliamentary elections 2020, local self-government election 2021, and the resignation of the Prime Minister of Georgia in 2021.

These risks and assumptions were reflected in the document. However, the noted social-political events and their role in programme implementation are better addressed in the Theory of Change section of the document.

To summarize, although the critical pathways and other expected processes of the ToC are defined accurately, the same cannot be said of some assumptions. The possible impact of social-political events is not very well reflected in the document. Moreover, the Theory of Change and its assumption was not updated to take into account the impacts of the outbreak of COVID-19.

## 4.2. Project Relevance

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- *How relevant was the JP to national priorities/policies at the national level and to the needs of the main vulnerable groups?*
  - *Were the planned outcomes and outputs of the JP relevant to the needs of persons with disabilities including, children, girls and women?*
  - *Have contextual factors been considered in the design and implementation and adaptation of Joint Programme?*
  - *Considering the COVID-19 outbreak how have the JP interventions on an outcome and output level remain relevant to the needs of PwDs?*
  - *How relevant was the jointness in programme design, implementation, and management for addressing the country's development priorities and challenges?*
  - *To what extent the JP ensured the continuous participation of the vulnerable groups in implementation?*
- 

### National level legislation

In an effort to create an enabling environment for persons with disabilities through disability-inclusive legislation, JP contributed to advocacy efforts regarding the Law on the Rights of Persons with Disabilities (LRPD). The law was adopted on July 14, 2020 by the Parliament of Georgia (within the second quarter of the programme implementation) and ensured harmonization of national legislation with CRPD<sup>3</sup>. The Program provided joint comments on the proposed bill in April 2020. The Joint Program remained relevant to the needs of PwDs by providing suggestions about better transposition of the CRPD Convention requirements to national legislation and by requesting that the Parliament of Georgia ensure adequate participation mechanisms for PwDs in the bill discussion process during the COVID-19 pandemic.

The programme also aimed to promote legislative and policy initiatives to ensure that a new status determination system for PwDs would be participatory and based on a social model, and draft legal changes were formulated to this end by the programme. LRPD, introduced in July 2020, established a legal requirement for the development of a new national level action plan for transferring to the biopsychosocial model of status determination by January 2023.

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<sup>3</sup> Law on the Rights of Persons with Disabilities, Legislative Herald of Georgia. Last seen July 2, 2022  
<https://matsne.gov.ge/ka/document/view/4923984?publication=1>

The programme undertook special work with regard to promoting PwD women's SRHR too. With the special advocacy of the programme staff, the newly adopted LRPD has sections to protect the rights of women and girls with disabilities. The first draft of the bill was amended according to programme recommendations and a separate article was added on women and girls in the law. Some of the SRHR-oriented intervention (document: the Assessment of Legal Framework and Policies on Sexual and Reproductive Health and Rights of Women and Girls with Disabilities in Georgia and Specific Recommendations in Relation to the UN Convention on the Rights of Persons with Disabilities) took place at the stage when the LRPD bill was already adopted, and these recommendations were not proposed by the programme at the Parliament of Georgia after LRPD adoption. But other JP recommendations on SRHR lead to changes at the MoH and despite the COVID-19 pandemic, JP achieved regulatory changes at the MoH level.

Programme staff reported low levels awareness on SRHR issues regarding PwDs among service providers. For this reason, the programme sought to provide MoH with technical support to develop and approve Standard Operational Procedures (SOP) in several directions. The following SOPs were approved by MoH with JP's support: family planning for WwDs, and antenatal supervision. Additionally, rights and needs of women with disabilities were incorporate in the already piloted SOP (*Interdisciplinary Healthcare Provision to Victims of Gender-based Violence*).

In addition, a document on the National Referral Mechanism on Domestic Violence/Violence Against Women was revised, integrating the rights and needs of women with disabilities. Approval of the referral mechanism had a huge relevance to the government in power when the programme started, but after a change in government the mechanism was not approved, and delay in its approval was also ascribed to the planned legal amendments/reforms regarding better recognizing the status of victims of gender-based violence. Additionally, JP helped design instruments for social workers on how to identify GBV for women with disabilities.

This programme supported another regulatory update when the Government of Georgia issued a decree on Social Rehabilitation and Child Care which introduced better access to SRH for PwDs residing in community services. According to programme staff and and a Special Report<sup>4</sup> by the PDO, PwDs residing within state provided housing services were reported to have poor awareness on SRH and were reporting incidents of poor reproductive rights and health prior to programme implementation.

The programme also assessed criminal justice accessibility problems for PwDs and provided relevant recommendations to state institutions for future reforms. The recommendations were of high relevance to investigative agencies and the judiciary, but were presented only in the final quarter of programme implementation and had no further advocacy work tied to it within JP.

Programme participants and their implementing partners worked to support the ratification of the Optional Protocol of CRPD in May 2021 as well<sup>5</sup>. JP implementers note that the ratification of the Optional Protocol was one of their advocacy priorities, for which reason several trainings were conducted for the Prime Minister's advisors and Human Rights Secretariat staff, which later contributed to the ratification of the Optional Protocol by the Parliament of Georgia.

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<sup>4</sup> <https://www.ombudsman.ge/res/docs/2020051116165376986.pdf>

<sup>5</sup> CRPD Optional Protocol, Legislative Herald of Georgia. Last seen July 2, 2022  
<https://matsne.gov.ge/ka/document/view/5173211?publication=0>

The programme also supported creation of the Interagency CRPD Implementation Coordination Mechanism at the level of Government of Georgia<sup>6</sup> which, according to evaluation respondents, had an influence on the initiative to increase the disability pension at the national level (severe disability pension grew to 250 GEL in 2022)<sup>7</sup> and on the decision of the Prime Minister that persons with severe disabilities employed at public institutions would not face a choice between disability pensions and salaries (the public service salary and disability pension were mutually exclusive benefits before)<sup>8</sup>. The programme support to establish the mechanism was strong as it provided assistance in developing a statute for the mechanism, and helped the mechanism to establish a PwD Consultation Council alongside it to ensure PwD participation.

For the duration of the Program the PwD Coordination Council was created at the level of the MoH to support implementation of LRPD<sup>9</sup>. The programme had a direct involvement in providing technical and expert support for its development and execution. Additionally, programme implementers and implementing partners were involved in the committee's work regarding the bio-psychosocial model of disability assessment and status determination system.

And finally, during the programme implementation, the Government of Georgia approved the technical protocol on National Accessibility Standards<sup>10</sup> that entered in force on March 1, 2021 and helps ensure the accessibility of the physical environment constructed after the law entered into effect. JP did not have direct involvement in the work performed for the adoption of the technical protocol in 2021 but did help ensure cohesiveness of past UN Programmes by proposing recommendations for preparing a National Accessibility Plan for the next 10 years and by providing technical support to improve informational accessibility standards at the national level. The programme provided relevant support by researching the best international standards for guaranteeing informational accessibility by the state, and then proposed a bill to introduce new national standards on information accessibility.

### CRPD Implementation, Monitoring and Consultation Mechanisms for PwDs

The core principle of the programme was to 'strengthen advocacy by capacitating OPDs to demand better policies for the inclusion of PwDs'<sup>11</sup>. To this end the programme conducted a wide range of trainings for PwD organizations and supported their inclusion both in the consultation council of the Interagency CRPD Implementation Coordination Mechanism and the PwD Coordination Council at the MoH. Both participation mechanisms were created at the end of 2021 but the programme implementing partners believe their trainings were relevant to increasing OPD' activity in these mechanisms. In addition to these two mechanisms where OPDs are members of consultation bodies, the programme supported an OPD consultation body created at MIA and for the Ombudsman's office as well.

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<sup>6</sup> Statute of Interagency CRPD Implementation Coordination Mechanism, Legislative Herald of Georgia. Last seen July 2, 2022 <https://matsne.gov.ge/ka/document/view/5292878?publication=0>

<sup>7</sup> Social Service Agency. Last seen July 2, 2022 [http://ssa.gov.ge/index.php?lang\\_id=GEO&sec\\_id=1388](http://ssa.gov.ge/index.php?lang_id=GEO&sec_id=1388)

<sup>8</sup> Decree of the Government of Georgia N310 13 June, 2022, last seen July 2, 2022

<https://www.moh.gov.ge/uploads/publicinformation/2022/06/15/4178ffe8fbc0100a494bc809dbf62174.pdf>

<sup>9</sup> Order of the Minister of IDPs, Labor, Health and Social Affairs of Georgia. Last seen July 2, 2022

<https://www.moh.gov.ge/uploads/publicinformation/2021/08/25/51947ffe316423f8c12e1359c116ee50.pdf>

<sup>10</sup> Technical Guideline National Accessibility Standard; Legislative Herald of Georgia. Last seen July 2, 2022

<https://matsne.gov.ge/ka/document/view/5051805?publication=0>

<sup>11</sup> Joint Program Transforming Social Protection for Persons with Disabilities in Georgia, Theory of Change. Project documents.



Trainings conducted as part of the programme also intended to activate PwDs in the use of legal mechanisms (e.g., national courts) for executing the newly established LRPD standards. JP developed and shared a research document on the international best practices about the use of Special Plaintiff status, now introduced by LRPD. Additionally, the programme provided relevant support to CSOs (both NGOs and OPDs) to advocate and promote PwD rights at the UN Committee on the Rights of Persons with Disabilities, since Georgia ratified the Optional Protocol of CRPD in 2021. As well, JP prepared a translated document on International Guiding Principles on PwD Access to Justice and conducted trainings to grow PwD capacities in preparing their own *amicus curiae* in cooperation with OPDs. As a result, three *amicus curiae* were presented to the national courts of Georgia by experts and PwDs jointly. At the end of the programme OPDs were also provided a document on criminal justice accessibility problems for PwDs to raise their awareness on the matter.

The programme also helped PwD organizations to be involved in shadow reporting. By creating a network of organizations working on the issues of disability among women, the programme supported creation of a Shadow Report on the Rights of Women and Girls with Disabilities in Georgia and submitted it to the United Nations Committee on the Elimination of Discrimination against Women (CEDAW). Additionally, with project support, the Partnership for Human Rights provided critical inputs on the rights of women and girls with disabilities to the Joint CSO shadow report submitted to CEDAW Committee by a coalition of 28 women's organizations. Both the special report on the rights of women and girls with disabilities and the joint CSO report were submitted to the CEDAW Committee on 24 June 2021. The evidence and assessment presented in the alternative report was instrumental for critical examination of the state report by the CEDAW Committee and constitutes an important instrument through which CSOs can hold the Government accountable.

PwD participation was also ensured by JP at the Focus Group level when preparing a shadow report to the Government of Georgia on PwD Rights Protection During the Pandemic.

As for CRPD Monitoring, at the onset of the Programme CRPD Monitoring Mechanism (Ombudsman) was intended to create a shadow report on CRPD implementation but this plan had to be modified for the programme to be relevant to the changing context. The original country report from 2016 was still not reviewed by UN even by the time JP was funded, hence the JP found more relevance in preparing diverse thematic reports for CRPD monitoring locally by the Ombudsman Office, which can later be used for shadow reporting purposes once the country submits its next report on CRPD implementation to UN.

### National strategies and plans

According to one of the UN agencies, as the LRPD was adopted at the onset of the programme, the relevant work on legislative improvements was refocused on the development of the LRPD Action Plans that was made obligatory for every state institution by the new legislation. JP provided technical support to develop and consult on LRPD Implementation Action Plans to the following state institutions: Prosecutor's Office of Georgia, Ministry of Foreign Affairs, Ministry of Justice, Ministry of Economy and Sustainable Development, Ministry of Internal Affairs, Ministry of Finance, Ministry of Defense, Legal Aid Service and LEPL (Legal Entity of Public Law) Levan Samkharauli National Forensics Bureau, Communications Commission of Georgia. Public institutions interviewed as part of this evaluation, mentioned that JP was very swift in providing relevant assistance. Technical support provided by the programme was important for the development of APs in both years, 2021 and 2022. Most importantly, JP ensured PwD participation in the AP development process at several Ministries. For example, the MIA AP was circulated among PwD consultation council members at the level of the ministry and LAS AP was

circulated among beneficiary PwDs across different regions. However, it should be noted that PwD beneficiaries of the programme as well as staff reported to evaluators that there were municipalities where APs were not made available.

JP also provided relevant and timely technical support to develop the draft Human Rights Strategy 2021-2030. Additionally, the programme provided more specific recommendations on protection of the SRHRs of PwD girls and women, prevention of violence, as well as on the improvement of service provision. The national Human Rights Strategy remains yet to be adopted and recommendations remain to be collected from UN agencies after the strategy has been made open for commentary. Several other PwD women's rights improvements (e. g. access to justice, education, health, etc.) were also promoted by the JP, while different organisations provided recommendations on the draft of the National Human Rights Strategy.

JP supported the Ministry of Education and Science in developing an internal strategic document for inclusive education (2022). Inclusive education policies have been promoted in Georgia since 2013. According to the Ministry, it was very useful to have created such a strategic document, and it was very important to have underpinned the strategy creation on focus group discussions and consultations with PwD groups and their right defenders.

As previously mentioned, JP also promoted the idea of preparing a National Accessibility Plan for the next ten years and provided recommendations to MoESD<sup>12</sup>.

### Improvement of capacities of Legal Professionals and Law - enforcers on PwD rights

To improve the execution of new PwD legislation, the programme introduced training modules to training and education centres of state institutions and conducted ToTs and training for respective staff and civil servants on PwD rights. Such trainings were met with great acceptance from state institutions and were deemed very timely and necessary in light of new legislative changes.

First, JP invested in training Legal Aid Service representatives on PwD rights as the LRPD set new requirements for the Government to provide free legal aid service to PwDs. The programme created curricula on the rights of PwDs and communication standards for the Training Centre of the Legal Aid Service of Georgia. A total of three trainings were conducted for legal professionals, one of which was a ToT for future trainings by the Training Centre of the Legal Aid Service. One part of the module related to aspects of communication with PwD beneficiaries and second to the international and national standards on PwD rights.

Next to LAS, to improve LRPD enforcement, the Policy Academy of MIA received assistance to develop a course/module on PwD rights protection for students at the Police Academy. The curriculum was developed with the direct participation of a PwD council (comprised of OPDs, activists, NGOs, etc.). The course was found to be a relevant upgrade and a welcomed addition to the Academy in the context of the newly introduced LRPD.

To improve access to justice for PwDs, JP supported reasonable accommodation of MIA services, and trained MIA staff as well. The programme organized PwD visits to MIA service centres and consulted with them on the reasonable accommodation of MIA services. JP provided a crash course ToT for MIA staff on

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<sup>12</sup> Recommendations on Developing National Accessibility Standard, UNDP

PwD rights too, which will be used to train police across Georgia in the future. MIA representatives assessed staff training as one of their most relevant programme interventions.

And finally, as the programme helped the Ministry of Education and Science to develop an internal strategic document for inclusive education (2022), it also supported development of a training module for personal assistants of special needs children. Such a module did not exist prior and was of great relevance to school teachers according to the Ministry of Education and Science.

### Sex-desegregated data and analysis on disability prevalence, needs and barriers faced by PwDs

To improve the quality of disability statistics in Georgia, JP conducted a Model Disability Survey and estimated the rate of severe disability in Georgia, determined the current disability distribution and identified needs, barriers, and inequalities faced by persons with different levels of disability in Georgia. The relevance of this intervention was conditioned by the fact that the last population census was conducted in 2014 in Georgia (recording 5% of the total population as persons with functional difficulties or disabilities) and administrative data by MoH had recorded only the number of disability pension recipients (3.47% of the population). According to programme documents, prior to JP implementation the lack of statistical data was raised repeatedly in a report on the implementation of nearly every article of the CRPD, and especially in the context of missing information about disability among women<sup>13</sup>. A MDS is planned to inform respective policy decisions at the level of MoH as the key findings from the MDS show that about 60% of the adult population in Georgia report moderate to severe disability and that the prevalence of severe disability is more important in the female population<sup>14</sup>. MDS also reported important findings about the use of assistive devices (46.3%) and the prevalence of complete unmet needs (16.5%).

Parallel to this JP also created an analysis of state programs for assistive technology in Georgia and created relevant recommendations for increasing the coverage for the unmet needs for the assistive products and for extending eligibility and including all persons in need within such program.

Parallel to this, JP mapped the gender and disability data in Georgia and based on this work prepared data statistical publication on children and women with disabilities by analyzing 2014 census and other survey data<sup>15</sup>.

First publication, “Mapping Gender and Disability Data in Georgia: Recommended Indicators and Actions” analyzed the current situation of gender and disability data in Georgia, including existing and potential data sources and outlined a recommended minimum set of gender and disability indicators that can be used for tracking progress towards international and national commitments on gender equality and disability<sup>16</sup>. Based on these recommendations, Statistical Publication „Women and Children with Disabilities in Georgia” was produced analyzing available data sources and providing an overview of the situation of people with disabilities with a special focus on women and children as relates to

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<sup>13</sup> MAPPING GENDER AND DISABILITY DATA IN GEORGIA: RECOMMENDED INDICATORS AND ACTIONS, UN Women 2021

<sup>14</sup> ‘Disability is the outcome of the interaction between the capacity, i.e., the health conditions or impairments, and the environment, i.e., physical, human-built, attitudinal, and socio-political features in which the person lives. Disability is understood in the MDS survey as a continuum, ranging from very low to severe levels of disability. Disability is assessed through 48 items that are psychometrically tested before aggregating them towards a disability score’. Chapter 5.5. Disability, Main Findings (pg. 17 and pg. 25), MDS Survey Report 2022, WHO

<sup>15</sup> WOMEN AND CHILDREN WITH DISABILITIES IN GEORGIA: AN OVERVIEW OF THE DATA, UN Women

<sup>16</sup> MAPPING GENDER AND DISABILITY DATA IN GEORGIA: RECOMMENDED INDICATORS AND ACTIONS, UN Women 2021

demographics; education; employment; health, welfare, and access to social services; and safety and crime. Additionally, main findings from this comprehensive statistical report on gender and disability were summarized in a issue brief “women with disabilities in Georgia”<sup>17</sup>. These documents brought attention to the improvement of improving sex-desegregated information in disability data. Additionally, the Programme helped National Statistics Office of Georgia to bring gender and PwD data from administrative organs into its system. To do so the Programme also helped GeoStat develop two Actions Plans for 2021 and 2022 on generating and publishing additional statistical data on PwDs<sup>18</sup>. Two major directions in which the collaboration with administrative organs (Ministries of Health and Education) was successful generated statistical data on distribution of school pupils according to social status<sup>19</sup> and PwDs in the healthcare system<sup>20</sup>.

### Expanding employment opportunities

JP highlighted the State Employment Agency as the key public institution and stakeholder for expanding PwD employment opportunities. The State Employment Agency was newly created as an independent agency from the Social Service Agency, and appreciated timely institutional support provided by JP. The programme trained employment coaches on PwD rights and communication methods with persons with different types of disabilities. The modules of the trainings were handed over to the Agency to institutionalize these trainings. The JP further updated the job descriptions of job coaches for PwDs.

Additionally, to provide relevant support to State Employment Agency, the programme team consulted with the Agency first and identified their needs. These consultations concluded that the following document would be created: *Subsidizing Safe Work Space – Creating an Accessible Environment for PwD Employment*. The document was deemed necessary as in 2021 a new decree was issued by the Government of Georgia on subsidizing PwD employers<sup>21</sup>.

The programme also cooperated with selected employers from the pharmaceutical industry to implement reasonable accommodation principles in the workplace. LRPD and the Technical Guideline on National Accessibility Standards made JP intervention relevant among employers adapting to the new legal environment. Due to the COVID-19 pandemic, the programme had to reduce the circle of employers receiving support, but the training module developed for pharmaceutical companies is also relevant for the banking sector as well and it is planned to target this sector in the future after the programme is completed.

The programme intended to provide support on PwD employment to local self-Government PwD councils as well. Nonetheless the 2021 self-Government elections, coinciding with COVID-19 lockdowns, allowed only partial implementation of it with 17 municipalities.

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<sup>17</sup> Women with Disabilities in Georgia, Un Women, last seen on July 28, 2022

<https://georgia.unwomen.org/en/digital-library/publications/2021/12/women-with-disabilities-in-georgia#view>

<sup>18</sup> Action Plan 2021-2022, National Statistical Office, last seen July 2, 2022

<https://www.geostat.ge/ka/modules/categories/306/kanonmdebloba>

<sup>19</sup> Distribution of school pupils according to social status, National Statistical Office, last seen July 2, 2022

<https://www.geostat.ge/ka/modules/categories/59/zogadi-ganatileba>

<sup>20</sup> PwDs in the healthcare system, National Statistical Office, last seen July 2, 2022

<https://www.geostat.ge/ka/modules/categories/55/sotsialuri-uzrunvelqofa>

<sup>21</sup> 2021 State Program on Employment Promotion Service Development, 451 Decree of Government of Georgia, September 9, 2021. Legislative Herald of Georgia. Last seen July 2, 2022

<https://matsne.gov.ge/ka/document/view/5253702?publication=0>

Finally, the programme established community centres (inclusion centres) in 3 regions of Georgia that provide rehabilitation services and entrepreneurial activities in a place where services are delivered.

### Transformation of social protection system in line with the social model

The activities performed within outcome two were mostly focused on the transformation of the system from the “medical model” to the social model. These activities are in line with CRPD guiding principles such as: non-discrimination, full and effective participation in society, equality of opportunity, accessibility, equality between men and women, respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities<sup>22</sup>.

The activities are in line with new LRPD requirements. According to the LRPD, until 2023 the government is responsible to have a roll-out plan to transform the system into the social model. Additionally, until 2025 the functional assessment should be conducted according to the bio-psycho-social approach.

The relevance of activities was outlined by the representatives of the MoH, Ombudsman Office and representatives of OPD. As they mentioned, the programme enabled the production of various important documents that help to prepare the ground for the transformation of the existing system.

### Guiding documents adopted for realization of SRHS and GBV

The programme advocated for the involvement of SRHS and GBV issues for PwDs in different documents, such as the draft document of Human Rights Action plan of Georgia. A working process is underway on the action plan of violence against women and domestic violence. In this document, it was recommended to start recording the PwD women victims of gender and domestic violence. Both activities are relevant for the PwD women's needs and protection from violence.

### Capacity development of Local Municipalities

According to the LRPD, the decentralization process of services for PwDs should continue and the role of local municipalities should increase. Therefore, activities implemented to enhance the role of local municipalities on PwDs are relevant to the LRPD.

Fieldwork observations in the programme target municipalities also revealed that there is a need to enhance the role of the municipalities in the service delivery to PwDs. Additionally, there is a further need for capacity building with local municipalities' staff to strengthen the role of municipalities in service delivery to PwDs.

### Relevance of Joint activities

The problems of PwDs are identified in different dimensions of the society. For instance, PwDs have a problem at the level of social-cultural attitudes of different policies implemented at the governance level, on the municipal level, gender-related problems, and others. Therefore, different kinds of expertise and actions are required to address the challenges in different dimensions. The involvement of different UN agencies to implement the joint program is therefore relevant to various problems of PwDs.

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<sup>22</sup> Guiding principles of CRPD. <https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/guiding-principles-of-the-convention.html>

In practical terms, to address gender specific problems of PwDs, involvement of UNFPA and UN women was relevant for the programme's transformative goals. The many years of experience of UNICEF working with children with disabilities was highly relevant to the programme's implementation. UNDP is actively working on PwD issues and on the economic and policy empowerment of local municipalities and national level government. OHCHR has experience in working on human rights and rights involving disabilities. Their involvement strengthened the programme in improving the human rights-based approach. The WHO is prominent and has research expertise in collecting reliable data on PwDs, making their involvement to collect relevant data important to the programme.

