

AHMET TARIK BIYIKLIOĞLU

SOME DISABILITIES ARE MORE DESERVING

Bilkent University 2023

SOME DISABILITIES ARE MORE DESERVING:
THE CASE OF ASSISTIVE TECHNOLOGY POLICIES IN THE US AND
TÜRKİYE

A Master's Thesis

by
AHMET TARIK BIYIKLIOĞLU

Department of
Political Science and Public Administration
İhsan Doğramacı Bilkent University
Ankara
July 2023

To all people with disabilities



SOME DISABILITIES ARE MORE DESERVING: THE CASE OF ASSISTIVE TECHNOLOGY
POLICIES IN THE US AND TÜRKİYE

By Ahmet Tarık Bıyıklıoğlu

I certify that I have read this thesis and have found that it is fully adequate, in scope and in quality, as a thesis for the degree of Master of Political Science and Public Administration.

Hasan Tolga Bölükbaşı
Advisor

I certify that I have read this thesis and have found that it is fully adequate, in scope and in quality, as a thesis for the degree of Master of Political Science and Public Administration.

Can Umut Çiner
Examining Committee Member

I certify that I have read this thesis and have found that it is fully adequate, in scope and in quality, as a thesis for the degree of Master of Political Science and Public Administration.

Onur Özgöde
Examining Committee Member

Approval of the Graduate School of Economics and Social Sciences

Refet S. Gürkaynak
Director

SOME DISABILITIES ARE MORE DESERVING:
THE CASE OF ASSISTIVE TECHNOLOGY POLICIES IN THE US AND
TÜRKİYE

The Graduate School of Economics and Social Sciences
of
İhsan Doğramacı Bilkent University

by

AHMET TARIK BIYIKLIOĞLU

In Partial Fulfillment of the Requirements for the Degree of MASTER OF
POLITICAL SCIENCE AND PUBLIC ADMINISTRATION

THE DEPARTMENT OF
POLITICAL SCIENCE AND PUBLIC ADMINISTRATION
İHSAN DOĞRAMACI BİLKENT UNIVERSITY
ANKARA

July 2023

ABSTRACT

SOME DISABILITIES ARE MORE DESERVING: THE CASE OF ASSISTIVE TECHNOLOGY POLICIES IN THE US AND TÜRKİYE

Bıyıklıoğlu, Ahmet Tarık

M.A., Department of Political Science and Public Administration

Supervisor: Assoc. Prof. Dr. Hasan Tolga Bölükbaşı

July 2023

Welfare states around the world generously cover vital but very expensive assistive technology like artificial limbs for disabled veterans, whereas only a fraction of these costs is covered for disabled civilians. These stark disparities in social rights among veterans and civilians categorically define disability policies across different countries. How and why are these policies similar across different cases? I address reasons for surprisingly similar outcomes by comparing the structure of disability policies in the US and Türkiye in the post-1990s. Employing a Most Different System Design, I rely on data sources like official statistics, legislative documents, and congressional and parliamentary debates. The US and Türkiye have dissimilar institutional features many of which may potentially be prime candidates for explaining the inegalitarian outcome of disability policies. I argue that patriotism, an informal rule shaping key state actors' behavior, effectively structures who gets what, when, and how in disability policies by (i) assigning a higher normative status to disabled veterans and (ii) shaping how key policy actors perceive conditions of deserving disabilities in both countries. This results in inegalitarian disability policy outcomes despite the formal rule of human rights dictating to treat all people with disabilities equally.

Keywords: welfare states, public policy, disability policy, disability studies, assistive technology

ÖZET

BAZI ENGELLİLER DAHA ÇOK HAK EDER: AMERİKA VE TÜRKİYE’DEKİ YARDIMCI TEKNOLOJİ POLİTİKALARI

Bıyıklıoğlu, Ahmet Tarık

Yüksek Lisan, Siyaset Bilimi ve Kamu Yönetimi Bölümü

Tez Danışmanı: Doç. Dr. Hasan Tolga Bölükbaşı

Temmuz 2023

Sosyal devletler engelliler için hayati önem taşıyan ancak çok pahalı olan yapay uzuv gibi destekleyici teknolojileri gazilerine cömertçe karşılarken, engelli siviller için bu maliyetlerin yalnızca küçük bir kısmını karşılıyor. Gaziler ve siviller arasındaki sosyal haklardaki bu keskin eşitsizlikler, dünyadaki sosyal devletlerin engelli politikalarındaki kategorik farklılıkları tanımlamaktadır. Bu politikalar nasıl ve neden birbirinden farklı ülkelerde şaşırtıcı derecede benzer sonuçlara yol açıyor? 1990'lar sonrasında Amerika Birleşik Devletleri ve Türkiye'deki engelli politikalarının yapısını karşılaştırarak, farklı ülkelerdeki şaşırtıcı benzerliklerin nedenlerini ele alıyorum. En farklı sistem tasarımı dayanan bu tezde, politika programlama belgelerini, bilgi notlarını, resmi istatistikleri, yasal belgeleri, kongre ve parlamento tartışmalarını inceliyorum. İki ülke de refah rejimleri ve siyasi sistemleri gibi bu eşitsizliği açıklamayı beklediğimiz faktörlerde tamamen farklı özelliklere sahip. Ancak iki ülkede de insan hakları politikaları tam tersini dikte etmesine rağmen engelli gaziler sivillere karşı çok daha kapsamlı ve cömert haklara sahipler. Buna sebep olarak vatanseverliğin, önemli politika yapıcı aktörlerin davranışlarını şekillendiren bir enformel kurum olarak (i) engelli gazilere daha yüksek normatif bir statü atadığını ve (ii) hak eden engelliliklerin nasıl algıladıklarını şekillendirerek engellilik politikalarında kimin neyi ne zaman ve nasıl alacağını etkili bir şekilde yapılandırdığını savunuyorum.

Anahtar Kelimeler: refah devletleri, kamu politikaları, engelli politikaları, engellilik araştırmaları, destekleyici teknoloji

ACKNOWLEDGEMENTS

I would like to start by thanking my advisor Professor Tolga Bölükbaşı, who has, and will always, be a guide for me not only academically but also as a mentor. I am forever indebted to his advisory and guidance. I would have not considered this path if I did not have the chance to work under his supervision.

My dear friends and colleagues Emina Hasanagic, Kaan Akçay, Atakan Gümüşbaş, Ali Berk İdil, and Abdulkadir Deveci, from the bottom of my heart, thank you so much for thinking and working with me in this project. Without your valuable contribution, I do not think this project would have been anywhere close to its current state. I would like to give a special thanks to my dear friend Atakan Gümüşbaş, without whom I would have not consider doing an MA. Thank you so much for being great friends.

I would like to thank Bilkent POLS for providing the opportunity to do this project. My special thanks to great people of Bilkent, Zehra Hamamcı and Ece Engin, you are always there for us, and I feel grateful to know and have friends like you.

I think I can never repay what my family has done for me. I am eternally grateful to them, especially my mother—the most beautiful women on earth—, who has been actively thinking with me throughout this project.

Lastly, I would like to thank Professor Alev Çınar, who has helped me built this project from the ground up. I am also thankful to my committee, Professor Can Umut Çiner and Professor Onur Özgöde, for their valuable contribution to this project.

TABLE OF CONTENTS

ABSTRACT.....	iii
ÖZET	iv
ACKNOWLEDGEMENTS.....	v
TABLE OF CONTENTS	vi
LIST OF TABLES	xi
CHAPTER I: INTRODUCTION.....	1
1.1 The Problem and Its Setting.....	1
1.2 The State-of-the-Art: What We Know, What We Should Know	4
1.3 Concepts, Conceptualization, and Operationalization of Study Variables	5
1.3.1 The Dependent Variable Problem in Disability Studies	6
1.3.2 Disability Policy within Social Policy	8
1.3.3 The Dependent Variable Problem in Disability Policy	8
1.3.3.1 The Case of Assistive Technology (AT) Policies.....	10
1.3.3.2 The Dependent Variable Problem in AT Policies.....	11
1.3.3.2.1 AT Policy in the US	12
1.3.3.2.2 AT Policy in Türkiye.....	13
1.3.4 The Intervening Variable: Patriotism as an Informal Rule	14
1.4 Research Design, Methods, and Data Sources.....	15
1.5 The Argument in Brief.....	15
CHAPTER II: THE STATE-OF-THE-ART ON INEQUALITY IN ACCESS TO ASSISTIVE TECHNOLOGY	17
2.1 Introduction.....	17
2.2 Inequality in Access to AT in Anthropology Literature	18
2.3 Inequality in Access to AT in Citizenship Literature	18
2.4 Inequality in Access to AT in Welfare State Literature	19
2.5 Advancing The State-Of-The-Art: Bringing New Institutionalisms into Inequality in Access to AT	19
2.5.1 Insights from New Institutionalism	20
2.5.2 Informal Rules and Inequality in Access to AT	20
2.6 Conclusion	21

CHAPTER III: RESEARCH APPROACH, RESEARCH DESIGN, RESEARCH METHODS, AND DATA SOURCES.....	22
3.1 Research Approach	22
3.1.1 Configurational Research Approach	22
3.1.2 Policy Structure Approach	23
3.1.2.1 Introduction.....	23
3.1.2.2 How I Operationalize the PSA in this paper	24
3.1.2.2.1 Dependent Variable Dimension 1: Principles	24
3.1.2.2.2 Dependent Variable Dimension 2: Objectives	25
3.1.2.2.3 Dependent Variable Dimension 3: Procedures	26
3.1.2.2.4 Dependent Variable Dimension 4: Instruments	26
3.2 Research Design.....	27
3.2.1 Introduction.....	27
3.2.2 Case Study Designs.....	27
3.2.2.1 How I design my Case Study Design	28
3.2.2.1.1 Comparative Case Studies	28
3.2.2.1.2 Case selection criteria	29
3.2.3 Structured-Focused Comparisons	29
3.2.3.1 Introduction.....	29
3.2.3.2 How I use Structured-Focused Comparison	30
3.2.4 Most-different Systems Design (MDSD)	31
3.2.4.1 General Information on MDSD	31
3.2.4.2 My MDSD	31
3.2.4.2.1 Potential Intervening Variable 1: Welfare regimes	31
3.2.4.2.1.1 Introduction.....	31
3.2.4.2.1.2 Turkish Welfare State.....	31
3.2.4.2.1.3 American Welfare State	32
3.2.4.2.2 Potential Intervening Variable 2: Political systems	32
3.2.4.2.2.1 Introduction.....	32
3.2.4.2.2.2 The US	32
3.2.4.2.2.3 Türkiye.....	33
3.2.4.2.3 Potential Intervening Variable 3: Policy styles	33
3.2.4.2.3.1 Introduction.....	33
3.2.4.2.3.2 The US	34
3.2.4.2.3.3 Türkiye.....	35
3.2.5 Conclusion: MDSD.....	35
3.3 Research Methods	36
3.3.1 Case Study Methods	36
3.3.1.1 General.....	36
3.3.1.2 My research.....	36
3.3.2 Study Variables	36
3.3.2.1 Independent and Dependent variable.....	36
3.3.2.2 Intervening Variable: Patriotism	37

3.4	Data Sources	38
3.4.1	Qualitative Data	38
3.4.2	Statistical Data	38

CHAPTER IV: CASE STUDY FINDINGS I: PATRIOTISM SHAPING UNEQUAL ACCESS TO AT IN THE US.....41

4.1	Introduction: Patriotism in the US	41
4.2	Patriotism Assigning a Higher Normative Status to Disabled Veterans in the US	42
4.3	Patriotism Shaping How Key Policy Actors Perceive Conditions of Deserving Disabilities in the US.....	42
4.4	Measuring Dimensions of the American Disability Policy: Unequal Access to AT in the US.....	44
4.4.1	Introduction.....	44
4.4.2	Different Principles Resulting in Unequal Access to AT in the US	44
4.4.3	Different Objectives Resulting in Unequal Access to AT in the US.....	44
4.4.4	Different Procedures Resulting in Unequal Access to AT in the US	45
4.4.5	Different Instruments Resulting in Unequal Access to AT in the US	45
4.4.6	Conclusion	45
4.5	The Weak Impact of Human Rights as a Formal Rule in Unequal Access to AT in the US.....	46
4.5.1	Introduction.....	46
4.5.2	Human Rights Insufficiently Shaping the Principles of American Disability Policy.....	46
4.5.3	Human Rights Insufficiently Shaping the Objectives of American Disability Policy.....	47
4.5.4	Human Rights Insufficiently Shaping the Procedures of American Disability Policy.....	47
4.5.5	Human Rights Insufficiently Shaping the Instruments of American Disability Policy.....	47
4.5.6	Conclusion	48
4.6	The Powerful Impact of the Informal Rule of Patriotism in the Outcomes of American Disability Policy	48
4.6.1	Introduction.....	48
4.6.2	Patriotism Altering the Principles of American Disability Policy	48
4.6.3	Patriotism Altering the Objectives of American Disability Policy	49
4.6.4	Patriotism Altering the Procedures of American Disability Policy	49
4.6.5	Patriotism Altering the Instruments of American Disability Policy	50
4.6.6	Conclusion	50

CHAPTER V: CASE STUDY FINDINGS II: PATRIOTISM SHAPING UNEQUAL ACCESS TO AT IN TÜRKİYE	52
5.1 Introduction: Patriotism in Türkiye	52
5.2 Patriotism Assigning a Higher Normative Status to Disabled Veterans in Türkiye	52
5.3 Patriotism Shaping How Key Policy Actors Perceive Conditions of Deserving Disabilities in Türkiye	53
5.4 Measuring Dimensions of the Turkish Disability Policy: Unequal Access to AT in Türkiye	54
5.4.1 Introduction	54
5.4.2 Different Principles Resulting in Unequal Access to AT in Türkiye	54
5.4.3 Different Objectives Resulting in Unequal Access to AT in Türkiye	55
5.4.4 Different Procedures Resulting in Unequal Access to AT in Türkiye	55
5.4.5 Different Instruments Resulting in Unequal Access to AT in Türkiye	55
5.4.6 Conclusion	56
5.5 The Weak Impact of Human Rights as a Formal Rule in Unequal Access to AT in Türkiye	56
5.5.1 Introduction	56
5.5.2 Human Rights Insufficiently Shaping the Principles of Turkish Disability Policy	56
5.5.3 Human Rights Insufficiently Shaping the Objectives of Turkish Disability Policy	57
5.5.4 Human Rights Insufficiently Shaping the Procedures of Turkish Disability Policy	57
5.5.5 Human Rights Insufficiently Shaping the Instruments of Turkish Disability Policy	57
5.6 Conclusion	58
5.7 The Powerful Impact of the Informal Rule of Patriotism in the Outcomes of Turkish Disability Policy	58
5.7.1 Introduction	58
5.7.2 Patriotism Altering the Principles of Turkish Disability Policy	58
5.7.3 Patriotism Altering the Objectives of Turkish Disability Policy	59
5.7.4 Patriotism Altering the Procedures of Turkish Disability Policy	59
5.7.5 Patriotism Altering the Instruments Turkish Disability Policy	59
5.7.6 Conclusion	60
CHAPTER VI: DIVERGE CASES CONVERGING IN THEIR POLICY STRUCTURES: PATRIOTISM EFFECTING THE TURKISH AND AMERICAN POPIS	61
6.1 Introduction	61

6.2	Similarities in Policy Structure of American and Turkish Disability Policies	62
6.2.1	Principles.....	62
6.2.2	Objectives	62
6.2.3	Procedures.....	62
6.2.4	Instruments.....	63
6.3	Conclusion	64

CHAPTER VII: PATRIOTISM CONVERGING TWO DIFFERENT WORLDS: SIMILAR OUTCOMES IN THE TURKISH AND AMERICAN DISABILITY POLICY STRUCTURES.....	66
REFERENCES	69

LIST OF TABLES

Table 1 Most-Different System Design of Türkiye and the US.....	35
Table 2 Disability Data of Türkiye and the US.....	39
Table 3 Disability Policy Structure of the US and Türkiye	64



CHAPTER I

INTRODUCTION

1.1 The Problem and Its Setting

I aim to explore what explains the convergence in policies addressing disabled veterans and civilians in Türkiye and the US in the post-1990s. Despite their dissimilar institutional features, such as their welfare regimes, policy legacies, and political systems and regimes, both countries offer surprisingly generous benefits to their disabled veterans compared to civilians with disabilities. Civilians with disabilities get lower in-cash and in-kind benefits when buying assistive technology (AT), such as prosthetics like artificial limbs, that are used to compensate for various disabilities. Whereas civilians are left to cope with the hardship of acquiring even the low-tech AT, such as body-powered artificial limbs, the cost of expensive and advanced AT, like bionic artificial limbs, is fully covered for disabled veterans in both countries. The infinitely greater AT coverage for disabled veterans can highlight the inequality between people with disabilities (PwD), as it is one of, maybe the most important elements of a person with a disability's life, directly affecting their everyday experience. These diametrically opposed standards for deserving and not-deserving disabilities of war veterans and civilians tell us so much about what constitutes citizenship and individual rights in both societies.

