



Country evaluation
of the age and gender
mainstreaming pilot project

Venezuela

Evaluation and Policy Analysis Unit

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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. This report presents the evaluation of the pilot project in Venezuela, where work has taken place in rural host communities at the border area with Colombia.

The evaluation took place over a four day period and aims to be a learning tool, not only exploring impact on attitudes, work practice and accountability but also exploring the value of the methodology and ways in which it could be improved in the context of a roll out. Interviews were held with desk staff, staff in country, people of concern and partners.

Impact on attitudes and analytical approaches

Staff in Venezuela were working on and prioritizing issues of age and gender prior to this project. Staff feel, however, that the mainstreaming approach has had an impact on their age and gender perspectives and work. It has helped them to: systematize their thinking on age and gender issues; strengthen and further integrate age and gender perspectives throughout their work and; increase their technical awareness, which has allowed them to be more insistent on the value of the approach when working with partners. Partners confirmed the attitude change of staff and stated that their own analytical approaches have improved.

Impact on procedures and work processes:

Mainstreaming. UNHCR staff interviewed, both Multi-Functional Team (MFT) and non-MFT, have found that the age and gender Mainstreaming pilot has encouraged the consideration of gender equality and age equality issues at critical decision-making steps of normal work routines. Despite the additional costs involved staff feel that the benefits outweigh the costs in terms of improved impact and protection. Staff work in a more co-ordinated manner and output has been improved.

Participatory assessment¹: Findings from the participatory assessment have been influential in terms of focusing work and in influencing the development of the LOI and the COP. Unfortunately, its use was a one off exercise and needs to be repeated.

Multi Functional Team. Seen to be the most valuable element of the project in terms of improving co-ordination, accountability and bringing issues of age and gender to the fore, hence improving the protection of people of concern.

Management leadership. The Regional Representative has played a strong role in Venezuela, taking an active role in providing guidance to staff on objectives and

¹ Participatory assessment refers to the element of situation analysis that involves participatory discussions with refugee communities.

responsibilities for age and gender mainstreaming. She has provided a supportive environment for staff to explore issues and approaches. Her leadership on the issue has not been limited to the office but has spread to her emphasis on multi-agency work and influencing others to incorporate age and gender perspectives within their work. Accountability is seen to have been improved with the Representative asking for updates on progress and taking a personal interest in activities.

Pilot methodology and delivery. Overall, it is felt that the pilot methodology is the best approach to gender work so far, with the added value of tackling age issues. The key elements of success are: delegation of responsibility to each office, notably the Representative, and definition of specific outputs with follow up. The preparation for the pilot could, however, be improved in terms of providing more advance notice as well as increased clarity as to the aims and objectives.

The regional workshop was seen to be a good and rare opportunity to share experiences with other countries, particularly Colombia, which is the country of origin of people of concern in Venezuela. It was also seen to be well structured and organized.

Learning. The key learning to arise out of the pilot project in Venezuela is: need for regular follow up from Headquarters; committed individual staff, supported by strong leadership, is crucial; the participatory assessment tool is valuable in encouraging staff to engage directly with refugees but resources and commitment are needed to ensure systematisation.

Recommendations

- It is recommended that the age and gender mainstreaming initiative continues in Venezuela. Staff are working extremely well as a Multi-Functional Team and this has had an impact on improving the quality of their work. Greater focus needs to be placed on mainstreaming age and gender (particularly age) internally, with more capacity building of all staff, as well as on systematising the participatory assessment.
- It is important that the incoming Representative is adequately briefed and takes ownership of the process. There is also a need for HQ to clarify the next steps for the pilot countries and the MFT.
- It is also recommended that there should be a roll-out of the age and gender mainstreaming initiative. Before this takes place, however, there is a need for clarification of the relevant concepts and tools and their linkages. The project needs to be seen within the wider context of HQ structures, which need to be addressed if mainstreaming is to become reality. Accountability for mainstreaming needs to be placed at the level of all staff within HQ, not just with country offices and WCCDS.

