IASC
Inter-Agency Standing Committee

Humanitarian Appeal

2011
Consolidated Appeal Process (CAP)

2011
Gender Marker in CAPs and Pooled Funds

Analysis of Results and Lessons Learned

IASC
Consolidated Appeals Process (CAP)
Sub-Working Group

GenCap

IASC Gender
Sub-Working Group

January 2011

Implementation of the Gender Marker for 2011 in CAPs and Pooled Funds

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Glossary of Terms

CAP	Consolidated Appeal Process
CERF	Central Emergency Response Fund
CHAP	Common Humanitarian Action Plan
CHF	Common Humanitarian Fund
DRC	Democratic Republic of Congo
EHAP	Emergency Humanitarian Action Plan (e.g. Niger)
EHRP	Emergency Humanitarian Response Fund (e.g. Kenya)
FAQ	Frequently Asked Questions
FHH / FHHs	Female head of household(s)
FTS	Financial Tracking System
GenCap	Gender Standby Capacity Project
GenCap Adviser	Gender Adviser in the Gender Standby Capacity Project
GBV	Gender-based violence
GM	Gender Marker
HC	Humanitarian Coordinator
HCT	Humanitarian Country Team
HRF	Humanitarian Response Fund (e.g. Ethiopia)
IASC	Inter-Agency Standing Committee
IDP	Internally displaced person
IO	International organization
IOM	International Organization for Migration
KAP	Knowledge, attitudes and practice
M&E	Monitoring and evaluation
MYR	Mid-year review
NAF	Needs assessment framework
NFI	Non-food item
NGO	Non-government organization
OCHA	Office for the Coordination of Humanitarian Affairs
OECD/DAC	Organization for Economic Co-operation and Development - Development Assistance Committee
OHCHR	Office of the High Commissioner on Human Rights
oPt	occupied Palestinian territory
OPS	On-line Project System
PF	Pooled fund
PSEA	Prevention of sexual exploitation and abuse
SADD	Sex and age disaggregated data
UNFPA	United Nations Population Fund
UNHCR	United Nations Refugee Agency
UNICEF	United Nations Fund for Children
UNIFEM	United Nations Fund for Women
WASH	Water, Sanitation and Hygiene
WFP	World Food Programme
WHO	World Health Organization

Executive Summary

The Inter-agency Standing Committee (IASC) Gender Marker was created in 2009/2010 by the Sub-working groups (SWGs) on the Consolidated Appeal Process (CAP), the largest global funding appeal for humanitarian action, and Gender and Humanitarian Action. The Gender Marker (GM) facilitates tracking gender allocations in humanitarian projects and nurtures gender equality results. It responds to UN Security Council, General Assembly, and humanitarian community demands for tracking allocations for gender and ensuring humanitarian action is equally meeting the distinct needs of female and male beneficiaries. The gender marker aligns with recent initiatives by OECD/DAC, UNDP and UNICEF.

This report documents that the first implementation of the IASC Gender Marker has been highly successful. The 10-country implementation took place in the 2011 CAP preparation cycle. Implementation included nine CAP appeals with nearly 1000 projects, two pooled funds (PF) and in the Pakistan Flood Emergency Response Plan (see box). The IASC Gender Marker is a tool that codes, on a 0-2 scale, whether or not a humanitarian project is designed well enough to ensure women/girls and men/boys will benefit equally from it or that it will advance gender equality in another way.

> **Gender Marker Roll-out in 2010 for the 2011 Cycle**
>
> CAPs: Chad, Haiti, Kenya, Niger, oPt, Somalia, south Sudan, Yemen and Zimbabwe.
> Pooled funds: DRC and Ethiopia.
> Flood Response Plan: Pakistan

The GM is, however, designed to be much more than a measuring tool. It is designed to assist Humanitarian Coordinators (HCs) and Humanitarian Country Teams (HCTs) in mainstreaming gender throughout the funding process. IASC GenCap Advisers supported HCTs and the clusters to strengthen the gender dimensions of sector needs assessment frameworks (NAFs), which inform the CAP and PFs as well as all core elements of the appeal document. These include the Common Humanitarian Action Plan (CHAP), cluster response plans and projects. Equally essential to effective design is effective implementation. Cluster Coordinators are responsible for ensuring active monitoring to support project teams in making the gender code a reality in the field.

This initial implementation of the Gender Marker (GM) during the 2011 appeal preparation cycle indicates that gender dimensions have been strengthened in NAFs, CHAPs, cluster response plans as well as projects in many of these countries. Adequately trained vetting teams and review panels can competently assign gender codes. The process of using the GM is manageable: it can enrich vetting and, when well facilitated, not encumber it. The GM promoted more active reflection on gender issues in many of these countries than has traditionally occurred in consolidating a humanitarian appeal. It has also opened space for discussion and debate on "what a good project is?", "what the impact of gender-blind programming is?", and "what gender standards need to be systematically observed in each sector?".

The analysis shows that the two clusters that most often design projects that address gender equality issues (code 2a and 2b) are Protection and Education. Nutrition, Food Security and Coordination Clusters more often design projects that are gender blind (Code 0) or only address gender equality in a limited way (Code 1). It should be stated, however, that some clusters have excellent results in some countries and very poor results in others (i.e. WASH, Shelter, Coordination and Nutrition). This clearly shows that leadership, gender competency and commitment can bring good gender-responsive design into any cluster: the challenge is nurturing this capacity and recognizing excellence so humanitarian actors value,

and are valued for, gender-responsive programming. Where the GenCap Advisers actively worked with clusters, they achieved impressive results. When facilitation was sporadic or weak, the majority of projects still code 0.

The 2011 implementation provides many insights. The GM has identified major gaps in sex- and age-disaggregated data (SADD) on core indicators. Most acute gaps in SADD appear in health, nutrition, and food security although all clusters need to focus on stronger gender analysis and sex/age disaggregated data. In some countries, the GM has triggered a number of CAP projects, or project activities, to help fill these critical data gaps. The GM has also resulted in more information on gender issues appearing in project sheets: in oPt, there is more than a 10-fold increase. There is also a noted increase in the number of cluster coordination projects that include gender activities: examples include more collection and application of SADD, ensuring assessments and evaluations feature SADD, and facilitating more gender dialogue.

Several factors are contributing to successful implementation of the GM. Among the key enabling factors:
- Active and consistent championing by HCs, HCTs, and most particularly, PF managers and OCHA Heads of Office with their CAP teams. The 2011 CAP process was well supported by the ERC and OCHA HQ teams (CAP and Gender) who gave consistent support and guidance to their in-country OCHA CAP teams.
- Clusters creating minimum gender standards that CAP/PF projects are required to meet in order to be part of the funding appeal.
- Enriching the GM cluster-specific tip-sheets with relevant in-country examples: implementing partners find these practical and helpful in designing their projects to have relevant gender dimensions.
- Giving maximum priority to building the confidence and competence of Cluster Coordinators: they are responsible for successful implementation of the GM in their respective clusters.
- Providing GenCap assistance played a critical role in supporting the clusters at field level. Without their support the GM would not have been successfully implemented.
- Training the cluster coordinators, vetting and review panels, and implementing partners in the GM. Most productive is including hands-on practice, accompanied with discussion, on assigning a gender code to projects. It is in coding that the 'Ah-ha' moments come: where people understand how looking carefully at the different realities, risks, knowledge and skills of males and of females can identify how to make a more positive difference in their lives.
- Providing the vetting team with practical tools for coding and for providing gender feedback to implementing partners (IPs).

Routinely conducting gender analysis and doing meaningful consultation with groups of women and men of all ages requires confidence and competence. These abilities grow incrementally with practice and require the support of skilled mentors and facilitators. The GM can contribute. However, it should not be regarded as a stand-alone tool. It will reap best results when it is part of holistic and well-facilitated gender mainstreaming activity. This has been demonstrated in countries where GenCap Advisers or other gender specialists have been pro-actively building gender skills in the humanitarian community prior to the introduction of

> Feedback from participating clusters indicates that using the gender code to explore and measure the distinct realities of women, girls, boys and men helps bring gender from a mysterious concept into a daily reality for many project teams. Being able to measure appears to make gender equality more real.

the GM. They can engage, train, encourage gender analysis and facilitate context-specific tool development prior to the time-pressured CAP or PF preparation period. They start the CAP/PF process already being respected team members with access and gravitas to mainstream gender and the GM into the appeal.

GenCap Advisers assigned specifically to CAP teams only for the three-month appeal development process or part thereof, miss some critical openings. The time for field-based gender analysis is past: cluster teams are then too focused on CAP preparation. Short-term GenCap Advisers, however, can very effectively support gender being strengthened in the CHAP, its strategic priorities and project selection criteria, cluster response plans, and projects. GenCap Advisers on short assignments were most effective in countries where they had previous field experience which allowed them to 'jump in' already familiar with key issues and players.
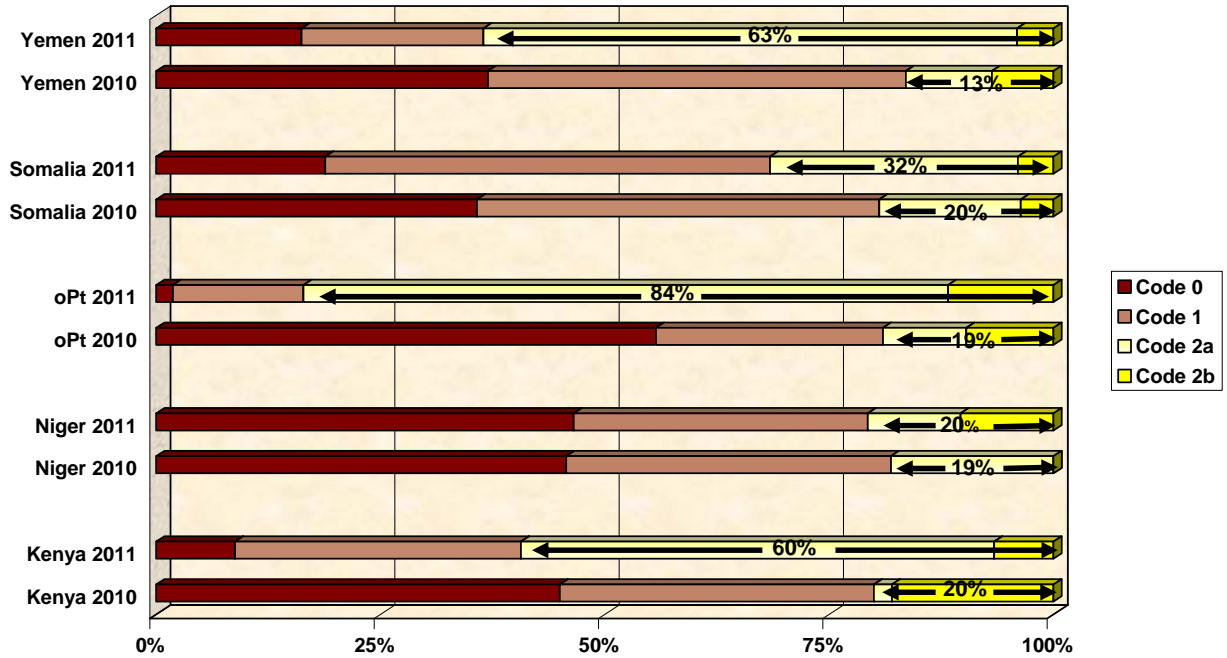
Change from Baseline

The importance of gender-responsive humanitarian action is well understood. In the six countries where there was a 2010 baseline (Kenya, Niger, oPt, Somalia, Yemen and Zimbabwe) the positive change compared with 2010 is remarkable. Reviewing the composite total, only 15% of projects were Coded 0 in the 2011 compared to 45% in 2010. Projects that mainstream gender rose from 14% to 47%. See Table 1 below for cluster by cluster improvements. This data is also presented in Chart 1.

Table 1
Change in Gender Marker Coding from 2010 to 2011 in 6 CAP Countries

Percentages of Projects	Code 0		Code 1		Code 2a		Code 2b	
Clusters	**2010**	**2011**	**2010**	**2011**	**2010**	**2011**	**2010**	**2011**
Agriculture	54%	18%	30%	39%	11%	36%	6%	7%
Coordination & Support	60%	39%	26%	24%	5%	37%	10%	0%
Early Recovery	54%	10%	24%	21%	12%	64%	10%	5%
Education	35%	3%	27%	28%	38%	65%	0%	5%
Food Security & Food Aid	29%	28%	54%	28%	14%	44%	4%	0%
Health	38%	12%	31%	28%	13%	51%	18%	10%
Multi-sector (refugees)	44%	0%	52%	41%	4%	53%	0%	6%
Nutrition	45%	29%	39%	32%	14%	35%	2%	3%
Protection	44%	8%	19%	19%	25%	57%	13%	16%
Shelter/NFI/CCM	40%	7%	50%	41%	10%	37%	0%	15%
WASH	57%	12%	30%	50%	12%	34%	1%	3%
Grand Total	**45%**	**15%**	**35%**	**32%**	**14%**	**47%**	**6%**	**6%**

The PF in DRC also had a baseline which allows comparison between the 2nd allocation in 2009 (95 projects) with the first allocation in 2010 (129 projects). Fewer projects were coded 0 in 2010 (48% of the total against 53% in 2009). While the percentage of projects being coded 1 remained the same, it is encouraging to note that 12% of projects in 2010 against 4% in 2009 were coded 2, which by DRC's slightly different coding framework, are the equivalent of code 2a. The average rating per cluster progressed, except for food security and protection.

Chart 1
Change in Gender Marker Codes from 2010 CAPs to 2011 CAPs

Legend: Code 0, Code 1, Code 2a, Code 2b

Bars (top to bottom):
- Yemen 2011 — 63%
- Yemen 2010 — 13%
- Somalia 2011 — 32%
- Somalia 2010 — 20%
- oPt 2011 — 84%
- oPt 2010 — 19%
- Niger 2011 — 20%
- Niger 2010 — 19%
- Kenya 2011 — 60%
- Kenya 2010 — 20%

X-axis: 0%, 25%, 50%, 75%, 100%

Referring to Chart 2 below, nearly 60% of projects in the CAPs from six countries are now designed to address gender equality (Codes 2a and 2b). Looking at the funding side, nearly $ 1.5 billion are being appealed for projects addressing gender equality.

Table 2
Funding and % by Gender Maker Code

Codes	US $	%
Code 0	392,966,381	16.0%
Code 1	605,409,871	24.6%
Code 2a	1,266,260,419	51.5%
Code 2b	193,458,557	7.9%
Total	2,458,095,228	100%

Total from Kenya, Niger, oPt, Somalia, Yemen and Zimbabwe

Chart 2
2011 Funding Appeals by Code

- 2b: 7.9%
- 0: 16.0%
- 1: 24.6%
- 2a: 51.5%

Legend: Code 0, Code 1, Code 2a, Code 2b
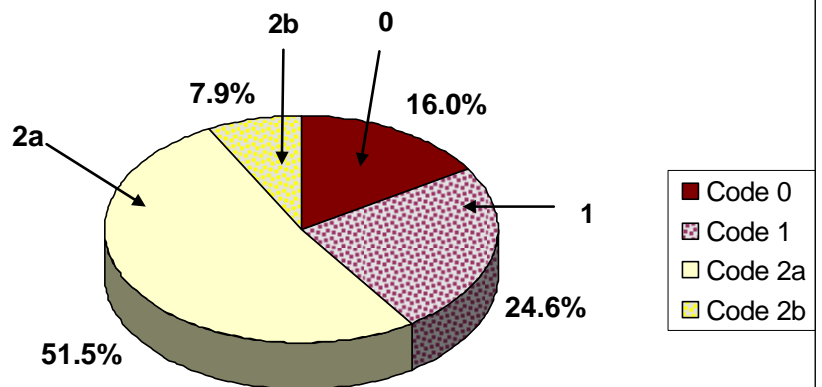
Average for 6 Countries: Kenya, Niger, oPt, Somalia, Yemen & Zimbabwe

Looking Forward

The momentum generated by introducing the GM can be sustained provided these conditions exist:
1. There is ongoing active facilitation by competent gender specialists.
2. There is meaningful recognition for efforts made by cluster teams on the gender equality front.
3. The vetting team has been sufficiently coached/trained and can see the added value of using the GM: there is a shared sense of ownership.
4. Practical, manageable monitoring can be put in place to help ensure that the gender code reflected in design is also reflected in implementation.
5. Donors fund projects that address gender equality (Codes 2a-2b) and let Implementing Partners (IPs) know that the gender code is a factor in their funding decisions.

