UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES EVALUATION AND POLICY ANALYSIS UNIT



UNHCR's age and gender mainstreaming pilot project 2004

Synthesis report

This report and the eight country studies can be found on UNHCR's website <u>www.unhcr.ch/epau</u>

By Leslie Groves, Consultant, UK Dept for International Development. email : lesliegroves@yahoo.com EPAU/2005/03 April 2005

Evaluation and Policy Analysis Unit

UNHCR's Evaluation and Policy Analysis Unit (EPAU) is committed to the systematic examination and assessment of UNHCR policies, programmes, projects and practices. EPAU also promotes rigorous research on issues related to the work of UNHCR and encourages an active exchange of ideas and information between humanitarian practitioners, policymakers and the research community. All of these activities are undertaken with the purpose of strengthening UNHCR's operational effectiveness, thereby enhancing the organization's capacity to fulfil its mandate on behalf of refugees and other displaced people. The work of the unit is guided by the principles of transparency, independence, consultation, relevance and integrity.

Evaluation and Policy Analysis Unit United Nations High Commissioner for Refugees Case Postale 2500 1211 Geneva 2 Switzerland

> Tel: (41 22) 739 8249 Fax: (41 22) 739 7344

e-mail: hqep00@unhcr.ch

internet: www.unhcr.ch/epau

All EPAU evaluation reports are placed in the public domain. Electronic versions are posted on the UNHCR website and hard copies can be obtained by contacting EPAU. They may be quoted, cited and copied, provided that the source is acknowledged. The views expressed in EPAU publications are not necessarily those of UNHCR. The designations and maps used do not imply the expression of any opinion or recognition on the part of UNHCR concerning the legal status of a territory or of its authorities.

Executive summary

Following three independent evaluations on refugee women, refugee children and the role of community services, UNHCR launched an age and gender mainstreaming pilot project in early 2004. To date, country assessments followed by capacity building and planning workshops have been conducted in Colombia, Ecuador, Egypt, Greece, Guinea, India, Iran, Jordan, Lebanon, North Caucasus/Russian Federation, Sierra Leone, Syria, Venezuela and Zambia.

This report is based on eight country evaluations, which took place from January to March 2005 in Colombia, Ecuador, Egypt, Greece, India, Syria, Venezuela and Zambia. Individual country reports are available and provide more details of project implementation and impact in each country. This report advances the individual country evaluations to provide a strategic overview of the pilot project experience, drawing out findings, good practice, lessons learnt and recommendations for the future. The strategic overview is intended to enhance consideration of a roll-out of the age and gender mainstreaming approach across UNHCR programmes worldwide, including at headquarters.

Impact on attitudes and analytical approaches: In all countries it was felt that the pilot project has had an impact on attitude change and analytical approaches. It is important to note that in a number of countries the pilot built on work that was already being conducted, particularly in terms of gender awareness. Many interviewees said that they now look at issues addressing 'men, women, boys and girls' as opposed to seeing people of concern as a homogeneous group.

Impact on procedures and work processes: In all countries it was felt that there have been positive changes in terms of greater inclusion of age and gender equality issues during daily work routines. The extent of these changes has differed by country. Interestingly, different elements of the methodology have been prioritized by different countries. A strong impact has been in terms of improved partnership working as a result of the methodology. UNHCR's profile has also increased through the use of the participatory assessment tool

Management and leadership: Leadership by the representative is seen in all countries as pivotal to the success of the initiative. Where the representatives have been actively involved in mentoring, supporting and engaging collective ownership of staff including with the Multi-Functional Team(MFT), the work plans are being implemented and staff feel positive about the initiative. Accountability is wider than leadership, however, and greater emphasis is needed as to the responsibility of all staff to ensure that they mainstream age and gender analysis within all work activities.

Pilot methodology and delivery: The project was set up in a relatively short time frame to address fundamental and concrete concerns that arose from the three independent evaluations on refugee women, children and community services. The approach required re-structuring, team building and improving UNHCR functioning and accountability to people of concern at field and headquarters. As a consequence,

the methodology has developed 'on the job'. The key elements are now seen to be in place, although improvements are needed, as per the recommendations made in this report.

Good practice: A number of good practice examples are provided in the report to highlight the important and innovative steps that pilot countries have made in their attempts to incorporate the age and gender mainstreaming approach. These relate to the development of the MFT, the use of the participatory tool, leadership and accountability and collaboration with headquarters.

Learning and recommendations: The age and gender mainstreaming pilot involves a massive organizational change exercise. It is important to note the complexities involved in bringing together age and gender mainstreaming with children's issues, education issues, rights based approaches and community development approaches. These are being addressed, not with case studies and theories, but directly with operational teams who are in many cases coming together for the first time to discuss concepts and practices without hierarchy. In addition, the project also attempts to strengthen the relation between UNHCR and persons of concern as well as partners, to address the organization's fragmented way of working, both at Headquarters and in the field, and to improve accountability and leadership.

This report documents specific learning in terms of the MFTs, partnership working, methodology, leadership in the field and at headquarters, ownership and accountability. Each learning is accompanied by a recommendation.

Overall, it is recommended that the eight pilot countries evaluated continue with age and gender mainstreaming and that the initiative is rolled out widely across UNHCR. This should take place within the context of the learning generated by the pilot experiences and of the recommendations laid down in this report.

Conclusions: Significant progress has been made towards meeting the objectives of the pilot project as well as to meeting the recommendations of the three independent evaluations on refugee women, refugee children and community services.

The majority of the country teams have been enthusiastic in embracing the age and gender mainstreaming strategy and methodology, despite some early scepticism in some cases. The impact of the pilot project has been mixed, with different countries adopting different elements of the approach, with differing levels of success. Overall, however, the pilot project has brought UNHCR staff and in some cases implementing partners, closer to UNHCR's people of concern; has led to a better understanding of their issues; has provided a structured approach which has helped prioritise action, strengthen cooperation between UNHCR staff and between UNHCR and partners; and has engaged leadership in becoming more accountable for age and gender mainstreaming.

Wider strategies will need to be formulated, however, to overcome the many obstacles to consistent, committed and effective ongoing mainstreaming of age and gender principles. One notable area relates to the lack of age and gender mainstreaming at headquarters. Others relate to the need for a greater focus on mainstreaming age and gender within field offices, as well as on systematising the participatory assessment tool. A phased approach will need to be taken and priorities for initial action will need to be developed.

Introduction

Background

1. Following three independent evaluations on refugee women, refugee children and the role of community services, UNHCR launched an age and gender mainstreaming pilot project in early 2004. Age and gender mainstreaming is defined as 'a strategy to promote gender equality and respect for women's rights and child rights in order to enhance the protection of refugees, rather than a goal in itself'¹.

2. The three goals of the age and gender mainstreaming pilot project are that, within the framework of the Agenda for Protection and under the leadership of the country representative, staff of pilot countries will: promote gender equality and respect for the rights of refugee women and children; apply an age and gender analysis to operations through a community development approach; and, operationalise policies relating to the protection of refugee women and children.

- 3. The objectives of the age and gender mainstreaming pilot project are to:
 - Promote accountability at the individual, team and country office level;
 - Establish and support MFTs (programme, community services and protection) to act as catalysts to facilitate the implementation of the policies on refugee women and children through a rights-based approach;
 - Build capacity of the MFTs in the application of age and gender analysis and a community development approach;
 - Use standards and indicators in each pilot country to report on progress achieved and test a tool for situation analysis directly with refugees.

4. To date, country assessments followed by capacity-building and planning workshops have been conducted in Colombia, Ecuador, Egypt, Greece, Guinea, India, Iran, Jordan, Lebanon, North Caucasus/Russian Federation, Sierra Leone, Syria, Venezuela and Zambia.

5. The four key elements of the pilot project methodology are: participatory assessment² with groups of refugee/internally displaced men and women of different ages and with boys and girls; operational workshop; the use of MFTs; and, placing accountability for in country age and gender mainstreaming with the representative.

¹ Taken from UNHCR 2004 Summary of Gender and Age Mainstreaming Pilot in UNHCR, unpublished document.

 $^{^2\,}$ Participatory assessment refers to the element of situation analysis that involves participatory discussions with refugee communities.

6. Nearly all country offices conducted a mid-term review of their work and it was agreed that a process evaluation, as synthesised in this document, would be conducted at the end of the pilot phase.