To summarize, the involvement of different UN agencies in the programme was highly relevant and addressed different challenges that the PwDs have in Georgian society. All UN agencies have used their expertise and comparative advantage to join forces for strengthening the social protection system for PwDs.

### Participation of PwDs in programme implementation

The programme ensured participation of PwDs within the planning and implementation phases. While the JP programme worked to improve the document of the LRDP with the Parliament, the JP also supported OPD to contribute to the improvement of the document. However, some of the respondents stated that the law was approved very quickly and the participation of the OPD and PwDs in the elaboration of the document was insufficient.

The programme worked to involve the OPD in the elaboration of different human rights action plans and SOPs to involve their vision into the documents.

While working at the municipal level, the PwDs and OPDs were involved in Aklatsikhe and Shuakhevi Municipalities. OPD is the recipient and implementing partner of the Social Service Centre in Ambrolauri municipality. Moreover, trainings conducted at the municipal level directly impacted the lives of PwDs in the targeted municipalities.

PwDs were directly involved in piloting of the functional assessment tools and the overall pilot project to transform the disability assessment and status determination system in Georgia.

OPDs and PwDs were directly involved in different projects implemented within the programme to increase their visibility in society. For instance, implementing partners of UN Women – Women's fund, the Partnership for Human Rights, Women and Reality, and Women from Georgia implemented the project to conduct a needs assessment of women with disabilities, improve statistics of women with disabilities, enhance knowledge on disability rights, among other goals.

### COVID19-Pandemic

Due to the outbreak of COVID-19 in early 2020, the country faced multiple new problems, including lack of relevant mechanisms, protocols, and communication strategies, which was particularly detrimental for PwDs, especially those from vulnerable groups. The programme closely collaborated with the Government Administration, relevant ministries, and CSOs and PwD community representatives to identify the needs of PwDs during the pandemic. The JP has responded these needs through support in different directions, including the dissemination of information for PwDs and awareness raising activities, improving accessibility of PwDs to distance services, elaboration of relevant guidelines and protocols, conduct of number of assessments and supporting monitoring efforts to mainstream PwD needs in general COVID-19 agenda, and providing distant vocational education opportunities for PwDs during the

pandemic. It can be concluded that the programme design was successfully adjusted and relevant funds were directed to respond to the newly emerging needs of PwDs during COVID-19.

### 4.3. Effectiveness of actions

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- *To what extent did the JP contribute to achieving its development objectives, especially around the 3 transformative results?*
  - *What programme interventions and strategies are (or are not) meeting the needs of persons with disabilities including, children, girls and women?*
  - *What have been the major factors influencing the achievement or non-achievement of the programme objectives?*
  - *To what extent has the JP contributed to accelerating the SDGs at the national level?*
  - *To what extent the JP produced a catalytic effect in terms of generating systems change across sectors to leave no one behind including children, girls and women with disabilities?*
  - *To what extent the JP contributed to achievement of UNDAF/CF outcome/s and national development priorities?*
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The project outcomes were the following:

**Outcome 1:** By 2022, persons with disabilities, especially those from vulnerable groups, benefit from enabling environment through disability inclusive legislation, evidence-based policy, decreased stigma on disability and expanded employment opportunities.

**Outcome 2:** By 2022, the social protection system, health and social services are transformed in line with the social model of disability to ensure social inclusion and equal rights of people with disabilities.

**Outcome 3:** Persons with disabilities, especially those from vulnerable groups, are supported during the COVID-19 pandemic via adjusted communication strategies, developing relevant guidelines, protocols, and policy documents to better respond to the needs of PwDs in the light of COVID-19 outbreak.<sup>23</sup>

Within the subchapter effectiveness of achievements of each outcome are analysed.

#### 4.3.1 Achievements at Outcome 1 level

##### National level legislation

As outcome 1 of the JP aimed to improve the legal environment for PwDs, the swift adoption of LRPD in 2020 by the Parliament of Georgia helped to achieve Programme Outcome 1 right at the outset of its implementation. Evaluation respondents believe the law was long overdue and a much-needed

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<sup>23</sup> The third outcome was added after the project design document modification for the project's second year. The outcome was added to response challenges caused by the COVID19 outbreak.

replacement for the 1995 bill on Social Protection of Persons with Disabilities<sup>24</sup>. The programme implementers and partners believe the LRPD adoption brought about important improvements in PwD rights guarantees on a national level. Several of the new improvements proposed by the new legislation included: introduction of the Special Plaintiff system in Georgia; new definitions about direct and indirect discrimination against PwDs (e.g. denial of reasonable accommodation was defined as discrimination based on disability); separate articles specifying rights of women and children with disabilities, as well as access to reproductive rights of women with disabilities; recognition of Georgian sign language; introduction of new obligations for state institutions to develop PwD Rights Action Plans and report on their implementation to the Parliament of Georgia; establishment of a timeframe for the Action Plan development on transforming to the Social Model of disability assessment; etc. WWDs interviewed by the evaluation believe separate articles specifying rights of women with disabilities is an achievement of JP and of the WWD network supported by the programme but work remains as commitments for deinstitutionalization and incorporation of legal capacity reform were overlooked by LRPD.

Despite all this, respondents from among the programme implementers admit that the swift adoption of the bill was rather unexpected, and it changed the definition of effective lobbying and advocacy for PwD rights, as well as effective participation for PwD organizations and CSOs. One of the WWDs interviewed by the evaluation reported that ‘none of the OPDs’ knew of the bill discussions at the Parliament at the moment of its inception reiterating that OPDs felt absolutely excluded from the process. The same respondent believes exclusion was perhaps motivated by the fear of Parliament receiving criticism. This assertion is refuted by information provided by the Parliament of Georgia, according to which the bill was first introduced 5 years ago. Parliamentary Committees worked on it for 5-6 months providing all necessary time for discussions and addressing 90% (19 out of 21) of commentaries received from CSOs. According to the interviewed MP, the Parliament held 18 Committee hearings with PwD participation, as well as 5 working meetings at the Parliament of Georgia despite the pandemic and with necessary mechanisms for remote participation.

Overall perceptions among programme implementers was that the adoption of the law was swift, and some assume that the process was deliberately non-participatory to exclude critical OPDs, NGOs and watchdog organizations. Besides the law adoption process being deficient in terms of participation, one of the respondents also said that it ‘lacked expert knowledge as specific fields remained under researched all throughout the adoption process and academic work was missing’.

Overall, the programme effectively coordinated its recommendations to the Parliament when legislative reforms were discussed in Spring 2020. The programme achieved an improved legal environment for PwDs and programme implementers believe adoption of LRPD and legal changes introduced by LRPD were a breakthrough that created powerful legal obligations for the state to improve the rights of PwD and established specific timeframes for future reforms. Nonetheless, some respondents also say that LRPD only acknowledges CRPD principles in local legislation but does not set solid new requirements for overall improvement of PwD rights protection in Georgia that were not there before since CRPD ratification in 2013. Neither are the timeframes proposed by LRPD (for future reforms) adequate and acceptable as they are too lengthy.

Some respondents also expressed their concerns over the legislation not being tailored for specific groups and their specific needs (e.g., people with psychosocial and intellectual disabilities, PwDs residing in

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<sup>24</sup> Law of Georgia on Social Protection of Persons with Disabilities, Legislative Herald of Georgia. Last seen July 2, 2022 <https://matsne.gov.ge/en/document/view/30316?publication=8>



penitentiary systems, PwD women's sexual rights organizations of people with disabilities, etc.) and hence not helping Georgia to substantially improve the human rights situation of these groups.

In summary, the programme had success in improving PwD rights protection standards by litigation. For example: the combination of CRPD ratification and LRPD adoption allowed litigators to demand personal assistant's service provision from the state at the European Court of Human Rights. The ECHR's interim measure ruled that, before the LRPD requirement regarding personal assistant's service provision would enter into force in 2024, the Government would need to provide the services of personal assistants (for the maximum duration of 18 hours a day). According to the respondent, following the court ruling a personal assistant's national program was created with half a million Lari annual budget and a salary rate of 12 GEL per hour for personal assistants employed by the program.

Additionally, the evaluation revealed that there was successful litigation conducted in the national courts to bring legislative changes for the social model PwD assessment implementation through court decisions. One of the implementing partners won a case against the Government of Georgia for assigning PwD assistance to a person who is not bearing a PwD person's status under the (current) medical model, but would have carried the status of a PwD if the social assessment model was in place, and would have acquired the necessary social allowance.

Additionally, as the programme trained Legal Aid Service representatives on litigation strategies and CRPD standards, legal professionals from LAS reported that their legal practice became more active in PwD rights protection. Training recipients named two successful examples of litigation where the court ruled to the PwD person's advantage. In one of the cases, litigators managed to remove an unlawfully ruled restraining order on a person with disability, and in the other litigators managed to stop the forced institutionalization of a person far away from their hometown. Unfortunately, legal professionals from LAS reported awareness being very low among PwDs about their own rights and legal practice on PwD rights protection. Legal professionals commented on PwD rights litigation praxis and believe executing the new law is challenged by inconsistencies in different national legislation. For example, they explained that PwD status bearers are exempt from court fees in administrative litigations, but PwDs without status are not. Additionally, they reported that it is inconsistent to have a different approach within criminal cases, where court fee exemption depends on PwD status. Legal professionals also reported that expert opinions presented to courts (e.g., on assigning supporters in cases of legal incapacity) are also problematic and are a barrier to PwD rights protection. Finally, legal professionals believe oversight of the new Accessibility Standards execution/implementation is very weak, and cases of sanctioning legal entities for not providing accessible environment to PwDs are very rare.

### CRPD Implementation, Monitoring and Consultation Mechanisms

JP implementers believe that the programme was very successful at facilitating the process of the establishment of an Interagency CRPD Implementation Coordination Mechanism at the level of the Government of Georgia. The statute was drafted with technical support from the programme and circulated for recommendations among OPDs and NGOs. The Coordination Mechanism also has a Consultation Council comprised of OPDs, PwD children's' parents, PwD service providers, etc. The evaluation respondents believe the effectiveness of the mechanism and the level of participatory democracy it mandates have yet to be proven in the future. The coordination mechanism has only met twice since its establishment. The evaluation recorded doubts about access to expert knowledge that is necessary for the Coordination Mechanism's full-fledged functioning. Nonetheless, the statute the Mechanism created with the programme's support allows for expert groups to be set up for consultations.

Additionally, since the Mechanism is freshly created, it is unknown at this point whether the mechanism will be negatively impacted by these issues.

The PwD Coordination Council created at the level of MoH has four committees with significant representation from programme implementing staff and partners who report that the committee work is active and productive. These are the Committees for Promoting Development of Social Model of PwD Assessment and status determinations; for Deinstitutionalization and Alternative Care Services; Development of Social Services for Equal Opportunity for PwDs; and Equal Opportunity Municipal Services for PwDs. One of the Committees is close to completing its work on a National Deinstitutionalization Strategy and Action Plan.

For now, it is difficult to measure the effectiveness of programme input in shadow reporting to CEDAW as it is expected that the committee will review the document long after programme completion. Likewise, it is difficult to assess the impact of PwD training for participating in *amicus curiae* preparation. The effectiveness of each *amicus curiae* will be possible to assess once court rulings are released after programme completion. Lastly, assessing the effectiveness of the thematic CRPD monitoring reports prepared by the Ombudsman's office will be possible only after they are presented as part of shadow reporting on CRPD to UN or if they are considered at the PwD Action Plan report preparation and hearing stages at the Parliament.

### National strategies and plans

As already mentioned, JP provided technical support to develop LRPD Implementation Action Plans to selected Ministries and LELPS. One of the programme implementers noted during the interview that the necessary capacity for AP development was missing at Ministries and technical support provided by the programme helped build the capacity of the staff of different Ministries for the AP developments independently in the years to come. Entities that managed to hold hearings on the AP drafts among PwD organizations and persons representing the community believe the Action Plans were likely to have high effectiveness.

The evaluation respondents (both donors and implementing partners) believe the programme was very effective at preparing the ground for new legislative changes that need to come in the field of informational accessibility. The programme input can be assessed for its effectiveness when the bill proposed by the programme is introduced at the Parliament of Georgia for adoption. However, at the time of evaluation Parliament representatives reported no plans for beginning bill discussions in Parliament. Nonetheless, according to programme staff the bill will be introduced in the Parliament at the end of 2022 and relevant experts are already identified to assist them with the passage of this legislation. The programme also prepared the ground for a National Accessibility Plan to be drafted in the future (the following document was prepared by the programme to this end: *Recommendations for Developing National Accessibility Standards in Georgia*) but the MoESD and the Parliament reported no clear plans for its adoption as this time.

Additionally, in order to ensure that national policies and plans would address/integrate the issues of SRHR access for PwDs the programme prepared an analytical document called: *Assessment of legal framework and policies on SRHR of women and girls with disabilities in Georgia and specific recommendations*. The document was an effective tool for raising awareness among CSOs (as well as OPDs and NGOs) about SRHR and led to approval of a Social Rehabilitation and Child Care programme as well

as different SOPs at MoH. Additionally, SRHR expertise promoted as part of the programme informed commentaries on national HR strategy and APs. For example, JP developed recommendations to the draft Human Rights Strategy 2021-2030, more specifically on protection of the SRHRs of PwD girls and women, on prevention of violence, as well as on service provision. But recommendations remain to be addressed at the stage of strategy adoption. Several other PwD women's rights' improvements (e.g. access to justice, education, health, etc.) were promoted by the JP when providing recommendations on the draft of the national Human Rights Strategy as well.

### Sex-desegregated data and analysis on disability prevalence, needs and barriers faced by PwDs

According to the original approved workplan, MDS had to be conducted at the initial stage of the programme and data obtained by the survey had to inform advocacy processes and influence legislative changes. Since the outbreak of the pandemic MDS was only completed at the end of the programme. Its report was shared with relevant stakeholders only a couple months before JP's completion. MDS findings showed that about 60% of the adult population in Georgia report some form of disability<sup>25</sup>, which is much higher than the number of the 2014 census (5% of the total population, as persons with functional difficulties or disabilities) and administrative data by MoH about disability pension recipients (3.47% of the population). Since the prevalence of moderate to severe disability is so high, it is expected that the Survey findings can have strong effects on future policy planning by MoH. Nonetheless there is little expectation for respective policy planning to take place before the transfer to the bio-psychosocial model planned by a new national Action Plan (required to be enacted by LRPD from 2023).

JP also created an analysis of state programs for assistive technology in Georgia. Relevant recommendations for increasing coverage for unmet needs in assistive products and for extending eligibility and including all persons in need within such program were not addressed by MoH at the programme completion stage.

MoH and the National Statistics Office of Georgia were presented with recommendations on improving the availability of high-quality, timely and reliable gender and disability data under ethical and inclusive principles of data collection and use of statistics, as well as on improving the availability and practical use of quality statistics in evidence-based policymaking, programming, monitoring and evaluation. Specific recommendations were provided to the MoH separately to help improve administrative data collection on gender and disability. The proposed recommendations are not yet addressed at the time of programme completion and require multi-stakeholder cooperation for their implementation.

### Expanding employment opportunities

JP trained employment coaches of the State Employment Agency to help promote PwD employment. The programme hasn't used a dedicated tool to measure the effectiveness of its trainings (either in the form of pre- and post-tests; or feedback forms; etc.). The State Employment Agency did highlight though that

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<sup>25</sup> 'Disability is the outcome of the interaction between the capacity, i.e., the health conditions or impairments, and the environment, i.e., physical, human-built, attitudinal, and socio-political features in which the person lives. Disability is understood in the MDS survey as a continuum, ranging from very low to severe levels of disability. Disability is assessed through 48 items that are psychometrically tested before aggregating them towards a disability score'. Chapter 5.5. Disability, Main Findings (pg. 17 and pg. 25), MDS Survey Report 2022, WHO

the turnover of employment coaches is not high at the agency, hence trained personnel remain on duty, and are expected to demonstrate improvements in their quality of coaching.

The State Employment Agency reported finding the document prepared by the programme *Creating Accessible Environment for PwD Employment* to be of great use. But the State Employment Agency also mentioned the importance of monitoring mechanisms to oversee the level of fulfilment of workplace accessibility standards by employers. The importance of this issue was accentuated in the context of the decree of the GoG on subsidizing an accessible environment, and the National Technical Protocol on Accessibility requiring workplaces to be adapted to physical disabilities.

It was also difficult for the evaluation to assess the effectiveness of trainings conducted by JP to employers at pharmaceutical companies. The programme hasn't used a dedicated tool to measure the effectiveness of its trainings (either in the form of pre- and post-tests; or feedback forms; etc.). Hence further research is required to measure how the pharma companies started using knowledge gained in practice. Besides, the Programme has not obtained any statistical data from trained companies of PwD employment prevalence before or after the training.

#### PwD rights capacity building and improved participation in decision making

The programme facilitated the creation of a network of OPDs and women's rights organizations. The network aimed to bring the two groups together, and allow joint strategizing on common goals.

Participants empowered by the training believe the information and knowledge shared by the programme at the trainings was very valuable to them. PwD trainings were relevant to their capacity building in communication and presentation skills, as well as in fundraising. Additionally, organizations in the network were given trainings on SRHR. Up to 200 women (100 women with disabilities among them) and representatives of 36 CSOs were given new capacities on gender and disability advocacy, and research as a result of work with Partnership with Human Rights and Women and Reality. Last but not least, network members were assisted to participate in programmes raising public awareness about WWD issues. Several podcasts were created to this end.

Part of capacity building took place at the stage when PwDs were supported to write amicus curiae together with the Ombudsman's office. Additionally, PwDs received training on the grievance mechanism created by the Optional Protocol since its ratification in Georgia. PwDs were also invited as trainers to a ToT at MIA as consultation council members and reviewed the training curriculum for MIA and the Police Academy. Satisfaction about participation in both curriculum planning and ToT execution was very high among PwD respondents. They recognized the importance of a multi-party and multi-disciplinary approach to the law-enforcement in their interviews.

PwDs interviewed by the evaluation were also asked to rate participation mechanisms created for them after the new disability legislation entered into force. One of the respondents believes the participation is illusory. First, if there are OPDs present within such councils, they are believed to be reluctant to be critical of the government due to their financial dependence on the state. Second, if OPDs tried to participate, there are inadequately high expectations of them about the expertise they provide: for example, it is believed that PwDs participating in such formats shouldn't be asked to provide thematic

researches, and comparative studies, or best practice analysis from other countries (the process of PwD Rights Action Plan (part of the National Human Rights Strategy) consultation was mentioned as one such procedure). Additionally, another respondent mentioned that traditional advocacy is not possible in Georgia as certain informal leaders have more influence with authorities and there are shadow processes deciding on changes very non-transparently and behind closed doors. It is believed that state support is very important for OPDs to be sustainably empowered and fully capable of participation and advocacy. According to this view, state support should also mean guarantees to OPD independence, full democracy and transparency.

PwDs also spoke about the problem of deficient social services and lack of information about their rights among PwDs. One of the respondents also brought up the problem of Municipal and Government level Gender Councils missing representation from WWD organizations and participation from this group.

WWDs interviewed by the evaluation believe separate articles specifying the rights of PwD women in LRPD is an attainment of the WWD network supported by the programme. One of the WWD respondents interviewed as part of the evaluation reported that key stakeholders and MPs at the parliament are serious about WWD recommendations now, as compared to initial stages when recommendations were taken rather less seriously.

One of the respondents believes that PwD participation in shadow reporting was rather ineffective because there was no real statistical data available on PwD prevalence at the moment. Nonetheless, WWDs are involved in preparing amicus curiae and are participating.

WWDs also believe there is institutional support needed for the organizational structure of the WWD network to persist, which is very crucial but absent at the moment. Despite all this, WWDs believe the network will be maintained as each of the 14 members of the network remain as activists in the field and keeps contact with the others. Besides, WWDs report that they have already participated in different Parliamentary Committee discussions deemed relevant for their rights, which means their advocacy will be sustained.

#### Data collection and women with disabilities

Needs assessment of organizations working on the rights of women and girls with disabilities was developed in partnership with the CSOs “Partnership for Human Rights” and “Women and Reality”. The report identified key resources, challenges and needs of organizations led by women with disabilities and advocating for the rights of women and girls with disabilities. The needs assessment findings served as a basis for capacity development interventions provided to organizations working on the rights of women and girls with disabilities provided within the framework of JP and were widely shared with the representatives of government, development partners and civil society organizations.

#### Awareness raising on women and girls with disabilities

Women and girls with disabilities constitute one of the most invisible parts of our society. Often, their needs and problems are left outside the purview of the women’s rights agenda. Within the framework of the JP UN Women cooperated with national partners, including various communication platforms, to raise awareness about the rights of women and girls with disabilities and challenge stigma and stereotypes.

JP supported the popular social media platform “Women from Georgia” and launched a new initiative for women and girls with disabilities. The goal of the campaign was to enhance the visibility of women and

girls with disabilities and their contribution to society and to raise awareness about their rights, as well as the intersecting forms of discrimination they face based on gender and disability. The campaign united the stories of 15 women and girls with disabilities. Among them were those of different ages and needs from various regions of Georgia who spoke about professional development, employment, violence and other challenges. The campaign generated wide outreach reaching up to 600 000 social media users throughout its short lifespan.

Another campaign was implemented in partnership with the NGO Women's Fund. As a part of this campaign, a series of podcasts called "Gender and Disabilities" were produced for the popular media platform Feminstream. The podcasts had several objectives: to present important issues for women with disabilities with their direct participation, to create a space for discussion, to raise and strengthen awareness, to increase the visibility of women with disabilities, to promote bringing them closer to women's rights defenders, and to foster their solidarity and inclusion. It should be mentioned that three out of five authors of the podcasts was a person with disability. The authors of the podcasts reviewed important topics, such as property rights and mental health problems of women with disabilities, women with disabilities and motherhood, sexual abuse, the importance of the social model for women with disabilities and so on. In total, 16 podcasts were prepared as part of the initiative with up to 125,200 views.

#### 4.3.2. Achievements at Outcome 2 level

This subchapter analyses the achievement made towards outcomes 2. The structure of the chapter is organised in the following way: firstly, it analyses the state of output 2.1 and 2.2 based on the implementation of the activities within it. In the end it synthesizes the findings on the outcome level to assess the state of effectiveness of Outcome 2.

*Outcome 2. By 2022, the social protection system, health and social services are transformed in line with the social model of disability to ensure the social inclusion and equal rights for people with disabilities.*

Outcome 2 has two main outputs within which activities were performed. The first output includes/covers the *gender-sensitive disability assessment and the status determination system transformed based on the social model*. UNICEF was responsible for its implementation. The output is directly related to transformative result 2 and intends to establish the social model approach at the national level. The subchapter below presents the achievement under the output. The second output is the following: *Systems strengthened to enable quality integrated services for PwDs, including revised social system entitlements, especially for children, women and young people*. This output is also related to transformative result two.

#### Establishing the biopsychosocial model

To reflect the establishment of the social model it should be outlined that the model is based on two main pillars. The first pillar entails the social and functional assessment of PwDs that is the basis for disability

status determinations, and the second pillar aims to provide appropriate services for PwDs based on their social and functional assessment. Achievements of the JP are analysed under this framework.