To understand these, I ask, what explains convergence in policies addressing disabled veterans and civilians in Türkiye and the US in the post-1990s? I argue that in both countries, patriotism has been an overarching informal rule effectively shaping disability policy outcomes by attributing a higher normative position to military-related issues in both countries. Through overwhelming the formal rule of human rights, the informal rule of patriotism structures who gets what, when, and how of disabilities policies by (i) assigning a higher normative status to disabled veterans and (ii) shaping how key policy actors perceive conditions of deserving disabilities in the US and Türkiye.

The exclusion is not specific to elderly with disabilities but is true for PwD across all age groups, socio-economic backgrounds, and races. Though the level of inequality they face may change, PwD face significant extra-costs up to 1200 US Dollars per a household to have similar standards of living of a person without a disability (Mitra et al., 2017). From elderly to infants, PwD require targeted and impact-oriented policies to live a life with a certain standard of living.

Among these groups, the AT needs of the aging population might be the most striking. Among the elderly who are over 60 years old, around 46 percent of them have a disability affecting their daily lives (United Nations, 2022). Those elderly with disabilities is more prone to being excluded from society given the increased complexity of needs, from doing basic tasks like eating, walking or getting out of bed to requiring special equipment to use transportation. This is why assistive technologies (AT) like prosthetics, wheelchairs or hearing aids are crucial for them to continue their lives.

This is why AT play a crucial and direct role for addressing the distinct needs of PwD, who composes at least 15 percent of the world population. AT like prosthetics or hearing aids help individuals with disabilities to continue their daily and essential activities. AT compensates disabilities through, for example, enabling people with hearing loss to hear, or people with mobility problems to walk.

Despite being a necessity for PwD to continue their lives, AT access is a significant global issue. 10 percent of PwD who needs AT has access to acquire an AT. High

costs, financing problems, availability, or lack of information about AT are among some of the reasons for the inequality in global access to AT (World Health Organization, 2022:38). Equal access to AT is a must for PwD and lack of AT access makes it a human rights issue, thus an important issue for health policies area. However, inequities in AT access are not only a case of health policies but is directly related to areas of human rights and political economy.

AT enables participation to social and economic life, equal access to AT becomes a precondition for equal opportunities (World Health Organization, 2022: 5). Easier access to AT increases human capital by enabling the participation of PwD to the society and economy. AT helps people to achieve their full potential (United Nations, 2022), and thus help global and local development goals. Enabling PwD to participate in socio-economic life positively impact development levels as AT enables increased employment and education access for PwD. AT's impact on development becomes even more crucial as people living in advanced industrialized countries are three times more likely to have access AT than a person living in a developing or least developed country (United Nations, 2022).

The ever-growing needs of PwD and inequalitarian policies giving more importance to one group of PwD over other highlights the fundamental flaws in policies targeting vulnerable people. If mature welfare states cannot develop egalitarian policies for people in most need, and more, if they discriminate between these people based on deservingness, these inequalitarian outcomes call global health policies regimes to do substantial reforms.

Highlighting the inequalities found in AT not only provides us valuable insights about why health policies should be designed more egalitarian for human rights reasons, but also shows the centrality of AT access in global political economy through enabling PwD to participate in socio-economic spheres. The inequalitarian outcomes found between disabled veterans and civilians also shows how AT access varies across countries. Therefore, the accessibility and human capital of PwD not only diverge in different regions of the world but also within them, and within different groups.

The thesis is organized as follows. After an introduction, first, I provide a conceptual introduction to assistive technology, disability studies, and disability policy. Second, I review the literature on disability policies and informal rules. Third, I construct the cases of Türkiye and the US as a Most Different Systems Design, emphasizing their diverse institutional features. Fourth, I present evidence on how disability policies have developed following a similar trajectory in the US and Türkiye. Here, I focus on the patriotism as an informal rule and show how it is subsumed in American and Turkish policy principles of disability policy that have developed in the post-1990s. Finally, the paper concludes by drawing comparative conclusions on the disability policies in these two cases and shows how the disability policy principles in these countries create inegalitarian outcomes for the target groups.

1.2 The State-of-the-Art: What We Know, What We Should Know

The disability studies literature views this inequality largely through focusing on how disabled veterans create themselves as sacrificial heroes in relation to state. They position themselves as more deserving beneficiaries because of their sacrifice is made for the state and nation, therefore deserving higher benefit levels and social rights. On the other hand, the comparative welfare state literature, which rarely focuses on inegalitarian outcomes of welfare benefits' distribution, conceptualizes the benefit difference as categorical benefits. These categorical benefits differ because beneficiaries are eligible to different social rights given their social security status (e.g., government officials versus self-contributors). All these literatures overlook the factors that cause this inequality and the ways in which it occurs.

To address this gap in the literature, I bring together disability studies and politics lenses to examine within-group inequalities among war-veterans and civilians with disabilities, a topic that rarely receives attention in disability studies and welfare state literature. In doing so, I engage with disability policy, informal rules, and disability studies literature to conceptualize and operationalize patriotism as an intervening variable effecting decision-making in disability policy. This informal rule and intervening variable filters policymakers' behavior through enabling or constraining their actions, ultimately explaining the variation in disability policy towards disabled

veterans and civilians. For this purpose, I focus on the post-1990s period in both Türkiye and the US, as both countries have had a significant number of disabled veterans during this time due to tensions with the PKK, and the Gulf, Iraq, and Afghanistan wars respectively. Data sources include policy programming documents, fact sheets, official statistics on coverage and benefit levels, legislative documents, congressional and parliamentary debates.

1.3 Concepts, Conceptualization, and Operationalization of Study Variables

Disability is a complex social, physical, and psychological phenomenon impacting at least fifteen percent of the world population (World Health Organization, 2011: 7). This quite prevalent but often overlooked reality requires a good conceptualization. A clear disability understanding helps us address policy problems in more impact-oriented ways. However, there are conceptual divergences resulting in this phenomenon to be approached with different theoretical models of.

The most common models for understanding disability are the medical, social, and biopsychosocial models. These models differ significantly in how they understand and explain disability and how they position individuals with disabilities within society. The differences in these dimensions affect how different people with or without disabilities approach PwD. Medical perspective views the disability as a medical condition and centers the problems like inability to walk on the individual but not how places are designed. On the contrary, social model views disability as a social construct, in which society discriminates against PwD by constructing them abnormal. That is why places are designed inaccessible because PwD are not considered in the first place. (United Nations, 1998)

In the US, war-veterans are those who served in the active military and were discharged or released without any dishonorable conditions that keep them from becoming a veteran (Veterans' Benefits, 1991). Once recognized as disabled, a war-veteran becomes eligible for several welfare entitlements, such as disability compensation, if their physical or mental disability is related to their military service.

Similar to the US, in Türkiye individuals with an active military history are also referred to as war-veterans. A war-veteran with a disability in Türkiye is a member of the Turkish Armed Forces who has been injured while protecting Türkiye's borders and ensuring its security, either in war or in the fight against terrorist organizations (Law no. 2847). These injuries may have been caused by enemy or terrorist weapons or occurred during operations and services in a war zone. The disability of these members must be confirmed by a report as a result of their treatment.

1.3.1 The Dependent Variable Problem in Disability Studies

Disability is understood from different dimensions. These differences categorically define who can be considered a person with a disability and what kind of policies should be developed for PwD. These disagreements on how disability should be defined can be examined by approaching disability as a dependent variable problem. The dependent variable problem centers on issues arising from different understandings of a phenomenon of interest and how it is conceptualized and operationalized (Green-Pedersen, 2004: 4). It argues that the multi-dimensional nature of phenomena of interest causes us to conceptualize phenomena from different aspects. These different perspectives lead to different understandings and measurements of a phenomenon of interest. As a result, we have multiple alternative ways of understanding a phenomenon, each resulting in a different measurement of concepts.

By conceptualization, concepts are given theoretical meanings, whereas operationalization turns them into measurable forms. The medical, social, and biopsychosocial models are the most widely accepted ways of conceptualizing disability. Medical perspectives understand disability as visible or invisible impairments that keep PwD from performing necessary daily tasks. This perspective focuses on disabilities themselves and places responsibility on individuals for not carrying out what is considered normal by people without disabilities. In this view, what is disabling is considered as the faults caused by the impairments of organs or psychological conditions of people. It excludes factors such as inaccessible environments or society's stigma towards PwD or discrimination against them. The

medical perspective is quite common among medicine-related occupations such as medical doctors or prosthetic technicians who have patients with disabilities. Other theories argue that these excluded factors play a central role in how disabilities are constructed as a social phenomenon. (Shakespeare, 2006: 197-200)

Contrary to this impairment and individual-focused understanding, the social model argues that disability is a result of what we understand from *normal*. This model argues that PwD's so-called inabilities to perform actions or participate in activities or places are not caused by their disabilities. It argues that our very consideration of what is normal creates barriers for PwD to participate in society. The social model suggests that shifting from this limited understanding of normal is required to fully include PwD to the society. This can be achieved by understanding and addressing structures that cause disability such as inaccessible environments or discriminatory attitudes towards PwD.

For example, verbal communication is constructed as the only way of communication (making it the normal) by those who are able to speak. This construction of normal makes non-verbal ways of communication such as sign language used by deaf communities abnormal. Therefore, our constructed understanding of what is normal shapes what is considered a disability. However, if the population of deaf people exceeds those with hearing abilities, then sign language might have been the normal simply because more people would be using sign language thus making it the normal way of communication. This model is often criticized for overlooking impairments and limiting disabilities to phenomena that are completely socially constructed.

Argued to address the shortcomings of both models by incorporating them, biopsychosocial considers disability to be a result of physical, psychological, and social factors. According to this model, disability is not just the result of a person's physical or mental impairment but also influenced by the social and environmental context in which they live. In other words, the biopsychosocial model recognizes that disability is not just a medical phenomenon but also a social and political issue that involves barriers for PwD to full participation and inclusion in society. This approach emphasizes the importance of addressing the various factors that contribute to disability in order to create more inclusive and equitable societies (Petasis, 2019).

1.3.2 Disability Policy within Social Policy

Social policy research is part of public policy research, and it aims cover challenges stemming from various social policy actions or inactions. As a field, it includes education, healthcare, pension or employment policies targeting various groups. Public policy research includes the social policy fields but also includes areas like taxation, labor laws, energy, or agriculture. Therefore, disability policy is in the focus of social policy research.

Like gender, class or racial analysis, disability studies bring a novel lens to social policy research to scrutinize societal challenges from a multidimensional perspective. Despite the attempts to include disability studies to social policy, recognition of disability as a specific category and PwD as beneficiaries needing particular policies have been not adequately addressed. A central cause for this mismatch stems from not being able to create conceptually inclusive disability policy as a distinct category. This cause disability policy within social policy to be limited to disability benefits and overlooking other key policy areas like anti-discrimination or service policies for PwD (Holler & Ohayon, 2022: 3). To address these conceptualization and operationalization issues, next section goes through a dependent variable problem in disability policy.

1.3.3 The Dependent Variable Problem in Disability Policy

As an umbrella term, disability policy refers to the set of policies that consist of several sub-policies aimed at increasing autonomy, participation, and accessibility of disabled people to society. There are two main types of disability policies widely accepted within disability and social policy literatures (Hvinden, 2018: 441). Anti-discrimination-oriented policies provide a basis for social welfare policies to follow the anti-discrimination principle. In contrast to anti-discrimination policies, welfare policies target compensating PwD through in-cash and in-kind services. Many countries around the world adopt disability policies that have anti-discrimination as their guiding policy principle in disability policy making (Hvinden, 2018: 441). These

two different types of disability policy result in a dependent variable problem as they show different perspectives for understanding disability policies. Examining only one type of disability policy, anti-discrimination or welfare policies, leads to different understandings and measurements and impacts of disability policies.

Focusing only on anti-discrimination policies as a type of disability policy may give the impression that there is a convergence of disability policies across different countries, where they all adopt human rights-oriented disability policies. In return, this could give a misleading impression that all disability policies across different states are guided by human rights principles. Even though many countries may have state-of-the-art anti-discrimination policies, most lack universal disability welfare policies. This is why the impression changes drastically when welfare policies such as quantified social rights are examined. Means-tested in-kind and in-cash welfare programs are quite common across different states, with significant variance in quantified indicators such as take-up rates, replacement rates or income criteria for eligibility.

This crucial difference between disability anti-discrimination and welfare policies creates almost diametrically opposed results for disability policy outcomes. Anti-discrimination policies may indicate successful implementation of disability policies, whereas welfare policies show the opposite, for example, PwD are eligible to lower level of benefits than the non-disabled.

As a third type of policy, many countries implement a mix of two disability policy types. They legislate anti-discriminatory and quantified legislated social rights that fail to address the objectives of anti-discriminatory disability policies given the limited universalities of quantified legislated social rights. The mix of these two types of disability policies results in the undermining of anti-discriminatory civil rights policies by quantified legislated social rights that are often means-tested and do not provide universal access to services for disabled people (Waddington & Diller, 2002: 280).