Introduction

Background to the evaluation

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. To date, country assessments followed by capacity building and planning workshops have been conducted in Iran, North Caucasus, Guinea, Zambia, Greece, Egypt, Jordan, Lebanon, Syria, India, Colombia, Ecuador, Venezuela and Sierra Leone.
2. The three key elements of the pilot project methodology are: Situation assessment using a participatory approach, integration workshop and the use of multi-functional teams. In South America, each country did their own participatory assessment and then a regional integration workshop took place. Staff attending from Venezuela went on to form the Multi-functional team.
3. Mid-term reviews of the work were carried out by each Multi-functional team² and it was agreed that a process evaluation would be conducted at the end of the pilot phase. Evaluations have taken place in Zambia, Colombia, India, Egypt, Syria,³ Greece, Venezuela and Ecuador. These countries were recommended for the evaluation exercise as they represent diverse situations. This report presents the findings of the Venezuela evaluation, where work has taken place in rural host communities at the border area with Colombia⁴.

Evaluation purpose and objectives

4. The purpose of the evaluation is to assess the impact of the age and gender Mainstreaming pilot project and, if it is deemed to be a useful initiative, to use this learning to inform the planned rollout of the project in 2005. Four areas of impact are explored in all countries. These are analytical approaches; procedures and work processes; leadership; and pilot methodology.
5. This evaluation is a process evaluation and is expected to be a learning tool. It has been designed to be a two way process, whereby the evaluator and participants in the pilot project come together to explore learning and to build on experience. The evaluation is part of the wider mainstreaming project and as such is one important step in the process. In this way, the evaluation differs from a conventional end of project evaluation, which focuses on measuring impact. The process focus also arises from the practical reason that a key focus of this project is to change attitudes and

² This evaluation should be read alongside the Mid-Term Reviews which contain additional examples of impact.

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 Regional Representative and all staff, partners and people of concern who kindly gave their time to ensuring that this mission was a success.

ways of working. The impact is thus less clear to measure than in a more quantitatively defined initiative (see also paragraph 11).

6. The objectives of the evaluation are:
 - to document and explore progress towards age and gender Mainstreaming
 - to examine the appropriateness/ effectiveness of the methodology used as a first step towards mainstreaming
 - to highlight lessons and recommendations for the roll out of the project

Methods and approach

7. This evaluation was based on semi-structured interviews with stakeholders. Interviews were conducted on a one to one basis as well as in groups.
8. Stakeholders interviewed included:
 - UNHCR desk staff in Geneva
 - UNHCR field staff: Regional Representative; members of the multi-functional team (three in Caracas, six in San Cristobal); non members of the MFT (three in Caracas).
 - Different partner organizations: one in Caracas, three in San Cristobal
 - Persons of concern: One group of three women, one group of four girl children and adolescents. No men could be found to engage in the discussion at the available time.
9. A document review was also conducted and included work plans, Country Operation Plan (COP), project submissions and other relevant documents.
10. Limitations: This evaluation was conducted over a four day period. While this limits the scale of analysis it was sufficient time for meeting key stakeholders as well as providing an opportunity for learning and exchange of ideas. It did not allow, however, for much observation which would have helped to cross-check some of the opinions given during interviews.
11. In terms of measuring impact it is important to note that this is a process evaluation, taking place after only six months of activities. Measuring the impact of the project on attitude change and sustained change in work practices is a long-term process. This evaluation can therefore only be the first step to measuring the sustainability of the pilot project.

Findings

12. The UN guidelines for gender mainstreaming suggest that attention needs to be given to three areas of work⁵: Analytical approaches; Procedures and work processes and; Leadership. These areas, and an additional area on the pilot methodology, form the framework for this evaluation.

13. The opinions of partners and people of concern are integrated within the reporting on the opinions of UNHCR staff. This allows for triangulation of information.

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.

14. It is difficult to measure changes in analytical approaches, in a context where staff are already working on and prioritizing issues of age and gender as they are in Venezuela. The mainstreaming approach has, however, had an additional impact on age and gender thinking. Staff involved feel that the age and gender Mainstreaming approach has helped them to:

- systematize their thinking on age and gender issues
- strengthen and further integrate age and gender perspectives throughout their work
- increase their technical capacities, which has allowed them to be more insistent on the value of the approach when working with partners

15. The participatory assessment has also enabled staff to widen their perspectives on issues of vulnerability:

“Gender is not just women, men can also be vulnerable. Seeing this improves our work. The participatory assessment showed this.” MFT member

⁵ 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.

16. Partners interviewed for this evaluation confirmed that UNHCR staff attitudes have changed. They reported that the project has “made them (UNHCR staff) closer to the communities” and helped them “increase the gender vision in their work with more opening to supporting projects that work with women.”. In addition it is noted that UNHCR staff now check with partners to ensure mainstreaming in their work plans.

