

WORKING TOGETHER TO END DISCRIMINATION AND ENSURE EQUAL OUTCOMES FOR ALL

Global Analysis of
2011 – 2012 Accountability
Frameworks for AGD and
targeted actions

by Leslie Groves
Consultant



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Cover Photos:

Colombia/ Visit of the High Commissioner, Antonio Guterres, fulfilling one of his accountability actions and meeting with displaced community leaders, including women, in Soacha. Colombia/UNHCR/D.Torres/2010

Yemen/Visit of the Assistant High Commissioner for Protection, Erika Feller, meeting Ethiopian and Somali refugees in Kharaz refugee camp near Aden/UNHCR/J.Bjorgvinsson/March 2007

Kenya/ Visit of the High Commissioner, Antonio Guterres, fulfilling one of his accountability actions and meeting with a refugee family in Kenya. UNHCR/B.Bannon/ 2008

Ecuador / UNHCR Assistant High Commissioner for Operations, Janet Lim, fulfilling one of her accountability actions and meeting with Colombian refugee women from Sucumbios / UNHCR / S. Aguilar / 2010

Ecuador / DHC's visit / UNHCR's Deputy High Commissioner for Refugees Alexander Aleinikoff visiting border areas in Lago Agrio/ UNHCR / April 2012

Executive Summary

This report provides an annual overview of progress in meeting organisational standards for integrating UNHCR's age, gender and diversity approach, including targeted actions for the enhanced protection of individuals with specific needs. It identifies: thematic and geographical gaps and progress, constraints, good practice and examples of direct impact on persons of concern. It also provides recommendations for improving performance in 2012-2013.

The data shows us that there has been an increase in field performance, with 80% of accountability actions 'fully' or 'mostly' completed in non-advocacy based operations and 91% in advocacy based operations. Progress on the 2011-2016 Forward Plan is observable and there are strong signs that Headquarters Divisions are taking ownership of the AGD process, particularly in the Bureaux. Important challenges remain, however, particularly with regard to ensuring that UNHCR's key tools are able to capture the full range of AGD-related initiatives taking place at the field level and their impact.

Background

The accountability framework for age, gender and diversity (AGD) and associated targeted actions responds to internal and external requests for greater accountability and leadership from senior managers to ensure adequate integration of age, gender and diversity concerns throughout the organisation. It also supports UNHCR's own 'Vision 2016' which aims to ensure that UNHCR is a fully age, gender and diversity inclusive organisation within five years.

Findings

High Organisational Commitment to Framework Completion: 94% of representatives and 100% of senior managers at Headquarters submitted accountability framework reports.

1. Overall organisational achievements

For the organisation as a whole, 81% of actions have been 'fully' and 'mostly' achieved. This compares with 79% in 2010-2011 and 71% in 2009-2010.

2. Non Advocacy Based Operations

Highest reported rates of full achievement relate to:

- Leadership of the participatory assessment (PA) exercise (47% reported 'full' achievement)
- Budget & Plan reflect participatory assessment & AGD (39% reported 'full' achievement).
- Incorporation of SGBV into Strategies (38% reported relevant actions as being 'fully' achieved)

Lowest reported rates of full achievement relate to:

- Targeted actions for adolescents (14% reported 'full' achievement)
- 100% Birth Registration (24% reported 'full' achievement)
- Incorporating AGD Advocacy into National Practice (25% reported 'full' achievement)
- Women's Representation (25% reported 'full' achievement).

On average, 31% of actions were reported as being 'fully' achieved and 49% 'mostly' achieved in 2011 – 2012 in non advocacy based operations.

Comparing the data over the past three years reveals a slight decrease in reporting on full achievement but a significant increase in reporting on 'mostly', with an accompanying decrease in reporting of 'partially', 'hardly' and 'not at all'.

3. Advocacy Based Operations¹

Highest reported rates of full achievement relate to:

- AGD analysis in awareness raising and mobilisation activities (reported by 16 out of 21 representatives as being 'fully' achieved)
- External AGD leadership (reported by 15 out of 21 representatives as being 'fully' achieved)

The lowest levels of 'full' achievement relate to:

- External relations activities (Reported by 11 out of 19 representatives as being 'fully' achieved).
- Internal AGD leadership (reported by 11 out of 21 representatives as being 'fully' achieved).

Achievement ratings were higher on average than in non-advocacy based operations: 66% reported 'full' achievement and 25% reported actions as being 'mostly' achieved.

4. Headquarters

UNHCR's efforts over the past years to enhance the integration of the AGD approach at Headquarters are paying off. Most of the recommendations made in previous year's reports and by the external evaluators have been taken on board and the resulting improvements are evident. There is a greater ownership at Headquarters of the AGD approach, revealed in the breadth of activities that have been taken in order to implement the AGD Forward Plan and which are outlined in the main body of this report. Challenges remain in integrating the AGD approach into UNHCR's results framework but if current efforts continue, the organisation is clearly on track to meet the seven strategic results laid down in its AGD Forward Plan.

Moving forward

The report highlights gaps that need to be filled in order to fully implement the AGD approach. It provides associated recommendations that will necessitate broader debate and engagement by UNHCR. The principle gaps and suggested ways forward are summarised below:

- **Gap:** Ensuring that it is possible to measure the extent to which the voices of persons of concern are reflected in planning and final budgetary allocation.
Recommendation: There needs to be a clear and visible link between the key results and analysis of participatory assessments and operations planning and budgeting. A cascading system within Focus, which contains participatory assessment in the first line, would be a critical development.
- **Gap:** Learning from, building on and scaling up good AGD practice where possible.
Recommendation: Develop a systematic approach to sharing, learning from and building on the 170 good practices identified in this report and those collected elsewhere.
- **Gap:** Evolution of the AGD approach to enhance the participatory engagement of persons of concern in UNHCR processes beyond the already important and ground breaking engagement of persons of concern in UNHCR's annual planning process.
Recommendation: Continue to develop the methodologies from the 'Regional Dialogues' and continue to work to evolve the AGD methodology to ensure that it becomes a critical and integral way of enhancing practice and impact for persons of concern.
- **Gap:** Systematic measurement of impact of AGD approach on persons of concern
- **Recommendation:** Ensure that UNHCR's Results Framework and Focus are fully aligned with and support the implementation of the AGD Policy, including measuring its impact.

¹ Advocacy based operations are defined as countries in which UNHCR does not engage in day to day direct support of persons of concern and in which activities consist mainly of lobbying government, influencing policy, fundraising and awareness raising.

Part 1. Background

The accountability framework for integrating UNHCR's age, gender and diversity approach (AGD) responds to internal and external requests for greater accountability and leadership from senior managers to ensure adequate mainstreaming of age, gender and diversity concerns throughout the organisation. The High Commissioner himself has placed both gender equality and accountability high on UNHCR's agenda. UNHCR's 'Age, Gender and Diversity Approach Forward Plan 2011-2016' aims to ensure that UNHCR is a fully age, gender and diversity inclusive organisation within five years .

The framework aims to **demonstrate organisational leadership by placing accountability with senior management in a transparent, public and personal manner**. As such it is a ground-breaking initiative, which, six years on, continues to place UNHCR as a lead agency in ensuring that age, gender and diversity 'mainstreaming' moves from rhetoric to organizational reality.

The accountability framework provides a **checklist of minimum standards**, to be referred to on a regular basis in order to assess progress. Some minimum standards are based on leadership processes. For example, 'I have led the annual participatory assessment'. Others are based on results. For example, 'I can confirm that sanitary materials have been provided to all women and girls of reproductive age'.

Once a year, senior managers are required to report back on progress, using a simple check box format. This provides an **annual snapshot that enables UNHCR to measure progress over time, across regions and across HQ** on the basis of the 2007 baseline. In addition to enabling UNHCR to **quantify** progress over time, it provides **qualitative analysis** of what is working well, what the constraints are and what strategies are being used to overcome constraints. It is currently the only mechanism for such qualitative global analysis and is therefore a useful component of UNHCR's results based management framework. Further details on method can be found in Annex 1.

This document presents the **fifth annual overview** of progress towards achievement with the accountability actions for AGD and associated targeted actions. It identifies:

- What the gaps are (Sections 2.2 to 2.4 and Section 3)
- Where the gaps are (Sections 2.2 to 2.4)
- What the constraints are (Sections 2.2 to 2.4 and Section 3)
- Examples of impact on persons of concern and on UNHCR and Implementing Partners as well as examples of good practice to be built on to support others (Annex 2)
- Next steps (Part 4).

Part 2. Global and Regional Trends in UNHCR Operations

2.1 Overall Organisational Achievement of Accountability Actions

2.1.1 2011 – 2012 Submission Rates

- The global submission rate for 2011- 2012 was 95%. It was 100% at Headquarters and 94% at field level².
- The MENA, Americas, Asia and Europe Bureau had a 100% submission rate. In Africa 21 out of 28 Representatives submitted.

2.1.2 Organisational Achievement Rates

31% of representatives are in the Africa region, 10% in the Americas, 19% in Asia and Pacific region, 27% in Europe region and 13% in MENA region.

76% of Operations are Non-Advocacy Based.

Angola, Botswana, Djibouti, Ethiopia, Guinea, and Rwanda did not submit accountability frameworks for 2011-2012. Guinea did not submit a framework in 2010-2011 or in 2009-2010.

Chart1: % AGD Organisational Achievement Rates 2009 - 2011

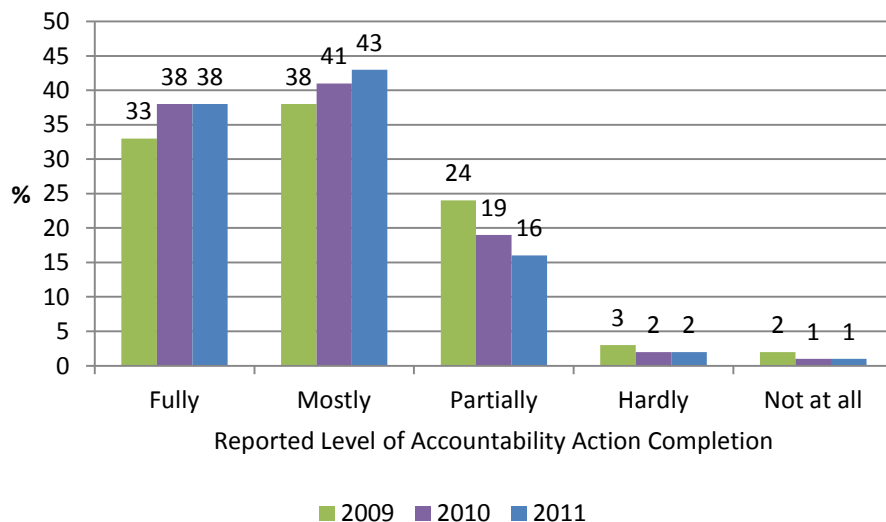


Chart 1 illustrates overall organisational achievement. This brings together the data for headquarters, advocacy based and non advocacy based operations. It reveals a visible increase in performance over time with an increase in both 'fully' and 'mostly' completed over the last three years, and a corresponding decrease in reporting of 'partially', 'hardly' and 'not at all' completed. This indicates that the efforts made by UNHCR staff to integrate the AGD approach are paying off, should be rewarded and

should continue³.

2.2 UNHCR's Strengths and Weaknesses in Mainstreaming AGD and Targeted Actions: Non Advocacy Based Operations

2.2.1 Performance analysis: 2011-2012

Chart 2 below shows overall achievement rates with the 20 accountability actions, per region and globally. Actions are rated by Representatives as being 'fully', 'mostly', 'partially', 'hardly' and 'not at all' achieved and are given as a percentage of total accountability actions.

² 105 UNHCR operations have a Representative or Regional Representative and are expected to engage in the Accountability Framework exercise. Representatives in post for less than 6 months are given exemption. This year, 9 exemptions were granted. 96 submissions were therefore expected. 90 submissions were received. Kenya, Korea, Saudi Arabia, Zambia and Zimbabwe's frameworks were received after the statistical analysis was completed. They are included as a submission but the data is not included in the statistical analysis presented here.

³ An enhanced weighting system was used for this year's calculation of overall organisational performance. This provides a more balanced weighting of data between regions, between advocacy and non advocacy operations, and HQ. The figures quoted here for previous years have been re-weighted from the original raw data for a consistent comparison.

Chart 2: Achievement of accountability actions by Representatives of non advocacy based operations

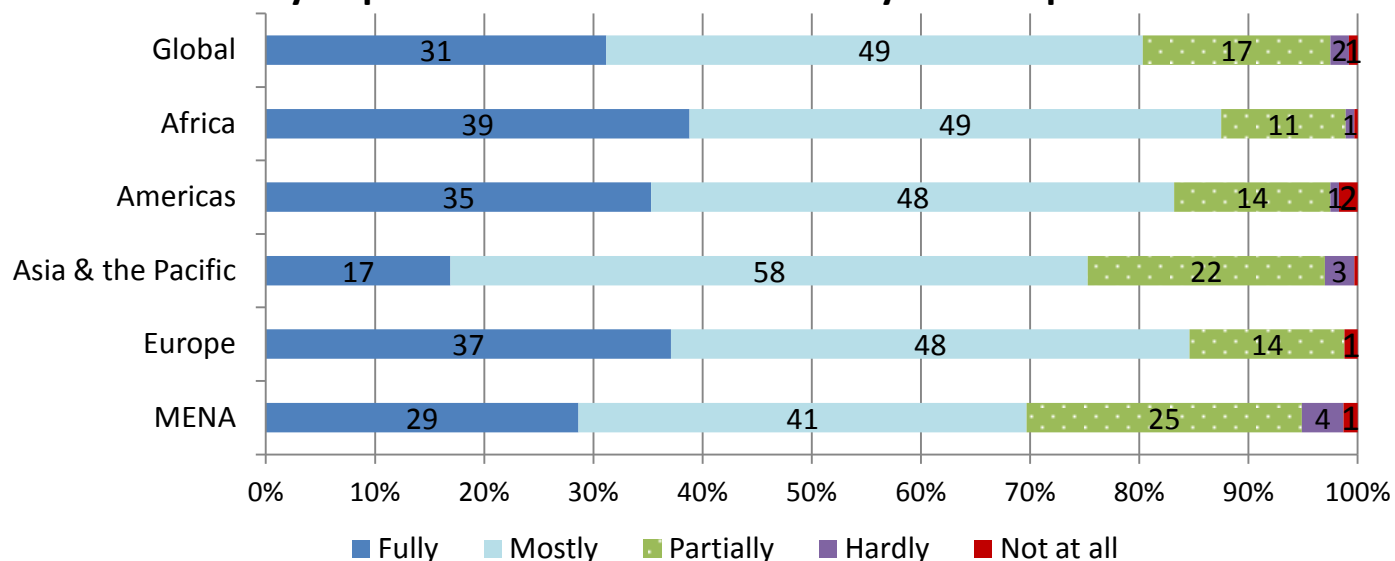


Chart 3 below, breaks down achievement of individual accountability actions. It shows that-

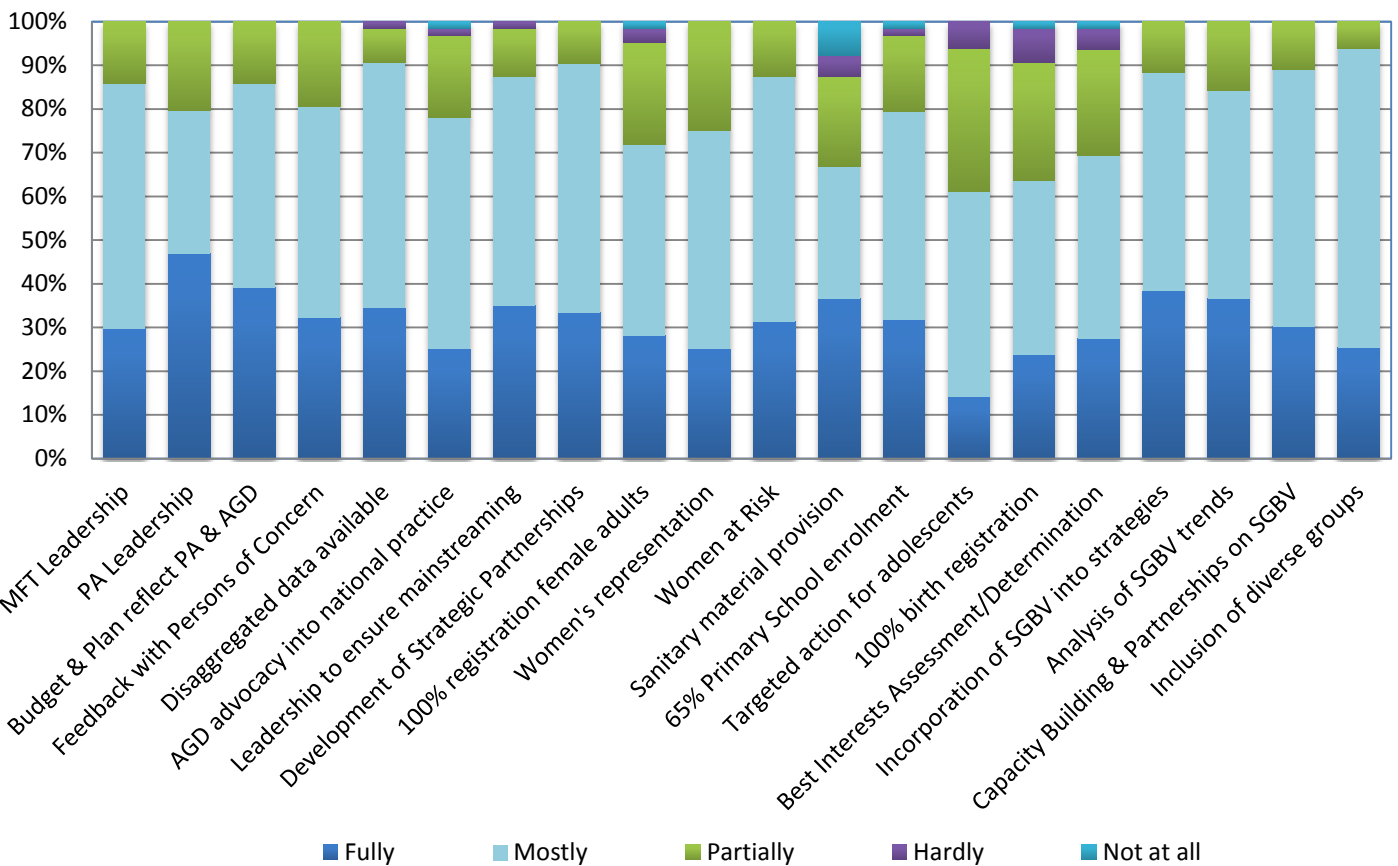
Highest reported rates of full achievement relate to:

- Leadership of the participatory assessment (PA) exercise (47% of Representatives reported ‘full’ achievement)
- Budgeting and planning reflect participatory assessment and age, gender and diversity analysis (39% reported ‘full’ achievement)
- Incorporation of SGBV activities into operation’s comprehensive protection strategy reflecting a multi-sectoral, AGD approach to prevention and response (38% reported relevant actions as being ‘fully’ achieved).

Lowest reported rates of full achievement relate to:

- Targeted actions for adolescents (14% reported ‘full’ achievement)
- 100% Birth Registration (24% reported ‘full’ achievement)
- Women’s Representation (25% reported ‘full’ achievement)
- Incorporating AGD Advocacy into National Practice (25% reported ‘full’ achievement)
- Active promotion and inclusion of diverse groups at all stages of UNHCR’s operational cycle (25% reported ‘full’ achievement).

Chart 3: Achievement level by accountability action



Annex 2.1 provides a more detailed breakdown of Chart 3 above.

The 20 actions highlighted above fall within four categories within the accountability frameworks. These are:

- Integration of the AGD approach within all office activities
- Targeted actions to enhance the protection of women and girls with specific needs
- Targeted actions to enhance the protection of children and
- Targeted actions to enhance the protection of other persons with specific needs.

The statistics for each category show the following:

- 85% of non-advocacy based operations were able to report that they can fully or mostly comply with accountability actions relating to integrating the AGD approach
- 75% are able to fully or mostly complete actions relating to the enhanced protection of women and girls with specific needs
- 68% are able to fully or mostly complete actions relating to the enhanced protection of children with specific needs
- 89% are able to fully or mostly complete actions relating to the enhanced protection of other persons with specific needs, as laid down in UNHCR's Age, Gender and Diversity Policy. This includes persons affected by and at risk of SGBV.

This reveals that staff and partners face the greatest challenges in meeting commitments to the enhanced protection of children. The internal and external challenges that staff face are highlighted in Section 2.2 below.

Reporting of full completion with accountability actions differs significantly by region⁴:

- **Africa Bureau has the highest levels of full completion of actions overall, in both AGD integration (47% reported full achievement, up from 43% in 2010-2011) and enhanced protection of other persons with specific needs, as laid down in UNHCR's Age, Gender and Diversity Policy (44%, up from 29% in 2010-2011).** Their lowest area of performance was with **actions to enhance the protection of children (17%, down from 18% in 2010-2011).**

Overall, the Africa Bureau improved 18% in total across all sections of the framework compared to 2010-2011. It is important to note, however, that Africa Bureau had a disproportionately low submission rate of 68% at the time of analysis. It is therefore possible that the sample is biased towards those representatives most committed to the AGD approach.

- **Europe reported the highest overall rate of enhanced protection of children (42%, up from 40% in 2010-2011) and the active promotion and inclusion of diverse groups, as laid down in the AGD Policy, at all stages of the operational cycle** was also high (42%, up from 37% in 2010-2011). Their lowest reported achievement was with **the enhanced protection of women and girls with specific needs (25%, down from 43% in 2010-2011, 60% in 2009-2010).** It was this last category that was mainly responsible for a 16% overall drop in Europe's reported rates of full achievement totaled across all sections of the framework.
- **Americas Bureau reported the highest levels of full completion of actions related to the enhanced protection of women and girls (44%, up from 38% in 2010-2011) and also scored well for AGD integration (35%, up from 25% in 2010-2011).** Their lowest area of full completion of actions was in **the active promotion and inclusion of diverse groups, as laid down in the AGD Policy, at all stages of the operational cycle (29%, compared with 13% in 2010-2011).**

The Americas Bureau showed the greatest improvement over the previous year – the percentage gains across all of the sections of the framework totaled 34% and they were the only Bureau to show an improvement in every section.

- **MENA Bureau showed a 7% total improvement in reporting full completion of actions in 2010-2011 and was consistently average across all sections of the framework (averaging 28% full completion of accountability actions).** Their highest area of full achievement was in **the active promotion and inclusion of diverse groups, as laid down in the AGD Policy, at all stages of the operational cycle (31%, up from 25% in 2010-2011)** and the lowest was in the **enhanced protection of children (24%, down from 26% in 2010-2011).**
- **Asia and the Pacific Bureau reported the lowest levels of full completion of actions overall, performing highest in integration of the AGD approach (19%, down from 29% in 2010-2011), and lowest in the active promotion and inclusion of diverse groups, as laid down in the AGD Policy, at all stages of the operational cycle (12%, down from 25% in 2010-2011).**

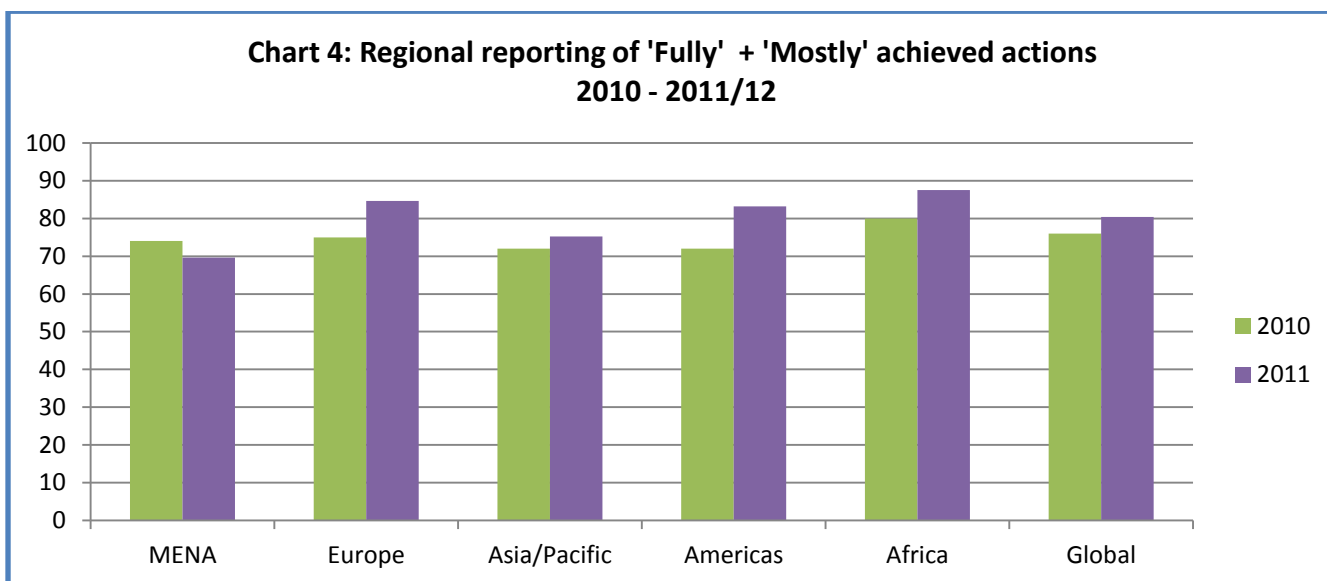
Follow-up discussions with Bureau raised the question of how different Representatives rank their own performance. This and other concerns around the subjective nature of the ranking process indicates the need for additional guidance on exactly what UNHCR expects from someone who ticks 'fully' - a process which is currently underway.

Combining actions 'fully' completed with actions 'mostly' completed shows overall improvement in all regions but one

When the responses for both "fully" and "mostly" are added together another picture emerges. All regions, with the exception of MENA, show an increase in performance compared with last year. This finding should be analysed in the light of the upheaval in the MENA region which curtailed, in some cases, UNHCR's ability to deliver services due to security issues, office closures, lack of government or change of government structures and large influxes of new populations of concern.

⁴Weighted averages have been used in order to compensate for the different number of countries in each region.

Section 2.2.4 provides a three year trends analysis for performance across individual actions.



2.2.2 Constraints

Constraints to full implementation of accountability actions are ranked in a similar order to previous years. The exception was lack of human resources, which has gone down significantly as a constraint.

Chart 5 below shows that the primary constraints reported are:

- **Socio-cultural obstacles:** cited by 61% of representatives as being constraints to full achievement (last year cited by 64% and cited by 78% in 2009-2010)
- **Lack of access to/ dispersion of persons of concern:** cited by 56% of Representatives (down from 63% in 2010-2011 and 64% in 2009-2010)
- **Lack of resources (staffing)** which includes both numbers and staff capacity, was cited by 51% of Representatives this year, compared with 64% last year and 75% in 2009-2010
- **Lack of financial resources** was cited by 50% of representatives as a constraint to achievement, down from 61% last year.

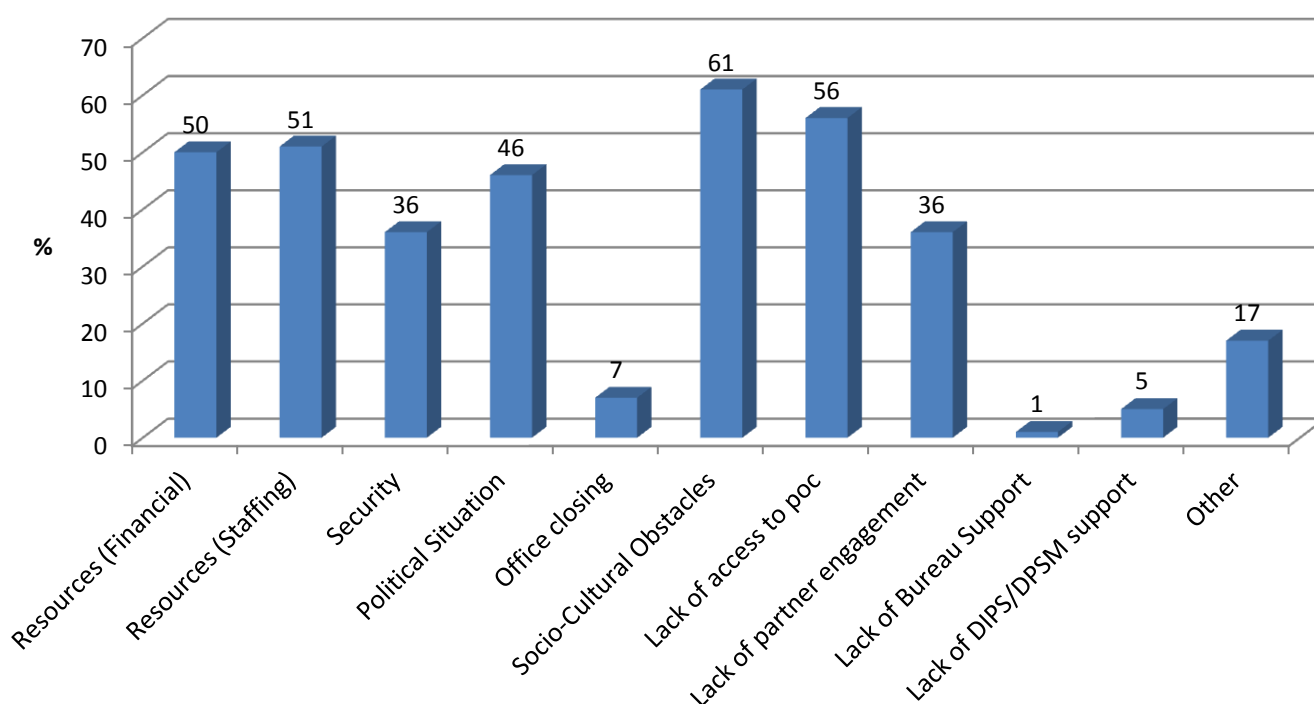
Interestingly, as in previous years, the **number of Representatives checking constraints has gone down**. It could be suggested that as Representatives and their teams are becoming accustomed to the AGD approach, they are finding creative ways to overcome constraints. Analysis of the increasing number of good practices being cited in the Accountability Frameworks and documented in Annex 2.3 and 2.4 would certainly support this hypothesis.