The Americans with Disabilities Act of 1990 (hereafter ADA) is one example of an anti-discrimination law that consists of rules and regulations aimed at providing an

anti-discriminatory environment. Similarly, the disability law in Türkiye (Law no. 5378) centers around anti-discrimination and takes human rights as its guiding principle. As the main disability law, it contains the guiding principle of human-rights-based anti-discriminatory policy principles. However, both countries show great variance in terms of their disability welfare policies. For example, means-tests criteria for in-kind or in-cash benefits are quite strict in both countries. Therefore, it is important to specify which type of disability policy one is studying. In this thesis, I examine both anti-discrimination and welfare policies to show how the latter does not center on the principle of anti-discrimination. In fact, I show that they do the opposite and result in inequalitarian outcomes.

1.3.3.1 The Case of Assistive Technology (AT) Policies

Access to Assistive Technology (AT) is a major issue globally. Only 1 in 10 people who require AT have access to it, and the percentage of access greatly varies based on the AT item. High costs, financing problems, availability or lack of information about AT are among some of the reasons for the inequality in global access to AT (WHO, 2022: 38).

Despite increasing marketing, research, and development of AT in the US, disabled Americans still face significant barriers to access, mainly due to financial constraints such as insufficient financial resources (Wallace, 2011: 295). Similarly, in Türkiye access to AT is a prevalent problem due to economic challenges such as high inflation and a weak currency (one US Dollar is worth at least twenty times more than one Turkish Lira) which affects the affordability of AT. In both Türkiye and the US, however, access to AT is easier and more affordable for eligible disabled veterans, as they are eligible for financial assistance from the government or other organizations. In both countries, disabled veterans get AT free of charge, whereas civilians with disabilities must pay out of pocket for almost all of the AT's cost.

AT is a crucial element for promoting accessibility for PwD. Lack of AT access is a barrier for promoting equality and social inclusion for all PwD. Without necessary AT, disabled people face negative consequences such as social isolation, inaccessibility,

economic disadvantage or lacking basic needs (Ward-Sutton et al., 2020: 3). Given the significant impact of AT access on PwD's lives and the inequalitarian outcomes for civilians with disabilities, studying AT policy is critical for addressing accessibility issues.

1.3.3.2 The Dependent Variable Problem in AT Policies

Assistive technology (AT) policies, as part of disability policy ranging from employment to accessibility policies, is an overarching concept used for products that help individuals with various disabilities to support their daily and essential activities (World Health Organization, 2022: 5). Similar to disability policies, AT policies lack an agreed conceptual and operational definition. For clarity in conceptualization and operationalization, I operationalize AT policies as quantified social rights. I examine replacement rates for AT policies, which represent the percentage of AT's financial cost that is covered. I then compare replacement rates of AT for war-veterans and civilians in Türkiye and the US.

The multidimensional nature of disability and its related policies makes it difficult to examine the dimensions that best represent the characteristics of AT policies. Firstly, the indicators include aggregate AT expenditures which denote welfare effort. Secondly, quantified legislated social rights such as take-up rates representing the percentage of AT coverage. Thirdly, we can examine the historical development at a program level to understand which dimensions of AT policy have changed and in what ways. However, lack of data available for AT policies such as replacement rates calculating the amount of AT's price covered by insurance makes it difficult to have a general comparison across cases.

AT policies are examined in this paper as a case of disability policy. By focusing on a category of disability policy, I aim to highlight one of the many similarities of disability policy in both countries which are not only limited to AT policies but extend to differences in in-cash or in-kind benefits for disabled veterans and civilians.

1.3.3.2.1 AT Policy in the US

There are various options for US civilians to access AT. Funding for AT can be provided by states, the federal government, or private insurance companies based on the eligibility of the beneficiary, which is determined through a means-test of, for example, income levels. Once determined to be eligible for AT funding, the state and federally funded program Medicaid directly provides payment for AT to healthcare vendors for eligible individuals who have been determined to require AT. On the other hand, Medicare, a federally funded program, consists of three parts with varying coverage rates: Part A, Part B, and Part C. Part A usually covers services such as inpatient hospital services, home health benefits, and hospice care at no cost if the beneficiary or their spouse has paid Medicare premiums for approximately ten years. If this is not the case, beneficiaries must pay either \$278 or \$506 per month (Medicare, 2023).

Part B of Medicare, which is also used for AT, requires an annual deductible and a monthly paid premium, in which case civilians with disabilities pay twenty percent of the cost of eligible AT. The annual deductible and monthly premium depend on the beneficiary's yearly income and marital status. The annual deductible is \$226 and the monthly premium ranges from \$164.90 to \$560.50 for 2023 (Medicare, 2023). The coverage of AT items greatly varies by item type and state of residence and is heavily dependent on medical experts' assessments of individuals' need for ATs. These conditionalities and determination of who is in need of AT (by medical experts) create inequalities for people PwD with various AT needs (Wallace, 2011). Lastly, Part C (also referred to as Medicare Advantage), includes Part A and Part B coverage and is available through private companies that are approved by Medicare and must follow Medicare rules.

The costs of AT (also referred to as Durable Medical Equipment or DME), such as artificial limbs, are part of the Healthcare Common Procedure Coding System (HCPCS) published by the Center for Medicare and Medicaid Services. HCPCS provides coverage rates for various types of AT by state and item type. However, this list is limited as some AT items like myoelectric artificial limbs (prostheses) do not have National Coverage Determination (NCD), Local Coverage Determinations

(LCDs), or Local Coverage Articles (LCAs). Myoelectric artificial limbs are more advanced than body-powered prosthetics, which are partly covered by Medicare as patients pay 20% of the cost upon receiving the prosthetics (Wallace, 2011: 298).

Most PwD live on low incomes, which makes it difficult for them to afford the high costs of advanced AT. Unlike civilians with a disability, disabled veterans receive any kind of AT if they are found eligible by Veterans Affairs' (VA) medical centers' clinicians (Veterans Affairs, 2021: 5). Eligibility is usually determined by service-connectedness of disability, assigned disability ratings, and other conditions. Upon eligibility checks, VA provides AT to disabled veterans free-of-charge with no upper limit on item types. The no upper limit policy is so evident that the VA Office of Inspector General's (OIG) report shows that VA has paid AT vendors more than reasonable Medicare rates. For items such as microprocessor-controlled artificial limbs or legs that can range between \$10,000 to \$100,000 in price, non-existing Medicare rates for such AT items provide a ground for VA to pay the price offered by vendors. Even for existing Medicare rates, OIG found out that VA could have spent \$10 million less by limiting prosthetic rates to Medicare rates and keeping its oversight role on prosthetic spending (Veterans Affairs, 2012: i). Therefore, eligible war-veterans in the US are provided with state-of-the-art AT such as artificial limbs whereas eligible citizens must pay at least 20% of conventional less-advanced AT costs if they have Medicare.

1.3.3.2.2 AT Policy in Türkiye

Similar to the US, Turkish AT policy has created inequalities between disabled citizens and veterans. Citizens with disabilities who need AT must rely on the provision of AT by the Social Security Institution (hereafter referred to as SGK). For self-employed individuals and employees, SGK premium rates range from 34.5% to 37.5% based on income and coverage types (4A, 4B, and 4C). Private insurance coverage for AT is quite rare because many citizens have SGK insurance and private insurance is often financially inaccessible. However, there are some rare cases in which private sector companies cover the costs of AT for their employees with disabilities.

The prices and provision of any AT item are determined by the Social Security Institution's Healthcare Implementation Communiqué (SUT). Turkish citizens who are enrolled in an SGK insurance program can receive an AT item upon a doctor's approval. Annex-3/C-2 of the SUT covers AT such as body-powered artificial limbs, while Annex-3/C-5 covers more advanced AT such as myoelectric artificial limbs. Civilians with disabilities who have SGK insurance are only eligible for less advanced AT items listed in Annex-3/C-2, while disabled veterans are eligible for items listed in both Annexes 3/C-2 and 3/C-5. Disabled civilians must pay the difference in price between AT items listed in Annexes 3/C-2 and 3/C-5 of the SUT. There has not been a major update to price coverage since 2013, despite the shrinking Turkish currency compared to imported AT items with foreign currencies and decreasing purchasing power in the country.

1.3.4 The Intervening Variable: Patriotism as an Informal Rule

Formal rules are written rules that structure socio-political life by enabling or constraining the behavior of policy actors. Informal rules also structure socio-political life by shaping the rules of the game, but unlike formal rules, they are not written or codified. These unwritten rules create obligations and rights that determine the appropriateness, achievability, or rightness of actions, ultimately establishing predictable and reliable patterns of behavior for policymakers (Bolukbasi & Yildirim, 2022).

I classify patriotism as an informal rule because it is not a written rule but still affects disability policy outcomes. As an informal rule, patriotism embeds policy principles and shapes key policy actors' decision-making in disability policy. It causes war veterans with disabilities to be perceived as more privileged beneficiaries by praising their military activities as sacrifices made for the nation and positioning them as more deserving beneficiaries. This double standardization between war veterans and civilians with disabilities creates inequalities in welfare benefits.

An intervening variable is a third variable that explains the relationship between the independent and dependent variables. Without it, the relationship would not exist (Aneshensel, 2012: 113). In this case, the informal rule of patriotism acts as an intervening variable effecting decision making process of key policy actors. Patriotism filters policymakers' behavior through enabling or constraining their actions. It constructs disabilities of war veterans as more deserving than civilians, thus constrains policy alternatives that are more egalitarian towards all PwD.

1.4 Research Design, Methods, and Data Sources

In this master's thesis, I explore how two dissimilar institutional settings produce similar disability policies resulting in inegalitarian outcomes among civilians and veterans. In both cases, disability policies provide more generous benefits to war veterans with disabilities, who are seen as deserving beneficiaries. Through a cross-case analysis, I employ the Most Different Systems Design (MDSD) to examine the variation in levels of benefits for assistive devices such as prostheses in Türkiye and the US.

This comparative research design provides a solid framework for examining explanatory variables in these two cases. Despite their dissimilar institutional features, both Türkiye and the US have surprisingly similar disability policies. This outcome is of interest under the richly diverse comparative welfare state literature. I use quantitative and qualitative data sources, including policy programming documents, fact sheets, official statistics on coverage and benefit levels, legislative documents, congressional and parliamentary debates.

1.5 The Argument in Brief

Patriotism is an informal rule that shapes the actions and thoughts of actors by giving military-related issues a higher normative position. It is an intervening variable that explains the inequality of assistive technology policies. Disabilities of veterans are memorialized as sacrifices made for the nation and state, used to justify special

benefits. Patriotism constructs the state and nation as worthy of sacrifice, with war being justified as worth the sacrifices despite causing disabilities or casualties.



CHAPTER II

THE STATE-OF-THE-ART ON INEQUALITY IN ACCESS TO ASSISTIVE TECHNOLOGY

2.1 Introduction

Inequality in access to assistive technology is prominently examined through the lenses of anthropology, citizenship, and welfare state literature. These approaches provide valuable insights into the multi-dimensional nature of inequalities. Examining these various literatures helps us understand that inequality in access to AT is not just a subject for welfare state research but also provides valuable insights for citizenship, anthropology literature, and institutionalism.

Anthropologists approach this issue from an identity-based perspective, whereas welfare state researchers view this inequality as a case of categorical benefits in which groups of citizens are eligible for different benefits based on their statuses. Lastly, new institutionalists approach this inequality from historical development of disability policies, rational decision-making, and sociological construction of deservingness perspective. However, they overlook the factors that cause this inequality and the ways in which it occurs. These approaches conceptualize the outcome of interest either as war veterans' identity construction as sacrificial heroes or as categorical benefits. By bringing in the lens of informal rules, I aim to show how patriotism as an intervening variable enables or constrains policymakers' behavior and actions. By doing so, I aim to shed light on the possible causal relations in disability policymaking and policy outcomes, where patriotism plays a pivotal role. Examining

this inequality from the lens of informal rules helps identify often hidden, yet still quite prevalent, potential causal factors at play.

2.2 Inequality in Access to AT in Anthropology Literature

In the anthropology literature, the conventional way to understand inegalitarian benefits is to compare the construction of identities between disabled veterans and civilians with disabilities. War-veterans' identities are constructed as sacrificial heroes, positioning them as more deserving beneficiaries than civilians. This nationalist construction of a sacrificial hero places war-veterans and their disabilities above those of civilians (Açıksöz, 2012: 5).

This “nationalist construction of disabled veterans” has a materially symbolic relationship with the state, serving a political purpose. Entitlements are given in reverence to their sacrifices and symbolically rewarded with advanced assistive technology, for example. This makes war-veterans and their disabilities more deserving than civilians. Anthropologists argue that this turns their disabilities into a material commodity used by the state (Açıksöz, 2012: 9-14). This perspective provides a unique understanding of how war-veterans use their disability as a bargaining chip with the state.

2.3 Inequality in Access to AT in Citizenship Literature

Scholars in the field of citizenship studies view this inequality as a case of military citizenship. Military citizenship is conceptualized as a special category in which beneficiaries deserve different types and amounts of welfare benefits.

In this model, disabled veterans use the moral framework of the sacrificial hero to create a special citizenship category deserving of more generous benefits and entitlements (Trundle, 2012; 2013; Wiegink, Sprenkels & Sørensen, 2019: 74). The sacrificial hero demands different forms of entitlements and benefits, which the state provides in the form of public reverence and memorialization (Trundle, 2012: 197). This model offers a unique perspective on how war-veterans construct their disabilities as sacrifices that provide them with a special citizenship category. In this

category, benefits extend beyond welfare provisions to include other categorical entitlements and privileges.

2.4 Inequality in Access to AT in Welfare State Literature

The welfare state literature views this difference in benefit levels as categorical benefits. These benefits are given to groups such as disabled veterans because their disability is socially constructed as deserving of compensation (Gal & Bar 2000: 583). Categorical benefits are non-means-tested and non-contributory cash benefits that are not based on the recipient's income and have no eligibility criteria such as income level tests. This conceptualization helps highlight often-hidden non-means-tested and non-contributory benefits, such as those for war-veterans.

2.5 Advancing The State-Of-The-Art: Bringing New Institutionalisms into Inequality in Access to AT

These approaches provide valuable insights into understanding the inequality in access to AT from different theoretical perspectives. Each approach highlights the multidimensional nature of disability policies. However, they do not consider the underlying causes of this inequality and the ways in which it occurs. Instead, they focus on the outcome, either by framing it as the construction of war veterans' identity as heroic sacrifices or as categorical benefits. My research question addresses this gap in multiple literatures by exploring how patriotism, an informal rule, gives military-related issues such as disabled veterans' military-related disabilities a higher normative position. This informal rule praises disabled veterans' losses and constructs their military activities as sacrifices made for the nation, positioning them as deserving beneficiaries.

By introducing the perspective of informal rules, I aim to demonstrate how patriotism can influence or limit the actions and decisions of policymakers. In doing so, I hope to reveal potential causal relationships in disability policy formulation and implementation, where the glorification of militarism plays a crucial role.

2.5.1 Insights from New Institutionalism

Formal rules, or institutions, are written rules that structure socio-political life by enabling or constraining the behavior and actions of various actors. New institutionalists, historical, rational choice, and sociological, tries to understand the role of institutions, how they cause and determine socio-political outcomes from different perspectives.

