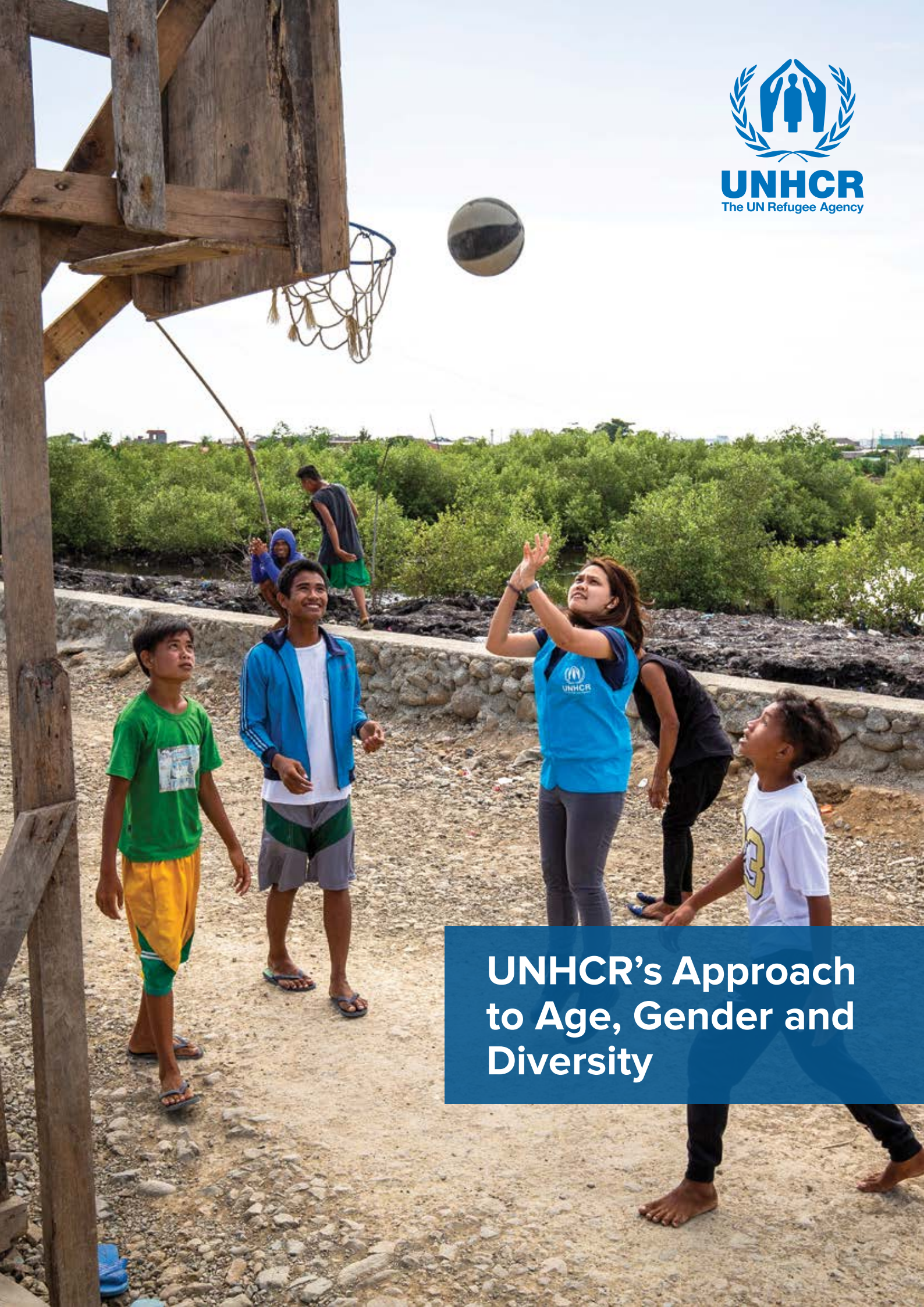




**UNHCR**  
The UN Refugee Agency



## UNHCR's Approach to Age, Gender and Diversity

# Introduction

The United Nations High Commissioner for Refugees (UNHCR) safeguards the rights and well-being of people who have been forced to flee, including refugees, asylum-seekers, internally displaced persons, returnees, stateless persons and those at risk of statelessness. UNHCR recognises that each person of concern has differing capacities and priorities and faces different protection risks. These protection risks may be heightened as a result of specific age, gender and diversity characteristics, and the intersection between those characteristics.

To help alleviate these risks and ensure assistance and services are accessible to all persons of concern and appropriately respond to each person's priorities and needs, it is critical to understand first their respective experiences and perspectives. This should be done by consulting with persons of concern regularly and engaging them in decision-making that affects their lives, and leverages their diverse capacities to lead positive change in their communities.