Country evaluations

7. Evaluations have taken place in Colombia, Ecuador, Egypt, Greece, India, Syria, Venezuela and Zambia³. These countries were recommended for the evaluation exercise as they represent diverse situations: camp settings, urban, rural and internal displacement situations. Individual country reports are available and provide the specific details of project implementation and impact in each of the evaluation countries. Evaluation teams comprised UNHCR staff from the Evaluation and Policy Analysis Unit (EPAU), the Division of Operational Support (DOS), and external agencies.

8. The individual country evaluations explore four areas. These are analytical approaches; procedures and work processes; leadership; and pilot methodology. Learning and recommendations for the country involved and for the proposed roll-out of the project are provided in each report.

9. Country evaluations are based on semi-structured interviews and focus group discussions with stakeholders. Stakeholders interviewed include: UNHCR desk staff in Geneva, UNHCR field staff (members and non members of the MFTs and the representative), implementing partners and persons of concern. A document review was also conducted and included work plans, Country Operation Plans (COPs), project submissions and other relevant documents.

10. The limitations to the evaluation findings are principally that the pilot countries have only had six to eight months to implement the methodology and pilot countries that benefited from more recent refinement to the methodology as a result of the initial country experiences are not included in this evaluation, due to the fact that they have been participating in the pilot for less than six months.

Synthesis report⁴

11. This report builds on the findings of the individual country evaluations in order to provide a strategic overview of the pilot project experience, drawing out findings, good practice, lessons learned and recommendations for a proposed rollout of the age and gender mainstreaming initiative across UNHCR. For this report, the country evaluations have been supplemented with focus group discussions and interviews with UNHCR headquarters staff involved in the pilot project. These included staff from relevant Bureaux, Desks, Women, Children and Community

³ Meetings were also held with Jordan and Lebanon projects to explore impact and learning. Findings are presented separately as 'Notes for the File'.

⁴ The evaluator would like to thank the representatives and all staff, partners and people of concern who kindly gave their time to the evaluation missions as well as to all headquarters staff involved in focus groups discussions and meetings with myself. I would also like to thank Vanessa Mattar, Barbara Wigley, Ron Pouwels, Chris Bloch (JRS), Ramina Johal (Women's Commission for Refugee Women and Children,) Elena Shishkova and Zainab Sheikh-Ali for their incisive contributions to the development of this report.

Development Section, Department of International Protection (DIP) and DOS management ⁵.

⁵ These discussions are summarised in a Note for the File.

The pilot project in eight countries

12. The eight country evaluations explored three principal areas of impact, as per the UN guidelines for gender mainstreaming⁶: analytical approaches; procedures and work processes; and, leadership. An additional area of questioning related to the pilot methodology, with a view to exploring whether the methodology itself was sound and, if so, what could be learnt for an eventual roll-out.

Analytical approaches and attitude change

Findings regarding attitude change and the extent to which the age and gender mainstreaming pilot has encouraged the consideration of age and gender differences and inequalities.

13. In all countries it was felt that the pilot project has had an impact on attitude change and in analytical approaches. It is important to note, however, that in a number of countries the pilot built on work that was already being conducted, particularly in terms of gender awareness. Many interviewees said that they now look at issues addressing 'men, women, boys and girls' as opposed to seeing people of concern as a homogeneous group:

We used to be more just on women and now we look at everybody, it increased our focus and we look at it in a broad way. We're more critical, considering other people with special needs (MFT member, Zambia)

14. The primary shift in attitudes has been in the increased awareness that age and gender refers to more than women and children, although this is not evident in all cases. There has also been a heightened awareness of the complexities of age and gender dynamics and the need to consult with different groups more systematically to gain a more holistic understanding of the situation facing people of concern.

15. This increased awareness of age and gender differences needs building upon, if there is to be a deeper change in analytical approaches and attitudes and consequently on practice. There is still a predominant tendency to view age and gender as limited to focusing on women and children. The wider context of power relations caused by societally defined age and gender roles and their impact on women and children are therefore being missed, as are issues of discrimination faced, e.g. by young or elderly men, for example. The consequences are that staff will find themselves tackling symptoms and not addressing root causes of discrimination. Furthermore, issues such as the fact that a group cannot be classified as vulnerable entirely on the basis of sex or age are also being missed. Distinctions between different groups of children i.e. youth, infants etc. or different groups of women i.e. women of reproductive age, elderly women etc. are also not being

⁶ UN Office of the Special Adviser on Gender issues and the Advancement of Women, Division for Advancement of Women, Office of Human Resources Management. Undated. 'Facilitator's Manual Competence Development Programme on Gender Mainstreaming. P.4.

captured and therefore important opportunities for improving understanding and programming are also being missed. Failure to ensure deeper change in understanding could be due to the short timeframe that has elapsed since inception, a need for further capacity-building as well as ongoing follow-up and support. It is also worth noting that in all countries the capacity-building workshop was shortened due to office's other commitments, highlighting the realities in which the age and gender mainstreaming pilot has taken place.

16. Where staff are more aware of age and gender dynamics, there has been a tendency to see the initiative as a stand-alone 'age and gender project' as opposed to as an initiative which cuts across all UNHCR policy and programming. Greater clarity and common understanding is thus needed as to the concept of age and gender *mainstreaming*. This is reflected in the fact that the focus of all but one (India) of the pilot countries has primarily been on influencing change in the attitudes of external organizations, as opposed to ensuring age and gender mainstreaming within the broader UNHCR office structure. Syria has attempted to involve staff through training and in Syria and Greece other staff were involved in community meetings/in-country assessments. One reason for the external focus could be that staff often assume that they understand the issues that underlie age and gender relations and it is only when they are questioned on these that it becomes clear that further capacity-building is needed.

17. UNHCR staff have noted that the attitudes of implementing partners have shifted through training and awareness-raising related to the pilot project:

There has been a big effect for me personally and for the implementing partners that I work with. Before, we knew that there were differences between sex and age groups but we didn't realize to what extent. There has been a total change in implementing partners' attitudes ... (and) in the planning activities of the Implementing Partners. Before they saw 'gender' as an obligation and they thought that giving assistance through women was 'gender support'. For 2005, things have changed, they are looking at how to differentiate the needs of women, children of different sexes. (MFT staff member, Ecuador).

18. The participatory assessment tool has also led to increased contact with people of concern, which in turn has led to changes in attitudes and analytical approaches. For example, a greater recognition of the needs of people of concern and improved relationship with refugees:

We exist because of refugees ... the real danger is that we look inward, while UNHCR has to work with and have contact with refugees ... age and gender mainstreaming and the community development approach get us closer to refugees, to groups UNHCR was not so much involved with, aware of. (Former representative, Greece)

19. Partners have confirmed that the attitudes of UNHCR staff have shifted:

The contact is real ... Staff have better relations with refugees now. This is making their work better and I can see them opening up ... UNHCR feels the refugees (implementing partner staff member in Syria.)

20. The test of whether changes to analytical approaches are reflected in practice lies in the 2006 Country Operation Plans and Letters of Instructions for programming. The extent to which these mainstream age and gender issues and actions are taken that advance the protection of persons of concern, will need to be monitored. The 2004 Annual Protection Reports do not sufficiently reflect the challenges and the findings of the participatory assessment that were carried out in the pilot countries during the pilot phase and this indicates that there have not been the necessary changes in terms of analytical approaches.

Procedures and work processes

Findings regarding changes to practice and the extent to which the age and gender mainstreaming pilot has encouraged consideration of gender equality and age equality issues at critical decision-making steps of normal work routines.

21. In all countries it was felt that there have been positive changes in terms of considering age and gender equality issues throughout normal work practices. The extent of these changes has differed by country and even within country, as is the case in Zambia in particular. Reasons for this include personal interest and motivation of individual staff, including representatives, in engaging with mainstreaming as well as prior understanding of the conceptual issues that frame the methodology which include rights-based approaches, community development approaches and age and gender analysis. Interestingly, different elements of the methodology have been prioritized by different countries. As a result, for example, the participatory assessment has been the element of the methodology that has been most enthusiastically used in Colombia, Ecuador and Syria, whereas the MFT approach has been more enthusiastically embraced in India and Venezuela.