Historical institutionalist (HI) would examine this inequality from the historical development and path-dependencies of institutions (Hall, 1993). An HI account would look at the policies addressing war-veterans and civilians, how they have created path-dependencies over a long period of time. It will be harder to repeal the policies as the longer they are in effect because the political costs of repealing would be higher as there is many war-veterans as beneficiaries.

A rational choice institutionalist (RCI) would explain this inequality with the rationalizing the choice of policy actors (Hall, 1993). Actors use the welfare institutions (or those directly related to veterans like Veterans Affairs) maximize profit and utility in a way that they will reduce uncertainty. If a more egalitarian approach was adopted by politicians, it would have caused decrease in benefits to war-veterans and a strong reaction by war-veterans. Therefore, continuing the existing institutional arrangements that favor war-veterans are the politically cost-effective and rational action to do.

Sociological institutionalist would examine this as an example of norms structuring behavior of actors (Hall, 1993). Patriotism enables or constrains actors as it is normatively the appropriate rule to be followed. Positioning disabilities of war-veterans in a similar normative position with disabilities of civilians would be harder, and politically inappropriate, because disabilities of war-veterans are considered as untouchable.

2.5.2 Informal Rules and Inequality in Access to AT

Like formal institutions, informal rules are effective in shaping who gets what, when, and how. However, unlike formal institutions, which are found in the form of written or parchment rules, informal rules are unwritten. They enable or constrain the behavior of actors by creating obligations and rights that shape actions in terms of appropriateness, achievability, or rightness, ultimately setting predictable and reliable patterns of behavior (Bolukbasi & Yildirim, 2022). Similar to other lenses, disabled veterans' deservingness are also socially constructed. However, unlike other literatures, this framework helps us understand not only why disabled veterans receive more benefits but also how patriotism is established within different societies to create various forms of appropriateness and rightness.

I argue that patriotism, an informal rule, places military-related issues such as disabled veterans' military-related disabilities in a higher normative position. This informal rule honors disabled veterans' losses and constructs their military activities as sacrifices made for the nation, consequently positioning them as deserving beneficiaries.

Unlike other literature, this framework helps us understand not only why disabled veterans get more benefits but also how patriotism is established within different societies that create various forms of appropriateness and rightness.

2.6 Conclusion

This thesis explores the ways in which rules overwhelms formal rules. I argue that patriotism constructs the state and nation as worthy of sacrifice, with war being justified as worth the sacrifices despite causing disabilities or casualties. This, in return, cause inequalitarian disability policy outcomes for civilians with disabilities as disabled veterans get expensive AT free-of-charge. I explain this inequalitarian outcomes through the lenses of informal rules, as it enables me to explain what causes this inequalitarian outcomes, rather than explaining what the outcome is.

CHAPTER III

RESEARCH APPROACH, RESEARCH DESIGN, RESEARCH METHODS, AND DATA SOURCES

3.1 Research Approach

3.1.1 Configurational Research Approach

The difference between the most common research approaches has been so sharp that these approaches, configurational and statistical methods, have been considered as two different religions (Mahoney & Goertz, 2006: 227-230). Indeed, both approaches have their advocates. However, it seems more practical to approach these two as mere research methods and to choose one or a mix of the two based on their potential to help researchers achieve their research goals. In the end, these two different approaches are best suited to answering different questions (Hancké, 2009: 58).

In this thesis, I aim to use a configurational research approach because it fits my research aim of explaining an outcome of interest in greater depth than a researcher adopting a statistical approach would. Moreover, internal validity is my core focus as I want my research questions and claims to best fit the puzzle I am trying to explain. These factors make a configurational research approach the best fit for this thesis's aim on four grounds.

First, this research adopts a 'causes-of-effects' approach as it tries to understand what caused unequal health outcomes between civilians and disabled veterans in two different cases. Second, by adopting a Most Different System Design (MDSD), I aim to single out extraneous variables and sources of spuriousness and find necessary or

sufficient conditions that can explain the causes of health inequalities. However, it should be noted that the scope of this thesis is not to explain a clear causal relationship but rather to attempt to understand the causal relationship between policymaking in disability policy and its outcomes.

Third, as in other configurational research, equifinality plays a crucial role in this thesis's design by singling out potential sources of spuriousness through designing an MDSD where the main aim is to find and eliminate other highly likely explanations for the puzzle. Fourth, the scope of this research is limited to two cases and generalization is only possible to a limited number of cases with similar characteristics in their outcomes of interest. Therefore, unlike research adopting a statistical approach, I do not aim to have a broader scope or find more generalizable findings applicable to a larger number of cases. Overall, these four reasons make a configurational research approach a better fit for my thesis's main aim.

3.1.2 Policy Structure Approach

3.1.2.1 Introduction

The policy structure approach is a research approach and an analytical tool for understanding the characteristics of policies by dividing them into four dimensions: principles, objectives, procedures, and instruments. It breaks down policies into analytical categories that help to observe sub-level changes in policies, making it easier to assess the level of changes occurring in policies (Graziano, 2012). The policy structure approach will be used to understand and observe how the principles, objectives, procedures, and instruments of disability policies are altered by the informal rule of patriotism, resulting in unequal policy outcomes between civilians and disabled veterans.

Originally, the policy structure approach was developed as an analytical tool to understand welfare state change by breaking down welfare state policies into four categories (Graizano, 2012: 585). However, the policy structure approach is also useful for pinpointing changes occurring in different parts of policies through its four key dimensions which show the main characteristics of policies and make sublevel

policy comparisons more reliable and valid across different policy areas or case studies.

The principles, objectives, procedures, and instruments of a policy can have several types of relationships with each other. For example, any element of a policy structure can be strategically used to achieve objectives or can be altered by objectives themselves. A policymaker can set an objective of decreasing carbon emissions by a certain amount and then set principles of environmentalism, instruments such as tax breaks for environmental companies, and procedures that support environmental outcomes. Therefore, the policy structure approach is also useful for understanding how various actions of state actors shape policies within themselves and makes it easier to trace changes within policies.

One example of using the policy structure approach is to understand and compare disability policy characteristics across different cases. Breaking down policies into four key dimensions helps us understand how, for example, the principle of human rights has been guiding disability policies in the US and Türkiye as a parchment rule but has been largely ineffective in shaping policy outcomes. In the following section, I will explain how I operationalize the principles, objectives, procedures, and instruments of American and Turkish disability policies.

3.1.2.2 How I Operationalize the PSA in this paper

3.1.2.2.1 Dependent Variable Dimension 1: Principles

Policy principles consist of core values that guide the development of objectives, procedures, and instruments within a policy area. Principles are institutions that structure the way actors act and think by setting limits on their expectations and interests in the outcomes of policies (Howlett et al., 2022: 80). They are the rules of the game for policymaking. For this thesis, policy principles will be operationalized as core values that guide policies and will be observed through qualitative content analysis of data sources such as policy programming documents.

Ideally, a policy should have objectives, procedures, and instruments that are consistent with its core guiding principle. For example, if the main principle of a policy is centered around a human-rights approach to policymaking, which prioritizes human rights over other principles, it can be expected that the objectives, procedures, and instruments would not conflict with this approach.

A similar example is the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), which guides disability policymaking in respective policy areas in almost all countries (Pralle, 2006: 171). The main principle of the UNCRPD is to prioritize the well-being of people with disabilities (PwD) by taking non-discrimination and equity towards PwD as the guiding principle of policymaking.

This thesis examines several policy programming documents to observe the core values of American and Turkish disability policies and aim to uncover how they have been altered by informal rules to result in unequal disability policies.

3.1.2.2.2 Dependent Variable Dimension 2: Objectives

Objectives set the direction for a policy towards achieving an end goal and are generally more abstract concepts. For this thesis, policy objectives are operationalized as a set of goals that are expected to be achieved from the beginning of policy implementation through observing the outcomes of policies. For example, the main objective of the European Employment Strategy is to achieve full employment, with sets of targets as benchmarks for observing whether the objective has been achieved (Graziano, 2011: 588). Therefore, targets make more abstract concepts easier to observe.

Disability policies encompass several sub-policies which may include, but are not limited to, policies on employment for PwD, accessible transportation, and assistive technology. Each sub-policy has its own policy structure which may be similar or different from others. The most common objective of disability policies across different cases is to activate PwD through various types of disability policies such as active labor market policies for PwD.

In this thesis, I analyze various data sources to identify the fundamental objectives of disability policies in the US and Türkiye and discover how informal rules have changed these policies to result in more unequal disability policies.

3.1.2.2.3 Dependent Variable Dimension 3: Procedures

Procedures are a set of rules and guidelines in the form of institutional processes or activities that determine how a policy is formulated, implemented, and continued (Bali et al., 2021: 298). Procedures can be operationalized as administrative guidelines that design how policies are formulated and implemented and which instruments, through which ways, are utilized by which actors (Bali et al., 2021: 297). The level of clarity in procedures increases their traceability within the policy cycle.

Understanding the operating procedures of disability policies helps us understand which procedures or procedural instruments are available. In turn, this allows for a more in-depth examination of the causal relationships between policy formulation, implementation, policy outcomes, and policy impacts as procedures can show which instruments are used by whom. I analyze various data sources to understand how certain disability policy procedures have been altered by informal rules. Specifically, I look at American and Turkish disability policies to discover how these changes have resulted in unequal outcomes.

3.1.2.2.4 Dependent Variable Dimension 4: Instruments

Policy instruments are social and technical tools that are used to establish specific relationships between the state and those affected by it. As an institution, an instrument carries context-dependent meanings and has various representations that bring politics into its use (Bache, 2010: 58-59). The most common types of policy instruments are financial instruments, and I operationalize policy instruments as in-kind and in-cash financial instruments. These two types of financial instruments are the most commonly observable through the disability policies of the US and Türkiye.

Financial instruments can highlight how policies target their audiences as they are the means of directing welfare efforts or social rights to those who are eligible. These may include coverage rates for assistive technology (AT) prices or take-up rates of eligible PwD that can show if there is a significant gap in terms of AT access. By examining policy instruments, we can also understand whether policy formulation and its objectives have been met as outcomes. Therefore, financial instruments can highlight inequalities between civilians and disabled veterans in the form of quantified welfare efforts.

3.2 Research Design

3.2.1 Introduction

Constructing a well-prepared research design helps the findings to be more justified, therefore more convincing. A well-structured research designs puts your findings into a setting where those who read it can see what others have said about the question you are trying to answer, i.e., literature review, what your claims are, and how are they different and significant than what others have said. This novel analytical engagement to questions bugging is called research design. (Hancké, 2009: 8)

In simple terms, a research design is a logical plan that connects the data collected in a study to the research questions being asked, and ultimately to the conclusions drawn. It is a roadmap for getting from the starting point of the research questions to the end point of the conclusions (Yin, 2018: 60). This thesis adopts a comparative, across case study design by constructing two cases as Most Different System Design (MDSD). Within this research design, structured-focused comparison is used.

3.2.2 Case Study Designs

A case is a spatially and temporally limited and structured representation of the phenomenon of interest. Case studies are both an analysis method and a source of information. The method of comparison within case studies provides concrete grounds for comparing different aspects of the phenomenon of interest. Therefore, case studies are one of the best ways to discover the similarities and differences

between different instances (or cases) of the phenomenon of interest (Gerring, 2016: 27).

As part of my research design, I use case studies to acquire a comprehensive understanding of what causes health inequalities between two groups of PwD in two countries with dissimilar features. By using a case study design, I aim to explore the disability policies of two cases in-depth: the US and Türkiye.

Designing a case study involves several steps. Although there is no standard operating procedure for designing case studies, in the following, I will explain some of the steps. These include constructing comparative case studies, establishing case selection criteria, using structured-focused comparisons, and constructing a Most Different System Design (MDSD).

3.2.2.1 How I design my Case Study Design

I aim to use comparison in order to gain analytical leverage on the causes of health inequalities between civilians and disabled veterans in two different countries. Comparative case study design, with a focus on most different cases, enables me to analyze cases of Türkiye and the US more in depth.

3.2.2.1.1 Comparative Case Studies

Comparative politics is a useful method and a source of information for understanding politics, policies, and polities (Schmitter, 2016: 397). By making comparisons, we are able to learn about other cases, which helps us shape our understanding of the phenomenon of interest at hand. We can validate and advance our knowledge by comparing it with other cases to see similarities, differences, and patterns. In the case of policies, within and across-case comparisons provide valuable knowledge for understanding both the similarities and differences in policy outcomes.

Specifically for disability policy, comparison provides valuable feedback for understanding real-world outcomes of policies. For PwD, it is common for these

outcomes to be unequal. Therefore, the method of comparison is a crucial tool for public policy research and is particularly important for disability policy research to understand and produce solutions for PwD from different countries, backgrounds, economic levels, and races.

3.2.2.1.2 Case selection criteria

I follow the most-different case selection method, which I use to build a Most Different Systems Design. In most-different case selection, the selected cases differ in terms of their background factors. Thus, only the outcome of interest (dependent variable) and the explanatory factor (independent variable) are similar. The usage scenario is exploratory, as the aim is to eliminate necessary causes that can be sources of spuriousness (Seawright & Gerring, 2008: 298).

3.2.3 Structured-Focused Comparisons

3.2.3.1 Introduction

Structured-focused comparison is a useful method to construct case studies that can reflect, first, the main objective of research questions, and second, share characteristics that are representative of the universe of cases of the phenomenon of interest. Structured-focused comparison helps expand existing theories about phenomenon of interest by setting standard operating procedures of conducting research. Asking straight forward, general research questions with the aim of representing the main research objective, makes the research structured. On the other hand, selecting and focusing on the limited number of cases of the phenomenon of interests sets the boundaries of research scope.

Structured-focused comparison involves asking internally valid research questions to each case under examination, as questions should align with the research objectives. As for external validity concerns, this method standardizes data collection and allows for systematic comparison and accumulation of findings across cases.

For the purposes of this thesis, structured-focused comparison helps me setup an almost controlled environment. In this controlled environment, I aim to isolate the impact of extraneous variables which are potential intervening variables. By controlling for a potential third variable, I construct my Most Different Systems Design (MDSD), where highlighting and isolating potential intervening variables are at great importance for eliminating potential sources of spuriousness. Therefore, through MDSD, structured-focused comparison helps eliminating potential sources of spuriousness that can explain the outcome of interest I aim to highlight.

3.2.3.2 How I use Structured-Focused Comparison

Within my structured-focused comparison, I identify the universe of cases that the phenomenon of interest consists of. This is a crucial first step for tackling validity and reliability problems within case study design. What follows is dividing the case into several subcases categorized by different variables such as their characteristics. This helps to create more generalizable theoretical points, rather than being limited to specific and overly detailed instances of cases with limited generalization capacities (Gondo et al., 2010: 134).

For this reason, by relying on the case-within-case method, I employ Assistive Technology policies as a case of disability policies in both countries: the US and Türkiye. My universe of cases is broadly defined as disability policies. It includes several subclasses of policies ranging from employment policies for PwD to policies addressing accessibility in several areas such as transportation for PwD.

