

# Age, Gender and Diversity Mainstreaming

## AGDM—MAKING A DIFFERENCE

*"Giving people a say in what happens to them reinforces their dignity and builds confidence. The young people, especially, were so enthusiastic and alive. It was wonderful to see them work together to achieve a better situation for their community."*  
UNHCR Staff Member

### What is AGDM?

Age, gender and diversity mainstreaming is a strategy to promote gender equality and the rights of all persons of concern regardless of age or background. The strategy calls for the meaningful participation of displaced girls, boys, women and men, so that their problems, initiatives and solutions can be incorporated into all of UNHCR's programs and policies. An integral part of AGDM is to analyze the different realities people face from all age, gender and diversity perspectives. When the analysis indicates that gaps exist, targeted actions are implemented to address the inequalities and empower those who face discrimination. AGDM leads to increased protection for persons of concern and long-term sustainability of programming.

### What is Participatory Assessment?

One of the tools used to implement AGDM is the participatory assessment - a process of building partnerships with displaced and returnee women and men of all ages and backgrounds by promoting meaningful participation through structured dialogue. Separate discussions are held with women, girls, boys and men, in order to understand the specific protection risks they face and identify root causes. The participatory assessment uses a rights and community based approach that recognizes that people of concern have capacities, skills, and resilience that can be mobilized to build relationships and find sustainable solutions. The findings from participatory assessments are used to design UNHCR operations.

### What is a Multifunctional Team (MFT)?

UNHCR is promoting the MFT approach to strengthen age, gender and diversity mainstreaming. The MFT carries out the participatory assessment and works with representatives from the community to analyze the participatory assessment findings. A comprehensive planning process is then undertaken to ensure that programmes reflect the findings. Analyzing protection risks and solutions requires a multidisciplinary perspective. Therefore, multifunctional teams are composed of protection, programme, and community services staff of UNHCR and partners (government counterparts, NGOs and other UN agencies). Ideally, teams should include female and male staff, both national and international. A successful MFT approach requires the strong leadership and commitment of management, especially Heads of Office. MFTs are responsible for ensuring feedback to people of concern on the outcomes and follow up of participatory assessments.

### What is the Accountability Framework?

A key objective of UNHCR's AGDM strategy is to promote accountability at the individual, team and country office level. The Accountability Framework was designed to support managers and provide leadership in AGDM to MFTs. The framework provides clear responsibilities for senior staff at different levels.



**Age:** The different states in one's life cycle. It is important to be aware of where people are in their life cycle as their needs may change over time. Age influences and can enhance or diminish the capacity to exercise rights.

**Gender:** Social differences between men and women are learned, changeable over time and can vary within and between cultures. Gender often defines the roles, responsibilities, constraints, opportunities, and privileges of women and men in any context.

**Diversity:** Within each group of people there exist differences of age, gender, culture, different levels of mental and physical ability/disability, class, sexual orientation, ethnicity and other backgrounds. These differences must be recognized, understood and valued by UNHCR if we are to ensure that all groups of people access protection equally.

## TARGETED ACTIONS

When age, gender and diversity analysis reveals inequalities and gaps in protection, **targeted actions** are necessary to remedy the shortcomings and support empowerment, especially for groups who are often disenfranchised such as women, youth, minority groups and persons with disabilities. Targeted actions should address immediate protection gaps and medium to long-term strategic problems related to people's access to and participation in decision making and control of resources. The aims are to strengthen the capacity of these groups to claim and exercise their rights as well as to ensure solutions for those who are most at risk.

# Age, Gender and Diversity Mainstreaming: Summary 2004 - 2007

## 2004

- 14 countries piloted the methodology of setting up multifunctional teams, undertaking participatory assessment, analyzing the findings and developing work plans. Reporting on participatory assessment findings was incorporated into UNHCR programming instructions in December 2004 and has been maintained since then.