22. Mainstreaming age and gender issues into wider UNHCR work: One of the weakest areas of the pilot project according to countries assessed, has been in terms of ensuring that all staff have an understanding of the need for age and gender mainstreaming within their own work. Much of the focus has been on capacity strengthening the MFT who have then focused on capacity strengthening partners. This is despite the clear recommendation in the Terms of Reference that MFTs must play a catalyzing role within their wider office. Failure to address this element adequately may be due to a number of factors, including the in-house assumption that UNHCR staff have adequate capacity (which many do not), a lack of follow-up by facilitators on the content of the work plans and the fact that partners were less likely to be involved in the early pilot projects than in the later projects (which are not documented here). India provides a good example of concrete efforts by the MFT to capacity build staff and this has had positive results. In other countries, some efforts were made but when non-MFT staff were interviewed most were unclear as to the purpose of the project except those who had a prior interest in and knowledge of age and gender mainstreaming.

23. Some concrete examples of age and gender mainstreaming within UNHCR work practices are highlighted below:

- In India and Syria, reception areas have been modified to ensure greater privacy for different groups and in India separate reception areas have been built for women, children and elderly people;
- Public Information publications and databases have also been improved and modified as a result of the age and gender mainstreaming project (Colombia, Ecuador, India, Syria, Venezuela);
- The age and gender mainstreaming pilot and more specifically the comprehensive work plan considered to be the primary benefit of the workshop, assisted UNHCR staff in taking a wide range of initiatives to strengthen age and gender-sensitive approaches in its protection and assistance activities. (India);
- Protection and programme planning modules have been modified to incorporate differences by age and gender (as well as by other factors) (Colombia);
- More meetings held with women, and women encouraged to take on more leadership roles (India, Zambia);
- The community development approach and participatory approach promoted by the mainstreaming model have impacted on the development of Sexual and Gender Based Violence workshops with implementing partners and then with refugee groups (Egypt);
- Age and gender mainstreaming has been added to staff CMS objectives and activities (Colombia, Greece, India, Syria, Venezuela).

24. A significant change to work practices has come through improved relations with implementing partners. This has been through joint involvement in the participatory assessment as well as in workshops. Implementing partners feel that UNHCR staff now have a better grasp of the realities facing people of concern and this has improved working relationships and regular contacts.

25. In terms of changing work practices of partners, there has been a strong emphasis on encouraging partners to look at age and gender issues within their work. This has occurred through training by UNHCR of implementing partners, government counterparts and other agencies (Colombia, Ecuador, Egypt, Syria, Venezuela) and presentation of and dialogue around participatory assessment findings (Ecuador). In Ecuador, government counterparts now engage women to interview women asylum-seekers, and implementing partners are required to consider age and gender mainstreaming within their proposals. In Syria, one of the partners no longer decides 'for' refugees but 'with' refugees.

26. In terms of looking at the extent to which age and gender have been truly mainstreamed into the operations and planning, it will be important to seehow much the forthcoming Country Operation Plans, Standards and Indicators Reports actually incorporate age and gender issues through protection, programme and policy actions. As mentioned above, the 2004 Annual Protection Reports do not sufficiently reflect the challenges and the findings of the participatory assessment that were

carried out in the pilot countries during the pilot phase and this indicates that there have not been the necessary changes in terms of work practices.

27. <u>MFT Approach:</u> In terms of addressing the fragmented approach of UNHCR, the MFT has had a strong positive impact in most of the countries evaluated with staff from programming, protection, community services and others working together. The diversity of skills and experiences brought to the MFT are seen to be one of its biggest strengths. It is also felt that team dynamics in the office have improved.

28. <u>MFT composition</u>: Most countries were able to meet the criteria for composition of the MFT (see Annex 1) but rotation has meant that in some countries international staff members have left and not yet been replaced. It is clear that it is important to ensure that someone with an age and gender background is involved in the MFT to provide technical support in the early stages of the initiative. Colombia, Greece and Venezuela included a staff member from Public Information in the MFT and this was felt to have a constructive impact.

29. In most countries, the driving force behind the MFT is a middle management level woman. Where there is a community services post, it is often the community services staff member who has taken on the role of chairing and driving the MFT. This is seen to be due to the feeling that there is a natural alignment with the participatory assessment function of the MFT and the day-to-day community engagement functions of the community services officer. In countries where there is not a community services post, different sections have taken on this role. There is no consistent pattern in terms of background, the only consistency being a dynamic, committed personality. In all cases, however, there appears to be one member of staff who has taken on responsibility for championing the MFT. This differs from the focal point approach in that the individual is supported by a team, including the representative, whose purpose is to play a catalytic role within the office. In Syria, it is interesting to note that there is a system of rotating chair depending on the theme of meetings to ensure wide ownership of the MFT.

30. Three countries included implementing partners on their MFTs (Ecuador, Greece and Zambia). This was seen to have positive results, including increasing the profile and credibility of UNHCR as well as improving working relationships with implementing partners. This improved working relationship has been attributed to increased protection of people of concern, through speeding up referral processes and better information-sharing across agencies.

31. The MFT has thus had a positive impact in terms of bringing different staff together and of capacity-building on age and gender issues. The approach has not been without its difficulties, however:

The team is a good idea on paper, but in the end the perception is that there are people who are landed with particular roles. Are we working as a team? We're still stuck in a focal person system. (MFT member, Egypt Office).

32. Primary difficulties in operationalising the MFTs cited include:

- lack of clarity on roles and responsibilities (Colombia, Ecuador, Egypt, Greece);
- irregularity of participation (Greece);
- team too large and difficult to co-ordinate (Egypt);
- limited staff capacity, with staff overstretched in regular work. Participation in MFT seen to be an extra task (Ecuador, Syria, Venezuela);
- rotation of staff may see a loss of active and committed staff, which may leave team without a leader or the necessary skills (Zambia).

33. <u>Participatory assessment</u>⁷: The participatory assessment tool is seen to have been particularly helpful in terms of bringing staff closer to the persons of concern to UNHCR. Positive elements cited include: learning more about the realities of people of concern; developing new contacts; the value of separating groups for discussion; inspiring a greater sense of staff commitment and empowerment and increased empathy towards people of concern. It is worth noting that the aims of the participatory assessment also involve addressing root causes and identifying the resources and capacities of people of concern so that they can engage actively in solving the protection gaps identified. These two more radical and empowering elements of the participatory assessment were unfortunately not captured by the pilot countries.

34. In all countries except Colombia, India and Syria, the participatory assessment tool has only been used once, in conjunction with the launch of the pilot project. Two countries (Colombia and India) have defined plans for the next participatory assessment. Other countries would like to conduct further assessments but these have yet to be scheduled. This shows that while countries find the tool helpful there is a need for further prioritization from management as to its importance.

35. Almost all pilot countries felt that the tool was too complex to use efficiently (currently being addressed with the finalization of a shortened, simplified version). It is also felt that the tool is not sufficiently adapted to the context of working with dispersed populations, such as in the urban context.

It's difficult doing a proper 'sitan'. You can organize meetings but it's very limited. They're not organized, how representative are the groups? Others don't feel they represent each other. You can create more problems unintentionally. (MFT member, Egypt)

36. Where the participatory assessment tool was used to inform programming, it has been seen to be helpful in developing the Letters of Instruction and Country Operations Plan (Ecuador, India, Venezuela), and has contributed to greater engagement with people of concern (India, Syria, Venezuela):

It gave us a renewed understanding of the importance of communicating directly with people of concern and an opportunity

⁷ Participatory assessment refers to the element of situation analysis that involves participatory discussions with refugee communities.

for the office to move from social welfare to community development. (MFT member, India)

The age and gender mainstreaming project requires UNHCR staff to be proactive, to go and see what the needs of people are, rather than being re-active. With this system, protection becomes something more global, not just RSD and avoiding deportation, but more related to the daily lives of people ... [it] was highlighting the need for staff to leave the office. (representative, Syria)

37. The participatory assessment has helped to unpack the issue of age, which is one that many offices had not been systematically considering, beyond their work with children.

38. In most of the countries evaluated, the pilot project has not yet engaged UNHCR staff in building on the capacities of refugees to address problems identified in the participatory assessment. In the one country where this appears to have been more successful, this can be partially attributed to the ongoing use of the participatory assessment tool (Syria). This will need to be a focus of the next phase.

39. In none of the pilot countries have the results of the participatory assessment been shared with persons of concern. This is a crucial element of a participatory approach and should be fitted in with the participatory planning, which ideally should also form the basis of the COP.

40. Persons of concern interviewed for the evaluations did feel that they had benefited from engaging in participatory assessment:

"It was good to talk, to be listened to, it helps alleviate our stress" (Woman refugee, Ecuador).

41. In Venezuela, refugees interviewed felt that they now had a better knowledge of UNHCR's mandate and capacity and that involvement in participatory assessment had helped the community to bond together better, primarily as it became clear that they suffered from similar problems.