To achieve this, UNHCR engages persons of concern through an age, gender and diversity (AGD) approach. The AGD approach recognises individuals as unique in their needs, capacities and priorities, promotes opportunities to participate in decisions, and ensures access to rights for all without discrimination based on their age, gender, disability, ethnicity, religion, sexual orientation, gender identity, and other characteristics that shape their identities.

For many years, UNHCR field teams have used participatory methodologies to promote the role of women, men, girls, and boys of all ages and backgrounds as agents of change in their families and communities. UNHCR issued key policies and tools such as the 2006 Tool for Participatory Assessment in Operations, the 2008 Manual on a Community-Based Approach in UNHCR Operations, and the 2011 Age, Gender and Diversity Policy. UNHCR also organized global consultations with women and youth, to better incorporate their views into the development of policies and tools.



Yemen. Refugee children in the Yemeni Parliament in Sana'a.  
©UNHCR/Shadi Abusneida

Applying an AGD approach requires that we consider how age and gender intersect with other characteristics (e.g. disability, sexual orientation and/or gender identity, religion, ethnicity, income level, education) and how such intersections may lead to more complex protection risks. It is essential that programmes and initiatives systematically engage a diverse range of persons of concern and address the specific needs of those who are disadvantaged, recognizing – for example – that a LGBTI woman or girl, a child with disability, an older woman, a marginalized or indigenous person with disability, etc. will have a vastly different



experience from others and, thus, will face distinct risks and may have additional needs that require specific attention.

For example in Costa Rica, although children in most displacement contexts were found to experience limited access to education and early pregnancy, these risks were amplified for indigenous and LGBTI children. As this example illustrates, it is essential to identify and examine critically the challenges faced by persons of concern and, then, to look deeper to identify when these challenges may be elevated as a result of one or more coinciding risk factors.

In March 2018, UNHCR updated its Age, Gender and Diversity Policy (AGD Policy). The updated policy consolidates, revises and renews UNHCR's existing commitments to an AGD approach, Accountability to Affected People (AAP) and gender equality, and it establishes mandatory core actions to help strengthen these commitments and increase accountability to persons of concern.

The updated AGD policy (2018) strengthens organizational accountability to all persons of concern, clearly defining specific responsibilities across senior management and entities within UNHCR and calling for consistent monitoring that leads to evidence-based regular reporting. The policy is an organization-wide engagement, mandatory for all UNHCR operations and has expanded its reach, ensuring applicability to all persons of concern to UNHCR: refugees, asylum-seekers, IDPs, returnees, stateless persons, and those at risk of statelessness.

## Working with Persons with Disabilities



Ecuador. Venezuelan woman with a disability finds joy in dance.

©UNHCR/Jaime Giménez Sánchez de la Blanca

Due to physical, communication and attitudinal barriers, persons with disabilities often have hindered access to protection, assistance and solutions. They may experience discrimination on the basis of both disability and their displacement status and are often denied opportunities to participate in decision-making and to fulfil leadership roles in their communities.

### Examples of UNHCR's approach to persons with disabilities:

- ✓ Syrian Arab Republic: A home-based rehabilitation programme supports family members of children with developmental delays, including autism, to assume the role of training companions who take the lead planning and implementing development care plans for the children's rehabilitation and support.
- ✓ Site infrastructure and affordable transport options are improved to strengthen access to services in many operations, including Kenya. Assistive devices are provided in many locations, including Chad, India, Islamic Republic of Iran, Kenya, Pakistan, Somalia, Syrian Arab Republic, Uganda, Yemen and Zimbabwe, helping facilitate the access of persons with disabilities to information and services.
- ✓ The Bureau of Middle East and North Africa conducted mapping exercises to determine the extent to which UNHCR's protection, assistance and programming are inclusive of persons with disabilities in the region and how to strengthen related services and interventions for improved protection.
- ✓ In South Sudan, UNHCR works closely with the South Sudan Association of Disabled People (ADPSS) as well as community-based protection networks to identify disability-related stigma and promote the participation of persons with disabilities.
- ✓ A Network of Outreach Volunteers is available in several operations, including Bangladesh, Lebanon, Pakistan, Syrian Arab Republic, Turkey, Venezuela, and Yemen, to help identify protection needs and local capacities to provide support to persons at heightened risk, including persons with disabilities.

