

PROJECT INDEPENDENT EVALUATION – MANAGEMENT RESPONSE

(Note: This form is to be included in the final report)

Name of programme/office/unit:	Peacekeeping Training Programme (PTP)		
Name of programme manager and title:	Evariste Karambizi, Director, Division for Peace		
Name of project undertaking:	Enhanced training for uniformed medical personnel deploying to UN Peace Operations	Project ID	C2021.TARPT104.CANDFA
Donor:	Department of Foreign Affairs, Trade and Development (DFATD), Global Affairs Canada (GAC)		
Name of evaluation:	Independent Evaluation of the “Enhanced training for uniformed medical personnel deploying to UN Peace Operations” project		
Evaluation Report issuance date:	January 2025		

SECTION I – MANAGEMENT COMMENTS ON FINDINGS / CONCLUSIONS

We appreciate the thorough and thoughtful feedback provided on our recent project – particularly considering the continued collaboration with the Government of Canada PSOPs on enhancing the well-being of peacekeepers, which remains of critical importance in today’s landscape. The insights shared have significantly informed our work on the design of the follow-up project proposal.

We are pleased to see that our efforts in mainstreaming gender and actively encouraging women’s participation have been recognized, and that the training has left a deep impact on the participants. It was important to read that the project documents demonstrated a sound understanding of gender, going far beyond a “female count” approach, and that our terminology across the board was found to be gender sensitive. The fact that participants reported – and the evaluation recognized – that the mental health modules were successful in deconstructing some harmful myths and taboos, particularly in male participants, and that they were very well received was extremely rewarding. We are continuing to strengthen our work on mental health through working hand in hand with DHMOSH on several mental health initiatives. Finally, the fact that the participants surveyed and/or interviewed repeatedly qualified trainers as “excellent”, “so good”, “perfect” is a testament to the good practices implemented for trainer and team selection and will be surely maintained.

We also recognize the need to revisit the App as soon as we gain more clarity on evolving standards and materials in mental health – which may need to be updated in the App.

We look forward to using these recommendations for further growth and improvement.

**SECTION II – EVALUATION
RECOMMENDATIONS**

Management Response to Recommendations and Planned Action

Recommendation	Management Response (Accepted, Partially Accepted or Rejected)	Management response comments	Planned action					
			Key action (s)	Responsible	Timeframe (to be implemented by)	Information Source (link, document or any other evidence for future verification of planned actions)	Budget allocated (if necessary, otherwise specify “n/a”)	Status at the time of completing the MR (planned or under implementation)
<p>Recommendation 1:</p> <p>High priority</p> <p>UNITAR should deepen engagement with T/PCCC on the role that health plays in the safety, wellbeing and missions’ performance of peacekeepers.</p> <p>Organize training with the same group of beneficiary countries and implementing partners to deepen awareness, knowledge and skills acquired and benefit other health professionals.</p> <p>Expand training to other groups of T/PCC ranking among the most vulnerable to fatalities. A future phase may further target the most vulnerable groups, e.g., according to DPO statistics local staff are the most vulnerable to illness while the Military are the most vulnerable to malicious acts and accidents. T/PCC interest may be checked in confidentially sharing causes of death and injury for deployed nationals so to analyse trends and target training even better, for example by confirming DPO statistics with the TPCC.</p>	Partially accepted	<p>In the follow up project proposal, which is currently being reviewed by the Government of Canada – DFATD PSOPs – UNITAR did list most beneficiary countries from the first two projects; however, as funding is limited and the next project has a geographic / global expansion as part of its objectives, not all past beneficiary T/PCCs can be included.</p> <p>While the training courses will be expanded to other high-risk T/PCCs, expanding the training audience to other vulnerable groups (e.g. civilians) falls beyond the scope of PSOPs support, which has thus far been limited to uniformed medical peacekeeping personnel.</p> <p>Obtaining medical data about uniformed personnel from T/PCC will be challenging – both due to confidentiality and security concerns and may not fall within the Institute’s mandate.</p>	<p>The project team will take the following actions:</p> <ul style="list-style-type: none"> - Include gathering inputs from mission representatives and TPCC stakeholders through consultative processes in the planning stage of the new project proposal - Include a Steering Committee in the new project proposal to ensure strategic alignment, technical quality, and stakeholder engagement. The Steering Committee will provide oversight, technical guidance, and facilitate coordination between partners. It will include T/PCC representatives, engaged on a rotational basis to provide beneficiary feedback and ensure relevance to national priorities 	<p>Masa Dikanovic, Specialist, Pre-deployment Training and Advisory Section</p> <p>Claudia Croci, Chief, Pre-deployment Training and Advisory Section</p>	31 March 2025	Final narrative project proposal for the new phase of the project	The staff members listed will work on developing the project proposal to include the recommendations. No further resources needed.	Under implementation