42. In Colombia, internally displaced persons (IDPs) interviewed welcomed the opportunity to discuss in separate groups and expressed the desire for such discussions to continue. One group of women interviewed stated that structured dialogue with IDPs had enabled the leaders to replicate the exercise within their community which allowed them to continue identifying the different needs to be taken into account for their advocacy work.

Management leadership

Findings regarding changes in managerial behaviour and the extent to which management has taken an active role in providing guidance to staff about objectives and responsibilities for age and gender mainstreaming, and provided a supportive environment for staff to explore issues and approaches.

I believe that it is something very important that needs the strong presence of the representative. I believe we need to change our way

of doing things. If you don't get involved colleagues will see the initiative as secondary. Involvement of the representative gives strong meaning to it. (representative, Syria Office)

[It was] really important that the representative and deputy representative had contact with the people of concern ... UNHCR knows what's really happening (partner member MAT).

43. Leadership by the representative is seen in all countries to be a key factor to success. Where the representatives and/or deputy representatives have been actively involved in mentoring, supporting and engaging with the MFT, the work plans are being implemented and MFT staff feel positive about the initiative (Colombia, Ecuador, Egypt, Greece, India, Syria, Venezuela). In addition to support, the representatives also bring contacts and technical experience.

44. The issue of rotation is pertinent. Countries with incoming representatives will need to ensure that there is adequate briefing on age and gender mainstreaming and that a sense of personal ownership and accountability is developed by the new representative (Ecuador, Venezuela). In Colombia and Zambia, there was a lack of handover to the new representative which has had implications for accountability and in Zambia on staff motivation.

45. In terms of sustainability in the context of rotation, it is worth noting that the former representative in Colombia has been reassigned to Tajikistan and is introducing the initiative there.

46. Unfortunately, few senior management participated in the participatory assessment or in the training workshop. Where the representatives did participate, they found the experience of great personal and professional interest and value: 'I learned a lot and I enjoyed it' (representative, Ecuador).

Pilot methodology and delivery

Findings regarding the extent to which the age and gender mainstreaming pilot was delivered effectively and appropriately, highlighting areas of learning and for improvement.

After fifteen years of gender efforts in Latin America, we don't need another gender workshop, we need to get the work done (Head of Field Office, Colombia)

On my part, I had opposition at the beginning. I thought it was just another outside initiative. Through the presentations though they [HQ facilitators] made it clear that this was a necessary thing to do. They were very successful in creating motivation, we got very excited about implementing what was in the training. They were inspiring (MFT member, Syria Office, referring to the training workshop).

47. The context of the introduction of the pilot project is worth noting. The project was set up in a relatively short timeframe to address fundamental and concrete concerns that arose from the three independent evaluations on refugee women,

children and community services. The context was one of re-structuring, team building and improving UNHCR functioning and accountability to people of concern. The timeframe also meant that there was insufficient time dedicated to training facilitators in the concepts and approaches involved in the pilot project. In terms of timeframe it is also worth noting the difficulties in getting country offices to accept one week of training in addition to the one week participatory assessment exercise. In all cases this training was shortened from that originally planned as per the request of the representatives in the first months of the project. This had consequences for the capacity-building of participants.

48. The methodology has developed and improved over time through a process of ongoing learning. Learning was shared in the form of a summary report and all countries involved in the pilot have benefited from this learning. The key elements are now seen to be in place.

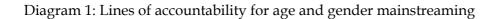
49. Specific findings on various elements of the methodology are highlighted below:

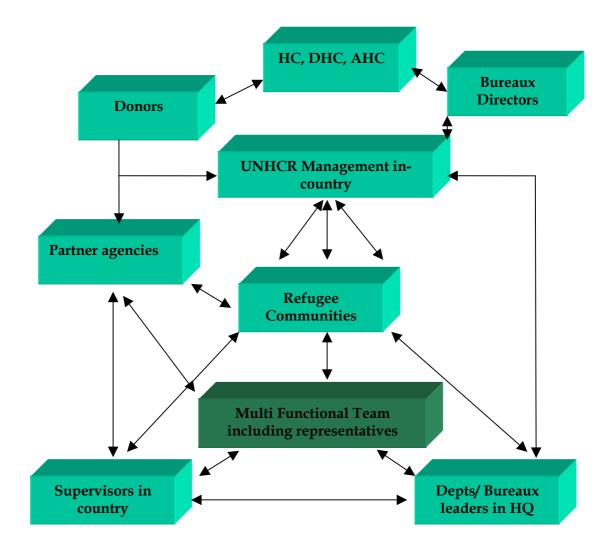
- Ownership: Each of the eight countries reported that they felt that there was insufficient preparation and engagement of countries by headquarters prior to the implementation of the project. Almost all of the countries evaluated felt that they did have a sense of local ownership of the MFT. This was particularly the case where staff had been involved in conducting the participatory assessment.
- Follow-Up: All pilot projects were consistent in their belief that more follow-up would have been needed from Headquarters. While this happened in the early stages, it decreased as time went on. Required follow-up would have involved feedback on the mid-term reviews submitted and more sharing of experiences from other countries (in addition to mid-term reviews and summary report).
- HQ Linkages: Field staff felt that interaction with the Bureaux on this project was limited. Greater interaction would have helped with follow-up and sustainability, cohesion of working on root causes where these were identified.
- Tools:
 - MFT Work plan: Seen to be very helpful in terms of deliverables and monitoring as well as in terms of helping to systematize and strategise work;
 - Participatory Assessment Tool: Does involve an added work burden even though is seen to be extremely positive and useful tool in that it brings staff closer to the realities of people of concern;
 - Workshop: Motivating, replicated for non-MFTs only in Syria and Venezuela. It was felt that there was a lack of conceptual clarity as well as tailoring to context, eg

Colombia felt to be too simple, while Greece felt it to be too complex;

- MFT: Time needed to build and develop the team, six months is not long enough for all teams to be up and running on a regular and strategic basis and to fulfill their catalytic role;
- Workshop with the representatives worked very well. Only one representative felt unable to sustain their involvement.
- Joint working in headquarters: Although the project is cited as being a joint DIP-DOS project, DIP see their role as 'giving DOS a hand'. If this ownership issue is to be addressed in the roll-out then it is important that DIP are involved from the design phase and they see that the benefits of the initiative are for all and not just a priority for DOS. Involvement of the Desks in the pilot has differed greatly. In some countries there was regular contact (Russia, South America), in others this was limited (Asia). Regional Advisers were closely involved in the case of CASWANAME and Europe but their support should only be supplementary to that of the desk.
- In terms of accountability for ensuring age and gender mainstreaming, the project has placed a strong emphasis on the representative and the rest of the MFT but Diagram 1 below highlights the complex and varied lines of accountability for age and gender mainstreaming. All staff, be they at headquarters or in the field, be they supervisors or others, as well as partners and donors, need to be accountable for ensuring the protection of **all** refugees. This involves understanding the different power relations at play between girls, boys, women and men of all ages. This project is an important step towards recognising the different protection needs of each group through the participatory assessment, as well as ensuring that all staff see their responsibility for mainstreaming age and gender through the catalytic role of the MFT. Annex 2 outlines UNHCR's institutional framework for country representatives and accountability mechanisms for age and gender mainstreaming.

50. More detailed examples of learning and recommendations arising from the country experiences are to be found in the section below.





Good practice examples

51. This section highlights some examples of good practice that the evaluation team documented during the country evaluation missions. These examples reveal that important and innovative steps have been taken by field offices in their attempts to implement the age and gender mainstreaming project methodology. It is hoped that these examples will serve to inspire other countries to be creative in their efforts to mainstream age and gender issues into their day-to-day work, to engage more regularly and directly with people of concern, to work in a less fragmented way and to improve leadership accountability.

Example of progress towards....

Developing a MFT approach

- In <u>Greece</u>, the involvement of partners in a Multi-Agency Team at the outset (office in Greece is small so it was also necessary), and the holding of regular meetings were appreciated as a tool for information exchange between UNHCR and partners as well as between partners, team-building and coordination. It also led to an agreement to work collectively on the plan of action. In addition, the Multi-Agency Team (MFT with other agencies involved) deliberations can be used for bi-laterals with the government in countries where the political climate is challenging
- The <u>Syria</u> MFT is using a system of rotating the MFT chair depending on topic. This is a useful tool for facilitating team ownership and engagement, with each member taking responsibility for engaging others.
- In <u>Venezuela</u>, a close working relationship has developed between protection, programme and public information staff, as well as between staff in the regional office and the field office of San Cristobal, as a result of the setting up of a MFT approach, supported strongly by the leadership of the Regional Representative. This has led to improved systematization, co-ordination and joint ownership, not just of age and gender activities, but of all activities. An email group was set up for the team and is used regularly to share information and to improve staff contact. Other countries, such as Colombia and India are also strong examples of good multi-functional team working.
- In **Zambia**, involving implementing partners on the MFT has improved working relationships, speeding up information-sharing, cross-referrals, and the profile of UNHCR has improved.