Activities were the continuation of a previous project implemented by UNICEF and funded by USAID that started the piloting process in the Adjara Region. The JP team, in cooperation with MoH, critically assessed the findings of previous pilot projects and found out that there were not enough cases for particular disabilities in the previous pilot that give the authorities the possibility to use the findings. These particular disabilities were: mental wellness, oncology, sensory disabilities, physiatry, and others. Consequently, this programme used the achievements and gaps of the previous project and provided targeted pilot projects of the biopsychosocial model in 2 regions of Georgia – Tbilisi and Mtskheta. The assumption was that in the capital city there will be enough cases of various disability groups to conduct the pilot and have enough data for analysis. It should be outlined that the decision to implement the pilot was made in cooperation with MoH, WHO and PwDs themselves, which indicates the participation of different stakeholders in the process. As an unintended result of the process, a special instrument was developed on how to make the functional assessment online. This was the result of the COVID-19 outbreak, as specialists started working online.

The second dimension was to assess the current monitoring process of disability assessment and propose a concept of the supervision and monitoring of the suggested model. The responsible regulation is the department regulation under MoH. The analysis of the monitoring process aimed to see to what extent the monitoring process considers the human rights approach and include respective recommendations. The findings of the review of the monitoring process analysis were shared with the MoH.

The issues of human resources are also important to conduct the biopsychosocial assessment and status determination of PwDs. Currently, the medical model assumes that status is determined only by a medical doctor and s/he only decides whether to grant the PwD status or not. Around 70 hospitals and special doctors within hospitals are eligible to grant status. The requirements for granting biopsychosocial status based on the social and functional assessments are different. It requires the involvement of two other specialists, the social worker (case manager) and functional assessment specialist, in the process. The Georgian education system does not provide for the education of functional specialists. As regards the social workers, there are universities providing education in social work however they do not prepare the social workers to be eligible to provide a disability assessment. Therefore, it is obvious that when the government approves the biopsychosocial model, the issue related to human resources will be problematic. The JP worked on this issue. First, it analysed the education system and outlined the lack of functional assessment specialists. Furthermore, the JP developed a document where the necessity of special certification courses is elaborated/underlined. The certification courses will be based in the university and will prepare functional assessment specialists and social workers eligible to conduct the biopsychosocial assessment. Further processes are required to properly establish these certification courses and make them effective/operational.

At an initial stage the functional assessment questionnaire was adapted and finalised. This instrument was developed by WHO and is used all over of the world. However, the instrument was finalised taking into consideration the local context. Moreover, through the involvement of UNFPA, the instrument was adapted and gender issues were incorporated to better accommodate the needs of women with disabilities. The Georgian Association of Social Workers (GASW) was leading this process. The pilot was negatively impacted by COVID-19. Due to several lockdowns, it was not possible to conduct the functional assessment offline. However, the implementing partner ensured that the functional assessment was conducted online. Later, when it was possible, the functional assessment was conducted offline. The process and its success were proved by different stakeholders involved in it, particularly by the MoH. As a result, the functional assessment tool as well as other assessment tools were finalised and handed over

to MoH. It should be noted that MoH was actively involved in the pilot process and has a high degree of ownership of the developed documents.

Another important document created under output 2 was the concept note on granting disability status based on functionality and social needs. The document will be the guidebook for specialists on how to use the social and functional assessment to make appropriate decisions regarding the needed services and disability status. In the current system the decision is made by a doctor, hence it is important to have a vision of how the multispecialty team should make decisions based on the agreement.

Children with disabilities require special assessment in the status determination process. JP ensured that this assessment document was prepared and handed over to the MoH.

The JP worked on the assessment of the law that determines disability status. The assessment showed that the law is based on the medical model and is in conflict with CRPD and LRPD. It concludes that the new law based on the biopsychosocial model should be developed.

Based on the LRPD law the MoH should approve a roll-out plan on how to transform the existing model into the social one until the end of 2023. JP in cooperation with MoH elaborated this draft rollout plan. The document considers further activities needed to establish the biopsychosocial model. However, the document is a draft and needs further modifications as revealed by the KIIs with representatives of MoH. It is expected that the rollout plan will be approved by the ministry by the end of 2023.

The abovementioned activities and documents indicate that JP enabled the production of evidence-based documents with which the government can start the transformation process of the current model into the biopsychosocial one. These documents represent a solid basis to continue and complete the process. However, the transformation process still needs further support to achieve its goals. Analysis shows that there is a need to conduct an assessment about the cost of the social and functional assessment for the government. It will be difficult to make policy decisions without this cost estimation. In the beginning, we outlined that the establishment of the biopsychosocial model is based on two pillars – the social and functional assessment and social services. The analysis shows that JP contributed very effectively to making a significant analysis of the social and functional assessment process. However, there weaknesses in the dimension of social services. Thus, future activities are required in this regard.

Moreover, UNICEF hired an expert to conduct the determination of the biopsychosocial model of the disability status cost analysis. A concept note was prepared and sent to the ministry. However, further detailed cost analysis is required for the establishment of the system

For the further development of the biopsychosocial model, it is important that the target groups, namely PwDs and OPDs, are informed about it and participate in the process. JP organized several awareness-raising activities to increase knowledge of the model within PwDs and OPDs. Moreover, the ongoing process of model pilot results were discussed through the UNICEF disability advisory committee and the council of PwDs under the MoH, which ensured that the process was participatory.

A Disability Advisory committee was established under the JP to consult on issues related to the transformation of the disability assessment and status determination system. The committee included PwDs, heads of ODP associations and two children with disabilities. The committee has had monthly meetings since its establishment and members were involved to reflect critically on the products developed under Outcome 2. The committee was very active in making recommendations. For instance, committee members, particularly PwDs, requested to be assessed by themselves in the social and functional assessment process. When they participated in the process, they developed special



recommendations for the improvement of the process. The establishment of the committee ensured that target groups were involved in the process and their participation was high.

When we are discussing the effectiveness of activities under the output 2.1. we should consider that various important documents were developed, and stakeholders were actively involved in the process. However, most of the documents are drafts and have the recommended status within the MoH. The KIIs with representatives of MoH revealed the ministry is very satisfied with the work done under the programme. It acknowledges the crucial necessity of these documents. However, for further strengthening of the process, there is the need to advocate for the approval of these documents. While assessing Output 2.1. *Gender sensitive disability and status determination system transformed based on the social model*, it should be outlined that on the programme design level, the current situation was assessed with a relative optimism, and the timeframe needed to transform the system into social model required more time and resources. Hence, the output can be considered achieved, however further support and intervention is required to ensure that suggested models are institutionalized and the sustainability of the programme results. While designing a similar programme, the output level must be more realistic.

### Social Services Related to PwDs

The JP analysed the social protection system in Georgia for children with disabilities to identify gaps and ways for improvement. These activities were performed under Output 2.2. *Systems strengthened to enable quality integrated services for PwDs, including revised social system entitlements, especially for children, women and young people*. An overview of activities related to the system entitlement costs was focused on children with disabilities, and was less focused on adults with disabilities.

At the initial stage of the assessment research was conducted to map the services for social protection of children with disabilities. Different services were provided on the national level than on the local level,. There was no knowledge of how much the government spends on children with disabilities. As a result of the assessment, the social protection system towards children with disabilities and related governmental costs were assessed. As was revealed during the KIIs, some cost assessments are approximate as in many cases it was not possible to separate children's disability costs from overall disability costs. However the assessment describes the main tendencies.

Based on the assessment, an international expert who developed two important documents was hired. The first one reviewed social protection services in Eastern European countries and compared them with the Georgian situation. The document made recommendations on what kind of services could be developed in Georgia.

At the same time, JP started unique research about goods and services required for children with disabilities. The research is complex and aims to provide an analysis on the family level:

- a) what services the children with disabilities are receiving;
- b) what goods and services they are not able to receive at the family level;
- c) what are the costs of services and what are the costs of the required goods and services.

Overall, the result of the study will reveal what services and goods children with disabilities receive and what will their cost will be. Due to the complexity of the research, it lasted longer than expected. International UNICEF consultants were involved in the process in close collaboration with the local implementing partner. The research will be finalized until the end of the project. It will play an important role in further policy planning.

As a result of the research, the final document was prepared by JP and UNICEF prepared the social protection package. The document provides 7 different packages that should be provided for children with disabilities and the cost of each package. The package was finalized at the end of the project. It was discussed with different stakeholders and governmental bodies. As revealed from the KIIs the governmental bodies liked the package too, however, further steps and advocacy campaigns are needed so that the government approves the packages.

The analysis of activities indicates that the cost entitlement system conducted for children with disabilities is necessary to conduct for adults with disabilities as well.

### Activities to improve state of Women with Disabilities

Women with disabilities face different challenges around the world and in Georgia as well. As the KIIs conducted during the fieldwork revealed, women with disabilities face cultural stigma, social pressures, gender-based violence (GBV), and a lack of sexual and reproductive rights (SRHR). Therefore, particular policy changes are needed to improve the state of women with disabilities in Georgia. UNFPA, under her mandate and experience, contributed to improving the conditions of women with disabilities in three different dimensions. These are capacity building of women with disability network, initiation of policy changes on GBV for women with disabilities, and SRHR. In this regard UN Women contributed to three separate but closely interlinked objectives: a. strengthening capacities of CSOs on gender, disability and evidence-based advocacy; b. raising awareness on intersecting forms of discrimination faced by women and girls with disabilities as well as their important contribution to the society and c. improving availability and analysis of data from gender and disability perspective.

### Women with Disability network

A relatively newly established network of women with disabilities required capacity building, and further strengthening in advocacy and lobbying to be heard by decision-making bodies in Georgia. In this regard, special trainings were conducted with the representatives of the network. The trainings were conducted in two main dimensions. The first aimed at enhancing the knowledge on GBV and SHRH rights, while the goal of the second dimension was to enhance communication and public presentation skills for the network members. Additionally network strategy was developed with the support of JP.

As revealed from the KIIs with network members, at the initial stage they were sceptical as to whether there was a need for such trainings. However, after participation in the trainings, they really felt they had more knowledge and skills in the abovementioned directions. As a result of the training they are more capable to advocate for their SHRH rights and GBV. Moreover, they are more confident when making public presentations and can effectively communicate with the wider society. There is a further need to research whether the trainings will help them in future activities. Also, there is the lack of pre-post test training knowledge assessment data to make conclusions on the effectiveness of the trainings. However, the satisfaction of training participants indicates the effectiveness of the training. One result of the activities is that the network becomes a member of the *European Network on Independent Living*

(ENIL). Through these mechanisms, the network will be able to have direct communication with the ENIL members, access the newest information related to the sector, and better solve the problems of women with disabilities in Georgia.

#### Capacity development and platform of women's organizations and disabled persons organizations

To strengthen cooperation between organizations working on the rights of women with disabilities and the empowerment of women, a platform of organizations working on the rights of women and women with disabilities in Georgia has been established. It unifies around 30 organizations throughout the country, including organizations working on gender equality and women's empowerment and organizations working on the rights of women with disabilities; primarily, organizations led by women. The primary objective of the platform was to foster dialogue on the rights of women and girls with disabilities and importantly, to make the rights of women with disabilities an integral part of women's rights agenda. Within the framework of the JP, a series of capacity development trainings on gender and disability, advocacy and research have been provided to the members of CSOs united under the platform reaching up to 200 women, including 100 women with disabilities.

#### GBV and Women with Disabilities

One dimension to discovering violence against women with disabilities was to work on the questionnaire/assessment tool of social workers. The questionnaire was adapted and included questions on violence against women with disabilities. Three particular guidelines were developed in this regard. Afterward, a number of social workers were trained on how to use the guidelines. It is worth noting that the social workers lacked the knowledge to work on the issues related to women with disabilities. Hence, it was essential to train them. Further research is needed to assess the extent to which the social workers use these guidelines. However, based on the observation of the evaluation team, further capacity building of social workers is required in this dimension.

The second dimension was to elaborate the National Referral Mechanism on Gender Based Violence and Violence Against Women. Special issues of women with disabilities were included in the referral mechanism. The document is submitted to the human rights secretariat of the government of Georgia.

The programme was worked actively with MoH. The issue was to integrate rights and needs of women with disabilities in the SOP on health response to GBV for women with disabilities. The issue is new for doctors therefore it was important to facilitate discussion and have SOPs and procedures for the doctors. As the SOP is relatively newly established it is difficult to discuss the extent to which the doctors use this regulation at this time.

JP worked actively with the Ministry of Internal Affairs (MIA), in particular a special document was prepared on how to involve effectively PwDs in the investigation process. The document reflects the special needs of PwDs and ways to include them actively in the investigation process. Further, a monitoring process is needed to assess the extent to which the investigators use the guide book. Additionally, the document became an integral part of Police Academy curriculum.

#### SRHR and Women with Disabilities

As revealed from KIIs, there is a huge stigma regarding the SRHR of women with disabilities. Even doctors such as psychiatrists and gynaecologists lack relevant knowledge in this regard. JP worked in this dimension. and made an important achievement.

First, the SOP for family planning was elaborated for women with disabilities. The SOP overviews and presents all important information regarding family planning that should be considered for women with disabilities. A relevant document the standard operational procedure on antenatal supervision for WwDs was prepared and was approved by the MoH. The project worked to increase the awareness of gynaecologists about the SOP. In this regard, 5 one day trainings were organized in five regions of Georgia. The FGD with gynaecologists trained revealed that the training was useful to develop knowledge on the subject. However, it was also revealed that there is a further need to increase knowledge and capacity in this direction. The second target group that was trained was psychiatrists. The training was organized in cooperation with the Ombudsman Office. Due to COVID-19 lockdown, the training was organized online during three days. As revealed from the FGDs with psychiatrists, the offline trainings and more knowledge is necessary to increase the capacity in this direction.

To increase the knowledge of gynaecologists on SRHR issues for women with disabilities, UNFPA, Ombudsman Office and the State Medical University initiated cooperation (TSMU). This is the first attempt when OPD and TSMU cooperated with each other. As a result, the special accredited and free online course was developed on the issue. All gynaecologists in Georgia should receive 30 credits each year to get the license to operate. As a result, 159 doctors completed the online course successfully. One hundred fifty-five of them were gynaecologists and four family doctors. These numbers indicate that a significant part of gynaecologists increased their knowledge, and there is a resource based on which the future capacity building of gynaecologists is possible.

To summarize, the assessment revealed that there were important bases established that ensure that the GBV and SRHR issues for women with disabilities are better presented at the policy level. This is proved by the developed guiding documents which started the capacity building of the target groups, etc. However, these are the first essential steps made at the policy level. There is a further need to increase the capacity of the target groups working on the issue. Training of social workers, gynaecologists, and psychiatrists should continue, and the monitoring mechanisms on how the developed documents are used need further monitoring.

### Strengthening Local Municipalities on PwDs issues

The role of municipalities is important for service delivery for PwDs. The new LRPD also emphasizes that the role of local municipalities should increase and the process of decentralization of the services should be facilitated.

UNDP contributed to enhancing the capacities of the local municipalities in this regard. The first area of intervention was the municipal councils on disability issues. The law requires the local municipalities to establish municipal councils on disability issues. These councils were established, however, based on the Ombudsman's reports and there was a lack of competence among council members about the role of the council, and the responsibilities and goals of the councils. Additionally, it was perceived as additional work. Therefore, with the cooperation of UNDP with the ombudsman office, the capacity-building training of these councils was planned. Initially, it was planned to conduct training in each municipality of Georgia. However, due to COVID-19 and related restrictions, trainings were conducted in 17 municipalities . The

training aimed to explain the role of the councils, budgetary planning issues, and other related topics. During field work, the KIIs in the region revealed a need for further capacity development of local municipality councils. Further research is needed to measure the effectiveness of the training. However, as a result of the training, the quality of the annual action plans increased, and some municipal representatives had informal communication with the trainers on the annual planning documents.

The second dimension of the work with municipalities was universal design issues. The municipalities are responsible for including a universal design approach in their infrastructural planning. However, the knowledge and requirements of the universal design were relatively low among municipalities. To bridge this gap, the UNDP team recruited a team of architects and started online trainings of local municipality representatives. The training was composed of two parts. The first was about the main principles of the universal design, while the second covered the concrete universal design approach in schools and kindergartens, etc. Around 300 participants were trained. Further research is required to measure how the municipalities started using gained knowledge in practice.

The third important direction was work with two selected pilot municipalities, Shuakhevi and Akhaltsikhe. In these municipalities activities focused on the analysis of social services delivered by the municipalities and ways of improvement. During the project span an expert on disability issues was working very actively with the representatives of abovementioned municipalities. The KIIs conducted within the municipal representatives indicate that cooperation with the expert was very effective. Particularly, civil servants significantly increased their knowledge of disability issues. Their attitudes also changed and they used the gained knowledge in the planning process for social service delivery.

Moreover, important documents were created for the target municipalities during the trainings. At the first stage, the needs assessment document for developing social services by municipalities was developed. A service and programme handout for PwDs was developed. A document on how to monitor social services was also elaborated. Thus, in the targeted municipalities, the intervention increased the capacities of the local staff. Furthermore, the KIIs revealed that the trainers actively cooperated with the local staff. They have access to an expert when they require expertise beyond their capacities. There are some unintended results of interventions, for instance in Aklatiske municipality, with the support of the programme expert, one NGO increased their skills to establish a day centre. The staff of the NGO is certified and they advocate for space from the local municipality to strengthen the day centre operating now in the office of one other local NGO.

The process is ongoing, and there is an expectation that the municipality will give an office to the NGO. The role of the representatives of the JP was important to increase the capacity of this NGO. The same is observed in Shuakhevi municipality. There is one day centre that serves 15 children with disabilities. The day centre staff acknowledge the importance of the trainings they received with the support of the joint programme. In both municipalities, the respondents indicated that COVID-19 had a negative influence on the programme; however, the implemented activities effectively increased the local capacities of municipalities.

### Social Inclusive centres

Ambrolauri Municipality is located in the mountainous part of Georgia, in the Racha-Lechkhumi and Kvemo Svaneti regions. There are around 90 PwDs registered in the municipality. Different research on PwDs in Georgia indicates that the PwDs in rural areas and mountainous part of Georgia lack social services compared to urban areas. Therefore, the establishment of a day centre for PwDs was important especially in this municipality. Within the framework of JP, UNDP, in cooperation with the non-

governmental organization “Together for Real Changes” started working on the establishment of PwD centre at the municipality.

UNDP and the abovementioned non-governmental organization started negotiations with the local municipality. As a result, the municipality provided the building to the NGO. With the financial support of UNDP, the building was renovated and could serve 9 PwDs. The programme contributed to training three employees for the service centre, however an additional three people were also trained by the programme. Moreover, the programme procured a special vehicle to provide transportation. KIIs conducted with local municipal representatives revealed that the centre has become an important place to improve the quality of life for local PwDs. Currently, there is ongoing work to renovate the second part of the building, and when it finishes, the centre will be capable of serving more PwDs.

The centre provides different entertainment activities for PwDs. The library of the village is located in the same building and PwDs have the possibility to use the books from the library. Some cultural events are implemented where local children and elderly persons are involved, for instance, the evening of the poetry, etc. In the long term, these activities reduce the stigma toward PwDs in local communities.

Besides entertainment activities, the construction of a greenhouse is completed. The PwDs will work in the greenhouse and participate in art therapy. The future idea is to establish a social enterprise and sell agricultural products from the greenhouse. A memorandum of understanding was signed between a non-governmental organization and local municipalities. Based on the document, there is room to increase the municipalities' role in the day centre operation.

The second social inclusion centre was established in Khobi Municipality. The building for the Social Inclusion Centre was also donated by the local Government and was renovated and adapted for greater accessibility. The centre provides different activities for beneficiaries, including vocational courses.

UNDP also issued a grant for an NGO in Abkhazia, Asarkiali, to renovate and equip a rehabilitation centre for children with disabilities. The centre provides rehabilitation as well as socialization space for children with various forms of disability, including mobility disability, language-based learning disability, Downes syndrome and autism.

#### Cooperation with High Educational Institutions (HEIs)

The case of the inclusion centre is significant and directly influences the PwDs targeted by the program. From a long-term perspective, it also enables the integration of PwDs into the community.

To summarize, important capacity-building activities were conducted to increase the capabilities of the staff of local municipalities on the issues relevant to PwDs. The intervention was made on the level of PwDs in municipalities; however, further capacity building in municipalities is required. In two target municipalities, the staff was trained, the social policy services were analysed, and further training was organized to strengthen the staff working on PwD issues. Furthermore, with the active involvement of programme experts, the capacity of day centres increased. The inclusion centre in Ambrolauri municipality has a direct positive impact on the lives of PwDs in the municipality; it supports the integration and visibility of PwDs at the community level.

Effective cooperation was established with HEIs. Particularly BA and MA curricula have been developed that incorporate principles of universal design. The idea of curriculum development and integration into the HEIs learning programme was a novelty for the Georgian academic system. The severe lack of infrastructural accessibility of PwDs largely comes from low awareness and poor technical knowledge, which nourishes the wrong stereotypes of costly adaptation and widely accessible infrastructure.

### 4.3.3. Achievements at 3 Outcome level

The programme has targeted newly emerged needs of PwDs during the pandemic through the activities implemented by 4 UN agencies (UNICEF, UNDP, UN Women and OHCHR) each covering 4 different outputs.

#### Dissemination of information for PwDs

The Government of Georgia was supported to ensure that PwDs have full access to accurate and timely information related with COVID-19 (symptoms, preventive measures, regulations, etc.). For this purpose, the programme supported adaptation of national information campaign on COVID-19 to the needs of persons with different types of disabilities through the videos with subtitles and translations into sign languages. This appeared especially important for PwDs with hearing impairments, as they were lacking information about sanctions, regulations, and penalties imposed during pandemic. In addition, special video guides and brochures/flyers in easy read formats were prepared for the PwDs with psycho-social needs.

Besides, relevant content for PwDs, CwDs and their parents on how to handle behavioural and emotional challenges was formulated and disseminated through various digital platforms. This included:

- Online platform “Mshoblis Skivri”<sup>26</sup> (in translation – “Parent’s Bin”), which was created in April 2020, followed by 32k Facebook users and still functional. The page is distinguished with a number of insightful infographics, videos, posts and live discussions and consultations on various topics for parents in general, especially targeting the CwD parents. Besides, the platform has offered free distance consultations by different professionals, including psychologists/neuropsychologists, therapists (occupational, linguistic), etc. The page has multiple positive reviews and active engagement.
- TV programme “Mshoblis Dgiuri” (in translation – “Parent’s Diary”) for CwD parents broadcast 10 TV shows on how to take care of children with disabilities during COVID pandemic and in general.
- Online platform “Sheaghe”<sup>27</sup> (in translation – “Open”) which enables users to find organizations that serve people with disabilities and provide social, healthcare, educational, legal, employment and other types of services and support. The webpage (sheage.ge) is linked to a map showing service providers throughout Georgia, with their exact address, contact details and detailed information about the service. Besides, the webpage provides detailed information about various developmental disorders in simple language, including description of the signs of each disorder, the underlying causes, diagnostic issues, intervention strategies, recommendations, and other information. As for the Facebook page, it has 1200 followers with less content shared, with comparatively passive engagement of users (according to number of likes and comments) with the last information posted in February 2021. As it seems, “Mshoblis Skivri” Facebook page was used more actively for sharing the information on different services. Due to much higher number of followers of the latter, this can be assessed as an effective attitude.