# APPLYING AN AGE, GENDER AND DIVERSITY APPROACH AT UNHCR

## I. AGD inclusive programming:

Through more clearly defined data, UNHCR can obtain a comprehensive understanding of the populations it serves and, in particular, the unique protection risks faced by the women, men, girls and boys of concern to UNHCR, as well as their respective capacities and needs. Having this data and understanding enables UNHCR to ensure that programming appropriately utilizes the capacities and skills of persons of concern and also responds to the needs and protection risks identified.

UNHCR's AGD policy requires that at a minimum, all data collected by UNHCR will be disaggregated by age and sex and by other diversity considerations, as contextually appropriate and possible, for purposes of analysis and programming.

AGD policy 2018 – core action 1

### Achievements:

- Most UNHCR operations collect data disaggregated by age and sex for both analysis and programming purposes. As a result, operations are able to account for the differing needs of persons of concern with respect to their age and sex.
- Some UNHCR operations are disaggregating data by disability, lending to potential for improved accessibility to UNHCR offices, programmes and services.
- UNHCR operations regularly target programming to meet the needs of women and girls, children and youth.



Syria. Elderly find friendship in Aleppo's UNHCR-backed community centres.

©UNHCR/Antwan Chnkdji

## Working with Children



Children face added risk due to their reliance on adults in the home, school, workplace, and other environments. Due to their age, they are not systematically provided information and their opinions, experiences, and skills can go overlooked in project planning, implementation, and monitoring and evaluation. By calling for age-disaggregated data, the updated AGD Policy provides an opportunity for UNHCR operations to understand better the needs of children, improve budgeting and planning in support of initiatives targeting children, and foster improved accountability toward children.

### Examples of UNHCR's approach to children:

- ✓ Through targeted awareness-raising measures and activities as part of the Syria Refugee Response, UNHCR and partners substantially reduced the percentage of Syrian refugee children born without any form of identity documents (birth certificate or medical birth notification) in the region from 35% in 2012 to 1.8% in 2018.
- ✓ In 2018, UNHCR released new provisional Guidelines on Assessing and Determining the Best Interests of the Child. The revision provides a more comprehensive approach to Best Interest Determinations and more user-friendly child protection case management tools, addressing concerns and challenges identified by field offices.
- ✓ Since 2012, in Chad, Ethiopia, the Islamic Republic of Iran, Kenya, Malawi, Malaysia, Pakistan, Rwanda, South Sudan, Sudan, the Syrian Arab Republic, Uganda and Yemen, Educate A Child (EAC) has supported over one million out-of-school refugee children.



Syria. Mobile teams teach parents and children dangers of unexploded ordnance. ©UNHCR/Antwan Chnkjji

In **Venezuela**, UNHCR initiated profiling and registration exercises which provide for data collected by UNHCR to be disaggregated by age, sex and diversity considerations, as contextually appropriate and possible, for purposes of analysis and programming.

**Lebanon:** An annual vulnerability assessment provides data disaggregated by district, governorate, gender of the head of household, shelter type, food security and economic vulnerability, offering a deeper understanding of the Syrian refugee population and enabling UNHCR and its partners to adapt programming. For example, by disaggregating data, the assessment revealed a gender distinction in food-related coping strategies. Gender and age disaggregation also provided important information on the reasons for school dropout: work was an overriding reason cited by out-of-school males; and, marriage was the most common reason cited by females.

**Europe:** Together with UNICEF and IOM, UNHCR collected and disaggregated data on refugee and migrant children who arrived in Europe in 2018, providing a synopsis of data broken down by age, gender, nationality, status (unaccompanied, separated), country of arrival, country of registration, and resettlement status. This information helps support decision-making and advocacy on issues related to refugee and migrant children.

## Challenges:

- The collection of data by disability is often challenged by limited capacity to identify persons with disabilities. Similarly, LGBTI persons, minorities and indigenous persons, and others at heightened risk remain unknown to UNHCR due to limited capacity to reach out to, and collect data on, the most marginalized and less visible groups.
- Even though data is typically disaggregated by age, the collection of data by differing age groups is sometimes lacking, resulting in certain populations (e.g. youth) and their needs going unidentified and, thus, overlooked.

## II. Accountability to Affected People:

UNHCR's Accountability to Affected Populations (AAP) is a commitment to the intentional and systematic inclusion of the expressed needs, concerns, capacities, and views of persons of concern in their diversity; and being answerable for our organisational decisions and staff actions, in all protection, assistance and solutions interventions and programmes.