17. The project has also had an impact on the analytical approaches of implementing partners:

“We were working on the rights of women and children before. This project made the issues more explicit and brought about an attitude change. The focus group discussions showed us that we need to involve women more in workshops and training. We used findings in our 2005 planning, they showed us where our weaknesses were and we have focused on these. We are now internalising issues of age and gender. Our focus has also been widened through the participatory assessment. Before when we thought of children we focused on education and health, now we see the importance of issues such as providing space for play.” Partner agency staff member.

18. Staff interviewed had a clear understanding of ‘participatory approaches’, ‘community development’ and the ‘rights based approach’ and how these fit with their understanding of age and gender mainstreaming.

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.

19. *Mainstreaming*: UNHCR staff interviewed, both MFT and non-MFT, have found that the Age and gender Mainstreaming pilot has encouraged the consideration of gender equality and age equality issues at critical decision-making steps of normal work routines. This differs from before whereby age and gender were considered as specific ‘add-on’ topics as opposed to relevance to all work:

“There is a big difference to how we work now as opposed to before. Mainstreaming is now part of us, we have internalized age and gender issues.” MFT member.

20. In terms of changes to day to day work, the following changes have been noted:

- Staff felt that the pilot project has helped systematize what was already being done. In Venezuela, there was already an important emphasis on gender issues. The workshop was seen as key to deepening what was already being done and also motivated staff to engage more rapidly: “It gave us a push and sped us up”.

- Improvement of the work of Public Information – materials have been improved to ensure that they refer to women, men, boys and girls as distinct groups and staff feel more confident in how materials are presented with regard to taking a more sustained focus on age and gender issues.
- Each unit is now more active in ensuring mainstreaming. This facilitates mutual monitoring: “It is part of work structure now. Part of daily work, we report on it systematically, we are better organized, and the priority given by Geneva has visibilised our age and gender work”. This is seen to be a great improvement on the focal point approach where the gender focal point felt that there was little interest in her work and she had to keep “knocking on doors”.
- The Team also supports inter-agency work. Having different UNHCR staff members present in inter-agency discussions improves impact. In addition: “We now have one voice to the outside world, we are using the same discourse, this maximises our impact.”

21. Job descriptions of staff have not changed to incorporate age and gender mainstreaming work but the 2005 CMS will incorporate membership of the MFT. This will need to be monitored. Around 80% of staff had age and gender mainstreaming objectives in their 2004 CMS.

22. The issue of resources for implementing age and gender mainstreaming is an important one. In terms of financial resources, the programme is operating in the context of cuts to overall budgets. Mainstreaming involves financial resources in terms of travel to conduct participatory assessments as well as in terms of holding training events. With regards to human resources, staff are already overstretched and the time needed for conducting participatory assessment and training is not negligible. Despite these additional resource implications, however, staff in the MFT do feel that the benefits outweigh the costs in terms of improved impact and protection:

“There is a small investment with a big outreach, for example women benefiting more from projects, public information is better now so there is improved access to wider group.” MFT member.

23. In addition, staff felt that resources should not be needed in terms of mainstreaming age and gender awareness into their own work load:

“If you see it as an extra job then it is not mainstreamed. You need to see it as part of your normal salaried work, it doesn’t cost more to mainstream and the impact goes up.” MFT member.

24. *Participatory assessment:* The participatory assessment conducted was limited in scope. For example, no specific meetings were held with elderly people, although elderly meeting were involved in the focus group discussions with adults. Furthermore, only one car was available for the team of seven. Implementing partners were involved, however, and found the experience to be a positive one. Staff feel that despite the limitations, the exercise was influential. In terms of working with people of concern, staff feel that they now engage in discussion with a wider group of people and require all family members to attend meetings as opposed to just

heads of family. In addition, the participatory assessment has influenced the development of the COP as the MFT members are also involved in drafting the COP.

25. Unfortunately, the participatory assessment tool has not been used since the initial assessment. Specific constraints given are:

- In the rural host community context people of concern are dispersed: it is hard to locate them and bring them together
- Limited staff capacity: participatory assessment takes time, particularly in view of the distances involved
- The participatory assessment needs to be conducted at weekends when people of concern are less likely to be working

26. *Multi Functional Team:* The multi-functional team consists of three staff members in Caracas (Protection Assistant, Programming Assistant and Public Information) and non-support staff (6) in San Cristobal. The selection criteria have all been met, if staff in the field are also included. In Caracas, however, there are no male or international staff members and this is a weakness of the team make-up.