There has been keen interest from UN gender specialists working in development to be familiar with the GM. However, most do not have time, budget, supervisor's consent, or mandate to be hands-on in supporting clusters. There is clear need for UN Women to bridge the development-humanitarian divide and nurture gender expertise that competently serves the spectrum of UN action.

Gender-based Violence and the Gender Marker

Using the GM has allowed GenCap Advisers to get an indication of how extensively GBV and the prevention of sexual exploitation and abuse (PSEA) feature in humanitarian appeals. In the 10 implementation countries, six of the eight CAP appeals had projects coded 2b that focus exclusively on GBV protection or response. Yemen, Chad, Zimbabwe, Kenya and Niger had one project while south Sudan had three. Somalia integrated elements of GBV into 27 of its 28 protection projects did not code any 2b. Likewise, GBV was integrated into gender mainstreamed projects in oPt. This has opened up a debate about whether GBV should be designed to code 2b: can single-sex GBV projects succeed without the support and strategic participation of the opposite sex? What are the implications for the gender code?

The GM has been designed to make GBV visible. Humanitarian actors/funders can access GM information on the Financial Tracking System fts@unocha.org, under 'See also' tables *grouped by gender marker*. All projects are listed by gender code and have a brief descriptor. The 2b projects which are centered on GBV are easily identified.

The depth and frequency of GBV in 2011 humanitarian projects is wide ranging. Somalia's CAP has 27 projects focusing mainly on sexual violence (including FGM), trafficking, forced and early marriage compared to Niger's CAP, which has six projects that include GBV, one of which targets preventing religion-related GBV. In contrast, the other PF in the 2011 implementation, Ethiopia's, had no projects focusing on GBV. Among the emerging and overlooked issues is the increasing GBV in schools (e.g. Somalia/Kenya—sexual violence and oPt-physical violence). The existence and quality of mechanisms for GBV prevention and response varies greatly.
A serious commitment to the prevention of sexual exploitation and abuse, including training, confidential reporting and response is only demonstrated in Somalia and south Sudan.

A key funder of the 2011 GM implementation is UN Action against Sexual Violence in Conflict.

Challenges

The IASC and its SWGs on CAP and Gender including GenCap, face three major challenges in taking the GM forward: getting global cluster lead agencies to invest in senior gender facilitators for their in-country clusters; clearing up coding confusions; and ensuring clusters have meaningful monitoring to nurture projects being implemented to fulfill their gender code.

A supportive starting point is to use the 2011 experience to analyze how best to bring gender into the various phases of the different humanitarian appeals/funds. Different humanitarian funding mechanisms offer different timeframes and entry points.

Recommendations

Global level

a. **Institutionalize success factors:** Uneven gender equality results from cluster-to-cluster and from country-to-country in the same cluster indicate global leaders are not consistently requiring good gender results at field level. Lessons learned in 2011 identify performance-enhancing actions: these should be explored and fed into the upcoming global roll-out of the gender marker. **Action by: IASC SWGs on CAP and Gender.**

b. **Strengthen cluster coordinator evaluation:** The gender practice of Cluster Coordinators is variable. More headquarter vigilance is needed to ensure cluster coordinators successfully fulfill their TOR which requires that they "ensure the implementation of the GM in appeals".[1] Feature this in coordinators' evaluations. **Action by: global cluster lead agencies.**

c. **Provide year-round technical assistance on gender to clusters:** Cluster Coordinators and cluster members need more gender technical support. As noted above, IPs need to routinely analyze gender issues and become skilled in designing and implementing projects that meet the distinct needs of women, girls, boys and men. This learning and capacity building can be enhanced during CAP preparation. However, gender analysis and gender learning needs to take place year-round. **Action by: global cluster lead agencies.**

d. **Embed GM in CAP schedule:** Realistic deadlines are needed to assist clusters in integrating the GM. Timelines should be agreed in advance and adherence strict. Each country should use a vetting/review template and feedback form that embed the GM. **Action: CAP SWG.**

e. **Seek a positive interface between the GM and results-based management (RBM):** Although the gender marker is an effective RBM tool, effort is needed to ensure that gender-specific results feature visibly in both RBM frameworks and CAP project sheets. **Action by: OCHA Emergency Services Branch with SWGs of CAP and Gender.**

f. **Ensure pro-active monitoring:** CAP and PF monitoring need to pro-actively explore whether projects are being delivered at least as well as the project design and gender code specify. **Action by: global cluster lead agencies.**

g. **Mobilize donors:** Donors need to be informed about the gender marker and encouraged to fund projects with codes that address gender equality (codes 2a and 2b as priority). If they fund projects coding 0 and 1, they should be encouraged to do so on condition that IPs are instructed to deepen the gender dimensions of the project. **Action by: ERC and cluster lead agencies.**

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[1] Extract from the IASC Operational Guidance (September 2010) – Generic TOR for country-level coordinators /leads.

Country level

a. **Recognize gender progress**: Implementing partners deserve to be valued and recognized for the energy they are investing in bringing gender dimensions into the CAP or PF. Recognition and effective monitoring that nurture positive results are needed to maintain the gender marker's momentum. **Action by: HC, inter-agency and cluster leaders.**

b. **Promote Gender Analysis**: There is need to encourage cluster members to routinely conduct and share gender analysis. This entails clear planning and gender technical support for gender capacity building. **Action by: HC, HCT and cluster coordinators.**

c. **Ensure technical assistance on gender in clusters:** It is the responsibility of all cluster lead agencies to secure gender TA for their respective clusters. **Action by: global cluster leads.**

d. **Ensure technical assistance on gender in inter-cluster coordination fora**: Active, well-supported and senior gender marker focal points are needed to serve the HCT. Their role is to both monitor and mentor GM implementation in the clusters and in inter-cluster collaboration. **Action by: OCHA supported by GenCap and others.**

e. **Champion gender equality:** Gender champions are essential to create openings for gender dialogue and integration of gender issues in inter-cluster activities. **Action by: HCs, OCHA and inter-cluster coordination leads.**

f. **Mobilize donors:** Donors need to be informed about the gender marker and encouraged to fund projects with codes that address gender equality (codes 2a and 2b as priority). If they fund projects coding 0 and 1, they should be encouraged to do so on condition that IPs are instructed to deepen the gender dimensions of the project. **Action by: HC, HCT and cluster coordinators.**

Strategic Approach

Action By: IASC SWGs on Gender and CAP in collaboration with GenCap

In view of the lessons learned during the 2011 implementation, it is now strategic for the IASC SWGs and GenCap to fully examine the field role of GenCap advisers in CAP and PF processes. Key issues to reflect on should include, but not exclusively focus, on these:

a. The need for more clarity and direction on how gender dimensions will 'weigh' in project selection. Will projects be rejected if critical gender issues are not addressed? Fund Managers are seeking this clarification. DRC is considering using the gender code to measure how well an organization implements from a gender perspective, then having this factor into evaluating the risk level of the partner (for instance, if monitors assess that a project is still being implemented as a code 0 on more than two monitoring cycles, the organization could move from "moderate" to "significant" risk level)

b. Helping project teams to design and implement gender-responsive projects should be an ongoing and year-round focus of all clusters. Gender activity should not focus exclusively on appeal preparation. However, the appeal preparation period should be maximized to include a gender perspective. It is important to identify how to get most value from the short 'windows of opportunity' before vetting, between initial and final vetting, and before CAP finalization.

c. During vetting, GenCap Advisers can serve a useful role on vetting panels. However, in countries with eight or nine clusters, there can be intensive vetting over several days. Note that if the GenCap Adviser is spending four or six hours on a vetting panel that discusses gender and several other issues, that the same GenCap Adviser has just forfeited these hours that could

have been invested in advising project teams on how to strengthen the gender dimensions and gender codes of their projects. GenCap Advisers should ensure participation is strategic and manageable in vetting and review panels.

d. Seek manageable equitable approaches to helping IPs improve the gender codes of projects which vetting panels code 0 or 1. This support will be needed for some time and it should be a priority to provide it. The time that project teams get the bad news that their project warrants only a code 0 or 1 may be when they are most open to exploring how to better design their projects: this fertile opening should be maximized.

e. Between vetting and fund closure, ensure that GenCap Advisers properly balance how they invest their time. Assisting project teams to make last-minute gender improvement in their projects is important. Urgent priority must, however, be given to two activities:

- Verifying that the codes assigned by review and vetting panels are correct. Cluster leads need to be informed as soon as possible if coding needs correction on any of their projects in order that they can inform the applicants in a timely manner. If timely notice is provided, this offers the applicant a short 'window' to improve the project design.
- Ensuring gender is fully addressed in the final version of the CAP and PF country document (CHAP and cluster response plans).

A third and important role is to respond to requests from project teams for help in improving projects that have been assigned code 0 or 1. This is important work but, as the 2011 implementation shows, is time consuming: ensure timely coding verification takes precedence.

f. Maximize project improvement opportunities year-round. South Sudan's GenCap Adviser strategically invested in applying the GM and providing gender support to all new projects added at mid-year review (before the GM was formally launched). Strategic use of the mid-year review triggers year-round attention to gender-responsive programming.

g. Invest in engendering active monitoring and evaluation which will nurture projects implementing fully, or even surpassing, the gender code assigned at project design.

h. Consider practice coding as one device to improve GenCap Adviser support. GenCap Advisers, as well as cluster teams, have stated that they learn a lot by practice coding. (Niger, Sudan, DRC, oPt) It would be constructive to have the next GenCap retreat include some practice coding. This would assist in identifying and clearing up common coding confusions. It also has potential to tickle out tips on how to best facilitate useful sessions on project improvement.

Tool Development

Action By: IASC SWGs on Gender and CAP in collaboration with GenCap

a. Enrich the existing Gender Marker Toolkit by: clarifying coding rules and improving the How-to-Code Tip-sheet; revise the Guidance Note to give more specific information on how to make best use of gender technical expertise at each step in the CAP cycle; using the well rehabilitation tool, which shows how one water project can be designed to be coded respectfully 0, 1, 2a or 2b, as a template to create a similar tool for each cluster.

b. In PF countries, a fuller GM template was integrated in the project review process than is now used in the CAP process. Both PF review templates have columns where reviewers note the reasons a specific gender code was assigned and recommendations for improvement. A series of PF tools on how to integrate the GM should be developed and web posted. This toolkit should build on the strengths of the successful field-tested tools used in DRC and Ethiopia.

c. Translate key GM resources into major relevant languages.

d. Advocate that GenCap Advisers, upon arrival in-country, 'shop' for examples of projects coding 0, 1, 2a and 2b in that country's most recent appeal to use as coding examples.

Introduction & Background

There is universal acceptance that humanitarian assistance must meet the distinct needs of women, girls, boys and men to generate positive and sustainable outcomes. However, evaluations of humanitarian effectiveness show gender equality results are weak. Recent reports of the UN Secretary-General call for analysis and tracking of gender-related allocations. Security Council and the General Assembly resolutions require it. The reality: advancing gender equality requires focused action. In response, the IASC Sub-working groups on the Consolidated Appeal Process (CAP SWG) and Gender and Humanitarian Action (Gender SWG) created the IASC Gender Marker (GM). It aligns with similar recent initiatives by OECD/DAC and UNDP.

The **objective of the IASC GM** is enhancing aid efficiency and effectiveness through better targeting based on the distinct needs of female and male beneficiaries of all ages. The marker also facilitates tracking gender allocations in humanitarian projects. This includes support to addressing sexual and other forms of gender-based violence (GBV).

> **Gender Marker Roll-out in 2010 for the 2011 Cycle**
>
> CAPs: Chad, Haiti, Kenya, Niger, oPt, Somalia, S. Sudan, Yemen and Zimbabwe.
> Pooled funds: DRC and Ethiopia.
> Pakistan: PFERP.

The GM is being implemented in 2011 for the first time. The implementing countries[2] are Chad, DRC, Ethiopia, Kenya, Niger, oPt (Palestine), Somalia, south Sudan, Yemen and Zimbabwe. A global roll-out will follow. This report captures highlights and insights from the 2011 implementation.

Financial support for the marker roll-out came from the Multi-donor Trust Fund of UN Action against Sexual Violence in Conflict (UN Action) and the GenCap Project supported by the Governments of Australia, Canada, Norway, Switzerland and the United States.

The Gender Marker – Much More than a Measuring Tool

Women, girls, boys and men are affected differently by conflict and natural disaster. Knowing their different needs and realities is key to effectively and efficiently responding to them. The GM, therefore, has been designed to measure whether projects are designed well from a gender perspective. Good design is the critical starting point. The GM also aims to nurture effective implementation and monitoring.

The IASC GM has two roles:
- Measuring: to track gender-related allocations and their results
- Enabling: to build the capacity of humanitarian teams to give voice and agency to beneficiary males and females throughout the project cycle

The measuring role: The IASC GM is a tool that codes, on a 0-2 scale, whether or not a humanitarian project is designed well enough to ensure that women/girls and men/boys will benefit equally from it or

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[2] It was originally hoped that the gender marker would be implemented in 11 countries in 2011, including Haiti. In Haiti The GM was introduced in the CAP workshop, GenCap Advisers with appropriate French language skills were, however, fully committed during the CAP preparation cycle in other countries. Haiti is, therefore, not included in this report. GenCap was able to provide gender mainstreaming support prior to, but not during, Haiti's CAP process.

that it will advance gender equality in another way. If the project has the potential to contribute to gender equality, the marker predicts whether the results are likely to be limited or significant. Cluster vetting teams assign each of their cluster projects an accurate gender code.

The Gender Marker Codes	
Gender Code 0 **No visible potential to advance gender equality**	**Gender is not reflected** anywhere in the project sheet. There is risk that the project will unintentionally nurture existing gender inequalities or deepen them. Project Examples: removing rubble, repairing roads, installing water systems or providing non-food items with no indication that females and males both have the right to benefit or of differences in male and female needs, skills, abilities, protection concerns etc.
Gender Code 1 **Potential to contribute in some limited way to gender equality**	The project has gender dimensions in **only** one or two components of the critical three components: 1) Needs 2) Activities 3) Outcomes. Project examples: analyzing the nutritional needs of men, women, girls and boys, local food preparation, cooking & sharing practices but failing to reflect these local gender realities in activities and/or outcomes; setting up separate male/female toilets and bath areas for IDPs but providing no indication that male and female beneficiaries have a voice in ensuring the facilities are culturally appropriate and meet their respective needs.
Gender Code 2a **Potential to contribute significantly to gender equality**	A **gender analysis** is included in the project's needs assessment and is **reflected in one or more of the project's activities and one or more of the project outcomes.** The project reflects gender mainstreaming. *Gender Analysis of Needs* $\Longrightarrow$ *Activities* $\Longrightarrow$ *Outcomes* Project examples: using vouchers, designed with inputs from male and female farmers, to provide agricultural training and inputs equally to women and men; providing demand-driven psycho-social services to girl and boy ex-combatants based on their different needs.
Gender Code 2b **Potential to contribute significantly to gender equality: this is the principal purpose of these projects**	All 2b projects are *targeted actions* based on gender analysis*.* In humanitarian settings, targeted actions are usually of these two types: 1. The project assists women, girls, boys or men (or groups of one sex) who have special needs or suffer discrimination. 2. The project focuses all activities on building gender-specific services (e.g. GBV mechanisms) or more equal relations between women and men. Project examples: providing reproductive health services to men where there is documented unmet need (and if the existing services only target women); promoting girls' education where fewer girls attend school; preventing and/or responding to gender-based violence or to sexual exploitation and abuse by humanitarian workers; conducting sector-wide research into gender issues.