The ranking given to constraints differs depending on which actions are being referred to:

- Lack of access to/ dispersion of persons of concern was the biggest constraint for actions relating to AGD integration (cited by 67% of representatives).
- Socio-cultural obstacles were the most significant constraint to implementation of targeted actions for the enhanced protection of women with specific needs (cited by 70% of representatives, up from 58% last year).
- The biggest constraint to implementation of targeted actions for the enhanced protection of children was lack of financial resources (55%, which was up from 47% last year).
- The greatest constraints to the enhanced protection of other persons with specific needs were socio-cultural obstacles (67%).

This gives UNHCR helpful information for addressing gaps in compliance with different actions.

Chart 5: Constraints for non advocacy based operations



The majority of examples given under ‘Other’ were context specific. The reader is thus urged to read individual submissions for further details⁵. Two recurrent constraints did appear, however: difficulties obtaining disaggregated data and lack of adequate legal infrastructure to promote the AGD approach in-country.

2.2.3 Regional Comparison of Constraints

Prioritization of constraints differed substantially by region, suggesting that the support needs of regional operations may be quite distinct.

- Africa:** *Lack of staffing* is once again the most cited constraint (61% of representatives in Africa, compared with 77% last year). *Lack of access to/ dispersion of persons of concern* (61%) and *socio-cultural obstacles* (59%, previously 62%) were also most frequently cited. This takes *lack of Financial resources* (now 57%, previously 72%) out of the top three.
- Americas:** *Lack of access to/ dispersion of persons of concern* remains the primary constraint to full achievement in the region (cited by 79% of representatives compared to 86% in 2010-2011), followed by *lack of financial resources* (62%) and *Security* concerns (50%). This differs from last year where *lack of partner engagement* (cited by 66% of representatives, now 46%) and *lack of staffing* (cited by 100% of representatives last year and 42% this year) were the primary constraints.
- Asia & Pacific:** *Socio-cultural obstacles* (72% again, as per 2010-2011) took the lead from *Political situation* (68%, previously 73%). *Lack of financial resources* (57% of representatives down from 67% last year) remained the third most cited constraint.
- Europe:** *Socio-cultural obstacles* was again the primary constraint (cited by 67% of representatives, up from 62% in 2010-2011, 86% in 2009-2010). *Lack of resources (staffing)* was cited by 48% of Representatives, up from 45% in 2009-2010. *Lack of financial resources* was cited by 44% of representatives, down from 49% in 2010-2011.
- MENA:** MENA showed a different priority of constraints this year with *Political Situation* most cited (67%) and *lack of access to communities of concern/ dispersal of persons of concern* remaining in second place (cited by 62% of representatives compared to 64% in 2010-2011). *Security* moved up into third place (58%). Last year *Socio cultural obstacles* was the primary constraint in the region (cited by 68% of Representatives, now 52%) with *lack of staffing* in third place (cited by 61% of representatives, dropping to 38% this year).

⁵ These are available upon request from the Bureau or from DIP.

2.2.4 Trends analysis on 'full' achievement of individual actions from 2009-2010 to 2011-2012

Comparing the data over the past three years⁶ shows a revealing and mixed picture. As Chart 6 below shows, the downward trend reported in previous Global Analyses relating to 'fully' completed actions appears to have been reversed for some actions but has continued for others.

There appears to have been progress with regard to:

- Capacity Building & Partnerships on SGBV (up 14%)
- Analysis of SGBV trends (up 6%)
- Feedback with Persons of Concern (up 5%)
- Active promotion and inclusion of diverse groups at all stages of UNHCR's operational cycle (up 3%)
- Best Interests Assessment/Determination (up 1% this year, building on the 7% increase in 2009-2010).

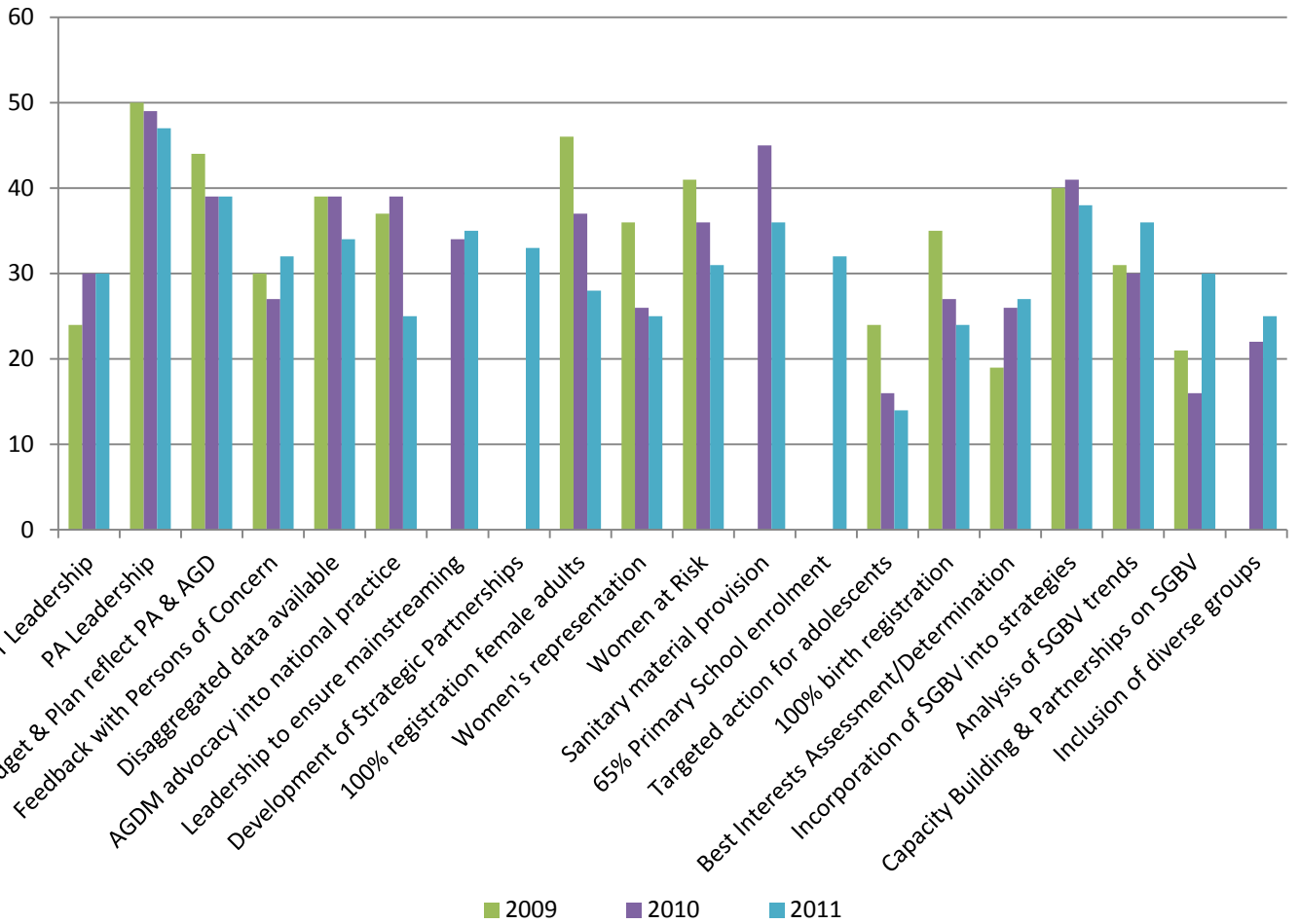
It is helpful to note that SGBV and Best Interests Assessment/Determination are areas where there has been concerted effort by UNHCR to enhance performance.

A decline in 5% or more in reported rates of 'full' achievement compared with 2010-2011 can be seen in actions relating to:

- Integrating AGD advocacy into national practice (down 14%)
- Sanitary material provision (down 9%)
- 100% registration of female adults (down 9%)
- Disaggregated data available (down 5%)
- Follow up on Women at Risk (down 5%, also fell 5% previous year)

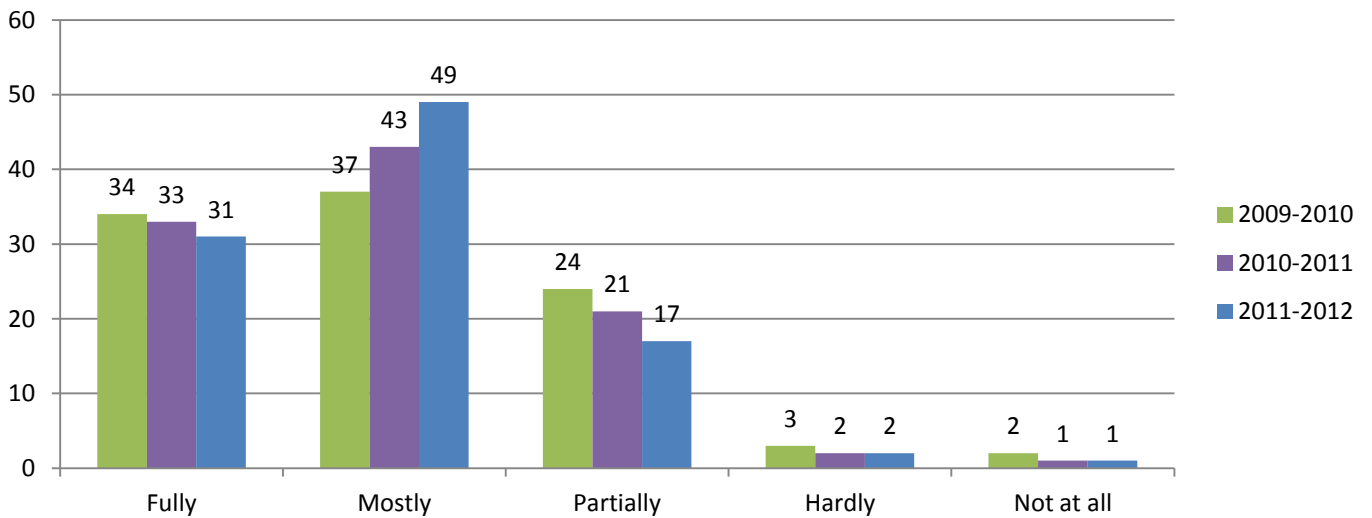
⁶ Prior to 2009, a three point scale was used. It is possible that moving to a five point scale affected the comparability of results so for accuracy purposes, comparison is since 2009.

Chart 6: Comparison between 2009 - 2011/12 on full achievement rates for required actions



Taking a different lens to analyse the data shows another picture. Comparing the ratings that Representatives have given themselves over the years shows us an **overall increase in reporting of 'mostly' completed, alongside a decrease in reporting of 'full' and 'partial' completion.** This movement is shown in Chart 7 below:

Chart 7: Comparison of Representatives' Responses 2009 - 2012



2.2.5 Performance analysis: Actions ‘fully’ and ‘mostly’ completed 2011-2012

Each year, more responses fall into the ‘mostly’ category. It is therefore important this year to provide additional analysis to include that response in this report.

Highest reported rates of ‘fully’ and ‘mostly’ completed actions relate to:

- **Active promotion and inclusion of diverse groups, as laid down in the AGD Policy, at all stages of the operational cycle** (94% reported ‘fully’ or ‘mostly’ complied, with 68% reporting ‘mostly’)
- **Disaggregated data available and analysed** (91% reported ‘fully’ or ‘mostly’ complied)
- **Development of Strategic Partnerships to ensure needs and rights of individuals with specific needs are met** (90% reported relevant actions as being ‘fully’ or ‘mostly’ achieved).

It is interesting to note that while leadership of the participatory assessment exercise was the action most reported to be ‘fully’ completed, when the ‘mostly’ category is added it drops to 12th place.

Lowest reported rates of ‘fully’ and ‘mostly’ achieved relate to:

- Targeted actions for adolescents (61% reported ‘full’ or ‘mostly’ achievement)
- 100% Birth Registration (64% reported ‘full’ or ‘mostly’ achievement)
- Sanitary material provision (67% reported ‘full’ or ‘mostly’ achievement).

2.2.5 Trends analysis: Actions ‘fully’ and ‘mostly’ achieved 2009-2010 to 2011-2012

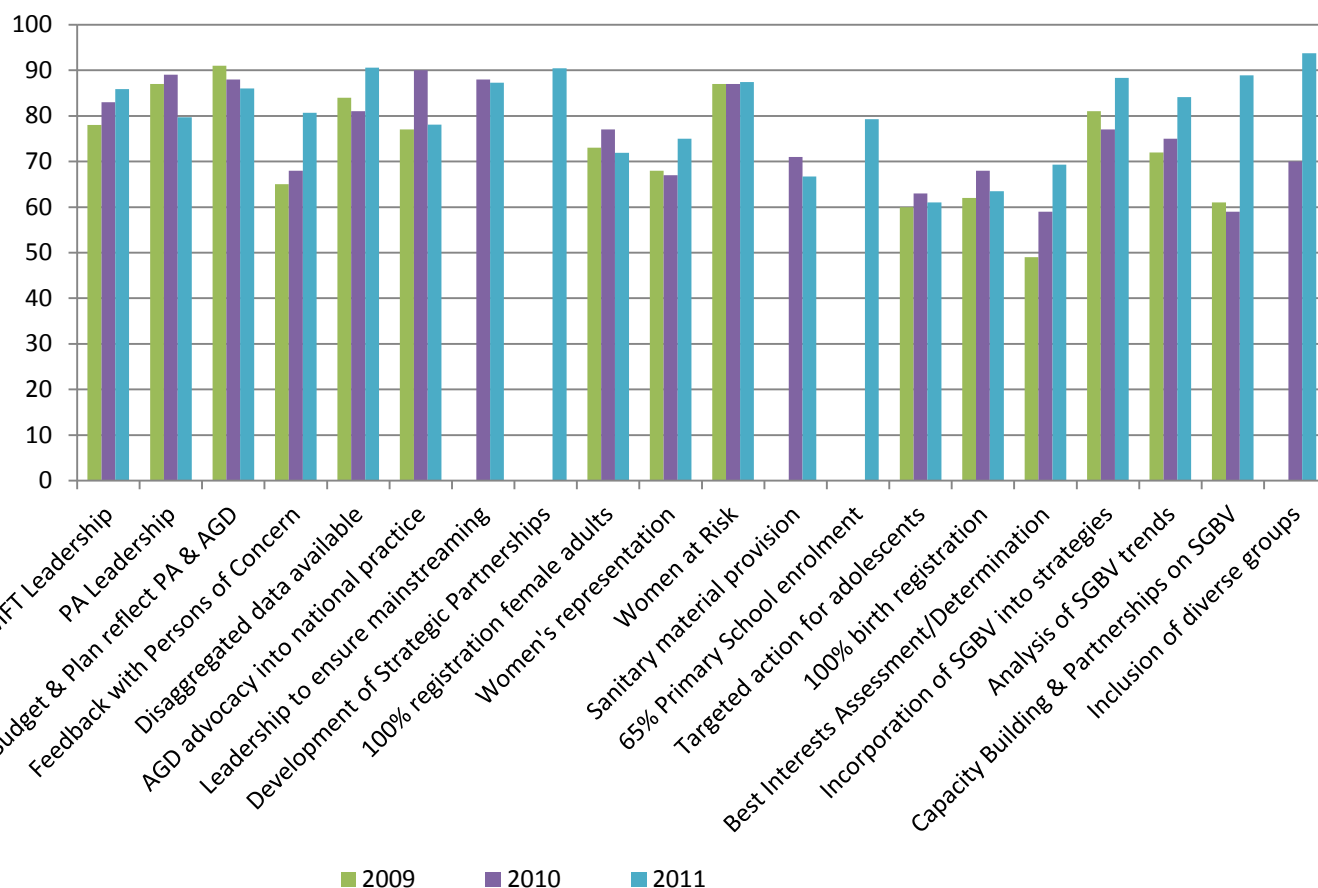
Chart 8 below shows a year on year comparison for each action where respondents have either selected “fully” or “mostly”. There appears to have been progress with regard to:

- Capacity Building and Partnerships on SGBV (up 30%)
- Active promotion and inclusion of diverse groups, as laid down in the AGD Policy, at all stages of the operational cycle (up 24%)
- Feedback with Persons of Concern (up 13%)
- Incorporation of SGBV activities into operation’s comprehensive protection strategy reflecting a multi-sectoral, AGD approach to prevention and response (up 11%)
- Disaggregated data available and used (up 10%)
- Best Interests Assessment/Determination (up 10% this year, building on the 10% increase already seen in 2009-2010).

A decline in 5% or more in reported rates of ‘full’ + ‘mostly’ achieved compared with 2010-2011 can be seen in actions relating to:

- Integrating AGD advocacy into national practice (down 12%)
- Participatory assessment leadership (down 9%)
- 100% registration female adults (down 5%).

**Chart 8: Comparison between 2009 - 2011/12
on 'fully' + 'mostly' achieved**



2.3 Strengths and Weaknesses in the Integration of UNHCR's AGD Approach, including Targeted Actions: Advocacy Based Operations

22 advocacy based operations were required to submit accountability frameworks⁷. As some operations fall between being strictly advocacy based and strictly non advocacy based, advocacy based operations were also given the option of considering themselves as **mixed operational- advocacy based operations**. Of the 22 'advocacy based' operations, eleven operations considered themselves to be mixed operational- advocacy based operations. These were Armenia, Australia, Bulgaria, Croatia, Israel, Mexico, Papua New Guinea, Romania, Regional Representation in Washington, Strasbourg and Switzerland.

Advocacy based operations are required to meet five accountability framework actions, tailored to their advocacy driven contexts. Mixed operational- advocacy based operations were given an additional three accountability actions to reflect the fact that they engage in day to day, direct work with persons of concern.

66% of advocacy based operations reported 'full' completion of accountability actions, with an additional 25% reporting actions as being 'mostly' completed. This is a significant improvement upon last year, when 50% reported 'full' achievement. The additional actions for mixed operational- advocacy based operations were 42% 'fully' met and 36% 'mostly' met.

The actions that were most successfully achieved by participating Representatives in 2011 – 2012 were:

- **AGD analysis in awareness raising and mobilisation activities:** Reported by 16 out of 21 of representatives as being 'fully' achieved. Progress in this action must be noted. Last year, this action achieved one of the lowest levels of achievement, with only 7 out of 17 representatives reporting 'full' achievement.

⁷ Canada was given exemption due to the Representative being in post for less than 6 months.

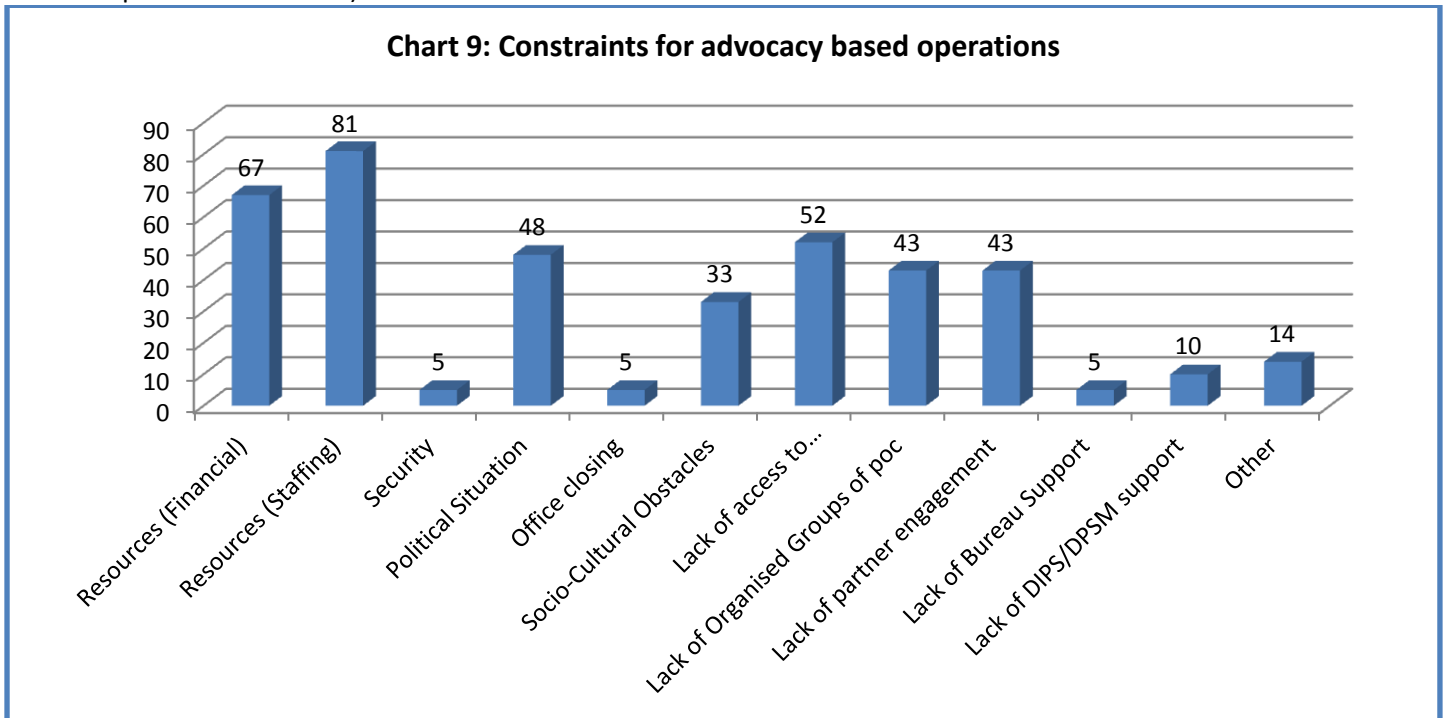
- **External AGD leadership:** Reported by 15 out of 21 of representatives as being 'fully' achieved.

The lowest levels of 'full' achievement relate to

- **Specific needs of different groups of persons of concern addressed through development of targeted actions.** Reported by 4 out of 11 Mixed Operation representatives as being 'fully' achieved
- **Participatory assessment leadership.** Reported by 4 out of 11 mixed operational- advocacy based operations representatives as being 'fully' achieved.

Constraints

Chart 9 below shows that, as in the last two years, the primary overall constraint to full achievement with accountability actions in advocacy based operations relates to lack of adequate staffing, with 81% of Representatives (88% in 2010-2011) citing lack of resources (staffing) as a constraint to compliance. This referred to adequate capacity and not just numbers. The second highest constraint was lack of financial resources (in 2010 -11 it was access to persons of concern).



Constraints cited under 'other' were inadequate data and lack of appropriate government structures and systems.

2.4 Examples of Impact on the Lives of Persons of Concern

Annex 2 provides a lengthy table which highlights the impact of the AGD Approach on organizational processes (UNHCR and partners') as well as on the lives of persons of concern. The examples have been provided by Representatives and there is not the scope within the development of this report to substantiate or obtain additional details for the examples given. However, now that AGD processes are being integrated into ways of working, the organization is exploring the impact of these processes on the lives of persons of concern. It is therefore timely to flag up some examples in the main body of this report and refer the reader to Annex 2.4, while noting that further discussion is needed in-house about measuring and reporting on AGD Impact.

Mozambique: Protection gaps identified in participatory assessment and addressed include construction of 22 structures in the Transit Centres of Somalis and Ethiopians, construction of 33 houses and procurement of construction materials for 127 houses for new arrivals to decongest the Transit Centres, construction of latrines in the Transit Centres, Maratane Primary School and former French Schools, market, new site and in the zones, Construction of isolation ward within the Health Centre to accommodate in-patients, improvement of hygiene and water system as well as drilling of four extra boreholes to decongest the existing water points, construction of teacher's houses to curb lateness and absenteeism of teachers, rehabilitation of former French school and increment of food basket from 11 kgs of maize flour to 12.5 Kgs.

Islamic Republic of Iran: The health insurance scheme (HISE) for refugees was initiated as a result of, and in accordance with participatory assessments carried out in 2009. HISE complements UNHCR's existing health interventions in Iran which consists of providing support to the Ministry of Health to ensure refugees benefit from free primary health care (including vaccination, antenatal care, family planning, TB, Malaria etc.). As of Oct 2011, over 200,000 refugees have had access to HISE. UNHCR Iran has established a case management team to ensure that complex individual cases are examined and followed up appropriately. The team has especially been instrumental in ensuring a multi-sectoral approach.

Benin: 100% adult refugee women were registered and received individual documentation. In urban areas, 100% women and girls of reproductive age received sanitary materials. 100% surviving victims of SGBV who were identified received the required assistance, including legal assistance for prosecution of identified authors of the violence.

Regional Representation in Dakar: In each operation, all female adults were given the necessary attention with regard to Registration and Documentation. Lobbying was also done with Government of Senegal for the issuance of ID cards including to female adults, one of the main protection concerns raised by female refugees during various participatory assessment exercises. The signed MOU with Government has allowed registration and documentation of all Persons of Concern in Senegal: 1805 refugees from age 5 up have been issued ID cards since 31 December 2011 and distribution is on-going.

Namibia: Based on participatory assessment and discussions on teenage pregnancy, the Youth Centre was expanded to accommodate recreation activities that were recommended as a solution to teenage pregnancy. This was aimed at engaging young people.

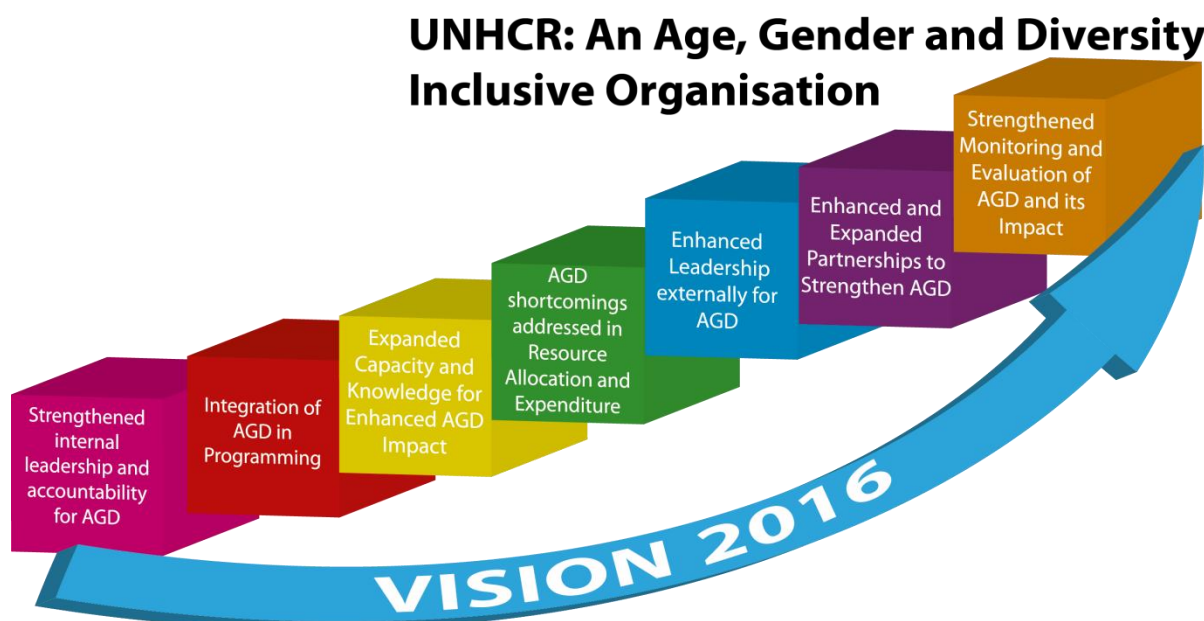
Benin: 100% of identified survivors of SGBV cases were assisted medically, materially and legally. Between 2010 and 2011, the number of SGBV cases were reduced to less than one third thanks to an aggressive all inclusive and on-going sensitization campaign strategy

Ecuador: Since 2010, UNHCR works with a Standard Operating Procedure on individual case management system for cases with specific protection needs, including victims of SGBV. These procedures have allowed us to: a) give an adequate response to those cases, b) have a better coordination between the relevant local actors. In 2011 we have identified 114 victims / survivors of SGBV who were assisted.

Mozambique: All the three participatory assessments conducted in 2011 incorporated focus group discussions with older persons and women and men, girls and boys with disabilities of all ages. Most of the identified needs were incorporated into the 2011 Country Operating Plan. These included provision of crutches, special shoes, wheel chairs, mattresses, clothes and other household items. The food basket of the vulnerable was increased from 10kgs of maize meal to 12.5kg per month. Most houses of the elderly were either rehabilitated or reconstructed.

Namibia: A total of 133 persons with disabilities (42 females and 91 males) were registered during the year, and received training on how to manage their disabilities. A group of persons with disabilities in the settlement is organized and have joined the National Association of Persons with Disabilities to benefit from information sharing and support. The persons with disabilities are organized and have joined the National Association of persons with Disabilities. All the 119 (66 female and 53 males) older persons were assisted with extra blankets and jerry cans during the year.

Part 3: Implementation of AGD Commitments by Senior Managers at Headquarters



UNHCR's 'Vision 2016' (above) and accompanying Forward Plan lay down **seven strategic results to be achieved between 2011 and 2016**. The seven strategic results are:

- Strengthened internal leadership and accountability for AGD
- Integration of AGD in Programming
- Expanded Capacity and Knowledge for Enhanced AGD Impact
- AGD shortcomings addressed in Resource Allocation and Expenditure
- Enhanced Leadership externally for AGD
- Enhanced and Expanded Partnerships to Strengthen AGD
- Strengthened Monitoring and Evaluation of AGD and its Impact.

These Strategic Results have been built into the Accountability Frameworks of senior managers at HQ. The Global Analysis will provide an annual update on progress in meeting these Results. This section explores some of the initial actions taken by senior managers to contribute to their commitments in achieving the seven strategic results.

15 senior managers, including the High Commissioner, were required to complete tailored accountability frameworks, based on the Forward Plan and the specificity of their functions⁸. All submitted frameworks⁹. The Director of the Division of Programme Support and Management was exempt due to having been in post for less than 6 months. The information provided does not therefore reflect the totality of work undertaken by this Division.