27. The MFT is seen by members in Caracas to be the most valuable element of the project:

“Now it is easier to co-ordinate, not just age and gender activities but all activities. It has improved contact between Protection, Programme and Public Information.”

28. Meetings are not held systematically in either Caracas or San Cristobal but are held on an ad hoc basis as needs arise. Staff feel that communication is regular in day to day interactions without the need for specific meetings. The staff in Caracas have an email group that they use regularly. It became clear during observation that the three young female team members do work very closely together and do have a very good rapport outside of this project.

29. In terms of the MFT workplan, it is important to note that the Pilot arrived four months into already planned gender activities. These activities were not changed but are now managed by the MFT collectively. Workplans by geographic area have been developed for 2005 on the basis of findings from the participatory assessment. These workplans include an integrated approach, involving programme, protection and community services issues. There is not, however, a specific workplan for 2005 for the MFT as the MFT is seen as supporting the implementation of activities designed in a age and gender sensitive manner.

30. Staff have also noted that working as an MFT improves impact. It has brought the issue of age and gender differentiation to the fore and has improved coordination and systematization of work:

“It optimises the work that we do, it directs us, we share experiences and look at how one project impacts on other sections and expand them” Field office staff member.

31. In addition, the MFT is planning to focus more on conducting group discussions with people of concern in the urban context, as a result of the methodology proposed by the pilot project.

32. It is felt that when membership of the team and engaging in other age and gender mainstreaming activities is incorporated into the 2005 CMS objectives, prioritisation will also be facilitated.

33. The primary strength of the Multi Functional Team in Venezuela is the integrated manner in which members work. Members feel that there is good communication and coordination, as well as a shared interest in the theme of mainstreaming age and gender. In addition, there is good support from supervisors which means that MFT members are given the time to implement workplan activities.

34. The key challenges facing the Multi Functional Team include time pressures and limited staff capacity. Working in the context of reducing budgets which has implications on, money for travel or money for implementing community project specially targeted for children, for example, is also challenging. In addition, it is important to note that the IPs belong to the Catholic church structure which means that they will not work on certain age and gender relevant issues, such as reproductive health. As a consequence other partners need to be identified.

35. There is seen to be a future for the MFT, despite the end of the pilot project period. Staff see that the team should be expanded, and should include staff from administration and human resources. Meetings should also be more systematic and there should be a focus on increasing impact on outside actors.

36. Non MFT members see the pilot project as useful in supporting the office in developing specific activities with outcomes and responses as well as in widening the focus away from women and children. It would have been useful to interview administration and human resources staff to see whether the project has had an impact on them but unfortunately the limited time available for this evaluation precluded more in depth analysis.

37. In terms of enhancing the protection of refugee women and children, the following impact of the pilot project has been noted:

- The participatory assessment revealed that each family member needed an identity card. This was integrated into the workplan and has been achieved.
- People of concern interviewed for the evaluation felt that they now had a better knowledge of what UNHCR could do for them. They also felt that involvement in the participatory assessment helped with community bonding. In addition, a key problem identified in the participatory assessment (lack of water) is now being addressed with funds from the Japanese embassy to develop a water project. This was not integrated into the workplan as the timeframe was too short for success to be measurable.
- Improved internal co-ordination and co-ordination with partners on age and gender mainstreaming issues improves the overall impact and

protection of women and children, as well as of all groups of people of concern.

- Refugees interviewed during this evaluation felt that the participatory assessment made them feel more valued. Staff felt that talking to refugees without an agenda allowed issues to arise spontaneously whereas usually discussions are based on UNHCR's needs. Systematic use of the tool would improve protection and clearly a one off assessment is insufficient to draw strong conclusions as to improved protection.
- Staff in Caracas had never participated in focus group discussions before. This enabled them to see the wider situation facing people of concern and to move away from the individual case focus.

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.

38. The Regional Representative has been influential in Venezuela, taking an active role in providing guidance to staff on objectives and responsibilities for age and gender mainstreaming. She has provided a supportive environment for staff to explore issues and approaches. Her leadership on the issue has not been limited to the office but has spread to her emphasis on multi-agency work and influencing others to incorporate age and gender within their work through her networking and attendance at various meetings.