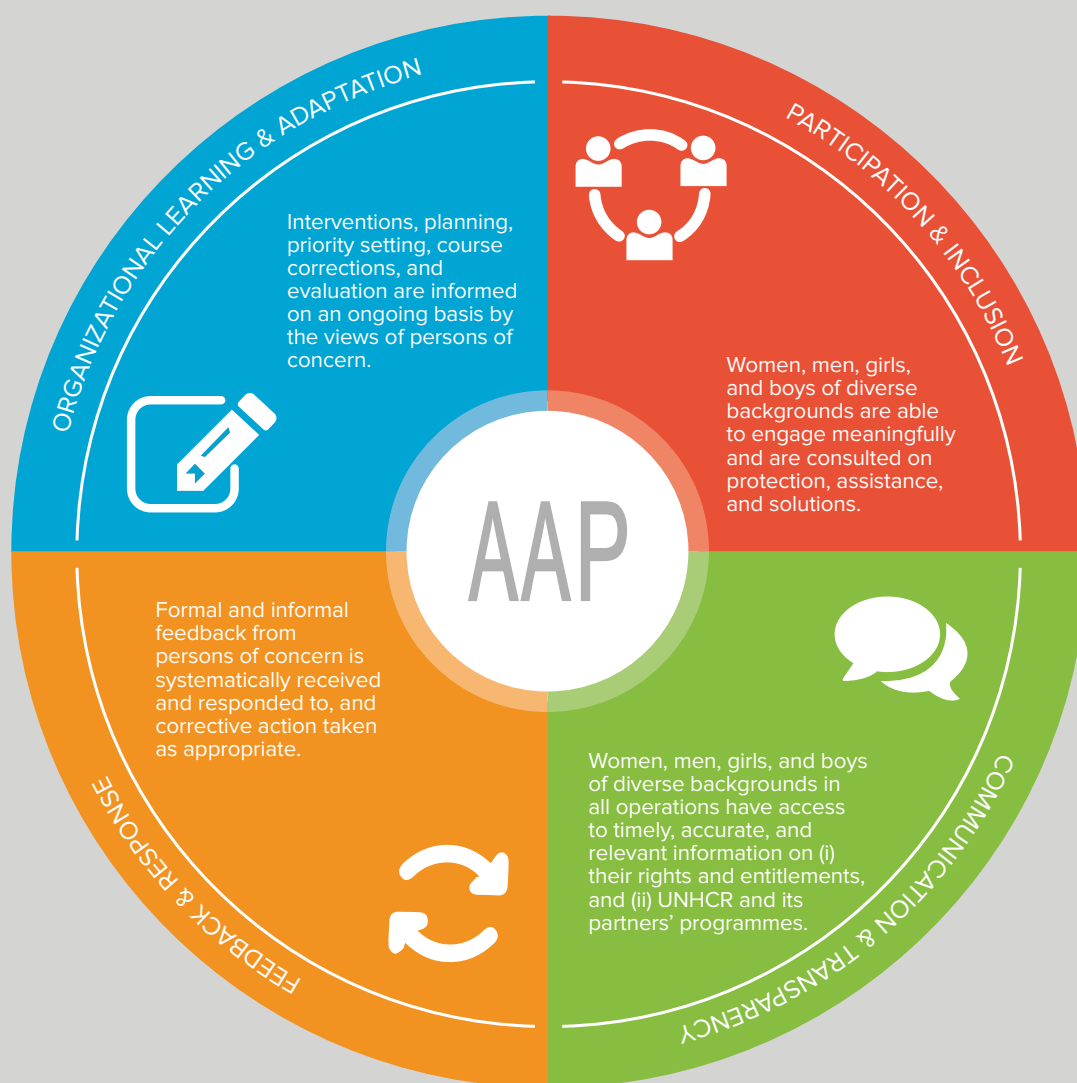
**AAP implementation in UNHCR focuses on four key components:**

a) Participation and Inclusion

b) Communication and Transparency

c) Feedback and Response

d) Organizational Learning and Adaptation



Combined, they ensure that UNHCR's programming is better adapted to the feedback provided by women, men, girls and boys, and is more responsive to their needs, interests and capacities.

## Achievements:

- **Many UNHCR operations employ participatory methodologies on a continuous basis** throughout the different phases of assessment, planning, implementation, monitoring and evaluation. Participatory assessment exercises remain a critical component of UNHCR's AGD and community-based protection approaches that are implemented across operations. Some operations are taking special measures to ensure inclusion of populations that are often overlooked, including children and youth, in participatory assessments and within community structures.
- ➔ In **Rwanda**, participatory exercises with children are conducted through interactive activities and games (e.g. interactive theatre, photography, painting workshops), leading to their increased engagement and feedback. Similarly, in Colombia, recreational

activities (handcrafts, photography, role playing) are used during participatory exercises to help identify the unique needs of children and ensure their effective participation.