GenCap Advisers supported the in-country implementation of the GM in several ways: in three-month consultancies dedicated to CAP preparation; through integration into the wider responsibilities of longer-term GenCap Advisers; and in some countries by a combination of distance mentoring and shorter in-country missions. Advisers' tasks included supporting the HCT and clusters to ensure strategic

gender dimensions are included into their country's Common Humanitarian Action Plans (CHAP), cluster needs assessments, cluster response plans, and projects. In short: mainstreaming gender in all stages of CAP preparation. An integral aspect was to assist clusters to give appropriate care and priority to GBV.

The GM has been conceived to be used across the spectrum of humanitarian appeals and funding mechanisms. The CAP is the starting point, with concurrent pilot implementation in PFs (e.g. DRC and Ethiopia were part of the initial piloting in 2009). The CAP is the globe's largest humanitarian funding vehicle. The Central Emergency Response Fund (CERF) provides funds for humanitarian action in the largest number of countries. As CERF allocates funds to CAP projects in underfunded countries, embedding gender equality well in CAP appeals subsequently brings the double benefit of bringing gender-responsive design to CERF projects. Initiating the use of the GM into Flash Appeals will be the challenge for 2011 and beyond.

This report will explore, among other issues, the degree of facilitation needed to effectively implement the GM to inform the upcoming global roll-out. Where available, the gender strengths of the 2011 CAPs will be compared to a 2010 baseline.

Purpose of this report

This report captures learnings from the first implementation of the IASC gender marker focusing on the three-month development phase of humanitarian appeals/funds in 10 countries in order to inform the upcoming global roll-out.

The report is anchored in the GenCap Adviser reports from the 10 implementing countries, conversations with these GenCap Advisers and project data from the CAP/OPS database.

Preparing for the IASC Gender Marker

The front-line implementers of the GM are the clusters and their project teams. However, many others assist to create the enabling environment for gender-responsive humanitarian action. The implementation in 2011 was supported by these actions.

Establishing legitimacy
At the global level, the IASC and the UN Emergency Relief Coordinator were responsible for the creation of the IASC GM and soliciting funding for both development and implementation. The GM has legitimacy because it was created by the IASC's CAP SWG, the global leaders in humanitarian fundraising and fund management, as well as the IASC's Gender SWG. The gender marker is also a timely fit as an accountability tool that is part of the UN's application of a results-based management (RBM) approach.

Mobilizing global leadership
The Emergency Relief Coordinator has championed the GM in e-mails to all Humanitarian Coordinators (HCs) and cluster lead agencies; HCs in the implementing countries committed to leading the in-country process; and cluster lead agencies agreed that their in-country cluster leads/coordinators be responsible for the GM being effectively implemented within their respective clusters.

Providing operational guidance and tools

The IASC GM is now featured in guidance notes for the CAP and the CERF. The GM is also integrated into CAP and CERF templates and trainings in addition to training for HCs and cluster leads.

When the decision is made to implement the GM in a country, a GM field is activated on the On-line Project System (OPS). The OPS is an UN-managed humanitarian database. Organizations that want their projects included in a CAP, upload their project into an (OPS) project sheet. Before a project team can exit the OPS site, the project designers must fill in the GM field, assigning a gender code to their project. The gender code for each project is then verified, or corrected, by the cluster vetting panel when it selects projects it recommends be part of the CAP.

Cluster lead agencies[3] are responsible for providing orientation, backstopping and gender technical assistance to their field cluster coordinators/leads.

In country, the HC and HCT are to champion the GM. The HC appoints a gender marker focal point to supervise the implementation: often this is a senior OCHA staff person. Gender technical support during the 2011 implementation was provided by GenCap advisers with support from OCHA CAP teams and PF management, cluster lead agencies and cluster coordinators. (see box below)

Country	CAP and Pooled Fund Focal Points	GenCap/Gender Advisers
Chad	David Cibonga	Jean-Baptiste Mikulu
DRC	Andrea De Domenico	Delphine Brun
Ethiopia	Tim Mander	Njoki Kinyanjui
Haiti	Cecilia Utas	Caroline Blay
Kenya	Luluwa Ali/Murugi Maina/Carolin Waldchen	Siobhán Foran
Niger	Olivier Eyenga	Catherine Andela
oPt	Rosemary Willey- Al'Sanah	Linda Pennells
Pakistan	Victor Lahai/ Nicola Bennett	Fareeha Ummar
Somalia	Angela Valenza/Leith Baker/	Siobhán Foran
south Sudan	Alta Haggerty/ Thomas Nyambane	Jessica Gorham
Yemen	Carlos Geha	Peter Ekayu
Zimbabwe	Marcel Vaessen	Alexina Rusere

The IASC-GenCap partnership has also created a Gender Marker Toolkit. It includes a *Guidance Note for Clusters to Implement the IASC Gender Marker* (June 2010). The Guidance Note is written especially for cluster leads, as they are the key implementers. Central to the toolkit are also cluster/sector-specific tip-sheets that cluster leads can use to help their partners integrate gender issues into their projects. Using these tip-sheets will assist project teams to identify and respond to the needs of male and female beneficiaries better. In so doing, their projects will have the best chance of integrating gender issues well and achieving the appropriate codes of 2a or 2b. Rounding off the toolkit are tips on gender coding and field reports on GM experience to date. Website: ***http://gender.oneresponse.info****.* The toolkit is also available in French.

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[3] Agriculture: FAO; Camp Coordination/Management: UNHCR (IDPs from conflict) & IOM (natural disaster; Early Recovery: UNDP; Education: UNICEF/Save the Children-UK; Emergency Shelter: UNHCR (IDPs from conflict) and IFRC (disaster situations); Emergency Telecommunications: OCHA/WPF; Health: WHO; Logistics: WFP; Nutrition: UNICEF; Protection: UNHCR (IDPs from conflict) and UNHCR/OHCHR/UNICEF (disasters and non-IDP civilians affected by conflict); Water, Sanitation and Hygiene (WASH): UNICEF. Global cross-cutting lead for gender: UNFPA/WHO.

Linking the Gender Marker to Gender Mainstreaming in the CAP and Pooled Funds

It was clear from the outset that the GM is not a stand-alone tool. It complements a range of gender training, resources and activities on gender mainstreaming. These include the *IASC Women, Girls, Boys and Men, Different Needs – Equal Opportunities: the Gender Handbook* and the *IASC Gender-based Violence Guidelines*; the IASC's e-learning on gender in humanitarian response; the UN policy of zero tolerance to sexual exploitation and abuse; gender-integrated SPHERE standards; and several agency and IO-specific gender standards and tools.

The CAP consists of the Country Humanitarian Action Plan (CHAP), which includes the country's strategic objectives, needs assessment and strategy for humanitarian response. The CHAP gives the direction and the parameters for each cluster/sector and their response plans. It also includes sectoral response plans, which in turn identify what types of projects will be funded in the CAP. The projects are the third major CAP component.

Pooled funds also include the equivalent of a CHAP, sector/cluster response plans and projects. Efforts are being made to harmonize project sheets: this will better facilitate the use of the GM.

Humanitarian Coordinators are responsible for maximizing opportunities to advance gender equality in all elements of humanitarian appeals. GenCap Advisers, were therefore, tasked to use the GM to assist in strengthening relevant and strategic gender dimensions to the CHAPs, cluster response plans, and monitoring regimes as well as the humanitarian projects.

Implementing the Gender Marker

The experience of the Gender Advisers working with CAP and PF teams in the 2011 implementation identified several valuable in-country steps for successful GM implementation. They are compiled and included in the table below. Most GenCap Advisers implemented the majority, but not all, of these steps.

Interviews with GenCap Advisers identified the key factors which affected the depth of their work as: the GenCap Advisers' competence, energy, relationship with humanitarian actors and local field knowledge; the quality of UN leadership and championing; access to key humanitarian actors influenced by the local communications, logistics and security regime; the country's gender equality index; the cluster coordinators' level of commitment, comfort and competence to implement the GM; and the percentage of time the GenCap Adviser could devote to the appeal/fund compared to other tasks. All factors varied by context and by adviser.

All GenCap Advisers were asked to implement the GM based on the Guidance Note: hence, core activities including HCT and cluster engagement, input into the CAP/PF document, GM orientation and gender coding guidance were conducted by all. The factors noted above contributed to variances in quality and degree. GenCap Advisers were also given the flexibility to be creative and identify other activities that contribute to effective implementation: a number of these additions are also included in the table below.

Steps for Implementing the Gender Marker

Action	Reason / Comment
Setting the Stage	
Undertake a review of the prior year's funding appeal	Be prepared. Put the previous year's CAP or PF document through a gender lens. Analyze thoroughly and assign gender codes to all projects to establish a baseline.
Hold separate face-to-face briefings with HC and Heads of Cluster Lead Agencies	Introduce self, GenCap mission and GM. Inform on GM, seek their input on opportunities/barriers facing GM implementation, encourage them to champion the GM and start relationship building.
Have face-to-face meeting with each cluster lead	Introduce self, GenCap mission and the GM. Inform, gain their insight, identify and map opportunities for GM support and start relationship building. Identify champions and resistance: follow-up first with enabling cluster leads. Design strategy for later engagement of resisters. **Niger-** The GenCap Adviser conducted a desk-top review to provide gender data and issues to strengthen her engagement with clusters.
Be an active and consistent participant in inter-cluster coordination fora	Proven a valuable entry point for building relations with cluster coordinators. Most important, it allows the GenCap Adviser to be current with cluster priorities/issues and to provide equal information, gender TA offerings and exposure on the GM to all clusters. Explicitly mentioned as pivotal in **Zimbabwe, Sudan, Pakistan** and **DRC**.
Identify and engage Gender Specialists	Identify existing gender networks both in humanitarian action and development. Introduce the GM. Collectively map out the role these gender specialists (government-IO-NGO) are able to play in supporting clusters to implement the GM. Insightful examples: **Somalia, Pakistan, Zimbabwe** and **Yemen.**
Conduct awareness sessions with clusters on IASC gender/ GBV manuals then link with orientation on the GM (GM toolkit)	Orient in the importance of gender in humanitarian action and humanitarian funding; introduce the IASC manuals and GM tip-sheets for IPs to use to deepen gender analysis; then introduce the GM. Essential that cluster leads participate. Introduce the e-learning. Example: **Chad** – In-depth training in gender using the IASC manual was essential before introducing the GM due to limited in-country gender capacity. Example: **south Sudan** introduced the GM to key humanitarian actors in the mid-year review (MYR) prior to the GM launch. The GenCap adviser gave technical and gender coding assistance to all new projects submitted in the MYR.
Facilitate each cluster creating 'minimum gender standards'	Demonstrated in **Somalia, Kenya, Ethiopia and DRC** to be useful in CAP and PF. In DRC each cluster identified approximately five requirements for each projects in order to be coded well by the PF. Compliance with cluster gender standards is required, reviewed and monitored.
Support clusters to strengthen their gender analysis	Assist cluster leads and gender teams to collect/ sex- and age-disaggregated data in their ongoing surveys, assessments and evaluations; then integrate into databases to inform cluster activities and projects.
Facilitate clusters developing gender tools to support the fund/appeal process	PF examples: **Ethiopia**- gender issues and GM included in applicant self-assessment tool and templates for project review, selection, feedback and monitoring. **DRC**- gender dimensions and the GM were built into the PF project sheet template, applicant self-assessment tool, project review template, feedback form, evaluation template and fund database. **CAP** examples: cluster-specific in-country guidance notes and 'how-to' guides that include gender and the GM.
Support CAP/PF to integrate the GM into tools/ resources	Example: **oPt**- GM inserted into oPt CAP Guidance, into the Year-in-Review template, and vetting panel assessment/feedback form.
CAP / PF Preparation	
Ensure CHAP strategic objectives and selection criteria give GE priority	Support the HCT to ensure the country's strategic objectives for humanitarian action include priority for gender equality: this is essential to anchor gender in the results chain. Linked to this, ensure project selection criteria include gender dimensions.
Support gender/GM being meaningfully on the agenda of all national & district CAP/PF workshops and inter-cluster meetings	Provide as-needed support (slides, speaking notes, brain-storming) to HC, Head of OCHA or CAP / PF teams as appropriate. Facilitate and co-facilitate sessions as opportunities allow. Research country-context examples of gender issues in key clusters and provide compelling case studies/examples to the CAP/PF team to use on these occasions. Emphasize the need for gender analysis in each cluster's NAFs. In **DRC** – disseminated a 2-pager on the implications of gender-blind programming on aid effectiveness using sector-relevant local examples.

Advise clusters and their partners on project design	Assist IPs to mainstream gender into their project design well at the outset: this saves revision and bruised egos later.
Critique and bring gender 'value-added' to NAFs	Advise clusters on how to highlight and/or strengthen their NAFs with relevant SADD & gender issues.
Critique and bring gender 'value-added' to Cluster Response Plans (CRPs)	Support clusters to ensure gender is reflected in both response and results/indicators.
Practice coding with OCHA CAP	In many countries, OCHA reps are present at each vetting. This training is essential so they can confidently, competently facilitate vetting panels reaching consensus efficiently on an accurate gender code for each project.
Support clusters on coding: practice coding with cluster coordinators, IPs and/or vetting /review panels	Conduct sessions where participants practice coding. Train cluster coordinators, 'vetters' and IPs to scan projects so that gender dimensions and the gender code resonate. It is important, and most respectful, to do this *before* projects are first written so project teams can write them well the first time. Practice coding also trains 'vetters' and reviewers to do efficient and accurate coding.
Advise on improving projects between first and final vetting/review stages	Provide gender TA when projects code 0 or 1 and their IPs are keen to engage on project improvement. This is a short window for revision: inform clusters and their IPs, in advance, that gender TA is available so this service can be maximized. It is hoped here that a small group of gender specialists, not solely the GenCap Adviser, will be competent and available to give technical support.
Validate coding accuracy	Review all gender codes assigned by vetting/review panels 1) for accuracy and 2) to analyze any miscoding and determine if more capacity building on coding is needed in the future.
Correct incorrect coding	Advise cluster leads & IPs on miss-coded projects so they can inform IPs. Time permitting, help projects incorrectly coded a 2 to earn the 2 and avoid down-coding. All incorrect codes must be corrected on OPS: who does this, and when, needs to be agreed in advance by the CAP / PF team and cluster leads.
Require each cluster to present gender code results in its panel defense to HCT	The HC and the HCT need to approve the projects each cluster lead presents for inclusion in the CAP. Usually each cluster lead makes a brief presentation summarizing the cluster targets, outcomes, project profile (#, value, focus). **south Sudan** was one of the countries that required clusters to present their gender codes to the HCT and donors present: a proud moment for some....a humbling one for others. The GenCap Adviser also circulated a GM factsheet.
Create a cluster-by-cluster gender resource from the CAP documents	Example: **oPt**. Extracting all pieces of gender data and gender issues from all CAP projects and all NAFs, by cluster, and compiling this into a 'learning resource' for cluster teams.
Document GM lessons learned	Agree on lessons learned with the in-country CAP / PF team. Document learnings for inclusion in lessons learned processes. **Ethiopia** - documents GM progress referring to gender audits and evaluations that call for better humanitarian GE results.
Mid-Year Review, Implementation and Monitoring	
Build the capacity of the CAP team/clusters and PF in gender monitoring	Most monitoring forms are checklists. Qualitative monitoring is essential to assess if projects are being implemented to fulfill their gender code: monitoring needs to include providing constructive insight and suggestions on gender-responsive implementation. Example: **DRC** – the GenCap Adviser trained the five members of the PF monitoring and evaluation team in the GM, has provided cluster-specific gender standards and tools to assist in M&E, and has conducted in-field coaching of monitors. Example: **oPt** – GenCap has recommended that 1) each cluster ensure a minimum of 10% of all funded projects conduct single-sex focus groups with male and female beneficiaries on project implementation for input into the MYR 2) a gender and M&E specialist dedicate a week to each cluster to identify an active approach for monitoring GM implementation and a practical shortlist of gender indicators to be included in the cluster's monitoring regime.
Document GM lessons learned	Agree on lessons learned with the in-country CAP / PF team. Documenting lessons learned for inclusion in the mid-year and year-end reports.
Communicate GM results to donors	Use reports and presentations to ensure donors and other key stakeholders see the value-added of the GM and feel ownership in its implementation. Encourage replication by bilateral and other donors.