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<sup>26</sup> <https://www.facebook.com/mshoblisskivri>

<sup>27</sup> <http://www.sheaghe.ge/>; <https://www.facebook.com/sheaghe/>

In addition, small grants were distributed to women's CSOs to support awareness raising of PwD women regarding available services. Specifically, the JP has contributed to the Rapid Response and Women's Solidarity Grant Program - COVID-19 together with the UN Women component of the Regional UN Joint Programme "EU 4 Gender Equality Programme: Together against Gender Stereotypes and Gender-based Violence" supported by the European Union. Small grants were disbursed by the Women's Fund in Georgia to organizations or women's groups working in different parts of Georgia. The projects included support to women with oncological diseases to overcome impacts of COVID-19, reduction of stress and psycho-social support to survivors of domestic violence in conflict affected Shida Kartli region, support women entrepreneurs from Adjara's rural regions to address COVID-19 imposed challenges, support to women belonging to ethnic minority groups (Yezidi, Azerbaijani) to overcome intersectional isolation caused by ethnic identity along with gender.

### Support accessibility to distance services

In order to ensure permanent provision of services for children (<18) with disabilities and/or developmental risks during the pandemic period, the format of services went into a distance mode for several months. However, since there was a lack of such experience in the country, the service providers, as well as beneficiaries and their families appeared unprepared for these circumstances.

In September 2020, a survey of parents receiving distance services was carried out among 30 parents. The survey depicts some interesting findings and recommendations. However, it cannot be considered representative and results cannot be generalized due to the limited sample size and presumably limited detail of different criteria (like geography/place of residence, social vulnerability, types of services, etc). However, the qualitative value of the survey allows the identification of the challenges related with distance services in general is considerably higher than its quantitative side, which might be misleading in particular cases.

As well, the programme supported development of the concept of social rehabilitation distance services for children (<18) with disabilities and/or developmental risks, which was drafted in cooperation with the Ministry of Health and approved by Ministry Order<sup>28</sup> in November 2020. Besides, consultation meetings were carried out with different types of service providers.

As mentioned above, different online platforms supported dissemination of information regarding available services and relevant providers.

In addition, particular PwD institutions and facilities were supported with distance supervisory and psychosocial services. Specifically, activity focused on: 1) prevention of professional burn-out of those who stay at mental healthcare institutions/facilities and provide frontline care; and 2) capacity building for those who are not locked-down and could provide distant mental health and psychosocial support to colleagues and co-workers, and also to persons with special needs (psychologists, social workers, nurses, etc). In the framework of the first activity 215 staff members from the facility for people with special needs attended consultations (from Tbilisi, Kutaisi, Dusheti, Dzevri, Martkopi), with 40 consultations in total (8 consultations in each institution). As reported, consultations were lively, interesting, interactive, useful and timely for personnel during the pandemic and lockdown. As for the second part of the activity, only 4 psychologists and 3 social workers (7 in participants in total) attended the sessions (4 hours in total - 2 hours during 2 days), however, as explained by the representative of respective sub-contracted

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<sup>28</sup> <https://www.moh.gov.ge/uploads/publicinformation/2020/11/10/0ea2c502499be0e104d1174d18d727c1.pdf>



organization (Global Initiative on Psychiatry – Tbilisi), lack of participation was caused due to a limited number of psychologists and social workers in mental healthcare institutions/facilities. It should be noted that the activity paved the way for the next larger project funded by the European Commission, which has been implemented since 2021 and includes training/capacity building courses for primary healthcare personnel. The follow-up project supported provision of the psychosocial assistance for the country population during 9 months. This was emphasized as an unexpected positive result of the JP implementation.

### Guidelines and Protocols

The programme has worked closely with the Ministry of Healthcare, Society of Georgian Psychiatrists and the Global Initiative in Psychiatry-Tbilisi to develop specialised protocols and guidelines for the medical personnel of mental healthcare providers to ensure readiness for the COVID-19 crisis and protection of patients and personnel from the virus.

As a result of this support, the Ministry of Health has adopted and approved the following documents with the Ministry Order issued on May 27, 2020<sup>29</sup>: a) Mental health and COVID-19 - National Clinical Practice Guideline (1)<sup>30</sup>; b) National standard/protocol on safe patient management in mental health outpatient services during COVID-19 (2)<sup>31</sup>; c) National standard/protocol on safe patient management in mental health in-patient services during COVID-19 (3)<sup>32</sup>.

As well, the programme developed recommendations on hospice and palliative care during the COVID-19 pandemic, which was shared with the Ministry, hospitals and long-term care facilities. A guide on freedom of expression for PwDs and media coverage was also developed.

During the evaluation interviews, program support in development of above-mentioned guidelines and protocols was highlighted as very timely and useful by the representatives of the Ministry of Healthcare.

### Assessments, Reports, Monitoring and Mainstreaming of PwD needs

To ensure mainstreaming of the rights and needs of women and girls with disabilities during COVID-19 response measures undertaken by the Government and other development partners, the program conducted a Rapid Gender Assessment (RGA) of COVID-19 in June 2020, with a special focus on women and girls with disabilities. RGA analysed the impact of the pandemic and main challenges faced by women and men in Georgia and assessed the situation and needs of women and girls with disabilities and women caregivers of disabled persons. The report includes interesting and useful findings and conclusions, however no separate chapter of recommendations is presented in the report, which could limit the possibility of using the findings in COVID-19 response planning by the Government and also restricts the evaluator to conduct follow-up work. Although the Report on Measures Implemented by the Government of Georgia against COVID-19<sup>33</sup> states several measures undertaken in this regard. Particularly, in order “to mitigate increased risks of violence against women and domestic violence, the GoG has adopted the Communication Strategy on Violence against Women and Domestic Violence during the COVID-19 Crisis. The strategy was developed in partnership with local and international partners and implemented throughout the crisis to ensure access to information and alternative ways of reporting domestic violence.

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<sup>29</sup> <https://www.moh.gov.ge/uploads/guidelines/2020/05/28/e0fcf577c92bdab2b82d9556def7e52f.pdf>

<sup>30</sup> <https://www.moh.gov.ge/uploads/guidelines/2020/05/28/6abb3434c476d929571ae57d4b02ec7b.pdf>

<sup>31</sup> <https://www.moh.gov.ge/uploads/guidelines/2020/05/28/db351266abf59be2a4cfb63902485893.pdf>

<sup>32</sup> <https://www.moh.gov.ge/uploads/guidelines/2020/05/28/ec9676a8bf7a457c9d4c5389a20d634f.pdf>

<sup>33</sup> [https://stopcov.ge/Content/files/COVID\\_RESPONSE\\_REPORT\\_ENG.pdf](https://stopcov.ge/Content/files/COVID_RESPONSE_REPORT_ENG.pdf) (page 43)

The Ministry of Internal Affairs continued regular and proactive responses to cases of violence against women and domestic violence. Although the number of such cases did not increase during the crisis, the Ministry of Internal Affairs took special measures to develop a new methodology for detecting and responding to domestic violence cases. Moreover, the state ensured non-stop access to free services for survivors of domestic violence, such as crisis centres and shelters.” Also, it is worth mentioning that the first RGA led to implementation of the second wave of the assessment in October 2020, which was financed outside the JP. The latter similarly lacks recommendations.

Further, the programme supported the conduct of a rapid assessment survey on “Mental health impact of COVID-19 in Georgia” by the National Centre for Disease Control (NCDC) and Global Initiative in Psychiatry. Based on the assessment survey, high levels of mental disorders were recorded among the population, which were strongly associated with increased concern about COVID-19. Similarly, to the RGA, it is difficult to judge the extent of practical use of the survey findings in COVID-response measures.

Another study was carried out in late 2020, which aimed to assess the compliance of human rights restrictions imposed by the GoG in the course of fighting the pandemic with international and European human rights standards. The report includes analysis of the proportionality of particular measures/sanctions and respective recommendations to balance compliance with emergency needs as well as effective protection of human rights. Furthermore, in 2021 the study of PwD rights during the pandemic was produced and this report analysed the situation of PwDs in different areas during the pandemic (including access to healthcare, education, social services, employment, etc.), in comparison with relevant national legislation and international standards. The programme has conducted focus group meetings with PwDs and OPDs aiming at validating the findings of the reports, which is an effort to ensure a participatory approach during implementation. As was discovered during the evaluation interviews, both reports were a subject of interest of the GoG for further consideration and use of recommendations, however, after changes in the GoG team (resignation of the Prime Minister followed by resignation of particular persons holding top management positions at the GoG), such interest seemed to be reduced.

In addition, the programme supported monitoring of the situation of PwDs in light of the pandemic. The OPD has conducted monitoring of ambulatories and psychiatric facilities to check on problems and needs of PwDs related to COVID-19. The monitoring report has identified a number of issues (including infrastructural and other) and developed recommendations that were presented and shared with the MoH and other relevant stakeholders. The MoH has provided feedback on these recommendations. According to the PDO, follow-up monitoring has not taken place, however the claims from patients and/or their caregivers have not been registered either. It can be concluded that this activity has supported mainstreaming of PwDs’ needs in COVID-response measures to some extent, however it seems to be an ad hoc activity rather than a systematic and institutionalized mechanism to monitor and protect the rights of PwDs in response to COVID-19 adverse effects.

### Technical and Vocational Education and Training (TVET)

In order to mitigate the negative social and economic impact of the pandemic on PwDs the programme has offered online vocational education courses for PwDs in practical professions. A small questionnaire was developed and sent to the PwD community in order to identify the areas of interest in TVET. It is worth highlighting as another example of participation of PwDs in programme activities. Finally, 3 vocational education courses were selected and launched based on the Memorandum of Understanding concluded with the Administration of the Government of Georgia and the Ministry of Education, Science, Culture and Sport of Georgia. As a result, 19 PwDs graduated from 3 different courses and obtained diplomas. The evaluation team was provided with short personal stories written by three graduates, which clearly reveal that this activity was significant for participants not only in terms of increasing their

knowledge and opportunity for employment, but it had been an important psychological and emotional support strengthening their self-confidence and sense of social inclusion. As no follow up/tracing has been carried out by the programme regarding the job placement or other type of use of the training knowledge among the graduates, evaluation is incapable to judge the effectiveness of the course in terms of increasing their employability.

#### 4.4. Efficiency of project implementation

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- *How efficiently have the JP been managed in terms of its human / financial resources and organizational / governance structure?*
  - *How efficient was coordination among agencies?*
  - *Was the JP intervention more efficient in comparison to what could have been done through a single agency intervention?*
  - *To what extent did the JP contribute to enhancing UNCT coherence and UNCT efficiency (reducing transaction costs)?*
  - *What are the comparative strengths of the joint programme in comparison to other social protection programmes?*
  - *What are the comparative strengths of the coordination and convening roles of the joint programme?*
  - *What are the comparative strengths and added values of individual agencies in the frames of the programme*
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JP was implemented by six UN agencies. UNICEF was the convening agent while RCO had a coordination role between the agencies. Each agency had a responsible person for implementation of the programme. A steering committee (SC) was established in the beginning of the programme. All main stakeholders were members of the SC. During the project, the SC met twice to take important decisions. However, as the JP had important and different directions, more frequent meetings of the SC would be more beneficial.

The total budget (including 7% indirect support cost) was distributed among six UN agencies (UNICEF – 30.4%, UNDP – 29.5%, and WHO, OHCHR, UN Women, UNFPA – around 10% each). The annual revisions did not reflect on total originally approved budgets of agencies, but rather redirected the costs between budget lines of different outcomes and outputs. In 2020 funds were deducted from Outcomes 1 and 2 and redirected to the newly added Outcome 3. Further budget revisions in 2020 and 2021 are characterized with a slight shift of financial resources between the budget lines. In the table 5 total budget and budget by agencies are presented.

*Table 5 - SDG budget by agencies and revision periods*

Analysis of budget revisions by subcategories shows that contractual services, transfers and grants to counterparts and general operating costs were increased mainly at the expense of reducing travel and staff/personnel costs. The costs from the categories of supplies/commodities/materials and equipment/vehicles/furniture were also significantly reduced. Such revision in the budget can be deemed as an indication of a cost-efficient planning/management effort.

Evaluation is limited to reflect on actual expenditures due to the fact that not all implementing agencies provided data on financial expenditures in the requested format, thus it was not possible to calculate the total actual costs.

Coordination within the UNCT JP implementing agencies was mainly through e-mail correspondence. Representatives of agencies sometimes met each other online or offline to exchange information. However, as revealed during the KIIs, more frequent meetings and active exchange of information between agencies could enhance the success of the programme. There were no formal/written rules about coordination among the agencies. Written coordination rules will be beneficial in future joint programmes, to ensure the greater efficiency of the programme.

Based on the review of documents and KIIs with implementing agencies and their subcontractors, the evaluation can conclude that JP management has been flexible and adaptive to emergent needs and changed circumstances. The respondents highlighted their flexibility in adjusting the programme activities and re-allocation of financial resources.

Progress reporting on project intervention was in line with the requirement/templates of the SDG Fund. Thus, annual and semi-annual reports were prepared accordingly. UNICEF was responsible for developing final reports, where results of activities of different agencies were included. As revealed from the KIIs with the implementing agencies, requested format/template of progress reports required rather concise reporting and did not enable to include the detailed information on implemented activities, which limited the ability of implementing agencies to document and report on achievements fully. The brief and summary format of the reports has been a particular hindrance for the evaluation process as well, since the reports lacked the necessary details about implemented activities and it was challenging to reconstruct the information related to programme activities from verbal interviews with implementing agencies and their sub-contractors and stakeholders.

The progress monitoring of programme activities was conducted by programme staff from relevant agencies. During annual reporting the information on key indicators was updated and reflected in the reports. However, there was neither a separate position for the programme Monitoring Specialist considered, nor were unified (common for all implementing agencies) monitoring approaches and tools in place. This has resulted in a lack of regular monitoring reports/data. At the evaluation stage, the lack of monitoring data hindered certain evaluation processes. For instance, there was no information available about pre/post test results of the trainings to discuss the achievement of the training. The lack of monitoring data reports made it difficult to reflect on activities that were delayed, changed, or otherwise altered.

The programme timeframe was updated and the third outcome related to COVID-19 was added and the budget also was updated accordingly. A special letter was sent to the Steering Committee and the donor and changes were approved. COVID-19 had a negative impact on the implementation of projects. Some activities were delayed or stopped. However, the programme team used adaptive management and continued implementation of the programme. Trainings were conducted online and some meetings were also held online. Even special instruments were developed to make functional online assessment of PwDs. The programme workplan was developed and updated once a year. The workplan included all main activities planned within JP.

JP was very efficient especially considering the complex issues that were targeted related to improving conditions of PwDs. Different UN agencies with special expertise contributed in line with their expertise to improve conditions of PwDs. This was a comparative strength of the programme. If the programme was implemented only by one UN agency, it would not be possible to address all different problems that the PwDs face. In this regard, the JP was very efficient.

As already mentioned, each agency operated according to its expertise. For instance, UNICEF was working on the transformation of the biopsychosocial model, UNFPA was working on the SRHR and GBV issues for women with disabilities, etc. This ensured that each UN agency's experience contributed to the high level of performance under their mandate, which positively influenced the program's strengths and added value to its successful implementation.

Each UN agency had a focal point responsible for the implementation of the JP, although other staff of each agency supported the focal point to implement activities in case of need. During JP implementation international and national experts were recruited to conduct particular activities. As revealed during the interviews with implementing partners, priority was given to national experts to ensure that the best practices and international standards on PwDs are adapted taking into account national specificities. Moreover, agencies cooperated with organizations working on disability issues, women's empowerment, economic development etc. This enabled the production of high-quality reports on different dimensions.

## 4.5. Sustainability

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- *To what extent has the strategy adopted by the JP contributed to sustainability of results, especially in terms of LNOB and the social protection system?*
  - *To what extent has the JP supported the long-term buy-in, leadership and ownership by the Government and other relevant stakeholders?*
  - *How likely will the results be sustained beyond the JP through the action of Government and other stakeholders and/or UNCTs?*
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### Sustainability of Legal Framework and policy environment

This evaluation determined that the Joint Programme managed to: a. sustain the cohesiveness of past interventions by the UN organization, b. achieve set targets that will be sustained in time, and c. create deliverables for future legal and policy transformations.

Firstly, the report will distinguish changes in PwD rights legal guarantees that were indirectly or partially contributed to by the programme and can be sustained in the future:

- One of the major achievements that is a culmination of multiple year advocacy process by different UN organizations relates to LRPD adoption in July 2020. This is a national level transformation that translates CRPD principles and obligations in domestic legislation and improves the legal and policy environment for PwDs in Georgia. The law will have further effects on policy planning and implementation as it requires all state institutions to create annual PwD Action Plans and pursue their implementation. The law has also created specific timeframes for different reforms (including one on PwD social model assessment) which is a solid guarantee for a positive dynamic to be sustained in policy areas in the future. Additionally, LRPD bears strong potential for PwD rights to improve in Georgia using different litigation methods, as it helps PwD

rights defenders to change abusive practices in Georgia that are in violation of PwD rights by resorting to national courts. Most importantly, LRPD introduced the Special Plaintiff system in Georgia for third parties to litigate PwD rights without a PwD plaintiff involved in the case. What is most important, besides training legal professionals to litigate PwD rights in the future, the programme also created a curriculum for law enforcement professionals (Policy Academy) to ensure PwDs have better access to justice.

- Another outcome that is a result of cohesive and persistent advocacy work by this programme and implementing UN organizations is the ratification of the CRPD Optional Protocol in May 2021. This is another improvement in the direction of PwD rights litigation and a change that will be sustained over the long term.
- Another legal development supported and facilitated by the programme that can be sustained over time relates to the creation of the long-awaited Interagency CRPD Implementation Coordination Mechanism at the level of the Government of Georgia. In addition to this, it is the programme's indirect advocacy effect that helped the disability pension increase on a national level from January 1<sup>st</sup>, 2022, while persons with severe disabilities employed at public institutions are no longer refused disability pensions. Both of these monetary gains for PwDs are likely to endure any shift in power as they are guaranteed by legal means.
- Throughout JP implementation the Governmental decree on Social Rehabilitation and Child Care was approved.
- During the programme implementation, the Government of Georgia approved the technical protocol on National Accessibility Standards<sup>34</sup> that entered in force on March 1, 2021 – which is also yet another result of a persistent advocacy work by programme implementing organizations.

Next the report will distinguish changes in PwD rights guarantees caused directly by the programme that can be sustained in the future:

- One direct programme achievement that will definitely be sustained after programme completion is related to the adoption of the Standard Operational Procedures approved by MoH on family planning and antenatal supervision. This is a systemic change proposed by the programme that will be sustained and will support the end of discriminatory practices in reproductive health services.
- As a result of the programme the National Statistics Office of Georgia created Action Plans for 2021 and 2022 on generating and publishing additional statistical data on PwDs. The programme will have a sustainable impact on generations of statistical data about PwDs in Georgia by gender.
- The WWD network created as part of the programme sustained its advocacy work and the members of the network believe their participation will be ensured in various Parliamentary discussions in the future. Network members believe there is institutional support needed for the organizational structure of the WWD network to persist but each member has stayed engaged in political activism and in contact with the others.

Next there are numerous programme outcomes that paved the way for sustainable legal changes in the future when political opportunities arise for social transformations.

- The Human Rights Strategy 2022-2030 draft is created and respective comments and suggestions will sustain its relevance into the future. Additionally, the programme provided more specific

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<sup>34</sup> Technical Guideline National Accessibility Standard; Legislative Herald of Georgia. Last seen July 2, 2022 <https://matsne.gov.ge/ka/document/view/5051805?publication=0>

recommendations to the strategy about protection of the SRHRs of PwD girls and women, on prevention of violence, as well as on the improvement of service provision. Once the National Human Rights Strategy is open for approval the suggestions will be resumed.

- The programme also provided suggestions on WWD rights improvements (e. g. access to justice, education, health, etc.) in the National Human Rights Action Plan which will also be sustained and recovered when the action plan is released for approval.
- JP has left one SOP that awaits approval from the state: *Interdisciplinary Healthcare Provision to Victims of Gender-based Violence*. The document will be sustained and can be bring about sustainable change for WWDs once adopted. Additionally, JP awaits approval of a National Referral Mechanism for victims of violence.
- JP created a recommendation to prepare a National Accessibility Plan for the next 10 years to the government of Georgia and MoESD as the latter is expected to prepare a plan for the gradual transformation of the physical environment for PwD accessibility in Georgia. The recommendations can be sustained and addressed when there is a political opportunity for the new plan to be developed at the Ministry.
- For improving informational accessibility standards on the national level, the programme conducted research of best international practices for providing informational accessibility by the state, and then proposed a bill to introduce new national standards legislation on information accessibility. The research and the proposed bill will continue to be actionable until political opportunities arise for discussion at the Parliament of Georgia.
- The programme undertook special work with regard to promoting PwD women’s SRHR as well. Recommendations developed as part of the following document: ‘Assessment of Legal Framework and Policies on Sexual and Reproductive Health and Rights of Women and Girls with Disabilities in Georgia and Specific Recommendations in Relation to the UN Convention on the Rights of Persons with Disabilities’ will continue to be relevant and used during future advocacy processes on SRHR.
- The programme also assessed criminal justice accessibility problems for PwDs and provided relevant recommendations to state organizations for future amendments. The recommendations were shared with stakeholders close to the JP completion period. The recommendations will be sustained and can be addressed as political opportunities arise in the future.
- MDS conducted by the programme were presented to major stakeholders by the programme completion stage. Nonetheless the survey findings will have strong effects on policy planning by MoH when political opportunities arise for it in the future.
- JP also created an analysis of state programs for assistive technology in Georgia. Relevant recommendations shared in the document will be sustained and can have strong effects on the policy planning by MoH when political opportunities arise for it in the future.

### Sustainability of Transformation in the social model

The sustainability of transforming the system into the biopsychosocial model is inspired by the new LRPD, as it indicates that the system should be transformed and a rollout plan should be approved by 2023. However, to ensure the sustainability of interventions results achieved during the pilot, an assessment of the project will be important to ensure the further involvement of international organizations and other stakeholders in the field. Particularly, for the functional assessment, social workers and a functional

specialist should be prepared in this regard. It is important that the certification course (including curricula) supported by UNICEF and its implementing partner will be accredited and the relevant universities will start the preparation of specialists. Furthermore, though the initial cost of the proposed model of disability assessment is in place a detailed cost analysis is needed based on the will and ability of relevant governmental bodies to make required changes. The concept for the supervision and monitoring mechanisms of the proposed new model was also formulated and agreed with MoH. However, further support is required to institutionalize the policy documents. The readiness of the MoH to continue the process of biopsychosocial assessments ensures the sustainability of the intervention.

The assessment of social services for PwDs is an important document that reflects the current conditions of social service delivery. Important research was conducted that explains the gaps in services provided for children with disabilities. Further steps for improving the conditions of children with disabilities and the costs of further steps were elaborated. The MoH acknowledges the value of the document and necessary changes that should be made on the policy level. However, further advocacy process is required to make relevant policy changes for children with disabilities. For the improvement of future service delivery for PwDs, further interventions are necessary for children with disabilities. The KIIs revealed that there is a readiness by the MoH to take major decision. However, according to the observation of the evaluation team, the further involvement of international organizations to continue the process is very important as the MoH needs technical assistance in this regard.