<p>Whenever possible UNITAR may seek to engage with T/PCC that officially commit troops and contingents (e.g., Kenya to Haiti) to increase the likelihood learning will be soon applied in the field. This recommendation focuses on building a new narrative around mission performance, promoting comprehensive approach and awareness about the impact of pre-deployment preparation.</p>								
<p>Recommendation 2: High priority</p> <p>UNITAR should continue and intensify efforts to raise health professionals' awareness on gender sensitive needs in peacekeeping environments.</p> <p>Pursue efforts to illustrate differentiated gender health and mental health experiences in peacekeeping settings and consequences on medical management. Continue to convey information about the right to intimacy and deconstruct stereotypes. Establish the link between taking gender needs into account and the attractiveness of recruitment to women (e.g., link to Canada research on barriers and good practices to support peacekeepers with caring responsibilities). Maintain and illustrate the</p>	<p>Accepted</p>		<p>A strong gender lens will be applied when revising the curriculum of the new project (if approved). The module on gender will be further strengthened in line with relevant UN standards.</p> <p>The PDTA team will continue to underscore the gender dimension when presenting the results of this project and/or in any relevant work on (mental) health.</p>	<p>Masa Dikanovic, Specialist, Pre-deployment Training and Advisory Section</p> <p>Claudia Croci, Chief, Pre-deployment Training and Advisory Section</p> <p>Subject Matter Experts (SMEs) / Consultants hired to revise the training curricula – if new project is approved</p>	<p>31 March 2027 (end date of new project proposal)</p>	<p>Relevant PDTA communication and publications on (mental) health (e.g. social media posts)</p> <p>If the new project is approved:</p> <p>Revised / updated training curricula</p> <p>Interim and final narrative reports</p>	<p>Staff members and SME – expenditures included in the project budget for curriculum revision</p>	<p>Planned</p>

<p>modules on sexual and reproductive rights and sexual orientation, another taboo with mental health consequences on mission. Explore the relevance of dedicated modules with the donor and implications on training duration and time management.</p>								
<p>Recommendation 3:</p> <p>High priority</p> <p>UNITAR should strengthen its stocktaking of existing medical equipment within T/PCCs to better define needs.</p> <p>Strengthen inventory stocktaking of equipment of the host facility to better establish how UNITAR can complement and bridge equipment gaps during and after training (including practical exercises) so as to obtain a precise list for material support that IP FNR recommendations do not reflect, except for Kenya APS. Follow-up with recipients on the use of equipment.</p>	<p>Partially accepted</p>	<p>UNITAR can follow up with equipment recipients on the use of donated equipment through surveys and/or email exchanges; however, due to funding constraints and Canada's budgetary restrictions, the only equipment included in the new project proposal are the training kits.</p>	<p>In the new project proposal:</p> <ul style="list-style-type: none"> - Include provisions that T/PCCs that receive Training of Trainers are left with training kits to deliver training independently - Include mentoring which will also touch upon equipment use <p>If the new project is approved, the project team will:</p> <ul style="list-style-type: none"> - Follow up with T/PCC that have received equipment in the past on its use 	<p>Project manager (tbc)</p>	<p>31 March 2027 (end date of new project proposal)</p>	<p>If the new project is approved:</p> <p>Interim and final narrative reports</p>	<p>No additional funding required</p>	<p>Under implementation (including kits and mentoring in new project proposal) and Planned</p>
<p>Recommendation 4:</p> <p>High priority</p> <p>UNITAR should mainstream the mobile App (or other learning reinforcement tools) in the training. The future deployment of the App should define use and users to differentiate it from other Apps.</p>	<p>Partially accepted</p>	<p>Depending on the outcomes of discussions with DHMOSH on mental health and on available funding for the new project, the existing app will either be updated OR other tool(s) developed and/or used to supplement the training.</p>		<p>Project manager (tbc)</p>	<p>31 March 2027 (end date of new project proposal)</p>	<p>If the new project is approved:</p> <p>Interim and final narrative reports</p>	<p>Dedicated funding required – to be defined, depending on type of tool(s)</p>	<p>Planned</p>

<p>UNITAR should clarify if the App aims to support training and learning or to address on-the-spot emergencies. Depending on the dissemination strategy adopted, layout could display a more intuitive table of contents, with a search option, reduced length of text and increased visuals.</p>								
<p>Recommendation 5: Medium-term priority</p> <p>UNITAR should either reformulate intermediate outcomes/ indicators or ensure that those that are formulated are supported with data to enable measurement and monitoring of progress towards defined targets. Considering the formulation of the project's intermediate outcome (enhanced physical and mental well-being of male and female military and police personnel deployed to the four high-risks missions) and considering the void in data on the impact of mental health in peacekeeping mission performance, either include questions on mental health in pre-training questionnaires to collect internal baseline information and inform targets (respecting anonymity of respondents and the principle of do no harm), or reformulate intermediate outcomes/indicators related to MHPSS that can be realistically measured.</p>	<p>Accepted</p>		<p>Intermediate outcomes/ indicators to be reformulated in the new project proposal</p>	<p>Masa Dikanovic, Specialist, Pre-deployment Training and Advisory Section</p> <p>Claudia Croci, Chief, Pre-deployment Training and Advisory Section</p>	<p>31 March 2025</p>	<p>Final narrative project proposal for the new phase of the project</p>	<p>The staff members listed will work on developing the project proposal to include the recommendations. No further resources needed.</p>	<p>Under implementation</p>

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Name of Director/Programme Manager	Date	Signature
Evariste Karambizi Director, Division for Peace	12 Mar 2025	Frank Borchers Head of UNITAR Bonn Office Chief, Division for Peace Office in Bonn OIC, Division for Peace and PTPU On behalf of Evariste Karambizi Director, Division for Peace

Name of Project Manager	Date	Signature
Claudia Croci, Chief, Pre-Deployment Training and Advisory Section	12 Mar 2025	

Management Response to Recommendations and Planned Action Follow- up							
Recommendation	Management Response (Accepted, Partially Accepted or Rejected)	Management response comments	Planned action				
			Key action (s)	Status 6 months (planned, under implementation, implemented)	Comments	Status one year (planned, under implementation, implemented)	Comments
	This column will be completed by PPME	This column will be completed by PPME	This column will be completed by PPME	This column will be completed after six months only	Write in this column any comments explaining, giving context or details on the actual status of the planned action	This column will be completed after one year only	Write in this column any comments explaining, giving context or details on the actual status of the planned action
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