CAP activities predominate in the table above. The structure and operation of PFs result in some different implementation steps. Hence, two examples are provided here of how GenCap Advisers facilitated the GM implementation in PFs.

Implementing the Marker in Pooled Funds

In DRC and Ethiopia, the GenCap Advisers had been supporting the HCT and clusters in gender mainstreaming for more than a year prior to the implementation of the GM. The key humanitarian funding mechanism in both countries is a PF. Their longer placements allowed them to create a fertile environment for the GM. They had already established good working relationships with the clusters and gender champions; had in-context knowledge of critical gender issues; were actively building gender capacity; and had facilitated gender tools to strengthen the PF's implementation.

The GM reinforced and complemented this existing work. Both PFs now require each project to have a gender code. Ethiopia's GenCap Adviser said this gave the GM "a soft landing". There was also time to do training on the IASC gender and GBV manuals, then link this training to the GM.

(Although Chad was an exception, some short-term GenCap Advisers arriving in other countries to focus specifically on CAP preparation often had to negotiate skillfully to get adequate time to train effectively on the GM: there was often no time to adequately include training on the IASC manuals.)

GenCap activity in Ethiopia's Humanitarian Response Fund (HRF) featured assisting the fund's team to:

- *Revise and engender the PF templates:* (overall guidelines, application template, progress and final reporting templates, budgets) A gender checklist, adopted from the IASC and CARE Gender Handbooks, was embedded as a guide. The excel budget sheet requires applicants to highlight any gender-related allocations to ensure that gender-specific activities are resourced. This approach implicitly underscores the importance of adhering to gender mainstreaming as a strong criteria for a project attracting funding: applications with weak gender integration can be funded but with strong recommendations on how to mainstream gender during implementation.   (Much of this work pre-dated the GM)
- *Conduct an introductory workshop* dedicated to profiling the GM as an important tool in the PF mechanism and produce an action plan for GM implementation. All clusters and major implementing partners were present. This workshop flowed into the ongoing work on gender mainstreaming and made approaching the clusters on GM implementation easier.
- *Train clusters* in the GM and gender-responsive project design. Most focus was on: NFI/emergency shelter/CCCM, WASH, Education and Protection clusters, including the GBV Sub-cluster.
- *Provide gender advice and templates/tools* at three review levels: project team self-assessing the gender dimensions and gender code of their own project prior to submission; peer review - technical; and review board. The peer review tool calls for the code to be identified, the reasons justifying the code, and comments on project improvement and potential implementation challenges.
- *Assist project teams* to improve projects as per peer review requests prior to vetting by the review board.
- *Strengthen monitoring:* Integrate the gender template into MYR monitoring.

In DRC, the GenCap Adviser supported the Common Humanitarian Fund (CHF) to:

- *Create minimum operational gender standards*, usually five practical requirements, for each cluster which are country-specific. All projects submitted to the PF are reviewed to determine their level of compliance with the minimum standards. (See Annex A for examples).
- *Strengthen tools and templates:* created self-assessment tool for project teams; strengthened gender dimensions required in the project sheet; added the GM and gender questions to the review template (e.g. compliance with the minimum standards); and developed a feedback template advising project teams on how to improve the gender dimensions of their projects.
- *Support technical review panels:* The GenCap participated in all technical project reviews in 2009. In 2010, she attended the technical reviews for the sectors whose vetting teams requested additional support.
- *Enhance monitoring:* The PF database has been modified and the M&E template revised. The five PF monitors, all trained in the GM, insert information on how well the GM is being implemented into the database. They also enter, into the database, a gender code that reflects implementation at that point. The GenCap Adviser conducted in-field coaching of the M&E team, sensitizing them to the importance of separate consultations with women and men as well as coaching them in participatory tools. Participation explores issues of access and control related to project activities and project benefits.

Results

Factors Constricting Full and Timely GM Implementation

Constraints limiting Gender Marker/GenCap Results

Kenya was implementing the GM at a strategic, but taxing time, as the first country team to develop a multi-annual CAP appeal (2011-2013). In addition, the CAP time conflicted with UN support to the government in contingency planning for a Constitutional Referendum (14 August). The GenCap Adviser was tasked to support the Kenya team (approximately three weeks) and the Somalia team (nine weeks), as both offices are based in Nairobi. The time-consuming travel between the two missions and the challenges of remote programming in Somalia (no in-country access for the GenCap Adviser) put limitations on the extent of GM facilitation.

Security issues in Somalia not only impede humanitarian access but also limit the on-ground presence of international NGOs and UN agencies. Particularly in the South Central Zone, this means that the majority of IPs are local NGOs and there is very limited monitoring or evaluation of project implementation. The impact of all GM orientation, conducted in Kenya, relied on the skill and commitment of national staff bringing the message to in-country Somali implementation teams.

In countries that score near the bottom on human development and gender indices, the IASC can expect greater structural and socio-economic challenges to mainstreaming gender. In Niger, for instance, 90% of women have no identity cards and low literacy levels most deeply impact women (F-15% M-40%): indicators of the depth of existing gender inequality. The 2011 CAP - Niger's first - comes in tandem with the start-up of nine clusters, which do not include an Education Cluster. Although the GM was integrated into this initial CAP process, contributing to easy acceptance, the entire humanitarian community is dealing with a taxing amount of change at this time. Gender progress should be viewed within this reality.

Likewise, in Zimbabwe, cluster teams were facing high levels of change. The Government of Zimbabwe rejected emergency measures and requested the CAP focus on early recovery. A new Early Recovery

Cluster had to gear up and all clusters focused on changing to a needs-based programmatic approach for the 2011 CAP. Each cluster identified specific priorities. Then, a lead organization was selected for each priority area. The lead organization submitted a comprehensive project, on behalf of all IPs, to respond to its priority need area. Cluster members agreed on the activities to which they would each contribute. As the majority of cluster focus was on understanding and facilitating this new CAP approach, less energy was devoted to project design, thereby reducing the impact of the GM at the project level. Also missed was any gender capacity building of the vetting panel during coding: due to the tight timeline, the GenCap Adviser and another colleague coded all projects.

The GenCap Adviser was not in Chad during vetting and CAP finalization while a contract extension was being arranged. The Chad humanitarian team of both national and international staff is dominated by men who, with few exceptions, have had limited exposure to gender equality programming. The country has been largely neglected by gender capacity builders. UN and IO gender capacity is limited and many cluster leads demonstrated little accountability for GM results.

Unlike other countries in the 2011 roll-out, technical glitches delayed the activation of the GM field on Niger's OPS. This was successfully completed just before the closure of the CAP. Hence, the GenCap Adviser stepped in to assign accurate gender codes as vetting was already complete. The loss here is that vetting panels did not reflect on gender issues or gain skill in gender coding.

Lack of adequate numbers of available French-speaking GenCap Advisers on the GenCap roster meant that there was no GenCap Adviser available to support the CAP preparation cycle in Haiti. Clusters, therefore, were supported only by brief orientations and the Gender Marker Toolkit. Likewise, circumstances did not allow on-ground GenCap adviser support to the local team on Pakistan's 479-project Floods Emergency Response Plan. Although valuable GM activities were conducted in both locations, the emergency environments proved too complex for full GM implementation: codes therefore are not included in this report. A useful foundation has been laid for full GM implementation in 2012.

In a number of countries some cluster leads were not supportive of the GM. They either did not fulfill their leadership role or blocked GenCap advisers from engaging their clusters.

Operational Constraints
There is little time between vetting and CAP closure for two critical roles: 1) project improvement, including enhancing gender dimensions/gender codes and 2) country-level and HQ verification that the codes assigned during vetting are accurate. This clearly states the benefit of having year-round gender technical assistance supporting clusters to design their projects with solid gender dimensions so that last-minute frenzied revisions are minimal. Likewise, if vetting panels have a good understanding of the gender code in advance of the vetting, they can assign correct codes and minimize requests from the verification teams that codes be changed. As most code changes in 2011 were down-coding, it is much more courteous to project teams if vetting panels have been trained well and are able to assign the correct codes.

There is an increasing trend by cluster lead agencies to recruit short-term consultants to be cluster leads for 2-4 months supporting CAP preparation. The GM and the RBM approach warrant active facilitation year-round. Cluster-lead turnover is an issue. In UNICEF oPt, for example, three very skilled and dedicated cluster leads (Protection, Child Protection and Education) were on short CAP contracts: their support will be much missed during implementation.

In Ethiopia, local NGOs are often the on-ground implementing partners of PF applicants. However they are not direct beneficiaries of the PF and thus may not be targeted in capacity building and awareness sessions. Successful implementation of the GM will rely on cascade training by NGOs and UN agencies of their local NGO partners.

A related issue: the CAP process, even more than the process for PFs, is intensive. CAP preparation alone often dominates up to three months of participants' time. This chokes out local NGO participation and often limits the participation of government representatives and NGOs. In Chad, a further dimension was raised. The rigidity as well as the all-consuming aspects of the CAP development process frustrates gender integration. These concerns add to other realities, cited elsewhere in this report, which clearly point out the need to pre-plan when to do what from a gender perspective in the CAP process.

Baseline Information: Change from 2010 to 2011

The importance of gender-responsive humanitarian action is well understood. In the six countries where there was a 2010 baseline (Kenya, Niger, oPt, Somalia, Yemen and Zimbabwe) the positive change compared with 2010 is remarkable.

### Change in Gender Marker Codes from 2010 CAP to 2011 CAPs in Six Countries
*Kenya, Niger, oPt, Somalia, Yemen and Zimbabwe

Percentages of Projects	Code 0		Code 1		Code 2a		Code 2b	
Clusters	2010	2011	2010	2011	2010	2011	2010	2011
Agriculture	54%	18%	30%	39%	11%	36%	6%	7%
Coordination & Support	60%	39%	26%	24%	5%	37%	10%	0%
Early Recovery	54%	10%	24%	21%	12%	64%	10%	5%
Education	35%	3%	27%	28%	38%	65%	0%	5%
Food Security & Food Aid	29%	28%	54%	28%	14%	44%	4%	0%
Health	38%	12%	31%	28%	13%	51%	18%	10%
Multi-sector (refugees)	44%	0%	52%	41%	4%	53%	0%	6%
Nutrition	45%	29%	39%	32%	14%	35%	2%	3%
Protection	44%	8%	19%	19%	25%	57%	13%	16%
Shelter/NFI/CCM	40%	7%	50%	41%	10%	37%	0%	15%
WASH	57%	12%	30%	50%	12%	34%	1%	3%
Grand Total	45%	15%	35%	32%	14%	47%	6%	6%

Reviewing the composite totals of the six-countries which have 2010 baselines, only 15% of projects were coded 0 in the 2011 compared to 45% in 2010. In Kenya, Yemen and oPt the percentage of projects that code 2 (2a and 2b) is more than three times greater than in 2010 before the GM was introduced.

Projects that mainstream gender rose from 14% to 47%. The biggest percentage increase in 2a projects occurred in the Multi-Sector (Refugees) and Early Recovery Clusters. In four clusters (Shelter/NFI, Protection, Multi-Sector/Refugees and Early Recovery), the percentage of projects that are gender blind, and code 0, dropped from over 40% to less than 10%. Of special interest are the clusters with the lowest decline in code 0 projects. These were Food Security and Nutrition.

Chart 1
Change in Gender Marker Codes from 2010 CAPs to 2011 CAPs
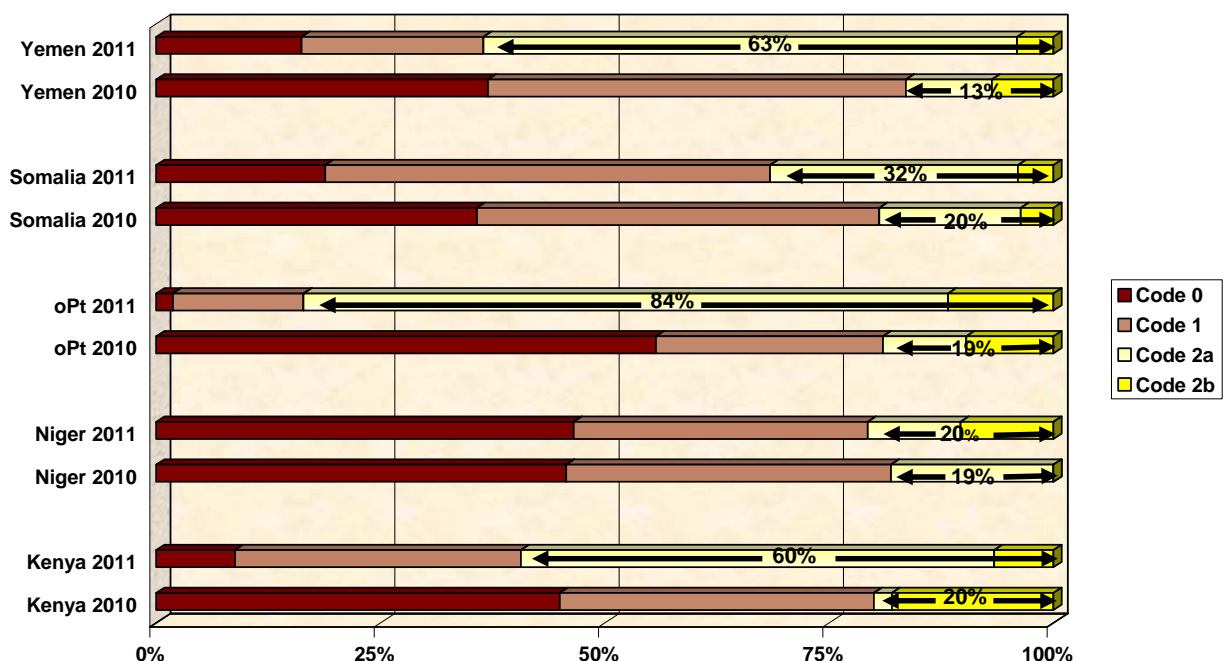
## Results of 2011 CAP Gender Marker Implementation

When all CAP countries which fully implemented the gender marker in 2011 are included, the implementation results are shown in the table below: 45% of projects coded 2. The implementing countries include Chad, Kenya, Niger, oPt, Somalia, south Sudan, Yemen and Zimbabwe.

Highlights include the high levels of 2a codes in Yemen, Kenya and oPt. Although the contributing factors will be multiple, and could include variances in the rigor of coding, the critical insight is that it is possible to have the majority of projects in all clusters designed to integrate gender issues well.

The percentage of 2b projects ranges widely from one country to another, from 3% to 24%. This suggests an inconsistency in coding approach and the need for more specific coding guidance.