The sustainability of documents (guidebooks, SOPs, etc.) prepared on GBV and SRHR for women with disabilities is enshrined as the documents were approved by MoH, MIA and other relevant agencies. The online courses for SHRH issues are accredited and free. Trainings for psychiatrists and gynaecologists were conducted, however, as revealed by the FGD with the target groups, there is a further need to conduct relevant trainings and make the documents more operational. Additionally, the capacity of MoH should be strengthened to monitor the process.

Municipalities have councils for disability issues and staff responsible for the social policies. Capacity building of specialists from municipality staff was conducted within the programme. However, for the sustainability of the results, further capacity building activities are necessary considering the frequent changes of staff in municipal governments. There is no major risk regarding the sustainability of the social inclusion centre of Ambrolauri municipality and the day care centre is funded by the state. Moreover a strong non-governmental organization is the founder of the centre. In a short time the centre managed to find additional funds from different donor organizations.

#### 4.6. Lessons Learned

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- *What are the lessons learned about the provision of JP?*
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JP was implemented by six UN agencies. The agencies were operating on behalf of their mandates and with decades of experience of their sectors. This definitely positively influenced their work in relation to such complex issues as the improvement of the state of PwDs based on transformative changes.



Therefore, the involvement of different agencies related to the complex issues involving PwDs enabled state improvement to proceed on different issues and provided synergies and in the end achieved several transformative results.

As the JP was implemented by six agencies, in some cases there was a lack of overall monitoring of the system. The evaluation process revealed that to a certain extent there was a lack of monitoring data, especially related to trainings conducted and their results. Therefore, for future JPs the issue of monitoring should be addressed.

The programme was implemented over two years and it intended to achieve three transformative results. Significant achievements were made in relation to these goals. However, two years is a short time to ensure the sustainability of the programme's transformative results, especially considering the social-political environment of developing countries and the unintended impacts of COVID-19.

Hastened legislative work at the Parliament of Georgia can benefit from special expertise and value provided by program interventions to ensure the high quality of legislative changes.

For the LRPD to be enforced, awareness about PwD rights should increase.

The CRPD Implementation Coordination Mechanism may require more expert knowledge and field expertise in its work in the future.

To increase physical accessibility of the environment overall, and workplace accessibility in particular, executive oversight must strengthen to oversee implementation of new legislation regarding reasonable accommodation.

Hinderances in developing the report on PwD prevalence and needs on schedule caused the data to receive less attention throughout the programme implementation period and caused the data to receive little coverage and use by advocacy groups.

Changes in the Government of Georgia and its administration have hindered advocacy work for the programme.

A number of important documents, such as studies, SOPs, guidebooks, etc. were developed in the framework of the project. A number of trainings were conducted with different target groups. However, there is a further need to strengthen stakeholders and target groups in the future as well. This applies to the future capacity building of municipalities, as well as gynaecologists, psychiatrists and OPDs involved in the process. Two years is not sufficient time to ensure solid transformations and their sustainability.

## 5. Conclusions

**Relevance.** The programme partners who are the members of the Steering Committee (SC) are relevant for the successful implementation of the programme. The legislative and policy changes supported by the JP were relevant to the needs of PwDs and international conventions under outcome one.

Programme outcome two was relevant for transforming the existing system into the biopsychosocial model. The purpose of the activities conducted were a) to prepare relevant instruments and hand them over to the government to help transform the system into the biopsychosocial model; b) mapping and analysing the services and their costs to improve the state of children with disabilities. However, the latter

component should be implemented for adults with disabilities as well. The guiding documents and SOPs developed within the programme on SRHR and GBV were relevant to improve the state of women with disabilities. Close collaboration with MoH and MIA was important to outline SRHR and GBV issues related to women with disabilities. The capacity building of local municipalities and establishing social inclusion centres in Georgia were relevant activities to enhance the role of local municipalities. Capacity development interventions provided to CSOs and activists working on the rights of women with disabilities were relevant to strengthen the capacity of women's CSOs in lobbying, advocacy and research and promote the rights of WwDs – a constituency oftentimes excluded by both government and mainstream CSO counterparts. In addition, the programme design was successfully adjusted and relevant funds were directed to respond to the newly emerged needs of the PwDs due to the outbreak of COVID-19.

**Effectiveness.** Adoption of LRPD in 2020 by the Parliament of Georgia helped to achieve Programme Outcome 1 right at the outset of its implementation. The law was a much-needed replacement for the 1995 bill on Social Protection of Persons with Disabilities and its adoption brought about important improvements in PwD rights guarantees at a national level.

The programme achievement under Outcome 2 is significant in several dimensions. However, transforming the “medical model” into the social one requires more resources and further support as the reform is linked to several different entities of government. The programme enabled the implementation of important steps to transform the model.

The second dimension under Outcome 2 analyses social services related to PwDs. Under this outcome activities were mostly related to the services of children with disabilities. Analysis and mapping of social services provided in Georgia for children with disabilities was accomplished. However, it does not include similar requirements for adults with disabilities. That could be continued in future projects/programmes. The level of ownership of developed documents is high within the MoH.

Women with disabilities face special problems and therefore have special needs to improve their condition. GBV and SHRH issues are areas where women with disabilities require further support. However, these issues were not addressed at the policy level in Georgia before the JP. JP developed important documents, such as the guiding documents for women with disabilities - Family Planning and antenatal care SOPs were elaborated and approved by the MoH. Additionally, instruments for social workers on how to identify violence and in particular GBV among persons with disabilities were developed. Another important guiding document was also developed within the outcome. The project contributed significantly to the availability of data and analysis on women and girls with disabilities, inter alia, important data on PwDs related to the COVID-19 pandemic was generated within the framework of the JP Rapid Gender Assessment of COVID-19 with special focus on analysing the impact of the coronavirus pandemic on women and girls with disabilities and their caregivers, and was published.

Working with local municipalities was an important intervention under Outcome 2. UNDP, in cooperation with the Ombudsman Office trained members of disability councils in 17 municipalities. As a result, these municipalities have better action plans on PwD issues. However, further capacity-building activities are required to strengthen the process. In two targeted municipalities (Aklatsikhe and Shuakhevi) the assessment of local social services provided by municipalities reflect the planning process.

The programme reached out to PwDs countrywide (including particular groups like women, CwD parents, PwDs with psycho-social needs) through supporting the national communication campaign related with COVID-19 as well as conducting supplementary interventions like various online platforms. The JP implemented several awareness raising campaigns dedicated to the rights of women and girls with disabilities generating country-wide outreach, despite the fact that the evaluation is limited to measuring the effectiveness of COVID-19 related awareness raising activities at the beneficiary level

Besides, as the evaluation results reveal, the programme has provided important support to develop the concept of social rehabilitation distance services for children (>18) with disabilities and/or developmental risks, and specialized protocols and guidelines for medical personnel of mental healthcare providers, all of which are approved by Ministry Order.

Several studies, assessments, and monitoring efforts were undertaken to mainstream PwD needs during the COVID-19 pandemic, which were partly used by the GoG. The evaluation team is inclined to conclude that there could have been more use of recommendations derived from these studies/assessments during planning of COVID response and mitigation measures,

**Efficiency.** Six UN agencies implemented the programme, which was very efficient considering the complex nature of problems of PwDs in Georgia as each agency was acting within its mandates. Therefore, each UN agency worked to solve different issues of PwDs under their areas of expertise and mandate. This approach was very efficient for the successful implementation of the programme

The evaluation can conclude that the programme has been flexible and adaptive to emergent needs and changed circumstances in term of responsiveness to adjust the programme activities and re-allocate financial resources appropriately.

Annual reports were developed by the programme according to the rules and templates of the SGD Fund. However, as revealed from the KIIs with implementing agencies, the template of the progress reports did not enable the inclusion of detailed information on implemented activities, which limited the ability of implementing agencies to document and report fully on achievements. The brief and summary format of progress reports has been a particular hindrance for the evaluation process as well, since the reports lacked the necessary details about implemented activities. In addition, the programme was lacking a unified monitoring approach and tools, and this subsequently resulted in a lack of monitoring data.

The programme was impacted by COVID-19. Due to several lockdowns, some project activities were delayed or were not implemented. However, the programme managed to use adaptive management techniques to continue operations. Some activities, such as trainings or different meetings, were conducted online. The programme timeline was updated and an outcome related to COVID-19 was added. This was a timely decision as COVID-19 negatively impacted the lives of PwDs and the programme contributed to a decrease in the negative impact of the pandemic.

### **Sustainability.**

LRPD adopted with JP advocacy will have sustained impact on policy planning and implementation in the future, and specific deadlines set by LRPD will initiate different reforms (including one on PwD social model assessment) that should be constantly supported and observed. Both are strong grounds for a positive dynamic to be sustained in policy areas in the future as PwD demand for human rights improvement grows stronger.

The sustainability of transforming the system into the biopsychosocial model is supported by the new LRPD which indicates that a rollout plan/action plan to move to the new model should be approved by 2023. However, to ensure the sustainability of the intervention results in the pilot, an assessment of the project will be necessary for the further involvement of international organizations and other stakeholders in the field. The assessment of social services for PwDs is an important document that reflects the current conditions of social service delivery. Further steps for improving the condition of children with disabilities and related costs were also developed. The MoH acknowledges the value of the

document and necessary changes that should be made at the policy level. However, further advocacy is required to produce relevant policy changes for children with disabilities. For the improvement of future service delivery for the PwDs, similar activities are necessary for adults with disabilities.

Two SOPs developed under the programme for family planning of women with disabilities and antenatal care are approved by MoH. However, training and capacity-building activities are required to make the SOP more operational.

Local municipalities require further capacity building of for council members on PwDs. Pilots implemented in Akhaltsikhe and Shuakhevi municipalities require further scaling up in other municipalities. There are no major risks for the social inclusion centres in established municipalities.

## 6. Recommendations

The recommendations included below have been developed based on the final analysis of all collected research material and further reflection among evaluators and UN agencies. As a result of these reflections, the recommendations were prioritized and only those with the highest priority were included in the list. As requested, the recommendations were directed solely at JP implementing UN agencies. While the recommendations are for relevant UN agencies, the achievement of their underlying objectives will necessitate the involvement and cooperation of other actors, in particular, the GoG and its agencies as well as OPDs and other civil society actors.

In line with the evaluation findings in Georgia, we recommend for UN agencies to:

### **Continue the work needed for LRPD execution on a national level. This recommendation applies to OHCHR and UNDP**

- Follow up on the LRPD annual Action Plan implementation and its reporting by state organs at the Parliament of Georgia
- Follow up with state organizations on the support needed for new AP development and AP implementation itself
- Advocate approval of the National Action Plan regarding the transfer to the disability assessment social model in January 2023

### **Continue support for the improvement of the legal environment for PwDs. This recommendation applies to OHCHR and UNDP**

- Support lobby and advocacy work for legislative amendments to LRPD in order to strengthen the scope and powers of the law
- Support lobby and advocacy work to adopt a National Accessibility Plan and a new law on access to information
- Observe the work of the Interagency CRPD Implementation Mechanism and consider providing expert knowledge and technical support to it for improved decision making

### **Support OPDs advocacy work and their effective participation in decision making. This recommendation applies to OHCHR, UNDP, UN Women, UNICEF, UNFPA**

- Promote PwD participation in the Consultation Council of the Interagency CRPD Implementation Mechanism, in PwD Coordination Council at MoH, MIA and others created during the programme implementation period in order to ensure these mechanisms are functional and effective.
- Provide technical assistance and expert support to PwDs requiring means for effective participation at the abovementioned consultation councils.
- Support networks of PwDs working on joint advocacy processes

**Support PwDs for better access to justice. This recommendation applies to OHCHR,**

- Raise PwD awareness on their rights
- Support PwDs to litigate cases at national courts and administrative organs

**Support the State Employment Agency to promote PwD employment among employers through wide campaigns and to implement proactive work for PwD employment by job coaching services This recommendation applies to OHCHR, UNFPA**

- Ensure availability of job coaches to proactively reach out to the PwD adult population about possible employment opportunities for them
- Conduct wide information campaigns for employers on the ways they can provide accessible and safe work environment for PwDs. Provide employers with information on PwD rights legislation forbidding discrimination on the ground of disability, and about regulatory frameworks that are in place for PwD employment support

**Support MoH to continue transforming medical model into the social one. This recommendation applies to UNICEF**

- Support to MoH to Finalize and Approve a rollout plan by 2023
- Develop detailed cost analyses of the new disability assessment and status determination system in Georgia
- Support for mapping social services for adult PwDs in Georgia. Identify required goods and services
- Facilitate the determination of the financial cost of transformation from the medical model of disability and related services

**Support strengthening the system related to women with disabilities on the issues of GBV and SRHR. This recommendation applies to UNFPA**

- Support further capacity building of social workers on the issues of GBV of Women
- Support further trainings of gynaecologists and psychiatrists

**Support local municipalities to improve social service delivery for PwDs. This recommendation applies to UNDP**

- Contribute to scaling up the activities implemented in the Shuakevi and Akhaltsikhe municipalities in other municipalities
- Support to develop methodologies based on the social services for PwDs will be provided by the municipalities

**Develop unified approach to have reliable monitoring data. his recommendation applies to all UN agencies involved in the programme.**

# Annexes

Annex 1. Terms of Reference

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Annex 2. Evaluation Design Matrix

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Annex 6. The Document of Ethical Clearance from NCDC

[Annex 6 - The document of ethical clearance from NCDC](#)

# Annex 1. Terms of Reference



## **Terms of Reference for Local Organization for Evaluation of the Joint SDG Programme “Transforming Social Protection for Persons with Disabilities in Georgia”**

### **INTRODUCTION**

In an effort to transform the social protection system for persons with disabilities in Georgia, UNICEF, UNDP, WHO, UNFPA, UN Women and OHCHR have been implementing a Joint Programme (JP) “Transforming Social Protection for Persons with Disabilities in Georgia” since January, 2020 under UNICEF leadership and the overall coordination from UN RC’s Office. As the JP is on a final stage of its implementation, the JP commissions an external, independent and gender-responsive<sup>1</sup> evaluation of the Joint Programme. This Terms of Reference (ToR) set out the purpose and objectives, methodological options and operational modalities for an institutional contract with a team of at least two evaluation consultants. Findings and recommendations from this evaluation will inform the Joint Programme team, Joint SDG Fund and relevant stakeholders on:

- Accomplishment of the main expected results of the JP
- Contribution to improving the situation of vulnerable groups identified in the JP document
- JP’s contribution to SDG acceleration,
- JP’s Contribution to UN reforms
- Scalability and sustainability of the JP interventions

The final evaluation of the JP is expected to be conducted from April 2022 to June 2022 for a total duration of approximately 12 working weeks. It will be supervised by JP focal points, Joint Evaluation Management Group comprised by UNICEF (convening agency), UNDP, WHO, UNFPA, UN Women and OHCHR evaluation specialists who are not involved in the programme implementation in close coordination with UN RC’s Office.

### **ABOUT THE JOINT PROGRAMME:**

About 15% of the world’s population lives with some form of disability.<sup>2</sup> Women are more likely to experience disabilities. The disability prevalence rate among women worldwide is 19.2%.<sup>3</sup>

While Georgia collects data on PwDs via census and other household surveys, this data is rarely analyzed and disseminated with disaggregation by sex, age and form of disability. The policy formulation relies on figures derived from administrative sources on recipients of disability pension, which significantly underestimates the number of people experiencing various forms of disability, e.g. approx. 125,898 PwDs (of which 49,916 women and 10,969 children) are registered as recipients of disability pensions in 2019. This constitutes about 3% of the total population of Georgia which is well below the WHO global prevalence estimates. The official figure is particularly low for children and contradicts the figure from the latest national census. The lack of data on the incidence of different types of disabilities makes it impossible to discern the real extent of the problems and accordingly, the specific needs of PwDs and their families.

Georgia relies on the outdated “medical model” for determining the disability status. The legislation<sup>4</sup> outlines the diagnoses qualifying children and adults for disability status and does not take into consideration the overall health state of a person. The assessment process is conducted only by physicians and seeks to identify only health-related

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<sup>1</sup> How to manage a gender responsive evaluation, Evaluation handbook, UN Women, 2015

<sup>2</sup> World Health Organization (WHO), Disability and Health: Factsheet (Nov. 2016)

<sup>3</sup> WHO and World Bank Group (WBG), World Report on Disability 28 (2011)

<sup>4</sup> Law of Medical-Social Expertise and Ministerial Orders #1/N and #62/N



needs.<sup>5</sup> Similarly, the current assessment system ignores some developmental disabilities of infants and deprives them from accessing disability benefits. Moreover, the assessment process does not consider the needs for utilization of assistive technologies and social services or barriers to participation.

6 UN agencies (UNICEF, UNDP, WHO, UNFPA, UN Women and OHCHR) under the leadership of UNICEF and overall coordination of UN RC's Office have developed a joint programme for transforming social protection system for people with disabilities in Georgia. The programme is initiated under the United Nations Sustainable Development Goal Fund (Joint SDG Fund) and it is implemented between January 2020 and June 2022 in Georgia. It has a total budget of USD 2,200,000

This Joint Programme (JP) "Transforming Social Protection for Persons with Disabilities in Georgia" aims to address one of the largest gaps in Georgia's social protection system in order to transform the situation of persons with disabilities (PwDs) in the country. The overall strategy of the project is to address one of the key factors leading to social exclusion of people with disabilities in the society, i.e. the societal and institutional medical approach to people with disabilities, which considers disability as individual deficiency. Introduction of the social model of disability will be supported by addressing the data, legal and institutional framework and definition of disability and related social protection, while simultaneously increasing societal awareness and stimulating change of social norms, providing support for empowering organizations of people with disabilities as important change agents and expanding employment opportunities for PwD.

The JP is committed to deliver three transformative results:

- Strengthen legislative framework and evidence-based policy environment and promote non-discriminatory social norms to enable all PwDs to effectively enjoy their rights. Strengthen systems to enable quality integrated services for PwDs, including revised social system entitlements, especially for children, women and young people.
- Expand Existing pilot of disability status assessment system based on the social model to one more region of Georgia.
- Improve Capacities for data collection, monitoring and advocacy for the implementation of Convention of the Rights of Persons with Disabilities (CRPD, International Conference on Population and Development Programme of Action (ICPD PoA), Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), Beijing Platform for Action (BFPA), Universal Periodic Review (UPR), Commission on the Status of Women (CSW).

Broadly, all of the JP's outcomes and outputs are in line with the UNDAF outcomes and could be grouped under the focus areas of democratic governance, jobs, livelihood and social protection and health. The JP specific outcomes are the following:

Outcome 1: By 2022, persons with disabilities, especially those from vulnerable groups, benefit from enabling environment through disability inclusive legislation, evidence-based policy, decreased stigma on disability and expanded employment opportunities.

Outcome 2: By 2022, the social protection system, health and social services are transformed in line with the social model of disability to ensure social inclusion and equal rights for people with disabilities.

The COVID-19 outbreak created additional challenges for people with disabilities that required more focused intervention from all UN agencies. Hence, the workplan was revised and the funds repurposed to better fit the new needs PwDs have during the pandemic.

Outcome 3: Persons with disabilities, especially those from vulnerable groups, are supported during the COVID-19 pandemic via adjusted communication strategies, developing relevant guidelines, protocols and policy documents to better respond to the needs of PwDs in the light of COVID-19 outbreak.

Relevant specificities related to the intersection of the gender and disability, as well as outputs related to other vulnerable groups within the disability community are reflected in the results framework (*Annex 1*)

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<sup>5</sup> <https://matsne.gov.ge/ka/document/view/15772?publication=11> Article 10

## **OVERALL STRATEGY OF THE JOINT PROGRAMME:**

The objectives and the overall strategy of this proposal are fully reflecting the national priorities stated by the Government of Georgia, the UNDAF framework and the demands voiced by the civil society. The JP is transformational as it delivers changes that will directly affect all PwDs in Georgia. By adopting the inter-sectoral approach, the JP contributes to achieving the following SDGs in Georgia: Goal 1: End poverty in all its forms everywhere; Goal 3: Ensure healthy lives and promote well-being for all at all ages; Goal 4. Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all; Goal 5. Achieve gender equality and empower all women and girls; Goal 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all; Goal 10: Reduce inequality within and among countries; Goal 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels; Goal 17: Strengthen the means of implementation and revitalize the global partnership for sustainable development.

**UNICEF** contributes to the Joint Program in three main directions: a) improving the legal framework for children with disabilities through technical support to harmonize national legislation (laws and bylaws) with the UN Convention on the Rights of Persons with disabilities. The special emphasis is placed on formulating draft amendments of the Law of Georgia on medical-social expertise that determines the rules for granting disability status, b) Another important direction of work for UNICEF is the adoption of the social model of disability. Through the JP It was rolled in out in one of the regions of Georgia c) Revision of the social assistance entitlements for children with disabilities and PwDs based on the new status determination system by supporting relevant evidence- based policy and decision-making processes.

**UNDP** focuses on two major issues – accessibility and employment. Support to development of national regulatory framework and policy on accessibility to physical environment and information that complies with international standards are followed up by knowledge building on newly adopted legislation among the major stakeholders, such as construction companies, state agents at national and local levels responsible for issuing construction permits and monitoring the observance of permit conditions and other professionals (architects, urban designers, students of relevant faculties) in the field. In addition, UNDP closely works with local municipalities to provide knowledge on methods and measures that should be implemented at local level for ensuring accessibility for PwDs, including through service delivery (e.g. accessible transportation to workplace). Moreover, UNDP works closely with state officials, private sector and local municipalities to create favorable conditions of PwDs' employment.

**WHO** conducts Model Disability Survey (MDS) to better understand the situation of people with disabilities, including their prevalence, and what needs to be done to ensure they can enjoy their human rights fully on an equal basis with others. The implemented activities are the following: 1. Preparation of a study protocol for the MDS in Georgian 2. Ethical approval to conduct MDS in Georgia. 3. Customization of the MDS questionnaire for the social protection indicators. 4. Selection of interviewers and provision of a five-day training for the interviewers administering the MDS 5. Data collection in two regions of Georgia 6. Monitoring visit to support data collection. 7. Provision of three-day training on data management and analyses for the statisticians at national center for Public Health under MoH. 8. Evidence-based Disability report for Georgia 9. Convening the high-level forum to review the findings of the MDS 10. Development of monitoring indicators for Social Protection.

**UNFPA's** strategy is expected to play an important role in protecting, promoting and fulfilling the human rights of women and girls with disabilities and are fully in line with the priorities of SDG goals that call for universal access to Sexual and reproductive health and rights (SRHR). UNFPA supports creating enabling legislative and policy environment by conducting: a) Assessment of the legal environment and health programmes with regard to SRHR of PwDs; b) Recommending legislative provisions to comply with CRPD obligations for making SRH services and information accessible for PwDs; and c) Updating relevant National Policies and Plans that guarantee access to SRHR for PwDs. UNFPA also supports strengthening systems through development/updating relevant SOPs, development of training resources and providing trainings to ensure access to quality GBV and SRHR services for women and young people with disabilities.

**UN Women** mobilizes a network of CSOs to effectively monitor and lobby for the implementation of the CRPD in the context of national and international commitments to gender equality and women's empowerment. UN Women will further work with data producers to strengthen data collection, analysis and dissemination from gender and disability

perspective for improved monitoring on CRPD and SDG implementation with the ultimate goal to strengthen inclusion of women with disabilities to all areas of life, including in the decision-making.