- ➔ **Italy:** Following consultations with representative refugee networks, UNHCR re-prioritized the engagement and capacity-building of CBOs and refugee-led organizations, and *PartecipAzione* was launched in partnership with INTERSOS. To promote the protection and active participation of refugees in the economic, social and cultural life of Italy, *PartecipAzione* helped build the capacity of 10 local community-based and refugee-led organizations comprised of, or promoting participation of, refugees. Each organization benefited from training, funding and networking, and nearly 2,000 people participated in activities funded through the projects they developed.

## Working with Youth



Due to their age, youth are often perceived as self-sufficient and not in need of support. As a consequence, their needs may be overlooked, and they may not have access to information they need, including on health risks (e.g. sexual and reproductive health) and SGBV. Services that are available, including health services, are not systematically youth-sensitive. Youth would benefit from opportunities to bond with their peers but often do not have spaces or networks dedicated to their age group. The Global Refugee Youth Consultations revealed the need for frameworks and guidance to facilitate consultation and collaboration with young people.

### Examples of UNHCR's approach to Youth:

- ✓ In 2018, UNHCR's Youth Initiative Fund funded 25 community-based projects led by youth groups in 22 countries where the youth worked in collaboration with UNHCR country operations and partners at every stage of project management from design to monitoring. Spearheading in community mobilization and action, youth benefited from these leadership opportunities and, at the same time,

highlighted their roles and potential in serving the communities as connectors and protection actors.

- ✓ In Mozambique, a special office, *Serviço de Atendimento a Adolescentes e Jovens (SAAJ)*, was opened in the Maratane health centre to provide free sexual and reproductive health services, including STI and HIV counselling and testing by a technician specifically trained to work with adolescents/youth on sexual and reproductive health.
- ✓ In Kenya, some students having received scholarships through the DAFI programme, have contributed a portion of their support to finance the university education of their peers. DAFI recipients and graduates serve as role models for other students, motivating children to prioritize education and stay in school. Some students also started an exchange programme between Kenyan nationals and refugees in the Kakuma refugee settlement to foster social cohesion. Another student founded a youth initiative together with a Kenyan friend, which aims to strengthen the capacities of local and refugee youth alike.



- ➔ In **Lebanon**, five community reference groups (CRGs) have been set up (47 members, 53% women, 4% persons with disabilities) to advise on the design of activities and programmes, including communication methods and tools. In addition, a Participatory Self-Evaluation is being piloted whereby 129 refugees have been mobilized as evaluators to help increase refugee engagement in assessments, implementation and monitoring and evaluation.
- Many operations have introduced diversified communication channels and mechanisms to engage persons at heightened risk more effectively and to share and obtain information about needs and services. A number of operations are using innovative means (social media forums, telephone counselling, online consultation portals, satellite centres, mobile teams) to facilitate information-sharing and communication with persons of concern, including those who are hard-to-reach.
- ➔ Several operations offer remote communication options to increase access to the most at-risk, hard-to-reach persons of concern to UNHCR. In **China**, weekly telephone counselling is provided with interpreter assistance in addition to walk-in counselling and other forms of support and information sharing, including Q&As. In the **Syrian Arab Republic**, UNHCR uses WhatsApp groups, satellite centres and mobile teams. In **Lebanon**, WhatsApp communication trees allow for information provision and sharing between persons of concern and between UNHCR and persons of concern. In **Costa Rica**, a free-of-cost call centre was established.
- ➔ In **Venezuela**, mobile information desks provide counselling to community members in a private manner. These mobile desks allow for identification of persons at heightened risk and offer personalized counselling on rights, referral pathways and available services.
- Many UNHCR operations have established and promoted feedback and response systems, including for confidential complaints. UNHCR uses results of feedback to adapt its programmes and strategies and findings from annual participatory assessment exercises feed into planning across operations.
  - ➔ **Ecuador:** A targeted participatory assessment exercise was organized with persons of concern who do not speak Spanish, respecting gender criteria in each focus group. As a result of the feedback, a differentiated approach was taken to promote inclusion of more women in the Graduation Model and to increase availability of Spanish language courses.

## Challenges:

- Engagement and access to information is hindered by location (hard-to-reach, security concerns), heightened risk factors, lack of accessible formats of communication, including language comprehension and literacy level. Efforts to ensure inclusion and engagement of all persons of concern to UNHCR in decision-making that affects their lives need further investments; they need to be more regular, systematic and, for those persons at heightened risk, targeted.
- Complaints are not always made due to limited access to communication channels or lack of trust in them. Differentiated reporting avenues should be made available across operations to facilitate safe and confidential reporting on feedback and complaints.
- Feedback provided does not systematically receive a response or systematically result in action. Persons of concern should be actively and systematically engaged in ongoing programme monitoring and evaluation as well as in end-of-project assessments to provide regular or ongoing feedback and help improve programming.