## 2005

- The methodology was evaluated by the UNHCR Evaluation and Policy Unit, an independent consultant, the Women's Commission for Refugee Women and Children and the Jesuit Refugee Service in eight countries. The synthesis report entitled "UNHCR's age and gender mainstreaming pilot project" was presented in April 2005 and used to improve the methodology.
- Multifunctional teams representing protection, program and community services functions were trained as facilitators including some partner staff.
- 41 countries set up multifunctional teams and undertook participatory assessments followed by three-day workshops. The findings were analyzed from an age, gender and diversity perspective.
- The revised version of UNHCR standards and indicators increased the number of indicators disaggregated by sex and age and data relating to diversity. Chapter 4 of UNHCR's programming manual was revised to reflect age, gender and diversity mainstreaming and a community based approach.

## 2006

- An additional 41 country operations formed multifunctional teams and conducted participatory assessment with populations of concern followed by three-day workshops where the findings were analyzed from age, gender and diversity perspective. 641 multifunctional team members from UNHCR, national and international partners, as well as government counterparts participated in the workshops.
- The age, gender and diversity strategy was reflected in UNHCR's global strategic objectives.
- Country operation plans from 52 countries were reviewed. Participatory assessment results were reflected in 51 COPs with varying levels of detail. Overall the process was more participatory, although the information analysis and the link to objective setting required improvement.
- An accountability framework was tested with representatives from some 20 countries and key senior managers in headquarters under the leadership of the High Commissioner and the oversight of the Assistant High Commissioner for Protection.

## 2007

- AGDM roll out was completed by the end of 2007 with the participation of another 12 UNHCR country operations.
- Country operation plans from 55 countries were reviewed. The majority of COPs reflected the participatory assessment findings and strengthened links to the objectives were noted. Targeted actions were planned to address the identified protection risks. Particularly noticeable was the improvement in the level of activities for prevention and response to SGBV.
- The accountability framework was launched globally in May 2007 with the exception of some advocacy focused countries (in Europe, North America and Asia). Representatives will be reporting in December 2007 and senior HQ management in the first quarter of 2008. A separate set of actions was developed and piloted for advocacy countries.

## Feedback from UNHCR Morocco

### What do you value most about the AGDM strategy?

"One added value of the process has been to start working with refugees in partnership and to discuss with them how they could be part of the solutions to these issues and how UNHCR could assist them in community based responses. UNHCR also took time to review all the activities which could have a positive impact on the living conditions of refugees which did not necessarily require additional budgets. UNHCR Rabat also started to liaise with other UN agencies – UNICEF, UNIFEM and UNDP. We put in place a UNDP funded program with a local community centre where skills, training, language classes and cultural events are being organized for and with refugees and asylum seekers."

### In terms of the future of mainstreaming age, gender, and diversity within UNHCR, what would you like your team/office to achieve over the next couple of years?

"The AGDM strategy will be shared and discussed more widely with new partners and the mainstreaming should be an ongoing exercise. There is a need for refugees to see concrete results of their feedback; otherwise they will be less enthusiastic about sharing their concerns with no follow up. Although part of the exercise demonstrated that refugees can already improve their condition by using community resources, many activities need funds in order to achieve demonstrable results and allow UNHCR to maintain and further develop the newly won trust of the community. It should be noted that UNHCR Morocco is piloting a new approach to self-reliance, which would set a model for the Maghreb region. The AGDM dimension is a key element of this approach."

## The AGDM Team

97 Facilitators Trained  
**(64 Women and 33 Men)**

1343 Multifunctional Team Members Participated in AGDM Workshops  
**(737 Women + 606 Men)**

55 Workshops Carried Out

109 Country Operations Completed the AGDM Roll Out

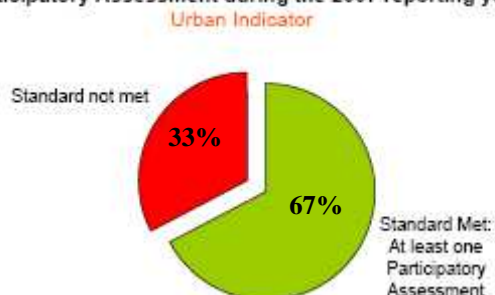


## Age, Gender and Diversity Mainstreaming: Summary 2004 – 2007

Percentage of camps which have conducted at least one Participatory Assessment during the 2007 reporting year