In 2011-2012, 25% of the total number of personalised accountability actions were reported as being 'fully' achieved, 50% 'mostly' achieved, 23% 'partially' achieved and 2% 'hardly' achieved. No actions were reported as being 'not at all' achieved. This is a decrease in 'fully' achieved compared with last year (42%) and an increase in 'mostly' (34%) and 'partially' (19%) achieved. This statistical finding should be assessed alongside the table below which provides a qualitative assessment of performance and indicates a strong improvement in AGD performance compared with last year. This may indicate that as senior managers become familiar with the approach and its wide ranging implications they become more self-critical.

⁸ These were all Bureau Directors, Director of the Division of International Protection, Director of the Division of Emergency, Security and Supply, Director of the Division of External Relations, Director of the Policy Development and Evaluation Service, Director of the Division of Human Resources Management, Inspector General, Assistant High Commissioner -Protection, Assistant High Commissioner- Operations, Deputy High Commissioner and High Commissioner.

⁹ One submission was received after the statistical analysis was completed. The statistical data is therefore based on 14 submissions and not 15. However, the narrative elements from the submission are included in the narrative text in this section.

Strategic Result 1: Strengthened internal leadership and accountability for UNHCR's AGD approach

All staff are accountable for implementing the organisation's AGD commitments. Senior managers are accountable for progress in attaining minimum standards and results in a transparent manner through UNHCR's existing accountability framework and through the career management system. Accountability mechanisms towards persons of concern are in place.

Outcome	Actions Taken at HQ March 2011-March 2012
<p>1.1 UNHCR leadership maintains profile of AGD as key policy priority, regularly promoting and tracking organisational progress in implementation</p>	<ul style="list-style-type: none"> UNHCR developed an AGD Policy in June 2011, which was followed by a five year AGD Forward Plan. Both documents were shared widely, including at June Standing Committee. In the fourth quarter of the year the first AGD "champions" meeting was convened, chaired by DIP.
	<ul style="list-style-type: none"> An extended Assistant High Commissioners- Directors meeting was called on 5th May 2011 to review progress on implementation of the AGD Policy, through analysis of senior managers' AGD Accountability Frameworks. Minutes were shared. The meeting was used as an opportunity by the Assistant High Commissioners to reinforce the importance that UNHCR gives to the AGD approach and as a reminder of the need to comply with accountability actions. Directors were requested to pay special attention to AGD issues during their field visits and to reinforce the integration of the AGD approach.
	<ul style="list-style-type: none"> During the Annual Programme Review, the Assistant High Commissioner (Protection), the Assistant High Commissioner (Operations) and the Deputy High Commissioner discussed AGD accountabilities with Directors as a central part of programme planning.
	<ul style="list-style-type: none"> The Assistant High Commissioner (Protection) led a process to ensure that a participatory approach was taken to the commemorations of the 60th anniversary of the 1951 Convention and the 50th anniversary of the 1961 Statelessness Convention, enabling the voice of refugees and stateless persons specifically to be present and heard. She was instrumental in the elaboration and overseeing of a year long process, in a number of countries, of Dialogues with Refugee Women, to bring out their concerns, aspirations and expectations. She participated directly in the Zambia Dialogue and chaired in Geneva a major international consultation with some of the women participants, globally spread, so that they could speak directly to the conclusions and recommendations of the Dialogues to the Standing Committee.
	<ul style="list-style-type: none"> The Assistant High Commissioner (Protection) and the Assistant High Commissioner (Operations) have met with women and girls' representatives and followed up on the issues they raised during field missions.
	<ul style="list-style-type: none"> The Assistant High Commissioner (Operations) requests briefing on programme activities targeting individuals with specific needs when on mission in order to give message to the staff that AGD is a priority.
	<ul style="list-style-type: none"> The Deputy High Commissioner presents an 'Excellence in Field Service'. In 2011, the award was for gender related performance. In 2012, it would be helpful to have an AGD related team award.
	<ul style="list-style-type: none"> The Inspector General has been working closely with the Troika in order to revitalise the overall organisational accountability framework, which in turn will better ensure that participatory assessment and planning takes place systematically and regularly, as part of UNHCR's primary accountability, which is to the populations of concern.
	<ul style="list-style-type: none"> The Director of DIP personally reviews all substantive DIP products, from policy papers to guidance notes to the revision of core protection manuals and tools. In the process he systematically ensures that an AGD perspective is included, as appropriate, in all of these. This leadership enhances quality but also has the effect of bringing disparate elements of the DIP team together around AGD themes.

	<ul style="list-style-type: none"> • The Office of the Inspector General acquired an on-line tracking system (using the I-Sight software) that has facilitated the handling of complaints, particularly those lodged by persons of concern (including persons with specific needs). The Inspector General insists on and has succeeded in ensuring that complaints lodged by persons of concern are prioritised, tracked and followed up on, with feedback provided to the complainant. <p>Under the leadership of the Bureau Director for the Asia and Pacific region, the Bureau has met its AGD Forward Plan commitments for the year. Notably, the Bureau has:</p> <ul style="list-style-type: none"> • Produced reports on Participatory Assessments from China and Kyrgyzstan. • Produced reports on Best Practices of Community Outreach Initiatives in Urban Environments. Reports from Malaysia and India have been completed. • The Bureau Director provides important leadership: encouraging field staff to undertake analysis and identify gaps based on the Standards and Indicators Report data throughout the year. He encourages desks to reflect on the inclusion of AGD in planning, monitoring and in the evaluation of field work and has maintained the AGD focal point system within the Bureau to encourage information exchange and best practices. He also ensures that AGD is a governing component of the Country Operations Plan review process. He ensures that AGD compliance is systematically addressed, by all Bureau staff, including himself, when on mission to the field. • The Bureau Director has initiated a review on the findings from the Accountability Frameworks reported on by the Representatives which show a downward trend in comparison to previous years globally and regionally. This is meant to assist the operations in addressing the key issues for future planning and in preparation for the Annual Programme Review. • AGD is a central component in strategies and policy making in the Asia and Pacific region: for example, in concrete country strategies such as the Community Based Development Programme (CBDP) in Nepal seeking to address and end a protracted refugee situation, also Refugee Affected and Hosting Areas programme in Pakistan. Furthermore, AGD is also applied in the broader regional strategies: Solutions Strategy for the Afghan Situation and the regional processes in Almaty and Bali. In the Bali Process, being the most developed of the two regional processes with a Regional Cooperation Framework covering refugee protection and international migration, AGD is a key analytical and assistance tool for the protection issues arising in mixed migration. • The Bureau Director has promoted AGD in advocacy and protection activities. For example, in the area of detention of persons of concern: advocacy across the region (release of women, children and other vulnerable persons), supporting alternatives to detention (community centres in Indonesia and Australia), and, the implementation of the major undertaking of the Health Insurance Scheme for Afghan and Iraqi refugees in Iran (health cards for all family members providing access to health and acting as an additional tool of protection). • Accountability to persons of concern: The Bureau Director ensures that persons of concern feature in Bureau presentations internally and externally (APR, bilaterals, fact sheets, etc.) and has requested all Representatives in the region to review the individual complaint mechanism for persons of concern, this is work in progress. This issue was also brought into the Representatives' meeting in February 2012 with the participation of the IGO. <ul style="list-style-type: none"> • There has been a strong focus on integrating the AGD approach in the Europe Bureau. This has become evident with a better achievement rate in Europe's advocacy operations and an improved quality of the responses in the accountability frameworks of the Representatives. As compared to 2010, full achievement in terms of AGD leadership in advocacy operations has almost doubled (from 56% to 90%). Inclusion of AGD analysis in awareness raising and mobilization as well as all office planning activities was very high and reached 90% of achievement. Non-advocacy based operations demonstrated progress in participatory assessment leadership, feedback with persons of concern, incorporation of SGBV into strategies, analysis of SGBV and capacity building and partnerships on SGBV as well as improved indicators for best interest assessments and determination with UASC. Continued challenges remain with disaggregated data, provision of sanitary material and specific needs of adolescent girls. These challenges are partially explained by UNHCR's increasing shift from an operational towards an advocacy actor with decreasing budgets in Eastern and South Eastern Europe. They are also linked to the challenging environment (xenophobia, racism, financial crisis) in this region.
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	<ul style="list-style-type: none"> • The Europe Bureau produces an annual assessment of the AGD Accountability Framework, following up on gaps and providing outreach to country operations. The Director also follows up personally with Representatives to ensure completion of the annual accountability framework. • The Europe Bureau Director ensures that all his major field missions are accompanied by visits to reception centres for asylum-seekers, integration projects and other sites where direct contact with persons of concern is possible. In discussions with counterparts, special attention is given to AGD at all stages of the process. • AGD has been integrated in the strategic planning process and is reflected clearly in strategic priorities (see Bureau for Europe- Strategic Directions for 2012 and Beyond). <p>Under the leadership of the Bureau Director for the Americas, the Bureau has:</p> <ul style="list-style-type: none"> • Prepared a Forward Plan to enhance the AGD approach: The Bureau has established an action plan to support operations to reinforce AGDM and implement their AGDM strategies. • Compiled a report on AGD best practices from the region for learning purposes: A compilation of best practices under the seven diversity groups of the UNHCR AGD Policy has been published to ensure visibility of AGDM practices in the region. • Undertaken a country by country and regional AGDM analysis: This review highlighted strengths and areas of improvement for all operations in the region and has allowed for a better understanding of the AGD sensitive budgets. The Director provided individual feedback to each representative on AGDM issues following the country analysis. • Ensured that AGD progress and future planning is included in both the yearly Representatives' meeting and in the Protection officers meeting: The issues of ADGM have been discussion topics at the Representative and Regional Protection Officer meeting, with the participation of DIP, as well as the AHC-O and the DHC. • Appointed a Senior AGD Officer to reinforce AGDM commitment. • The Bureau Director actively promotes ADGM in meetings and mission: As examples, the Bureau Director participated as guest speaker during the regional dialogues presentation in Headquarters and makes sure that AGDM is included in the Americas NGO consultation sessions. The Director also meets with persons of concern under an AGD approach and advocated for their rights and differentiated treatment during her meetings with government and counterparts. <ul style="list-style-type: none"> • The Bureau Director for Africa personally reviewed each of the COPs to ensure that at the strategic, objectives, outputs and budgetary level, was reflective of AGD priorities, although it was not always possible to secure all the objectives at the OL level. • Staff are aware that the Bureau Director will personally monitor implementation of AGD targets, for instance during the mid-year review, and in establishing and reviewing e-PADs. • Also, well in advance of all missions, it is specifically signalled to both the hosting Representative and his/her teams that the Bureau Director would be reviewing with them the AGD programmes of the operation in question. • Through demonstrated and decisive leadership, the Bureau Director ensures that staff know that AGD priorities are personal and "non-negotiable" priorities not just at planning and resource allocation level but then in monitoring actual implementation, monitoring and reporting on results.
1.2 UNHCR is publicly accountable, internally and externally, for AGD results in policy and programmes.	<ul style="list-style-type: none"> • The Assistant High Commissioner (Protection) continued to ensure that the results of the AGD Accountability Framework annual review could be presented to and debated by the Standing Committee, and discussed in a substantive manner, with a view to promoting necessary improvements, by the SMC and in the Troika. • AGD results in both Policy and Programmes are collated annually through the AGD Accountability Framework. Multiple copies are printed and shared externally and the electronic report is disseminated widely, with a slot on the UNHR home page upon release. The report is also sent to all staff, via an all-staff email from the Assistant High Commissioner (Protection) • AGD Template is used by DIP staff in their intensive review of Country Operations Plans (COPs) conducted as part of the Annual Programme

	<p>Review. The template used for these reviews directs the reviewer to analyse the AGD elements of a given plan from a number of perspectives. This DIP analysis is then consolidated and shared with Bureaux, and lobbying is undertaken by DIP at several levels to ensure protection gaps identified in COPs are addressed before the plans are finalized and submitted for the formal review process. Persistent gaps are also fed into the formal process, where they may be raised for discussion with Bureaux teams. Last year the data provided in the completed country level AGD AFs, although retrospective, proved to be a valuable additional source of data to inform the DIP review process, specifically to see if field teams had addressed the gaps that they themselves had identified. This practice will continue in the 2012 DIP APR review exercise.</p>
<p>1.3 Staff, in accordance with their function, are encouraged to deliver and are held accountable for the delivery of AGD – sensitive results through the career management system.</p>	<ul style="list-style-type: none"> • The Bureau Director for the Americas ensured that the performance evaluations of Representatives took into account the analysis on progress in AGD issues provided by the Protection Team. This was a very objective and useful way to show areas of improvement but also contributions from operations. • The Bureau Director for the Asia and Pacific Region has ensured that Deputy Directors and Desk Officers have AGD included in their e-pad objectives. An example of a formulation for a Desk Officer's e-pad is: - Through regular review and acquiring in-depth knowledge of the operations, ensure that all country offices duly implement Participatory Assessments, AGD, and appropriate programmes for prevention of SGBV. • Above examples notwithstanding, very few Representatives have a specific objective relating to AGD. In fact, only 192 (up from 164 in 2011) staff members (as opposed to approx. 7000 staff worldwide) included a reference to AGD in their 2012 PAMS objective.
<p>1.4 Policies, strategies, guidance, advocacy and standard setting are based on sound AGD principles</p>	<p>The Division for International Protection has provided guidance and support to a wide range of operations in relation to a number of AGD-related themes:</p> <ul style="list-style-type: none"> • The updated SGBV strategy, and the intensive support provided to ten target operations to enhance their SGBV prevention and response systems based on this initiative. • The concerted efforts to enhance UNHCR and partner's Best Interests Determination work globally, through revised guidance and field –level training. • DIP worked directly with the HC, AHCs, Bureaux colleagues, representatives and deep field staff to develop comprehensive, AGD-sensitive emergency protection responses. These included the Horn of Africa and Libya emergencies. This DIP involvement is evident in the focus on groups with specific needs in the protection response strategies developed. • See also 3.2 below for guidance issued by DIP. • Division for Emergency, Security and Supply aims to ensure that appropriate AGD security considerations are factored in to the support provided to persons of concern. This is further reflected in the work undertaken between DESS and DIP in the development of the UNHCR Manual on Security of Persons of Concern, the first of its kind in UNHCR and the UN system that deals with physical security, including gender-based violence in all its forms. It is a milestone for the system. The age, gender and diversity approach, as a human rights and community based approach is fully mainstreamed in all actions and strategies for security risk mitigation offered by the threats and responses of the Manual. <i>Inter alia</i>, they call strongly for: establishment and maintenance of multi-functional teams to identify concerns of various sub-groups; participatory assessments; involvement of community leaders taking age, gender and diversity into account; use of age, gender and diversity approach to identify the root causes of conflict; special attention to the lack of, or inadequate AGD integration as a possible cause or triggering factor of security threats; sharing of accurate information with all diverse community groups; equitable representation of women and their equal participation in distribution of basic assistance; and special provisions for registration of persons with specific needs. • During 2011, the previous Emergency Preparedness and Response Section (EPRS) was reconfigured and upgraded to the Emergency Capacity Management Service (ECMS). As part of the restructuring, an “embedded” Senior Protection Advisor post was created at the P-5 level, establishing a stronger bridge between ECMS and the Division of International Protection (DIP) in order to strengthen the guidance and support for addressing protection concerns in emergency response, including the specific protection needs of different individuals such as children,

	<p>women, and the elderly, persons with disabilities and minority/marginalised groups. In addition, the ECMS support provided to contingency planning in 2011 encouraged a greater level of attention to preparing for and responding to various protection concerns in emergency situations, including concerns related to AGD.</p>
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Strategic Result 2: Integration of AGD in Programming.

All protection and service delivery provided by UNHCR is based on age, gender and diversity analysis to ensure that all persons of concern have equitable access to UNHCR support. Additional services or 'targeted actions' are in place to address specific needs and are, in and of themselves, age, gender and diversity sensitive. These are visible, measurable and budgeted for in Country Operation Plans (COPs) and Special Appeals.

Outcomes	Actions Taken at HQ March 2011-March 2012
<p>2.1 The Country Operation's annual or emergency response budget, as well as protection and programme planning are based on sound AGD analysis and the results of participatory assessments</p>	<ul style="list-style-type: none"> • MENA's response to the several emergency operations over the past year included ensuring that particular attention was paid to AGD issues in order to respond to the specific needs of the most vulnerable refugees, asylum seekers, IDPs and other of concern to the Office, who are rendered even more vulnerable in the context of erosion and disruption of protection and assistance mechanisms. Resource and budget prioritization also reflected AGD requirements. • During 2011, the Division for Emergency, Security and Supply deployed a total of 617 emergency deployees (UNHCR staff and standby partners) to emergency operations in some 42 countries, predominantly in Africa (West, Horn and Sudan crisis) and in the MENA region (Libya crisis). While continued emphasis is given to the importance of participatory assessments with men, women, boys and girls, at the earliest opportunity (see 1.4 above), it remains a challenge to do this in a systematic manner in the early stages of an emergency response. • During the 2012 Annual Programme Review presentations, the Bureau for Americas, Europe and Asia and the Pacific had introductory sessions on the integration of the AGD approach in their Bureau. It remains challenging, however, to accurately assess how this higher level attention to AGD issues plays out in operations given the low visibility of AGD elements in many 2012 operation plans. • Annual participatory assessment is now well integrated into UNHCR's planning processes. However, it is currently not possible to assess the extent to which the voices of persons of concern are reflecting in either planning or in final budgetary allocation.
<p>2.2 'Targeted actions' are in place to address specific needs and are age, gender and diversity sensitive. These are locally relevant and are visible, measurable and budgeted for in Country Operation Plans and Special Appeals</p>	<ul style="list-style-type: none"> • DIP and Bureau are working together to support countries most in need of support through the selection of pilot countries for SGBV, Education and Child protection strategies. • Asia and the Pacific region is building on positive practices by states on asylum and generosity towards persons of concern in order to enhance protection and preserve asylum space: for example, the resourcing and supporting of the landmark health insurance scheme in Iran provides key multiple protection measures for all individuals across AGD but in particular women and girls; and another example is the documenting / formalising of traditional marriage practices to ensure access to basic services for all family members in the Philippines and, again, particularly protecting women who may not be able to obtain such documents on their own. • The Bureau continued the implementation of the Regional Dialogues with Refugee Women and Girls. Following India in 2010, Thailand conducted in May 2011 the dialogues in two camps in Thailand discussing 11 themes and articulating concrete recommendations with actions attached. A follow up mission is planned in May 2012. • The advocacy undertaken by the Bureau with resettlement countries on quota and criteria relies heavily on AGD, for example special categories such as women-at-risk and children suffering particular medical conditions from countries where refugees in this category would be very exposed. • Birth registration in Central Asia, Pakistan and Philippines, saw a massive increase in 2011 including the issuance of citizenship certificates benefiting children and adolescents. • The Afghan Solutions Strategy includes a focus on demographics of youth that represents the future, and the caveats to take into consideration with regard to sustainable solutions. For example, stemming the challenges to integration and onward movement.

	<ul style="list-style-type: none"> • The Bureau encourages the operations to strengthen networks of quality implementation and operational partners to support the referral systems of protection cases in particular of children and youth who often need acute assistance and protection being vulnerable to smuggling, trafficking, perilous onward movement journeys, being held in detention, etc. • The Bureau Director personally shared with the Representatives the draft of a concise guidance note produced by DIP in cooperation with Handicap International on working with persons with disabilities in displacement, encouraging them to consider the guidance note as they take forward their 2012 planning process. He has alerted the Representatives to 2010 EXCOM conclusion on the issue and encouraged them to have a focused discussion with their staff on the issues raised in this draft guidance note with a view to identifying concrete actions that offices could incorporate into planning, based on consultation with and the involvement of persons with disabilities, striving to contribute measurably to an improvement in circumstances of this group in 2012. The Bureau encourages the field to ensure engagement with operational and implementation partners who specialize in the protection of persons with disabilities. • The Bureau Director also encouraged all Representatives to carefully study the updated strategy document on SGBV and revert back to the Bureau with a one page note identifying gaps and difficulties that they face in complying. In the area of SGBV, the Bureau supports field initiatives in using rapid protection monitoring tools and in extending specialized advice and counselling services from partners and lawyers attached to the office. This is especially the case in protracted refugee situations and where the risk of trafficking and smuggling is high. One example worth highlighting is the significant impact of the supporting and monitoring of the customary judicial system in the camps in Thailand to ensure that they adhere to international standards and in particular to ensure that especially girls and women always have access to the formal justice system in cases of SGBV. • Overall the Bureau has worked towards a greater application of AGD filters in operations to ensure better identification and reach out. However, challenges remain in the urban environments in the respective countries where differences in the domestic protection frameworks and UNHCR’s ability to act differs greatly from country to country.
	<ul style="list-style-type: none"> • The Americas Bureau region has made a consistent effort to ensure individual and 100% registration of women, which has been achieved in most countries and efforts are continuing to ensure that this success is maintained. The RO Washington and the Bureau successfully advocated for specific actions to respond to survivors of SGBV in Haiti including a resettlement scheme. The Bureau was an active participant in the preparation of the revised SGBV strategy. Colombia and Ecuador are pilot countries while Brazil, Costa Rica and the Caribbean are part of the roll out. • Representatives report in most cases except RO Argentina that they are effectively applying SOPs for the response and prevention of SGBV. Operations report that the main concern is the lack of adequate information on the progress achieve to cover protection gaps in operations with limited assistance, focused on advocacy for the implementation of public policies and with dispersed population. LGBTI (advocacy, engagement and protection) issues were included in the Regional Protection meeting. A successful campaign to raise awareness on risks entailed by the displacement of indigenous population was launched in Colombia (If they disappear a part of you disappears)
	<ul style="list-style-type: none"> • Europe Bureau advocacy operations have focused on mainstreaming AGD in advocacy in policy, legislation, jurisprudence, asylum procedures as well in practical and direct interventions on behalf of individuals. Age mainstreaming is of great importance, due to a considerable number of child asylum-seekers and UASC. The greater involvement by the offices in human trafficking and the strengthening of the cooperation with other key UN organizations has highlighted SGBV related issues in all aspects of asylum in Europe. Although a number of countries have made progress in Diversity, it remains the topic the Europe Bureau most needs to improve on. The continued work on quality of the asylum procedures in most EU countries enabled UNHCR to mainstream guidelines and positions on gender, children, LGBTI and vulnerable persons. • The review of the shortcomings in 2010 and the planning meetings enabled the offices in Europe to identify concrete actions that improved the situation of women in advocacy operations. Concrete examples are: Training of Government RSD staff in interviewing women; provision of information specifically related to women; development of guidelines for the protection of women and girls in the asylum procedure. It also included close cooperation with authorities to identify and map SGBV related issues, identified and strengthened national capacity, including

	<p>SGBV information leaflets, the establishment of SGBV SOPs by all partners and close cooperation with key partners on trafficking. In most non-advocacy operations in South Eastern and Eastern Europe, UNHCR is carrying out a general policy shift and reduced its direct support role, due to reduced caseloads and funding and a need for greater Government involvement. This is likely to have negatively impacted non-advocacy operations on a number of issues (e.g. sanitary material).</p> <ul style="list-style-type: none"> • Protection of Children in Europe is mainly focused on UASC, children in asylum procedures and support to youth. Special procedures, SOPs and guidelines are required for children in all priority areas of our strategic directions (access to territory, effective and fair asylum systems, solutions for IDPs and statelessness).
2.3 All Programme related guidance and reporting is AGD inclusive	<ul style="list-style-type: none"> • There is a need for additional guidance on how to ensure that planning is AGD sensitive and how to measure AGD results. This is on the agenda in the 2012 Forward Plan revision.

Strategic Result 3: Expanded Capacity and Knowledge for Enhanced AGD Impact

UNHCR staff and implementing partners have the skills and knowledge to deliver on UNHCR's commitments, as set out in the 2011 Age, Gender and Diversity Policy.

Outcomes	Actions Taken at HQ March 2011-March 2012
3.1 All UNHCR staff, including senior managers, are aware of organisational AGD commitments and the implications of these for their work	<ul style="list-style-type: none"> • UNHCR's AGD Policy clearly lays down UNHCR's AGD commitments and the implications of these for all staff. • UNHCR's AGD Accountability Framework lays down responsibilities for senior managers. Each senior manager develops their framework each year, setting down actions which aim to meet the outcomes and results set. They are required to share these commitments with their team to ensure that all work together towards the same results. • UNHCR's Competency Framework: AGD will be integrated into the Client Orientation core competency for 2012. • UNHCR's AGD and protection intranet site is being re-designed to make AGD more explicit for staff. • Increasing Protection Capacity: UNHCR offices are prioritising increasing protection capacity, which includes AGD capacity • Induction Training Programme for new Representatives includes a module on accountabilities for AGD
3.2 Staff, in accordance with their function, have AGD competence through relevant training and other capacity building	<ul style="list-style-type: none"> • UNHCR's Mandatory AGD E-learning is currently in final stages of development. It clearly lays down the organisation's commitments and the implications of these for all staff. The tools are due to be live by the end of 2012. • The staff Induction Programme clarifies the AGD Policy and the key components of UNHCR's AGD approach. It notes that all staff are accountable for ensuring the AGD approach and that managers will be required to report on achievement annually. • Emergency Response: The Division for Emergency, Security and Supply, in cooperation with the Global Learning Centre (GLC), held three sessions on the Workshop on Emergency Management (WEM) in 2011, as well as a pilot of the Senior Emergency Leadership Programme, specifically targeting senior and mid-level staff (P-5 and above) for emergency leadership. AGD principles were integrated throughout these trainings. For example, participants in the WEM are asked to address AGD issues, including survivors of SGBV and the issue of child soldiers, as part of the simulation exercise. • In UNHCR's security training (Security Management Learning Programme, Security Management Exercise and High Risk Environment Security

	<p>Training), the Division for Emergency, Security and Supply places emphasis on understanding the environment that staff are operating in, through working with stakeholders including persons of concern who would face different security and safety challenges. This enables staff members to better understand where threats to themselves and beneficiaries may emanate from, but more importantly enables UNHCR to work with other actors to try and find appropriate solutions to reduce the risk.</p> <ul style="list-style-type: none"> • Disability Inclusion: A global training series is on-going, with workshops in Uganda, Bangladesh and Thailand conducted. This innovative training brings together refugees with disabilities, UNHCR and partner staff as well as national Disabled Person's Organizations. It provides a unique opportunity to raise awareness on disability issues and to network across sectors. A three-day consultation methodology with refugees with disabilities before the workshops ensures that their voices are heard and that they are empowered to start initiatives to improve their situation. • DIP provided operations with a wide range of guidance and support throughout the year. The following are some key examples of 2011 DIP products aimed directly at enhancing AGD delivery in UNHCR: <ul style="list-style-type: none"> • Research Project on the Right to Work and Asylum-seekers and Refugees 2 May 2011 • Community Services Standing Committee Paper: towards a community development approach 31 May 2011 • Gender Unit SC Paper: Protecting refugee women: promoting gender equality 31 May 2011 • IOM/038-FOM/039/2011: Action against Sexual and Gender-based Violence: an Updated Strategy 22 June 2011 • IOM/041-FOM/042/2011: Revised UNHCR Resettlement Handbook 4 July 2011 • (co-signed with Director, DPSM) Operational Guidance on Ensuring Access to Health Care and Education in urban areas 22 July 2011 • Need to Know Guidance series - first 3 notes on : Working with LGBTI Persons in Forced Displacement , Working with Persons with Disabilities in Forced Displacement, Working with National or Ethnic, Religious and Linguistic Minorities and Indigenous Peoples in Forced Displacement Aug/December 2011 • Field Handbook for the implementation of UNHCR BID Guidelines, November 2011 • (Signed by AHC-P) AGD Policy: 8 June 2011 • Survivors, Protectors, Providers: A Global Dialogue with Refugee Women and Children: 2011
<p>3.3 UNHCR documents, builds on and applies good AGD practice and shares good practice with implementing partners to enhance their capacity to implement the AGD approach</p>	<ul style="list-style-type: none"> • Representatives provide good practice examples for all accountability framework actions where they state fully completed. These examples are documented and shared widely, both externally and internally, as part of the wider sharing of the Global AGD Analysis. The Assistant High Commissioner (Protection) recognises that this is an area that UNHCR needs to build on. DIP are developing a concept paper for enhancing sharing of good practice. • Good field practice informs all <i>Need to Know</i> guidance notes, which have thus far focused on the protection of four socially excluded groups

Strategic Result 4: AGD shortcomings addressed in Resource Allocation and Expenditure

UNHCR comprehensively and publicly elaborates the resources necessary to ensure that the AGD Plan and Policy can be implemented. It will use existing resources and where shortcomings are identified it will actively seek additional resourcing. Specific needs identified through applying the AGD principles are prioritised in plans and when designing office/staffing structures.

Outcomes	Actions Taken at HQ March 2011-March 2012
<p>4.1 All Bureau and Divisions have an appropriately resourced, measurable and realistic strategy for supporting AGD results in the field and at Headquarters</p>	<ul style="list-style-type: none"> • This year there appears to have been a significant and positive shift in Bureau’s ownership of the AGD approach. In Asia, Americas and Europe Bureau the AGD focal points have been particularly active in promoting the approach within the Bureau. MENA and Africa Bureau have appointed focal points for the AGD HQ Support Meeting. • The Europe Bureau developed its strategic priorities in 2011 and completed the process in February 2012. Initial versions did not include AGD sufficiently and a special effort was undertaken to place stronger emphasis on participatory assessment with persons of concern and all relevant partners and the needs of persons with special needs (e.g. unaccompanied minors). The Bureau reviewed its achievement by compiling an overview of AGD in Europe in 2010-2011. This summary was of great help in addressing shortcomings and strengthening ADGM in Europe. The Europe Bureau Strategy now highlights clear AGD entry points for operations and has ensured that these are adapted to the context of advocacy based operations. • The Americas Bureau has an AGD Forward Plan and the Asia Bureau has promoted the approach in ways detailed in 1.1 and 2.2. • Asia and Pacific Bureau has worked with PSFR in the region to take on AGD in its tailoring of donations, for example, the Japanese company UNIQLO and PSFR collaborating on the production of innovative female clothing in connection to hygiene items to meet the needs of women and integrating the production in refugee camps supporting income generation for women. • The "Africa Bureau Non-Negotiable/Entrenched Priorities" have been rolled up into the GSPs and the Bureau Director has personally ensured that vital targets are fully programmed at the CNA level and crucially provisioned at the OL level. In most cases where national legislation allows birth registration, it is now policy of the Africa Bureau to try and provision the requirements for securing these programmatic targets at 100% at the OL level. With regard to child protection, Africa Bureau has taken a targeted approach and concentrated on those Operations/situations in which child protection issues were most evident, most notably Ethiopia (the Eritrean refugee situation) and the Ivorian refugee emergency. The Bureau Director worked closely with the Representatives concerned in trying to address the issues at stake, while Bureau staff, particularly the Senior Legal Officers worked with the line staff in these Operations. • UNHCR has been working with IKEA to pilot innovative, refugee centred camp design. One of the key components of this is ensuring AGD sensitive design, including SGBV prevention.
<p>4.2 Field operations are able to and do resource AGD sensitive priorities and meet gaps in addressing needs of groups with specific needs</p>	<ul style="list-style-type: none"> • There has been a \$40,316,429 reported increase in budgeted expenditure by operations on 'persons with specific needs' for 2012, compared with 2011. This is according to Focus, UNHCR's results database. What remains unclear from the statistics, however, is exactly who these persons are, which specific needs are being addressed and the quality of interventions. • It is also important to note that real concerns are being expressed in accountability frameworks about gaps that operations would like to address but which they cannot due to financial constraints. Many proposed activities remained above operating level and while activities to target gaps in the protection of women, children and older refugees is a priority, there are equally important activities related to basic assistance to vulnerable populations, support to RSD and to the implementation of existing national policies that compete in the allocation of the operating level resources. • The Assistant High Commissioner (Protection) and the Director of the Division for International Protection have worked together to ensure that the Strengthening Protection Capacity Initiative could be mobilised to realise more staff resources [through post creations] for women and girls protection/SGBV in the field.