# III. Advancing Gender Equality:

Gender equality is fundamental to the well-being and rights of all persons of concern; it is central to UNHCR's AGD approach, and it is relevant to every aspect of UNHCR's work. UNHCR's Updated Commitments to Women and Girls implicitly recognize the diversity amongst them, including older women; adolescent girls and female youth; women and girls belonging to national or ethnic, religious, and linguistic minorities or indigenous groups; women and girls with disabilities; and women and girls of diverse sexual orientations and gender identities.

## Achievements:

- UNHCR operations hold focus group discussions with women and girls during annual Participatory Assessment exercises. Many operations have taken steps to ensure equal representation in management and leadership structures, supporting women to put in place women's committees, prioritizing women representatives and leaders in existing management structures, and offering training to build the leadership skills of women and to create a space for them to serve as leaders in their communities.
- ➔ UNHCR operations, including **Afghanistan, Burundi, Central African Republic, Chad, Dominican Republic, Ethiopia, Georgia, India, Lebanon, Liberia, Libya, Mauritania, Pakistan, Panama, Rwanda, Senegal, Syrian Arab Republic, Turkey, Yemen, and Zambia**, engaged women in leadership structures and roles. As such, women and girls: supported sensitizations and advocacy for women's rights; established Women's Committees to foster mediation and conflict resolution within families and communities; were engaged in decision-making processes and management related to community issues; supported distributions, protection, sexual and gender-based violence (SGBV), health, education,

### UNHCR's Updated Commitments to Women and Girls

1. Women and girls participate equally and meaningfully in all decision-making, community management and leadership structures, and committees of persons of concern.
2. Women and girls are provided with individual registration and documentation, directly or through support provided by UNHCR.
3. Women and girls have equal access to and control over management and provision of food, core-relief items, and cash-based interventions.
4. Women and girls have equal access to economic opportunities, decent work, and quality education and health services.
5. Women and girls have access to comprehensive SGBV prevention and response services.

water, sanitation and hygiene (WASH) etc.; and helped support SGBV prevention and respond to SGBV and sexual exploitation and abuse (SEA) cases.

- ➔ **Bangladesh:** Women community outreach members, community groups and elected leaders contributed to improved identification of female refugees at heightened risk, independent access to information for women and girls, and the provision of culturally sensitive peer support on issues of trafficking, early marriage, girls' education and health.
- Persons of concern are increasingly registered on an individual basis and provided individual documentation.
- ➔ Operations, including **Burkina Faso, Egypt, India, Malaysia, Nepal, and Uganda**, made specific efforts to provide individual registration and issue individual documents to persons of concern, with an emphasis on women. Operations also utilized innovative means to ensure persons of concern were registered: Joint registration was offered by UNHCR

and government authorities in **Chad**; mobile registration was offered in remote locations of operations, such as **Jordan**, and promoted in **Venezuela** to support access to indigenous populations.

- In many operations, efforts are being made to support women’s and girls’ increased access to, and control over, assistance and to ensure that livelihoods, education and health programming target women and girls.
- ➔ Operations, such as **Mozambique, Senegal, Tanzania** and **Uganda**, are increasingly designating both men and women as primary recipients of assistance. In **Liberia**, and **Zambia**, women are included on distribution committees.
- ➔ Efforts are made to develop initiatives that meet the needs and interests of women and girls and encompass home-based livelihoods activities and childcare. In **Burkina Faso, Jordan, Uganda** and **Yemen**, daycare in camps and community centres allows mothers to continue their studies and to engage in livelihoods and community activities.
- ➔ The self-reliance of Rohingya refugee women and host community women is promoted in **Bangladesh** via a training centre and 18 sub-centres opened for women to learn silk screen, block printing and tailoring. The women receive a stipend with six months of training, and their products are sold in a well-known retail outlet, a local social enterprise, that provides income sources to rural women and the raw materials and designs for this project.
- UNHCR operations invest in community volunteers and structures to enhance the identification of SGBV risks, and to support SGBV prevention and response mechanisms; conduct awareness raising on SGBV as a major prevention and risk mitigation activity, which includes informing survivors and communities of services and resources available to them; and run safe spaces for women

## Working with Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Persons



Guatemala. Transgender couple wants right to be “who we are, free and safe”. ©UNHCR/Pablo Villagran

Cultural and social norms, coupled with discriminatory and homophobic national legislation, and the lack of awareness and response capacity within humanitarian organizations often hamper the ability of LGBTI persons of concern to come forward to express their needs, report abuse and seek services designed to support them.