Using the participatory assessment tool

- In Colombia, the MFT worked in partnership with UNIFEM in revising and implementing the participatory assessment tool.
- In <u>Ecuador</u> findings from the participatory assessment, disaggregated by age, gender and urban/rural context formed the basis of a two-day workshop with partners, the focus of which was to design projects for 2005 that incorporated the problems refugees had identified during the assessment. Partners reported that this was an extremely useful exercise as it helped confirm what they were doing as well as to re-direct them where necessary.
- In <u>Greece</u>, the participatory assessment led to the identification of four achievable objectives from 30 issues earlier identified in the Protection Paper.
- In **Syria**, involving staff of Implementing Partners in the participatory assessment led to a change of their approach (from deciding *for* refugees to deciding *with* refugees).
- In <u>Syria</u>, programme staff are using the participatory assessment methodology regularly not only to explore problems and find solutions but also to engage in regular participatory monitoring and evaluation of work of UNHCR and its partners.
- In **Zambia**, as a result of the participatory assessment, women are now involved in leadership positions in terms of food distribution, and women and men are encouraged to work together. Women are now also employed as day guards.
- Conducting participatory assessment with dispersed populations (e.g urban context) is seen to be difficult in terms of access and logistics. Yet in Colombia, Greece, India and Syria, the MFTs are successfully using the tool and have managed to engage directly with urban refugees, setting in process a method to better identify, monitor and address refugee protection issues.

Leadership and accountability:

- In <u>Colombia</u>, the former representative was reassigned to Tajikistan where he is now introducing age and gender mainstreaming.
- In <u>Ecuador</u>, the representative has taken a strong personal interest in the project. This included attending the training workshop. This involvement has been a key motivator to the MFT.
- In <u>Greece</u>, the Multi-Agency Team's workplan designated lead agencies for each objective.
- In <u>Greece</u>, senior staff include age and gender mainstreaming in CMS objectives or in the objectives matrix.
- In <u>Greece, India and Syria</u>, the representatives took part in the participatory assessments which was seen as a key motivator of staff and Implementing Partners, and also brought the representatives personal and professional satisfaction and learning.
- In <u>India</u>, the representative engaged personally in corresponding with Implementing Partners around key elements of the project and this was also seen to be a motivator to staff and Implementing Partners.
- In <u>India</u>, the representative, deputy representative and MFT members all have age and gender mainstreaming in their CMS objectives. All other staff have age and gender sensitive objectives in their CMS.
- In <u>Venezuela</u>, the Regional Representative has taken an active role, providing guidance to staff on objectives and responsibilities for age and gender mainstreaming. She has also used her multi-agency work to influence others to incorporate age and gender mainstreaming within their work.

Joint headquarters working

- Bureau and other HQ staff who were able to participate in the pilot project have been better able to represent and promote age and gender mainstreaming and to see how it links with other initiatives, such as standards and indicators reporting.
- This pilot has been a good example of how different staff from different departments in headquarters, as well as different agencies, can work together to promote age and gender mainstreaming.

Learning and recommendations

52. On the basis of the eight country evaluations, it is recommended that these pilot countries continue with age and gender mainstreaming with adequate monitoring, and that the age and gender mainstreaming initiative is rolled out widely across UNHCR. This roll-out, however, should take place within the context of the learning generated by all the pilot experiences and of the recommendations laid down in this report.

General reflections:

- The age and gender mainstreaming pilot involves a massive organizational change exercise. It is important to note the complexities involved in bringing together age and gender mainstreaming with children's issues, education issues, women's issues, rights based approaches and community development approaches. These are being addressed in a context of working, not with case studies and theories, but directly with operational teams who are perhaps coming together for the first time to discuss concepts and practices without hierarchy. The project also demonstrates results in strengthening the relationship between UNHCR, partners and persons of concern, in addressing the organization's fragmented way of working, both at Headquarters and in the field, and in improving accountability and leadership for age and gender mainstreaming.
- The title of the project does not reflect all the above elements and this has led to confusion both in concept and in practice. The title thus needs to be changed to reflect the exercise for what it truly is or the different activities should be broken down into separate exercises. It is recommended that the activities be broken down, with the age and gender mainstreaming approach as one set of activities and participatory assessment made mandatory in its own right as a crucial element to ensuring accountability to people of concern as rights holders, as opposed to 'beneficiaries' of UNHCR.
- Many variables influence success, such as ownership, leadership, local office culture, gender balance, experience, the de-motivating influence of distances in terms of conducting participatory assessment, existing relationships with Implementing Partners, level of authority of the MFT, staff turnover, skills in influencing and changing the understanding and attitudes of colleagues, available resources (including human resources), etc.
- The initiative has been seen as a DOS initiative, and within DOS as a WCCDES initiative. This goes against the principle of an age and gender mainstreaming strategy and needs to be addressed in the roll-out, principally through senior management giving the strategy the importance

it requires. Age and gender mainstreaming has to occur in HQ, as well as in the field.

• For roll-out to be effective there is a need to explore the availability of resources in the context of zero growth at headquarters. A phased approach is therefore recommended as well as strong organizational commitment, from the highest levels, to mainstreaming age and gender as well as participatory assessment and MFT working. Existing staff capacity should be and can be used for day-to-day mainstreaming although additional resources are needed to ensure sufficient training for country and headquarter teams in early stages. This is crucial if this most recent effort in a long line of initiatives is not to be seen simply as a 'fad' but is to become sustainably embedded in the daily practice of UNHCR staff and build adequately on earlier successes.

53. The tables below highlight learning and recommendations with regard to the MFTs, partnership working, methodology, leadership and accountability in the field and HQ ownership and accountability.

Methodology (Participatory Assessment and MFTs are explored separately below):

Learning	Recommendation
The methodology of the project has had enthusiastic acceptance by UNHCR staff and their implementing partners Key benefits of the pilot are seen to be: training, networking, confirmation of mandate, and contact with people of concern that is not defined by a fixed agenda, and improved team working and engagement with the representative.	• The methodology is sound and should be used in the roll-out, subject to further recommendations made below.
Incorporation of the methodology requires time	• The roll-out may be more effective if done in a phased way over a period of time to facilitate consolidation of learning and establishment of the local structures as opposed to targeting all countries with the risk of being spread too thinly.
	• It is important not to rush the roll-out. If it is pushed and fails it may add to existing cynicism around big HQ initiatives that fail.
The project aims to change knowledge, attitudes and practice: these are interlinked and mutually supportive.	• Linking concepts with practice through the operational approach should be continued.
Putting age and gender mainstreaming into concrete action through the in-country assessments, workshop and drafting of an Action Plan successfully moves the project from the theoretical to the practical level	
Regional bureaux desks based selection on where it would be	Work with Bureaux to develop criteria for selection of countries.
easier to implement the pilot project as opposed to where there was a greater need.	• Regions should include countries where the project can build on existing processes and initiatives and where staff has more experience with gender frameworks as well as countries with limited experience. A mentoring/ follow up system will be key to success in the latter countries.
	• Build on the experiences of the Regional Advisers and develop regional networks and communities of practice.
People tend not to read documents sent out in advance.	• Ensure that time in country is put aside for reading materials or that the representative puts time aside before the arrival of the training team for reading materials.