	<ul style="list-style-type: none"> The Assistant High Commissioner (Protection) has participated in resource allocation meetings with the HC to review needs to respond to SGBV in specific operations, as per her AGD accountability actions.
	<p>The Division of External Relations (DER) notes the following in its reflection of progress over the year:</p> <ul style="list-style-type: none"> Private Sector Fundraising has established a new unit dedicated to developing thematic fundraising materials and has begun to compile information explaining how UNCHR's programmes are currently addressing rights of women and children from a fundraising perspective. progress with regard to the mainstreaming of AGD analysis in the Global Appeals and Reports, including more consistent and comprehensive gathering of information on findings stemming from participatory assessments at country level. This analysis is used in publications and in bilateral meetings with donors. However, such AGD analysis is sometimes either not available at all, or not available in a format that allows external scrutiny. The Strategic Communications Service covered the issue of gender and age in the Statelessness Campaign by highlighting the specific vulnerability of women and children. Public Information worked with DIP throughout the year to focus the attention of external audiences on statelessness and related protection gaps affecting women and children in particular. In the 1 Campaign, DER ensured that women and children were featured in the majority of the materials and that some aspects were gender specific and that the campaign was regionally balanced in terms of the visual messaging. The video storytelling project integrated age, gender, and diversity into coverage planning from the outset, resulting in tens of stories reflecting and celebrating the courage of refugees and stateless people of diverse age, race, economic status and gender. PI unit supported "The Women's Dialogues", a six month project run by the Division for International Protection, to open up dialogue with refugee and stateless women around the world. The result was a series of multi-media products focusing on women, girls, boys, men, husbands, fathers, mothers and daughters, to reflect the challenges and opportunities refugee and stateless women identified during their discussions with UNHCR. These included a specially-commissioned film shown during the December 2011 Ministerial Conference. PI also worked with the statistics unit to ensure that statistics on unaccompanied minors were reflected in our overall reporting on asylum trends. This resulted in a wealth of reporting on the plight of unaccompanied minors, particularly children from Afghanistan. The particular vulnerability of women and girls during conflict and following natural disasters was highlighted throughout the year in press releases, briefing notes, and web-stories, with focus, among others, on the situations in Libya, Congo, Somalia (including refugee camps in Kenya and Ethiopia), Zambia, and Haiti.

Strategic Result 5: Enhanced Leadership externally for AGD
UNHCR advocates for and uses its voice to promote/champion gender equality, respect for diversity and the equitable enjoyment of rights by all persons of concern throughout its work with national governments, implementing partners and other UN agencies.

Outcomes	Actions Taken at HQ March 2011- March 2012
5.1 UNHCR regularly advocates for integration of the AGD approach with governments and other partners, including advocacy for systematic collection of	<ul style="list-style-type: none"> The Director DIP undertook some 15 missions in 2011, a combination of strategic lectures and speaking engagements, as well as visits to two key field operations. The AGD approach was promoted at each opportunity, as evidenced by the content of speeches, mission reports, including follow up recommendations and action by DIP. As Advisor to the Editor in Chief of State of the World's Refugees, the Director of DIP ensures an AGD approach and input. In the Americas region, imaginative public information campaigns to raise awareness on the impact of violence on refugee and displaced women were designed and roll out. The PI Regional Officer in Bogota has obtained pro-bono services of communications companies and the quality of the materials has been acknowledged. The Bureau Director also participated at the request of her counterpart in UN Women in the UN Directors messages to stop violence against women in Latin America and the Caribbean.

disaggregated data.	<ul style="list-style-type: none"> There was a doubling in media items discussing UNHCR and gender compared with 2010: 63,579 in 2011, compared with 30,579 in 2010. (Source: Meltwater news). The Division for External Relations ensures that age, gender and diversity concerns are included throughout public information materials and that these materials also highlight and promote the strengths and capacities of all persons of concern.
	<ul style="list-style-type: none"> The Division for Human Resource Management have introduced a diversity statement in all external vacancy announcements.
	<ul style="list-style-type: none"> Policy Development and Evaluation Service (PDES) has commented on draft Inter-Agency Evaluations, requesting the need for disaggregated data, participatory approaches and enhanced analysis of diversity issues.
	<ul style="list-style-type: none"> The Assistant High Commissioner (Protection) advocated with the Excom and with partners to ensure a more broadly based understanding of Diversity within the AGD framework. Places for Women at Risk within the resettlement programs of participating countries were advocated for.
	<ul style="list-style-type: none"> The Assistant High Commissioner (Protection) materially contributed to and oversaw the production of the women's protection theme film for the Ministerial Intergovernmental meeting in Geneva, which brought together very senior Government officials from most UN member States. She also actively engaged with Governments encouraging that they pledge to improve the protection and respect for the rights of women and girls.

Strategic Result 6: Enhanced and Expanded Partnerships to Strengthen AGD

UNHCR has developed strategic and effective partnerships to support the organisation in meeting its AGD commitments.

Outcomes	Actions Taken at HQ March 2011-March 2012
<p>6.1 Strategic and effective partnerships and referral systems with NGOs, women's groups, community based organisations and government partners are in place. These ensure that the needs and rights of persons with specific needs are met. AGD concerns are integrated into existing awareness raising and training activities with partners.</p>	<ul style="list-style-type: none"> Significant attention has been paid to this result over the course of the year at HQ. UNHCR has concluded a wide range of partnerships with entities that specialise in AGD related areas of work. These include: Plan International and Save the Children(birth registration); HelpAge (the protection of older persons) ; Women's Refugee Commission and Handicap International (the protection of persons with disabilities) ; and ORAM (the protection of LGBTI persons). The Assistant High Commissioner (Operations) has emphasised partnership working as critical to AGD, including the community based approach, during her field visits.

Strategic Result 7: Strengthened Monitoring and Evaluation of AGD and its Impact

Quality evidence and information on AGD impact is available and used

Outcomes	Actions Taken at HQ March 2011-March 2012
<p>7.1 Analysis, evaluations, lessons-learned, reviews and other studies commissioned by or developed by HQ and Regional and Country Offices fully integrate age, gender and diversity analysis and, where possible, assess AGD results.</p>	<ul style="list-style-type: none"> ● Policy Development and Evaluation Service (PDES) has placed policy development, evaluation and research projects with specific AGD focus on the Division’s work plan. These include work on refugees and asylum seekers with disabilities, safe shelter arrangements in refugee camps, UNHCR's engagement with refugee youth and adolescents, and UNHCR's role in the provision of mental health and psycho-social services to persons of concern. ● PDES has kept abreast of the literature on AGD-related issues and has shared relevant information across the organisation, ensuring that topics are brought onto the agenda. ● All standard inspections conducted in 2011 continue to include meetings with persons of concern, including women and children. Although, given the short period of time allocated to each inspection, the meetings with persons of concern are sometimes not as inclusive as the IGO would like. ● IG produced an AGD ‘recurrent findings’ paper, which highlighting AGD gaps identified during Inspection Missions between 2004-2011.
<p>7.2 UNHCR’s key operational tools are fully aligned with and supportive of an AGD approach. The results framework enables the collection and monitoring of AGD results, including disaggregated data, ensuring that quality evidence and information on AGD programming results are available across UNHCR for decision making.</p>	<ul style="list-style-type: none"> ● Currently UNHCR’s results framework does not enable adequate collection and monitoring of AGD results. This will be a key challenge for moving forwards and needs to be addressed during 2012. ● Gathering and recording baseline data in all offices remains a key challenge for the organization. ● Disaggregated data: To identify protection gaps and develop targeted programmes, it is important to collect information disaggregated by sex and age. This will become possible in Focus later this year. Ahead of this functionality, the implementation instructions for 2012 included excel sheet for offices to start collecting data on a selection of nine indicators in the areas of education and participation; documentation and civil status; health and living conditions; and SGBV. For 2013, operations are encouraged to select an additional four women-specific indicators (see the planning instructions for 2013). The Gender Equality Unit is working in cooperation with DPSM to, through this set of indicators, develop a better understanding of the protection situation of women, girls, boys and men.

Constraints

A number of constraints to implementation were identified by senior managers. For Bureau Directors the following constraints were raised:

- **Challenges on measuring impact of advocacy and policy implementation efforts where populations of concern are dispersed and there are limited resources, if any, for travelling to more remote communities.**
- **Ensuring that legal provisions become reality** in countries which do provide laws ensuring access to birth registration and primary education to asylum seekers and refugee children.
- In the Americas Bureau, Representatives are reporting that **security is an increasingly serious constraint to implementation of AGD**, and other commitments. In Asia Bureau, the costs of security in situations such as Afghanistan and Pakistan are taking away from measures needed for AGD. Security concerns also provide an obstacle to access to persons of concern and funding. In MENA, security concerns have led to some offices relying on remote protection monitoring mechanisms or being evacuated. This has resulted in **decreased access to persons of concern.**
- The **challenge of balancing out the need, within existing financial constraints, to engage in regular contact with the wider population of concern (breadth of support) with the need to focus on those persons with most acute needs in a sustained way (depth of support).** This is a particular challenge for those working with large urban refugee populations and dispersed border areas (raised by Asia and Americas Bureau)
- One Bureau Director reflected on **the challenges of ensuring sustained oversight of staff performance to ensure that they are fully compliant with AGD Responsibilities particularly as other organisational instruments give Representatives authority to determine their priorities and choices.**
- One Bureau Director reported that that different 'fragmented' organisational commitments provide a challenge which needs to be addressed.

Staffing was raised as a constraint by both Bureau Directors and other Division Directors. Comments include:

- **Reliance on affiliate workforce with a high turnover**, which can disrupt essential activities such as registration and RSD as well as emergency response.
- The **relatively small number of staff in DIP responsible for a wide range of global issues** means that it is not always possible to provide as comprehensive support as desired.
- **Lack of skills in implementing the AGD approach**, both at HQ and in emergency and other response.
- **Need for better cross working across Divisions in relation to AGD.** Many staff at HQ are dependent on quality information- narrative and budgetary - on the Office's activities in this field as well as the Office's capacity to provide solid progress reporting against these activities. The current budget structure/results framework make it difficult to effectively construct thematic fundraising on issues related to ADG. To overcome these internal obstacles and in order to improve the external presentation of AGD related activities, collaboration between DFAM, DPSM, DIP, Bureaux and DER need to be strengthened.
- **More training is still required for UNHCR staff to ingrain and inculcate fully the AGD ethos** so that the necessary management or functional performance becomes virtually intuitive and fully predictable. There are also many operations which do not have either the right-profiled staff members for purposes of AGD responsibilities or have them in the right numbers.

Part 4: Moving Forward

Part 3 revealed that many of the recommendations made in previous years' Global Analysis and in the external evaluation 'Changing the Way UNHCR Does Business - An Evaluation of the Age, Gender and Diversity Mainstreaming Strategy, 2004 – 2009' have been taken on board by UNHCR. The organisation now has an AGD Policy, an AGD Vision and a Five Year AGD Forward Plan. The Forward Plan is a 'live' document, revised each year and incorporated into the AGD Accountability Framework reported on in this Global Analysis. As senior managers at HQ assess their performance over the year, they are asked to set themselves actions for the following year. In this way, recommendations from one year become embedded in the following year's accountability framework. This enables the organisation to continue to assess, reassess, move forward and learn.

However, there are a number of recommendations that necessitate broader debate and engagement. The table below highlights the most important gaps to be addressed over the coming year, with recommendations for how they should be addressed.

Gap	Recommendation	Accountability
UNHCR has committed itself to participatory planning and the approach is becoming gradually embedded within the organisation's structures. However, it is currently not possible to assess the extent to which the voices of persons of concern are actually reflected in either planning or in final budgetary allocation.	<ul style="list-style-type: none"> There needs to be a clear and visible link between the key results and analysis of participatory assessments and operations planning and budgeting. A cascading system within Focus, which contains PA prioritisation in the first line, would be a critical development. 	DHC DPSM with DIP support
Staff are demonstrating increasing achievement of accountability actions and results are being seen in terms of better performance. However, there remains a gap in terms of understanding and measuring impact on persons of concern.	<ul style="list-style-type: none"> Senior managers to discuss the full implications of the AGD approach across the management, performance, programming, implementation, monitoring and reporting spectrums. Senior managers to re-visit organizational standards and commitments in view of the realities of the financial and staff resources needed to meet them. Ensure that UNHCR's Results Framework and Focus are fully aligned with and support the implementation of the AGD policy, including measurement of impact. Monitor incorporation of age, gender and diversity analysis throughout the whole operational process. Ensure that an AGD approach is visible and impact monitored in prioritised plans¹⁰. Follow up on the new Child Protection Framework. 	HC Troika DHC AHC (O) Bureau DIP
There remains a gap in the dissemination and building on good practices. Some operations are managing to overcome the many constraints that exist. How do they do this? What is it that works for them? Is this replicable elsewhere? How can these good practices be scaled up? This year there has been a record number of examples of good practice cited in representatives' accountability reports. These need to be analysed,	<ul style="list-style-type: none"> Develop a systematic approach to building on the 170 or so good practices cited in the Annexes to this report and those collected by DIP advisors and Bureau. Develop a concept note, building on work already initiated by DIP, Bureau and DER. Ensure that the exercise is not just extractive but interactive with possibilities for peer to peer learning, mentoring and webinars. 	DIP Bureau Under AHC- Protection DPSM

¹⁰ Where operations are only able to meet minimum needs, they should ensure that all groups have equal access to and are able to benefit from services. Groups with specific needs should be identified in both comprehensive and prioritized plans/ 'single' plans and targeted actions developed, as appropriate to the local context. Where resources are expressed as a constraint to compliance by Representatives this is taken into account in the Comprehensive Needs Assessment of the operation in question, and followed up on.

understood and built upon.		
<p>The framework relies on its ‘cascade’ effect, whereby senior managers monitor framework completion. Follow up on findings needs to be ensured, as reporting and follow up actions are necessary to provide the checks and balances that ensure that this tool provides a valid picture of UNHCR’s progress in implementing its organizational commitments. There has been important progress at Bureau level and this should continue.</p>	<ul style="list-style-type: none"> • Each manager should ensure that they are briefed on progress on AGD and that they, in turn, report on progress to their line managers. • Ensure that Bureaux continue to report to the Troika on how they have ensured that shortcomings in Representatives’ accountability frameworks are addressed. • Ensure that future GSPs explicitly refer to AGD. • Accountability framework reports should be automatically copied to the Bureau as well as to senior desk officers to facilitate monitoring. 	<p>Bureaux</p> <p>Troika</p> <p>DHC DPSM DIP and Representatives</p>
<p>AGD, MFT and PA has become an event in some operations, seen as a resource intensive one-off exercise rather than as a critical and integral way of enhancing practice and impact for persons of concern.</p>	<ul style="list-style-type: none"> • Ensure that AGD is on the agenda for each main step of the planning year as detailed in the Calendar for Reporting, Implementation and Planning, and notably: Annual Statistical Report, Country Report and Summary Protection Assessment. • Awareness training with staff is needed to improve the design of UNHCR’s responses to older persons and persons with disabilities in the areas of protection, shelter, non-food items, education, health and solutions. • Ensure PA used by country offices in a manner that prioritises transparency around planning and resource availability. E.g. through sharing examples from countries that engage in on-going, regular, locally adapted PA and where expectations are addressed as and when they arise, leading to enhanced dialogue, understanding and impact (see Annex 2, Good Practice examples). • Ensure systematic briefing of new senior managers as part of their induction to ensure that they are aware of their accountabilities with regard to AGD and systematic de-briefing and completion of accountability framework by departing senior managers. 	<p>DPSM Senior managers</p> <p>Bureaux Directors with DIP and DPSM</p> <p>DIP</p> <p>DIP and DHRM</p>
<p>Lack of partner engagement remains an important obstacle to the AGD approach, as reported by Representatives. Some operations have built participatory assessment and AGD sensitivity into their sub-agreements with partners but this is currently at the initiative of individual operations.</p>	<ul style="list-style-type: none"> • Re-design partner sub-agreement format to ensure that it reflects UNHCR’s commitment to age, gender and diversity sensitive working and provides necessary guidance for implementation. 	<p>DPSM</p>

3.3 Concluding Note

This year’s Global Analysis has revealed that UNHCR’s efforts over the past years to enhance the integration of the AGD approach are paying off. Most of the recommendations made in previous year’s reports and by the external evaluators have been taken on board and the resulting improvements are evident. There is a greater ownership at Headquarters of the AGD approach, revealed in the breadth of activities that have been taken in order to implement the AGD Forward Plan. Increasing numbers of good practice from the field are being identified and there has been a progress in accountability actions reported as ‘fully’ or ‘mostly’ completed over time. The principle challenge that UNHCR faces over the coming year will be to ensure that results based management tools are able to capture and monitor the full range of AGD-related initiatives taking place at the field level.

Part 5: Annexes

Annex 1. Method

The accountability framework provides a simple check box format to gauge progress towards four main equality objectives:

- age, gender and diversity mainstreaming (AGD)
- enhanced protection of women and girls of concern to UNHCR
- enhanced protection of children of concern, including adolescents
- enhanced protection of other persons with specific needs.

Country/Regional Representatives and other accountable staff at Headquarters are required to evaluate their own performance in relation to a number of accountability benchmarks¹¹. A revised format was used for the 2009-2010 exercise, in response to participant feedback. The three level rating was replaced with a five level rating with accountable staff required to tick 'fully/ mostly/ partially/ hardly/not at all' achieved, in relation to their accountability benchmarks. This change in the rating means that comparison with previous years should be done with care. This caution made, it is important to note the focus must remain on full achievement with these minimum standards and not on 'mostly' or otherwise achieved.

Where 'fully' is checked, examples of action taken must be given. Unfortunately, this year many accountable persons did not provide examples as they were able to skip the box (something which was not possible with the online survey tool). This will need to be rectified for future exercise as the provision of examples is an important element of ensuring that due consideration is given to whether the action truly has been 'fully' completed in practice. The simplicity of the check box format allows for global and regional monitoring of progress on an annual basis and for the identification of additional support needs. Follow up is integrated within the framework, with each accountable person reporting on progress to their senior manager, including to the High Commissioner.

Additional Notes:

- **Triangulation:** The accountability framework is based on a system of self-reporting. In order to monitor accuracy, **random and non-attributable spot check telephone interviews** are conducted with multi-functional team members in ten countries and data is compared with standards and indicators reports. Spot check findings are reported in Annex 2.
- **Effort v. Achievement:** During the development of the accountability framework, significant discussion took place around whether the tool is monitoring best efforts or actual results. It was concluded that it is the actual result that is being monitored and that the constraints box should be used to refer to cases where the individual has taken every step necessary to meet minimum standards but that other factors have impeded the success of their best efforts. 'Achievement' therefore refers to successful implementation of the action. Non-achievement may occur despite the best efforts of the person involved and does not therefore imply a wilful act of non- achievement. In relation to leadership processes, however, it is effort that is being measured. In other words, has the senior manager done all that is in their power to meet their process requirements.

¹¹ 19 benchmarks for country Representatives of non-advocacy based operations, 5 benchmarks for representatives of advocacy based operations, 17 benchmarks for Bureau Directors, 6 benchmarks for the Director of External Relations, 10 for the Director of International Protection, 7 for the Director of the Division of Programme Support and Management, 8 for the Director of the Division of Emergency, Security and Supply, 6 for the Director of the Policy Development and Evaluation Service, 6 for the Director of the Division of Human Resources Management, 9 for the Assistant High Commissioner for Operations, 10 for the Assistant High Commissioner for Protection, 6 for the Deputy High Commissioner and the High Commissioner. The differing numbers relate to the different functions associated with the positions. Actions were developed on the basis of each position's job description.

Annex 2. Details of submissions by Representatives: Achievement, Good Leadership practice, Examples of impact and Spot Check findings

Annex 2.1 Achievement rates in non advocacy based operations

The main text summarised achievement in non-advocacy based operations and provided detail for advocacy based operations who have fewer accountability actions. This section provides the detail for non-advocacy based operations.

Actions that were most successfully achieved by participating Representatives in 2011-2012:

AGD

- **PA Leadership.** 47% of Representatives reported having ‘fully’ achieved this action. This was also the most fully achieved action in 2010-2011 with 49% of representatives reporting ‘full’ achievement.
- **Budget & Plan reflect PA & AGD.** 39% of Representatives reported having ‘fully’ achieved this action (unchanged from achievement level in 2010-2011).
- **Leadership to ensure mainstreaming.** 35% of Representatives reported having ‘fully’ achieved this action (up from 34% in 2010-2011).
- **Disaggregated data available and used.** 34% of Representatives reported having ‘fully’ achieved this action (down from 39% in 2010-2011).

Protection of Women and Girls

- **Sanitary material provision.** 36% of Representatives reported having ‘fully’ achieved this action (down from 45% in 2010-2011).

Enhanced Protection of other persons with specific needs, as laid down in UNHCR’s AGD Policy

- **Incorporation of SGBV activities into operation’s comprehensive protection strategy reflecting a multi-sectoral, AGD approach to prevention and response.** 38% of Representatives reported having ‘fully’ achieved this action (down from 41% in 2010-2011).
- **Analysis of SGBV trends.** 36% of Representatives reported having ‘fully’ achieved this action (up from 30% in 2010-2011).

Actions ‘fully’ achieved by 30% to 33%¹² of Representatives:

AGD

- **Development of Strategic Partnerships.** 33% of Representatives reported having ‘fully’ achieved this action, introduced for the 2011-2012 cycle.
- **Feedback with Persons of Concern.** 32% of Representatives reported having ‘fully’ achieved this action (up from 27% in 2010-2011).
- **MFT Leadership.** 30% of Representatives reported having ‘fully’ achieved this action (unchanged from the previous year).

Protection of Women and Girls

- **Follow up on Women at Risk.** 31% of Representatives reported having ‘fully’ achieved this action (again falling from 36% in 2010-2011, and from 41% in 2009-2010).

Protection of children, including adolescents

- **65% Primary School enrolment.** 32% of Representatives reported having ‘fully’ achieved this action. The target for Primary School has changed this year. Previously representatives were asked to evaluate “Increasing primary school enrolment by 10%, with gender parity”, so a performance comparison against previous evaluations is not possible.

Enhanced Protection of other persons with specific needs, as laid down in UNHCR’s AGD Policy

- **Capacity Building & Partnerships on SGBV.** 30% of Representatives reported having ‘fully’ achieved this action (up from 16% in 2010-2011).

Actions fully achieved by less than 30% of Representatives:

AGD

¹² The percentages given are based on a division of achievement into three groups: highest, medium and low.

- **AGD advocacy into national practice.** 25% of Representatives reported having ‘fully’ achieved this action (down from 39% in 2010-2011).

Protection of Women and Girls

- **100% registration female adults.** 28% of Representatives reported having ‘fully’ achieved this action (again down from 37% in 2010-2011 and 46% in 2009-2010).
- **Women’s representation.** 25% of Representatives reported having ‘fully’ achieved this action (again down from 26% in 2010-2011 and 36% in 2009-2010).

Protection of children, including adolescents

- **Best Interests Assessment/Determination.** 27% of Representatives reported having ‘fully’ achieved this action (up again from 26% in 2010-2011 and 19% in 2009-2010).
- **100% birth registration.** 24% of Representatives reported having ‘fully’ achieved this action (again down from 27% in 2010-2011 and 35% in 2009-2010).
- **Targeted action for adolescents.** 14% of Representatives reported having ‘fully’ achieved this action (again down from 16% in 2010-2011 and 24% in 2009-2010). This action was also the least achieved in 2010-2011.

Enhanced Protection of other persons with specific needs, as laid down in UNHCR’s AGD Policy

- **Active promotion and inclusion of diverse groups, as laid down in the AGD Policy, at all stages of the operational cycle.** 25% of Representatives reported having ‘fully’ achieved this action.

In the Instructions that accompany the Accountability Framework, Representatives are asked to provide examples where they ticked ‘fully’ completed, alongside verification sources. However, the excel format does not oblige Representatives to provide examples where they ticked ‘fully’ completed. As a result, many Representatives failed to give examples. This important cross-check element was therefore missing. This highlights the importance of triangulation of findings through follow-up of the completed frameworks by Bureau and through other internal and external evaluation mechanisms.

Annex 2.2 Confidential Spot Checks

Due to the subjective nature of the accountability framework, it is critical to ensure that findings are cross-checked in multiple ways. One way is to cross check with field staff. Ten random confidential spot-checks with field staff are therefore conducted on an annual basis to ensure the transparency and authenticity of the accountability framework exercise. This supports additional checks by line managers, evaluators and others, and cross referencing with sources such as Standards and Indicators and Country Operations Plans.

Ten countries are selected at random from the different regions, representing both advocacy and non-advocacy based operations. Each year different countries are selected to ensure maximum representation over time. Different members of staff representing different functions and grades are also selected at random. Confidential, non-attributable telephone interviews are then conducted with these staff members. The key findings for 2011-2012 are as follows:

- **The accountability framework submission appears to bring in different staff members. However, it appears to remain a one-off reporting exercise, as opposed to a regularly and openly used management tool.**

Representatives are requested in a yearly all staff email from the AHC (Protection) to share the accountability framework with their team and to take a multi-functional team approach to its completion. Representatives are also asked to share the accountability framework with Heads of Sub-Offices and to ask them to complete the framework with their multi-functional team. The spot checks revealed that, on the whole, Representatives made ad hoc requests for information from either one or various staff members in order to complete the framework rather than engaging in ongoing discussion on progress in meeting actions over the course of the year. Of the ten persons interviewed, seven were aware of the AGD accountability framework, three were not, despite occupying senior positions. Representatives are also requested to share completed frameworks with their staff. It appears once again that this has not been the case across the board, with only five interviewees having been sent a copy of the completed framework.

It would appear from the interviews that Representatives did request different units to complete relevant parts of the framework and provide relevant information but that, where the information was available from interviewees, it was the Representative that made the final edit to the form and sent it off, rather than requesting staff members to complete and submit the form for them. This shows an acceptance of the personal accountability nature of the exercise and is a positive indication. This is also reflected in the fact that almost all accountability frameworks received at Headquarters were submitted by the Representatives themselves, rather than by a colleague.

It is clear from the above that there remains a need for better engagement in the process by the whole multi-functional team, and the country office as a whole. While the Representative has accountability for ensuring achievement with their personal actions, the whole office has responsibility for ensuring the integration of the AGD approach in all activities. It is therefore strongly recommended that Representatives share the framework with all staff at the beginning of the year, and use it as an ongoing management tool, coming back to it at regular intervals and evaluating progress against it. DIP has developed a summary matrix of accountability actions, available on the intranet¹³, and this should be printed out and used by all staff members as a reminder of UNHCR's AGD priority actions.

- **Participatory assessment does appear to have taken root in operations as part of the planning cycle. However, it also appears to be used more as a one-off annual exercise than as a regular part of on-going dialogue with persons of concern.**

The cross-checking of data confirmed the Representatives' submissions in all ten operations. The validity of this finding is supported by the fact that interviewees had no advance notice of the content of the phone call¹⁴. It is worth noting that it would appear that participatory assessment in particular has taken root in all ten operations. On the whole, however, it would appear that participatory assessment was seen as a one-off exercise, called 'The AGDM exercise', highlighting a lack of understanding of the mainstreaming process.

- **There is a need for enhancing formal and systematic feedback to persons of concern on participatory assessment and planning results.**

The cross checks revealed that four operations were engaging in formal and systematic feedback to persons of concern of participatory assessment and planning results. This compares with last year when only one interviewee referred to a formal feedback process. Four interviewees said that they do informal feedback during on-going discussions with persons of concern. One interviewee said that they did not have structures for providing feedback and one said they probably did not have a system for feedback.

- **The accountability framework is seen as a vital tool for ensuring integration of the AGD approach including targeted actions for persons with specific needs.**

The seven spot check participants aware of the accountability framework were asked if they felt there was value to the tool or whether it was merely an additional burden on staff time. All stated that while it did take time to complete the framework, they felt that it was a necessary tool for ensuring enhanced integration of the AGD approach, including targeted actions for persons with specific needs. This can be seen by the statements made in the quote boxes below:

'The Accountability Framework does help at management level. They don't only have to implement AGD but have to ensure they report appropriately. It puts people on guard if they know they have to report. My strongest belief is that it is a very useful tool'.

'For us, there are lots of different reports in UNHCR. I think that the AGD Accountability Framework is good but we would like feedback otherwise it is not so helpful for us'.

'Diversity is an area where we continue to struggle. It is good to have some structure where we can separate these issues. Continuing to have a process which emphasizes that there will be accountability is important; it is needed more in some parts than in others. Having a framework for particular issues where it is difficult to engage [people] provides us with a rationale for continuing to push with these issues even if they seem intractable. If there were not more senior level expressions that these are a priority and we have to report back to donors on them, it would be easy for people to say they won't push it as it is too sensitive'.