OHCHR strategy for intervention mainly rest on the following pillars: a) facilitating the process of bringing Georgian legislation in compliance with CRPD standards and benefitting to the elaboration of state monitoring mechanism, and b) promoting the reliance of national administrative and judicial authorities on CRPD standards in decision making process. On the one hand, there is a clear need for piece of legislation which would compile and consolidate relevant regulations on PWDs. Bylaws and decisions adopted by administrative authorities should be in conformity with this overarching legislation and CRPD standards.

*Overall results framework, detailing the components of the programme and the responsibility of each UN agency, is in **Annex 1***

*See the SDG targets directly addressed by the Joint Programme in **Annex 2***

*The Theory of Change of the joint programme as well as the main ToC assumptions to be monitored is available in **Annex 3***

## **PURPOSE, OBJECTIVE AND SCOPE OF THE WORK**

The purpose of this evaluation is knowledge and evidence generation and high-quality lessons learned (learning). This is supposed to be the final evaluation of the JP that has been implemented for 30 months with an end date 30 June , 2022 (The last 2,5 months are designated for the evaluation). Findings and recommendations from this evaluation will inform the Joint Programme team, Joint SDG Fund and relevant stakeholders on:

- Accomplishment of the main expected results of the JP
- Contribution to improving the situation of vulnerable groups identified in the JP document
- JP's contribution to SDG acceleration,
- JP's Contribution to UN reforms
- Scalability and sustainability of the JP interventions

The final evaluation objective of the JP is manifold that aims to:

- Examine the conceptual underpinnings and design of the JP including its underlying Theory of Change (ToC) and provide an assessment of how the Joint Programme activities and approaches were effective in meeting the needs of people with disabilities;
- Assess the relevance, effectiveness, efficiency, and sustainability of the joint programme from its inception to its completion, with focus on its ability to respond to the needs of people with disabilities;
- Assess to what extent the main transformative results were accomplished during the JP implementation using the ToC, in terms of: (i) coordination, collaboration and organisational structures formed for transforming the social protection for persons with disabilities in Georgia (ii) quality and delivery of the proposed activities within the JP (iii) consultation and participation with the disability community to promote the participatory approaches within the JP; (iv) the internal M&E system;
- Examine to what extent the JP activities influenced the improvement of the situation of vulnerable groups identified in the JP document
- Assess to what extent the JP contributed to the SDG acceleration and UN reforms
- Document and provide recommendations regarding lessons learned, good practices and innovations that can be applied within other programmes

The evaluation will provide an independent assessment of the joint programme, and it will be forward-looking by reinforcing good practices, identifying areas for improvement and providing conclusions and recommendations. The evaluation will focus not only on identifying outcomes of JP activities, but it will also attempt to assess the approach taken by UNICEF, UNDP, WHO, UNFPA, UN Women and OHCHR, whether the assumptions made in the ToC are appropriate, whether activities and interventions are indeed contributing to progress within the framework of the ToC, whether the proposed approach is scalable and to determine why or why not progress has been occurring.

Evaluation evidence will be judged using modified Organization for Economic Co-operation and Development/Development Assistance Committee (OECD/DAC) criteria of relevance, effectiveness, efficiency and

sustainability, as well as equity, gender equality and human rights considerations. Key evaluation questions (and sub-questions) include (but are not limited to) the following:

**Relevance** of the JP interventions in relation to the national social protection priorities and policy and the needs of PwDs in Georgia:

- How relevant was the JP to national priorities/policies at the national level and to the needs of the main vulnerable groups?
- Were the planned outcomes and outputs of the JP relevant to the needs of persons with disabilities including, children, girls and women?
- Have contextual factors been considered in the design and implementation and adaptation of Joint Programme?
- Considering the COVID-19 outbreak how have the JP interventions on an outcome and output level remain relevant to the needs of PwDs?
- How relevant was the jointness in programme design, implementation, and management for addressing the country's development priorities and challenges?
- To what extent the JP ensured the continuous participation of the vulnerable groups in implementation?

**Effectiveness** of the JP in achieving its programme objectives, including:

- To what extent did the JP contribute to achieving its development objectives, especially around the 3 transformative results (mentioned p.2)?
- What programme interventions and strategies are (or are not) meeting the needs of persons with disabilities including, children, girls and women?
- What have been the major factors influencing the achievement or non-achievement of the programme objectives?
- To what extent has the JP contributed to accelerating the SDGs at the national level?
- To what extent the JP produced a catalytic effect in terms of generating systems change across sectors to leave no one behind including children, girls and women with disabilities?
- To what extent the JP contributed to achievement of UNDAF/CF outcome/s and national development priorities?

**Efficiency** of the JP outcomes and outputs - both qualitative and quantitative - in relation to the inputs provided:

- How efficiently have the JP been managed in terms of its human / financial resources and organizational / governance structure?
- How efficient was coordination among agencies?
- Was the JP intervention more efficient in comparison to what could have been done through a single agency intervention?
- To what extent did the JP contribute to enhancing UNCT coherence and UNCT efficiency (reducing transaction costs)?
- What are the comparative strengths of the joint programme in comparison to other social protection programmes?
- What are the comparative strengths of the coordination and convening roles of the joint programme?
- What are the comparative strengths and added values of individual agencies in the frames of the programme?

**Sustainability** of the benefits of the JP implemented in Georgia:

- To what extent has the strategy adopted by the JP contributed to sustainability of results, especially in terms of LNOB and the social protection system?
- To what extent has the JP supported the long-term buy-in, leadership and ownership by the Government and other relevant stakeholders?
- How likely will the results be sustained beyond the JP through the action of Government and other stakeholders and/or UNCTs?
- What are the lessons learned about the provision of JP?

## **EVALUATION SCOPE:**

The JP evaluation should mainly focus on the stakeholders and target groups identified in the JP document. The emphasis should be placed on children, women, young and older people with disabilities during the evaluation as

much as possible. Where possible, the research should further elaborate on equity gaps e.g. between rural v. urban residents, gender, etc.

The geographical scope of the project is national, excluding Abkhazia region and South Ossetia as the GoG does not exercise effective control over these regions. If the inception phase shows that nationally representative research is too costly or methodologically infeasible, the Steering Committee may decide to reduce the territorial scope of the research. Such decision shall be objectively justified and documented.

When it comes to the chronological scope of the project the JP evaluation should focus on the period from January, 2020 – April, 2022 when the JP started the implementation and finalized most of the activities by the end of April, 2022

## **EVALUATION APPROACH AND METHODOLOGY**

### **Participatory approach**

The final JP evaluation will be based on an inclusive, transparent and participatory approach, involving a broad range of partners and stakeholders at national and sub-national levels. An initial stakeholder map will be developed to identify stakeholders who have been involved in the preparation and implementation of the JP and those partners who do not work directly with UN, yet play a key role in a relevant outcome or thematic area in the national context. These stakeholders include government representatives, civil society organizations, implementing partners, the private sector, academia, other United Nations organizations, donors and, most importantly, rights-holders - people with disabilities. They can provide information and data that the evaluators should use to assess the contribution of UN support to changes in each thematic area of the JP. Particular attention will be paid to ensuring participation of women, adolescent girls and young people, especially those from vulnerable and marginalized groups (e.g. young people and women with disabilities).

*Stakeholders' mapping and analysis available in **Annex 4***

### **Mixed-method approach**

The evaluation will primarily use qualitative methods for data collection, including document review, interviews, group discussions and observations during field visits, where appropriate. The qualitative data will be complemented with quantitative data to minimize bias and strengthen the validity of findings. Quantitative data will be compiled through desk review of documents, websites and online databases to obtain relevant financial data and data on key indicators that measure change at output and outcome levels.

### **Methodology**

The JP envisages the evaluation will be theory based. It will use a Theory of Change (ToC) to assess progress of JP and its contribution to the SDG acceleration, UN reform and improving situation of persons with disabilities in Georgia. The ToC will detail a process for how JP travelled from activities, producing outputs to contribute to intermediate outcomes and outcomes. It is expected that based on the analysis the ToC will be reconstructed retroactively.

The methodology that the evaluation team will develop builds the foundation for providing valid and evidence-based answers to the evaluation questions and for offering a robust and credible assessment of the JP. The methodological design of the evaluation shall include in particular: (1) a theory of change; (2) a strategy for collecting and analyzing data; (3) specifically designed tools for data collection and analysis; (4) an evaluation matrix<sup>6</sup>; and (5) a detailed evaluation work plan and agenda for the field phase.

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<sup>6</sup> The evaluation matrix is a centerpiece to the methodological design of the evaluation. It is used at all phases of the evaluation. It deserves particular attention from the evaluation team, who should know how to develop and use it. Both the JP evaluation management task force and the external evaluation team should get an in-depth understanding of this tool. The evaluation matrix contains the core elements of the evaluation: (a) what will be evaluated (evaluation criteria, evaluation questions and related issues to be examined – “assumptions to be assessed”); (b) how to evaluate (sources of information and methods and tools for data collection)

The methodology should be in line with the evaluation approach and guidance provided in the UNEG Guidelines which will help the evaluators develop a methodology that meets good quality standards and the professional evaluation standards of UNEG in accordance with the UNEG Norms and Standards for Evaluation<sup>7</sup>, Ethical Guidelines for Evaluation<sup>8</sup>, Code of Conduct for Evaluation in the UN System<sup>9</sup>, and Guidance on Integrating Human Rights and Gender Equality in Evaluations<sup>10</sup>.

### Data collection

The evaluation will consider primary and secondary sources of information:

**Primary data** will be collected through semi-structured interviews with key informants at national and sub-national levels (government officials, representatives of implementing partners, civil society organizations, other United Nations organizations, donors, and other stakeholders), as well as group discussions with service providers and rights-holders (notably women, adolescents and youth with disabilities) and direct observation during visits to selected sites. Surveys and questionnaires including participants in development programmes, UNCT members, and/or surveys and questionnaires involving other stakeholders could also be considered.

**Secondary data** will be collected through desk review, primarily focusing on annual work plans, work plan progress reports, monitoring data and results reports, surveys, census.

The collected data shall include baseline, indicator, targets, output and outcome data available through M&E, progress reports. The evaluation team shall ensure that data collected is disaggregated by sex, age, location and other relevant dimensions, such as disability status, to the extent possible. The data collection tools that the evaluation team will develop, which may include protocols for semi-structured interviews and group discussions, checklists for direct observation at sites visited or a protocol for document review, shall be presented in the inception report.

Data collection will focus on the areas the joint programme is addressing. To the extent possible, the evaluation should be participatory in nature and include the views of not only key stakeholders, participating UN agencies but different groups of people with disabilities. During data collection, where possible, gender and human rights (including child rights) shall be incorporated in the evaluation design and instruments in accordance with UNEG Guidance on Integrating Human Rights and Gender Equality in Evaluations<sup>11</sup> and the UN-SWAP Evaluation Performance Indicators.<sup>12</sup>

*See the guiding questions on persons with disabilities as **Annex 5***

### Data analysis

The evaluation matrix will be the major framework for analyzing data. The evaluators must enter the qualitative and quantitative data in the evaluation matrix for each evaluation question and each assumption. The evaluation matrix must have indicators, benchmarks, assumptions and/or other processes from which the analysis can be based, and evaluative conclusions drawn. The design should show clearly how the evaluation will assess the JP's path towards outcomes and impact. Once the evaluation matrix is completed, the evaluators should identify common themes and patterns that will help to answer the evaluation questions. The evaluators shall also identify aspects that should be further explored and for which complementary data should be collected, to fully answer all the evaluation questions and thus cover the whole scope of the evaluation adherence to a code of ethics and a human right based and gender sensitive approach in the gathering, treatment and use of data collected should be made explicit in the inception report. Perspective from both rights holders and duty bearers shall be collected

## EVALUATION PROCESS

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<sup>7</sup> Document available at: <http://www.unevaluation.org/document/detail/1914>

<sup>8</sup> Document available at: <http://www.unevaluation.org/document/detail/102>

<sup>9</sup> Document available at: <http://www.unevaluation.org/document/detail/100>

<sup>10</sup> Document available at: <http://www.unevaluation.org/document/detail/980>

<sup>11</sup> UNEG [www.unevaluation.org/document/download/2107](http://www.unevaluation.org/document/download/2107)

<sup>12</sup> UN-SWAP [www.uneval.org/document/download/2433](http://www.uneval.org/document/download/2433)

The evaluation process can be broken down into different phases that include different stages and lead to different deliverables: inception phase; field phase; reporting and dissemination phase; The evaluation team leader must undertake quality assurance of each deliverable at each phase and step of the process, with a view to ensuring the production of a credible, useful and timely evaluation.

The Evaluation team will be responsible for conducting the evaluation. This entails among other responsibilities designing the evaluation according to this terms of reference; gathering data from different sources of information; analyzing, organizing and triangulating the information; identifying patterns and causal linkages that explain the JP performance and impact; drafting evaluation reports at different stages (inception, draft, final); responding to comments and factual corrections from stakeholders and incorporating them, as appropriate, in subsequent versions; and making briefs and presentations ensuring the evaluation findings, conclusions and recommendations are communicated in a coherent, clear and understandable manner once the report is completed.

The evaluation process is expected to contain three phases: inception (1), data collection and field visit (2); and analysis and reporting (3).

### **Inception Phase**

In the inception phase, the activities will be carried out by the evaluation team, in close consultation with the JP Evaluation Management Task Force. This phase includes:

- Evaluation kick-off meeting between the Joint Evaluation Management Task Force comprised of JP implementation managers and evaluation specialists;
- Desk review of background information and documentation on the programme context, as well as other relevant documentation;
- Conduct the evaluability assessment, examine the available data sources and possible extent of data disaggregation;
- Formulation of a final set of evaluation questions based on the preliminary evaluation questions provided in the ToR;
- Development of the evaluation matrix including indicators, benchmarks, assumptions and/or other processes from which the analysis can be based, and evaluative conclusions drawn;
- Development of a final stakeholder map and a sampling strategy to select sites to be visited and stakeholders to be consulted through interviews and group discussions;
- Development of a data collection and analysis strategy, as well as a concrete and feasible evaluation work plan and agenda for the field phase;
- Development of data collection methods and tools, assessment of limitations to data collection and development of mitigation measures.

At the end of the inception phase, the evaluation team will develop a inception report that presents a robust, practical and feasible evaluation approach, detailed methodology and work plan. The Inception Report should include evaluability assessment and examination of the extent of data disaggregation in M&E data, collection and reporting tools and systems, as well as evaluation approach, tools, and protocols. The evaluation team will develop the inception report in consultation with the JP Evaluation Management Task Force and submit for review. The Inception Report will be subject to quality assurance, a review conducted by internal evaluation stakeholders and external quality assurance that requires a satisfactory rating for the field mission to proceed and be considered an acceptable product.

### **Field Phase**

The evaluation team will collect the data and information required to answer the evaluation questions in the field phase. Towards the end of the phase, the evaluation team will conduct a preliminary analysis of the data to identify emerging findings that will be presented to the JP Evaluation Management Task Force. This should allow the evaluators sufficient time to collect valid and reliable data to cover the thematic scope of the JP. The field phase includes:

- Meeting with the JP Participating Agencies to launch the data collection;
- Meeting of the evaluation team with relevant agencies staffs;
- Meeting with implementing partners and stakeholders;
- Meeting with PwDs;
- Data collection at national and sub-national levels.

At the end of this phase, the evaluation team will hold a debriefing meeting the JP Evaluation Management Task Force to present the emerging findings from the data collection. The meeting will serve as a mechanism for the validation of collected data and information and the exchange of views between the evaluators and important stakeholders and will enable the evaluation team to refine the findings, formulate conclusions and develop credible and relevant recommendations.

### **Reporting Phase**

In the reporting phase, the evaluation team will continue the analytical work (initiated during the field phase) and prepare a draft evaluation report, taking into account the comments and feedback provided at the debriefing meeting at the end of the field phase. The draft report will be circulated to the the JP Evaluation Management Task Force for review. The final evaluation report will be subject to a review undertaken by internal as well as external quality assurance that requires a satisfactory rating.

In the event that the quality of the draft report is unsatisfactory, the evaluation team will be required to revise the report and produce a second draft. On the basis of the comments, the evaluation team should make appropriate amendments, prepare the final evaluation report and submit it to the JP Evaluation Management Task Force. The final report should clearly account for the strength of evidence on which findings rest to support the reliability and validity of the evaluation. Conclusions and recommendations need to clearly build on the findings of the evaluation. Each conclusion shall make reference to the evaluation question(s) upon which it is based, while each recommendation shall indicate the conclusion(s) from which it logically stems.

The evaluation report is considered final once it is formally approved and agreed with the JP Evaluation Management Task Force and the JP steering Committee. The final report should be compliant with UNEG quality checklist of evaluation reports.

The evaluation team is responsible for developing a PowerPoint presentation of the evaluation results that summarizes the key findings, conclusions and recommendations of the evaluation in an easily understandable and user-friendly way. The evaluation results should be shared with all agencies (incl. senior management), implementing partners, and the JP steering committee. The evaluation brief (a concise note) will present the key results of the JP, thereby making them more accessible to a larger audience.

### **EVALUTION LIMITATIONS**

The evaluation process poses some limitations stemming from the limited timeframe of the evaluation, availability of primary and secondary data, budget constraints, as well as potential difficulties to include all vulnerable groups during the field phase (data collection). The latter might be challenged by the lack of availability of certain representatives of the disability community and other contextual factors. Every effort should be made by the evaluation team to identify the potential limitations and hindrances, come up with the mitigation measures, and ensure that relevant efforts are made to develop high-quality evaluation of the programme.

### **EXPECTED DELIVERABLES AND REPORTING REQUIREMENTS**

The Evaluation team will be accountable for producing the following products/deliverables:

- Inception report: The inception report should translate the requirements of the ToR into a practical and feasible evaluation approach, methodology and work plan. It should include (at a minimum): (i) the evaluation approach and methodology (incl. the theory of change and sampling strategy); (ii) evaluability assessment; (iii) the final stakeholder map; (iv) the evaluation matrix (including the final evaluation questions, indicators, data sources and data collection methods); (v) data collection tools and techniques (incl. interview and group discussion protocols); and (vi) a detailed evaluation work plan and agenda for the field phase.
- Presentation of initial findings and provisional recommendations: at the end of the field work, the Evaluation team will present their draft findings and provisional recommendations through a PowerPoint presentation summarizing the main findings recommendations and lessons learned and conclusions.
- Draft and Final Evaluation Report: A final evaluation report will encompass all key sections required in the draft report and will include additional stakeholder feedback. The final report needs to be clear,



understandable to the intended audience and logically organized based on the comments received from stakeholders (around 40-60 pages). The first and revised drafts of final evaluation report (40-60 pages plus annexes) at minimum should contain the following:

- Executive summary (4-6 pages);
- Literature review;
- Description of JP
- Final Evaluation features including approach and methods as well as its purpose and goals;
- A Theory of change;
- Evaluation findings
- Conclusions logically derived from the body of the findings;
- Good practices and lessons learned;
- Recommendations which are feasible and practical to the maximum extent possible;
- The Report must be compliant with UNICEF-Adapted UNEG Evaluation Reports Standards.

The final evaluation report should be presented in a solid, concise and readable form and be structured around the issues in the Terms of Reference (ToR). All Reports should be prepared according to the UNICEF-Adapted UNEG Evaluation Report Standards (2017)<sup>13</sup> as per Global Evaluation Reports Oversight (GEROS) guidelines<sup>14</sup>. The Evaluation team is responsible for editing and quality control and the final report that should be presented in a way that directly enables publication.

- The evaluation brief (a concise note) and PowerPoint presentation that will present the key results, conclusions and recommendations, thereby making them more accessible to a larger audience.

## **ETHICAL CONSIDERATIONS:**

The evaluation team is responsible to provide adequate guidance and take appropriate measures to ensure their employees and contractors adhere the highest ethical standards during every stage of their work. Before commencement of the field work, the team will ensure ethical review of full research protocol (that includes all data gathering tools/instruments and methods as well as information on how ethical issues will be dealt with) by an independent and impartial ethics review board as per UNEG Ethical Guidelines<sup>15</sup> and UNICEF Procedure for Ethical Standards in Research, Evaluation, Data Collection and Analysis.

The evaluation team can make use of national ethical review boards as well as UNICEF regional Long-Term Agreement (LTA) holders – contractors that provide ethical review service (the list of the LTA holders will be provided upon request). The team should keep JP and/or the Steering Committee fully informed on measures undertaken to safeguard full observance of ethical standards and provide JP any additional information on this matter if requested. Proposals to apply for the project should clearly identify any potential ethical issues and approaches, as well as quality assurance/oversight mechanisms.

Persons with Disabilities who participate in the data collection should be informed of the context and purpose of the impact assessment, as well as the privacy and confidentiality of the information they reveal, their right to refuse or halt their participation at any time. Special attention should be paid to issues specifically relating to:

- No harm;
- Informed consent;
- Privacy and confidentiality;
- Conflict of interest of the evaluation informants;
- Conflict of interest of the evaluation team members.

Protection protocols and procedure should be in place and fieldworkers should be adequately trained in case a survey participant is in distress or attention of public authorities is required (e.g. in case of domestic violence, crime, etc.).

Personal data protection protocols shall be elaborated by the team and strictly adhered with by everyone involved in the project.

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<sup>13</sup> <https://www.unicef.org/evaluation/media/816/file/UNICEF-Adapted-UNEG-Evaluation-Report-Standards.pdf>

<sup>14</sup> <https://www.unicef.org/evaluation/documents/global-evaluation-reports-oversight-system-geros-handbook-and-summary>

<sup>15</sup> UNEG Ethical Guidelines [www.uneval.org/document/download/548](http://www.uneval.org/document/download/548)

## **INDICATIVE TIMEFRAME AND WORK PLAN:**

The evaluation is expected to be conducted from April 2022 to June 2022 for a total duration of approximately 10 working weeks.

## **GOVERNANCE AND MANAGEMENT ARRANGEMENTS OF THE EVALUATION:**

**The JP Evaluation Management Task Force** is responsible for managing the evaluation activity and is comprised of PUNOs and RCO (JP implementation managers and evaluation specialists where available). The JP Evaluation Task Force will be responsible for the selection of the organization, day-to-day oversight, and management of evaluation and for management of the budget. The Task Force will assure the quality of evaluation and guarantee its alignment with UNEG Norms and Standards and Ethical Guidelines and provide quality assurance checking that the findings and conclusions are relevant and proposed adaptations are actionable. All major deliverables will be reviewed firstly by JP Evaluation Task Force (zero draft) and then shared to the JP steering Committee

**The JP Steering Committee** - There is a functioning JP steering Committee within the Joint SDG Programme comprised of RCO, PUNOs, Government and Non-Government stakeholders. The Steering Committee will be responsible for the overall strategic oversight of the evaluation process and all documents will be shared with them. The representatives of the disability community will be added to the Steering Committee to ensure that all relevant stakeholders participate in the process. The committee is also the main body responsible for providing written and management response to the evaluation.

### **External Evaluation Team:**

The evaluation will be conducted through an institutional contract with an evaluation firm on a national level. The proposed evaluation team will consist of at minimum one (1) senior-level consultant (Team Leader) to conduct the evaluation that will be supported by at least one (1) additional consultant (Team Member/Technical Expert). Additional researchers/enumerators can be considered by the bidders to conduct the data collection.