### Examples of UNHCR’s approach to Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Persons:

- ✓ In Europe: asylum officials benefit from training on sexual orientation and gender identity, and on-the-job training on LGBTI issues is provided to asylum authorities. UNHCR organized “Living Libraries” as part of their training, enabling asylum case officers to meet and speak with LGBTI refugees in order to sensitize them.
- ✓ Efforts are regularly made to raise awareness among UNHCR and partner staff on LGBTI persons and their needs and UNHCR and partner obligations to them. In some locations, LGBTI persons are engaged as volunteers to support identification and dissemination of information.
- ✓ In the Americas, UNHCR is establishing partnerships with LGBTI organizations that work with persons in human mobility, to expand its outreach and facilitate outreach to LGBTI persons and identification and referral of those in need of protection.

and girls as well as other persons at heightened risk to enable survivors to access psychosocial support or other targeted assistance, including cash and shelter.

- ➔ Safe Spaces Networks, established in each country bordering **Venezuela**, include organizations providing holistic services for SGBV survivors. Similarly, five local networks in Apure, Táchira, Zulia, Bolivar and Caracas carry out activities favouring identification of SGBV incidents and promoting a minimum package of accessible services (psychosocial support; medical services; sexual and reproductive health services; legal assistance; case management).
- ➔ Through the Community Safety and Access to Justice Project (CSAJ) in **Ethiopia**, UNHCR works closely with UN partners to train community police on gender and SGBV response, and to increase the number of female community police. Mobile courts also facilitate access to justice, particularly for women and girls.

In Jordan, UNHCR supports women of concern through Social Enterprise (SEP), which aims to build a brand that changes the lives and perceptions of refugees worldwide. SEP became a Made 51 partner, allowing a global market platform for refugee artisanal products to be branded, launched and managed. Partnership between a Jordanian non-governmental organization (NGO), the Jordan River Foundation (JRF), and a multinational corporation, IKEA, draws on business solutions that help address Jordan's humanitarian and development challenges while creating jobs and providing economic growth opportunities. Through this project, 75 Syrian refugee women gained employment.



Kenya. South Sudanese women's rights activist speaks up for girls' education.

©UNHCR/Anthony Karumba

## Challenges:

- The meaningful participation of women and girls in leadership and management structures is often limited or tokenistic, thus stifling their individual and collective agency along with their ability to influence the decisions that impact their lives. Various factors contribute to their limited participation: time-consuming survival and household responsibilities; restricted freedom of movement; and failure of some communities to engage women and girls as leaders.
- In some operations, UNHCR is not directly involved in registration processes and, thus, may advocate for individual registration but may not be able to ensure it happens systematically.
- Women and girls do not always have access to assistance intended to reach them. Social norms may make it difficult for women to be designated as primary recipients of assistance and for women and girls to enjoy equal access to, and control over, the management and provision of assistance.
- In some operations, lack of appropriate school infrastructure (e.g. sex-separated latrines), may cause girls to miss school particularly during menstruation, as well as a lack of female teachers and gender-sensitive pedagogy.
- Livelihood trainings are often gender-biased and do not always respond to the skills, situations, interests and needs of women.
- Risks of SGBV remain elevated for persons of concern, in particular women and girls, due to patriarchal societies and unequal power relations, and existing gaps in assistance and programming.
- Confidential, accessible and non-stigmatizing safe spaces are limited, as are mechanisms for early identification and referral of persons at heightened risk in reception, registration and transit centres.
- Boys, men or LGBTI persons who experience SGBV may not be able to access care for several reasons, including due to non-disclosure related to stigma and fear, and a lack of services geared to support them.



## Working with Older persons

Older persons often face barriers in their access to information, thus hindering their access to services, feedback and complaints mechanisms. Their access tends to be limited due to: long distances to services and/or limited mobility; limited literacy or use of minority or local languages; limited access to, familiarity with, or use of, phones, internet, and other technology; specific health conditions that hinder their access to, or ability to understand, information; and direct or indirect discrimination (e.g. age cut-offs for livelihood programming). The hindered access and limited engagement, often results in older persons being overlooked in programme development and implementation. Their needs and priorities are often not reflected in programming, and their participation in planning, implementation and monitoring is often limited.