'I think it is necessary. Whether it has played a role in integrating AGD I am not sure, but it is necessary to keep it on the Representative's agenda. In some countries, there are very committed people. In others people haven't taken the MFT and PA seriously. It is just a one off exercise. If the Representative didn't have to fill out something once a year it would be very easy for it not to happen. Even with Focus indicators there is still a need for the accountability framework. Representatives don't sit and do Focus but they have to do the accountability framework'.

- **There is strong and dynamic AGD leadership by Representatives in cross-check countries.**

Eight out of the ten cross check interviewees stated that their Representatives were strong AGD leaders, demonstrating strong personal commitment, leadership, follow up and guidance. This is significantly higher than in previous years and could be an indication that there is growing clarity and ownership of the AGD process. However, the sample size is not significant enough to make a general statement to this effect.

¹³

https://intranet.unhcr.org/intranet/unhcr/en/home/protection_and_operational/community_development/age__gender__diversity/individual_accountability.html

¹⁴Interviewees were asked open ended questions and no reference was made to how the Representative had scored his/her own performance. This was to ensure that interviewees did not feel that they had to confirm/ contradict a statement by their Representative.

Annex 2.3 Good Leadership Practice: Representatives in all operations (both advocacy and non-advocacy based)

Each year, more and more examples of good leadership practice are being provided by Representatives in their accountability framework submissions. This indicates an important and growing integration of AGD leadership into the function of the Representative. 50 examples were provided in response to the request for leadership practice examples. 15 of these were not specific to the leadership role and were focused more on good office practice. It was therefore difficult to pull out the role of the Representative in these. The 35 examples given in the table below are those where the Representative has given clear personal examples of leadership practice. While some of these should be standard practice, they are often not. The examples given highlight pro-active action taken by individual Representatives and it is hoped that they will inspire others to follow suit and to follow up to obtain more details for learning purposes. The majority of the examples focus on integrating or ‘mainstreaming’ the AGD approach into operations.

Accountability Target	Action 2011-2012
Age, Gender and Diversity Mainstreaming	<p>Region : Africa</p>
	<ol style="list-style-type: none"> 1. Benin: The Representative ensures statutory regular meetings between UNHCR Cotonou and persons of concern and partners to enhance the protection and assistance abilities of persons of concern. These are supported by ‘optimal coordination and systematic monitoring, review and follow-up on the respective situations arising from the operation’. These meetings take place bimonthly with all partners, every three months with Persons of concerns’ communities’ leaders, weekly with individual Persons of concerns. 2. Burundi: Participatory assessments results were shared with donor community, partners and governmental counterparts and formed the basis of all planning activities and design of programs at the beginning of the year. Review of field staff performance, including setting up EPAD objectives, included the results of the monitoring activities of the recommendations of the participatory assessments. 3. Central African Republic: the Representative personally led the participatory assessment in an IDP camp of Kabo, northern CAR and followed up on findings. 4. Chad: Updating the Senior Management Team, donors and others on protection gaps, achievement with the accountability framework and strategies to address gaps. AGDM accountability was highlighted among priority requirements and discussed in the different meetings (with the Senior staff, Heads of Office, all staff meetings). Leadership was maintained by monitoring and issuing of instructions to staff to ensure outputs mainstream age, gender and diversity concerns and monitoring of outcomes and follow up. Advocacy is conducted internally and externally to promote the use of rights and communities based approaches, participatory assessment, and age, gender and diversity mainstreaming to ensure that the protection of the rights of children, of women and of persons affected by and/or at risk of SGBV are an integral and cross-cutting feature of all staff activities. The Representative has ensured that refugees were consulted at the different stages of the programme cycle (identification of needs, Planning and Design, Implementation, Prioritization of intervention, Monitoring and Evaluation). The Representative requested all Implementing Partners to incorporate a budget for participatory assessment in their activities. Regular meetings with people of concern were held in hold camps. In the urban area, a suggestion box was set-up at the UNHCR Branch office to enable refugees to express their complaints. Also, meetings were organized with refugees, Implementing Partners to provide feedback on the AGD participatory assessment. The Representative has ensured that multifunctional teams were functional in the 17 camps in Chad. In addition, a participatory workshop was organized with Implementing Partners, donors, UN agencies and the Government for the Country Operation Plan. The Representative has ensured that SOPs are put in place. MOUs with sister agencies such as UNICEF and UNFPA were revised. Also, child protection and IDPs strategies were drafted and shared with NGO and UN agencies. 5. Congo (Brazzaville): Full support given by the Representative to AGD focal points in the organization of Participatory Assessment despite logistic constraints, limited staffing and budget. The Representative meets with the multifunctional team and an all staff meeting at the end of each month and meets with refugee community leaders every two months to ensure a continued process of briefing and updates in relation to information gathered during the participatory assessment process. As a result of Advocacy through the line ministries, the Ministry of Justice has accepted to include UNHCR in the team tasked to draft the future Law on refugees, which provides an opportunity to mainstream age, gender, and diversity in the drafting of the law. 6. Regional Representative in Dakar: In many occasions, the Representative held staff meetings to review and find solutions to issues faced by Persons of concern, whose specific protection or assistance needs have arrived to Representative’s attention. for e.g.: sick persons and other facing difficult circumstances, rejected asylum seekers in distress situations - Organized visits to

Accountability Target	Action 2011-2012
Age, Gender and Diversity Mainstreaming	<p>refugee transit centre or counselling centre to discuss with refugees and understand their concerns- Organized meetings with specific representatives of the refugee community to discuss issues of concern to them such as repatriation of MAU, cessation clause with RW and Lib refugees , education assistance (for e.g.: Assistance to vocational training in Dakar revised following the meeting held with the refugee committee member in Dakar. The revised assistance took into consideration concerns raised by refugees regarding this assistance scheme. Under Representative's leadership, the regional assistance policy for urban refugee was developed allowing harmonization of assistance to this group of refugee across the region; SOPs to guide provision of health assistance in urban areas developed for MLI, BKF, DKR and the Gambia. The Representative has promoted multisectoral missions in order to ensure integration of all perspectives in assessment, analysis and implementation of programs.</p> <p>7. South Africa: Lack of participation by some key Government Departments has been noted and efforts are continuing to engage them. Following a Standard and Indicators workshop which took place in 2010, the quality of IP reporting has improved and this includes AGD analysis. While measures have been taken to address issues raised by refugees during participatory assessment, systematic feedback to refugees is still a challenge. Partnerships and advocacy efforts have been strengthened and include: the Protection Working Group chaired by UNHCR, collaboration with the police in dealing with violence against foreigners including refugees, the Forced Migration Working Group Task Team on Education and Psychosocial issues and UAM/SC Task Team.</p> <p>Region: Americas</p> <hr/> <ol style="list-style-type: none"> Mexico: The Representative has actively participated in the AGDM participatory assessment organization and implementation and formally requested the Government agency and IP directors to support the process. The Representative opened the participatory assessment exercise and participated as an observer in different focus groups organized for that event. Regional Representation in Washington, United States of America: The Representative actively participated in three preparatory meetings for the conference on the protection needs of LGBTI refugees and asylum seekers and undertook follow up with the US State Department which may have contribution to announcement of a proactive protection policy for these groups. This showed that the Representative was not only interested to talk at the event, but fully committed to address current protection gaps beyond the Conference. In different subsequent public speaking engagements, the Representative reiterated the Office's protection concerns for LGBTI refugees and asylum seekers, even with more conservative audience. Regional Representation in Panama: A regional online database was created to disseminate protection and livelihoods best practices implemented in the region. This database includes AGD sensitive policies / activities / projects implemented in various countries of Latin America. <p>Region: Asia and Pacific</p> <hr/> <ol style="list-style-type: none"> Australia: the Regional Office has shown leadership through its role as co-chair of a newly-formed Pacific Regional Protection Cluster (together with OHCHR). The PRPC is now an integral part of the Pacific Regional Humanitarian Team charged with providing a more rational and coherent response to disasters and emergencies in the Pacific. AGD issues are becoming more effectively integrated into the structure and emergency response planning of the Cluster. Kazakhstan: The Representative motivates staff to create a space where they can be creative, trusted and focus on good client service. Staff have reported that the Representative is very engaged in the AGD approach, heads the MFT and actively participates in different AGD related activities. He actively encourages staff to integrate the AGD approach into their work, to learn more and to participate in different training sessions to ensure that they have a broader understanding of related issues. Islamic Republic of Iran: The Representative has encouraged colleagues to think out of the box to ensure that the AGD principles are maintained in programming despite the restrictions placed by the government. Nepal: To effectively carry out their functions, all newly elected CMC members were provided two days of general orientation training about their roles and responsibilities. Likewise, all Sub-Committees, Gender Focal Points/Assistant Gender Focal Points, CWT Coordinator/Assistant CWT Coordinators were provided separate trainings on their thematic areas of responsibility [relevance to AGD?] Regional Representative in Beijing: The Representative has actively sought support from government counterparts on their participation in the participatory meetings with persons of concern.

Accountability Target	Action 2011-2012
<p>Age, Gender and Diversity Mainstreaming</p>	<p>Region: Europe</p> <ol style="list-style-type: none"> 1. Armenia: The Representative has used the AGD accountability framework as a working management tool, for planning and evaluating progress on an on-going basis. He has guided the multi-functional team in the planning, design and implementation of the participatory needs assessment for the 2012 country operations plan. The Representative has consistently sought to ensure effective inter-agency co-operation with the resident UN agencies as one of the best mechanisms to mainstream age, gender and diversity not just within UNHCR operations but in national policies, programmes and plans of action. The Representative has ensured that there was a proper follow-up to the participatory assessment by designing different projects that respond to the identified needs. 2. Azerbaijan: The Representative has formalized regular meetings with all refugee community leaders, insisting on gender balance among community representatives. He has also made it clear that persons accused or under police investigation for domestic violence will not be allowed to represent their communities in front of UNHCR. 3. Belarus: The Representative has ensured that her team understands that participatory assessment is not a one-time annual action; but a concept cum tool to be systematically applied throughout programming and daily work with refugees. The Representative aims to lead by example with an open door policy for refugees and asylum-seekers; requesting detailed feedback on individual persons of concern, attending refugee communities' gatherings (festivities, funerals, consultative meetings). Every year, the Representative appoints an AGD focal point, rotating the function between protection and program units and invests time with the focal point to develop Office participatory assessment strategy and its implementation details. The Representative participates in some participatory assessment sessions and the Representative ensures that e-PADs of each staff member refer to the level and quality of staff participation in participatory assessment. Staff are encouraged to use every appropriate opportunity to improve and diversify their knowledge and skills and ensures that recognition and praise is given for achievements in private, in staff meetings, through all-staff emails usually also copied to the regional office, and finally in their e-PADs 4. Bulgaria: 1) the Representative led the AGDM process with the active participation of UNHCR's main government counterpart, relevant government ministries, Implementing Partners, other NGOs and persons of concern. 2) The Representative shared relevant information on UNHCR's priority concerns, issues, events and activities with relevant government ministries and agencies, among other stakeholders. 3) The Representative has met with local government authorities in areas where asylum seekers and refugees reside to highlight the concerns and needs of Persons of concern. 4) The Representative has organized information sessions with local journalists to highlight the situation of Persons of concern in the country. 5) The Representative has placed refugee issues high in the political and legislative agenda by raising refugee issues up to the level of the Ministry of Interior, the Ministry of Foreign Affairs and the National Assembly/ Parliament, among other government ministries, and by actively participating in different events and fora, highlighting the situation of and problems faced by Persons of concern in the country. 6) The Representative has shared with embassies information on UNHCR's priority concerns on Persons of concern in the country. 7) A training was organized with the Commission for Protection Against Discrimination to highlight the issues of racism and xenophobia in the country in order to gather the support of the local authorities in the reception of refugees in the municipalities and cities also highlighting that refugees can be assets, not liabilities, if given the necessary support and opportunity. The entire staff of the Representation participated in the AGDM process. Coordination meetings were held with concerned implementing and operational partners involved in the participatory assessment. The process ended with a two-day seminar to analyse the findings, prepare a draft of the final report and agree on future courses of action. [above are not necessarily good AGD practices- we don't know at this point, language pretty AGD blind] 5. Italy: The Representative trusts colleagues in the region who for years have been systematically including age and gender considerations and attention in everything they do. In addition, he discusses attention to age and gender in regular regional planning meetings, extended the children on the move project for unaccompanied Afghan children to more than one country in the region, participated on behalf of the region in combatting homophobia and LGBTI related conferences and meetings and encourages and praises colleagues for the work they do including mainstreaming of age and gender in their daily work. 6. Macedonia: Representative has instituted a discussion platform through regular operations meetings whereby all staff are empowered to participate within the AGDM approaches. 7. Moldova: Participatory Assessment identified gaps such as a lack of information amongst both beneficiaries and Implementing Partners about which agencies handle which function. To address this gap, the Representative instructed staff to increase outreach efforts and produce a special poster explaining the work of all partner agencies. 8. Mozambique: the Representative ensures that all the focal staff of Government Line Ministries participate in the three Participatory Assessments.

Accountability Target	Action 2011-2012
<p>Age, Gender and Diversity Mainstreaming</p>	<p>9. Regional Representative. Brussels: Regional Representation for Western Europe. The Regional Representative supported AGD mainstreaming in the Region through presentations on gender-related issues as follows. In the UK, in support of the UKBA's efforts to strengthen their decision-making in claims raising gender-related persecution, the Regional Representative made a presentation in March 2011 to the UKBA Senior Caseworker Forum on Gender-related persecution. In addition, the Regional Representative provided input into the ERF-funded "Gensen" project seeking to promote more gender-sensitive asylum systems in the EU and into the report by the Free University Amsterdam and COC Netherlands entitled Fleeing Homophobia, Asylum Claims Related to Sexual Orientation and Gender Identity in Europe (see http://www.unhcr.org/refworld/docid/4ebba7852.html). The Regional Representative was also a keynote speaker at the conference to launch this report in September. The Admin unit, as part of its programme work, has been doing the technical preparation of IP Agreements for the whole region since 1 January 2011. This includes advising on the writing of the IP project descriptions, which included encouraging the inclusion of ADG elements in the planning of the activities/outputs of the agreements, as many cases this seemed appropriate. They were included in seven out of the 12 agreements in the region. The Regional Representative has been actively involved in parts of the Bureau's Commemorations projects and activities, notably the publication of the Dialogues with Refugee Women in Finland (Regional Representative External Relations) and the Dialogues with Refugee Youth held in Nuremberg, where the Regional Representative was closely involved in planning the project and publishing the results. The Representative has instated a systematic MFT approach to all strategic discussions where UNHCR approaches to protection, planning and public awareness/public information are discussed and reviewed. Without going into increased individual casework which should not be the focus of advocacy-based operations, the Representative is requesting that more visits of UNHCR staff be conducted to reception centres and other areas so as to enhance direct contact with persons of concern.</p> <p>10. Romania: The Representative emphasises gender issues in protection and programme planning processes and allocates sufficient time and resources, both to staff and other stakeholders, to complete the tasks at hand. By actively participating in discussions on findings and recommendations. By providing substantial inputs to final written reports. With regards to the Emergency Transit Centre, by intervening in cases of persons with either physical or mental health concerns so as to ensure that their particular needs were met. With particular reference to the ETC in Timisoara, The Representative reinforced security arrangements within the centre and advocated at the central government level in the Capital Bucharest, as well in Timisoara with the local Ministry of Interior team on the need for joint training activities which include gender specific issues. Furthermore, in collaboration with staff on the ground in Timisoara we intervened at all levels in particular cases where physical en mental handicaps had to be addressed. Also, The Representative decided to reinforce programme management and control in the Centre so as to ensure that disadvantaged groups are well served.</p> <p>11. Spain: The staff in UNHCR Madrid has a very high level of sensitivity on Age and Gender issues as well as diversity and a number of principles are very much part of the daily work. What the Representative has promoted is a broader vision that goes beyond the first parts of the asylum cycle, the RSD procedure and which includes a view at how integration is taking place and whether there is a gender dimension in the integration process</p> <p>Region: MENA</p> <hr/> <p>1. Lebanon: MFT approach encouraged in all areas including security issues, contingency planning and program design. MFT approach introduced into IP monitoring (biannual) where AGD is mainstreamed. Quarterly sit-reps have age and gender mainstreamed.</p>
<p>Enhanced protection of women and girls</p>	<p>Region: Asia and Pacific</p> <hr/> <p>1. Regional Representative in Beijing: The Representative has adopted throughout the year advocacy practice with the Government to regularly raise the need for the services for the refugee women (subsidized medical care, primary education) in Mainland China.</p> <p>Region: Europe</p> <hr/> <p>1. Armenia: The Representative has regularly sought, and obtained, feedback from the multi-functional team. He has effectively mobilised the UN Country Team to collectively lobby for Armenia's accession to the new Council of Europe Convention on preventing and combating violence against women and domestic violence.</p> <p>2. Croatia: Under Representative's leadership UNHCR strengthened its involvement in the newly established UNCT thematic working group on women and its role in the Women Ambassadors Initiative. Both initiatives focus on combatting violence against women and gender related violence as well as advocacy for women empowerment and full participation in management and</p>

Accountability Target	Action 2011-2012
	<p>decision making structures. Information and education campaigns together with MOI and officials from the competent ministries were jointly carried out in 2010. The focus in 2010 was to create a zero tolerance policy for such violence and to reach out to the male population to ensure a life without violence. The high number of participants, the number of distributed materials and video spots aired by TV/Radio stations are clear indicators of success.</p> <ol style="list-style-type: none"> <li data-bbox="405 272 2159 371">3. France: The Representative had applied an AGDM approach on the PI activities in 2011. For instance, writers' conference on Literature and Exile; concert in Lyon by Forum Refugies; competition for students of journalism with Le Monde; partnerships with L'Histoire and le Magazine Littéraire and project with Magnum Photos. In addition, assessment protection missions organised in Guyane and Mayotte included interviews of populations of concern including the AGDM perspective and such approach is daily developed in the context of Calais in particular through the joint program implemented with FTDA focusing on Afghan youth. <li data-bbox="405 400 2159 475">4. Regional Representative Brussels: Recent international and European developments. Reinforcing the focus on refugee women in the UK, the regional representative was also a keynote speaker at the annual conference of the Scottish Refugee Council on "Refugee Women – 'Survivors, Protectors, Providers'" in November, which provided an opportunity to promote UNHCR's consultations with refugee women, in particular those in Finland, where the refugee women's concerns mirrored closely those of the refugee women at the conference. <li data-bbox="405 504 2159 555">5. Regional Representative Rome: In Greece and other countries, in staff meetings held in 2011 the team discussed and developed the Office's strategy, incorporating age, gender and diversity sensitive analysis and focusing on targeted actions to support vulnerable groups and particularly women, children and disabled persons or other groups suffering from disadvantage.
<p>Enhanced protection of children, including adolescents</p>	<p>Region: Asia and Pacific</p> <hr/> <ol style="list-style-type: none"> <li data-bbox="405 639 2159 715">1. Regional Representative in Beijing: The Representative has adopted throughout the year advocacy practice with the Government to regularly raise the need for the services for children (subsidized medical care, primary education) in Mainland China. There are some good indications that the longstanding issue of getting access to education for children will be favourably considered by the Government. <p>Region: Europe</p> <hr/> <ol style="list-style-type: none"> <li data-bbox="405 767 2159 866">1. Austria: UNHCR's continued leading advocacy for more child-friendly asylum procedures resulted in the awarding of national European Refugee Fund and Ministry of the Interior funding for the project "Support for Authorities Conducting Asylum Procedures for Unaccompanied or Separated Children II" (verification source: funding decision); 3. UNHCR's timely issuance of a position paper cautioning against the further limitation of child care allowance and child benefits for subsidiary protection holders contributed to the withdrawal of the proposed law revision on this point (verification source: Government proposal submitted to Parliament). <li data-bbox="405 895 2159 1026">2. Montenegro: The Representative in Montenegro has developed excellent cooperation with the EU Delegation, which has supported UNHCR's policy on durable solution and refugee protection. On several occasions, joint UNHCR/EUD interventions have helped to get results which UNHCR most likely would not achieve alone. E.g., UNHCR analysed and identified eight categories of refugees who face specific problems in acquiring the new legal status. Together with EU, UNHCR jointly advocated with the Government for solutions for these groups, which led to positive results in several of the cases while in some cases advocacy is still needed and ongoing. Further, through the representative active participation in the UN Country Team in the context of UN Delivering as One, refugees issues are becoming more prominent in the agenda of the UN Country Team. <li data-bbox="405 1054 2159 1129">3. Switzerland: The Representative has encouraged continued support, exchange and participation with unaccompanied and separated children through the Speakout Project, and encouraged participatory assessments and visits where possible (e.g. as part of visits of reception centres and other facilities, work with ICs), encouraged/supported reflection of AGD-specific issues in positions and comments, encouraged also more in-depth examination of reception conditions for vulnerable persons, in particular children. <p>Region: Americas</p> <hr/> <ol style="list-style-type: none"> <li data-bbox="405 1230 2159 1287">1. Regional Office Panama: A process was launched in Nicaragua, Guatemala and Honduras to create Child Protection Officers. The main objective is to improve referral & support mechanisms of children & adolescents with special protection needs, particularly those who are unaccompanied and/or separated.

Accountability Target	Action 2011-2012
	<p>2. Mexico: Thanks to the participation of UNHCR in the interinstitutional roundtable on migrant UASC and women, as well as to its comments to the migration law and refugee law regulations, the Office has managed to first call the attention to the need to incorporate BID procedures in these pieces of legislation and then have it included in all three of them.</p>
SGBV	<p>Region: Americas</p> <p>1. Washington: The Representative was actively involved in discussion with Implementing Partners, donors and survivors to design a project which was sustainable and addressing what the survivors (and not us!) deemed as the most pressing needs. The Representative invested considerable time in convincing sceptical partners/colleagues that the project was doable even in the context of Haiti and that we could even include into it a pilot in-country resettlement program for some of the SGBV survivors for whom safe relocation options outside the safe houses do not exist.</p> <p>2. Mexico: In Tapachula where conditions are less favourable, UNHCR receives complaints from both asylum seekers and refugees on SGBV. In these cases, the Office seeks support from the Refugee Commission and migrant shelters to provide persons of concern with counselling and protection.</p>

Annex 2.4 Examples of impact further to AGDM implementation

The application of AGDM has led to concrete examples of improved performance by UNHCR and enhanced protection of persons of concern. Individual Accountability Frameworks provide a wealth of data. If used, this will enable UNHCR to learn from its experiences. **146 examples were provided and 129 examples are highlighted in the table below.** The majority of examples highlight the impact of the AGD approach on enhancing UNHCR and IP operations: ensuring that programming is based on the voices of persons of concern and that a multifunctional and multiagency approach is taken, where possible. It will be important for Bureaux to follow up with individual countries to obtain greater detail, such as numbers targeted and disaggregation of children reached by sex. The area with least examples relates to targeted actions to address the specific needs of other groups, such as older persons, persons with disabilities, LGBTI groups, ethnic and other minority groups.

2.4.1 Accountability Target: Age, Gender and Diversity Mainstreaming

Actions on Age, Gender and Diversity Mainstreaming : Direct Impact on Protection of Persons of Concern	
Region: Africa	
<ol style="list-style-type: none"> Benin: Thanks to RO Cotonou's advocacy and sense of partnership, the rural refugees in Agamè site received financial support from a local foundation of some XOF 25,000,000 to boost their income generating activities, thereby enhancing chances for successful durable solutions. Burundi: In consideration to AGD perspective, urban refugee welfare centre (CUCOR) was established in 2011 and the government partner has been running the centre. Dem Republic of the Congo: Since 2010, the government of DRC, with UNHCR technical support started issuing individual ID cards to all refugees above the age of 12 years old and in compliance with the DRC refugee law of 2002. The refugee cards represent a residence permit and give to refugees similar rights to those of DRC nationals, with the exception of political rights. This operation was extended in 2011 in the Kivus. Mozambique: Protection gaps identified in participatory assessment and addressed included construction of 22 structures in the TCs of Somalis and Ethiopians, construction of 33 houses and procurement of construction materials for 127 houses for new arrivals to decongest the TCs, construction of latrines in the TCs, Maratane Primary School and former French Schools, market, new site and in the zones, Construction of isolation ward within the Health Centre to accommodate in-patients, improvement of hygiene and water system as well as drilling of four extra boreholes to decongest the existing water points, construction of teacher's houses to curb lateness and absenteeism of teachers, rehabilitation of former French school and increment of food basket from 11 kgs of maize flour to 12.5 Kgs. 	

Region: Americas

1. **Venezuela:** MFTs held constant dialogue with the communities and undertook monitoring missions and participatory assessments in March and April 2011. Accessible and two way feedback mechanisms between Persons of Concern are in place in all offices and can be illustrated by: open-door policy, participatory assessments, individual legal orientation for Persons of Concern and suggestion boxes. Advocacy guidelines improved: eligibility guidelines improved taking into account the AGDM approach and registration standards take into account fully the AGDM perspective. Also, all UNHCR Venezuela offices count with active Durable Solutions Committees that meet regularly and find solutions to specific cases.

Region: Asia and Pacific

1. **Islamic Republic of Iran:** The health insurance scheme (HISE) for refugees was initiated as a result of, and in accordance with participatory assessments carried out in 2009. HISE complements UNHCR's existing health interventions in Iran which consists of providing support to the Ministry of Health to ensure refugees benefit from free primary health care (including vaccination, antenatal care, family planning, TB, Malaria , etc.). As of Oct 2011, Over 200,000 refugees have had access to HISE. UNHCR Iran has established a case management team to ensure that complex individual cases are examined and followed up appropriately. The team has especially been instrumental in ensuring a multi-sectoral approach in the protection and assistance of unaccompanied or separated minors and children at risk cases. However, the government and NGOs are not involved in the process due to national sensitivities to issues such as SGBV.
2. **Japan:** Special attention was given to detailed profiles of beneficiaries including age, sex, children etc. for in-kind clothing distribution project with PSFR partners such as Fast Retailing/UNIQLO, which is benefitting refugees in more than 5 countries (1.2 million pieces of clothing distributed in 2011).
3. **Nepal:** Free and fair camp elections were successfully held with minimal disruption in all the camps. This was essential to address the lack of refugee leadership in many key posts due to RST departures during the previous two years. Many reported these elections to have been the most organized, participatory, and well-supported (by agencies and GoN) that have been held in the camps. Voters used secret ballot to elect 744 refugee representatives for different posts. Universal voting - which had been consistently advocated for by UNHCR in past years - was finally achieved such that all registered Bhutanese refugees, 18 years and above with refugee identity cards, were allowed to vote. Elderly voters and those with disabilities were given priority and assisted by special accommodation in casting their votes. Teachers and students were also given a special priority so as not to conflict with school examinations. Proportionate ethnic and gender balance was achieved. The participation of dozens of staff from UNHCR and other agencies, including agency heads, as well as the engagement and commitment from the CDO of Jhapa, RCU camp supervisors, the civil police and APF (200 extra APF personnel deployed) were critical to this success.
4. **Bangladesh:** Office is pursuing an approach which sees participatory appraisals/assessment as regular part of workload and not just as a once or twice-a-year 'event'.

Region: Europe

1. **Belarus:** Since 2007, office tried to systematically use participatory assessment findings in its annual planning. Indeed, over these years team has succeeded to mainstream AGDM approach/principles and participatory assessment methodology into its regular activities. (1) Provision of social houses by State authorities to 13 refugee families in 2008-9; (2) organization of language training classes for tens of persons of concern; (3) provision of opportunities for vocational skills training and secondary employment for tens of young people; (4) development of appropriate modalities with the relevant state bodies to facilitate refugees' access to State employment services and unemployment, pension and other social benefits; (5) establishment of three viable refugee social enterprises in three different cities; (6) full renovation and hand-over of three flats to three refugee families for permanent stay at no rental cost to them in 2011; (7) provision of post-secondary education grant to ten eligible refugees under DAFI programme since 2010 schooling year; (8) raising much public awareness about refugee issues, dangers of xenophobia and values of multi-culturalism; and last but not least (9) putting statelessness on government's agenda. In order to complement results of social survey of stateless population UNHCR office in cooperation with governmental and NGO partners organized and carried out focus group discussion with women and men stateless persons aiming at identification of their particular needs for further planning of activities with this category of UNHCR's POCs. **Provision of housing/integration grant by UNHCR to some 30 families in the past four years in the form of cash grant for repair and renovation of their flats, purchasing basic furniture or down payment for accessing social housing.**
2. **LO in Strasbourg:** The representative mentioned that despite they are a small office (three staff) mainly liaising with the Council of Europe organs and advocating for the protection of persons of concern to UNHCR in Europe, they always take into account the Age, gender, and diversity of persons of concern when advocating for them. Examples: 1. Inclusion of two provisions, respectively on gender-based asylum claims and non-refoulement, in the CoE Convention preventing and combating violence against women and domestic violence, which was opened for signature on 11 May 2011; 2. Mobilization of support for young refugees on the occasion of the World refugee Day, including, in particular, a "Living Library" with the CoE Council of Europe Directorate for Youth and Sports. This consisted of young refugees living in several European countries and other Persons of Concern (including internally displaced women) acting as living books that Parliamentarians and other CoE agents borrowed to dialogue with them; 3. Seminar on the Local integration of children organised in November with the Directorate of Youth and Sport and the European Youth Centre (UNHCR requested the Youth Directorate to select refugees from different background, gender and age); 4. The CoE strategy on the rights of the child reflecting some of UNHCR's concerns about the

specific needs of asylum seeking children and refugee children in detention; 4. UNHCR has also extensively advocated for the non detention of refugee children (input to PACE report on detention of asylum-seekers and migrants and to CoE Child friendly justice guidelines); 5. UNHCR Strasbourg attended conferences on Unaccompanied and separated children in order to sensitize European parliamentarians to the need to protect this category of refugees.