	SYNTHESIS REPORT
Committed individuals are crucial to successful implementation	Encourage committed staff to motivate others and reinforce accountability
Follow up: If age and gender mainstreaming is to become a reality then there is a need for regular follow up from Headquarters and for external evaluation. Staff are exposed to many new initiatives and have little time to engage. Follow up ensures prioritisation. Issues come up that do need technical support. Follow up on reporting requirements by HQ helped motivate staff.	 DOS, DIP and Bureaux to allocate staff to accompany the process, to provide follow up, monitoring and capacity building to the field Develop a mentor system at HQ level to provide technical resources, support, and encouragement. Develop matrix, with tasks, timeframe and tick boxes for mentors to follow up on. The facilitators of training workshops should try to ensure that MFT members take realistic and achievable work plans back to their workplace, to try to diminish the de-motivating effect of becoming overwhelmed by good intentions.
Sharing the mid term reviews and summary document after six months was valuable.	
The basic principles conveyed through the workshop were well responded to and had an impact on attitudes and to some degree upon the practices of the people who participated.	• WCCDS needs to clarify relevant concepts and tools and their linkages (the mainstreaming of age and gender, community development approach, rights based approach, participatory assessment, work plan).
There is a lack of conceptual clarity and understanding as to the mainstreaming tools and their linkages.	• Ensure more systematic capacity building on the concepts behind and value of age and gender mainstreaming.
Discourse still focuses on women and children, rather than age and gender. Where age and gender mainstreaming discourse is used the focus tends to be on gender as opposed to age. One result of this is that there has not been enough focus on young people and elderly.	The issue of age mainstreaming needs to be pulled out and emphasized.The concept of accountability needs to be further developed.
There is a lack of clarity around indicators for monitoring progress towards age and gender mainstreaming.	• PCOS need to revise their standards and indicators and strengthen their age and gender sensitivity.
	• DOS to develop and circulate quantifiable and measurable accountability benchmarks for measuring office progress in attaining age and gender mainstreaming: these could include degree of innovation, involvement of refugees, involvement of the agency, cost effectiveness,

	SYNTHESIS REPORT
	age/gender focus and results.
The training tools presented need improving, however, as highlighted in the recommendations opposite:	• Provide clarity on 'What is age and gender mainstreaming?' with concrete steps for attaining it e.g. all sections of COP, APR etc. should be age and gender sensitive.
	• Keep tools simple and clarify how they can build and enhance what staff are already doing.
	• Ensure methodology addresses both majority and minority world countries.
	Develop common understanding and competencies for trainers.
	• Provide good practice examples, frequently asked questions etc. and put these on an intranet site. For example, examples of a good age and gender mainstreamed COP, Annual protection report etc.
	• Continue to use the MFT work plan approach as this is seen to give clear focus with measurables. These should be integrated within the annual programming cycle.
	• Sufficient places need to be made available in the training to increase the number of staff with the direct skills and knowledge of the programme.
The participation of a staff member from UNHCR Ankara (who have been engaged in mainstreaming since 1999) in the	• Ensure institutional commitment to involving pilot country staff in the roll-out so that they can share learning through lived experience.
workshop in Greece was seen as very useful as concrete examples from the experiences of the office in Turkey demonstrated how issues are being dealt with in a team	• Pilot country staff should be seen as a valuable pool of resource persons at the field level in terms of regional roll-out and in terms of internal field capacity building.
The support role of the Regional Advisers has been welcomed.	• The support role of the Regional Advisers should be emphasized in the roll-out.
The initial process is resource intensive in terms of capacity building, conducting participatory assessment and engaging different stakeholders. Staff already feel overwhelmed with their workload and many are working in a context of declining budgets.	• In the context of zero growth at HQ, there needs to be commitment from the highest level to ensuring that all staff see age and gender mainstreaming as part of their daily work.
	• Bureaux directors need to be actively involved in the roll-out.
	• Ensure there is a co-ordination post for the roll-out.
There has not been sufficient guidance to pilot countries in terms of the 'what next' i.e. after the initial pilot phase of the	• Joint team from DIP, DOS and Bureaux should develop guidance for how pilot countries should proceed

	SYNTHESIS REPORT
project.	should proceed
	• Guidance from HQ on sustaining the process after initial phase needed in proposed roll-out.
Sharing information and documentation of experience is important. Some countries modify/ translate tools to ensure that they are useful in the local context. These tools should be shared with other countries working in similar contexts/ languages.	• HQ, particularly regional advisers, and country offices should facilitate the initial sharing of information and experiences on age and gender issues between country offices in particular regional offices or operations with similar caseloads. This applies to translated and revised documents. A regional approach to age and gender mainstreaming should be encouraged, especially where issues facing different country offices are similar.
	• Set up "communities of practice", as on the agenda, which allows for sharing of information, lessons learned and experiences between countries on their implementation of age and gender mainstreaming, to seek advice from others and possibly work together in finding solutions to challenges faced.
Pilot countries felt that the training was not sufficiently tailored to their local contexts and capacities.	• Work with regional staff to ensure that training is better tailored to suit the specific needs of each office with tools structured to take into account factors such as the participant culture, level of knowledge and skill and group size.
	• Pilot countries should assist other countries in their region in developing age and gender mainstreaming – missions, assessments, workshops.
Lack of preparation for the project, as well as a lack of clarity around roles, is problematic.	• Ensure adequate preparation and develop simplified mechanisms, tools and concepts which are built into existing requirements and are shared well in advance with countries participating in the roll-out.
	• Clearly describe the role of all players in age and gender mainstreaming, including the role to be played by Bureaux/Desks as their role is critical.
	• Explore variations in skill and knowledge levels prior to the training, particularly with regard gender frameworks, team management, and informal leadership.
	• Structures need to be put in place to ensure sufficient time is allowed prior to the workshop to establish systems and procedures.

Multi- Functional Teams

Learning	Recommendations
The MFT approach is seen to be helpful in bringing staff from different areas together to work on cross cutting themes such as age and gender mainstreaming and participatory assessment.	The MFT approach should be encouraged in all offices.
Composition of the MFTs with regard to programme representation, gender balance, experience balance, seniority is critical to the effectiveness of the teams.	• The MFT must have sufficient authority viz-a-viz other office staff to lead what is a change initiative within the workplace with regard to attitudes and practices. The representative needs to be involved as a full member of the team.
While age and gender mainstreaming is the responsibility of all staff, experience has show the positive impact the methodology has had on	• Continue to use the Terms of Reference for the setting up of the MFTs i.e. include Protection, Programme and Community Services staff.
improving the work of protection and programme staff.	• Field staff, Public Information, administration and human resource staff should be included in the Terms of Reference for the MFT. It is important to use a system of rotation to ensure that all staff are involved. Public Information are important members of the MFT as they have a fundamental role within the organization, not just outside, in terms of visibilising issues.
Where community services are involved in the MFT, impact is strengthened in terms of improved access to people of concern and the added value of staff who	• More strategies are required to ensure that the work of MFTs is not consistently relegated to community services and seen as not directly linked with protection and programming for example.
have particular expertise and skill in either gender or community development work.	Build all staff capacity in using the community development manual.
However, it is important to ensure that the responsibility for carriage of the age and gender mainstreaming programme is not left only with community services as this will not ensure mainstreaming.	
Staff turnover and the consequent loss of capacity are problematic in terms of sustainability (as is potentially	• The approach should be integrated into the briefing of all new staff and partners.
the case for all UNHCR projects).	• Leadership should ensure continuity through regular updates in weekly/ monthly meetings with staff but also with partners, including government.
	• MFT should be seen as a coordinating committee for the office, not as a separate group with its own

SYNTHESIS REPORT	
	focus. As such, there should be a system of staggered rotation of team members so that all office staff has the opportunity to be involved, as well as to chair.
The tendency of the MFT has been to focus action externally, as opposed to also acting as a catalyst to mainstreaming within the office.	 MFT to review their Terms of Reference and ensure that they play the catalytic role as defined. Senior management within UNHCR, including the High Commissioner, to promote age and gender mainstreaming activities within the organization to ensure awareness of all staff, not just of the MFT members.
Team work plans are helpful but need to link better to the programme cycle.	• Work-plans of the MFT should be integrated into the COP, as they have been since August, so as to avoid parallel work-plans, and sufficient resources for its implementation.
Lack of communication between field and branch offices.	 Local MFT must own the participatory assessment and work plan and this must then feed into field planning and programming i.e. bottom up approach to knowledge generation and application. It cannot be assumed that the field office is resourced enough, particularly technically, to engage in the methodology. It is thus important to look at the specifics of each country situation and ensure that the field MFT is supported and led by the branch office, as well as by HQ.

Participatory assessment tool with refugees:

Learning	Recommendations
The participatory assessment exercise has been strongly welcomed by staff, partners and people of concern. Benefits include capacity building, empowering staff, forcing staff to engage directly with refugees as opposed to relying on partners, increasing knowledge regarding people of concern's realities.	• The participatory assessment exercise should become compulsory within the UNHCR programme cycle and should be linked to the comprehensive needs assessment, which is also part of the planning process.
Some people of concern interviewed felt that the process had been empowering for them, bringing them together around shared issues, and had improved their understanding of UNHCR.	