The second important criterion for conducting structured and focused comparisons is to establish a well-defined research objective and appropriate research strategy to guide the case selection process. Therefore, the main objective of this thesis is to underline the reasons for health inequalities between PwD, which I examine by looking at AT policies as part of the disability policy universe. Limiting the theoretical focus of health inequalities to a subclass of a case helps to solve potential complexities that may occur if the researcher were to look at multiple dimensions of complex problems.

The next section shows how I isolate the impacts of extraneous variables and potential sources of spuriousness through constructing a Most Different Systems Design (MDSD).

3.2.4 Most-different Systems Design (MDSD)

3.2.4.1 General Information on MDSD

Most Different System Design (MDSD) is used to understand why there is convergence in the variation of AT benefits for disabled veterans and citizens in two quite dissimilar countries like the US and Türkiye. MDSD helps us to reveal and understand the explanatory variable, patriotism, in the presence of other possible variables that are expected to explain the similarity in the outcome of interest but do not do so sufficiently. Such variables include welfare state regimes, with Türkiye belonging to the conservative model and the US being an archetypical case of a liberal regime, or development levels and paths that greatly differ between the two cases. Thus, the main logic of MDSD is that differences across cases cannot explain the similarity in the outcome of interest that is to be explained (Anckar, 2008: 390).

3.2.4.2 My MDSD

3.2.4.2.1 Potential Intervening Variable 1: Welfare regimes

3.2.4.2.1.1 Introduction

Welfare state regimes are institutional settings, rules, and perceptions that structures and steers public policymaking of welfare arrangements (Esping-Andersen, 1990: 80). The welfare regimes of Türkiye and the US are quite dissimilar. The welfare state is the core institution of welfare distribution. This makes it a prime candidate for explaining the similarity of Turkish and American disability policies.

3.2.4.2.1.2 Turkish Welfare State

Turkish welfare regime fits the most to conservative welfare regimes, which characterizes with welfare (re)distribution based on status, such as occupation type,

highly relies on family for several welfare-related issues such as provision of care (Szikra & Öktem, 2023: 202).

3.2.4.2.1.3 American Welfare State

The US welfare regime is an example of liberal (or Anglo-Saxon) case that has characteristics of high decommodification with minimal benefits, limited social rights, high eligibility criteria such as means-testing, and limited redistribution of welfare resources, and overall, an individualistic welfare accumulation (Esping-Andersen 1990: 26-27).

3.2.4.2.2 Potential Intervening Variable 2: Political systems

3.2.4.2.2.1 Introduction

The level of centralization of power significantly differs between the US and Türkiye. Constitutions in both countries structures the rules of the games in different ways. The constitution in the US determines the centralization of power and structures the state and government more in line with federalism. In the US, sovereignty is divided among multiple levels of government. The US's political system is a case of separation of power where each branch of political system can intervene in the processes of policymaking of others. In contrast Turkish political system is more centralized where sovereignty is centered around the president, with fusion of power where legislative and executive are controlled by one group.

3.2.4.2.2.2 The US

The US shows an extreme case of checks and balances. In a presidential system of government, the constitution and political structure establish a clear division of power between the legislative and executive branches. This separation is maintained through several key features: separate elections for the executive and legislature; distinct personnel in each branch; the inability of the legislature to remove the executive except through impeachment; the lack of power for the executive to dissolve the legislature; and the concentration of executive authority in the president.

As a constitutional federal republic, horizontal level of centralization is quite low in the US. The president is the head of the federal state and government, shares power with the legislative and judiciary, creating separation of power. The federal government shares power with the state governments, where some policy areas are decided within the federal government whereas some other left to the sovereignty of state governments.

3.2.4.2.2.3 Türkiye

On the contrary, Türkiye is a constitutional republic where power is centralized mostly within the president, who is the head of the state and the government. It has a democratic parliamentary, based on the rule of law and participation and accumulation of legislative seats of multiple political parties, contrary to two-party system of the US.

Türkiye shows an entirely weak form of checks and balances. Regarding horizontal division of power, legislature is parliamentary, and executive is the presidency. The two are governed by the same party and its members. This makes the political system of Türkiye towards fusion of powers rather than separation of powers.

3.2.4.2.3 Potential Intervening Variable 3: Policy styles

3.2.4.2.3.1 Introduction

Institutional arrangements have enabled or constrained state actors over the years, shaping the ways in which policies are structured and implemented (Howlett et al., 2022: 157). The political system is a crucial element of institutional arrangements that structure policy styles. For example, the level of separation of powers in a parliamentary system is lower compared to a presidential one. Thus, institutional arrangements such as the concentration of power between the executive and legislative branches and the number of veto points and actors shape the characteristics of policy outputs (Howlett & Tosun, 2021: 9). These discrete ways of policymaking are patterned and identifiable over a long period of time, forming policy styles.

Identifying policy styles helps us understand how processual arrangements such as state institutions' policymaking processes are patterned over time (Howlett & Tosun, 2021: 6).

The policy styles of countries affect policy decisions, determining who gets what, when, and how. Therefore, the policy styles of the US and Türkiye are prime candidates for explaining the inequalities faced by civilians with disabilities. The following section will highlight the policy styles of the US and Türkiye.

3.2.4.2.3.2 The US

It is difficult to provide a clear-cut categorization of the US's policy style. There is great variance in terms of policy styles, not only at different levels of polity such as the federal government, states, and local governments, but also within different policy areas. Policymaking styles within different policy areas are dominated by different groups, such as medical professionals who dominated health policy in the US for quite a long time (Howlett & Tosun, 2021: 180). The complex level of governance and decentralized polity make it both easier and harder for various policy actors to utilize multiple ways of setting agendas. Therefore, in the US, even institutions within the same level of governance, such as at the subnational level, there is observable variance in policy styles.

Though it may seem complex, the US's policy style still falls within a participatory policy style where several non-state actors such as interest groups have multiple ways of accessing different branches of policymaking. Through venue shopping at different levels of government, citizens can exert power on policymakers to push their agendas into policymaking stages.

Therefore, the multiplicity of governance enables actors outside of policymaking to participate in the policy cycle in several ways. The multiple levels of government provide both opportunities and complexities for the policymaking process.

3.2.4.2.3.3 Türkiye

The Turkish policy style can be best understood as a statist policy style. In a statist policy style, the policymaking stages, especially the formulation of policies, are dominated by government actors, particularly those in the executive branch of government (Howlett & Tosun, 2021: 360). Türkiye's statist policy style reinforces its ability to dominate the policymaking stages. The dominance of the executive branch limits legislative independence as the "majoritarian political-institutional set up" (Howlett & Tosun, 2021: 370-71) concentrates power in the hands of the ruling party holding the majority in parliament. Thus, the government controls whose ideas make it into the policy agenda by inviting or freezing out outside actors (Howlett & Tosun, 2021: 360).

3.2.5 Conclusion: MDSD

Most Different Systems Design			
DIFFERENCES	Features	Türkiye	The US
	Welfare Regimes	Conservative	Liberal
	Political Systems	Semi-Presidentialism	Presidentialism
	Policy Styles	Statist	Participatory
SIMILARITIES	Key Explanatory Variable	Patriotism	
	Outcome to be explained	Inegalitarian Disability Policy Outcomes	

Table 1 Most-Different System Design of Türkiye and the US

I constructed a MDSD to understand the potential explanatory variables that can show the reasons for similarities in two different countries. Both in Türkiye and the US, the prime candidates for explaining the inegalitarian disability policy outcome are welfare

regimes, political systems, and policy styles. I expect these variables to affect the disability policy making the most.

As Table 1 Most-Different System Design of Türkiye and the US summarizes, both countries differ in terms of their welfare regimes, political systems, and policy styles. However, both countries, interestingly, have high level of patriotism, which explains the inegalitarian disability policy outcomes. Disabled veterans in Türkiye and the US get higher benefit level for AT like prosthetics, whereas civilians with disabilities do not. This is because patriotism, an informal rule, assigns a higher normative position to disabled veterans.

3.3 Research Methods

3.3.1 Case Study Methods

3.3.1.1 General

A case study is a detailed examination of a specific example of the subject being studied. It is both a way to gather information and an analytical tool. By comparing different parts of the subject within the case study, it is possible to identify similarities and differences between different instances of the subject. As such, case studies are an effective way to understand the nuances of the subject being studied.

3.3.1.2 My research

I adopt comparative case study as a research method to conduct “an in-depth exploration from multiple perspectives of the complexity and uniqueness of a particular project, policy, institution, program or system in a ‘real life’ context.” (Simons, 2009: 21). This fits into my research aim as I plan to understand multi-dimensional nature of inequalities in disability policy outcomes.

3.3.2 Study Variables

3.3.2.1 Independent and Dependent variable

This thesis explores reasons for similar disability policy outcomes in two diverge settings: the US and Türkiye. The outcome of interest, therefore dependent variable, is disability policy outcomes. The independent variable is disability policy making, that is key policy actors' policymaking characteristics they follow in disability policy making. As an intervening variable patriotism intervenes in the disability policymaking process, constrains key policy actors, and causes inegalitarian disability policy outcomes. The dependent variable is examined through the policy structure research approach (refer to section 3.1.2.2) by focusing on dimensions of principles, objectives, procedures, and instruments.

3.3.2.2 Intervening Variable: Patriotism

Formal rules are written rules that structure socio-political life by enabling or constraining the behavior of policy actors. Informal rules also structure socio-political life by shaping the rules of the game, but unlike formal rules, they are not written or codified. These unwritten rules create obligations and rights that determine the appropriateness, achievability, or rightness of actions, ultimately establishing predictable and reliable patterns of behavior for policymakers (Bolukbasi & Yildirim, 2022). Patriotism is an informal rule dictating key policy actors to give military related issues a higher normative position. Its sphere of influence is not limited to but extends to almost everyone living in a country where military and related issues are given a higher normative position. However, through decision making and implementation of policies, key policy actors make decisions effecting many people. This is why it becomes crucial to examine key policy actors and the ways in which patriotism affects them.

As an intervening variable, patriotism help explain the relationship between the disability policy making and disability policy outcomes. The informal rule of patriotism acts as an intervening variable and dictates key policy actors to prioritize well-being of war veterans. Patriotism filters policymakers' behavior through enabling or constraining their actions. Key policy actors are limited in their available policy alternatives as this informal rule constructs disabilities of war-veterans as more deserving than those of civilians. Patriotism also has further political exhibits of

disabled bodies of war veterans. It constructs the state and nation as worthy of sacrifice in which case sacrifices are rewarded in return. War is justified because the nation and state are worthy of sacrificing for, despite war causing disabilities or casualties.

Patriotism is conceptualized as the higher normative position attributed to military related issues. It is operationalized by the level of disability deservingness; in which case it is measured by qualitative content analysis to trace where patriotism has been effective. To do this, I look at policy programming documents, fact sheets, official statistics on coverage and benefit levels, legislative documents, congressional and parliamentary debates to code where deservingness has been attained to disabilities of war veterans and civilians.

3.4 Data Sources

3.4.1 Qualitative Data

Qualitative data sources include presidential speeches of the US presidents, commission hearings, policy programming documents, fact sheets, legislative documents, congressional debates in the US and parliamentary debates in Türkiye.

3.4.2 Statistical Data

Statistical data includes official statistics on coverage and benefit levels retrieved from official statistics from OECD, UN, Centers for Disease Control and Prevention in the US, Bureau of Labor statistics of the US, Turkish Statistical Institute (TÜİK).

The statistical data provided in Table 2 is gathered from sources like official UN stats for disability, OECD, Centers for Disease Control and Prevention and Bureau of Labor statistics in the US, TÜİK in Türkiye. However similar operationalizations they may have, they are still prone to be inconsistent when compared to each other. Variance in conceptual and operational definitions in two countries, for example what counts as a disability or the weight given to a disability in measurement, creates a dependent variable problem and measurement differences.

Disability Data of Türkiye and the US						
Data Type	Country					
	The US				Türkiye	
	Ratio to Population	Male	Female	Average	Male	Female
Number of People with Disabilities (PwD)	%12.8	%12,7	%12.9	%7	%6	%8.1
Incapacity Related Disability Expenditures (% of GDP)	%1		%0.2			
	OECD Average: %1.6					
Ratio of disability beneficiaries	%20		%38,4			
Employment Level for PwD (% of population)	%21.3		%16,6			
	OECD Average: %44					
Employment Level for People Without Disabilities	%65,4		%48			
	OECD Average: %70					

Table 2 Disability Data of Türkiye and the US

%12.8 of the US's adult population has a disability, whereas this is %7 for Türkiye. For the PwD who are eligible to incapacity related disability expenditures, these expenditures make %1 of the GDP in the US, whereas it is only makes %0.2 Türkiye's GDP. These numbers are strikingly low, especially for Türkiye, as the

OECD average is %1.6. Only %20 of the PwD in the US makes up the population receiving these disability expenditures. This ratio goes up to %38.4 in Türkiye.¹

For employment, only %21.3 of PwD in the US are employed. This is more than 3 times less than their non-disabled counterparts in the US. This number is even lower for PwD's employment in Türkiye, only %16.6 of PwD are employed. This is almost one third of non-disabled employment in Türkiye. OECD average for PwD employment is %44. Both Türkiye and the US falls behind PwD employment when compared to what OECD countries on average does. The employment gap in the US is even more significant considering the average non-disabled employment is close to OECD but PwD employment is less than half of OECD average. This shows that both Türkiye and the US at least policy-relevant problems to increase PwD employment and make them close to non-PwD employment.

¹ OECD's definition for incapacity related disability expenditures is similar for both countries and includes mostly cash transfers to the worker who got injured or disabled when working, or their relatives like their wife. However, there is an exception in which Türkiye's expenditure also includes in-cash transfers different from incapacity happened while working. This monthly in-cash transfers are given to eligible people with disabilities.

CHAPTER IV

CASE STUDY FINDINGS I: PATRIOTISM SHAPING UNEQUAL ACCESS TO AT IN THE US

4.1 Introduction: Patriotism in the US

Patriotism is an informal rule that causes those affected by it to give military-related issues a higher normative position, shaping the actions and thoughts of actors. It is an intervening variable that explains the inequality of assistive technology policies, with disabilities of veterans being memorialized as sacrifices made for the nation and state, used to justify special benefits. Patriotism constructs the state and nation as worthy of sacrifice, with war being justified as worth the sacrifices despite causing disabilities or casualties.

Patriotism is quite prominent in the US. It is no coincidence that when a politician talks about war, veterans and their sacrifices are explicitly mentioned. Patriotism exists structurally irrespective of political leaning; whether democrat or republican, politicians almost never question the inegalitarian way meanings are loaded onto one form of disability—the service-related disabilities of veterans. The sections include paragraphs with some remarks from politicians, retrieved from several official data sources such as presidential speeches. They show how patriotism as an informal rule shapes appropriate ways to act and think, ultimately compelling actors to give military-related issues, such as disabilities of war-veterans, a higher normative position. In return, patriotism structures disability policies that become inegalitarian, usually giving more benefits and entitlements to those in relation to the military.