- 3. Montenegro:** In order to acquire better knowledge of the situation of the refugees, three studies were undertaken in 2011. One concerned the housing and socio-economic situation of refugees living in informal settlement and collective centres outside the capital, one explored the same for refugees and residents of the two Konik camps in the capital, and the third examining the legal situation of the refugees in Konik and their lack of documentation needed to regularize their stay. The studies are being used in development of new projects to seek durable solution, the most prominent the housing programme under the Sarajevo Process. A number of information meetings were also held, organized by UNHCR in cooperation with the Government, to inform the refugees of their right to apply for the status of foreigners and the consequences of the new status. Further, the AGDM in 2011 which was done with IPs, focussed on status and documentation, and was done to understand the problems and obstacles in acquiring the status. 153 refugees were interviewed, comprising 79 female refugees, and 74 male of various age. Based on information deriving from the studies and AGDM, the Office was able to develop a range of interventions/activities to help refugees in the process to get documents. Access to documentation and a legal status remain a protection concern and a challenge for 2012.

Region MENA

- 1. Lebanon:** UNHCR and the Ministry of Social Affairs (MOSA) to build the capacity of 21 social development centers (SDC) in the areas of protection - including child protection and sexual and gender based violence, participatory assessments and individual case management. This also includes setting up a registration system (RAIS) among 10 SDCs to better identify persons with specific needs and develop appropriate response programmes. In 2011, 100 MOSA social workers and NGOs were trained on Protection in Emergencies and 21 SDCs supported with equipment to carry out vocational training and psychosocial activities targeting women, children and youth. Refugee outreach workers programme expanded. 30 youth mobilized as peer educators on reproductive health. Complaints mechanism established in the office.

Age, Gender and Diversity Mainstreaming: Direct Impact on UNHCR and IP operations

Region: Africa

- 2. Benin:** The participatory assessment this year mobilised an increased number of persons of concern, partners, including governmental, as well as UN sister agencies thanks to continued sensitization and commitment to deliver on promises made to PoCs. The AGDM is implemented daily and the results thereof form the basis for the design and subsequent implementation of the Country Operation Plan, as well as related budget, or any other budgeting exercise at RO Cotonou.
- 3. Burundi:** Participatory assessments were conducted in all refugee camps, refugee settlement, in refugee urban areas and in returnee areas in the country. Action plans were developed based on the recommendations of Multi-functional teams. Mid-term review (follow-up) on participatory assessments were conducted in refugee camps, refugee settlement and urban areas in order to provide interim feedback to beneficiaries, update the situation and action plans. MFTs comprised of government, UN agencies and NGOs staff, were established in consideration to gender balance. The committees elected in the camps are consulted prior to all decisions on activities in the camp. Each refugee committee is linked to an implementing partner focal point to address their concerns and develop activities. Some committees were sensitized, trained and given visibility in the camp to encourage their participation; Some committees have designed a work plan and were rewarded for progress made on their work plan. At the midyear review, all partners participated in the review of the recommendations of the participatory assessments with the refugees. Partners mainstreamed AGD perspective throughout project cycles. AGD perspectives were incorporated in the planning for urban refugee committee election which will take place in 2012.
- 4. Cameroon:** Key government ministries and UN agencies are invited to participate in the annual AGDM exercise. Over the past two years, we have witnessed, an increased interest and active participation of these actors, hence increasing opportunities for effective partnership in addressing jointly identified protection gaps.
- 5. Chad:** Refocusing of programme to meet needs identified during the participatory assessment. The UNHCR Chad operation collects sex disaggregated data, as well as data on persons with specific needs, across sectors and analyzes these data for use in planning and evaluation of programs. AGDM principles are mainstreamed and incorporated into all discussions with partners as well as in sub-agreements. When sub-agreements are being drafted, multi-sectoral teams review and provide feedback to ensure AGDM principles are accounted for across sectors. Regular feedback with communities held in camps and in urban location
- 6. Congo (Brazzaville):** A multifunctional team is in place in Brazzaville, Betou and Impfondo including programme, community services and protection staff and staff of implementing partners as well as the officials of government. Regular meeting were organized during the year with refugees communities leaders aiming to better analyse their needs. Participatory evaluation made allow us to identify the resources/ capacities of community of concern and to plan for them. Two participatory evaluations have been conducted this year respectively in all the offices namely Brazzaville, Betou and Impfondo. The information gathered has informed the Comprehensive Need Assessment and subsequently the Sub project implemented by each partner. The Refugees Communities leaders are involved in the Participatory Evaluation and also during the discussion around the comprehensive needs assessment. All refugees and asylum seekers are registered individually through proGres. In all sectors, such as health, education, registration, community services data are gathered and recorded by age and sex when needed. It facilitated the advocated towards the inclusion of age, gender and diversity in their daily work during preparation of the Standards and Indicators Report. The office worked closely with government through the ministries namely Ministry of foreign Affairs,

- Humanitarian Action and Interior which established an agency (Comité National d'Assistance aux Réfugiés-CNAR), and the Eligibility and commission, Appeal board. The office the RSD process. Derivated status are systematically provided to women and to children. Identity card and other documents are issued to women and men on an equally basis
7. **Dem Republic of the Congo:** In February, March and October 2011, under the lead of the Regional Representative, a comprehensive Participatory Assessment exercise was conducted in more than 10 programs of the DRC's UNHCR operation (Kinshasa, Lubumbashi, Kalemie, Moba, Pweto, Goma, Beni, Rutshuru, Kitchanga, Masisi, Bukavu, Uvira, Baraka, Bunia and Dungu) with urban refugees and asylum seekers, IDP's and Returnees. Discussions were organized with women, girls, boys and men of all ages and different backgrounds. Priority actions were defined and taken into account in the situation of the DRC Country Operation Plan 2012. This exercise was organized by the Community Services Unit in collaboration with a MFT which included regarding the terms of references of the multifunctional team, women and men staff, national and international staff, UN agencies, NGOs, international organizations and the DRC government (Ministries of Social Affairs, Education, Gender and the National Commission of Refugees etc...). MFT was trained on the participatory assessment based on AGDM.
 8. **Ghana:** The multifunctional team was selected from the UNHCR Office staff from various units, UN Agencies and representatives from the Government, Refugees and NGOs. The refugee representatives participated in the initial briefings and wrap-up meetings followed by the field work and a wrap-up meeting to prioritize the findings. The wrap-up workshop included a wider and larger number of service providers and refugee representatives from all locations. After, the participatory assessment did a Level II registration for the new Ivorian population; a follow-up assessment of health delivery; revised the nutrition programme and conducted the JAM.
 9. **Malawi:** A multifunctional team involving Government and NGO partners is operational. UNHCR chairs the MFT which meets regularly at the camp level. The MFT coordinates action in favour of refugees and consults with refugees regularly. In 2011 it developed a camp property policy and also followed up on issues related to shelter, health, water and sanitation as well as food distribution.
 10. **Mozambique:** Multifunctional team composed of focal staff of Government Line Ministries and refugees both women and men were active throughout 2011. The team successfully conducted three participatory assessments for camp-based and urban refugees. Refugees of all age groups, gender and nationality were interviewed. Most of the protection gaps identified from the three assessments were shared with the Directors of Government Line Ministries and were adequately addressed in 2011 Country Operation Plan. However, all those protection gaps which needed sensitization were fully addressed by Multifunctional Team through community mobilization. Multifunctional Team members were further divided into small groups which met twice a month to plan and reprioritize their work whereas the entire team met once a month to discuss and review their work.
 11. **Namibia:** The operation collects data of all persons of concern to UNHCR with the use of the ProGres database. The data collected is disaggregated according to Age, Gender and Diversity to identify and provide required assistance to groups with specific needs, (single women, persons with disabilities and older persons). Provision of assistance is planned and implemented with special attention to groups with specific needs. Accordingly, single women and men with a family, persons with disabilities and older persons are given priority in shelter construction
 12. **Papua New Guinea:** the AGDM approach has been part of UNHCR's various training programmes and was included in strategies of various task forces such as of the task force on human rights and of the Gender task force.
 13. **Regional Representation in Dakar:** Over the course of 2011, AGDM were mainstreamed in operations. participatory assessment conducted with 275 Persons of Concern of all backgrounds in GB, SEN, GAMB, BK, for a gender balanced MFT (20 F out of the 32 members). The MFT was comprised of staff from UNHCR , Implementing Partners (CREDO, GAFNA, OFADEC), the GOV(NECs, the Mairie of Pikine), Human Rights Organizations (Amnesty International, RADDHO) and others (ex. CARITAS). All members of the MFT trained on PAs . PA results supported protection and program responses for MAU, SEN and Urban refugees within the Country Operation Plan of concerned PPG. Advocacy was conducted to Gov. of SEN and MLI to facilitate Reg./Verif. and the issuance of ID cards to refugees as well as birth certificates for refugee children. As a result, a MOU was signed with the GoV. of SEN for the registr. and doc. of Persons of Concern.- Reg/verif/.conducted in SEN and MLI - Issuance of Biometrics ID cards to 1805 ref. from 05 years and + in SEN; (Country Report). The issuance of IDs is on-going for the remaining...Disaggregated data by age, sex, and various backgrounds (education, occupation, SP needs available through ProGres has allowed to plan assist. and DS for this group (LI and Volrep). (See Country report) A7. Advocacy was conducted with the Ministry of Interior in SEN for the revision of Refugee Law in SEN. A draft Refugee Law is now available for parliament adoption- Advocacy was conducted with the GOV of SEN, MLI, GB, BKF for the reception and protection of new A.S following the post-election crisis in COI and for the preparation of cessation clause of LIB and RW ref. - AGDM was also included in protection trainings conducted by the office in 2011 to UNHCR, Implementing Partners and Gov. Staff (RSD, Registration, CS etc.). A8: Partnerships were developed with various actors to provide free services to Persons of Concern: For e.g. in Senegal: with VIVRES CAPREC, to assist victims of torture, with CARITAS, to assist AS - with the Mairie of Pikine, to assist refugees with SP needs residing in this municipality, with RADDHO to provide free legal assistance to refugee in need of such services- with the National AIDS programs to assist PLWA in countries covered, with ARV. Agreement established with micro finances institutions to provide micro finances services to Poc in the GAMB (NACCUG), in MLI (Kondo Jigima), NIGER(CapitalFinances), BKF (MICROFI). Participatory methodologies used in Mass information campaigns, to promote VOLREP and LI of MAU , cessation clause of LIB and registr/verif.
 14. **Somalia:** UNHCR offices in the field conduct participatory assessments annually in order to inform programming. Participatory assessments are also conducted at different times during the year on specific emerging issues of concern. Good practice: Inclusion of partners and cluster members (for the IDP operation) in participatory assessment has yielded better results. The involvement of other UN, INGO, LNGO and authorities in UNHCR assessments led to buy-in and ownership of the results by other agencies - the results are therefore widely accepted and used by other agencies for programming. Additionally, co-ordination on areas of mutual interest has improved.
 15. **South Sudan:** Participatory assessments and the rapid protection assessments as well as targeted missions by Juba based staff as well as technical staff from HQ or Hub in Nairobi (such as for example deployment from Helpage International and Child Protection-officer) has raised awareness of protection risks based on age gender and diversity and served to improved programming.

Region: Americas

16. **Colombia:** The Office has began a process of mainstreaming AGDM in each office through a Colombia decentralization process whereby Heads of Sub-Office are now accountably for building and leading MFTs and action plans. At the Bogota level, we have a more consolidated internal MFT with all major policy/protection matters and the COP exercises undertaken by a team of comprising of all heads of units, as well as a specific MFT leading the development of the Office's solutions strategy.
17. **Costa Rica:** In CR there is no community services staff, but the office has established a Community Services Committee with 5 staff members (Rep, Durable Solutions Officer and Associates, Associate Programme Officer), this committee is meeting every month and defines the AGDM priorities. An action plan is being maintained and updated after every meeting. During the year 5 multifunctional team meetings were organized, all with the participation of government representatives and partner organizations. The issues discussed in the MFT meetings are selected by the team and vary from human trafficking to the functioning of refugee diversity/solidarity groups, monitoring of existing AGDM programmes.
18. **Ecuador:** Through the participatory assessments and the case management system, we have been able to identify other typology of cases with specific protection needs, such as women victims of human trafficking, cases of SGBV, unaccompanied male adolescents, among others. This identification has allowed us to subscribe joint programs and agreements with several partners that have a relevant expertise in the aforementioned areas.
19. **Washington:** Resolutions from the 1st Refugee Congress published in the US followed by an advocacy day at the US Congress by the 60 refugee delegates. First survey on survival/transactional sex in Haiti published following a participatory assessment limited to four IDP camp.

Region: Asia and Pacific

20. **Australia:** In negotiating the Regional Cooperation Framework and Australian Government policies for 'off-shore' processing, the Regional Office advocated (and drafted guidelines) for 'child' sensitive processing based on BID, and special procedures for dealing with vulnerable individuals including the aged, disabled, victims of torture and trauma, UAMs, and single women heads of households. 2. The Regional Office holds regular consultations with key peak agencies and service providers that are working closely with affected refugee communities in both New Zealand and Australia. AGD issues are routinely included in those consultations to ensure a maximum 'cascading' affect into the planning and strategies of those national agencies. Given the Office's limited resources this approach is the best way of integrating an AGDM approach in an "advocacy-based" environment; The Office has also strengthened its links to academics and supported research grants into Refugee Children issues. 3 through the Women at Risk (WAR) programme and promotion of dossier cases to resettle rapidly, acute protection cases. The Multi-Functional Team (MFT), consisting of staff from UNHCR's Protection and Program Units, Implementing Partners, UN, governmental and non-governmental organizations, held five MFT meetings in 2011. The Participatory Assessment (participatory assessment) exercise was conducted with refugees, asylum-seekers and stateless persons in Almaty and Chymkent cities in the period from 25 October to 1 November 2011. During the participatory assessment, each sub-group duly informed on the progress achieved since the last participatory assessment to meet basic needs of refugees and asylum-seekers. At the closing of participatory assessment meeting, the refugee representatives as active members of MFT provided valuable advice on how to better use capacities within their communities for improving their living conditions. A Regional Round-table on statelessness issues was conducted in December 2011 and brought together representatives of State authorities, academia, civil society and non-Governmental organisations of Kazakhstan, Kyrgyzstan, Turkmenistan and Tajikistan to raise awareness and discuss the problems of reduction and prevention of statelessness including challenges that undocumented stateless persons face, particularly integration into the society and meeting their basic social and economic needs. Besides, to better protect refugee women, children and other PoCs in need, UNHCR is trying to propose revision of national legislation to overcome the main protection gaps in Kazakhstan laws.
21. **India:** All asylum-seekers are registered as they approach UNHCR and data is disaggregated by gender and age. Smart ID cards have been introduced in July 2011 to replace UNHCR certificates and they are given to all individuals above the age of 12.
22. **Islamic Republic of Iran:** Participatory assessments applying the AGDM principles is gradually being incorporated into UNHCR ongoing outreach activities, monitoring missions, mobile health teams, Afghan focal points, home visits, programme surveys, etc. The programme is working towards mainstreaming AGDM principles in all protection and assistance activities.
23. **Japan:** Continued to strengthen RCCJ; the refugee committee that is representing refugees and PERSONS OF CONCERNs from various nationalities. UNHCR regularly advises its board and members on the AGDM principles. Participation of women and children is ensured in refugee events. AGD was properly represented during the second refugee-organized roundtable in Oct. 2011.
24. **Kazakhstan:** On 15-16 March 2011, UNHCR Representation in Kazakhstan hosted the Regional Conference on Refugee Protection and International Migration with participation of more than 100 representatives, largely at the Ministerial level, from Kazakhstan, Turkmenistan, Kyrgyzstan, Tajikistan, Afghanistan, Iran, Turkey, Azerbaijan, Russian Federation and the People's Republic of China. Among other themes discussed in the conference, special attention was given to prevention of child trafficking and development of legal migration opportunities and gender-sensitive migration policies. Participating countries adopted the "Almaty Declaration" which will serve as a platform

for further cooperation, dialogue and follow up actions. In June 2011, UNHCR signed a Memorandum of Understanding with the National Commission on Women's Affairs, Family and Demographic Policy under the President of the Republic of Kazakhstan aiming at joint cooperation in protecting refugee women and children, addressing issues of elimination of gender-based violence in the family and promoting gender equality and women's empowerment. To advocate the interests of refugees and asylum-seekers, an Inter-Agency Working Group on Asylum and Refugee-Related Matters was established with the Ministry of Foreign Affairs and Migration Police Committee to improve the procedural integrity of the State-run RSD, capacity building support of relevant governmental bodies and other ad-hoc refugee-related matters. To date, one of the main results of the Inter-Agency Working Group was an agreement, further implementation and completion of the joint nationwide verification and profiling exercise of all refugees and asylum-seekers residing in Kazakhstan as well as a study-visit of governmental officials to the Republic of Belarus. Awareness-raising session on prevention and response to SGBV was organized for all refugee communities in December 2011 within the campaign "16 Days Against Violence". Besides, mechanisms are in place to deal with emergency situations affecting women. After office hours and on public holidays, one of the staff members is always on a duty to address emergency issues.

Region: Europe

25. **Armenia:** Operations plan designed on the basis of participatory assessment. Participatory assessment carried out by multifunctional teams involving UNHCR, the government and NGO implementing partners. All sub-project agreements include AGDM commitments. Implementing partners trained on AGDM.
26. **Azerbaijan:** In preparation for the 2012/2013 programme cycle, BO Baku in close cooperation with the Government and Implementing Partners undertook an AGDM Participatory Assessment among the IDP population in Azerbaijan. The findings were duly considered and included in the final plans. (In 2012, a similar exercise will be conducted for the refugee population). Special attention has been given to primary education and in 2011, UNHCR's efforts resulted in full school enrollment of all boys and girls. This achievement will be duly reflected in S&I report as well.
27. **Belarus:** Governmental and non-governmental partners have understood and accepted the necessity of refugees' presence and participation in joint consultative processes and various events at both country and regional levels. (3) We have changed the substance of the quarterly meetings of the inter-agency Financial Assistance Committee, where regular and emergency material aid to POCs used to be reviewed and decided on, into a multi-functional team addressing a wider range of POCs' problems and concerns.
28. **Bulgaria:** 1) In 2011 a meeting was organized with the border officials and prosecutors to advocate for the non-detention and non-penalization of asylum seekers, especially women and children, charged with illegal entry at the border. Consequently some individual cases are being reviewed by the prosecutors and a follow up meeting is planned in February 2012 to agree on concrete actions. 2) Advocacy efforts continue to improve the reception conditions in the government reception centers for asylum seekers, especially families with small children who are accommodated in separate rooms. 3) The Representation has advocated for the timely reunion of family members of newly recognized refugees. 4) The Representation continues to advocate for the consistent application of the principle of derivative refugee status of dependent spouses and children. 5) The Representation continues to advocate for timely release of RSD decisions, especially of families with small children. 6) The Representation has provided to judges in the administrative courts Bulgarian translations of Cols of a few top countries of origin which assisted the judges in their review of the RSD decisions made by the main government agency deciding on RSD applications (State Agency for Refugees) 7) Wide distribution of the Regional Annual AGDM Report in the country to make the government ministries and agencies, embassies, journalists, NGOs, etc. aware of the situation of asylum seekers and refugees in the country and the problems that they have been facing, especially women and children.
29. **Croatia:** The lack of access to legal status for Roma, adequate accommodation for separate children/UAM and the not adequate support to women and elderly returnees as well as asylum seekers was confirmed through regular field visits and MFT working. A joint lobbying/advocacy strategy was developed, which was also reflected in the EU negotiations process. This led to the developments of new projects targeting these shortcomings and a heightened government awareness and readiness to respond. Establishment and activities of UNCT also contributed to better coordination of further assessment and implementation of programmes targeting the most vulnerable. Community building programmes, although limited in its implementation due to budgetary constraints, ensure in-depth assessment of the communities covered and gave a voice and opportunity to women, youth and those with less power in the community. They were given a chance to articulate their needs and learn new skills. New study on sustainability of return that was completed in 2011, in scientific manner collected information on returnee population and produce and abundance of data that could be used for creation of well targeted programmes and public social policies for returning population in Croatia.

UNHCR active involvement and close partnership with the UNCT, the CRO Government, local governments, NGOs, media and international community as created a set of new initiatives, which have improved overall situation of person with specific needs. UN activities and initiatives complement and support Government run programs. Joint public information campaigns addressing violence against women and gender related violence are among those successful activities. Though financial and political constraints remain, UNHCR managed to improve situation of children through new EU funded Roma inclusion project, which addresses lack of status and birth certificates. In addition the office commissioned in 2010 a study to map current structure, legislation and main shortcomings/gaps with regard to UAM/separated children. The study presented also suggestions for improvements, which have become part of the UNHCR and UNCT 2011 activities. The two year joint UN MDGF project started in 2009 created a good basis for the MFT. As in 2010, this facilitated AGDM assessments including five UN agencies, competent government and NGO partners. The quarterly management meetings monitoring implementation of the project were used to jointly analyze relevant data collected during implementation and to draw respective conclusions. The lack of access to legal status for Roma, adequate accommodation for separate children/UAM and the not adequate support to women and elderly returnees as well as asylum seekers was confirmed through these joint undertakings. A joint lobbying/advocacy strategy was developed, which was also reflected in the EU negotiations process. This led to the developments of new projects targeting these shortcomings and a heightened government awareness and readiness to respond.

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30. **Serbia:** In 2011 a multifunctional team (MFT) composed of UNHCR, Govt officials, Implementing Partners, Persons of Concern representatives --all of whom produced a Work Plan and agreed on a method of inquiry. To get sufficient data, a document "Protection Risks/Causes/proposed questions" was produced to serve as a tool in approaching a particular group and identifying their major concerns. AGDM participatory assessment 2011 covered two groups of UNHCR's Persons of Concern: i) those 60+ without family support and ii) singles without their own family support belonging to the group of refugees and IDPs still residing in Collective Centres. The focus was on their future perspectives on improving their general conditions. Eight teams visited eight municipalities and ten Collective Centres and interviewed 102 individuals divided into focus groups by age and gender.
31. **Switzerland:** The Office for Switzerland and Liechtenstein further supports and participates in a project relying on participatory assessment with unaccompanied and separated children from five different Cantons. An AGD-sensitive approach was ensured in the project. The Conseil Suisse des Activités de Jeunesse (SAJV) is carrying on the project with great dedication. The project as a whole includes around 20 children between the age of 13 and 18 from about 9 different countries (Afghanistan, Burkina Faso, Gambia, Guinea, Ivory Coast, Senegal, Sri Lanka, Somalia, Sudan), whereof 75 % boys. The members of the group are accommodated in 5 different Cantons throughout Switzerland, namely Fribourg, Lucerne, Zurich, Basle Stadt and Vaud. [See case study in main report]
32. **Ukraine, Belarus and Moldova:** Multi-functional teams conduct town hall meetings with refugees and asylum-seekers as a regular part of the office's missions. Office continues to follow up on the findings of previous participatory assessments to implement their findings, maintaining an extensive excel sheet of the recommendations and the follow-up. UNHCR regained access to previously off limits areas (detention and temporary accommodation centers) and options open to PoCs to contact the staff by phone were improved. UNHCR maintains regular telephone counseling hours, has improved its electronic tracking of correspondence and phone calls with Persons of Concern in order to maintain clear, consistent communication, and to track follow-up on individual cases. The office meets with DOC's individually and in group session. Vulnerable individuals are prioritized while Government counterparts remain insensitive to most protection issues. IP staff have been closely involved in undertaking their obligations under respective IP agreements and were consulted on the Country Operation Plan during the planning retreat in March 2011, when the previous year participatory assessment findings including newly identified needs and protection risks were discussed and included in the plan and budget. However, the number of Implementing Partners had to be reduced due to capacity reasons which means less outreach in some regions.

The government continues to have gaps in documentation of asylum-seekers. These gaps affect men, women and children. UNHCR advocates actively for the improvement of this situation, sending the authorities a monthly letter with a list of undocumented asylum-seekers. These persons are issued with UNHCR protection letters. Individual registration of women has been equally affected by the periods of system's suspension when all experienced extensions of documents or obstructions to access to lodging claims. As for equal participation of women of concern in management and decision making structures, special attention and support was given to women through the project with the IP Rokada. Also, due attention was given to spouses of those in detention.

Region: MENA

33. **Mauritania:** A multifunctional team was established and access to both women and men staff was granted. UNHCR has carried out two participatory assessments in 2011 for the two PPGs covered by its mandate in Mauritania. The annual Country Operation Plan for 2011 was designed on the basis of the needs identified through participatory assessment meetings held with different categories within the population of concern including women, children and elderly persons. The 2011 planning was based on the outcome of participatory assessments carried out with the different sectors of the population of concern. Meetings with adult females and males, adolescent girls and boys as well as elderly people allowed the Office to gather a wide range of information on which the planning process was developed. The Comprehensive Needs Assessment for 2011 reflected the needs and the protection challenges expressed in the course of the various participatory assessment meetings. The stakeholders involved in the participatory assessments, including UNHCR, its Partners and the representatives of the people of concern, together validated the results of this exercise. All data on the urban refugee and the returnee population are disaggregated by sex and age. The distribution of assistance to people of concern is prioritized on the basis of criteria of vulnerability established through the analysis of these data. Similarly, proactive identification of vulnerable cases for possible submission for resettlement relies on these data. The draft law on asylum reflects UNHCR's commitments to the mainstreaming of age, gender and diversity issues. Similarly, AGDM principles have been systematically included in all training schemes offered to national authorities and partners on refugee law and the rights of people of concern. The participatory assessments held by UNHCR in 2011, included a short training of all stakeholders involved in this exercise on the AGDM approach. The Community services administrator of UNHCR's Protection unit conducted this training. The results of the participatory assessments allowed the office to accurately assess the needs of the people of concern and to better put into practice the AGDM approach at each step of the planning cycle.
34. **Yemen:** A participatory evaluation on education in Kharaz camp primary schools took place. During two days, women and men from UNHCR, UNHCR Implementing Partners, Government, host community, refugees and refugee students discussed the education process, identified the gaps and suggested the solutions with clear indication to the community role. The outcome of the participatory evaluation was reflected in an action plan. All the planned education activities in 2012 were based on the action plan and reflected in UNHCR IP education project for 2012. In Sana'a a participatory assessment was also done

2.4.2 Enhanced protection of women and girls

Actions for enhanced protection of women and girls : Direct Impact on Protection of Persons of Concern

Region: Africa

1. **Benin:** 100% adult refugee women were registered and received individual documentation. In urban areas, 100% women and girls of reproductive age received sanitary materials. 100% surviving victims of SGBV who were identified received the required assistance, including legal assistance for prosecution of identified authors of the violence. A SOP exists and is implemented in both urban and rural areas.
2. **Central African Republic:** The office supported the establishment of women groups for agriculture involving contribution from FAO, construction of a women center with facilities that can accommodate safely women survivors of violence resulting from witchcraft accusation. The facility is managed by a committee composed of strong women from women groups. The office has constructed and equipped restaurants (requested by women). Legal Counselling clinics have also been established and managed by the national women lawyers association (AFJC).
3. **Ghana:** All Ivorians arriving in Ghana and seeking asylum have had level I & II registration done. Data has been entered into ProGres and disaggregated by sex and age and vulnerability providing adequate information for follow-up. Women who experienced SGBV both in COO and in COA have been duly recorded and provided the necessary follow-up. All pregnant women who are malnourished are supported with supplementary feeding to boost their status. PMTCT is available to all pregnant women at both camp clinics and referral hospitals. All women of child bearing age were supplied with hygiene kits supplied by UNFPA. Women are well represented in all committees on the camp and there is a women's committee which provides support with issues specifically related to women.
4. **Mozambique:** Women are fully involved in decision making process as 50% of the camp committee and 50% of the food and NFI committees are women. Significant efforts have been achieved in women empowerment through vocational training, livelihood and self-reliance activities. Women at risk who were identified in participatory assessments and proGres software were supported according to their needs and to some extent some of them have benefited from the on-going resettlement programme."
5. **Namibia:** A complete sanitary kit, consisting of soap, underwear and disposable sanitary napkin is provided to women and girls of reproductive age. Refugee women are involved in the management to ensure fair distribution. Additional sanitary materials are also kept at the school and health centre for emergencies. Adequate budget is allocated for full sanitary provision on a monthly basis.