Percentage of urban areas which have conducted at least one Participatory Assessment during the 2007 reporting year



### MORE EXAMPLES FROM THE FIELD

In **Syria**, the multifunctional team adopted a system of rotating the MFT chair depending on the topic. The team found this useful for facilitating team ownership and engagement. 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 **Angola**, a youth group in Sungui refugee settlement proposed to **volunteer inside their own community** to train other youths in sport activities. The multifunctional team linked the youth trainers with the United Nations Development Programme (UNDP) appeal for volunteer projects. The youth presented a proposal for sport activities for girls and boys, which was recently approved for funding.

In **India**, following discussions with women of concern from different ethnic backgrounds, the multifunctional team discovered multiple incidents of violence against women. They **initiated a women's protection clinic** to enable women to discuss their problems and help find legal solutions.

In Costa Rica, the "Amigos de Oro" (the golden friends) group was created to provide **an inclusive and friendly forum for older refugees to share their feelings, ideas and experiences regarding their displacement.** The group identified a lack of social support networks and other obstacles to achieving self-sufficiency. The group now plans to create micro-enterprises including handicrafts, sewing and dress-making and a basic computer skills course. Funds from the enterprise will go to those members in urgent need. The group has also organized activities to support older persons' integration into their host society.

In **Kenya**, the team's approach was to identify the major protection risks and coping mechanisms of urban refugees. As arbitrary harassment and detention was consistently mentioned by refugees as a significant protection risk, UNHCR in cooperation with the Kenya Refugee Department, has embarked upon a program of **training the police trainers.** The participatory assessments also led to **strengthening access to free primary education** for urban refugee children through advocacy with the City Education Department and schools.

### AGDM Roll Out Progress Report

#### 2004: 15 Countries Completed

Colombia	Ecuador	Egypt	Indonesia
Zambia	Greece	Venezuela	N. Caucasus/R. Fed.
Guinea	India	Syria	Lebanon
Iran	Jordan	Sierra Leone	

#### 2005: 41 Countries Completed

Benin	Etiopía	Malta	Cyprus
Nigeria	Uganda	Burkina Faso	Slovak Republic
Kenya	Burundi	Viet Nam	Italy
Chad	Botswana	Philippines	Slovenia
Rwanda	Tanzania	Cambodia	Hungary
Malawi	Malaysia	East-Timor	Costa Rica
Zimbabwe	Nepal	Mexico	Poland
P. N. Guinea	Thailand	Panama	Libya
Bangladesh	Algeria	Argentina	Albania
Myanmar	Tunisia	Brazil	Yemen
Mauritania			

#### 2006: 41 Countries Completed

Sudan	DR Congo	Kyrgyzstan	Romania
Liberia	Angola	Tajikistan	Ireland
Mozambique	Korea	Kazakhstan	FYR of Macedonia
South Africa	Eritrea	Georgia	Serbia
Somalia	Djibouti	Namibia	Kosovo
Senegal	Mali	Azerbaijan	Croatia
C. African R.	Ghana	Montenegro	Kuwait
Cameroon	Gabon	Bulgaria	Morocco
Ivory Coast	Japan	Spain	Bosnia
China	R. of Congo	UK	Saudi Arabia
Armenia			

#### 2007: 12 Countries Completed

Afghanistan	Switzerland	Germany	Czech Republic
Sri Lanka	Sweden	Austria	Belarus
Denmark	France	Belgium	Luxemburg

## Age, Gender and Diversity Mainstreaming: Summary 2004 – 2007

### POLAND: BEFORE AND AFTER AGDM

In **Poland** the MFTs learned that many victims of trauma and violence, among them many women, go unassisted, as there is no system in place to identify them. While security is an issue raised mostly by females, men expressed fears about their future and the lack of job perspectives in Poland. Men cited an inability to find jobs because their professional skills do not meet labour market needs. A lack of Polish language skills is another obstacle to employment. Children expressed that Polish lessons provided in the centres were not enough to help them keep up at school, and they also expressed a desire for more leisure activities and playgrounds within the facilities.