Summary Of GM Codes for 8 CAP Countries for 2011								
Clusters	**Code 0**	**%**	**Code 1**	**%**	**Code 2a**	**%**	**Code 2b**	**%**	**Total**
Chad	20	34%	20	34%	5	8%	14	24%	59
Kenya	8	9%	29	32%	48	53%	6	7%	91
Niger	27	47%	19	33%	6	10%	6	10%	58
oPt	4	2%	31	15%	153	72%	25	12%	213
Somalia	43	19%	113	50%	63	28%	9	4%	228
south Sudan	38	18%	97	46%	70	33%	7	3%	212
Yemen	12	16%	15	20%	44	59%	3	4%	74
Zimbabwe	25	18%	14	46%	4	33%	4	3%	47
Grand Total	177	20%	338	34%	393	37%	74	8%	982

Chart 3
## Countries Implementing the Gender Marker for 2011 with % of Projects Coding 0 and 1
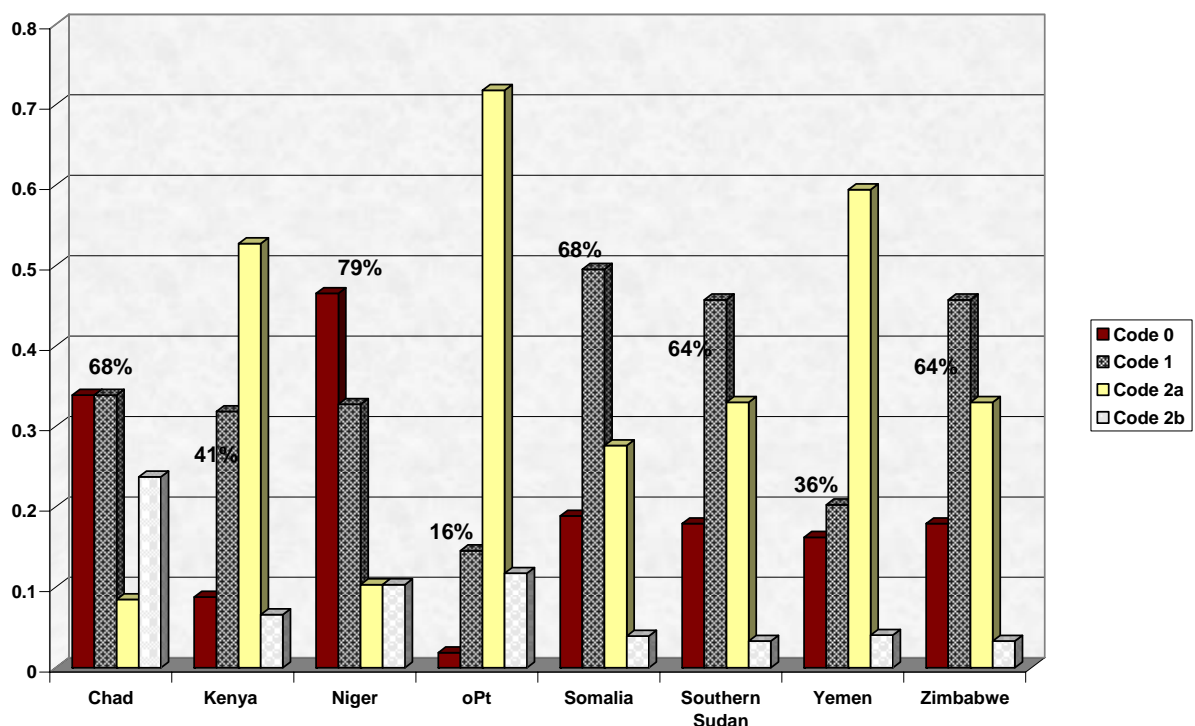
In the same eight countries, results are also described by cluster (see Chart 4). The two clusters that more often designed projects that addressed gender equality were protection and education. Nnutrition and food security more often designed projects that were gender blind or only address gender in a limited way (Code 0 and 1).

Codes by Cluster – All CAP Countries Coded for 2011

Clusters	Code 0	%	Code 1	%	Code 2a	%	Code 2b	%	Total
Agriculture	28	22%	50	39%	41	32%	8	6%	127
Coordination & Support	20	63%	3	9%	9	28%	0	0%	32
Early Recovery	6	12%	16	31%	27	52%	3	6%	52
Education	5	7%	20	28%	44	61%	3	4%	72
Food Security & Food Aid	34	39%	25	29%	28	32%	0	0%	87
Health	27	14%	70	36%	76	39%	20	10%	193
Multi-sector (refugees)	0	0%	7	41%	9	53%	1	6%	17
Nutrition	13	23%	26	46%	13	23%	5	9%	57
Protection	15	11%	32	24%	65	48%	24	18%	136
Shelter/NFI/CCM	8	14%	21	38%	21	38%	6	11%	56
WASH	21	14%	68	44%	60	39%	4	3%	153
Grand Total	177	18%	338	34%	393	40%	74	8%	982

Chart 4
Analysis of Clusters by Code for 8 Countries Implementing the Gender Marker for 2011 with % of Projects Coding 2a and 2b
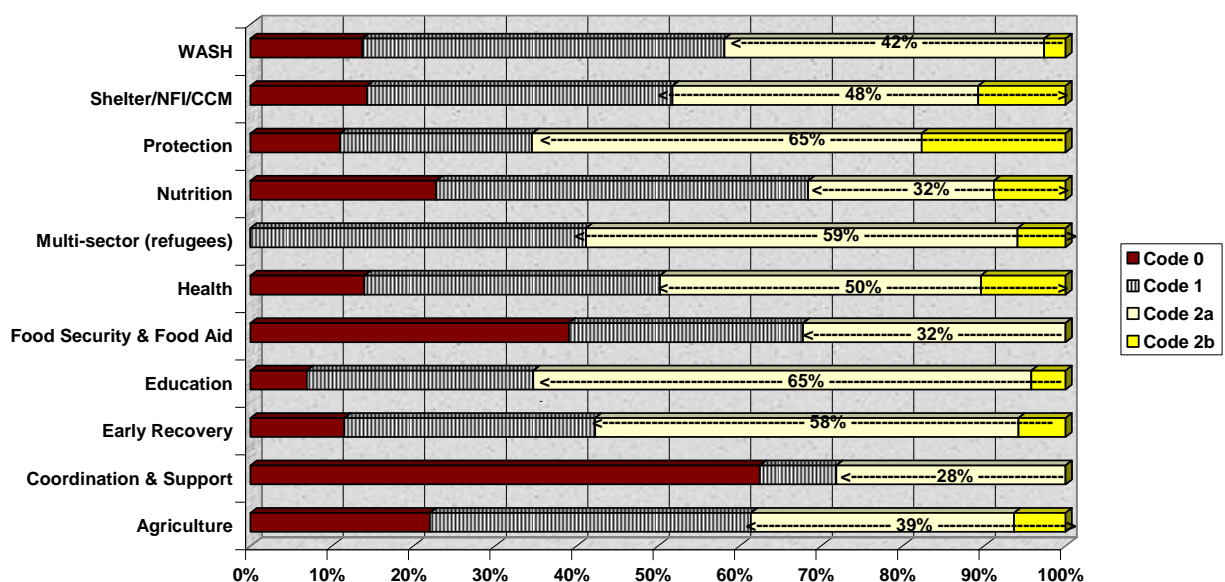
There is overwhelming evidence that active, focused facilitation of the GM and how to design solid gender-responsive projects brings good results. Country-specific code breakdowns are included in the GenCap advisers' GM country reports posted on http://gencap.oneresponse.info. Of special note, the fact that all shelter projects in oPt and 58% of all WASH projects in southern Sudan code 2a demonstrates that gender issues are vitally important and can be integrated well in 'hardware' clusters. The GM is assisting humanitarian actors to shed the falsity that gender is the domain of protection, education and health. In fact, on some occasions, the clusters that have traditionally focused on hardware are outperforming those that focus on social issues: a 'wake-up call' especially for the health and nutrition clusters that performed at sharply different levels from one country to another.

Results of 2011 Pooled Funds Gender Marker Implementation

In Ethiopia, the recent PF (April-November 2010) comprised 39 projects. Of these 44% were code 2 projects, all 2a except for one 2b. See table below.

2010 - Ethiopia Humanitarian Response Fund (PF)

	Code 0	Code 1	Code 2a	Code 2b	Total Projects
Agriculture	1	6	3	0	10
Education	0	0	1	0	1
NFI/CCM/Emergency shelter	0	1	2	0	3
Nutrition	2	2	3	0	7
Protection/UNFPA	0	0	0	1	1
WASH	1	8	7	0	16
Grand Total	5	17	16	1	39

In 2009, DRC was one of the first countries to pilot the GM. At that stage, the IASC had not finalized the coding system that would be systematically used. For that reason, the code used in DRC differs from

other locations. Instead of a 2a, DRC has the equivalent of a code 2. In other countries all targeted actions are code 2b, while DRC separates targeted actions that centre on GBV (3B) from other targeted actions (3A). The reason for this is the high level of attention DRC gives to the sexual violence pandemic.

DRC Gender Code
3A   Projects that have gender equality as a **'principal'** objective are code **3A.**
3B   Projects that have the prevention of/response to GBV as a '**principal'** objective are code **3B**.
2   Projects that have gender equality as a **'significant'** objective are code **2.**
1   Projects that will contribute **in some way** to gender equality, but not significantly, are code **1.**
0   Projects that are **not expected to contribute noticeably** to gender equality are code **0.**

While several protection projects focus on sexual violence and have been submitted to the PF which coded 3B, there were no projects coded 3A aimed specifically at advancing gender equality.

For the first allocation in 2010, 129 projects were reviewed against 95 for the second 2009 allocation. The average rating per cluster has progressed, except for food security and protection. Two years of focused work have brought significant gender progress in some clusters, with WASH teams being among the GM champions.

During the first review of the projects (there are at least two reviews in the PF process), fewer projects were coded 0 in 2010 (48% of the total against 53% in 2009). The percentage of projects being coded 1 remained the same but code 2 projects increased to 12% in 2010, up from 4% in 2009.

Compared to 2009, a smaller proportion of projects having the principal objective for the prevention and the response to gender based violence were deemed of sufficient quality to be coded 3B. As in 2009, no project had gender equality as a principal objective.

The following table indicates the change in codes and the co-relation to funding.

Change in Project Coding from Review to Allocation of Funds in DRC

Gender score	Funds disaggregated by gender code: 1st technical review		Funds actually allocated once technical reviews were finalized	
	US $	%	US $	%
0	19,778,273	51	1,720,480	4
1	14,072,192	36	22,137,020	57
2	4,330,110	11	14,323,075	37
3A	0	0	0	0
3B	961,577	2	961,576	2
	39,142,152	100	39,142,151	100

Summary of Findings from the GM Implementation in both CAPs and PFs

Results are uneven, between clusters, between countries, and between the same clusters in different and sometimes neighboring countries. Where the GenCap Advisers actively worked with clusters, they got impressive results. When facilitation was sporadic or weak, the majority of projects still code 0. Both the enablers and the constraints varied from country to country. Clearly evident, however, is that when the humanitarian community actively engages in the GM, it is a powerful addition to the gender mainstreaming toolkit in humanitarian action.

Country teams report that the GM is do-able. Coding was imperfect but manageable by vetting and review panels. ***There were consistent comments from cluster leads that using the gender code makes gender mainstreaming practical. Being able to measure gender equality appears to make it both more real and more understandable.***

The GenCap Adviser in DRC reported that collecting SADD is now becoming a practice and that the GM is contributing to the gender skills and awareness that have been incrementally built in recent years. The GM was catalytic in moving away from a symbolic to a meaningful treatment of gender in DRC's PF. Before the GM, all projects were required to include a paragraph on gender. Gender issues got 'pigeon-holed' there and evaluators tended to verify the paragraph's presence, not its content. Gender analysis and response is now required in all projects.

Gender analysis, and the SADD that analysis provides, have also allowed GenCaps to demonstrate that gender is 'not all about women'. Good analysis exposes the often invisible needs and realities of boys and men in, for example, reproductive health, nutrition and GBV. DRC provides an example: identifying that boys are more systematically affected by malnutrition has influenced the orientation of the Nutrition Cluster. The cluster had earlier focused only on 'children under five' without responding to the gender gap.

In several of the other implementing countries, SADD is not reliable or being routinely collected. A number of GenCap Advisers report that applying the GM has registered this weakness and the need to respond. In oPt, the GM resulted in several 2011 CAP projects, and activities within projects, being specifically designed to address this gap in SADD. The GenCap Adviser extracted the gender data and gender issues out of oPt's nine NAFs and 213 project sheets in order to create a cluster-by-cluster compendium of gender information. The aim was to provide a resource for each cluster. Unexpected benefits resulted from compiling this gender resource. Doing so identified some operational (process) achievements:

- The gender scan of the 2010 CAP projects captured gender data and issues expressed in 1,200 words. The 2011 CAP project sheets included more than 16,500 words. Although a very informal measure, this demonstrates a clear, serious and growing commitment by cluster leads and implementing partners to gender-responsive humanitarian action: a critical first step.
- What became clear during this scan was that the GM had resulted in gender dimensions being featured, for the first time, in all projects seeking resources for cluster coordination.

The GM has also spurred project teams to articulate their pre-existing good gender practice better. Many projects, in Kenya and elsewhere, were grounded in better gender analysis and gender-responsive process than was reflected in their project sheets. The GM has helped many implementers realize how important it is to clearly present the evidence-based gender analysis that drives their projects in a compelling and systematic way. This is demonstrated, for example, in the Niger: in 2011, several projects in Protection, WASH, Early Recovery and Food Security clearly specify women's and men's roles

and needs. While in 2010, the term "Vulnerable households" was extensively used hiding the difference and needs linked to nutrition vulnerability, income vulnerability, personal safety, single male or female headed households (FHH), etc. Likewise, in 2011, clusters avoided sexual stereotypes and several WASH, Health and Food Security projects target men and women in training and education. In contrast, the 2010 appeal reinforced sexual stereotypes by offering information and education on sexual health HIV AIDS, household hygiene and child nutrition only to women.

As a result of engendering Ethiopia's HRF formats and the implementation of the GM, some HRF applicants have incorporated a gender specialist budget within the implementation of the project to focus on building the organization's capacity on gender and to enhance the gender responsive implementation of the project. Another unintentional and positive impact has been an interest by some **INGOs operating in Ethiopia to use the GM internally to vet other non-HRF projects**. In July 2010, an external HRF review lauded the "strenuous efforts" to promote gender sensitivity by adhering to the guidelines set out in the IASC GM: gender facilitation was directly linked by the independent analysts to the improvement in the design and delivery of HRF programs.

In Niger, the active facilitation of the gender marker resulted in the GenCap facilitating a workshop on gender in emergency action for the NGO focusing on vulnerable agricultural and pastoralist households. Médecins Sans Frontières also requested French-language versions of the IASC gender manual and gender marker tip-sheets. Likewise, in oPt, the Ministry of Women's Affairs requested a two-hour session on the Gender Marker Toolkit, and specifically the tip-sheets, as MOWA wishes to use them to assess the gender dimensions in both development and humanitarian projects.

The GM has contributed to gender dimensions being present in CHAP strategic priorities, selection criteria and appeal narratives in most of the implementing countries.

Analysis of Gender Issues in CAP-CHAP Sections

Country	Strategic Priorities Include Gender Equality	Selection Criteria Include Gender Equality	CHAP Narrative Features Gender Analysis/Issues
Kenya	yes	yes	yes
oPt	yes	no**	yes
Somalia	yes	yes	yes
Yemen	yes	yes	yes
Ethiopia	yes	yes	yes
Niger	yes	yes	yes
Chad	no*	yes***	no
south Sudan	no*	yes	yes
Zimbabwe	no*	yes	yes

*Gender included as cross-cutting issue.
**In oPt, gender is, however, highlighted in the section on Effective Program Design and Implementation.
***Gender equality is not well -reflected: focus is limited to gender balance.

The inclusion of gender dimensions into Cluster Response Plans (CRPs) is increasing but is still uneven within the plans themselves, and between clusters.

Focused work is needed in countries that have had little gender capacity building. There were no gender dimensions in Yemeni CRPs for the agriculture, early recovery, protection and WASH clusters. Likewise, there were no gender dimensions in the Somalia CRPs for food assistance and Shelter-NFIs.

The numbers in the table below reflect partial or limited integration of gender issues in to the CPRs. There was a zero score only when elements of the CRP were totally gender blind. Hence, much strengthening of gender dimensions is still essential.