39. In terms of how the pilot has impacted on leadership and accountability, staff feel that the Regional Representative is now more aware of what the MFT staff members are doing, in prioritizing their age and gender mainstreaming work and liberating time for them to conduct pilot activities. This is seen to be a big achievement in view of the time pressures all staff face. She has provided not only support, but technical and strategic advice as well as providing contact details for working with others. Furthermore, her input gives weight to the initiative outside of the MFT itself.

40. No clear leadership weaknesses were identified by staff although it is worth noting that the Representative did not attend the workshop in Bogota and did not take part in the participatory assessment.

41. A number of leadership challenges were identified by the Representative. These include the need for a better integration by headquarters of their various initiatives as well as the pressures faced by staff in terms of reporting requirements which takes them away from other activities. In addition, the project needs to be invested in, with provision of financial resources for training etc.

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.

42. Overall, it is felt that the pilot methodology is sound and that the approach is in fact successful:

“This is an old topic, there have been many different approaches including the use of gender focal points which was limited. This is the best approach so far” Regional Representative.

43. The key elements of success are seen to be that the methodology:

“Delegates responsibility to each office, notably the Representative of each office, and defines specific outputs, including the development of a work plan, within a short timeframe. In addition follow up is provided on a regular basis, which helps motivate staff and ensures that the issue remains on the agenda in a climate where staff are overwhelmed with competing priorities.” MFT member.

44. The preparation for the pilot could, however, be improved by providing more advance notice as well as increased clarity as to the aims and objectives:

“We were only given two weeks notice, responsibility was given to one person who had to drop everything to organize the focus group discussions, even though other priorities had been programmed. There was no time to read the documentation. It was not clear why the project was happening. It was only explained later that it was due to the donor evaluation.” MFT member.

45. Lack of preparation time also made the field assessment difficult. There was only one car available to cover a team of seven people and a large geographic distance in a very short space of time. These difficulties meant that focus group discussions were only held with a group of women, a group of men and a mixed group of children and adolescents.

46. The regional workshop was seen to be a good and rare opportunity to share experiences with other countries, particularly Colombia which is the country of origin of people of concern in Venezuela. It was also seen to be well structured and organized

47. Suggestions for improvement are as follows:

- Increase numbers of places available for workshop attendance: In the pilot places were limited which excluded certain people from attending.
- Some themes were not context specific enough. It was felt that the office already had a good understanding of community development, for example, and that the time would have been better spent on other areas.

- Revisit the use of topics: These were helpful for the participatory assessment but not for the work plan.

48. In terms of engagement and participation in process, staff feel that the input from HQ has allowed them to feel valued for their work. Regular monitoring by HQ has also been motivating.

Learning and recommendations

Learning

49. The key learning to arise out of the pilot project in Venezuela is as follows:
- 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.
 - The role of the Representative is key: They bring expertise and experience, external contacts, follow up and strategic vision, motivation and help with surmounting obstacles.
 - Committed individual staff, supported by strong leadership, are crucial to ensuring that the ambitious nature of the pilot project is met and that the MFT does not just become a replacement for the gender focal point system.
 - It is helpful to have Public Information in the MFT as they have a fundamental role within the organisation, not just outside, in terms of visibilising issues.
 - It is important to promote age and gender mainstreaming activities within the organization to ensure awareness of all staff, not just of the MFT members.
 - There is a need for further training and for sharing of best practice among countries.
 - The participatory assessment tool is valuable and has forced staff to engage directly with refugees as opposed to relying on partners to gain primary information but continued use should not be assumed. There needs to be follow up and allocation of resources by management.
 - The pilot has not of itself led to a concrete improvement in the engagement of refugee capacities in day to day work. For this to happen, participatory assessment needs to be followed up with participatory monitoring and evaluation as well as participatory planning.