The Team Leader should bring the following competences:

- Having extensive evaluation experience (at least 8 years) with an excellent understanding of evaluation principles and methodologies, including evaluability, capacity in an array of qualitative and quantitative evaluation methods, and UNEG Norms and Standards.
- Having extensive experience on social protection interventions - planning, implementing, managing or M&E.
- Holding an advanced university degree (Master or higher) in economics, social policy, international development, public policy, public administration, or similar, including sound knowledge of social protection; familiarity with human rights and disability issues
- Bringing a strong commitment to delivering timely and high-quality results, i.e., credible evaluations that are used for improving strategic decisions.
- Having in-depth knowledge of the UN's human rights, gender equality and equity agendas.
- Having a strong team leadership and management track record, as well as excellent interpersonal and communication skills to help ensure that the evaluation is understood and used.
- Specific evaluation experience of social protection is essential, as well as a strong mixed-method evaluation background;
- Previous solid experience of designing and leading Theory-Based Evaluation designs and documented professional experience in conducting rigorous independent evaluations that meet professional evaluation standards
- The Team Leader must be committed and willing to work independently, with limited regular supervision; s/he must demonstrate adaptability and flexibility, client orientation, proven ethical practice, initiative, concern for accuracy and quality.
- S/he must have the ability to concisely and clearly express ideas and concepts in written and oral form as well as the ability to communicate with various stakeholders in English

The Team Leader will be responsible for undertaking the evaluation from start to finish, for managing the evaluation, for the bulk of data collection, analysis and consultations, as well as for report drafting in English and communication of the evaluation results.

One (1) national Team Member/Technical Expert:

- Holding advanced university degrees (Masters-level) in statistics, economics, international development, public policy, public administration, or similar coursework.
- Strong training and experience in disability and social protection.
- Hands-on experience in collecting and analyzing quantitative and qualitative data, especially in relation to socio-economic interventions.
- Experience in conducting efficiency analysis
- Strong expertise in equity, gender equality and human rights-based approaches to evaluation and expertise in data presentation and visualisation
- Be committed and willing to work in a complex environment and able to produce quality work under limited guidance and supervision.
- Having good communication, advocacy and people skills and the ability to communicate with various stakeholders and to express concisely and clearly ideas and concepts in written and oral form.
- Excellent Georgian and English communication and report writing skills.

The Team Member will play a key role in data collection, analysis and presentation, and preparation of the debriefings, and will make significant contributions to the writing of the main evaluation report.

The Evaluation Team is expected to be balanced with respect to gender to ensure accessibility of both male and female informants during the data collection process. Back-office support assisting the team with logistics and other administrative matters is also expected. It is vital that the same individuals that develop the methodology for the request for proposals for services will be involved in conducting the evaluation. In the review of the proposals, while adequate consideration will be given to the technical methodology, significant weighting will be given to the quality, experience (including CVs, at least 2 references and written sample(s) of previous evaluations) and relevance of individuals who will be involved in the evaluation.

**EVALUATION PROCESS:**

Proposals will be evaluated against two elements: technical and financial. The ratio between the technical and financial criteria depends on the relative importance of one component to the other. Cumulative Analysis will be used to evaluate and award proposals. The evaluation criteria associated with this ToR is split between technical and financial as follows:

- Weigh for Technical Proposal = 70%
- Weigh for Financial Proposal = 30%
- Total Score = 100%

**a. Technical Proposal:**

The Technical Proposal should address all aspects and criteria outlined in this ToR.

Table: Evaluation of Technical Proposal

The Technical Proposals will be evaluated against the following:

REF	Category	Points
1.	Overall response: <ul style="list-style-type: none"> <li>• Completeness of response</li> <li>• Overall concord between the ToR requirements and propose</li> </ul>	
2.	Company/Key personnel/individual consultant: <ul style="list-style-type: none"> <li>• Range and depth of experience with similar projects</li> <li>• Sample(s) of previous work</li> <li>• relevance of references</li> </ul>	

- Key personnel: relevant experience and qualifications of the proposed team for the assignment

3. Proposed methodology and approach:

- Detailed proposal with main tasks, including sound methodology to achieve key outputs
- Proposal presents a realistic implementation timeline

Total Technical

70

Only proposals which receive a minimum of 60 points will be considered further.

## b. Financial Proposal

The total amount of points allocated for the price component is 30. The maximum number of points will be allotted to the lowest price proposal that is opened and compared among those invited firms/institutions which obtain the threshold points in the evaluation of the technical component.

All other price proposals will receive points in inverse proportion to the lowest price, e.g.,

$$\text{Max. score for price proposal} * \text{Price of lowest priced proposal}$$

$$\text{Score for price proposal X} = \text{-----}$$

$$\text{Price of proposal X}$$

## BUDGET AND PAYMENT MODALITIES

The payment of fees will be based on the submission of deliverables, as follows: Upon approval of the Inception report	30 %
Upon submission of a draft final evaluation report of satisfactory quality	30%
Upon approval of the final evaluation report and the PowerPoint presentation of the evaluation results	40%

As the JP is implemented by 6 UN agencies the payment modality is reflective of this specificity. Every agency participating in the evaluation is responsible for processing the payment for their portion of the evaluation. The details will be further discussed with the organization within the precontracting phase.

## CRITERIA FOR SELECTION

- o Having extensive evaluation experience with demonstrated understanding of evaluation principles and methodologies, including evaluability, capacity in an array of qualitative and quantitative evaluation methods, and UNEG Norms and Standards;
- o Previous solid experience of designing and leading theory-based evaluation designs and documented professional experience in conducting rigorous independent evaluations that meet professional evaluation standards;
- o Demonstrated experience/potential to bring a strong commitment to delivering timely and high-quality results, i.e., credible evaluations that are used for improving strategic decisions;
- o Having knowledge of the UN's human rights, gender equality and equity agendas;
- o Strong training and experience in disability and social protection will be an asset;
- o Prior research/evaluation experience with UNICEF or other UN agencies will be considered as an asset;
- o Having a strong management track record;
- o Ability to work independently, with limited regular supervision;

- o A qualified team for evaluation design/implementation, quantitative and qualitative data collection and analyses.

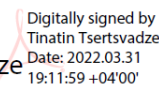
More detailed criteria are elaborated on pg. 11-12 under the External Evaluation Team requirements and competences.

**DOCUMENTS TO BE SUBMITTED:**

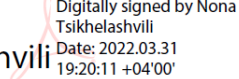
- Company’s profile;
- Project proposal with description of the proposed work plan and timeline;
- CVs of suggested experts;
- At least 2 references;
- Sample(s) of previous work;
- Information regarding organization’s bank account issued by Bank (stamped);
- filled VMIP Vendor Registration form (template is attached);
- Financial proposal.

Detailed information on application documents and procedure is provided in the Instructions to Proposers.

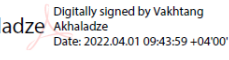
**Prepared by:**  
Tinatin Tsertsvadze, Social Services Officer

**Date:**  
Tinatin  
Tsertsvadze   
Digitally signed by  
Tinatin Tsertsvadze  
Date: 2022.03.31  
19:11:59 +04'00'

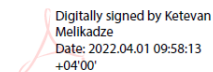
**Submitted by:**  
Nona Tsikhelashvili, OIC Child Protection Specialist

**Date:** Nona  
Tsikhelashvili   
Digitally signed by Nona  
Tsikhelashvili  
Date: 2022.03.31  
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**Endorsed by:**  
Vakhtang Akhaladze, Operations Manager

**Date:** Vakhtang Akhaladze   
Digitally signed by Vakhtang  
Akhaladze  
Date: 2022.04.01 09:43:59 +04'00'

**Endorsed by:**  
Ketevan Melikadze, OIC Deputy Representative

**Date:** Ketevan  
Melikadze   
Digitally signed by Ketevan  
Melikadze  
Date: 2022.04.01 09:58:13  
+04'00'

**Approved by:**  
Amy Clancy, OIC Representative

**Date:** Amy Clancy   
Digitally signed by Amy Clancy  
Date: 2022.04.01 10:11:28  
+04'00'

## Annex 2 - Evaluation Design Matrix

Evaluation Criteria and Key Questions	Specific Sub Questions	Data Collection Method	Data Sources
<b>Relevance of the JP interventions in relation to the national social protection priorities and policy and the needs of PwDs in Georgia</b>	How relevant was the JP to national priorities/policies at the national level and to the needs of the main vulnerable groups?	Desk research	Programme documents, national policies and strategies
		KII	Programme implementing agencies, government representatives, Parliament of Georgia, Public Defender Office, OPDs
	Were the planned outcomes and outputs of the JP relevant to the needs of persons with disabilities including, children, girls and women?	Desk research	Programme documents (including secondary data)
		KII	Programme implementing agencies
		FGD	Programme beneficiaries
	Have contextual factors been considered in the design and implementation and adaptation of Joint Programme?	Desk research	Programme documents
		KII	Programme implementing agencies
	Considering the COVID-19 outbreak how have the JP interventions on an outcome and output level remain relevant to the needs of PwDs?	Desk research	Programme documents (including secondary data)
		KII	Programme implementing agencies, government representatives, OPDs
	How relevant was the jointness in programme design, implementation, and management for addressing the country's development priorities and challenges?	Desk research	Programme documents, national policies and strategies
		KII	Programme implementing agencies, government representatives, Parliament of Georgia, Public Defender Office, OPDs
		Desk research	Programme documents (including secondary data)
To what extent the JP ensured the continuous participation of the vulnerable groups in implementation?	KII	Programme implementing agencies, OPDs	
	FGD	Programme beneficiaries	
	Desk research	Programme documents (including secondary data)	
<b>Effectiveness of the JP in achieving its programme objectives</b>	To what extent did the JP contribute to achieving its development objectives, especially around the 3 transformative results?	Desk research	Programme documents (including secondary data)
		KII	Programme implementing agencies, government representatives, Parliament of Georgia, Public Defender Office, OPDs
		FGD	Programme beneficiaries
	What programme interventions and strategies are (or are not) meeting the needs of persons with disabilities including, children, girls and women?	Desk research	Programme documents
		KII	Programme implementing agencies, government representatives, Parliament of Georgia, Public Defender Office, OPDs
		FGD	Programme beneficiaries
	What have been the major factors influencing the achievement or non-achievement of the programme objectives?	Desk research	Programme documents
		KII	Programme implementing agencies, government representatives, Parliament of Georgia, Public Defender Office, OPDs
		Desk research	Programme documents, national strategy

Evaluation Criteria and Key Questions	Specific Sub Questions	Data Collection Method	Data Sources
	To what extent has the JP contributed to accelerating the SDGs at the national level?	KII	Programme implementing agencies, government representatives, Parliament of Georgia, Public Defender Office, OPDs
	To what extent the JP produced a catalytic effect in terms of generating systems change across sectors to leave no one behind including children, girls and women with disabilities?	KII	Programme implementing agencies, government representatives, Parliament of Georgia, Public Defender Office, OPDs
	To what extent the JP contributed to achievement of UNDAF/CF outcome/s and national development priorities?	FGD	Programme beneficiaries
		Desk research	Programme documents, national strategy
		KII	Programme implementing agencies, government representatives, Parliament of Georgia, Public Defender Office
	<b>Efficiency of the JP outcomes and outputs - both qualitative and quantitative - in relation to the inputs provided</b>	How efficiently have the JP been managed in terms of its human/financial resources and organizational/governance structure?	KII
How efficient was coordination among agencies?		Desk research	Programme documents, national strategy
		KII	Programme implementing agencies
Was the JP intervention more efficient in comparison to what could have been done through a single agency intervention?		Desk research	Programme documents, national strategy
		KII	Programme implementing agencies
To what extent did the JP contribute to enhancing UNCT coherence and UNCT efficiency (reducing transaction costs)?		KII	Programme implementing agencies
		Desk research	Programme documents, national strategy
What are the comparative strengths of the joint programme in comparison to other social protection programmes?		KII	Programme implementing agencies
What are the comparative strengths of the coordination and convening roles of the joint programme?		KII	Programme implementing agencies
What are the comparative strengths and added values of individual agencies in the frames of the programme?	KII	Programme implementing agencies	
<b>Sustainability of the benefits of the JP implemented in Georgia</b>	To what extent has the strategy adopted by the JP contributed to sustainability of results, especially in terms of LNOB and the social protection system?	KII	Programme implementing agencies, government representatives, Parliament of Georgia, Public Defender Office, OPDs
	To what extent has the JP supported the long-term buy-in, leadership and ownership by the Government and other relevant stakeholders?	KII	Programme implementing agencies, government representatives, Parliament of Georgia, Public Defender Office, OPDs
	What were the major factors that influenced the achievement or non-achievement of sustainability of the project?	KII	Programme implementing agencies, government representatives, Parliament of Georgia, Public Defender Office, OPDs

Evaluation Criteria and Key Questions	Specific Sub Questions	Data Collection Method	Data Sources
	How likely will the results be sustained beyond the JP through the action of Government and other stakeholders and/or UNCTs?	KII	Programme implementing agencies, government representatives, Parliament of Georgia, Public Defender Office, OPDs
		FGD	DPOs, CSOs
	What are the lessons learned about the provision of JP?	KII	Programme implementing agencies

### Results Framework Indicators

Outcome / Output	Indicators	Baseline	Target 2021	Assumptions	Data Collection Method	Data Sources
Outcome 1	Indicator 1.1 - Improved inclusive and gender sensitive legislation and policy ensuring the rights of all PwDs	<ul style="list-style-type: none"> <li>- No comprehensive legislative act has been adopted by authorities on Persons with Disabilities including on women and young people with disabilities</li> <li>- Legislation on accessible environment and accessibility of information not in line with international standards;</li> <li>- National Human Rights Strategy 2014 – 2020 covers policy on PwD</li> </ul>	<ul style="list-style-type: none"> <li>- Regulations on accessibility approved;</li> <li>- Draft National Human Rights Strategy with relevant chapter on disability developed and submitted to the Parliament;</li> <li>- The draft law on Persons with Disabilities is considered by the Parliament of Georgia</li> </ul>	The Government of Georgia at central and local levels is willing to tackle the problems faced by PwDs;  UN organizations are in the best position and have relevant capacity to assist the Government in overcoming the critical barriers hindering the effective exercise of the rights of PwDs;	KII	Programme implementing agencies, government representatives, Parliament of Georgia, Public Defender Office, OPDs
	Indicator 1.2 - Existence of sex-desegregated data and analysis on disability prevalence, needs and barriers faced by PwDs	Limited data available from national census and MICS 6 (2018/2019)	Evidence-based disability report on prevalence, needs and barriers faced by PwDs		FGD	DPOs, CSOs
Output 1.1	Indicator 1.1.1 - Numbers of laws are amended/policies and strategies targeting PwDs and making explicit references to women and young people with disabilities	<ul style="list-style-type: none"> <li>- No comprehensive legislative act has been adopted by authorities on Persons with Disabilities including for women and young people with disabilities</li> <li>- No comprehensive compatibility study of Georgian legislation with CRPD standards was carried out in Georgia since ratification of UN CRPD</li> </ul>	<ul style="list-style-type: none"> <li>- Compatibility study of Georgian legislation with UN and COE standards on persons with disabilities is presented</li> <li>- Number and quality of Amicus briefs are considerable</li> <li>- Decisions of administrative and judicial authorities, as well as complaints submitted by lawyers substantially reflect are based on CRPD standards</li> </ul>		Desk research	Programme documents, legal acts, policies and strategies



Outcome / Output	Indicators	Baseline	Target 2021	Assumptions	Data Collection Method	Data Sources
		<ul style="list-style-type: none"> <li>- Number and quality of Amicus briefs submitted to administrative and judicial organs are law</li> <li>- Awareness of legal professionals on CRPD standards and respective case law of the European Court of Human Rights requires additional efforts to be implemented</li> <li>- No National Policies and Plans that guarantee access to SRHR for PwDs</li> </ul>	<ul style="list-style-type: none"> <li>- National Policies and Plans that address/integrated the issues of SRHR access for PwDs</li> </ul>	<ul style="list-style-type: none"> <li>DPOs and parents of children with disabilities are eager to intensify and upscale their advocacy campaigns and have the potential to become true agents of change;</li> </ul>		
	Indicator 1.1.2 - Number of Gov't legislative and policy initiatives supported ensuring participatory approach in the process of transforming disability assessment and social entitlement systems	5,200 people reached through See Every Colour UNICEF campaign	Disability Advisory Committee is formulated to ensure participatory process during the ongoing reform of disability assessment and status determination	Government initiates policy initiatives to address the institutionalization of the new disability status determination system, including allocating sufficient funds.	Desk research	Programme documents, legal acts, policies and strategies
Output 1.2	Indicator 1.2.1 - Existence of representative data on disability by age and sex	Limited data available from national census and MICS 6 (2018/2019)	Evidence-based disability report on prevalence, needs and barriers faced by PwDs		Desk research	Programme documents, progress reports, monitoring documents
	Indicator 1.2.2 - Existence of minimum administrative data sets on women and girls with disabilities by data producer	Not available	Minimum administrative data sets on women and girls with disabilities available			
	Indicator 1.2.3 - Existence of data collection system on VAWG against women and girls with disabilities	No data collection system available	Data system available			
	Indicator 1.2.4 - Number of CSO, Women's organizations and PwD representatives capacitated to advocate and monitor implementation of the rights of women with disabilities, including GBV and SRHR	<ul style="list-style-type: none"> <li>- 55 organizations work on rights of PwDs however the focus of their activities is not monitoring of CRPD implementation or social issues</li> <li>- Only two women's organizations work on women with disabilities</li> </ul>	<ul style="list-style-type: none"> <li>- Reports on implementation of CRPD prepared by local CSOs/DPOs</li> <li>- Monitoring report on the implementation of CRPD, ICPD PoA, CEDAW, BFPA, UPR, CSW commitments on women and girls with disabilities available</li> <li>- Representatives of Network of organizations of Women with Disabilities further capacitated</li> </ul>			

Outcome / Output	Indicators	Baseline	Target 2021	Assumptions	Data Collection Method	Data Sources
Output 1.3	Indicator 1.3.1 The capacity of the State Employment Agency, private sector and local municipalities to promote employment of PwDs strengthened	<ul style="list-style-type: none"> <li>- Job coaches and local self-governments have low capacity to promote employment of PwDs</li> <li>- LSG PwD councils have low capacity to limited data on awareness on obligations of employers for providing social protection schemes of PwD employees</li> <li>- No community centres for PwDs existing in Georgia</li> </ul>	<ul style="list-style-type: none"> <li>- All job coaches assigned to employment of PwDs are trained and have the capacity to facilitate employment of PwDs Relevant business organizations conduct relevant trainings</li> <li>- At least 1 community centre established in Georgia, including in Abkhazia providing social protection and employment opportunities for PwDs</li> </ul>		Desk research KII	<p>Programme documents, progress reports</p> <p>State Employment Agency</p>
Outcome 2	Indicator 2.1 - Number of PwD assessed through from a new disability status determination system	376 (as of September 2019)	At least 400		Desk research	Secondary data from implementing partners
	Indicator 2.2 - Systems strengthened to provide rights based social services, SRH and GBV integrated services for PwDs, including women and young persons with disabilities	<ul style="list-style-type: none"> <li>- No national capacity to provide disability friendly SRHR and GBV services for women and young persons with disabilities</li> <li>- LSGs have low capacity to provide social services to PwDs</li> </ul>	<ul style="list-style-type: none"> <li>- SOPs integrating disability friendly services in to the national mechanism on SRHR, VAW developed</li> <li>- At least 70% of activities for the reporting year implemented by target municipalities</li> </ul>		Desk research KII	Rights based Service Provision Guidelines, protocols, SOP, Reports; Programme implementing agencies, government representatives, Public Defender Office, OPDs
Output 2.1	Indicator 2.1.1 - Number of health facilities that have the capacity to apply the new disability status determination system	6	2		Desk research	MoH data
	Indicator 2.1.2 - A mechanism for monitoring the new status determination system in place	No mechanism in place	Workshops for Staff organized monitor the status determination system		KII	Programme implementing agencies, government representatives
Output 2.2	Indicator 2.2.1 - Number of guiding documents adopted for effective realization of SRHR and GBV for women and young persons with disabilities	0	2		Desk research	Rights based Service Provision Guidelines, protocols
	Indicator 2.2.2 - New entitlement schemes for PwD modelled and costed	Entitlement's scheme based on medical model of disability	Design and costing of a new entitlement schemes (cash and services) for PwDs based on social model		Desk research	Concept on the new entitlement schemes

Outcome / Output	Indicators	Baseline	Target 2021	Assumptions	Data Collection Method	Data Sources
	Indicator 2.2.3 - New social services for PwDs introduced in selected municipalities	Limited data available on quality of services delivery to PwDs in selected municipalities	At least 90% of PwDs in the selected municipalities have access to introduced services		KII FGD	OPDs Programme beneficiaries
Outcome 3	Indicator 3.1 - Relevant communication strategies, guiding policy documents and protocols, are elaborated to better respond to the needs of PwDs amidst the pandemic	No mechanisms, protocols, communication strategies and mitigation measures are in place	N/A		Desk research	Communication strategies, policy documents and protocols on Covid19
Output 3.1	Indicator 3.1.1 - N or people reached out via communication content	0	1000		Desk research	Programme progress reports, social media monitoring data
Output 3.2	Indicator 3.2.1 - Number of small grants provided to women's CSOs	0	N/A		Desk research KII	Programme documents Programme implementing agency
Output 3.3:	Indicator 3.3.1 - Number of guidelines/protocols on treating PwDs on COVID-19 Number of people reached through Videos and printing materials on COVID-19	- No guidelines/protocols on place to treat PwDs during global pandemic  - No informational materials on COVID-19 on place	N/A		Desk research	Guidelines/protocols, social media statistics, progress reports
Output 3.4	Indicator 3.4.1 - Monitoring report/research on mainstreaming the PwD needs in rapid-response and crisis-mitigation measures; Designing an online vocational education courses for PwDs in practical professions to mitigate the negative social and economic impact of pandemic on PwDs	- No monitoring report/ research is in place to illustrate how the rights of PwDs and need were mainstreamed in rapid response and crisis-mitigation measures during the Pandemic  - No special online vocational education courses are in place	N/A		Desk research  KII	Monitoring report/research, programme documents  Programme implementing agency

## Annex 3. The Detailed list of Documents Analysed

In a frame of the desk research following documents were reviewed:

### **Laws, By-laws, Ordinance, Decree etc.:**

- Approved Law on the Rights of Persons with Disabilities
- Approved ordinance of Inter-Ministerial Committee on Rights of Persons with Disabilities
- National Standards on Safe patient management in mental health out-patient services during COVID-19;
- National Standards on Safe patient management in mental health in-patient services during COVID-19;
- Order of the Ministry of Internally Displaced Persons from the Occupied Territories, Labor, Health and Social Affairs on establishment of the PWDs Council together with the Council statute.
- National Referral Mechanism on Gender Based Violence and Violence Against Women
- Government Decree and Programme on Social Rehabilitation and Child Care

### **MoU, Strategies, Action plans, etc.:**

- Memorandum of Understanding between The Administration of the Government of Georgia, The Ministry of Education, Science, Culture and Sport of Georgia, and The South Caucasus Presence of the Office of the United Nations High Commissioner for Human Rights
- 2022 Action Plan of the Ministry of Internal Affairs on the Protection of the Rights of Persons with Disabilities;
- Parliament's draft Action Plan for 2022 on the Protection of the Rights of Persons with Disabilities;
- UNFPA inputs to the draft Human Rights Strategy - Submitted to the Human Rights Secretariat.