Gender Dimensions in Cluster Response Plans

Cluster	No. of clusters	Gender in Needs Analysis	Gender in Obj. Results, Indicators	Gender in Strategy	Gender in Monitoring
Agriculture & Livestock	8	5	6	4	3
Cash for Work	1	0	1	1	0
Coordination & Support Services	5	1	3	1	2
Early Recovery***	5	3	4	3	0
Education	8	7	7	7	4
Food Aid/Security	8	5	5	4	3
Health	9	8*	6	4	2
Nutrition	8	6	8	7	6
Multi-sector (Refugees)	1	1	1	1	0
Protection	9	7	8	9	6
Shelter & NFIs**	**5**	**3**	**3**	**3**	3
WASH	**9**	5	**7**	**7**	3

Countries: Chad, Kenya, Somalia, Yemen, Ethiopia, Niger, oPt, S. Sudan and Zimbabwe.
*includes oPt combined health and nutrition cluster
** includes NFIs-Emergency Shelter-CCCM (Ethiopia) and the NFI Cluster –S. Sudan
***includes Return and Early Recovery Integration –S. Sudan
****note that monitoring is not an explicit component of S. Sudan's cluster response plan template

Cluster and Agency Insights

The GM has brought visibility to gender in annual planning for humanitarian programs through the CAP and PF appeals/funding mechanisms. Putting all projects through a gender lens in the 10-country implementation shows:

Projects in UNICEF-led clusters are most consistently design projects that address gender equality (Codes 2a and 2b). Education and Protection had better track records than WASH which out-performed Nutrition. Commitment of several UNICEF agency heads and the active leadership of many UNICEF cluster leads are contributing visibly to better project design. UNICEF's use of short-term consultants as cluster coordinators, however, raises questions of continuity of support to clusters on the GM and other fronts.

- Projects in WFP and WHO-led clusters show only sporadic increase in gender analysis and gender responsiveness as a result of the GM. A direct co-relation can be made with cluster lead commitment and leadership on the gender agenda. Global intervention is advised.

   Health and nutrition projects getting good gender codes do so most often because they focus on maternal child health and nutrition: data/outcomes for mothers automatically flow but specific data on girls and boys are rare. Of special concern, some nutrition cluster leads and key partners dispute the need for sex-disaggregated data on infants and children.

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Gender codes on food security projects are consistently low with the exception of Kenya and oPt. In oPt, the Food Security Cluster coded leniently based on needs data in the Food Security and Cash-for-Work NAFs.

Food Security is one of the clusters that had less GenCap focus. This suggests less interest by both the gender advisers and the cluster leads. The response from Chad resonated elsewhere: cluster actors expressed that women's needs are well integrated into their operations to increase aid efficiency and hence they do not elaborate on such in the limited space provided in the CAP project sheet. The cluster warrants more GenCap focus.

- Gender codes in agriculture span the spectrum, reflecting high levels of cluster lead engagement and uptake of gender technical assistance (Kenya, Somalia, oPt) to markedly lower levels of interest.

- Shelter is combined with NFIs and Coordination in some countries making it difficult to gauge the level of gender equality engagement specifically related to shelter or NFIs. All oPt shelter projects in the NRC-led cluster coded 2a demonstrating the potential to integrate gender issues. Much less gender-responsiveness was demonstrated in the Somali Shelter Cluster, where the GenCap Adviser reports that the Shelter Cluster did not engage on any of the GM orientation sessions. In DRC, the NFI/Shelter Cluster focuses mainly on NFIs. The cluster codes well mainly due to operations ensuring equal access to aid (e.g. women registered as aid right holders so wives of polygamous households are not excluded) and response to specific needs (e.g. feminine hygiene packages including in family kits).

- Project sheets in coordination have markedly increased their gender dimensions in some countries but in other countries remain gender blind. The latter reflect a lack of focused energy by both the CAP/PF team and the GenCap Adviser. One of IASC's priorities should be that each cluster coordination project put priority on advancing gender equality. Examples: facilitate the cluster's collection and use of SADD, ensure relevant SADD is captured in all cluster assessments and evaluations, and facilitate gender issues being routinely on the agenda at cluster meetings.

- Due to the different configurations of cluster functions, there were no clear readings on the gender leadership of UNHCR, UNOCHR or the Multi-Sector Refugee clusters. One issue that has arisen is the lack of sex-disaggregated data on human rights violations in a number of countries.

- Gender scans of all projects in the 10 appeals/funds implementing the marker show too little analysis is conducted into the differential impact of the humanitarian situation on the lives of women, girls, boys and men. Too often one sex is invisible. Common examples:

  ❖ Farmers, fishers and herders are often assumed to be men. Their wives may be referred to as housewives until they become widows. That is the moment they become FHHs whose agricultural activity may then become visible, often as household gardeners, keepers of small animals or less often as 'full' farmers. Often hidden are active farming couples – men and women with complementary or shared roles. When statistics in some African countries document that high levels, sometimes the majority, of farm work is done by women, this invisibility undermines effective humanitarian response. Doubly worrisome is the lack of reference in project sheets to the gendered impact of HIV/AIDS on food production and food security.

  ❖ Girls and women constitute the vast majority of sexual violence survivors. Nevertheless, boys and men are increasingly targeted by these assaults. Male survivors have difficulties speaking up

and seeking help. The fact that GBV programs do not integrate any specific type of assistance for the male population nor provide referral mechanisms to relevant structures may worsen the situation.

❖ Many reproductive health projects mention no engagement or activities for males related to their wives', or their own, sexual and reproductive health needs, choices and services. Likewise, child health and nutrition projects that only involve mothers deny the role and interest fathers have in children's wellbeing.

❖ Alarming levels of sexual violence in Kenyan schools and high levels of physical violence in Gaza schools are exposed in project sheets. CAP projects indicate the need for more gender analysis into GBV in schools and into the push-pull factors (e.g. early marriage, child labor) affecting access to education.

❖ Gender gaps in nutrition are rarely identified and, if identified, may not be acted on. An example: a national demographic and health survey conducted in DRC (2007) showed that malnutrition affects more boys than girls while the admission rate in nutrition centers in 2009 indicated that more girls get treated than boys but this was not reflected in the 2010 PF. All nutrition projects targeted children, regardless of their sex.

❖ Traditional gender roles are identified and projects often deny one sex or the other the choice and right to participate. Most common examples: sex-stereotyping the cash-for-work or training opportunities without giving both males and females the choice of what they prefer to do or to learn; providing cash-for-work to men and cash grants to women without analyzing their respective needs and capacities; placing all responsibility for hygiene and sanitation on women when, for example, open defecation by anyone puts all at risk; targeting mothers only on child nutrition or child health when men may determine what food is bought, who eats first and most, and who will be allowed to access health care; involving men in shelter design and construction, focusing on technical issues, without getting the equal input of males and female who live in the shelters.

❖ There is often use of all-encompassing terms, such as households, children, IDPs, that do not make it clear who actually is being targeted with aid and whose needs are being considered.

Lessons Learned

Leadership and Champions Count

All GenCap implementers agree that the active support of the HC and the Head of OCHA is vital in engaging humanitarian actors to take the gender marker seriously. Championing by the HCs in Somalia, oPt, Ethiopia, Yemen and Niger helped engage clusters. The Heads of OCHA and OCHA CAP teams in Sudan, Somalia, Yemen, Niger, Zimbabwe, oPt and Chad were rated highly for their leadership and support in facilitating the GM's implementation, as were the PF management in DRC and Ethiopia. Without doubt, OCHA in-country managers and their teams were the enabling engine of the 2011 GM implementation: in interviews, GenCap Adviser after GenCap Adviser recognized OCHA for consistent and responsive support. In Zimbabwe, OCHA's male gender focal point was especially effective in engaging the clusters on the GM: an indication of the potential benefit of OCHA strengthening its in-field gender focal point network. At HQ, the CAP, OPS and Gender Policy units provided vital and tireless support.

Where there was dynamic support from the HC as well as OCHA, the environment was most conducive. Only in one country were neither actively engaged: there was no participation of the HC and low interaction with the Head of OCHA during the GenCap Adviser's GM mission in Kenya. However, two capable OCHA staff were assigned and ably assisted with the mission.

Other champions who made a difference ranged from UNFPA senior management in Ethiopia, the WHO Representative in Zimbabwe, to the UNICEF Head of Emergencies in Kenya, the Head of UNAIDS in Chad, and WFP leadership in Yemen. FAO, UNICEF, UNFPA and IOM were most often mentioned as catalytic.

Education and Protection Cluster performance was rated highest and most consistent. WASH, Shelter and Agriculture/Livelihoods were identified as having very able engaged coordinators in some countries and disinterested coordinators in others. Clusters with a mix of coordination and other functions have wide-ranging performance which is challenging to assess due to the variances. Although nutrition, health and food security had some active well-performing cluster leadership, these clusters were identified as being the most ambivalent to the need for insightful gender analysis and for SADD. There is an acute shortage of SADD for key health and nutrition indicators.

The implementation signals a need for global cluster lead agencies to take the implementation of the GM more seriously. In the 10-country implementation, it is WHO and WFP that most commonly were not providing the in-country gender leadership and competence required.

Leadership is also required on strategically managing cross-cutting issues. All cross-cutting issues are important but must be accommodated efficiently and effectively. Examples of the challenges unfolding:
- At the last minute, UNEP Khartoum added an environment marker that was not well thought out. Technical support and guidance notes were not provided. The GenCap Adviser reflects that this somewhat casual roll-out had the potential to minimize the importance of the GM as both are cross-cutting issues.
- MAP-UK is doing groundwork in oPt to ensure CAP projects respond better to disability issues. Three sessions were co-facilitated with clusters and donors by the GenCap and MAP Advisers introducing both the GM and disability issues. MAP is doing in-country initial mapping of disability responders and has made reference to potentially designing a disability marker.

Decisions are needed on sustainability. The GenCap roster must be viewed as a start-up support to the global implementation of the GM. In-country capacity needs to be built for long-term sustainability. GenCap Advisers have been piloting different approaches to sustaining the momentum created in the 2011 GM implementation. Some examples:

DRC: The GenCap Adviser conducted field-based training of the PF's monitoring and evaluation team so they can do effective monitoring of GM implementation.

Ethiopia: The GenCap Adviser has launched training of interested members of the Protection Cluster and gender networks who are in most cases gender, GBV and protection specialists. The aim is to create a critical mass of personnel who will support other clusters in implementing the GM.

oPt: A proposal is being considered to have one of the OCHA CAP team trained and devote half time to GM support of the clusters. The proposal also calls for short-term gender TA for peak periods.

Getting the Entry Points Right

Starting with strategic objectives

Ensure that the CAP or PF strategic objectives give priority to gender equality. These strategic objectives set the parameters for each cluster's priorities. In turn, cluster priorities determine what projects will or will not be funded. When gender is well anchored in strategic objectives, its relevance flows into cluster activities and projects.

Using donor leverage
In response to a HRF workshop with donors, OCHA-Ethiopia integrated gender dimensions into the HRF guidelines and templates. In January 2010, the engendered templates were adopted and applicants were required to use them in applying for HRF funds. This created a receptive atmosphere for the GM: the GM was introduced as a complementary process whose roots were grounded in the overall mainstreaming process. Tools included an embedded gender checklist (adapted from the IASC and CARE Gender Handbooks) that guides the project cycle.

Donors have also played a key role in institutionalizing the GM in the DRC PF. ECHO became a demonstrator by including the PF's gender minimum standards in its guidance note for project designers.

Integrating the marker at the outset
Niger developed its first country CAP in 2011, a departure from being part of the West Africa CAP. The GM was embedded into this initial CAP process and was well accepted as an integral component of the new country appeal process. Likewise, the GM is being implemented this year in the first multi-year CAP in Kenya.

Establishing Credibility
It is important that all GenCap Advisers, and especially those on short-term CAP support assignments, earn credibility with the HCT and clusters as soon as possible. GenCap Advisers engaged stakeholders on the GM by contributing to a range of processes. Examples: assisting UNHRC and the Kenya Commission on Human Rights to integrate a gender perspective into the draft National IDP Policy; contributing to the Global Protection Mission to Yemen; collaboration with Somalia's Food Security Needs Assessment Unit (FSNAU) of FAO; and strategically using the GM to help address some of the gender gaps cited in Somalia's 2009 UNCT gender audit and the 2009 UNDAF mid-term review.

Bringing Local Context into the GM Tip-sheets
Several GenCap Advisers have found that the cluster-specific tip-sheets on how to weave gender dimensions effectively into projects are useful. They are, by far, most useful when GenCap Advisers enrich these materials with country-specific examples.

Effective Approaches in Project Design

Anchor gender marker activities in gender analysis: Evidence-based gender analysis is needed in the 'Needs' segment of CAP project sheets to clearly identify the right approach and activities. The consistent message: the 'Needs' section of the project sheet should contain at least one strategic piece of evidence describing 'why' or 'how' the needs or situation is not the same for males as it is for females and how this should shape the humanitarian response. Many projects look at 'Needs' too narrowly.

In essence, it is important to 'grow' the scope and understanding of 'Needs'. What women, girls, boys and men need – and the best response to their needs – can have many dimensions; these include a gender analysis of:

- ❖ Risks and protection issues
- ❖ Roles, knowledge, skills, coping methods
- ❖ How they can, and want to, participate
- ❖ Their ideas on how to solve their problems
- ❖ How they will benefit from the project

This analysis allows project teams to select what is most relevant, then insert one or two information-packed sentences into their project sheet that identify the right participation and activities for target males and/or females.

Set Minimum Standards

DRC, Somalia, Kenya and Ethiopia used cluster-specific minimum standards successfully to set the basic gender requirements that each of their cluster projects must meet in order to be included in the CAP or PF. In DRC, each cluster defined minimum standards on gender equality which are both operational for, and specific to, the area and context of their interventions. The standards were to cover the following issues:

- Analysis of the different needs of women, girls, boys and men;
- Community consultation;
- Equal access to aid;
- Representation and participation of both women and men in the decision-making process;
- Equal opportunities and responsibilities;
- Response to specific needs;
- Protection from sexual exploitation and abuse and sexual violence;
- Team composition: an appropriate gender mix;
- Collection of sex-disaggregated data; and
- Sensitizing humanitarian actors on the importance of taking gender into account in their interventions.

Getting the Coding Right

The 2011 implementation demonstrated that implementing the GM is manageable. Most vetting panels were able to assign a gender code as part of CAP and PF project selection without difficulty. GenCap Advisers reported this was do-able when care had been taken, in advance, to orient vetters in the gender code and when there was at least one person present who could competently facilitate the gender discussion and coding.

The GM 'sinks in' best when an able gender specialist is present to support cluster members assigning codes to projects and debating the reasons why they selected a specific code. The GenCap Adviser in Sudan held practice coding sessions for each of the seven biggest clusters at a critical time - before projects were written. She, endorsed by other GenCap Advisers, rates practice coding as the most powerful way of helping cluster members understand how to create good gender-responsive projects. It is also viewed as the best insurance that clusters will code carefully and correctly.

Some CAP clusters are vetting 60 or more projects. Vetters must come to consensus on a gender code for each project easily and quickly based on the GM criteria. It is essential to the success of the GM that coding enrich, but not bog down, the vetting process. Two critical manageability issues arose:

- Vetting panels for two or more clusters often meet at the same time so the GenCap Adviser cannot participate in each panel. Hence, others must be trained and be both confident and

competent to facilitate the panel reaching consensus on the codes. Linked to this is the stark reality: if a GenCap Adviser takes the lead in assigning codes, cluster leads and their vetting teams may not do the reflection and learning themselves. As GenCap support must be considered a transitional service, clusters need to build self reliance in assigning correct codes and in giving solid gender feedback to project teams.

- If the GenCap Adviser is participating in vetting panel after vetting panel, then he or she has no time to assist projects that code 0 or 1 to improve their gender dimensions during the short time for project revision.

Here are two examples of tactics taken to make coding efficient.