- The office of Repatriation and Aliens has signed a contract with the hospital of the Ministry of Interior and Administration to provide psychological services to residences at all reception centers.
- Two projects in reception centers helped increase career choices and improve the social situation of the residents.
- School attendance rate of children of asylum seekers increased substantially from 53% in September 2005 to 83% in September 2006.
- Playgrounds were built in many centers and computer rooms were established.

### SLOVAKIA: BEFORE AND AFTER AGDM

In **Slovakia**, MFTs discovered a grave lack of confidence in the asylum procedure. Asylum-seekers claimed that interviews were carried out in a hurried manner, the transcripts were not accurate and the status determination procedure was prejudiced against them. Some asylum seekers, who are entitled to work, were not familiar with government integration programmes and did not know which kind of assistance they were entitled to receive. Additionally, they requested access to educational training, university education, advanced Slovak language courses, and coaching for job searching.

- UNHCR in cooperation with the authorities is preparing a DVD on protection information for asylum seekers and information pamphlets for recognized refugees with information on integration and naturalization.
- Some asylum seekers who are entitled to work are assisted by social workers while searching jobs.
- Projects in asylum centres provide for additional language, educational and vocational courses.

### HUNGARY: BEFORE AND AFTER AGDM

Asylum seekers in all three of Hungary's reception centers experience their stay as a difficult period in their lives. They constantly crave normalcy for themselves and their children, for improved living conditions and a more sympathetic social environment. Through participatory assessment, MFT discovered that the food at the reception center does not take into consideration their cultural and traditional needs, and that nursing mothers complained that the food for themselves and their babies is inadequate. Parents also reported that their children could not benefit from public education because many elementary schools are unwilling to enroll asylum-seeker and refugee children, due to their limited Hungarian language ability.

- Meals offered in refugee reception centres now respond better to special needs.
- Round tables were organized with local school directors and municipalities to address problems relating to educating children.



### ADDRESSING SGBV

In many countries, participatory assessment uncovered a constant theme of sexual exploitation of women and girls. Women's focus group discussions in Latin America, Europe, Africa and Asia frequently highlighted domestic violence. Under-age marriage was a common theme for girls and sexual harassment and violence against women and girls was widely reported on in relation to collecting fuel and water, and tending to crops and animals in rural areas. Sexual exploitation of women and girls arising from the absence of livelihood opportunities and the desperate need to cover basic requirements such as food, clothing, and educational materials was a major protection problem in almost all areas.

### COUNTRY RESPONSES

In **Azerbaijan**, participatory assessments with women and adolescent female refugees from Afghanistan and Chechnya revealed a serious problem of early marriage and pregnancy among the girls, as well as other forms of sexual and gender-based violence. The UNHCR office in Azerbaijan expanded its awareness program by training the network of social workers and building a community support network. A confidential reporting mechanism for victims was established.

In **Chad**, men were mobilized into taking action to address SGBV including domestic violence. The formation of a men's association has been facilitated by UNHCR and partners. Men's groups in four camps are now receiving training on gender and SGBV.

In **Mexico**, UNHCR staff found that refugee parents often feel very isolated from the rest of the community and their children lack recreational outlets. This in turn increases the risk of domestic violence. Refugee parents are now being assisted to organize self-support groups with other refugees to find ways to help each other.

In **Columbia**, domestic violence against women and children was identified as a major protection problem. There is now a training programme for refugee and internally displaced men to examine their concepts of masculinity and work to stop domestic violence.