### **Studies, reports, recommendations etc.:**

- Recommendations on the Implementation of National Accessibility Standards in Georgia
- Opinions of the NGO/OPD/CSO on the draft Human Rights Strategy
- English and Georgian language versions of statistical publication "Women and children with disabilities in Georgia – An overview of data"
- English and Georgian language versions of statistical publication "Mapping Gender and Disability Data in Georgia: Recommended indicators and actions"
- English and Georgian language versions of Issue Brief on Women with Disabilities
- A call for proposals for SDG under which PHR in partnership with WR were selected as responsible parties
- Concept note of the Final project meeting with women with disabilities/project beneficiaries capturing key project aspirations and results
- Concept note of the meeting with CEDAW Committee members and women and girls with disabilities in Georgia
- CEDAW Shadow report on women and girls with disabilities in Georgia
- Study on Goods and Services Required (extra costs) for Children with Disabilities
- Brief desk review on the social protection systems for persons with disabilities in Europe, with a specific focus on children
- Monetary and Non-Monetary State Expenditures in Georgia for Children with Disabilities
- Draft proposal of a renewed social protection scheme for children with disabilities in Georgia
- Compatibility study of Georgian legislation with UN and COE standards on persons with disabilities
- analysis of decisions of administrative and judicial authorities, as well as complaints submitted by lawyers substantially reflect are based on CRPD standards

- The Situation in Human Rights and Freedoms in Georgia(2019, 2020), prepared by ombudsmen
- ASSESSMENT OF THE NEEDS OF WOMEN AND GIRLS WITH DISABILITIES AND THE STATE OF PROTECTION OF THEIR RIGHTS IN GEORGIA (2022), prepared by ombudsmen
- Situation of Women's Sexual and Reproductive Health and Rights in Psychiatric and Public Care Institutions (2020) prepared by ombudsmen
- Assessment of Legal Framework and Policies on Sexual and Reproductive Health and Rights of Women and Girls with Disabilities in Georgia and Specific Recommendations in Relation to the UN Convention on the Rights of Persons with Disabilities.
  - Access of PwDs on Criminal Justice.
  - Curricula of the Police Academy of MIA
  - Curricula of the Training Centre of LAS
  - Shadow report on the rights of PwDs during the COVID 19.
  - Special Plaintiff – best practices
  - Compilation of CRPD Committee jurisprudence and ECtHR case-law.

**Programme documents, progress reports etc.:**

- JP project document
- Theory of Change
- JP Log frame
- JP Work Plan
- Annual progress reports
- Final progress report by UN Women's implementing partner NGO Partnership for Human rights PHR
- Final progress report by UN Women's implementing partner NGO Women's Fund

## Annex 4. The Detailed List of KIIs

#	Respondent Name, Surname	Nominated by	Organization
1	Sopo Benashvili	UN OHCHR	UN OHCHR representative
2	Guliko Matcharashvili	UNDP	Administration of Government of Georgia
3	Maka Peradze	OHCHR, UNFPA	Head of Human Rights Secretariat
4	Lela Akiashvili	OHCHR, UNFPA	Former Advisor of MP in Gender and Human Rights
5	Razhden Kuprashvili	OHCHR	Director of Legal Aid Service
6	Nino Meladze	OHCHR	Deputy Director of Legal Aid Service
7	Ekaterine Meshveliani	OHCHR	Deputy Head of Human Rights Department of MIA
8	Bela Pipia	OHCHR, UNFPA	Representative of Human Rights Department
9	Vakhtang Gabrichidze	OHCHR	Head of Police Academy
10	Anna Arganashvili	OHCHR, UN Women	PHR, Implementin partner "Partnership for Human Rights"
11	Rusudan Kokhodze; Nino Jomarjidze	UNDP	UNDP representatives
12	Rati Ionatamishvili	UNDP	Parliament of Georgia, Deputy Head of the Legal Committee
13	Tamila Barkalaia	UNDP, UNICEF	Ministry of IDPs, Labour, Health and Social Affairs, Deputy Minister
14	Tatia Gvaramadze	UNDP, UNFPA	Ministry of IDPs, Labour, Health and Social Affairs, Head of the Social Protection Division
15	Tamta Babunashvili	UNDP	State Care Agency
16	Nino Veltauri	UNDP	State Employment Agency
17	Ekaterine Skhiladze	UNDP	Office of the Public Defender of Georgia, Deputy Public Defender
18	Tamar Zhgenti	UNDP	Ministry of Education and Science
19	Nana Ckheidze	UNDP	Ministry of Economy and Sustainable Development
20	Tamar Robakidze	UNDP	Former staff member of the AoG
21	Maguli Shaghashvili	UNDP	UNDP consultant
22	Nana Lomadze	UNDP	NGO Together for Real Changes
23	Irina Inasaridze	UNDP	NGO Asociacion Anika
24	Aslan Saganelidze	UNDP	Ambrolauri Municipality Assembly, Head of the Assembly
25	Inga Diakonovi	UNDP	Akhalsike Municipal Hall, Head of the Social Division
26	Rusudan Shavadze	UNDP	Shuakhevi Municipal Hall, Deputy Mayor
27	Nino Makhashvili	UNDP	Global Initiative on Psychiatry – Tbilisi
28	Nutsi Odisharia	UNFPA	UNFPA representative
29	Lika Jalaghania	UNFPA	Expert/Consultant

30	Tamar Macharshvili	UNFPA, UN Women	Head of Network of Women with Disabilities, Implementing partner "Women and Reality"
31	Esma Gumberidze	UNFPA, UN Women	Member of the Network of Women with Disabilities, Member of the Platform for the Rights of Women and Girls with Disabilities
32	Keti Gigineishvili	UNFPA	Georgian Association of Social Workers, Experts/Trainers
33	Nana Kalmakhelidze	UNFPA	Ministry of IDPs, Labour, Health and Social Affairs, Head of the Social Protection Division
34	Dr. Zaza Bokhua	UNFPA	Director of the post diploma and continues education and Tbilisi State Medical University
35	Keti Melikadze	UNICEF	UNICEF representative
36	Tinatin Tsertsvadze	UNICEF	UNICEF representative
37	Nino Jinjolava	UNICEF	Ministry of Internally Displaced Persons, Labor, Health and Social Affairs
38	Jeremy Gaskill	UNICEF	Mac Georgia
39	Ketevan Patsatsia	UNICEF	Young Economists Association of Georgia
40	Tamar Vashakidze, Natia Mestvirishvili,	UN Women	Governance and Participation in Public Life Programme Analyst; Gender Data Specialist, UN Women
41	Salome Chagelishvili	UN Women	Implementing partner "Women's Fund"
42	Maiko Chitaia	UN Women	Implementing partner "Women from Georgia"
43	Lia Charekishvili	UN Women	GEOSTAT, social statistics department
44	Giorgi Kurtsikashvili	WHO	WHO Country Office Georgia
45	Cathal Morgan	WHO	WHO headquarters

## Annex 5. The KII and FGD Guides

### Annex 5.1 – KII Guide. Category I

#### **Questionnaire Guide for Category I -JP Implementing agencies:**

UNICEF, UNFPA, OHCHR, UNWOMEN, WHO, UNDP. UN RC

**I. Questions to assess to what extent the main transformative results were accomplished during the JP implementation using the ToC, in terms of: (i) coordination, collaboration and organisational structures formed for transforming the social protection for persons with disabilities in Georgia (ii) quality and delivery of the proposed activities within the JP (iii) consultation and participation with the disability community to promote the participatory approaches within the JP; (iv) the internal M&E system;**

1. Please assess the quality and delivery of activities by your agency towards each JP outcome (specific agencies interviewed on issues addressed by them according to the revised Workplan 2021)? What were the parts that got revised due to Covid-19?
2. Please specify how effective was JP in coordinating the project among different agencies and state institutions? How relevant were having the internal M&E systems for achieving this goal of efficient coordination among different UN bodies and state organs?
3. Was the project ensuring consultation and participation with the disability community to promote the participatory approaches within the JP?

**II. Questions to assess the relevance, effectiveness, efficiency, and sustainability of the joint programme from its inception to its completion, with focus on its ability to respond to the needs of people with disabilities;**

1. What were the ways in which the project help to a. improve national legislation on persons with disabilities, b. develop draft National Human Rights Strategy with relevant chapter on disability, c. improve national regulations on accessibility, d. address the issues of SRHC for PwDs in national strategies and legislation, e. support creation of the CRPD implementation mechanism or other participatory platforms for PwD participation in policy planning and monitoring f. influence administrative and judicial authorities to improve PwD rights protection standards g. support universal design approach integration in the policy documents?
2. Did the program achieve to acquire: sex-desegregated data and analysis on disability prevalence, needs and barriers faced by PwDs; minimum administrative data sets on women and girls with disabilities by data producers; data collection systems on VAWG against women and girls with disabilities;
3. What was the progress and success achieved in promoting employment among PwDs? How effective was the project in achieving this output (what were the specific activities revised according to Workplan due to Covid-19 and how effective were the revisions)?
4. Were the CSO, Women’s organizations and PwD representatives capacitated to advocate and monitor implementation of the rights of women with disabilities, including GBV and SRHR
5. To what extent did the project achieve that the social protection system is transformed in line with Social Model? – a. Is there mechanism of social model status determination system in place? b. How many health facilities have the capacity to apply new disability



status determination system? c. To what extent the governmental bodies use the analytical documents prepared as part of the project for increasing the social protection covering for PwDs in Georgia? d. How did the national referral mechanisms improve for integrating disability friendly services in them? E. To what did the capacities of local municipalities increase to provide services for PwDs? F. To what extent did the universal design approach was implemented at HEIs?

6. To what extent did the project achieve Outcome 3 – a. To what extent the information on pandemic became accessible for PwDs/CwD parents and number of people reached? b. What type of support was provided to CSOs and state facilities to handle the pandemic and how effectively it was utilized? c. To what extent did the small grants for women's CSOs address the rights and needs of women and girls with disabilities and what results were achieved through grants? d. To what extent the guidelines/protocols provided for the medical institutions on how to treat PwDs during COVID-19 had been useful in practice and did the PwDs experience any negative or positive influence of existence of such guidelines? What kind of remote supervisory and psychological services were provided for PwDs during pandemic? How the monitoring reports on mainstreaming the PwD needs in rapid-response and crisis-mitigation measures has appeared useful and helped the GoG in improvement of actions? Type of online VET courses for PwDs and its usefulness for them?

### **III. Question to examine to what extent the JP activities influenced the improvement of the situation of vulnerable groups identified in the JP document**

1. Did the project achieve more enabling environment through disability inclusive legislation and evidence-based policy?
2. How did the legislative and policy changes improve participation, monitoring and advocacy opportunities/capacities for PwDs, and in particular for women with disabilities?
3. Has the project achieved higher visibility and awareness about PwD rights realization issues in Georgia, and decreased stigma on disability?
4. Did the project expand employment opportunities for PwDs?
5. What was the projects success at establishing community centers in different municipalities and how did service provision improve for PwDs in those regions?

### **IV. What are the recommendations regarding lessons learned, good practices and innovations that can be applied within other programmes?**

### **Questionnaire Guide for Category II - Governmental Bodies:**

Advisor of Prime Minister on human rights (3), Ministry of IDPs, Labour, Health and Social Affairs, Parliament of Georgia, State Care agency, State employment agency, Office of the Public Defender of Georgia, Ministry of Education and Science, Ministry of Economy and Sustainable Development, Administration of Government of Georgia, Ministry of Internal Affairs, Police Academy, Administration of Government of Georgia, Legal aid Service, National statistics office of Georgia

#### **II. Questions to assess to what extent the main transformative results were accomplished during the JP implementation:**

4. Please assess the support received by your institution as part of the JP (specific institutions interviewed will be address by questions according to the revised Workplan 2021)? What were the parts that got revised due to Covid-19?
5. Please specify how effective was JP in coordinating the project among different agencies and state institutions?
6. Was the project ensuring consultation and participation with the disability community to promote the participatory approaches within the JP?

#### **II. Questions to assess the relevance, effectiveness, efficiency, and sustainability of the joint programme from its inception to its completion, with focus on its ability to respond to the needs of people with disabilities;**

7. What were the ways in which the project help to a. improve national legislation on persons with disabilities, b. develop draft National Human Rights Strategy with relevant chapter on disability, c. improve national regulations on accessibility, d. address the issues of SRHC for PwDs in national strategies and legislation, e. support creation of the CRPD implementation mechanism or other participatory platforms for PwD participation in policy planning and monitoring f. influence administrative and judicial authorities to improve PwD rights protection standards g. support universal design approach integration in the policy documents?
8. Did the program achieve to acquire: sex-desegregated data and analysis on disability prevalence, needs and barriers faced by PwDs; minimum administrative data sets on women and girls with disabilities by data producers; data collection systems on VAWG against women and girls with disabilities;
9. What was the progress and success achieved in promoting employment among PwDs? How effective was the project in achieving this output (what were the specific activities revised according to Workplan due to Covid-19 and how effective were the revisions)?
10. To what extent did the project achieve that the social protection system is transformed in line with Social Model? – a. Is there mechanism of social model status determination system in place? b. How many health facilities have the capacity to apply new disability status determination system? c. To what extent the governmental bodies use the analytical documents prepared as part of the project for increasing the social protection covering for PwDs in Georgia? d. How did the national referral mechanisms improve for integrating disability friendly services in them? E. To what did the capacities of local municipalities increase to provide services for PwDs? F. To what extend did the universal design approach

was implemented at HEIs? G. To what extent the local government uses guiding documents elaborated within the project to work with the people with disabilities?

**V. Question to examine to what extent the JP activities influenced the improvement of the situation of vulnerable groups identified in the JP document**

6. Did the project achieve more enabling environment through disability inclusive legislation and evidence-based policy?
7. How did the legislative and policy changes improve participation, monitoring and advocacy opportunities/capacities for PwDs, and in particular for women with disabilities?
8. Did the project expand employment opportunities for PwDs?
9. What was the projects success at establishing community centers in different municipalities and how did service provision improve for PwDs in those regions?
10. What was changed for PwDs in the local municipalities after project intervention?
11. How useful/practical were the guidelines and protocols for medical personnel treating PwDs infected with Covid19 and personnel in residential facilities?
12. Did the PDO improve the monitoring of the situation of PwDs in light of pandemic?
13. To what extent the PwD rights were considered in Government Response to Covid-19?

**VI. What are the recommendations regarding lessons learned, good practices and innovations that can be applied within other programmes?**

**Questionnaire Guide for Category III - Local Municipalities:**

Representatives of Shuakhevi, Akaltsikhe and Ambrolauri Municipalities

**III. Questions to assess to what extent the main transformative results were accomplished during the JP implementation:**

7. Please assess the support received by your institution as part of the JP (specific institutions interviewed will be addressed by questions according to the revised Workplan 2021)? What were the parts that got revised due to Covid-19?
8. Please specify how effective was JP in coordinating the project among different agencies and state institutions?
9. Was the project ensuring consultation and participation with the disability community to promote the participatory approaches within the JP?

**II. Questions to assess the relevance, effectiveness, efficiency, and sustainability of the joint programme from its inception to its completion, with focus on its ability to respond to the needs of people with disabilities;**

11. Were the CSO, Women's organizations and PwD representatives capacitated to advocate and monitor implementation of the rights of women with disabilities, including GBV and SRHR

**VII. Question to examine to what extent the JP activities influenced the improvement of the situation of vulnerable groups identified in the JP document**

14. Did the project achieve more enabling environment through disability inclusive legislation and evidence-based policy?
15. How did the legislative and policy changes improve participation, monitoring and advocacy opportunities/capacities for PwDs, and in particular for women with disabilities?
16. Has the project achieved higher visibility and awareness about PwD rights realization issues in Georgia, and decreased stigma on disability?
17. Did the project expand employment opportunities for PwDs?
18. What was the project's success at establishing community centers in different municipalities and how did service provision improve for PwDs in those regions?

**VIII. What are the recommendations regarding lessons learned, good practices and innovations that can be applied within other programmes?**

## **Questionnaire Guide for Category IV - NGO/SCOs/Academia, Consulting Companies:**

Partners for Human rights (PHR), NGO Association Anika, Women From Georgia, Women's Fund, Platform for the rights of Women and Girls with disabilities, Young Economist associations of Georgia, ACT, Georgian Associations of Social Workers, Tbilisi State Medical University, Project experts/trainers.

### **IV. Questions to assess to what extent the main transformative results were accomplished during the JP implementation using the ToC, in terms of: (i) coordination, collaboration and organisational structures formed for transforming the social protection for persons with disabilities in Georgia (ii) quality and delivery of the proposed activities within the JP (iii) consultation and participation with the disability community to promote the participatory approaches within the JP; (iv) the internal M&E system;**

10. Please assess the quality and delivery of the support received from the JP by you (specific organizations interviewed on activities involving them according to the revised Workplan 2021)? What were the parts that got revised due to Covid-19?
11. Was the project ensuring consultation and participation with the disability community to promote the participatory approaches within the JP?

### **II. Questions to assess the relevance, effectiveness, efficiency, and sustainability of the joint programme from its inception to its completion, with focus on its ability to respond to the needs of people with disabilities;**

12. What were the ways in which the project help to a. improve national legislation on persons with disabilities, b. develop draft National Human Rights Strategy with relevant chapter on disability, c. improve national regulations on accessibility, d. address the issues of SRHC for PwDs in national strategies and legislation, e. support creation of the CRPD implementation mechanism or other participatory platforms for PwD participation in policy planning and monitoring f. influence administrative and judicial authorities to improve PwD rights protection standards g. support universal design approach integration in the policy documents?
13. Did the program achieve to acquire: sex-desegregated data and analysis on disability prevalence, needs and barriers faced by PwDs; minimum administrative data sets on women and girls with disabilities by data producers; data collection systems on VAWG against women and girls with disabilities;
14. What was the progress and success achieved in promoting employment among PwDs? How effective was the project in achieving this output (what were the specific activities revised according to Workplan due to Covid-19 and how effective were the revisions)?
15. Were the CSO, Women's organizations and PwD representatives capacitated to advocate and monitor implementation of the rights of women with disabilities, including GBV and SRHR
16. To what extent did the project achieve that the social protection system is transformed in line with Social Model? – a. Is there mechanism of social model status determination system in place? b. How many health facilities have the capacity to apply new disability status determination system? c. To what extent the governmental bodies use the analytical

documents prepared as part of the project for increasing the social protection covering for PwDs in Georgia? d. How did the national referral mechanisms improve for integrating disability friendly services in them? E. To what did the capacities of local municipalities increase to provide services for PwDs? F. To what extent did the universal design approach was implemented at HEIs? G. What are the main challenges to transform the medical model into the social model approach? H. To what extent the government is ready to use the social model approach? What kind of support do they need?

17. To what extent did the project achieve Outcome 3 – a. To what extent the information on pandemic became accessible for PwDs/CwD parents and number of people reached? b. What type of support was provided to CSOs and state facilities to handle the pandemic and how effectively it was utilized? c. To what extent did the small grants for women's CSOs address the rights and needs of women and girls with disabilities and what results were achieved through grants? d. To what extent the guidelines/protocols provided for the medical institutions on how to treat PwDs during COVID-19 had been useful in practice and did the PwDs experience any negative or positive influence of existence of such guidelines? What kind of remote supervisory and psychological services were provided for PwDs during pandemic? How the monitoring reports on mainstreaming the PwD needs in rapid-response and crisis-mitigation measures has appeared useful and helped the GoG in improvement of actions? Type of online VET courses for PwDs and its usefulness for them?

**IX. Question to examine to what extent the JP activities influenced the improvement of the situation of vulnerable groups identified in the JP document**

19. Did the project achieve more enabling environment through disability inclusive legislation and evidence-based policy?
20. How did the legislative and policy changes improve participation, monitoring and advocacy opportunities/capacities for PwDs, and in particular for women with disabilities?
21. Has the project achieved higher visibility and awareness about PwD rights realization issues in Georgia, and decreased stigma on disability?
22. Did the project expand employment opportunities for PwDs?
23. What was the projects success at establishing community centers in different municipalities and how did service provision improve for PwDs in those regions?

**X. What are the recommendations regarding lessons learned, good practices and innovations that can be applied within other programmes?**

## Annex 5.5 – FGD Guide

### Questionnaire Guide for FGDs

#### Introduction

#### FGD rules

#### **I. Questions related to the state of PwDs in Georgia**

1. Please assess the conditions of PwDs in Georgia (in your municipalities)
2. Please specify the main challenges that the PwDs are facing in Georgia (in your municipalities). Particularly, what are the main social, economic, educational and cultural challenges?
3. What kind of social services are accessible for the PwDs in your country/municipalities? What kind of new social services for PwDs were introduced or improved in selected municipalities in frame of JP? How?
4. Let us discuss about the policy changes that appeared in last two years for PwDs? Are you informed about it? If yes, how would you assess these changes? Does it provide inclusive and gender sensitive approaches ensuring the rights of all PwDs?

#### **II. Involvement in JP activities/trainings**

1. Please, specify what kind of programme activities you were involved in?
2. How relevant were these activities to the needs of PwDs in Georgia and improvement of their conditions? Why?
3. In your opinion how these activities changed your knowledge related to the issues with disabilities?
4. In your opinion how the involvement in program activities (for instance trainings) have changed your working practices related to the PwDs?
5. How do you assess these changes?
6. What was changed on the policy level related to PwDs after involvement in trainings/other activities provided by JP?
7. What was the project success at establishing community centers in different municipalities and how did service provision improve for PwDs in those regions?

#### **III. Question to examine to what extent the JP activities influenced the improvement of the situation of vulnerable groups identified in the JP document**

24. Did the project activities where you were involved provide/ensure more enabling environment for PwDs?
25. Has the project achieved higher visibility and awareness about PwD rights realization issues in Georgia, and decreased stigma on disability?
26. How useful/practical were the guidelines and protocols for medical personnel treating PwDs infected with Covid19 and personnel in residential facilities?

#### **IV. Recommendation**

1. In your opinion what kind of policy changes should be implemented to improve the environment for the PwDs in Georgia/your municipalities?
2. What kind of services should be provided for PwDs to improve environment for them?

## Annex 6. The Document of Ethical Clearance from NCDC



დაავადებათა კონტროლისა და  
საზოგადოებრივი ჯანმრთელობის  
ეროვნული ცენტრი

GEORGIAN NATIONAL CENTER FOR DISEASE  
CONTROL AND PUBLIC HEALTH

### Institutional Review Board Letter

**PI:** Ilona Gogia,  
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#### **IRB # 2022-061**

This letter is an official notification that National Centre for Disease Control and Public Health Institutional Review Board has finished reviewing the protocol of the project “**Transforming Social Protection for Persons with Disabilities in Georgia**” and approved the study protocol for the Protection of Human Subjects.

This determination is valid from **June 29, 2022 until June 29, 2023**. If you wish to continue your research after this date, you must complete and submit a Continuation Application.

Level of review: Expedited  
Date of review: **June 29, 2022**

You are responsible for immediately informing the Institutional Review Board of any changes to your protocol/procedures/data collection tools/consent forms before they are implemented, and of any previously unforeseen risks to the research participants.

For further assistance please contact us at (995-322) 39 89 46 (ext. 606) or via email at [irb.ncdc@gmail.com](mailto:irb.ncdc@gmail.com).

Sincerely,

Marina Topuridze, MD, MS  
IRB (IRB00002150) Chair  
National Center for Disease Control and Public Health of Georgia