Campaigns against teenage pregnancy were carried out with involvement of High level Officials from Ministries of Home Affairs, and Education at the invitation of the Representative for effective results. Funds were acquired from Regional Office to respond to the issues raised as factors that contribute to the teenage pregnancy. The campaign involved girls (11 years and above and boys 13years and above) and teachers, and their views as to the cause and effect were taken and reflected in the plan of action in response to this problem.
6. **Regional Representation in Dakar:** In each operation, all female adults were given the necessary attention with regard to Reg. and Doc. ProGres as the standard registration tool used in GAMB,SEN,MLI and GB, to support various reg.and verif. of Persons of Concern including female adult. Lobbying was also done with Gov. of SEN and MLI for reg.and doc. of all ref. and the issuance of ID cards including female adults, one of the main protection concerns raised by female refugees during various participatory assessment exercises - The signed MOU with Gov. of SEN allowed reg. and doc.of all Persons of Concern in SEN including female adults .1805 ref. from 05 years were issued ID cards as of 31 Dec.2011.The distribution is on-going. B2. 03 Community outreach workers assigned in the field, through sub agreement with IP GAFNA to strengthen the participation of women in local integration activities and in decision making in the GAMB- (country report) -Empowerment of ref.women is one of the key objective of L.I activities in UNHCR operations. This has been done through , livelihoods activities (90%), Management Training (30 F), and skills trainings .B3: Women at risk identified through the 2011 Reg./verification exercises conducted in SEN and MLI (appropriate CS and social workers deployed to ensure effective identification)- Weekly counselling sessions held with protection staff and partners, HRIT used to profile women at risk (15 women). Appropriate and tailored response was found for their situation, through effective case management, referral, and economic empowerment activities. For e.g.: 09 women at risk from GB and SEN were submitted to resettlement- Livelihoods alternatives provided as solutions to 17 transactional sex cases.(2011 MYR).
7. **Uganda:**As concerns reproductive health and HIV/AIDS, more than two-thirds (69%) of pregnant women attend antenatal care four times during the course of their pregnancy (57% in 2010), and 85% of pregnant women delivered at a health centre (76% in 2010). The condom distribution rate is 1.4 condoms/person/month versus 1.0 in 2010 (standard 0.5 condoms/person/month). The proportion of pregnant mothers accessing services to prevent mother to child transmission of HIV improved to 88% from 83% in 2010.
8. **Zambia** was one of only two African countries to host the precursor to the Global Dialogue with Refugee Women held in the context of the 60th anniversary of the 1951 Convention. Some of the consequent results are the dismissal of three teachers for coerced sex with students, targeted assistance for women repatriating to Angola, the prosecution and stiff sentencing of one refugee man convicted of having defiled and impregnated a 13 year old refugee girl and, in general, greater awareness among refugee women and girls of their rights, gender equality and how to pursue justice. As a result of the Dialogue-process, there seems to be greater awareness among refugee women, and men, of the rights of women, the harms of gender-based violence and the criminal responsibilities provided for under national law. Through four 'mini-dialogues' – two with women and two with men encompassing approximately

600 refugees – convened in the urban area prior to the main Dialogue event, which brought together 20 women and 3 men from the three locations, a sizable segment of the refugee population was directly reached with information on gender equality, the 2011 Anti-GBV Act and women's rights. The refugees who participated in the main Dialogue have pledged to act as 'leaders for equality' and have developed a community-based action plan. While the group still needs regular support in order to remain active, UNHCR does see a greater engagement in the community on these issues. In connection with the 16 Days of Activism, UNHCR inter alia supported a workshop on empowerment and mentoring for 10 adolescent refugee girls. Participants said that the workshop had provided a unique opportunity to discuss sensitive issues affecting their daily lives and the importance of education and economic empowerment. UNHCR assisted a 13/14 year old refugee girl and her parents to pursue a complaint against a refugee who had defiled and impregnated the girl when she was only 13 years. UNHCR and AAHI provided counselling and advice to the girl and her parents on numerous occasions, facilitated their reporting to the police and presence during court hearings and promoted a speedy announcement of the judgement, which was conviction for defilement and sentencing to 20 years in prison. This case has contributed to increased awareness among the refugees, especially regarding criminal responsibility and the legal channels available. SOLWEZI: Strides were made in the empowerment of women during the dialogues held with women and girls, men and boys. During the dialogue meeting it was resolved that the all female food management committee be formed and this was implemented. In the camp leadership, there is a deliberate policy that the Block Vice Chairperson is female. Numerous sensitisation meetings were held during the year with facilitators drawn from the Judiciary and Police. UNHCR Zambia submitted confidential comments to the CEDAW and contributed to the joint UNCT submission to the CEDAW. As a result, the Committee inter alia included the following recommendation to the Government of Zambia in its Concluding Observations: "Take steps to investigate, prosecute and punish all perpetrators of violence against women refugees, to implement gender sensitive approaches to asylum claims, and to continue to collaborate with the international community, especially the Office of the United Nations High Commissioner for Refugees (UNHCR), in these efforts."

Region: Americas

9. **Ecuador:** UNHCR supports and strengthens the National Network of Safe Houses, consisting of five safe houses providing services and protection to SGBV survivors. With UNHCR, the response capacity of this network has been strengthened, particularly with regards to psychosocial support, legal assistance and intake capacity. UNHCR has also provided technical support to the coordinating committee of the network, which has led to improved communication channels, referral mechanisms between the safe houses, as well as documentation and information management.
10. **Haiti:** The UNHCR Safe House Program was set up end of June 2011 to create after the devastating 2010 earthquake in Haiti where more than two years later internal displacement remains a significant problem with 550,560 individuals still living in camps in and around Port-au-Prince and elsewhere in the country. The programme's main objectives are to create: 1) solidarity schemes; 2) Health and empowerment for women; 3) legal, medical, and psycho-social support; 4) livelihoods and business plan development; 5) education grants for children; 6) long-term housing with financial support for one year; 7) case management; 8) call center 24/7; and 9) data collection tool.

Region: Asia and Pacific

11. **Japan:** Ensured that female refugees receive appropriate consideration for the Refugee Higher Education Program 2011.
12. **Regional Representation Beijing:** Throughout the year women's empowerment and SGBV were prioritized in protection and programme planning in all phases - with active participation of women. To enhance their decision-making role in the family and community, a separate assistance package only for female refugees has been established-paying refugee females cash assistance for the sanitary materials and other female hygiene items, directly payable to female refugees. Female interpreters have also been provided to them during interviews and hospital visits.
13. **Sri Lanka:** Women at risk who have been identified during regular and ongoing protection monitoring in all IDP sites and return areas are supported with livelihood assistance and vocational training to become self reliant. Individual women who fall under the category of being an extremely vulnerable persons received additional assistance tailored to their specific needs or were referred to relevant Government or non-Government actors for assistance and this category included survivors of GBV and female headed households.

Region: Europe

14. **Bosnia:** For women victims of violence, breakthroughs are being achieved in reaching groups who for years have been unable to find meaningful forms of support, by working with them on livelihoods projects that help to rebuild their sense of dignity and self-worth and make it possible for them to accept counseling and psychiatric care. For elderly women and single female heads of household displaced by the war and who have lived for 16 years in unacceptable conditions in 'temporary' collective centres, help may be at hand due largely to UNHCR's advocacy efforts. The government plans to request a loan from the CEB for a project, prepared with UNHCR support, to replace the remaining collective centres with improved social housing. A UNHCR-sponsored regional housing programme agreed by the government of BiH with three neighbouring countries will also provide 14,000 dispossessed refugee, returnee and internally displaced persons with accommodation, if the donor conference to be held in Sarajevo in April 2012 is successful.
15. **Germany:** UNHCR's lobby efforts with the German MFA and German diplomatic missions (i.e. Riyadh, the authorities to Khartoum, Nairobi with regard to the requirement to obtain identity documents as a prerequisite for processing the visa applications have in several family re-unification cases of (single) underage and women refugees and their immediate family sensitized the vulnerable situation of these specific refugee groups in their host countries/countries of asylum and resulted in a more adequate processing of the refugees' visa applications

16. **Macedonia:** The operation maintains a multidisciplinary community center integrating the AGDM principles. In the CC refugee women participate actively some as volunteers and some receive honoraria. All women have access to pre and post natal counseling, sanitary materials, vaccination and psycho-social counseling. The community center provides a wide range of educational support activities which have been mapped out jointly with the refugee parents and children. The impact is increased enrolment and retention rates irrespective of gender.
17. **Moldova:** Sanitary and hygienic items provided by UNHCR are regularly distributed by partner agencies. Special activities and programming provided by UNHCR partners Ave Copiii and the Charity Center for Refugees target women. The Office established a Women's Initiative framework to more deeply involve women beneficiaries in outreach and monitoring of aid delivery and to challenge stereotypes and promote the strengths and resources refugee women bring to the community.

Region: MENA

18. **Mauritania:** 100% of returnee and refugee women/girls were provided with hygienic kits, which included the following items: bucket, sanitary napkins, soap, liquid soap and panties. Two distributions of sanitary material were made for all refugee and asylum seeker women of reproductive age (169 persons). Profiling of refugee female-headed households enabled to identify categories at risk and establish priorities for the distribution of assistance.
19. **Syrian Arab Republic:** Sanitary napkins have been distributed to all women and girls of reproductive age. There were some questions at the beginning of the year concerning quality, but these were addressed and the feedback on quality is now positive. On another note it is strongly suspected that large parts of the distributed items are not used, but instead sold at a price below their purchasing value. Options to address this issue are currently being discussed while remaining committed to the outcome required by AGDM. Individual registration is carried out and every adult female (above 18) receives a separate refugee certificate. During registration: special needs of all family members are assessed and reported accordingly in Progress. Apart from group notes in ProGres, additional individual notes are taken for each individual (including women). These comments are added to the individual notes part in ProGres. Females above 18 may also request to be split to a separate file than their parents. Once a female is the person with the claim she is designated as principle. i.e. if the women dependant is approaching with a concern all notes and follow up actions are recorded on her progress assistance page. This was not the case in 2010 were all concerns were only noted on the page of the principle applicant. Women form the large majority in the group of outreach volunteers which regularly provides input and information to the Office. Similarly, women are the majority of participants both in focus groups and participatory assessments To certain extend the women are overrepresented and therefore targeted measures has been put in place to ensuring that also the voice of men is heard.
20. **Yemen:** Government registration centers are supported by UNHCR and provided with interpreters; Somali women are receiving individual documentations (ID cards). Non-Somali refugee women receive mandate refugee status through UNHCR after RSD. Marriage and divorce certificates also provided to all nationalities according to the domestic law. When distributing the ration cards in the refugee camp UNHCR are considering the women as the head of the family and cards are provided under their names. Women are involved in decision making through their representation, which in some committees constitute 50% and through certain mechanisms such as community mobilisers/outreach workers. HRIT was integrated in the registration tool of UNHCR IP DRC at the reception centers where refugee women at protection risks, such as SGBV, trafficking or any other risks are identified immediately upon arrival and referred to concerned partners and UNHCR in the camp and urban areas. Women at risk were also identified through UNHCR partners Interos and ADRA drop-in centers after arrival. Welcome packages distributed to all women new arrivals contain sanitary materials; and it is distributed on a regular basis in refugee camp. A program to empower women is in place, it includes non-formal education, vocational training, training on managing small businesses, micro-credit, advocacy for employment, support the groups at risk (women with disabilities, women engaged in survival sex and single mothers).

Actions for enhance protection of women and girls: Direct Impact on UNHCR and IP operations

Region: Asia and Pacific

1. **Australia:** In the case of children, UNHCR has insisted on a focus on Government practices of children and other vulnerable individuals in immigration detention and has been highlighting alternatives within, and to, detention for children and families which has resulted in a larger number of children being placed in community care arrangements not detention. UNHCR has also lobbied effectively with other key stakeholders in order to change the current "guardianship" of unaccompanied children laws and practices in Australia and changes of Government policy seem likely. The Regional Office has worked closely with its national private sector fundraising association to promote awareness of gender issues in refugee camps overseas - through fundraising appeals, promotion campaigns and media visits to refugee situations. PSFR events supported by the Office have raised funds and awareness for refugee women maternal health kits in Uganda and Kenya. The Office has worked closely to strengthen the resettlement intakes in both Australia and New Zealand around particularly vulnerable groups.

The meaning and scope of 'protection' has been emphasised as including women's and children's rights and, in particular women's rights to full and active participation in any relief. The work started by the Regional Office in 2008 has been further consolidated in 2011 with a particular emphasis on promoting women participation in E-centre workshops held in the Federated States of Micronesia. In this context, the meaning and scope of 'protection' has been emphasised as including women's and children's rights and, in particular women's rights to full and active participation in any relief. The work started by the Regional Office in 2008 has been further consolidated in 2011 with a particular emphasis on promoting women participation in E-centre workshops held in the Federated States of Micronesia.

2. **Islamic Republic of Iran:** UNHCR Iran has devoted almost 100% of the available resettlement slots to the women at risk criteria. This is in recognition of the difficulties that exist with regards to the protection of women in the country. Additionally, UNHCR has continued to advocate - rather successfully - for better treatment of women and children, especially single female heads of households, in any decisions or interventions by government.

Region: Americas

1. **Argentina:** In 2011, UNHCR has participated and led the process to establish a “Protocol for the protection, assistance and search of durable solutions for unaccompanied or separated children seeking asylum” that was adopted and partially implemented. The Protocol refers to the initial protection, reception and care arrangements for unaccompanied and separated children as well as to the implementation of a special procedure for the determination of international protection needs. It is the first agreement of its type in Argentina, and implies that since its introduction, initial care arrangements, accommodation and protection arrangements for unaccompanied and separated children are under the direct responsibility of national authorities.

Region: Europe

1. **Austria:** At the official Austrian commemoration of the sixtieth birthday of the 1951 Convention which was co-organised by UNHCR a refugee woman from Chechnya gave a keynote address; refugee women featured prominently in all public information activities concerning the commemorations. UNHCR Austria and Germany as well as the German IP B-UMF organized the translation of the Separated Children of Europe Standards of Good Practice into German language. The document will be published in April 2012.
2. **Russian Federation:** UNHCR maintained and further developed networking with women’s NGOs, inter alia through its chairmanship of the UN TG on Gender; joint action with OHCHR allowed advocacy to develop and careful awareness raising on the situation of displaced and conflict affected women in the North Caucasus.

2.4.3 Enhanced protection of children, including adolescents

Actions for Enhanced protection of children, including adolescents: Direct Impact on Protection of Persons of Concern

Region: Africa

1. **Benin:** In Agamé refugee site, the governmental partner assists families with the collection of birth certificates from the communal office, thereby making it easy for parents to enter in possession of their children's birth certificates and preventing possible related problems.
2. **Central African Republic** Participatory assessment discussions with girls between 11 to 15 years revealed the disfunctioning of the school as teachers and students had language barrier. Following the exercise, a meeting between Unicef, UNHCR and the IP resulted in the review of the school programme and enrolment in order to have quality teaching in respect to standards.
3. **Dem Republic of the Congo:** In Kinshasa, the UNHCR in cooperation with the national government (commission nationale pour les réfugiés, CNR) have trained member of BID panel (Ministries of Justice, Social affairs, Gender, UNICEF, implementing partner) on the BID. The government members was identified through the CNR and supported in IT equipment (computers and printers) in order to ensure confidentiality of sensitive BID case. This panel is under the lead of the ministry of justice. Regarding point C3: In the context of the voluntary return of Angolan refugees, UNCHR have advocated through the National Refugee Commission to obtain an auxiliary judgment for 773 children in Bas Congo and 98 in Kinshasa and still follow up. In the same order, UNHCR have provided support in IT equipment to the Ministry of justice (peace tribunal of Mbanza ngumgu, Matadi in Bas congo and Kalamu in Kinshasa).
4. **Ghana:** Percentage of children as reported in the SIR is at 96% on the average but this figure includes children who are not registered and those above the primary school age but in primary school. National policies require that all children are registered at birth. Deliveries took place in the camp clinics and/or at the referral hospitals and they were duly registered. Child friendly spaces were created with support from UNICEF and Save the Children. All UAMs/SC have been registered and identified and BIDs have been conducted for 12% of all registered UAMs at the new camps.
5. **Mozambique:** Protection gaps identified by boys and girls during participatory assessments were shared with education taskforce which comprises of parents, teachers, students and refugee leaders. Many of the protection gaps

identified were adequately addressed in the Country Operation Plan for 2011. These include procurement of writing materials for high students as well as rehabilitation of Former French School. In the vocational training ten graduate students from carpentry and welding courses were supported to do internship in Nampula town. Incentives were paid to the organizations that admitted the students and the students were supported with lunch and transport allowance.

6. **Malawi:** UNHCR provided free education at preschool, primary and secondary levels. The level of enrolment is above 80 per cent of school aged children. The major challenge is lack of tertiary education opportunities which so far has not been adequately addressed
7. **Namibia:** Based on participatory assessment and discussions on teenage pregnancy, Youth Centre was expanded to accommodate recreation activities that were recommended as a solution to teen age pregnancy and construction of the building is underway. This was aimed at reducing idleness of youth and enhance their involvement in constructive activities. With a total of 1122 children (549 females and 573 males) are of primary school going age, only 863 (females 419 and males 444) were enrolled and attend school in the settlement. Refugees in Namibia are long stayers in the country and are mobile. The 259 children of primary school going that are not enrolled in the settlement school, could be attending school elsewhere in the country
8. **Senegal:** The standing issue of issuance of birth certificates to ref.children born in COA has been definitively solved, through advocacy initiatives conducted by the Ministry of Justice. Mechanism such as "mobile court" is now in place for the issuance of birth certificates to all MAU refugee children born in SEN. In addition, a joint technical committee involving SEN and MAU set up to follow-up and find solutions to civil status issues of ref.children born in SEN and repatriated to MAU without birth certificate or those for whom birth certificate already issued needed revision due to mistakes. As result, a list of 1241 already repatriated to MAU was shared with the GoV of SEN for regularisation - 911 birth certificates issued to MAU ref. children in 2011(SPAR). C4: My operation has provided protection of all UAMs/SC: BID /BIA procedures implemented for the 100% of UASC/SC (17 cases) including children at risk (for e.g.:3 siblings for which the two parents are in detention in Senegal). BID/BIA procedures included in the normal protection procedures in the offices (Country report). 01 UAMs/SC reunified in CoA with the support of ICRC, while others are still awaiting tracing results. Training on BID conducted to strengthen operational capacities for the implementation of BID procedures (47 UNHCR, Implementing Partners and Government staff in the GAMB, and BKF trained).SOPs draft were developed in these operations.

Region: Americas

1. **Brazil:** The national public registration system is fully functional and 100% of newborn children of concern are registered and provided with Brazilian nationality. BID is systematically used by the national authorities. Unaccompanied and separated minors are provided with protection through the national system. Family tracing partnership with ICRC is fully functional
2. **Costa Rica:** During 2011 staff (UNHCR and partner) has been further trained in child protection and the implementation of BID for children and systems have been put in place. Working relations with the National Child Welfare Institute have improved, and a letter of understanding is set to be signed in 2012. The office, together with IOM and numerous other partners, organized a Youth conference for national, migrant and refugee youth in February 2011, and a youth network promoting integration has been established as a result of the conference. Issues such as xenophobia, access to education/health, documentation and access to employment are being addressed by the youth
3. **Ecuador:** UNHCR has developed training processes related to sexual and reproductive health as well as HIV prevention, which were facilitated for adolescents (refugees and Ecuadorian) who live in the northern border provinces (especially Esmeraldas). These activities were implemented within several participatory spaces for adolescents, such as "Youth Houses" (Casas de la Juventud) and other spaces linked to local authorities and/or public institutions. Moreover, these activities have helped in the reduction of forced recruitment risk, due to the protection space created for the adolescents.

Region: Asia and Pacific

1. **Japan:** During the aftermath of the Great East Japan Earthquake, UNHCR BO Tokyo provided emergency relief materials including solar lanterns, which provided an opportunity for the Office to highlight the protection needs of refugees and particularly refugee girls and boys around the globe. Signed an implementation partnership agreement with the 2011 established Stateless Network, providing legal counselling to promote access to nationality, especially for children who were born in Japan to stateless parents.
2. **Kazakhstan:** In 2011, UNHCR Representation in Kazakhstan engaged a new Implementing Partner - "Women's League of Creative Initiative" (WLCI) - to assist UNHCR to make the qualitative improvement in the education sector for PoCs' children as well as enable individuals and families to meet essential basic needs in a sustainable manner reducing their vulnerability and long-term reliance and dependency on humanitarian assistance. Summer pre-school classes for 6-7 year-old refugee children were organised by WLCI in summer-time to prepare children for primary school. Language and accelerated training/bridging courses were conducted on a regular basis. After violation of children's rights to have access to school last year and further efforts of key players in the field of education to ensure the equal access to education for all children, a governmental Decree was issued allowing refugee and asylum-seeker children to be enrolled into public schools. However, enrollment of undocumented children still remains a challenge and UNHCR currently makes efforts to tackle this issue with the Ministry of Education. In this regard, UNHCR met with the UN Special Rapporteur on the Right to Education in September 2011 and brought to his attention the discrimination of undocumented children with regard to access to primary and secondary education. To raise awareness among main partners in protecting the rights of children, the Best Interest Determination workshop was conducted in 2011. SoPs on BID were duly developed. In addition, UNHCR annually allocates funds for procurement and distribution of school uniforms, textbooks and school supplies for the most vulnerable refugee and asylum-seeker children.

3. **Malaysia:** Standard Operating Procedures have been developed in collaboration with relevant partners and are being followed consistently. Participatory assessments are an ongoing element as well as ad hoc assessments are conducted in order to ensure there is as full an understanding of protection risks within the community as is possible

Region: Europe

1. **Azerbaijan:** Special attention has been given to primary education and in 2011, UNHCR's efforts resulted in full school enrollment of all boys and girls. UNHCR has also organized several separate information/discussion sessions with refugee children and youth in the age group 12 to 18 years with focus on the Convention on the Rights of Children.
2. **Belarus:** children of refugees and asylum-seekers in Belarus have access to free-of-charge education from basic to university level. However, at higher education level refugee children, like Belarusians, have to pass entry exams and compete with others. UNHCR has taken the following actions to improve the educational performance and competitiveness of refugee children: (1) Extracurricular/tutorial classes for refugee children at school No. 136 in Minsk; (2) week-end classes in mother tongue for Afghan and Georgian children to maintain their identity; (3) Russian language classes for refugee children and their mothers; (4) evening Russian language classes for adults; (5) vocational training and computer courses for adolescents; (6) secondary employment for adolescents. C3 - Every child born in Belarus is registered at birth and his/her parents are issued with a birth certificate. This fully applies to children born in a/seeking and refugee families.
3. **Bosnia:** For children of the Roma population, whose families are at risk of statelessness due to lack of basic civil documentation, UNHCR and its national NGO legal counseling partner have helped more than 2,000 persons to obtain birth certificates and other civil documentation that is essential for enabling them to have access to rights of citizens and to basic services. UNHCR is also working with a group of concerned partners and government departments to devise a legal framework and a code of practice that will ensure that newborn Roma children are no longer prevented from receiving birth certificates, thereby stemming at the source the causes of the continuing risk of statelessness.
4. **Germany:** UNHCR lobbied vis-à-vis the BAMF to take into consideration the best interest of the child and the risk of human rights violations when deciding on the transfer of UASC or vulnerable cases as pregnant women or traumatized persons to specific European countries (individual cases on file). Guided by UNHCR, UNHCR Germany's IP B-UMF started a new three year project in 2011 on the development of guidelines dealing with the participation of asylum seeking and refugee youth in youth welfare centres and refugee homes. In 2011 approx. 40 UASC have received first trainings, which will be continued in 2012. A "concept team" of UASC will then discuss their ideas of active participation in youth welfare homes with experts. As a next step respective guidelines will be developed and be implemented in selected youth welfare homes. An "evaluation team" will then, together with the B-UMF, examine the implementation of the concept. The results of the project will be made public in a conference and a publication which then will be available at the homepage of the IP (www.b-umf.de).
5. **Moldova:** All school-age children are enrolled in school. Special supplemental programming targeting children is made available by UNHCR Implementing Partners the Charity Center for Refugees and RCTV Memoria. UNHCR Partner Ave Copiii provides other assistance for children. Children are offered social and life skills training to raise awareness of their rights. Adults involved in higher education include 3 persons who benefited from the DAFI scholarships; a further six other beneficiaries benefited from 40-70 percent scholarships at university funded by UNHCR. Since 2010, UNHCR Regional Representative Kyiv has ensured access to DAFI scholarship programme to the students from vulnerable refugee families in the sub-region, including Moldova, who meet strict DAFI selection criteria.
6. **Montenegro:** Refugee children are received in the school system but UNHCR has no data of enrolment as the government does not disaggregate data of enrolment based on refugee/non-refugees. Information is that most refugee children start school. RAE refugee children are however frequently dropping out of school, most from 11-12 years of age when girls according to tradition will be prepared for marriage and boys will have to take part in the financial responsibility for the family. UNHCR has no programme to support the RAE children to stay in the school. A programme for educational inclusion ended in 2010, partly due to budgeting constraints.
7. **Tunisia:** The BID panel has been fully functional since September 2011. All the identified UAM have had their BID process initiated and by December 2012, some 15 percent only were still awaiting the formal determination of the most suitable durable solution. Resettlement countries have positively responded to UNHCR's appeal for resettlement spaces for UAMs, with Norway offering close to 50 spaces to UNHCR Tunisia.
8. **Turkey:** UNHCR enters data into ProGres regarding all newborns. BID is initiated for all separated children, children of single parents, children in any kind of emergency situation including married minor spouses. UNHCR Turkey works with four child psychologists. All separated children (including married minor spouses), accompanied children in emergency situations, children with single parents, accompanied children where the relationship with parents can't be proved are registered on the same day of approach and BID is conducted. Consistent data management on BIDs is updated in ProGres.

Region: MENA

1. **Lebanon:** Main achievements in 2011: - Net enrolment rate at primary level is 96%, - Active education working group; - School identification and monitoring system for children-at-risk (including drop outs) established; - Legal aid extended to support birth registration of refugee children; Save the Children deployed for two years to strengthen child protection within UNHCR

2. **Mauritania:** All refugee children attend school at primary and secondary level. Considering the low level of schooling of returnee children UNHCR and its IP Intersos carried out some sensitization groundwork in order to strengthen parents' awareness on the importance of registering school-age children in schools. In parallel UNHCR and its partner encouraged the involvement of returnees in the parents association implemented in primary schools located close to returnee sites, UNHCR also organized, in collaboration with UNICEF and regional directions of the national education, pilot alphabetization courses and catch up classes to facilitate their integration into the Mauritanian public school system. Thanks to these measures, at the end of 2011, the school attendance rate of returnee children throughout the regions reaches 56% for returnee children aged from 6 to 17 years old (79% from 6 to 11 Years old, 7% from 12 to 17 year old). This is a large increase from attendance rates for the population while in the country of asylum. 60% is also approaching the national average for Mauritania in region where all social infrastructures are lacking. It is on target with the national average of 60% which at the early stage of return is very positive in the context. Literacy courses in Arabic were extended to all returnee adolescent boys and girls in 2011. Best interest assessments were carried out for all unaccompanied minors seeking asylum in Mauritania as well as for children in the context of resettlement. Family tracing has been pursued in collaboration with ICRC and referral mechanisms were discussed with authorities and other child protection agencies for UAMs whose asylum claims were rejected.

100% of returnee and refugee women/girls were provided with hygienic kits, which included the following items: bucket, sanitary napkins, soap, liquid soap and panties. Two distributions of sanitary material were made for all refugee and asylum seeker women of reproductive age (169 persons). Profiling of refugee female-headed households enabled to identify categories at risk and establish priorities for the distribution of assistance.

Actions for Enhanced protection of children, including adolescents: Direct Impact on UNHCR and IP operations

Region: Asia and Pacific

2. **Japan:** All funding proposals submitted to GoJ reflected AGDM principles [what does this mean?].

Region: Europe

1. **Austria:** Conducting the project "Support for Authorities Conducting Asylum Procedures for Unaccompanied or Separated Children" which was awarded funding by the national European Refugee Fund and the Ministry of the Interior, the Office provided substantial AGD-sensitive input for internal Federal Asylum Agency guidelines on the handling of asylum claims of (separated) children and laid the basis for an AGD-adequate information brochure targeting child asylum-seekers through auditing all procedural steps in the asylum procedure and interviewing 69 unaccompanied or separated boys and girls from eight different countries of origin (verification source: project reports)

2. **Russia:** Demonstration of best practice in handling of care for unaccompanied children was included in a study tour to Germany for FMS and Red Cross officials, focusing on reception standards.

Region: MENA

1. **Lebanon:** Main achievements in 2011: Training of 35 UNHCR and NGO staff, including refugee outreach workers on SGBV undertaken, with focus on engaging more with men. SGBV SOP revised (yearly) and reporting mechanism strengthened- SGBV SOP for north Lebanon drafted (new refugee influx).

2. **Yemen:** School dropout was discussed during the participatory evaluation of the education in the camp, the issue was discussed with parents, school management and community representatives, all agreed to raise awareness to prevent children from dropping out of the school. UNHCR local partner in Aden reintegrated the children who attend literacy classes to the formal education through coordination with the National Office of Education. Poor children dropped out of school were identified and provided with school material and their school enrolment was facilitated. 2- Vocational and skill training, literacy classes, language courses (Arabic & English), computer courses, sport activities and Access to Internet are in place for youth and adolescents persons in Youth clubs that are supported by several Implementing Partners. 3- Most refugees can register their children at birth (if the child is born in Yemen) and receive a birth certificate, and coordination mechanisms are in place with the civil documentation office in the camp and urban areas. 3- Yemen has a holistic program for assisting UAMs and separated Children. Children are identified up on arrival, registered and referred to UNHCR IP in the camp and the urban areas, where they are received and BIA is done for each child to identify his/her protection risks, children who experienced abuse are referred to Intersos for support and follow up. UNHCR IP provides children with accommodation with foster families for young children for older children they are accommodated in shelters in groups with the supervision of the community member. Their basic needs are responded included food and language courses, schooling vocational training and health services are also provided. Non Somali children are fast-tracked for RSD interviews. Children are counselled about the risk of crossing the border with Saudi Arabia. However, some still attempt the irregular crossing. A focal point is assigned in UNHCR CS to follow all issues related to UAMs. BID panel is in place and BID is done for children according to the guidelines. UNHCR CS conducted training on BID for UNHCR, Implementing Partners and government staff. 4- UNHCR in collaboration with IOM and the government of Yemen established an emergency response mechanism to protect children victim of trafficking. Children are separated from traffickers upon arrival and kept in a safe shelter, case reported by UNHCR to police and traffickers are occasionally arrested. IDPs: UNHCR in collaboration with UNICEF has made sure that special emphasis is put on Protection of children affected by internal displacement in the South. The profiling gathered information on children needs in Aden, Lahj and Abyan and the Community centres identify and assist children at risk. Similar profiling is done in the north.