4.2 Patriotism Assigning a Higher Normative Status to Disabled Veterans in the US

The very founding elements of US involvement in war veterans' care are evident in Abraham Lincoln's inaugural address to Congress, asking "to care for him who shall have borne the battle and for his widow and his orphan," which became the main motto of Veterans Affairs (Tepe & Peterson, 2017: 36). Similar to Türkiye, it is understood as a pivotal role of the US to provide for widows and children of veterans with service-connected disabilities or who die from service-connected disease or injury; they are in a special category that deserves extensive compensation and help because not only have veterans but also their families made sacrifices (Panangala, 2021). This shows that patriotism and construction of sacrifices are not limited to disabled veterans but also their relatives. Therefore, patriotism not only assigns a higher normative position to the war veterans but extends to their relatives too.

4.3 Patriotism Shaping How Key Policy Actors Perceive Conditions of Deserving Disabilities in the US

Patriotism in the US is effective irrespective of political leaning. From democrats to conservatives, almost every politician wants to protect war veterans, military personnel, and martyrs' survivors. Patriotism forces key policy actors like congressman and congresswoman in the US to give military related issues a higher normative position than other policy issues. For example, it constrains policymakers' viable policy alternatives in disability policy area through structuring how they perceive and construct conditions of deservingness of US war veterans. Patriotism forces these key policy actors to select from the policy alternatives which prioritize war veterans' needs and welfare more than civilians with disabilities. The outcome of disability policy becomes inegalitarian as patriotism forces these actors to select the policies that will be appropriate for sacrifices of war veterans in the formulation and implementation stages.

U.S. Senator Ken Salazar's hearing given to the Committee on Veterans' Affairs in the US senate is an example of patriotism shaping conditions of disability deservingness

in the US. In the speech, senator bluntly highlights that the disabilities of veterans are results of sacrifices they make (The US Senate Committee on Veterans Affairs, 2006: 5). It is not just the US Department of Veterans Affairs—the most likely case to find patriotism—but extends to speeches of presidents representing the polar opposites of political spectrum: 44th US President Barack Obama and 45th US President Donald Trump. These two political figures categorize disabilities of veterans as sacrifices. In 2014, Obama’s remarks at a Dedication Ceremony for American Veterans Disabled for Life Memorial highlighted that from the day of its opening, the memorial would be a place for the nation to pay their tributes—though not enough to match what the sacrifices of war veterans worth. He also said that they shall understand the sacrifices veterans made for their nation and that they are in freedom and peace because of their sacrifices and burdens they bear (Office of the Federal Register, National Archives and Records Administration, 2014: 3). Similarly, Trump (Office of the Federal Register, National Archives and Records Administration, 2017:1) gave a speech for the Department of Veterans Affairs Accountability and Whistleblower Protection Act of 2017, stating that veterans “In their courage, their dignity, and their selfless sacrifice represent the very best of us. Our veterans have fulfilled their duty to this Nation, and now we must fulfill our duty to them.” He further stated that veterans are “warriors and heroes who have won our freedom” (Office of the Federal Register, National Archives and Records Administration, 2017: 1), showing traces of patriotism like other speeches.

These remarks show how patriotism constrains policymakers’ policymaking choices by structuring how they perceive and construct conditions of deservingness of US war veterans. War veterans’ disabilities are constructed as sacrifices made for the state and the nation, and that they are safe and in peace because of their sacrifice. Patriotism positions their disabilities in a normatively higher position, which deserves higher compensation than civilians’ disabilities. Again, this is because war veterans’ disabilities are a cause for US freedom and peace. The informal rule of patriotism shapes how actors think and act, ultimately becoming the most evident intervening variable for explaining variance in benefit levels of AT for disabled veterans and civilians.

4.4 Measuring Dimensions of the American Disability Policy: Unequal Access to AT in the US

4.4.1 Introduction

In this section, I take a closer look at how the implementation of disability policy in the US differs from its official, written form. By examining the various principles, objectives, procedures, and instruments of the American disability policy, I show the emphasis on patriotism leads to outcomes that do not align with the stated aim of promoting human rights and equality. These unequal results stand in direct opposition to the requirements set forth by human rights in American disability policy.

4.4.2 Different Principles Resulting in Unequal Access to AT in the US

The main principle of American disability policy centers on an anti-discrimination approach and requires policymakers to treat all people with disabilities (PwD) equally. However, the outcome of interest differs from this main principle. Disabilities of war veterans are considered worthy of more social and welfare rights; thus, their well-being is prioritized over civilians with disabilities. This difference in outcome is caused by patriotism, which makes the disability of war veterans worthier than those of civilians.

4.4.3 Different Objectives Resulting in Unequal Access to AT in the US

Disability policy outcome greatly differs from the main objective of American disability policy. The main objective is guided by formal rule of human rights, which forces policymakers to prioritize equity, accessibility, and activation for all PwD. However, the outcome of disability policies is significantly different from the main objective of disability policy. In the outcome of interest, the altered objectives provide more accessible environments for war-veterans and aims to activate them through more advanced AT than civilians with disabilities. Patriotism causes this difference between the main objective and the outcome of US disability policy.

4.4.4 Different Procedures Resulting in Unequal Access to AT in the US

The outcome of American disability policy significantly differs from its main procedures. While the procedures are guided by formal rule of human rights, which dictates equal access to services and benefits for all disabled individuals, patriotism in the US leads to an unequal outcome. The outcome of different procedures of disability policy in the US is that it prioritizes war veterans over civilians in terms of accessibility and activation through several policies like AT access. This leads to increased accessibility and activation for war veterans through in-kind and in-cash services, making them more worthy of social and welfare rights than civilians with disabilities.

4.4.5 Different Instruments Resulting in Unequal Access to AT in the US

Disability policy instruments greatly differ from the main tools of American disability policy. The main tools of welfare distribution are guided by formal rule of human rights. The formal rule dictates policymakers to provide generous in-cash and in-kind services promoting equity for all PwD. In the outcome of interest, which has been altered by the patriotism, disabled veterans are eligible to more generous in-kind and in-cash transfers than civilians. For example, conditionalities of in-cash and in-kind transfers are more less strict, or in-kind or in-cash services' replacement rates are more generous for disabled veterans.

4.4.6 Conclusion

In this section, I examine how the principles, objectives, procedures, and instruments used in the American disability policy differ from what is stated in its official, written form. My analysis reveals that an emphasis on patriotism leads to outcomes that do not align with the stated aim of promoting human rights and equality. Instead, these outcomes deviate from the goal of formal human rights and become inequalitarian.

4.5 The Weak Impact of Human Rights as a Formal Rule in Unequal Access to AT in the US

4.5.1 Introduction

The formal rule of human rights serves as the guiding principle for American disability policy and its structure. It establishes the principles, objectives, procedures, and instruments of disability policy to promote equality. In the following sections, I explore how human rights serve as the foundation for the formal structure of disability policy.

4.5.2 Human Rights Insufficiently Shaping the Principles of American Disability Policy

The formal rule of human rights shapes principles, objectives, procedures, and instruments of disability policy towards a more egalitarian outlook. Overall, formal rule of human rights guides the disability policymaking process with an anti-discrimination approach. It orders policymakers to treat all PwD equally.

The main principles of the Americans with Disabilities Act (ADA 1990) are based on anti-discrimination principle. The ADA 1990, the overarching disability policy of the US, is guided by anti-discrimination principle focusing on critical areas such as employment, education, housing or transportation (ADA, 1990: 1-10; ADA, 1990: §102). It dictates these disability policies to be formulated and implemented based on the principle of anti-discrimination. The objectives of these policies are expected to be anti-discriminatory towards PwD. These policy measures include, building transportation systems, buildings, providing reasonable accommodations that increase PwD's participation to workforce and society (ADA, 1990: §230, §243, §245). Such measures are complementary to anti-discrimination principles, which guides disability policy to treat all PwD equally. However, unlike what ADA dictates, AT policy in the US discriminates between veterans and civilians, limits self-determination and full participation by lack of accessibility to AT, and it is inequalitarian and creates discrimination given variance in benefits.

4.5.3 Human Rights Insufficiently Shaping the Objectives of American Disability Policy

The formal rule of human rights forces the disability policy with the main objective of prioritizing equity, accessibility, and activation of PwD. American disability policy's main objectives are preventing disability (Rehabilitation Act, 1973: 112), increasing accessibility (ADA, 1990: 5; ADA, 1990: §230, §243, §245), and activating them through their participation to society and taking decision-making roles (Rehabilitation Act, 1973: 115). The objectives determine sets of goals within disability policies that are expected to increase equity, accessibility, activation of PwD in several fields. However, the influence of patriotism causes these objectives to be effective for disabled veterans. Civilians with disabilities, who often have limited access to AT, are not included as target groups and are left out of these objectives.

4.5.4 Human Rights Insufficiently Shaping the Procedures of American Disability Policy

In the US, most of the procedures vary in federal and state governments, with the main aim of increasing accessibility of disabled people (Rehabilitation Act, 1973: 68) to access disability-related services, employment, housing, and similar areas. The procedures for accessing AT differ greatly between war-veterans and civilians with disabilities. For disabled veterans, the process of obtaining AT is more centralized and occurs more quickly. They undergo medical examinations for both disability status and AT eligibility at state facilities, which is a much simpler set of procedures compared to those for disabled civilians. Disabled civilians must obtain their disability status report, AT eligibility, and funding from different institutions, making the process more complex and time-consuming.

4.5.5 Human Rights Insufficiently Shaping the Instruments of American Disability Policy

American disability policy has several instruments, such instruments are information campaigns; financial tools like in-cash or in-kind transfers; or organizations such as

state sponsored foundations. Through ADA, the formal rule of human rights dictates American disability policy to have accessible instruments for PwD. With patriotism, instruments aimed at disabled veterans greatly differs, the most visible change occurs with the in-cash and in-kind transfer. Instruments favor more accessibility for war-veterans through easier procedures, for example the AT access for war-veterans are handled by Veterans Affairs in the US. This creates easier access for them to the instruments. Instruments themselves require less means-test, in some cases no means-test, and are more generous in expenditure level. Therefore, patriotism overwhelms the formal rule of human rights and creates inegalitarian policy instruments.

4.5.6 Conclusion

This section explored how human rights serve as the guiding principle for the structure of American disability policy. This formal rule directs policymakers to promote equality by implementing principles, objectives, procedures, and instruments that align with the values of human rights.

4.6 The Powerful Impact of the Informal Rule of Patriotism in the Outcomes of American Disability Policy

4.6.1 Introduction

The following show how patriotism gives war veterans' disabilities a higher normative status in the US. Patriotism overwhelms the formal rule of human rights, which dictates equal treatment for all PwD. This powerful and effective informal rule can cause disability policy outcomes to be unequal, favoring war veterans over civilians with disabilities. The following sections will explore the ways in which patriotism shapes the structure of disability policy in Türkiye by influencing its principles, objectives, procedures, and instruments. Despite the stated aim of promoting equality for all PwD, the influence of patriotism alters disability policy outcomes, resulting in unequal outcomes for PwD.

4.6.2 Patriotism Altering the Principles of American Disability Policy

Patriotism shapes the principles of disability policy in the US towards an inegalitarian outcome. It constructs war-veterans as more deserving beneficiaries because their disability is portrayed as sacrifices made for the nation and the state. Patriotism dictates policymakers to prioritize equity, accessibility, and activation for disabled veterans. Policymakers must provide more compensation for war-veterans because patriotism constructs war-veterans as worthier beneficiaries. In the case of AT policy, free-of-charge AT is provided to compensate for their sacrifice and disability. Therefore, patriotism structures the core principle of disability policy in the US to be rewarding for sacrifices of war-veterans.

4.6.3 Patriotism Altering the Objectives of American Disability Policy

Patriotism alters the objectives of disability policy in the US towards an inegalitarian outcome. It constructs war-veterans as more deserving beneficiaries. The deservingness is connected to war-veterans' disabilities, and their disability is deemed worthier of compensation than the disability of citizens with disabilities. Despite the disability policy aiming at prioritizing equity, accessibility, and activation for all PwD, the outcome of disability policy in the US is inegalitarian towards PwD. Therefore, patriotism alters the main objective of the US disability policy, and it re-prioritizes the objectives for disabled veterans.

4.6.4 Patriotism Altering the Procedures of American Disability Policy

Patriotism steers disability policy to prioritize war-veterans over civilians with disabilities in terms of disability policy procedures. The procedures of disability policy in the US are centered around accessibility and activation for PwD. However, patriotism alters these procedures, and in the outcome of interest, disability policy procedures for war-veterans prioritize accessibility and activation of war-veterans compared to civilians with disabilities. Thus, the inegalitarian outcome of disability provides easier access for disabled veterans compared to civilians with disabilities. The main procedures of disability policy in the US guides policymakers to formulate procedures aiming equal access to services and benefits for all PwD. Patriotism alters the formal rule of human rights and limits the ability of policymakers by positioning

disabled veterans as worthier of procedures providing easier access to services. Through prioritizing war-veterans over civilians with disabilities in terms of disability policy procedures, patriotism steers disability policy procedures towards inequalitarian policy outcomes.

Despite dictating the contrary, patriotism surpasses formal rule of human rights, and cause inequalitarian outcomes of disability policy in the US. For example, easier access to advanced AT, in terms of financing and procedural tools like Veterans Affairs' targeted services helping war-veterans, are provided to eligible disabled veterans. This is due to construction of war-veterans as more deserving beneficiaries. Their disability is considered as sacrifices made for the nation and state. Therefore, the procedures determining the types and ways of service provision targets more accessible services and activates war-veterans with swifter service delivery.

4.6.5 Patriotism Altering the Instruments of American Disability Policy

Patriotism shapes the instruments of disability policy in the US towards an inequalitarian outcome. It constructs war-veterans as more deserving beneficiaries who require most convenient ways of in-kind and in-cash provision. As a result, more generous in-cash and in-kind services are provided to disabled veterans. Patriotism limits the ability of policymakers to utilize more egalitarian instruments by determining the ways, amounts, and types of healthcare beneficiaries can access. The outcome of disability policy, the actual behavior effecting PwD, is inequalitarian because disabled veterans are deemed more deserving despite the formal rule of human rights dictating the contrary.

4.6.6 Conclusion

This section demonstrated how the informal rule of patriotism in the US assigns a higher level of importance to the disabilities of war veterans, overwhelming the formal rule of human rights, which mandates equal outcomes for all individuals with disabilities. Despite the formal rule dictating equal treatment for all PwD, the informal rule of patriotism is so powerful and effective that it can cause disability

policy outcomes to be unequal, favoring war veterans over other disabled individuals. This illustrates the ways in which informal rules can shape policy outcomes, even when they contradict formal rules and stated objectives.



CHAPTER V

CASE STUDY FINDINGS II: PATRIOTISM SHAPING UNEQUAL ACCESS TO AT IN TÜRKİYE

5.1 Introduction: Patriotism in Türkiye

Patriotism is an informal rule that influences people to place more importance on military-related issues, affecting their actions and thoughts. It is a factor that explains why assistive technology policies are unequal. Disabilities of war-veterans are seen as sacrifices for the nation and state, which justifies special benefits given to war-veterans. Patriotism portrays the state and nation as deserving of sacrifice, and in that sense, war is justified as worthy to give your body for, despite causing disabilities or casualties.