SYNTHESIS REPORT	
 Where refugees have been encouraged to, and supported to, look at their own capacities as part of the assessment some have been able to come together to address some of their problems e.g. setting up child care arrangement. Overall, however, the more empowering and transforming elements of the participatory assessment 	 Encourage participants to explore how they can address some of the problems that they face. Facilitators need to focus more on the empowering and transformative elements of the participatory tool.
in terms of addressing root causes and identifying the resources and capacities of people of concern so that they can engage actively in solving the protection gaps identified have not captured by the pilot countries.	
Participatory assessment will bring up issues that cannot be resolved by UNHCR, and this can lead to staff frustration.	 It is helpful to link the participatory assessment tool to the Rights Based Approach (RBA) and Community Development Approach (CDA). If staff are using the CDA approach they can work with communities to identify their own solutions
	 If using RBA, staff can see that communities are actors, not beneficiaries, and this is empowering for staff as well as for the refugees themselves. Issues arising from the participatory assessment that cannot be addressed within context of resource
	cuts should be put into the COP and brought to donors' attention as per programme instructions as well as referred to other agencies in the field e.g. UNICEF, UNIFEM etc.
Despite the benefits it has not been easy for teams to systematize or internalize the tools. It is seen as requiring additional resources, including staff	• Leadership needs to prioritise participatory assessment as a regular and necessary element of the programme cycle. Time needs to be allocated to staff, along with resources for travel.
capacity. The time required may conflict with other UNHCR targets such as RSD numbers.	• Partners should be involved in the participatory assessment teams, including protection staff from other agencies.
It is valuable to involve all staff, not just the MFT, in the participatory assessment. Participating in the exercise makes staff realize the importance of talking	• Different staff members, including the representative, should be involved on different occasions to ensure that all staff are able to enjoy the benefits.
with different groups of people of concern as well as the power dynamics at play in age and gender relations.	• Include desk officers in participatory assessment as they review proposals from the field, COPs, budgets, policy etc. and the firsthand experience is thus valuable.

	SYNTHESIS REPORT
The communication channel between refugees and UNHCR has been strengthened and refugees feel that UNHCR is now more interested in their concerns. Finding refugees/refugee communities to interview in an urban context and engaging them in the assessment is, however, difficult and must be recognised The involvement of a community services officer supports the successful implementation of a participatory assessment, in terms of building and sustaining relationships with people of concern. There is a lack of clarity as to how participatory assessment fits in with other initiatives.	 Offices should incorporate a community services person into their staffing table. PCOS needs to include participatory assessment tool within the HCR programme planning cycle Directors need to ensure that senior management facilitates staff time for conducting the assessments. DOS needs to clarify that participatory assessment builds on POP training through encouraging a focus issues of discrimination by age and gender as well as addressing root causes and refugee capacity.
The participatory tool is not seen to be user friendly.	• The tool is being revised and HQ should ensure that the participatory tool is user-friendly, translated into UN working languages and takes into account the specificities of the different environments that UNHCR works in e.g. urban, rural, camp, internal displacement etc.
The documentation and analysis of the participatory assessment needs to be improved.	 Information gathered in the participatory assessments needs to be documented and reviewed so that it can inform the APR, planning and prioritization processes and the COP. Enough time should be allowed for analysing the in-country assessment information, which also requires adequate documentation. Therefore the workshop should not necessarily take place immediately after the assessment.
Dissemination of participatory assessment findings has been limited.	• Field Offices should look at how and in which form to share the results of the participatory assessment with the UN country team and with people of concern.
The pilot has not of itself led to a concrete improvement in the engagement of refugee capacities in day to day work, although in one country it was used to support participatory monitoring.	• At some point in the roll-out participatory assessment needs to be followed up with participatory monitoring and evaluation as well as participatory planning if refugee capacities are truly to be engaged with.

	• Ensure that UNHCR follows up on any protection issues that may arise.
While dialoguing with communities in an urban context may be difficult, it is possible.	• Share experiences from pilot countries (notably, Syria, Colombia and India) as to how it has been possible to engage in the urban context.
In reality facilitators did most of the interviewing with field staff observing. Where more preparation time was given to field staff they were more able to engage.	• HQ facilitators/trainers should be more proactive in getting staff to question people of concern. Developing a good practice/ bad practice video as a tool for discussion during training could help build confidence before implementing participatory assessment.

Partnership working:

Learning	Recommendations
The project has served to increase UNHCR's profile with people of concern as well as with other partners and to improve working relationships with partners. This has improved refugee protection through increased communication, cross-referral and better information sharing.	• Engage partners (local, national and international organizations as well as people of concern) as a vital element of the project from the earliest phase possible, without losing the importance of the internal catalytic role of the MFT.
Partnership working has also improved UNHCR's capacity to engage in participatory assessment and age and gender mainstreaming.	

Leadership and Accountability in the Field

Learning	Recommendation
The absolute commitment to the mainstreaming of age and gender policies by representatives, as part of the	• Continue to highlight the accountability element of the age and gender mainstreaming methodology.
MFT, is an essential prerequisite to success. Direct oversight and management of the process by the	• Senior managers, Directors, Assistant High Commissioner and Deputy High Commissioner need to ensure follow up of accountability issues.
representatives is necessary for ensuring that staff will have full understanding and incorporate the age and gender perspectives in their daily work.	• The representative should continue to lead and coordinate the MFT.

The representative brings expertise and experience, external contacts, follow up and strategic vision, motivation and help with surmounting obstacles.	• Age and Gender Mainstreaming, including the setting up and functioning of MFTs has to be included into accountability frameworks (including CMS and the Performance Appraisal Report process), including that for representative/Deputy representative and other senior management staff.
Representative involvement in the capacity building exercise in January 2004 in Geneva was key, although not guaranteed to lead to full ownership.	• Ensure the roll-out methodology for age and gender mainstreaming involves representatives directly in training to ensure accountability and ownership.
The personal involvement of the representative in training and in participatory assessment does lead to increased active involvement of the representative and brings personal and professional gains. Involving the representative in the participatory assessment and other activities helps integration into the team.	• Directors to ensure that part of representatives PAR includes participation in at least one annual participatory assessment, mandatorily before the COP process.
Accountability agenda makes this initiative more likely to succeed than previous approaches.	 Some system for ongoing support and mentoring of the MFTs is needed to assist them to develop as a team, to maintain their focus, to increase accountability and to ensure that new skills are embedded and learning occurs in the application of the approach to new situations. New MFT members must be well briefed and capacity built in the application of the tools. Sufficient time needs to be invested in the briefing and education of representatives and local senior managers in order to ensure a consistent level of support for the programme .
Sustainability issues are problematic in the context of staff turnover.	 To address the challenge of sustainability in times of staff rotation, Bureaux to ensure that briefing of new staff covers the mainstreaming initiative. Link sustainability to accountability: where there is a clear work plan, with specific goals and indicators for progress and accountability for ensuring progress lies with the Representative then sustainability will be improved.

HQ ownership and accountability for age and gender mainstreaming:

Learning	Recommendations
Age and gender mainstreaming has to occur in HQ and not just in the field. It needs to be mainstreamed from top down as well as bottom up, as well as between different departments and sections e.g. between PCOS (Programme Coordination and Operational Support) and WCCDS.	• The High Commissioner, Deputy High Commissioner, Assistant High Commissioner need to follow up on the implementation of the methodology and publicly support its incorporation into all work practice.
	• The Assistant High Commissioner should report in terms of how many representatives have incorporated age and gender mainstreaming into their CMS objectives, as instructed and how the outcome of this evaluation will be considered in the CMS process.
	• HQ needs to set up own MFT. This should involve senior staff from the different departments and Bureaux. This will support ownership and management of the roll-out. The Inspector General's office should also be represented.
	• MFT in Bureaux also need to be set up
	• An effective mainstreaming strategy/implementation should be one of the elements to measure effective field office satisfactory compliance within the overall inspection carried out by the Inspector General's Office.
Responsibility for age and gender mainstreaming lies with all staff, yet it is still seen to be a 'DOS initiative' and within DOS as a WCCDS initiative. This highlights the interpretation of the initiative as an 'age and gender project' as opposed to a mainstreaming strategy.	• Ensure that Directors and Deputy Directors of Bureaux understand the process, are involved in it and dedicate staff time to it.
	• Equip desks to follow up on the roll-out as part of their wider monitoring and support functions as well as to mainstream age and gender into all other work.
	• DIP needs to assign responsibilities for age and gender mainstreaming at the highest level.
	• Donors need to hold DOS and DIP responsible for ensuring appropriate age and gender mainstreaming tools developed but they then need to hold the Bureaux and DIP accountable for implementation of these tools.
Accountability for monitoring implementation is ultimately with the Bureaux Directors who supervise the representatives who in turn supervise field staff.	• Ensure that Bureaux Directors are capacity built as to the value of the age and gender mainstreaming initiative as well as supportive of it.