2.4.5 Sexual and Gender-Based Violence (SGBV)

SGBV Actions: Direct Impact on Protection of Persons of Concern

Region: Africa

1. **Benin:** 100% of identified survivors of SGBV cases were assisted medically, materially and legally. Between 2010 and 2011, the number of SGBV cases were reduced to less than a portion of one third (10 and 03 respectively) thanks to an aggressive all inclusive and ongoing sensitization campaign strategy
2. **Namibia:** Cases of SGBV are received and treated with urgency and the culprits face the law and if they are employed they lose their jobs. The SGBV committee is composed of UNHCR, Police, Government Agencies and the concerned. Implementing Partners. Follow up of cases in court is carried out in coordination with the Government Social Worker. The SGBV committee meets monthly to report, analyze and make follow up of the cases that arise. Psychosocial support mechanisms are in place for rehabilitation. A total of 177 persons (79 females and 98 males) UNHCR and Partner staff received training in SGBV. A total of 416 persons (198 women and 218 men) refugees and asylum seekers received training on SGBV.
3. **Malawi:** The number of SGBV cases reported in 2011 has been substantially reduced. Many of the reported cases were found to be false aimed at reinforcing the chances for resettlement. The GBV committees are operational and handle together with the Health services and police most of cases in the camp. UNHCR follow up action is also punctual and effective. NHCR actively follows all SGBV cases reported or known to the organization. Follow up actions include counseling, medical support and other referrals for appropriate response. All women and girls were given sanitary materials.
4. **Regional Representation in Dakar:** The Prevention and Response to SGBV has been part of the 2011 comprehensive protection strategy. The analysis of 2010 SIR data conducted by the Regional Representation Dakar led to the development of actions needed to be taken in 2011. For e.g.: SIR 2010 data indicated that SGBV issue was not a priority in most of operations across West Africa: No cases were reported, no training conducted for UNHCR and IP staff and for refugees. To address this, in 2011, capacity building activities were undertaken for UNHCR, Implementing Partners and Government staff (48 persons) including refugees in BKF, SEN and GAMB- SGBV SOPs were also revised and updated in collaboration with relevant partners and refugees, Persons of Concern trained on SGBV in SEN and BKF (114 ref), focus groups discussions and counseling on SGBV conducted with ref.in urban area in DKR (120 persons) - (Country report). SGBV and SEA training promoted and included in the 2011 protection trainings (RSD, RST, Registration etc.). Resources allocated to operations through sub agreement, to ensure fully implementation of SGBV prevention and response- Targeted actions taken to support women at risk of SGBV in term of provision of accommodation and livelihoods (as solution to transactional sex in the GAMB for 17 ref. female)- HRIT was used to profile women at risk in SEN (15 women). Outreach community workers (Community development Assistants) were assigned in the GAMB through IP GAFNA to monitor the implementation of LI activities with focus on any gaps which could led to SGBV- In GB, a IP with expertise in protection (PLAN International) was selected for the effective protection of refugee women and children including prevention and response to SGBV.
5. **Uganda:** The proportion of rape survivors receiving PEP within 72 hours is 73% (72% in 2010).

Region: Americas

1. **Costa Rica:** The Casa de Derechos is considered a model for dealing with SGBV cases. Staff in the Casa de Derechos is well trained in providing legal and psycho-social support to refugee, migrant and national women. Partners refer more and more cases to the Casa de Derechos for support. The Casa de Derechos is a municipality house which has integrated support to refugees and migrants into the municipality structure.
2. **Ecuador:** Since 2010 UNHCR works with SOP developing an individual case management system for cases with specific protection needs, including victims of SGBV. These procedures have allowed us to: a) give an adequate response to those cases, b) have a better coordination between the relevant local actors. In 2011 we have identified 114 victims / survivors of SGBV who were assisted under the aforementioned SOP.
3. **Haiti:** UNHCR has supported the identification and training of men as community agents within the biggest IDP camp in Port-au-Prince (Champ de Mars). They regularly carry-out prevention activities and “door-to-door” sensitisation, in addition to which they also contribute to the identification and referral of victims/survivors of SGBV in the camp.

Region: Asia and Pacific

1. **Nepal:** participatory assessments in the camps have clearly demonstrated that GBV survivors consider lack of access to livelihoods to be one of their biggest challenges, and that child labour can result when caregivers cannot attend

to the families' needs. This year UNHCR has ensured that an automatic screening and referral system exists in proGres for all persons with specific needs who express an interest in accessing livelihoods assistance, and all IGA/VT programs have earmarked a number of slots for all GBV survivors and women/families at risk who are interested and able to benefit, and that all programs attempt to adapt to address the multiple constraints faced by such individuals in accessing them. In order to better understand their specific needs and vulnerabilities, face to face interviews were conducted to collect baseline data from 44 persons with specific needs and their families, in addition to consultation with implementing partners to ensure appropriate program design. In August, these assessments were finalized, and 26 women/families with specific needs were referred for an initial orientation held in August for various income-generation and vocational training programs administered through LWF (one of implementing partners), including poultry and pig farming, tailoring, and production of sanitary napkins. The remaining persons with specific needs - as well as additional persons who are being identified and referred on an on-going basis - will be referred for beauty parlour training through another implementing partner, CARITAS, as well as micro-enterprise opportunities promoted through a UNDP-led program currently underway as a CBDP project.

Region: Europe

1. **Jordan:** SGBV cases are given special consideration when identified, also through response and prevention. External and internal SOPs were updated and effective data management is in place through recording all actions accurately into progress. SGBV panel (weekly basis) in addition to the IP monthly meetings still take place to ensure persistent follow ups on cases and discuss the overall situation (prevention, responding, follow-ups, etc.) 2. Prevention Mechanism: Reviewing the non-violence training manual titled (our path for a better life-without violence) prepared by one of the international IP's aiming to benefit the Iraqi Jordanian families and facilitators who are working on the violence sector in Jordan. Community based Education for women on "Towards Better Communication with the Adolescents - Amman. Training sessions that took place for refugees and Jordanians on better communication with adolescent, and respond effectively to different types of characters through the skills which they will have acquired. 4. TOT workshop for men on SGBV related topics, which was an outcome of last year's TOT sessions for women. 5. Celebrating the 16 Days Campaign through an ongoing awareness campaign that started on the Universal Child Day (20 Nov). Fifteen public and private schools (boys, girls, mixed) to raise awareness on children's rights, types of abuse, how to respond and highlighted the vulnerability of refugee children. Targeted age group was (9-15).6. In line with the same celebration, Jordanian and refugee women and men educators who received the SGBV TOT in 2010 spread in the field under an IP's supervision to raise awareness on the same topic. Big numbers of students, teachers, refugees and Jordanian were covered under the awareness campaign.
2. **Montenegro:** In 2011, 15 refugee families were involved in cases of Gender Based Violence, comprising 57 persons. Victims were assisted with social and legal counseling as well as legal representations, as needed. 20 focus groups for adolescents were conducted to discuss SGBV. In 2011, UNHCR organized 20 focus groups for refugee adolescents to discuss various aspects of SGBV. The focus groups convened 194 young refugees, 71 boys and 123 girls, in refugee settlements in 8 municipalities of Montenegro. The focus groups add to joint UN activities on family and gender based violence in the context of UN Delivering as One. - 15 families, 57 persons were identified as having problems with family and gender based violence and received social and legal support from UNHCR and partners. An established partnership within the UN Country Team and with partners is functioning well. - Based on the AGDM discussions with refugees from Behr, Croatia and Kosovo, focusing on documentation and access to the new status, several interventions have been done to assist in acquiring documents targeting vulnerable categories of refugees, including lowering of fees for documents, issuance of passports in embassies, bus visits to Kosovo to get civil documents. The deadline for application for the new status was also extended from November 2011 till December 2012, following extensive advocacy by UNHCR with support from the EU Delegation.
3. **Russian Federation:** confidence building with refugee women and enhanced community outreach through a verification exercise with the urban caseloads allowed a frank exchange with the community on SGBV, and the beginning of an action plan with women leaders of the community (catalyst is the UNHCR Working Group on Social Issues/ AGDM multi-functional group).

Region: MENA

1. **Yemen:** Women survivors of SGBV or who are exposed to SGBV, victims of trafficking or with legal/protection problems have access to the drop-in centers, where lawyers and psycho-social counselors are providing all the necessary services and follow up the cases with the medical and judicial partners and authorities. Medical partner is providing medical response including PEP kits. UNHCR health focal point conducted training on rape clinical management to government forensic doctors and Implementing Partners doctors dealing with SGBV survivors. Various government authorities were provided with comprehensive training on protection and issues related to SGBV. Project on FGM is on-going and comprehensive awareness activities on FGM, HIV and early marriage are taking place. UNHCR in collaboration with IOM established an emergency response mechanism to protect women victim of trafficking or stranded at the border in their way to KSA. 4- Individual legal case management meeting is regularly taking place to discuss cases of SGBV and legal problems.

IDPs: Awareness is conducted on SGBV and identification by partners of such cases is ongoing. Persons with specific needs (disability) are identified and assisted through the Community centres.

SGBV SOPs in Arabic and English are in place and UNHCR CS and Protection focal points are closely monitoring the implementation. Using the new data system (GBVIMS) through a UNHCR IP, SGBV data are generated monthly and reflected in the annual SGBV trend analysis. All reported protection risks and gaps are analysed and discussed with partners in order to develop the activities, which address all the gaps. UNHCR Yemen has developed a five year SGBV strategy and a work plan for 2012 is in place and will be implemented in collaboration with all concerned partners and refugees

SGBV Actions: Direct Impact on UNHCR and IP operations

Region: Africa

1. **Burundi:** Based on HRIT, ProGres was updated. GBV data and trends are collected and analyzed, together with Assessments/Surveys, and Protection and Programming plans are adapted accordingly. In 2011, IP IRC introduced GBV/IMS data system in refugee settings (Gasorwe, Musasa, Bwagiriza, Butare and Bujumbura) to collect and analyze 100% monthly SGBV incidences -old and new- being reported by survivors. The monthly incident data is used to provide monthly information on number of cases reported in each site, types of SGBV cases prevailing, survivors and ages, perpetrators and their relationship to survivors, services provided etc. This data collection and analysis has been useful in informing UNHCR and partners to coordinate and implement joint SGBV prevention and response activities. IMS also allowed a detailed analysis on precise topics (i.e. SEA on children). Based on services provided, limitations as indicated in the GBV/IMS, IRC and UNHCR are also informed about services that need more considerations- e.g. socio-economic opportunities, legal and security response for girls and women etc. IRC and UNHCR have provided basic trainings on GBV/IMS document for partners. In addition to that, participatory assessments and SGBV Safety Audits have been regularly been conducted in refugees settings and allow UNHCR to adapt protection programme according to the protection needs revealed. In 2012, IRC will collaborate with UNHCR and partners to ensure GBV/IMS become a central data collection and analysis for all SGBV cases requiring multi-sectoral support. Capacity-Building and partnership on SGBV issues is used consistently in order to strengthen UNHCR activities. During 2011, a massive effort in terms of capacity building for HCR staff, partners and refugees have been undertaken. An SGBV Expert (DRC roster) has been deployed and focused on capacity building and establishing coordination mechanisms. Each service provider has received at least one training on relevant SGBV issues. 76 HCR staff and 151 partner staff have been already trained twice on SGBV and SOPs. SGBV issues have also been incorporated in training material (education, protection, assistance etc.). In 2012, HCR and IRC will continue to work on HCR staffs trained; Partners staffs trained; Refugee structures (committees and leaders) trained; Refugee incentive staffs trained. Each key person knows his/her role and responsibilities following SOPs and every field staff has an accurate knowledge of SGBV, referral pathway and coordination mechanisms.
2. **Chad:** All field offices in UNHCR Chad complete monthly reports that provide statistics on SGBV incidents by category, as well as details on response, prevention, and coordination activities. From these monthly field reports, overall trends are analyzed which informs program planning, design, monitoring, and evaluation. Statistics and trends are reported through Focus, SIR, and in reports to HQ. SGBV is also regularly discussed in participatory assessments and other forms of dialogue with persons of concern, and results are analyzed and inform program design and planning.
3. **Ghana:** SGBV SOP has been revised and almost finalized to include actions for the new refugee population. Refugee representatives and partner staff participated in SGBV training at field level. Participatory assessment was done at the camp with women representatives to assess level of SGBV in camps. SGBV cases identified have received legal, medical and counseling support. PEP kit was applied where necessary
4. **Mozambique:** SGBV Taskforce is well trained and is conversant with standards of operating procedures which guide their response. They adequately addressed all matters related to SGBV that were identified from participatory assessments. For instance they efficiently handled sexual harassment at Maratane primary school and in secondary schools in Nampula town in close collaboration with parents, students and teachers. The existing SGBV sector within the police post improved drastically the efficiency of SGBV matters within the camp. All SGBV matters were reported immediately and SGBV Taskforce ensured that the victims received assistance, counseling and appropriate health treatment as per the requirements."
5. **Somalia:** UNHCR co-chairs the SGBV working group for Somalia together with UNFPA at the National level and in 3 field locations. As co-chair, UNHCR has supported a number of capacity building initiatives not only for UNHCR partners but for the working group at large.

Region: Americas

6. **Colombia:** In 2011, 5 year SGBV strategy was updated and presented to HQ. It is ambitious and the implementation depends of ongoing funding. One of the priorities in 2011 was SGBV with indigenous groups in some regions, where we have made important progress as it was a taboo subject, but much remains to be done.
7. **Bolivia:** UNHCR and its Implementing Partner developed and implemented SOPs to prevent and respond to SGBV against refugee and asylum-seeker women. UNHCR also advocated before the National Refugee Commission for the adoption of adequate procedural safeguards concerning the treatment of asylum claims presented by women and regularly monitored the treatment provided to female asylum seekers and lobbied for the implementation of adequate procedural safeguards (separate interviews, availability of female interpreters, relevant COI, etc.). In addition, in coordination with its Implementing Partner, UNHCR published an information guide, for refugee women and asylum seekers, that compiles information on women rights, SGBV and the available resources in the main areas of residence of the refugee population.
8. **Venezuela:** UNHCR participates and has led the Committee for Co-ordination and Follow-Up on Sexual and Gender Based Violence in Zulia. The Committee is active in three thematic areas: protection, prevention and integral assistance to SGBV victims and survivors. In particular, the Committee works on raising awareness on sexual and gender based violence and its prevention; strengthening existing protection networks; empowering SGBV survivors and potential victims; facilitating exchange of information; building capacities at the institutional level; and ensuring effective and efficient attention to individual cases through a system of referrals and direct assistance.

Region: Asia and Pacific

9. **Islamic Republic of Iran:** SGBV SOPs have been revised/ updated. Staff was trained to follow the SOP in all the offices. Legal advice, psychosocial counseling, shelter and medical assistance were provided to SGBV cases through CISAMAP, local NGOs and UNHCR staff. Potential partners have been identified to establish temporary shelter for SGBV and other eligible cases in addition to the provision of psychological counseling and training services countrywide in 2012.
10. **Nepal:** After gathering input from two months of participatory assessment in late 2010 that involved over 300 refugees, service providers and other stakeholders of different levels to assess access to GBV-related services, UNHCR drafted an updated revision of the Inter-Agency GBV SOPs in January 2011. Work has been ongoing to sharing this draft as a working tool with partners. A camp level GBV working group was formed in Beldangi to ensure SOP implementation and address ongoing coordination gaps. Two separate orientations/trainings were held for all refugee Gender Focal Points in February and June on GBV guiding principles and multi-sectorial response in the camps, as well as to exchange feedback, share best field practices and identify challenges. The SGBV SOPs have also been revised to include particular issues faced by LGBTI individuals living in the camps. *Beginning in 2011, women's groups for the urban refugee women have been formed and representatives elected. The meetings are held monthly, during which members of the group and UNHCR staff share ideas and discuss suggested improvements. These meetings function as a platform to share important messages with the women and to organize activities including health workshops, income generating activities discussions, visits to the US Embassy Library, etc... In addition, a free gynecological checkup camp and a free breast cancer checkup have been provided to all women. Women only English classes (for those from Ahmadi Pakistani faith) are organized weekly with a female teacher. Our IP, in conjunction with UNHCR, has given preference to single women head of households for incentive worker positions at the crèche (daycare), and as the steward for the community centre premises. An exercise mapping services available to GBV survivors (such as shelters and psychosocial counseling) within Kathmandu has been completed.
11. **Pakistan,** in close coordination with its implementing partners, has regularly responded to those SGBV problems that are identified or reported among Afghan Proof of Registration (PoR) card holders, using multi-sectoral approaches, by providing legal counseling, health care, psychosocial counseling and safety/security. In order to more effectively respond to the needs of SGBV survivors, UNHCR Pakistan was actively engaged during 2011 in drafting of GBV Standard Operating Procedures as a member of GBV Sub-Thematic Group under the Protection cluster.
- UNHCR Pakistan was also selected as one of 10 leading operations in SGBV issues, and in June 2011 it developed a 5-year SGBV Strategy covering 2011-2016 in close consultation with all relevant stakeholders. The office has also implemented various SGBV related capacity-building activities, including the ECHO funded inter-agency GBV capacity promotion project, and training for implementing partners in Quetta in partnership with UNICEF and UNFPA, in order to improve the identification, prevention of, and response to SGBV incidents.
- In Balochistan, regular monthly SGBV Coordination Network meetings took place. A workshop on SOPs for Prevention and response to SGBV was conducted, including participants from different NGOs and government counterparts. Three capacity building sessions on GBV for IPs were also conducted with a high participation rate of 130 participants. The 3 Ws were regularly updated and shared with the network members. Training on the use of the Heightened Risk Identification Tool was also organized and conducted for IP and UNHCR staff members.
12. **Sri Lanka:** Until the end of 2010, UNHCR played a lead role in GBV coordination in the five districts in which it has field offices setting up SOPs and referral pathways in coordination with other stakeholders. With the increase of returns, decreasing humanitarian needs and the transition into early recovery UNHCR stepped down from its role as GBV lead in 2011 although it continued to be an active member of these networks. UNHCR continues to intervene in terms of certain highly sensitive individual cases and to provide awareness raising on GBV to communities and to duty bearers like the police. UNHCR is also one of six agencies which form the UN Joint Programme on the Prevention and Response to GBV and is carrying out activities under this project in the Kilinochchi and Mullaitivu districts.

Region: Europe

13. **Germany:** Upon initiative of UNHCR, the Federal Working Group of Refugee Women, which consists of former refugee women and NGO representatives, met in Nuremberg with UNHCR and BAMF to bring forward their concerns and have an exchange on the quality of the asylum and integration procedure. Information was shared by the women on SGBV in their home countries, e.g. Iran, and cultural and societal norms prevailing in their communities and means to influence these were discussed (agenda and NFF refer).
14. **Moldova:** Staff meet immediately with senior government officials when concerns in regard to possible SGBV issues arose, in particular in regard to the arrest of a former worker at the accommodation center for asylum seekers who ceased employment in May 2010. We also required implementing Partner RCTV Memoria during its counseling sessions to specifically monitor for SGBV-related matters in general, as well as any historic reports of abuses that may have involved the suspect noted above. The Participatory Assessment also looks into these matters. UNHCR's AGDM Participatory Assessment process also looks into these matters. In that 60 percent of women in Moldova report a domestic violence prevalence rate of more than 60 percent, there are significant issues to address amongst also the host community which can also affect UNHCR beneficiaries.
15. **Russia:** Office remains a lead in the UN Country team for Gender supportive action, networking to prevent and counteract SGBV, including with the Public Chamber and other bodies influential with Government counterparts; UNHCR supported action for legislative change in SGBV prosecution tools, and lobbying for the expansion of crisis centres and shelters that would open to refugees and migrants (the social support system in Russia limits access to republic-funded shelters to registered residents of the respective republics, often excluding foreigners/refugees and even internal migrants/IDPs). UNHCR continues to participate in the CEDAW compliance and monitoring follow up, including with the delegation of UN participation in the newly formed Government Coordination Committee for Gender affairs under the Ministry of Health.

16. **Turkey:** A Standard Operating Procedure (SOP) dealing with SGBV cases is in place. Incident reports on SGBV are collected and entered into ProGres data, and only authorized UNHCR staff members can have access to the files. Following the counselling of cases, survivors are referred to a partner organization for appropriate medical, legal and psycho-social support. The contracted clinic in Ankara provides counselling on SGBV and STIs to persons of concern. Since January 2008, UNHCR has an agreement with one local NGO for guidance and counselling to gay, lesbian and transgender refugees and asylum-seekers, and for advocacy. Data collected and trends on SGBV are assessed in order to develop response and prevention mechanisms regarding SGBV. Through a Multi-Functional Team (MFT) approach partnerships and cooperation with government and non-governmental organisations are put in place to ensure effective response and capacity building on SGBV.

Region: MENA

17. **Jordan:** A number of trainings took place on SGBV topics in 2011. SGBV component was incorporated in all trainings conducted for the government officials, IPs, OPs and NGOs. In 2011, UNHCR was invited to attend a workshop on UNRWA's experience in building referral system for victims of gender based violence. The workshop on Reporting and Reflecting on building referral system meant to bring together a community of practitioners together and reflect on UNRWA's practice. UNHCR Jordan was invited to benefit from its expertise. In 2011 UNHCR conducted 1,894 total internal and external trainings, 63 trainings done in 2011 by BO Amman and 1,379 trainees - 53 trainings internal in Jordan. More than 5,000 persons from the host communities attended 6 theatrical plays about refugees in 2011.
18. **Lebanon:** Main achievements in 2011: Existing SGBV SOP revised and one developed for north Lebanon (new refugee influx); - SGBV working group activated. Incident and monthly reporting forms revised. Data on SGBV is compiled from all implementing and operational partners; All NGOs have mainstreamed SGBV in their activities and for the past three years have been taking active part in the 16 Days of Activism against GBV; Refugee women participating in NGO management committees, outreach worker volunteer groups, health outreach worker groups and formal committees.
19. **Mauritania:** The participatory assessment allowed to collect and analyse data on the Issue of SGBV. To prevent and address this problem, the office adopted SOPs on SGBV and contributed to the adoption of the same at the national level with the participation of a variety of actors including Mauritanian authorities and various community-based organisations. In 2011, UNHCR adopted SOPs on SGBV and contributed to the adoption of the same at the national level in order to strengthen the protection of women at risk, through the setting up effective prevention and response mechanisms. In this framework, the Community Services Officer conducted two training sessions in the BO Nouakchott and FO Boghé for the Staff of UNHCR and its Implementing Partners. In the context of the elaboration of national SOPs, UNHCR made presentations on standards of prevention and response to SGBV to the members of the thematic group in charge of the preparation of SOPs.
20. **Yemen** is finalising the five year SGBV strategy which includes focus on diverse groups e.g. Survival sex workers and LGBTI. While it will be difficult to achieve immediate tangible results, it is considered that starting articulating the specific profiles and needs of these groups is an important step.

2.4.6 Other groups with specific needs

Actions for other groups with specific needs: Direct Impact on Protection of Persons of Concern

Region: Africa

1. **Central African Republic:** in a refugee camp, the response to the participatory assessment result allowed to the office to review the establishment of shelters, as it identified some families with adolescents whose accommodations was a risk to GBV. In addition the exercise allowed the office to identify and use man power for the establishment of a camp, development of community-based response mechanism to the need of people with handicap and older people living alone. It also allowed the office to identify the security risks faced by IDPs when moving within rebel controlled areas and the response were taken into account in the joint strategy developed as cluster lead.
2. **Mozambique:** All the three participatory assessments conducted in 2011 incorporated focus group discussions of older groups and persons with disabilities of all gender and age. Most of the identified needs were incorporated into 2011 Country operating Plan. These included provision of clutches, special shoes, wheel chairs, mattress, clothes and other household items. The food basket of the vulnerable was increased from 10kgs of maize meal to 12.5kg per a month. Most houses of the elderly were either rehabilitated or reconstructed.
3. **The existing special school within the camp was fully supported in terms of writing and reading materials. Parents of children with disabilities were sensitized and encouraged to be taking their children to school daily."**
4. **Namibia:** A total of 133 persons with disabilities (42 females and 91 males) were registered during the year, and received training on how to manage their disabilities. A group of persons with disabilities in the settlement is organized and have joined the National Association of Persons with Disabilities to benefit from information sharing and support. The persons with disabilities are organized and have joined the National Association of persons with Disabilities. All the 119 (66 female and 53 males) older persons were assisted with extra blankets and jerry cans during the year.

Region: Americas

1. **Brazil:** UNHCR participated in the Third International Conference of the Center for Culture and African Languages and the Diaspora15 in Brazil and in the World Afro-descendant Youth Summit to raise awareness on indigenous and afro-descendant refugees issues and create new alliances.
2. **Costa Rica:** UNHCR Implementing Partner has assisted in establishing a group of older refugees that is a support network and also promotes some income generating activities. The group has become part of the national network for organizations of older persons, which is a nationwide network that works to strengthen self-reliance among the elderly; to promote their human rights; their access to health services; and arrange income generating courses and trips.
3. **Colombia:** Awá, Siona, Jiw and Sikuaní communities were trained on organizational skills, and negotiation process of the ethnic protection plan. An indigenous leadership school was also promoted. UNHCR also worked with the indigenous people “Bari” (Norte de Santander) in building prevention and protection plans to defend their territory and preserve their culture. Furthermore, the campaign “If they disappear, a part of you disappears” was launched on 9 August 2011, followed by an event at the museum of gold to commemorate the year of indigenous communities. This campaign tries to ensure a closer contact between Colombians and each of the 35 indigenous communities that were declared at risk of extinction by the Colombian Constitutional Court.
4. **Ecuador:** UNHCR supports the radio program “El río habla”, where refugees and Ecuadorians living in border areas express their needs and concerns and defend their rights. This radio program has significantly contributed to increase State presence and public investments in these remote communities and has enabled the development of a social dialogue between these communities and relevant authorities.
5. **Venezuela:** A Regional Meeting sponsored by the Zulian Blind Association was the occasion for organizing a networking group that will be involved in the protection of persons with disabilities.

Region: Asia and Pacific

5. **Afghanistan:** Under the Extremely Vulnerable Individuals (EVIs) assistance project, support has been provided to persons with special needs in all regions of the country, such as Unaccompanied Elderly, Single Parents, Single Women, Unaccompanied Minors, Chronically Ill, Physically Disable, Mentally Ill, other Medical Cases, very Poor Families, Drug Addicts and some Special Cases among returnees and IDPs. Moreover, Women at Risk cases and victims of SGBV have been identified and assisted under the EVI project and through referral to safe houses and actors involved in addressing SGBV. Also, UNHCR is contributing to addressing SGBV through its involvement in the EVAW Special Fund.
6. **Nepal:** There is a disability programme and recreational centre for elderly refugees being run in the refugee camps by CARITAS with funding from UNHCR. The disability programme includes running of a disability centre, which offers sign language training, occupational therapy, palliative care centre with speech therapy sessions, and tutorial classes for parents on how to engage children in activities as per their abilities etc. The disability centre is staffed by refugee incentive workers. To ensure sustainability, efforts are being made to forge ties with the host community associations working for persons with disabilities and recruit from them, if possible.

Region: MENA

7. **Yemen:** provides different services to persons with disabilities (PWD). PwDs are identified upon arrival through UNHCR IP and after arrival through registration and general surveys, the PwDs committee and ADRA drop-in center and referral mechanisms are in place. Local partner is providing all kind of assistive devices, vocational training, physiotherapy, income generation, and capacity building to PwDs. Early intervention program for children with disabilities is in place where outreach workers train the mothers and teach them how to help their children. In Sana'a, UNHCR IP, IDF had an agreement with two NGOs Rehabilitation centres for CWSN to make sure that refugee children are enrolled into their system and dealt with properly. The program prepares the children to be integrated in the schools. The program prepares the children to be integrated in the schools. It also prepares the infrastructure of schools to receive children with disabilities (Making ramps). Persons with disabilities established their own committee in Aden and the camp, they are supported by most Implementing Partners and they actively participate in identifying PwDs, disseminating information, conducting awareness and do referrals to the concerned Implementing Partners for services. A focal point is assigned in UNHCR CS to follow all issues related to PwDs. Unaccompanied Elderly people are identified by UNHCR IP ADRA and IDF and supported financially and with prepared meals in the camp or cash grants for rent and monthly allowance in urban area of Sana'a. 7- Individual case management meeting takes place every two weeks in Aden and on weekly basis in Sana'a where complicated cases of persons with special needs are discussed and actions recommended and followed up. 8 - In Sana'a, Medical Referral Committee meetings takes place on weekly basis to discuss complicated cases of persons with health-related special needs and recommendations are made and follow up done accordingly

Actions for other groups with specific needs: Direct Impact on UNHCR and IP operations

Region: Asia and Pacific

1. **Sri Lanka:** UNHCR's role as sector lead for shelter and NFI and protection has ensured that it has developed an effective network of implementing and operational partners. In particular UNHCR continued to support and in some instances mentor the Social Service Officers (SSOs) in the districts in setting out the criteria for identification of persons with specific needs, assessing individual cases for assistance and making referrals to specialised agencies both within and without the Government. UNHCR also continues to be an active member of the GBV referral networks in the field, although no longer acting as chair.

Region: Americas

1. **Colombia:** In Mocoa, the differential approach's working group – promoted by UNHCR – designed and implemented an advocacy strategy to facilitate access to institutional services by persons with disabilities.

Region: Europe

1. **Belarus:** Focus group discussions allowed UNHCR to highlight the most important problems stateless persons have (mainly receipt of Belarusian citizenship) and showed good level of cooperation between partners in this particular sphere.
2. **Switzerland:** UNHCR was further invited to participate in an internal training of the Swiss asylum authority (Federal Office for Migration) on LGBTI asylum cases. The training was split into language groups and 45 French speaking and over 80 German speaking FOM staff participated in the event. UNHCR gave on both events an input on "LGBTI issues in international law and the UNHCR position." The feedback from the authorities on UNHCR's participation was very positive and a shift of the current practice towards UNHCR's Guidelines can be anticipated. Main concern with regards to the Swiss practice on LGBTI cases up to date was that the prevalent argumentation, that if asylum-seekers would live a public life according to the social norms in their country of origin and keep their private life secret, there would not be any persecution, hence it could reasonably be required for them to return to their country of origin. UNHCR expressed its opinion on this subject based on UNHCR Guidelines, International Human Rights Law, Resolution A/HRC/17/L.9/Rev.1 of the Human Rights Council as well as international principles and judication. It represents only the second time that UNHCR had been requested to participate in such a training of the FOM in the last 2 1/2 years.
3. **Turkey:** Partner NGO undertakes missions to cities where LGBT asylum-seekers and refugees reside and provides counseling sessions and visits local authorities for awareness raising on SGBV and LGBT group. Manual on Rights of Asylum-seeker and Refugee Women and Manual on Rights of Asylum-seeker and Refugee Children were updated in 2009 and widely disseminated by UNHCR. Operation works with Family and Social Policies Ministry as well as Bar Associations and local and international NGOs in different provinces to provide protection to vulnerable persons of concerns.

Region: MENA

1. **Yemen:** At the start of the IDP crisis in the South, a Participatory Assessment was initiated by the Protection cluster lead by UNHCR in order to gain better understanding/snapshot of the needs and concerns of Internally Displaced Persons (IDPs) who were recently displaced from Abyan to Aden and to contribute to the Needs Assessment of this population. Inter-agency teams conducted several focus group discussions with the IDP population hosted in 4 Adeni schools and based on AGDM. This helped planned the IDP response in the South. IDPs are registered by the Government of Yemen and the registration database includes a breakdown by age and gender. In Haradh, a participatory assessment was also done.