Like the US, patriotism is quite prominent in Türkiye. For a country that fought an independence war for the establishment of its modern, secular Republic, patriotism is no surprise; not to mention the ongoing conflict with the PKK since the 1990s that has caused thousands of military men to become disabled. As the historical narrative of the Turkish nation states, every Turkish citizen is born as a soldier. These are among many reasons why the military and preserving it plays a central role in Turkish nationalism. Therefore, patriotism is an informal rule shaping who gets what, when, and how, as well as what actors can think or act on.

5.2 Patriotism Assigning a Higher Normative Status to Disabled Veterans in Türkiye

Traces of patriotism can be found in political parties ranging from far-right nationalistic or Islamist conservatives to left-wing parties. For example, Virtue Party MP Ali Oğuz (a right-wing party) praises the sacrifices of war-veterans and says that the nation's existence today is dependent on the sacrifices of war-veterans and martyrs (TBMM, 2000: 411-2). Democratic Left Party MP Hasan Özgöbek says it is the state's responsibility to look after war-veterans and martyrs' families and relatives (TBMM 2000, pp. 411-2). Similarly, far-right nationalist Nationalist Movement Party's MP Reşat Doğru said that it is the state's duty and responsibility to look after war-veterans and martyrs' relatives as they are in a sacred status in Islam, connecting their sacrifices to a sacred religious position.

Patriotism, either through religious or nationalistic aspects, assigns a higher normative status to war-veterans in Türkiye. As can be seen, it is not only the case for war-veterans to be considered in a higher normative status in the eyes of the nation and state, but also in Islam, they are in a higher normative status. The Islam dimension works as a way to further justify their position in the nation and the state, making it a necessity to be viewed in a higher normative position.

5.3 Patriotism Shaping How Key Policy Actors Perceive Conditions of Deserving Disabilities in Türkiye

The inequality that is examined in this paper has been reported by a Turkish citizen to the Turkish Ombudsman Institution. The Turkish Ombudsman Institution's report based its justification for the inequality of AT on sacrifice and fidelity of disabled veterans, arguing that the communique (SUT) determining the prices of AT did not create inequality between disabled veterans and civilians.

The report argues that benefit level differences between the disabled veterans and civilians results from sacrifices of disabled veterans, who earned the entitlements by their disabilities, and fidelity to the Turkish society. The report further argues that protection and benefits provided to the disabled veterans are directive to secure the sacrificial hero—disabled veteran. The inequality is further justified by the Türkiye's context, its ongoing high-intensity conflict with the PKK, that the disabled veterans

sacrifice themselves for the protection of state and nation's security. Similar to the freedom and peace argument found in the patriotism of the US, the report argues that Türkiye is an independent and a safe country owing to the sacrifices and fidelity of veterans (Turkish Ombudsman Institution, 2016: 8-13, translation mine).

Patriotism shapes conditions of deservingness in Türkiye as being a war-veteran. Disabled veterans are more deserving beneficiaries because their special entitlements are given as a reverence to their sacrifices. Patriotism limits the perception of key state actors, like the Ombudsman Institution, forces them to construct conditions of deservingness on fidelity and sacrifices made for the state. Therefore, the disabilities of civilians, irrespective of how they occurred, are not considered as deserving as those of war-veterans.

5.4 Measuring Dimensions of the Turkish Disability Policy: Unequal Access to AT in Türkiye

5.4.1 Introduction

This section compares how Turkish disability policy diverges from its formal and written form. The different principles, objectives, procedures, and instruments of disability policy in Türkiye show that patriotism causes disability policy outcomes to deviate from the goal of formal human rights and become inegalitarian. These inegalitarian outcomes diametrically oppose what the formal rule of human rights dictates the policymakers to do.

5.4.2 Different Principles Resulting in Unequal Access to AT in Türkiye

The main principle of disability policy in Türkiye centers on an anti-discrimination approach and requires policymakers to treat all PwD equally. However, the outcome of interest differs from this principle. Disabilities of war-veterans are considered worthy of more social and welfare rights; thus, their well-being is prioritized over civilians with disabilities. This difference in outcome may be attributed to the informal rule of patriotism, which can lead to the perception that disabilities of war-veterans are worthier than those of civilians.

5.4.3 Different Objectives Resulting in Unequal Access to AT in Türkiye

The main objective of Turkish disability policy is guided by the formal rule of human rights, which requires policymakers to prioritize equity, accessibility, and activation for all PwD. However, the outcome of disability policies significantly differs from this objective. In practice, the altered objectives provide more accessible environments for war-veterans and aim to activate them more than civilians with disabilities. Free-of-charge AT provision is one of the ways of reaching this altered objective, which prioritizes disabled veterans. This difference between the main objective and the outcome of US disability policy may be attributed to the glorification of militarism.

5.4.4 Different Procedures Resulting in Unequal Access to AT in Türkiye

The outcome of Turkish disability policy significantly differs from its main procedures. While the main procedures are guided by the formal rule of human rights, which mandates equal access to services and benefits for all PwD, patriotism in Türkiye can lead to an unequal outcome. In practice, disability policy in Türkiye prioritizes war veterans over civilians in terms of accessibility and activation through several policies such as access to assistive technology. This results in increased accessibility and activation for war veterans through in-kind and in-cash services, potentially lead by the perception that they are more worthy of social and welfare rights than civilians with disabilities.

5.4.5 Different Instruments Resulting in Unequal Access to AT in Türkiye

The instruments of disability policy are substantially different from the main instruments proposed in the disability law. The main tools of welfare distribution are guided by the formal rule of human rights, which requires policymakers to provide generous in-cash and in-kind services promoting equity for all PwD. However, in practice, the outcome of Turkish disability policy is altered by the patriotism, resulting in disabled veterans being eligible for more generous in-kind and in-cash

transfers than civilians. For example, conditionalities of in-cash and in-kind transfers are more less strict, or in-kind or in-cash services' replacement rates are more generous for disabled veterans.

5.4.6 Conclusion

This section compared the ways in which the principles, objectives, procedures, and instruments of Turkish disability policy diverge from what its formal and written form aims at. The different principles, objectives, procedures, and instruments of disability policy in Türkiye show that patriotism causes disability policy outcomes to deviate from the goal of formal human rights and become inegalitarian.

5.5 The Weak Impact of Human Rights as a Formal Rule in Unequal Access to AT in Türkiye

5.5.1 Introduction

Like the US, the formal rule of human rights is the formal rule guiding disability policy and its structure. It sets principles, objectives, procedures, and instruments of disability policy to be egalitarian. Following sections shows how human rights structures the formal policy structure of disability policy as the guiding formal rule.

5.5.2 Human Rights Insufficiently Shaping the Principles of Turkish Disability Policy

The main principles of Turkish disability policy are anti-discrimination as states' policies are steered towards anti-abuse and anti-discrimination towards the disabled (Law No. 5378, Article 8); equality through rehabilitation services to disabled people that enables them to participate in society and family in areas such as decision making (Law No. 5378, Article 10); active citizenship of disabled people by sheltered workshops that eases them to find jobs (Law No. 5378, Article 3-f and g; Article 10); accessibility via providing suitable conditions for disabled people in workplaces or public buildings (Law No. 5378, Provisional Article 2 and 3); and egalitarianism such as providing equal access to education with non-disabled (Law No. 5378, Article 15).

Patriotism, an informal rule that is acting as an intervening variable, causes the overarching Turkish disability policy to be discriminatory towards disabled civilians. Unlike the parchment rules of Law. No. 5378, AT policy discriminates between veterans and civilians, limits self-determination and full participation by lack of accessibility to AT, and it is inequalitarian and creates discrimination given variance in benefits.

5.5.3 Human Rights Insufficiently Shaping the Objectives of Turkish Disability Policy

Main objectives of Turkish disability policy are preventing disability, increasing accessibility (Law. No. 5378, provisional article 2 and 3; Article 1), activating them (Article 3-f and g; Article 10); and preventing discrimination (Article 8). However, with the impact of patriotism, these objectives are only achieved for the disabled veterans. Disabled civilians who have almost no access to AT have been left out of these objectives as target groups.

5.5.4 Human Rights Insufficiently Shaping the Procedures of Turkish Disability Policy

Main procedures of Turkish disability policy are published by responsible ministries, for example, employment policy is published by the Ministry of Labor and Social Security. Procedures are designed with objectives of increasing accessibility and participation of disabled to the society (Article 4). These procedures greatly differ for disabled veterans, as the access to AT, for example, is more centralized and occur more swiftly compared to disabled civilian. A disabled veteran goes into medical examination for both disability status and AT eligibility in state's facility, much easier set of procedures compared to disabled civilian who gets disability status report, AT eligibility and funding from different institutions.

5.5.5 Human Rights Insufficiently Shaping the Instruments of Turkish Disability Policy

Turkish and American disability policy has several instruments, such instruments are information campaigns; financial tools like in-cash or in-kind transfers; or organizations such as state sponsored foundations. With patriotism, instruments aimed at disabled veterans greatly differs, the most visible change occurs with the in-cash and in-kind transfer.

5.6 Conclusion

This section showed how human rights as a guiding formal rule of disability policy structures the disability policy structure. This formal rule dictates policy practitioners to be egalitarian through enacting principles, objectives, procedures, and instruments in line with the formal rule of human-rights.

5.7 The Powerful Impact of the Informal Rule of Patriotism in the Outcomes of Turkish Disability Policy

5.7.1 Introduction

This section shows how patriotism gives war-veterans' disabilities a higher normative status. In this process, patriotism overwhelms the formal rule of human rights, which dictates egalitarian disability policy outcomes for all PwD. However, this powerful and effective informal rule overwhelms the formal rule and causes disability policy outcomes to be inegalitarian. The following sections show the ways in which patriotism shapes the structure of disability policy in Türkiye by influencing its principles, objectives, procedures, and instruments.

5.7.2 Patriotism Altering the Principles of Turkish Disability Policy

The principles of Turkish disability policy are influenced by patriotism, leading to unequal outcomes. War veterans are seen as more deserving recipients because their disabilities are viewed as sacrifices for the country. This leads policymakers to prioritize equity, accessibility, and activation for disabled war veterans. As a result, they receive more compensation and benefits such as free assistive technology. This is because patriotism portrays war veterans as more worthy beneficiaries.

5.7.3 Patriotism Altering the Objectives of Turkish Disability Policy

Patriotism influences the objectives of disability policy in Türkiye, potentially leading to unequal outcomes for civilians with disabilities. Disabled veterans are viewed as more deserving recipients of disability benefits due to their service-related injuries. As a result, their disabilities are considered more worthy of compensation compared to those of other citizens with disabilities. Despite the stated aim of disability policy to promote equity, accessibility, and activation for all PwD, the policy outcomes disproportionately favor disabled veterans. Thus, patriotism alters the primary objective of Türkiye's disability policy and prioritize the needs of disabled veterans.

5.7.4 Patriotism Altering the Procedures of Turkish Disability Policy

The main procedures of disability policy in Türkiye guide policymakers to formulate procedures aiming equal access to services and benefits for all PwD. However, patriotism alters the formal rule of human rights and limits the ability of policymakers to be egalitarian to all PwD. Patriotism does so by positioning war veterans with disabilities as worthier of procedures providing easier access to services. As a result of patriotism, war veterans with disabilities have easier access to advanced assistive technologies (AT) and other services than civilians with disabilities. This is because war veterans are constructed as more deserving beneficiaries, whose disability is considered a sacrifice made for the nation and state.

5.7.5 Patriotism Altering the Instruments Turkish Disability Policy

Patriotism shapes the instruments of disability policy in Türkiye towards an unequalitarian outcome. Patriotism limits the ability of policymakers to utilize more egalitarian instruments by determining the ways, amounts, and types of healthcare beneficiaries can access. The outcome of disability policy, the actual behavior affecting PwD, is unequalitarian because war veterans with disabilities are deemed more deserving despite the formal rule of human rights dictating the contrary. It constructs war-veterans as more deserving beneficiaries who require the most

convenient ways of in-kind and in-cash provision. As a result, more generous in-cash and in-kind services are provided to war veterans with disabilities.

5.7.6 Conclusion

This section illustrated the ways in which informal rule of patriotism assigns a higher level of importance to the disabilities of war veterans. In the outcome, the formal rule of human rights, which mandates equal outcomes for all individuals with disabilities, is overwhelmed. Despite the formal rule of human rights dictating the contrary, the informal rule of patriotism is so powerful and effective that it causes disability policy outcomes to be unequal.



CHAPTER VI

DIVERGE CASES CONVERGING IN THEIR POLICY STRUCTURES: PATRIOTISM EFFECTING THE TURKISH AND AMERICAN POPIS

6.1 Introduction

American and Turkish disability policies converge in many aspects. Their principles, objectives, procedures, and instruments converge both as written, formal rules and in their outcomes. As formal rules, both disability policies dictate that key policy actors should be egalitarian towards all PwD and follow an anti-discriminatory approach when formulating and implementing disability policies. However, patriotism alters disability policies in both countries and deviates the principles, objectives, procedures, and instruments (POPIs) of both disability policies to give more benefits to disabled veterans.

The case of patriotism shows the ways in which anti-discrimination policies like the Americans with Disabilities Act (ADA) in the US fail to deliver their promises. Anti-discrimination policies like the ADA in the US and the Disability Discrimination Act (DDA) in the UK fail to promote increased employment levels for PwD, for example (Hvinden, 2018: 441). Although scholars have not agreed on this debated potential causal relationship between anti-discrimination law and disability policy outcomes, informal rules like patriotism can highlight why anti-discrimination disability policies cannot achieve their targeted outcomes. Informal rules like patriotism effectively overwhelm formal rules and steer the direction of policy outcomes.

6.2 Similarities in Policy Structure of American and Turkish Disability Policies

6.2.1 Principles

Guided by the formal rule of human rights, the disability policy in Türkiye and the US is based on an anti-discrimination approach aiming to treat all PwD equally. However, the principles of disability policy in both countries are influenced by patriotism, which leads to unequal outcomes for war veterans and other disabled individuals. War veterans are often seen as more deserving recipients of benefits and compensation because their disabilities are viewed as sacrifices for their country. As a result, they receive more support for in-cash and in-kind benefits, such as free-of-charge AT.

6.2.2 Objectives

The main objective of disability policy in Türkiye and the US is to promote equity, accessibility, and activation for all PwD, based on the formal rule of human rights. However, in practice, the outcomes of these policies often differ from their stated objectives, with war-veterans receiving more support and benefits than other disabled individuals. This is due to the influence of patriotism, which views war veterans as more deserving recipients of disability benefits due to their service-related injuries. As a result, the primary objective of disability policy in both countries is altered, leading to unequal outcomes for civilians with disabilities. Despite the stated aim of promoting equity for all PwD, policy outcomes disproportionately favor war-veterans.