### Examples of UNHCR's approach to Older persons:

- ✓ Most operations, including Ethiopia, India, and Lebanon, engage with older persons through annual participatory assessment exercises and/or focus group discussions to better understand their needs. Data is disaggregated at higher age ranges in some operations to facilitate improved monitoring of access to protection and assistance among older persons.
- ✓ Older persons are supported to participate in community leadership structures and engaged in decision-making processes in many locations, including Bangladesh, Ethiopia, Lebanon, Rwanda, Thailand and Uganda.
- ✓ Access to national systems for older persons (e.g. pensions; programmes and services offered through national councils for older persons) is supported, including through advocacy and legislative change, in Costa Rica, and Ethiopia. In Costa Rica, UNHCR successfully advocated for access of older persons to programmes and services offered by the National Council of Elderly Persons (CONAPAM).

Working with

# Minorities and Indigenous Persons



Minorities and indigenous persons may be overlooked in humanitarian programming due to the discrimination that these groups often experience by other persons member of the displaced community or their host communities, hindering their access to services and jeopardizing their ability to benefit from basic needs. Persons of concern belonging to these groups may prefer to stay unidentified which makes it difficult for humanitarian actors to identify their specific needs and develop adequate targeted programming and inclusion activities.

## Examples of UNHCR's approach to minorities and indigenous Persons:

- ✓ Operations, including Argentina, Colombia, the Democratic Republic of the Congo, Kenya, Malawi, Nepal, Nigeria, Rwanda, Sudan, and Zimbabwe conduct specific participatory assessment exercises with minorities and indigenous persons to better understand their needs, capacities

and envisioned solutions. The participation of minorities and indigenous persons is prioritized through inclusion in community-based structures in South Sudan, and in targeted activities and exercises (e.g. hand-crafts, photography, role playing, etc.) in Colombia.

- ✓ To protect indigenous populations and help prevent and reduce statelessness in Venezuela, UNHCR took measures to build the capacity of state institutions, NGOs and community structures, developing and dispensing related guidance, training community committees and outreach volunteers and providing information sessions on the rights to identity and birth registration procedures for indigenous populations.
- ✓ In Tajikistan, UNHCR identified marginalized minority persons, who often lack birth certificates regardless of their age or gender, and, supported them to start the process needed to pursue document issuance.



Philippines. Indigenous woman welcomes UNHCR team with music.

©UNHCR/Althea Gonzales

## UNHCR Age, Gender and Diversity Policy (2018) –

### The 10 obligatory core actions:

1. AGD-INCLUSIVE PROGRAMMING	At a minimum, all data collected by UNHCR will be disaggregated by age and sex and by other diversity considerations, as contextually appropriate and possible, for purposes of analysis and programming.
2. PARTICIPATION AND INCLUSION	At a minimum, country operations will employ participatory methodologies at each stage of the operations management cycle, to incorporate the capacities and priorities of women, men, girls, and boys of diverse backgrounds into protection, assistance, and solutions programmes.
3. COMMUNICATION AND TRANSPARENCY	At a minimum, all country-level protection and solutions strategies will detail the operation's approach to communicating with women, men, girls, and boys of diverse backgrounds, through means that are appropriate and accessible to all groups in a community.
4. FEEDBACK AND RESPONSE	At a minimum, all UNHCR operations will establish and promote feedback and response systems, including for confidential complaints.
5. ORGANIZATIONAL LEARNING AND ADAPTATION	At a minimum, UNHCR operations will adapt programmes and strategies in response to input from persons of concern, and document this in Country Operations Plans and Annual Reporting.
6. ADVANCING GENDER EQUALITY	a. Women and girls participate equally and meaningfully in all decision-making, community management and leadership structures, and committees of persons of concern. At a minimum, UNHCR operations will ensure 50 per cent female participants in management and leadership structures under UNHCR's authority, and will advocate the same with partners, including Governments.
	b. Women and girls are provided with individual registration and documentation, directly or through support provided by UNHCR. At a minimum, UNHCR will provide women and girls of concern with protection documentation on an individual basis, and will advocate the same with partners, including Governments.
	c. Women and girls have equal access to and control over management and provision of food, core-relief items, and cash-based interventions. Depending on the context, UNHCR operations will increase the percentage of women as the primary recipients of assistance within households receiving material and/or cash-based assistance.
	d. Women and girls have equal access to economic opportunities, including decent work and quality education and health services. At a minimum, UNHCR will ensure women and girls have equal access to livelihood, education, and health programmes it delivers, and will advocate with partners, including Governments, for their equal access to public services.
	e. Women and girls have access to comprehensive SGBV prevention and response services. At a minimum, UNHCR operations will adopt and implement SGBV standard operating procedures, operationalizing the four main referral pathways for all survivors (safety/security, legal, medical, and psychosocial), and will promote the same with partners, including Governments.

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