- Have cluster leads arrange for the gender dimensions in each of their cluster projects to be highlighted, in color, before distributing them to the vetting panel. This can be done by computer. By having the gender elements 'jump out' in color, it is not only quicker to code but easier to see whether the gender information in the Needs justified and flowed into relevant Activities/Outcomes. Comparisons were done in oPt. Panels, where gender dimensions were not highlighted had to invest more effort and often had less informed discussion on the code. *(This highlighting technique is equally powerful in practice coding sessions with clusters, their IPs and vetters in advance of the vetting. Project teams learn what factors will be taken into consideration in coding and gain tips on better project design. Vetters gain skills to code accurately.)*
- Ensure that each vetting panel has someone equipped to facilitate consensus on what the GM should be for each project. There have been good results when cluster leads as well as the OCHA CAP team are trained.

As this is the first implementation of the GM, some miss-coding is to be expected. The 2011 implementation demonstrates that verification of the codes is necessary at country level right before the appeal is forwarded to HQ. It is also essential that codes also be verified at global level.

A sample of codes was checked in each implementing country at HQ level. The spot check triggered a full review of many country's codes, GenCap consultation with affected project teams and some code correction. The reality: coding in some countries was more generous than in others. For example: oPt coding is generally more lenient than coding in Somalia and south Sudan. Likewise some clusters within a country were tougher, more rigorous coders than others. There is much work to be done to achieve consistent coding both in country and at the global level.

Although most coding was done with diligence and a good degree of accuracy, the verification scan showed several factors contribute to inconsistent coding:

- *Mixing of 2a and 2b codes*. There has been much confusion over codes 2a and 2b especially in projects focusing on maternal child health and GBV. The how-to-code tip-sheet provided this clarification:

    A project that focuses exclusively or predominantly on breastfeeding, maternal-child health or obstetrics would code 2b, as this is a project targeted specifically at women. However, an overall primary health care project that also includes an obstetrics or maternal-child health component should mainstream gender and code 2a. Likewise, a project that provides health care service to the camp population including survivors of gender-based violence (GBV) should be designed well enough to code 2a. In contrast, a project whose primary activity is establishing a women's shelter or a livelihoods project for survivors of sexual violence would be a 2b.

More clarification is needed. The clarification should also consider the reality that many targeted actions for women will only succeed if there is understanding, support and in some cultures, the permission of men. An example: a recent KAP study in Somalia identified that mothers-in-law/older women and men/husbands, not the new mother, determine whether and how much she will breastfeed. What the code should not do is encourage targeted actions that eliminate these essential activities that include the opposite sex. Likewise targeted actions for boys or men who are disadvantaged or have special needs may often have a better chance of success if women and girls are supportive. More clarity is needed on 2a-2b coding that encourages respect and good relationships between women and men. An example of the confusion: One GenCap Adviser asked, "Most emergency interventions involve feeding centers which target women and children. Do these projects get a lower score because they do not target men?"

Some country teams, including Somalia and DRC, were stricter than others in demanding that maternal health projects, for example, would code low (0 or 1) unless they were supported by activities that flowed from solid gender analysis. In contrast, other country teams assigned a 2b on the basis of the project focusing on the specific needs of a defined group of women.

- *Over-coding*: 2a is given when not warranted. Contributing factors could include: the fact that project teams must insert a gender code into OPS before they can exit the site. They either opportunistically or mistakenly select the highest code. Vetting panel members who are exhausted by the volume of projects they must vet, may award a 2a because a certain partner has a history of doing good gender work: the vetters may not diligently assess the project sheet. There were examples cited of vetters not wanting to pull down the code of a respected cluster member (especially a project submitted by the cluster lead agency). Vetters may also simply forget to assign a gender code so that the IP's own code remains. In one country, there was hesitancy to give 0 and 1 codes: feeling project teams and clusters would lose face. Inflated codes were inappropriately awarded to encourage cluster teams to embrace the gender code.

- *Confusion in revision*: An accurate gender code can be assigned in vetting. Then, if revisions are requested, those revisions can lead to gender-responsive activities being removed. oPt had examples of projects which earned a 2a linked to gender-responsive hygiene education that flowed well between Needs-Activities-Outcomes. The vetting panel asked that hygiene education be removed as this would give the project a disproportionately heavy emphasis on capacity building. The revision was made but the code was not altered.

- *Low expectations.* DRC noted that the capacity of the PF staff is unequal, which frustrates consistent coding of the projects in the different clusters. The weaker a cluster is, the more it grants itself good scores as its level of expectation is low.

- *Coding the invisible.* Vetters often know how well IPs do, or do not, implement. There are instances of awarding codes based on information that is not written into the project sheet. It is important to nurture better compliance with the Coding Tip-sheet, which states:

  In piloting the gender marker, project teams would often say that they have sex-disaggregated data, consult women and men separately, etc. or have a track record of implementing much better than the project sheet suggests. So, why not give them a higher code.... and value what could be, but is not, in the project sheet? The response must be 'no'. The reasons are many. The HC cannot see what is not on the project sheet. Neither can donors. Implementing teams often

have high turn-over: new staff cannot read the minds or rely on the experience of departed staff. The project sheet shapes implementation: it must clearly state the needs, activities and outcomes for the target males and females. What you see is what you code.

- *Cosmetic coding.* High codes were sometimes awarded because words like 'women and men' were sprinkled through the project sheet without substance or when gender information in the Needs did not flow or connect to the Activities/Outcomes.

- *High-level outcomes may hide gender results.* Some projects were coded 2a based on high-level outcomes that mention 'women and men' or 'boys and girls' but will not capture sex-disaggregated data or gender change. An example, oPt introduced the GM and a more focused RBM in the 2011 CAP. Focusing on RBM, clusters attempted to identify two or three succinct high-level outcomes. In the CRPs, gender dimensions got pushed to the output and indicator level. As the CAP project sheet features Needs, Activities and Outcomes, extra effort had to be invested so gender equality results would not become invisible. The GM gives a gender code based on explicit sex-disaggregated data and gender equality results being visible in the results section of the project sheet (Outcomes). Although the gender marker is an effective RBM tool, more effort is needed to ensure that gender-specific results feature visibly in both RBM frameworks and CAP project sheets.

In addition to miss-coding, there are examples of 'cheap' coding. These include:
- Some projects mention female-headed households (FHHs) in Needs, then at least one Activity and Outcome. There are indications that FHHs are being used as an easy way to get a good gender code. (i.e. food security projects) FHHs have special needs but these must be identified, through a gender analysis that considers the distinct needs of women, girls, boys and men.
- Projects that focus on maternal child health. Here there is much debate. Some GenCap Advisers feel that if a maternal health issue flows well from Needs to Activities and Outcomes, the GM requirements for a 2a code are fulfilled. Others disagree. Compounding this debate is that often these same projects provide no insight into the different needs and realities of boys compared to girls. Gender gaps may exist but not be identified (e.g. nutrition gaps, different feeding or caring practices, food taboos, etc.). It is of concern that these projects legitimately score a 2a when the distinct Needs and Outcomes for girls and boys are not exposed.

Often there is no source provided for the gender data or information in project sheets. Without a source, it is difficult for those assigning a code to know if the information is valid or merely cosmetic. Surveys, focus groups, project workshops, field observations, etc. are examples of valid sources. However, these sources need to be cited.

A fundamental lesson learned in the 2011 implementation is that GenCap Advisers, as leaders in the global GM roll-out, need to be better prepared to facilitate more consistent coding and need the in-country time required to adequately orient and train cluster teams.

In 2009 piloting, a code system 0-1-2-3 was used. At that time, there was confusion and resistance at the field level to targeted actions coding 3, appearing to be valued more because they were assigned a higher number, than gender mainstreamed projects which coded 2. Most projects should strive to mainstream gender well. As a result, the IASC decided that as both mainstreamed projects and targeted actions were essential and complementary in advancing gender equality they should both code 2. This is

the genesis of today's 2a-2b codes. This was well received in the 2011 implementation. In only one country (Yemen) was there a wish to revert back from 2a-2b to 2-3.

Improving Projects

All GenCap Advisers invested effort in helping project teams design gender-responsive projects. All distributed the cluster-specific tip-sheets that give step-by-step suggestions on how to bring gender dimensions into projects. Some also conducted participatory training on project development. As appeals vary from less than 40 projects to well over 400, but appeal deadlines are often the same, what support is feasible can vary.

In Yemen, which had a CAP with 75 projects, it was possible to provide gender feedback on a number of projects before vetting. OCHA facilitated the GenCap Adviser being 'in the loop' as projects were submitted. By tracking on OPS, the GenCap Adviser was able to give advice before vetting, during vetting as he participated in most vetting panels, and during revision between initial and final vetting. Being present during the vetting allowed the GenCap Adviser to have input into requested revisions.

In all countries it was evident that many project teams needed much more assistance in project improvement than could be provided in the CAP preparation cycle. Time is tight between project submission and appeal closure. Within this few days, projects are vetted and applicants are often asked for specific revisions prior to final vetting. Different GenCap Advisers used this window in various ways to offer one final round of support to project teams. In south Sudan, the GenCap Adviser discovered that some cluster review panels gave projects a 0, but did not follow up with the submitting agency to encourage them to rethink their projects. By the time these projects were forwarded to OCHA for GenCap review, it was so close to submission time that some potential for gender revision got choked out.

In Niger, the GenCap Adviser monitored the OPS daily to scan all new projects coming on line. She used her initiative to contact project teams and provided questions and advice that would allow them to strengthen gender dimensions in their projects. There was good uptake based on the groundwork she had done before the busy CAP preparation period: ensuring the GM toolkit, including project design tip-sheets, was widely distributed and promoted and conducting well-attended GM sessions, which were built into all key national and regional workshops.

Three approaches were piloted in oPt on how to support project teams to improve their projects that coded either 0 or 1.

Approach 1: The Agriculture Cluster reported that nearly all projects had been revised in response to vetting panel requests and that likely most had increased their gender dimensions. Hence, the request to the GenCap was to review all Agriculture projects to verify the code and assist, wherever project teams wished, to make improvements. The GenCap Adviser's availability was energetically marketed by the Agriculture Cluster. This proved a very constructive, much-appreciated but labor-intensive process that could not realistically apply to all clusters. Because all communication copied the cluster lead and the lead verified (in addition to the GenCap Adviser) the final gender code and finalized the gender codes in OPS - this approach was also very demanding of the cluster lead's time. What the Agriculture option did show, however, was how critical it is to have a field-based gender specialist serving each cluster: there is a demand, an interest in learning, and much potential to be gained.

Approach 2: Many projects in the WASH cluster coded low so a manageable way had to be found to assist WASH project teams scattered across Gaza and throughout the West Bank to strengthen the gender dimensions of their projects. The best option, face-to-face brainstorming with each project team, was not possible. As most of the WASH projects can be clustered into types of WASH interventions, four typical projects were selected (2 Gaza – 2 West Bank): school WASH, cistern rehabilitation, desalination and water network upgrading, and sanitation facility upgrading. Gender comment was provided on these four projects to be used by cluster members as templates to stir their reflection on appropriate gender analysis and gender dimensions. This was the most efficient of the three options but the personal communication with project teams and cluster leads involved in the other two approaches resulted in deeper mentoring.

Approach 3; The CAP lead offered GenCap Adviser's support to clusters to improve their codes on a request basis in a series of e-mails, cluster and inter-cluster meetings. It was clear that this support was not required but optional and to be triggered by request. Response was on a first-come basis. This allowed equal self-initiated access of all project teams to the GenCap Adviser for project improvement.

The PFs in DRC and Ethiopia both conduct project improvement activities which are spread more evenly throughout the year than the CAP process allows. PF have different project in-take schedules. These bring the advantage of more regular and more refresher opportunities to build project design capacity.

Several country teams requested that the Gender Marker Toolkit be translated into more languages. All materials are available on the web in English and a number are available in French. Reports from Niger, Chad and DRC indicate that the toolkit materials provided in French contributed significantly to GenCap Advisers' ability to engage partners. Budget priority should include translation and web access to the Gender Marker Toolkit in major relevant languages.

Mobilizing focal points & gender networks

The GM briefing note calls on the HC to identify a national GM focal point. In countries where this has been done, it has added authority and credibility to the GM's implementation. A central contact point within the CAP/PF team is essential to ensure that communications to clusters routinely include information on how the GM is being implemented and updates on GenCap Adviser services (e.g., training, coding assistance, project improvement, etc.).

In some countries, a second tier of GM focal points was put in place. The joint GenCap Adviser's mission to Somalia and Kenya was too short to fulfill all cluster needs. It was, therefore, deemed expedient to train the existing gender networks as GM focal points to support the clusters. The GenCap Adviser was not able to directly train Somali NGOs due to security risks and remote implementation. However, the quality of a number of NGO projects in Somalia is impressively high and appears to testify to the reach of the local GM focal points. The GM focal points interacted well with cluster leads. In fact, in Somalia, the WASH and Nutrition cluster leads voluntarily joined the training designed for the GM focal points, participated in the full series of trainings, and encouraged other cluster leads to participate. In Kenya, the Agriculture cluster lead also joined the training.

In Kenya, the GM focal points required a ToR that limited their role specifically to CAP development and to GM activities. Most saw their role as assigning accurate gender codes but did not take on nurturing project improvement. These focal points were senior enough to influence their respective clusters, to

ensure a consistent gender coding, and to contribute to Kenya's relatively good performance on integrating the GM.

Yemen also trained GM focal points to create a structure within the clusters to effectively and systematically apply the GM. A mix of cluster coordinators and gender specialists were included. Although the gender specialists were enthusiastic, committed and worked diligently, they had far less influence than Cluster Coordinators. One specific example: even though constructive gender comment was offered to enhance cluster response plans by gender specialists, the pick-up was low.

In Zimbabwe, the gender focal point network has considerable expertise. The GenCap Adviser sees the network as bringing two key assets: assisting clusters to better articulate gender issues in emergencies as well as helping feed gender considerations well into early recovery. However, time constraints prevented the gender focal points from having meaningful input into cluster response plans.

GM implementation was facilitated in Pakistan by the Gender Task Force (GTF) co-led by UNIFEM and UNFPA and guided by a senior national gender specialist. GTF members found it useful to have clear guidelines on their role as GM focal points advising and assisting the clusters. Also useful was agreeing on key criteria and approaches for gender coding. The GTF participated actively in cluster coordination meetings. Their advice on integrating gender issues into cluster response plans and projects varied depending on their individual capacity in gender analysis and engagement. GTF members assigned gender codes to all projects. The GTF's report concludes that the gender coding exercise helped the GTF establish strategic visibility and demonstrate its technical value to humanitarian actors.

The lessons learned from Somalia, Zimbabwe, Yemen, Pakistan and Kenya support the experience in other countries. It is essential that a senior gender specialist be in country throughout the CAP/PF preparation stage to lead and coordinate marker activity. It is important to orient gender teams on the GM and to nurture their support to clusters. However, it is essential that GM activity focus on cluster leads. Cluster leads are responsible for the effective implementation of the GM in their clusters, see that agreed gender codes are correctly inserted into OPS after vetting, and ensure effective monitoring. Therefore, they should be among the first and the best trained, getting highest priority for GenCap Advisers' support.

The UN gender networks in the 10 target countries focus on development. These gender focal points often express support for the IASC GM and an interest in the interface between the two GMs used respectively in development and in humanitarian action. Their job descriptions, however, rarely give any authority, recognition, time or opportunity to contribute to humanitarian action. Hence, only short and focused inputs can be expected of these gender specialists unless a stronger, single UN approach is taken to bridge the gap between development and humanitarian action.

Likewise, it is valuable to connect with the gender machinery in government. However, as experience in Kenya and oPt indicates, it should not be assumed that the government has gender specialists with the time, competence and humanitarian background to be major resources to the clusters. In both countries, it proved very useful to link with and orient the government's gender machinery on the GM. However, both ministries had little knowledge of the cluster approach and no existing involvement in the humanitarian funding process.