6.2.3 Procedures

The outcome of disability policy in Türkiye and the US differs significantly from its main procedures, which are guided by the formal rule of human rights and mandate equal access to welfare services and benefits for all PwD. The influence of patriotism can lead to unequal outcomes, with war veterans being prioritized over civilians in terms of accessibility and activation. This is due to the perception that war veterans are more deserving beneficiaries, whose disabilities are viewed as sacrifices made for the nation and state. Through procedures specifically assigned for welfare services targeting disabled veterans, they have easier access than civilians with disabilities to

welfare items like AT. Despite the stated aim of promoting equal access to services and benefits for all PwD, the influence of patriotism can alter the formal rule of human rights and limit the ability of policymakers to be egalitarian when formulating and implementing disability policies.

6.2.4 Instruments

The instruments of disability policy in Türkiye and the US are substantially different from those proposed in the formal rules. While the main tools of welfare distribution are guided by the formal rule of human rights, which requires policymakers to provide generous in-cash and in-kind services promoting equity for all PwD, the influence of patriotism can alter the outcome of disability policy. In the policy outcomes, war veterans with disabilities are eligible for more generous in-kind and in-cash transfers than civilians, with less strict conditionalities and more generous replacement rates. This is due to the perception that war veterans are more deserving beneficiaries, who require the most convenient ways of in-kind and in-cash provision. As a result, despite the formal rule of human rights dictating equal treatment for all PwD, the outcome of disability policy is often inequalitarian, with war veterans receiving more generous support than civilians.

6.3 Conclusion

Disability Policy Structure of The Us and Türkiye	How “Human Rights” shapes the policy structure	How “Patriotism” shapes the policy structure	Disability Policy Outcome
Principles	Anti-discrimination approach orders policymakers to treat all people with disabilities (PwD) equally	War-veterans are more deserving of social and welfare rights	Well-being of war-veterans are prioritized
Objectives	Forces disability policy to prioritize equity, accessibility, activation	Prioritize war-veterans over civilians in accessibility and activation	In-kind and in-cash services increases war-veterans’ accessibility and activation
Procedures	All PwD have equal access to services and welfare benefits	Easier access to benefit for veterans	War-veterans have easier access than civilians
Instruments	Generous in-cash and in-kind services to promote equity for PwD	Determines the ways, amounts, and types of healthcare beneficiaries can access	War-veterans are eligible to more generous in-kind and in-cash transfers than civilians

Table 3 Disability Policy Structure of the US and Türkiye

Disability policies in both America and Türkiye have many similarities in their principles, objectives, procedures, and instruments, both as formal rules and in their outcomes. As formal rules, both policies dictate that key policy actors should treat all PwD equally and follow an anti-discriminatory approach when formulating and implementing disability policies. However, the influence of patriotism alters disability

policies in both countries, deviating them from their principles, objectives, procedures, and instruments to provide more benefits to war veterans with disabilities. Despite the stated aim of promoting equality for all PwD, the outcome of disability policy in both countries can be influenced by patriotism, leading to unequal treatment for war veterans and other disabled individuals.



CHAPTER VII

PATRIOTISM CONVERGING TWO DIFFERENT WORLDS: SIMILAR OUTCOMES IN THE TURKISH AND AMERICAN DISABILITY POLICY STRUCTURES

People with disabilities comprise at least 15 percent of the world's population. That is around 1.5 billion people who might require extensive care, specifically designed spectacles, or wheelchairs. Assistive technology (AT) is the most common and effective solution to the many problems these individuals face. This is why AT is a crucial element for many to continue their lives in a standard similar to those who do not require it. Access to AT becomes crucial not only for health reasons but also because easier access to AT can help societies become more prosperous by enabling, for example, PwD to participate in socio-economic life through more accessible employment. AT access is, therefore, an issue with multidimensional aspects extending its significance to areas like political economy, health policy, and human rights.

In this multi-dimensional issue, the politics of who gets what, when, and how becomes crucial to examine. Through looking at AT policies and what causes inequities in AT access, this thesis highlights reasons for similar disability policy outcomes across two different cases: the US and Türkiye. In the post-1990s disability policies addressing war-veterans and civilians with disabilities, both countries offer generous benefits to disabled veterans compared to civilians. For example, AT coverage rates for war-veterans in both countries are infinitely greater than those of civilians, who must pay a significant amount for already costly devices. These diametrically opposed outcomes occur even though the formal rule of human rights in both countries dictates policymakers to formulate and implement anti-discriminatory disability policies with egalitarian outcomes for all PwD.

I argue that the unwritten rule of patriotism gives disabled veterans in both countries a higher normative position. This unwritten but quite effective informal rule overwhelms the formal rule of human rights and shapes key state actors' behavior, structures who gets what, when, and how of disability policies. Through (i) assigning a higher normative status to war-veterans' disabilities than civilians and (ii) shaping whether, to what extent and how key actors perceive, conceptualize, define, and construct conditions of deservingness, patriotism affects disability policy outcomes to be diametrically opposed to the formal rule of human rights.

Employing a Most Different Systems Design (MDSD) of Türkiye and the US provided a solid framework to narrow down potential necessary and sufficient variables to examine the outcome of interest in these two dissimilar institutional settings. Since the prime candidates of welfare state regimes, policy styles, and systems of governments diverge as potential explanatory factors, MDSD helped me narrow down the explanatory variable to patriotism, which is common in both cases. Adopting a structured-focused comparison research approach further enabled me to set up a controlled environment where I could isolate the impact of potential impact of extraneous variables that could be a candidate for explaining the outcome of interest. To supplement this comparative research design, I conducted a qualitative content analysis on several key policy programming documents, fact sheets, and official statistics to highlight how key state actors assign a higher normative status to disabilities of war-veterans. Unlike explaining the outcome of interest through looking different lenses, which can be found in welfare state studies, disability studies, anthropology, or citizenship studies, I have tried shown the ways in which certain factors cause this inequality.

This issue in AT access calls for action to examine the reasons for healthcare policies failing to deliver egalitarian health interventions even when they rest on human rights-based approaches. Policymakers, scholars, and the public should start questioning the failure of decades-long history of rights-based approaches as they still fall short of addressing health inequalities faced by PwD. Inequities are even more accentuated for some persons with disabilities than others. However, within-group

inequities are not limited to PwD. 2.5 billion people who need some form of AT face health inequities based on either disabilities, race, gender, or age. This is why we need better policy research and communication between policy practitioners, scholars, and the public to tackle problems arising from global health policy but extending in its impact to areas of political economy, development, and human rights.



REFERENCES

- Açıksöz, S. C. (2012). Sacrificial limbs of sovereignty: disabled veterans, masculinity, and nationalist politics in Turkey. *Medical Anthropology Quarterly*, 26(1), 4-25.
- Americans With Disabilities Act of 1990, 42 U.S.C. § 12101 *et seq.* (1990).
- Anckar, C. (2008). On the applicability of the most similar systems design and the most different systems design in comparative research. *International Journal of Social Research Methodology*, 11(5), 389-401.
- Aneshensel, C. S. (2012). *Theory-based data analysis for the social sciences*. Sage Publications.
- Bache, I. (2010). Partnership as an EU policy instrument: A political history. *West European Politics*, 33(1), 58-74.
- Bali, A. S., Howlett, M., Lewis, J. M., & Ramesh, M. (2021). Procedural policy tools in theory and practice. *Policy and Society*, 40(3), 295-311.
- Bolukbasi, H. T., & Yıldırım, D. (2022). Institutions in the politics of policy change: who can play, how they play in multiple streams. *Journal of Public Policy*, 42(3), 509-528.
- Disability Act of Turkey Law No: 5378 (2005); Date of Approval: 07/01/2005; Official Gazette: Date: 07/07/2005, Issue: 25868; Published in the Law: 5(44); Amended 07/12/2012.
- Esping-Andersen, G. (1990). *The three worlds of welfare capitalism*. Princeton University Press.
- Gal, J., & Bar, M. (2000). The needed and the needy: The policy legacies of benefits for disabled war veterans in Israel. *Journal of Social Policy*, 29(4), 577-598.
- Gerring, J. (2016). *Case study research: Principles and practices*. Cambridge University Press.
- Graziano, P. R. (2011). Europeanization and domestic employment policy change: Conceptual and methodological background. *Governance*, 24(3), 583-605.
- Green-Pedersen, C. (2004). The dependent variable problem within the study of welfare state retrenchment: Defining the problem and looking for solutions. *Journal of Comparative Policy Analysis: Research and Practice*, 6(1), 3-14.
- Hall, P. A. (1993). Policy paradigms, social learning, and the state: the case of economic policymaking in Britain. *Comparative politics*, 275-296.
- Hancké, B. (2009). *Intelligent research design: a guide for beginning researchers in the social sciences*. Oxford University Press.
- Health Care Legislative Initiatives Currently Pending Before the U.S. Senate Committee on Veterans' Affairs, Hearing before the Committee on Veterans' Affairs United States Senate (2006), 109th congress 2nd session, 1-62.
- Holler, R., & Ohayon, Y. (2022). Understanding Disability Policy Development: Integrating Social Policy Research with the Disability Studies Perspective. *Social Policy and Society*, 1-16.
- Howlett, M., & Tosun, J. (Eds.). (2021). *The Routledge handbook of policy styles*. Routledge.
- Howlett, M., Ramesh, M., Perl, A., Ferreira, X. Y., & Elisa, H. (2022). *Dictionary of Public Policy*. Edward Elgar Publishing.
- Hvinden, B. (2018). Disability. In *Routledge Handbook of the Welfare State* (pp. 432-442). Routledge.

- Mahoney, J., & Goertz, G. (2006). A tale of two cultures: Contrasting quantitative and qualitative research. *Political analysis*, 14(3), 227-249.
- Mitra, S., Palmer, M., Kim, H., Mont, D., & Groce, N. (2017). Extra costs of living with a disability: A review and agenda for research. *Disability and health journal*, 10(4), 475-484.
- Office of the Federal Register, National Archives and Records Administration. (2014, October 5). DCPD-201400747 - Remarks at the Dedication Ceremony for the American Veterans Disabled For Life Memorial. [Government]. Office of the Federal Register, National Archives and Records Administration. <https://www.govinfo.gov/app/details/DCPD-201400747>
- Office of the Federal Register, National Archives and Records Administration. (2017, June 23). DCPD-201700426 - Remarks on Signing the Department of Veterans Affairs Accountability and Whistleblower Protection Act of 2017. [Government]. Office of the Federal Register, National Archives and Records Administration. <https://www.govinfo.gov/app/details/DCPD-201700426>
- Panangala S. V. (2021). Health Care for Dependents and Survivors of Veterans, report no. RS22483, Congressional Research Service
- Petasis, A. (2019). Discrepancies of the medical, social and biopsychosocial models of disability; A comprehensive theoretical framework. *The International Journal of Business Management and Technology*, 3(4), 42-54.
- Pralle, S. (2006). The “mouse that roared”: Agenda setting in Canadian pesticides politics. *Policy Studies Journal*, 34(2), 171-194.
- Prosthetic devices*. Prosthetic Coverage. (n.d.). <https://www.medicare.gov/coverage/prosthetic-devices>
- Schmitter, P. C. (2016). Comparative politics: its past, present and future. *Chinese political science review*, 1, 397-411.
- Seawright, J., & Gerring, J. (2008). Case selection techniques in case study research: A menu of qualitative and quantitative options. *Political research quarterly*, 61(2), 294-308.
- Shakespeare, T. (2006). The social model of disability. *The disability studies reader*, 2, 197-204.
- Simons, H. (2009). Case study research in practice. *Case study research in practice*, 1-200.
- Szikra, D., & Öktem, K. G. (2023). An illiberal welfare state emerging? Welfare efforts and trajectories under democratic backsliding in Hungary and Turkey. *Journal of European Social Policy*, 33(2), 201-215.
- TBMM (2000), Millet Meclisi Tutanak Dergisi, Dönem 21, Cilt 32, Yasama Yılı 2, Birleşim 93. Retrieved from <https://www5.tbmm.gov.tr/tutanaklar/TUTANAK/TBMM/d21/c030/tbmm21030fih.pdf>
- Tepe, V., & Peterson, C. M. (Eds.). (2017). Full stride: advancing the state of the art in lower extremity Gait systems.
- Trundle, C. (2012). Military Citizenship: Emerging and Enduring Relationships between Soldiers and the State.
- Trundle, C. (2013). Memorialising the veteran body: New Zealand nuclear test veterans and the search for military citizenship. In *War and the Body* (pp. 194-209). Routledge.
- Turkish Ombudsman Institution (2016). RET KARARI - Sosyal Güvenlik Kurumu Sağlık Uygulama Tebliği'nde yer alan bir kısım düzenlemeler ile engelliler

- arasında bir sınıflandırma ve kategorileştirme yapıldığı iddiası hakkındadır.
Retrieved from:
<https://paylasim.ombudsman.gov.tr/dokuman/documentuploads/KDK-2016-YILLIK-RAPORU/mobile/index.html - p=142>
- Türkiye Emekli Subaylar, Emekli Astsubaylar, Emekli Uzman Erbaşlar, Harp Malulü Gaziler, Şehit Dul Ve Yetimleri İle Muharip Gaziler Dernekleri Hakkında Kanun 2847, T.C. Resmi Gazete, 5861, 16 Haziran 1983.
- United Nations (1998). *Un enable - EGM on international norms/standards 2/8*. United Nations. <https://www.un.org/esa/socdev/enable/disberk2.htm>
- United Nations. (2022). *Access to assistive technologies "is a human right", deputy secretary-general stresses in message for launch of Global Report | UN Press*. United Nations. <https://press.un.org/en/2022/dsgsm1743.doc.htm>
- United States. Department of Health, Education, and Welfare. Office for Civil Rights. (1978). Section 504 of the Rehabilitation act of 1973 : fact sheet : handicapped persons rights under Federal law. Washington :Dept. of Health, Education, and Welfare, Office of the Secretary, Office for Civil Rights,
- Veterans Affairs (2012). Audit of the Management and Acquisition of Prosthetic Limbs, Department of Veterans Affairs Office of Inspector General Office of Audits and Evaluations
- Veterans Affairs (2021). Federal Benefits for Veterans, Dependents and Survivors, Department of Veterans Affairs
- Veterans' Benefits, 38 U.S.C. §101 (1991).
<https://www.govinfo.gov/content/pkg/USCODE-2011-title38/html/USCODE-2011-title38-partI.htm>
- Waddington, L., & Diller, M. (2002). Tensions and coherence in disability policy: the uneasy relationship between social welfare and civil rights models of disability in American, European and international employment law. In *Disability rights law and policy: International and national perspectives*. Brill Nijhoff. 241-280.
- Wallace, J. (2011). Assistive technology funding in the United States. *NeuroRehabilitation*, 28(3), 295-302.
- Ward-Sutton, C., Williams, N. F., Moore, C. L., & Manyibe, E. O. (2020). Assistive technology access and usage barriers among African Americans with disabilities: A review of the literature and policy. *Journal of applied rehabilitation counseling*, 51(2), 115-133.
- Wiegink, N., Sprenkels, R., & Sørensen, B. R. (2019). Introduction: War veterans and the construction of citizenship categories. *Conflict and Society*, 5(1), 72-78.
- World Health Organization. (2011). *World report on disability 2011*. World Health Organization.
- World Health Organization. (2022). *Global report on assistive technology*.
- Yin, R. K. (2018). *Case study research and applications*. Sage.