SYNTHESIS REPORT		
representatives who in turn supervise field staff.	 Directors/ Deputy Directors to follow up to ensure that participatory assessment findings brought into annual reporting and programming. Directors to be held responsible for ensuring progress to meeting accountability benchmarks. 	
The 2004 Annual Protection Reports do not sufficiently reflect the challenges and the findings of the participatory assessment that were carried out in the pilot countries during the pilot phase and this indicates that there have not been the necessary changes in terms of analytical approaches.	 Directors to be held responsible for ensuring progress to meeting accountability benchmarks. DIP to follow up on the observations made by DOS on this point. 	
There is a lack of consistency in terms of mainstreaming at HQ level as a result of the initial focus on field offices for the pilot projects. For example, HQ still use age and gender focal points yet the pilot project attempts to move from this approach which was not seen to be effective.	 Ensure UNHCR procedures and guidelines are also mainstreamed. Now that the learning from the pilot is in place, revise Chapter 4 (guidelines of programming) of COP and 5 (children) and 6 (women) of APR, to ensure mainstreaming methodology incorporated. Define role of gender unit in relation to the project as well as the role of all units in WCCDS 	
	 section. Fit in with OMLP, PLP. Participatory assessment should be in the PLP as should spelling out the concept of age and gender mainstreaming i.e. why it is important for UNHCR staff. Also look at how to link with DIP and PCOS training teams. 	
An important role needs to be played at headquarters level in terms of working in a more integrated and participatory way, as well as at field level.	 Ensure that age and gender mainstreaming forms part of Directors' CMS. Ensure all learning areas mainstream age and gender, including learning programmes for middle and senior management. 	

Conclusions

Overall conclusions

54. The majority of the country teams have been enthusiastic in embracing the age and gender mainstreaming strategy and methodology, despite some early scepticism in some cases. The impact of the pilot project has been mixed, with different countries adopting different elements of the approach, with differing levels of success. This is partly a result of the very short time that has evolved since the introduction of the methodology (six to eight months). Time is clearly needed given the magnitude of instituting such wide-ranging organizational change. Overall, however, the pilot project has brought staff and partners closer to persons of concern to UNHCR, has led to a better understanding of their issues, has provided a structured approach which has helped prioritise action, has helped identify key actors, strengthen cooperation between UNHCR staff and between UNHCR and partners and has engaged leadership in becoming more accountable for age and gender mainstreaming.

55. Wider strategies will need to be formulated, however, to overcome the many obstacles to consistent, committed and effective ongoing mainstreaming of age and gender principles. One notable area relates to the lack of age and gender mainstreaming at headquarters. This was not a specific target of the project but is noticeable in its absence. Other strategies needed relate to greater focus on mainstreaming age and gender within field offices, as well as on systematising the participatory assessment tool. A phased approach will need to be taken and priorities for initial action will need to be developed.

Conclusions: Meeting of pilot project objectives

56. The specific objectives of the age and gender mainstreaming pilot project have been partially met. As many are process objectives, efforts need to be seen as ongoing.

Objective ⁸	Progress
Promote accountability at the individual, team and country office level	Some progress made in most countries. Greater efforts needed, however, in all.
Establish and support MFTs (programme, community services and protection) to act as catalysts to facilitate the implementation of the policies on refugee women and children through a rights-based approach	Teams established in all pilot countries. Use of rights-based approach weak and greater understanding needed of policies for successful implementation.

⁸ Taken from UNHCR. 2004. Summary of Gender and Age Mainstreaming Pilot in UNHCR.

Build capacity of the MFTs in the application of age and gender analysis and a community development approach	Capacity has been built to a certain extent but further capacity building needed, particularly in terms of age analysis and the community development approach
Use standards and indicators in each pilot country to report on progress achieved and test a tool for the first step of situation analysis/ participatory assessment directly with refugees.	Participatory assessment been applied in all countries and sustained in some. However, what is needed is further analysis and incorporation of findings into Country Operation Plans and other strategic documents.
	Work plans had their own indicators but these need to be reported on more systematically.
	PCOS needs to provide age and gender mainstreamed indicators.
	Office benchmarks for monitoring mainstreaming also need to be developed.

Conclusions: Addressing the findings of the three evaluations

57. Finally, it is useful to place this evaluation in the context of the three evaluations of Refugee Women, Children and the Community Services Function that took place in 2002-2003 and which led to the development of the age and gender mainstreaming pilot. To what extent have the relevant findings and recommendations of these evaluations been addressed in the six to eight months of the pilot project here evaluated? UNHCR Inter-Office Memorandum No. 71/ 2003 summarises the key findings of the evaluations. These are highlighted below along with comments on progress:

Finding	Progress
Persisting lack of institutional ownership by UNHCR Headquarters work units and their counterparts at field level of the various policies on refugee women and children and the progressive decline of the important role of community services.	Institutional ownership at HQ has improved with some good examples in some of the regions (Americas, CASWANAME). Representatives have taken differing levels of responsibility for age and gender mainstreaming but the majority has taken accountability issues seriously. Where community services staff have been involved impact has increased. There are still many countries without community services officers and this

	needs to be addressed by Directors and representatives.
Only a multi-sectoral and integrated approach could enhance UNHCR's overall protection capacity related to women and children	There has been strong progress in the field in terms of co-ordinating work units through the MFTs. This needs to extend to all office staff in the next phase.
	Integrated working at HQ needs significant improvement, although there are some very good examples of joint working in terms of implementing the methodology with DIP, DOS and some of the regions working extremely well together (Americas, CASWANAME, and Europe through the Regional Adviser).
Inadequate field implementation of policies relating to the protection of refugee women and children and limited successes to date in mainstreaming these policy priorities within the core of UNHCR's activities	There has been an improvement in the mainstreaming of the concerns of women and children within the core of field staff activities. However, the age and gender approach has led to some confusion as to the extent to which staff should be focusing on men and different age groups.
Need for UNHCR to use participatory approaches in planning, research and surveys to allow staff to acquire a better understanding of refugees' needs and realities	Consultation with refugees has improved in pilot countries through the use of the participatory assessment tool. Full participation has not been achieved, however, as refugees are still not directly involved in planning and monitoring in most cases. This will need to be a focus of a next phase.
Need for UNHCR to more widely embrace rights-based and community- based approaches to programming	This is the element of the methodology where there has been the least success, as well as the least emphasis.
	DIP need to take a position on the rights based approach and how this fits with UNHCR.

58. It has thus been seen that this pilot project aims to be far more than simply about age and gender. It is about improving systems, about being more accountable, not only internally but also to partners and to people of concern. It is about systematizing the way in which UNHCR works. Important learning has come out of this pilot in terms of directly improving UNHCR's protection of people of concern. This learning is key to ensuring a responsible and effective roll-out of the methodology.

Annex 1. Selection criteria for age and gender mainstreaming MFTs 2004

- There should be at least **THREE MEMBERS** to each Mainstreaming Team, and the team must include staff form the following areas: protection, programme and community services. If there are no community services staff available, please propose someone from an NGO,
- The members must have the **CAPACITY** to influence and intervene in UNHCR decision-making processes and the representative should actively support them in these efforts.
- One of the members should be a **NATIONAL OFFICER** who can ensure institutional memory and the implementation of the approach adopted. Also ensure that at least one member is an **INTERNATIONAL OFFICER**.
- Only **ONE** member should have experience in age and gender mainstreaming, as the goal is to build capacities and not leave the responsibility with the few who are already committed and have assumed individual responsibility for the work.
- The team **MUST** have **MALE** and female members.
- The members should have a good understanding of the role of the team and the work expected and **BE COMMITTED** to assuming the corresponding responsibilities.
- The team members must be willing to undertake both **ADVOCACY AND COACHING** roles to ensure that all staff assume their responsibility for mainstreaming age and gender in the operation, as well as with partners.

Annex 2: UNHCR institutional framework for country representatives and accountability mechanism for mainstreaming gender and age. From 'Increasing accountability for gender and age mainstreaming in UNHCR', July 2004.