In oPt, the Ministry of Women's Affairs (MoWA), supported by UNIFEM, developed the cabinet-approved Gender Cross-Sectoral Country Strategy, which is being incorporated into the Palestinian National Plan 2011-2013. In 2011, the Palestinian Authority had representatives assigned to each

cluster: several ministries, by not MoWA, were involved. A UNIFEM-facilitated meeting of the GenCap Adviser with MOWA has triggered discussion between the women's and planning ministries on a potential role for MOWA in the CAP. MOWA is interested in ensuring CAP projects align with the gender strategy, their own capacity building on humanitarian issues, and in bringing their gender analysis to the process.

Gender-based Violence & Protection from SEA

Using the GM has allowed GenCap Advisers to understand how extensively GBV and the prevention of sexual exploitation and abuse (PSEA) feature in humanitarian appeals. In the 10 implementation countries, six of the eight CAP appeals had projects coded 2b that focus exclusively on GBV protection or response. Yemen, Chad, Zimbabwe, Kenya and Niger had one project while south Sudan had three. Somalia, which integrated elements of GBV into 27 of its 28 protection projects did not code any 2a. Likewise, GBV was integrated into gender mainstreamed projects in oPt. This may flag the coding debate raised earlier: can single-sex GBV projects succeed without the support and strategic participation of the opposite sex and what are the implications for the gender code?

The GM has been designed to make GBV visible. Humanitarian actors/funders can access GM information on the Financial Tracking System fts@unocha.org, under 'See also' tables *grouped by gender marker*. All projects are listed by gender code and have a brief descriptor. The 2b projects which are centered on GBV are easily identified.

The most extensive GenCap analysis of GBV in humanitarian funding has been conducted in DRC's PF. In DRC's second allocation of the 2009 PF, 29% of projects mention or take into account the prevention of sexual violence and .07% integrate measures against sexual exploitation and abuse. In contrast, Ethiopia's, had no projects focusing on GBV.

The depth and frequency of GBV in 2011 humanitarian projects is wide ranging. Somalia's CAP has 27 projects focusing mainly on sexual violence (including FGM), trafficking, forced and early marriage compared to Niger's CAP, which has six projects that include GBV, one of which targets preventing religion-related GBV. Among the emerging and overlooked issues is the increasing GBV in schools (e.g. Somalia/Kenya—sexual violence and oPt-physical violence). The existence and quality of mechanisms for GBV prevention and response varies greatly.

A serious commitment to the prevention of sexual exploitation and abuse (PSEA), including training, confidential reporting and response is only demonstrated in two of these countries: Somalia and S. Sudan. Action on PSEA featured in the Somali CAP document section 4.4.2.

Different humanitarian actors have different approaches to GBV. IRC and some other humanitarian actors focus on women and girls, while other organizations and agencies have mandates calling for a GBV focus on both males and females based on analysis. A common position and clarity from the GBV Area of Responsibility is needed to guide consistent gender coding of GBV projects.

Glimpses of county-specific GBV reality follow.

Ethiopia: A GBV Sub-cluster has recently been formed which plans to conduct GBV mapping as an initial and strategic exercise. There are no projects to date in the PF focusing on GBV. FGM, domestic violence

and early marriage are some of the issues in humanitarian space. However, until the sub-cluster is fully activated, there will continue to be inadequate coordination on GBV in the humanitarian arena.

Somalia: PSEA has been a major focus for OCHA Somalia for the last year and a half. There are four operating PSEA field networks in Woqooyi Galbeed, Bari, Mudug, and Lower Juba regions, as well as the Nairobi network. Through UNCT funding, the field networks organized activities, such as: TOT workshops on the Secretary General's Bulletin on *Protection from Sexual Exploitation and Abuse,* awareness campaigns for communities, and dissemination of PSEA-related documents in English and Somali. The field networks used theatre, radio spots, posters and leaflets to reach communities. An evaluation of progress against PSEA obligations is planned by the end of 2010.

Rape and other forms of sexual violence is the focus of the Somali GBV Sub-cluster co-chaired by UNFPA and UNHCR. The sub-cluster has focused on information-gathering and now has a GBV analysis report. Assisted by the GenCap Adviser, the sub-cluster has a practical one-year work plan. A joint UNICEF-UNFPA-UNHCR project on GBV prevention and response seeks funding in this CAP for the third year.

Although Somalia's GBV Sub-cluster is active, its linkages with other clusters are weak. The UNFPA Somalia GBV report identified emergency shelters as flashpoints for sexual violence. However, the Shelter Cluster is not responding to this issue or to the GM. Links are also weak between the Health and Protection Clusters evidenced by the low integration of GBV into health projects.

Kenya: The Protection Cluster is well-established and has monitors in place at flashpoints for abuse of women and children. The CAP includes 15 projects which focus on sexual violence, sexual exploitation and trafficking. As in Somalia, better inter-cluster links are needed e.g. Kenya's WASH CAP projects have little reference to sexual violence even though toilets and washing facilities have been identified by the Protection Cluster as GBV hotspots.

Rape and sexual exploitation are being normalized in Kenya's schools. In April 2010, the Kenyan Teachers Service Commission (TSC) issued a Circular on the '**Protection of Pupils/Students from Sexual Abuse**' (see www.tsc.go.ke). This was followed by a government directive that links to the Children's Act and Sexual Offences Act for criminal action. When the GenCap Adviser mentioned the directive, the Education Cluster leadership was unaware of it. This signals the need for a stronger protection focus in cluster activities.

DRC: There was debate about whether compliance with the UN's zero tolerance to sexual exploitation and abuse should be part of all contracting requirements with PF implementing organizations. This action was not taken. However, all organizations are obliged to sign the ICRC Code of Conduct which includes prevention of sexual exploitation and abuse.

At the cluster level, three DRC clusters integrated PSEA into their minimum standards (Protection, Education and NFIs). WHO, however, is not following the minimum standards it put in place. This clearly shows the limits of core gender commitments if not accompanied by real sensitization/capacity building actions.

Zimbabwe: Zimbabwe has an active and well-networked GBV Sub-cluster. The Sub-cluster has a collective GBV Plan of Action. Recent focus has included reviewing the government's national GBV strategy so the Sub-cluster's Plan of Action contributes and aligns activities more closely with government priorities. Although the government has a GBV strategy and the Ministry of Women's Affairs (MOWA) is both committed and engaged, MOWA is critically short of resources to put in place

effective prevention and response at any level: community to national. Due to the high incidence of rape and domestic violence linked to cross-border trafficking and migration, MOWA needs to not only be much stronger internally but also in dealing with neighboring national governments.

Much energy has been recently devoted to opening three one-stop centers for GBV prevention and response. These bring all services under one roof. It is too early to assess impact, although GBV specialists are already concerned that lack of affordable transport to these centers will still restrict access and benefits to local urban populations.

Niger: A Protection Cluster was formed in advance of the 2011 CAP. The CAP now includes six projects that have GBV focus including the risks faced by rural FHHs migrating to the capital. This is progress as the 2010 PF (EHAP) did not include GBV/SEA issues. There is a child protection response but the humanitarian arena has no GBV Sub-cluster, no GBV Adviser and no GBV assessment.

GBV and SEA are only addressed by the Protection cluster, which focus interventions are grounded in a rapid assessment on female IDPs and children in urban areas conducted in June 2010 by UNICEF in four cities (Niamey, Zinder, Maradi and Agadez). The assessment revealed that 70% of displaced persons in urban areas are women and children, who left the most arid zones. The majority of women are heads of household as men migrated across the borders. Women and children IDPs live in precarious self made shelters (with cartons or straw) and are extremely vulnerable, food insecure and most often are not registered. As a consequence, in addition to facing high risks of sexual and other forms of GBV, they were not targeted by the international aid and humanitarian response to food insecurity.

Yemen: Key humanitarian actors have created Standard Operating Procedures (SOPs) with GenCap support. GBV in many forms has been identified as a concern in IDP camps in Haradh, Amran and Sadaa. Unfortunately, there is a critical shortage of UN and other protection staff on the ground for adequate response.

An incremental approach to SOP implementation is being advocated by the current GenCap Adviser due to the cultural sensitivities and protection challenges. The four-pronged approach:
- Agree on culturally appropriate terminology and language as a means of buy-in
- Adapt the SOPs to the local context
- Engage with local community and religious leaders to create awareness and create an entry point for GBV programming
- Promote leadership on GBV programming through the protection cluster, with a possible creation of a separate GBV area of responsibility

There is no active PSEA focal point network.

Chad: Sexual violence including FGM, early and forced marriage, domestic violence and child enrolment by armed groups dominate GBV in Chad. The GBV Sub-cluster is well structured, collects evidence of abuse and is guided by a prevention and response plan. Five of the 65 projects in the Chad 2011 CAP address GBV resulting, to a significant degree, from the previous GenCap adviser deployment under UNFPA leadership and the MINURCAT gender section.

south Sudan: There are only two agencies that do GBV specific programming in south Sudan. This activity is confined to a very limited coverage area. Despite the high levels of conflict-related sexual violence, forced and early marriage, and domestic violence, the 2011 CAP includes only two projects on sexual violence. At issue is the weakness of institutions and lack of partners to deal with GBV. UNFPA is providing leadership as is the GenCap Adviser who as co-chair of the GBV Taskforce is being largely

relied on to do PSEA training. The training is being done in conjunction with the Conduct and Discipline Unit. One of the GenCap Adviser's attempts to engage other clusters, beyond the Protection Cluster, was to hold a session with the Health Cluster on integrating GBV issues into health disaster response.

oPt: GBV in oPt takes many forms: military targeting primarily of men and boys; torture in detention primarily of men and boys; early marriage of girls; sexual violence focused most on women and girls; domestic violence of varying forms targeting primarily women but with gendered differences for boys and girls, elderly women and men; physical violence in schools causing 10 times as many injuries to boys as to girls; primarily boys involved in worst forms of child labor (e.g. Gaza tunnels). Surveys indicate domestic violence is on the increase.

A literature review of GBV in oPt was recently compiled. However, data is scant and domestic violence is still hushed-up and kept within family walls. A few shelters for abused women and children now operate but most survivors feel there is no choice but to return to their violent homes. A proposed CAP project to open a halfway house in Gaza was withdrawn as it did not have the support of the Ministry of Social Affairs.

A GBV Sub-cluster involving government, UN, IOs and NGOs is working to strengthen prevention and response mechanisms.

The Gender Marker & Member States including Donors

The IASC GM is derived from the OECD/DAC Gender Policy Marker. Member States have been briefed on the use of the GM in Secretary-General Reports in the context of Peacebuilding and General Assembly Resolution calls for analysis of allocations for gender programming in humanitarian action. The GM was introduced at the ECOSOC Gender Side Event in July 2010 and with GenCap donors in June and early November 2011.

Member State including donor links and updates on the GM have been well facilitated through the pool funds in DRC and Ethiopia. Donor links and presentations in CAP countries have varied from none in Yemen, to several in other countries (e.g. oPt presentation to Humanitarian Donor Group). GenCap Advisers note GM discussions or presentations were held with EU-ECHO and Italian Cooperation in three locations; Netherlands (2); Denmark (1); DFID-UK (1); France (1); Sweden (1); Switzerland (1).

> **Gender Marker Information on FTS**
> Information on the GM is available on the country pages of the FTS fts@unocha.org, under 'See also' tables *grouped by gender marker*. All projects are listed by gender code and have a brief descriptor.

The lead in engaging donors must be taken energetically at the global and regional levels. This 10-country implementation verifies that some countries most in need of humanitarian aid have few in-country donors. In-country advocacy can touch donors but requires global-level support. PFs, due to their large number of active donors, are a strategic entry point for advocacy on the gender marker.

Messages for Donors:
  ❖ Check FTS for the GM Codes after the CAP launch
  ❖ Fund projects coding 2a and 2b as priority.
  ❖ Fund projects with gender codes 0 0r 1 on condition that gender dimensions are deepened.
  ❖ Demand and fund gender analysis and gender-responsive monitoring.
  ❖ Ensure project teams know the gender code is influencing your funding decisions.

ANNEX 1 – EXAMPLE FROM DRC

CLUSTER GUIDANCE NOTE FOR GENDER MAINSTREAMING IN HUMANITARIAN ACTION PROJECTS FINANCED BY THE POOLED FUND: EXAMPLES OF OPERATIONAL STANDARDS

The objective of the Pooled Fund in DRC is to strengthen gender mainstreaming in the projects it funds. It has asked all clusters to develop gender guidelines to be observed by all project designers. Each cluster has defined minimum standards on gender equality which are both operational for and specific to the area and context of intervention.

These guidelines cover the following issues:
- Analysis of the different needs of women, girls, boys and men;
- Community consultation;
- Equal access to aid;
- Representation and participation of both women and men in the decision-making process;
- Equal opportunities and responsibilities;
- Response to specific needs;
- Protection from sexual exploitation and abuse and from sexual violence;
- Collection of sex-disaggregated data;
- Team mixing;
- Sensitization of humanitarian actors on the importance of taking gender into account in their intervention.

Examples of operational standards for the mainstreaming of gender in humanitarian action:

❖ **Analysis of the different needs of women, girls, boys and men:**

WASH: Analyze and take into consideration the division of tasks and the different needs of women, girls, boys and men when providing water, as well as care and hygiene services.
Nutrition: Analyze the nutritional vulnerability particularly affecting boys. Take corrective measures accordingly.
Shelter: Analyze task division between women and men for the construction of shelters in the area. Take specific measures in order to provide construction assistance to female headed households.
Food Security: Specify how the choice of in kind assistance and technical support to be provided are based on a sound understanding of the gendered division of labor and of the socioeconomic vulnerabilities of women and men.

❖ **Community consultation:**

Health: Systematically consult with women in order to identify with them the opening hours and days most convenient for them.
WASH: Give priority to consultation with women and girls at all project stages, particularly on issues such as the location and design of water points, showers and toilets in order to reduce waiting time for them, as well as their risk of becoming a target of violence.

❖ **Equal access to aid:**

Non Food Items (NFI): Identify women as aid recipients to ensure that all female spouses in polygamous households are included.

Education: Encourage equal education for all by sensitizing local communities and by taking into account specific obstacles to education for girls and boys.

❖ **Representation and participation of both women and men in the decision-making process:**

WASH: Encourage an equal representation of women and men in decision-making bodies and in trainings so that both groups have an equal mastery of existing facilities.
Food Security: Promote female leaders among farmers groups

❖ **Equal opportunities and responsibilities:**

Protection: Engage boys and men as allies in the prevention of sexual violence.
Health: Strengthen the systematic engagement of men in reproductive health programs and services.
Nutrition: Ensure that fathers and mothers are equally targeted by food education activities. The engagement of fathers in taking care of malnutrition cases needs to be encouraged.
Education: Boys and girls are responsible for cleaning their own toilets, classrooms and recreational spaces.
Logistics: For road rehabilitation projects using high intensity labor, ensure that women represent at least 25% of the laborers. Provide an equal salary to women and men.

❖ **Response to specific needs:**

Shelter: Indicate how land and housing access issues will be taken into consideration, with a specific attention to the situation of daughters and widows
NFI: Respond to specific needs of girls and women aged 13 to 45 when distributing personal hygiene kits.
Education: Sensitize fathers and mothers to the importance of continuing education for teenage girls after primary school and to issues such as early pregnancy and marriage.

❖ **Protection from sexual exploitation and abuse and from sexual violence:**
WASH: Separate shower and toilet blocks according to sex by means of a pictogram, and keep a ratio of 6 doors for women compared to 4 for men. Doors must be lockable from the inside.
NFI: Establish complaint mechanisms for security and abuse incidents. Post visuals to prevent sexual exploitation and abuse on registration and distribution sites.

❖ **Collection of sex-disaggregated data :**

Nutrition: Disaggregate by sex the number of aid beneficiaries, recruited community mediators and care personnel with access to training.
Protection: Disaggregate by sex data on human rights violations, as well as targeted beneficiaries of protection programs.

❖ **Team mixing:**

Nutrition: Ensure that care teams and community mediators consist of an equal number of women and men.

❖ **Sensitization of humanitarian actors on the importance of taking gender into account in their intervention**

Logistics: Humanitarian air companies will provide on board a set of documentation on gender equality in humanitarian action