Recommendations for Venezuela

It is recommended that the age and gender mainstreaming initiative continues in Venezuela. Staff are working extremely well as a Multi-Functional Team and this has had an impact on improving the quality of their work. Recommendations are as follows:

50. Multi-Functional Team:

- Build on good work. The Team have been very good at mainstreaming age and gender perspectives into their own work.
- Look at how to further build the capacity of other non-MFT staff in terms of age and gender mainstreaming. The workplan has had an external focus and it is important to ensure that internal mainstreaming takes place.
- Develop specific MFT activities for 2005 in a context where it cannot be assumed that mainstreaming has occurred in a sustainable manner throughout the office.
- Look at how experiences could be shared with other countries in region, through regional meetings for example.
- Rotate MFT members: this is important for ensuring mainstreaming. Administration and human resources staff should be involved in the MFT.

51. Non- Multi-functional Team staff:

- MFT work plans and other relevant documentation should be shared with the office team
- Office meetings should be used as an opportunity to highlight MFT activities and for other staff to talk about how they are mainstreaming age and gender into their work
- Additional training of all office staff on age and gender mainstreaming strategy and relevant tools. This should be provided by the Multi-functional team on the basis of the workshop held in Bogota.
- All staff should be involved in participatory assessment

52. Participatory assessment:

- This should be systematic and not merely a one off exercise. Regular assessment will support participatory monitoring as well as planning.
- Further participatory assessment should be scheduled, if this is not possible before the 2006 COP then there should at least be one before the next LOI is developed. This should be shared with partners and partners should be involved in carrying out the assessment.

53. Regional Representative:

- The commitment of the Regional Representative has been extremely valuable. It will be crucial to ensure that her replacement is well briefed, trained and takes ownership over his or her important leadership role.

- Time needs to be allocated/ prioritized for the participatory assessment / training work of the multi-functional team. Most other activities do not require additional time, just a change in perspective.
- The Regional Representative should hold a regional meeting to compare experiences and build capacity on age and gender mainstreaming.
- Look into the options of forming a Regional MFT for the next phase. This may allow for tapping into a higher level of resources as well as addressing common issues around Colombia case loads.
- Leadership should include requesting a greater emphasis on the age element of age and gender mainstreaming.

Recommendations for wider roll-out

Staff interviewed and the evaluation team feel that there should be a roll-out of the age and gender mainstreaming initiative. Recommendations provided by staff, partners and the evaluator for HQ are as follows:

54. Participatory assessment:

- WCCDS needs to provide clearer understanding of why POP is no longer being used and the added value of the participatory assessment tool

55. Multi-Functional Teams:

- The principal question here is: what next? Clarity needed for the phasing out of WCCDS support and the full ownership in country. In Venezuela, the team is very self-sufficient but greater clarity would be helpful in terms of the what next and whether HQ will provide suggestions or whether the countries are now meant to be self generating. Guidance from HQ on sustaining the process after the initial phase will be needed in the proposed roll-out.
- HQ (DOS/DIP/Bureaux) needs to sustain and improve follow-up. This includes follow-up of the Representative.
- WCCDS should ensure that field staff, administration and resource staff are included in the Terms of Reference for the Multi-Functional team

56. HQ linkages:

- Age and gender will only be mainstreamed when UNHCR organizational culture has changed so 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.
- Linkages need to be developed within DOS and with other departments to ensure that the pilot is part of a wider organisational strategy of mainstreaming.
- HQ needs to clarify how the age and gender mainstreaming approach fits with various other training programmes, including learning programmes for middle and senior management.

- Age and gender mainstreaming has to be in HQ not just in field. Has to be mainstreamed from top down as well as bottom up.
- To address the challenge of sustainability in times of staff rotation, DOS to work with Bureaux to ensure that briefing of new staff covers the mainstreaming initiative.
- Clarification is needed as to who is responsible for following up on ensuring that CMS objectives include age and gender mainstreaming.

57. Methodology:

- Expansion of time frame: it is felt that six months is too short. Staff feel that one year would be ideal- short enough to ensure the issue remains on the agenda but long enough to ensure definable outputs.
- Encourage staff to work with other UN agencies, share the workplan and look at how to work in collaboration, where possible.
- Continue to provide regular evaluation and capacity building. One workshop is insufficient to adequately build capacity.

Overall conclusion

58. This pilot 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.

59. The Venezuela team have been enthusiastic in embracing the age and gender mainstreaming strategy. Most elements of the terms of reference and the MFT 2004 workplan have been met. The element that has been most sustainable has been that of the multi-functional team approach. Refugees have commented positively on the experience of engagement with the participatory assessment. Greater focus needs to be placed on mainstreaming age and gender internally, with more capacity building of all staff, as well as on systematising the participatory assessment.