



Evaluation Summary



International
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Supporting projects of the second phase of the Regional Initiative Latin America and the Caribbean Free of Child Labour – Final cluster independent evaluation

Quick Facts

Countries: *Countries of Latin America and the Caribbean that are part of the Regional Initiative*

Final Evaluation: *October 2020 – March 2021*

Evaluation Mode: *Cluster independent*

Administrative Office: *RO – LAC*

Technical Office: *FUNDAMENTALS*

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Project Code: *RLA/16/03/ESP; RLA/17/07/ESP; RLA/18/12/ESP; RLA/17/01/ESP; RLA/17/11/ESP; RLA/18/11/ESP*

Donor(s) & Budget: *USD 2,583,055: AECID, USD 1,324,362; AACID, USD 1, 258, 693*

Keywords: *Child labour*

Background & Context

Summary of the project purpose, logic and structure

The immediate objective of the six RI Support Projects (PAIRE III, PAIRE IV, AACID III, AACID IV, PAIRE V and AACID V) is “The national and regional public policies linked to the prevention and eradication of CL and the protection of allowed adolescent work, will have improved their degree of implementation”. Their

development objective is “To contribute to the acceleration of the eradication of CL, especially in its worst forms, within the framework of the RI.” The Projects have a regional scope and cover an important part of the activities and products of the Strategic Plan of Phase II of the RI. The first four Projects began in 2017 and ended in 2019 and 2020, while PAIRE V and AACID V began in 2019 and end in July 2021. The Projects are financed by the AECID and the AACID and the budget amounts to USD 2.6 million.

Purpose, scope and clients of the evaluation

The grouped evaluation of the six Support Projects offers relevant information to review strategies, objectives, strategic alliances and resources for the implementation of similar projects in the future. Likewise, it has identified potential and organizational challenges to contribute to the strengthening of the RI in the relevance, effectiveness, quality and sustainability of its results, with a view to the period 2022-2025, which constitutes Phase III of the RI. The evaluation has analysed the results achieved by the activities carried out in the period 2017-2020, within the framework of the six Projects. The geographical scope covers the 30 countries that make up the RI.

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activities carried out in the period 2017-2020, within the framework of the six Projects. The geographical scope covers the 30 countries that make up the RI.

The internal clients are: (a) the TS of the RI; (b) the Decent Work Teams and Country Offices of the Americas; (c) the ILO Regional Office for Latin America and the Caribbean; (d) FUNDAMENTALS of the Department of Governance and Tripartism, ILO Geneva; (e) PARDEV, ILO Geneva; and (f) EVAL, ILO Geneva. The external clients are: (a) Governments of the member countries of the RI, in particular the FPs representing the MLs; (b) Representatives of employers and workers in the RI, (c) United Nations agencies with greater participation in the RI; (d) AECID and AACID; (e) Other public institutions; and (f) Institutions of civil society and academia.

Methodology of evaluation

The grouped evaluation has analysed the Projects taking into account the following criteria: (a) relevance, (b) validity of the design, (c) effectiveness, (d) efficiency, and (e) orientation towards impact and sustainability. Likewise, the evaluation integrates the crosscutting issues of the ILO: ILS, social dialogue and gender equality and non-discrimination. The evaluation has applied a ToFC approach, has used different quantitative and qualitative data collection techniques to ensure the validity and reliability of the findings, and has used a participatory approach that involved all key stakeholders.

Interviews were conducted with the members of the TS, with the FPs representing the governments that make up the RI and the employers' and workers' organizations, with ILO officials, with UNS institutions, financing partners and civil society organizations, and with public institutions of the countries that make up the RI. Discussion sessions were also held with the members of the TS and online surveys were applied to the members of the TS and the FPs. In total, 89 people participated in the interviews or discussion groups and 37 people responded to the online survey.

The members of the TS and the FPs were invited to participate in the interviews and/or discussion groups. In the case of the other ILO officials and the representatives of the UNS agencies, financing partners and public institutions at the national level, the selection was made taking into account that all the institutions that have had important participation in the implementation of the Projects and that the person

to be interviewed has participated or, at least, is aware of the actions carried out by the RI. Regarding the surveys, they were addressed to all members of the TS and to the entire FP Network. Taking into account the current context of the pandemic and the impossibility of carrying out field missions, all the work of collecting primary sources has been carried out remotely, through video calls on platforms such as Skype, Zoom, Meet and/or WhatsApp.

Main Findings & Conclusions

(1) The RI is relevant as a mechanism for intergovernmental and tripartite coordination to incorporate the topic of CL into the public agenda, update and design national public policy instruments, and build a shared vision on prevention and eradication of CL at the regional level. However, the positive perception of FPs about the relevance of the RI in the context of a pandemic is somewhat reduced, given that governments prioritize other issues to alleviate the negative effects of the pandemic.

(2) The RI Support Projects are not only aligned with public policies for the prevention and eradication of CL in LAC countries, but also strengthen these by proposing a tool for targeting CL prevention policies with a territorial approach (the CLRISK/IVTI). The Projects are also aligned with the strategic objectives of the ILO, the SDGs of the 2030 Agenda (Target 8.7), the UNDAF/MECNUD and the agendas of AECID and AACID.

(3) The designs of the RI Support Projects are fully aligned with the RI intervention axes. On the other hand, the level of alignment is lower with respect to the results anticipated in the Strategic Plan of Phase II of the RI.

(4) The designs of the RI Support Projects are coherent and valid since their results contribute to their immediate objective and are related to each other. The products are related to the results and the result indicators (especially those incorporated in PAIRE V and AACID V) seek to capture changes generated at the individual and organizational level or effective uses of the products developed. Streamlining strategies were identified to achieve the results and their sustainability and, intervention assumptions and measures to mitigate the risks of non-compliance were recorded. In addition, the PAIRE V and AACID Projects were flexible to adapt to the demands of the new context of the pandemic. However, some

indicators of the results of the Projects (especially in PAIRE III, PAIRE IV, AACID III and AACID IV) only record the fulfilment of activities/products. Some products are actually means of verification and, some measures to mitigate the risks of non-compliance with the intervention assumptions, are the same products or strategies.

(5) The main advances of the RI Support Projects, with respect to the planned goal, have been the number of countries adhering to the RI, of spaces in which RI is recognized as a benchmark, and studies/research on CL (Result 1). Other advances have been the number of countries that have implemented Phase I of the CLRISK/IVTI (Outcome 2), the amount of knowledge exchanges and transfers within the framework of the SSC and of actors participating in these exchanges (Outcome 3), and the number of visits to the Web Platform and of fans on Facebook and followers on Twitter (Result 5). Meanwhile, progress has been beneath the planned goal regarding the implementation of multi-sectoral actions in the countries in response to the CLRISK/IVTI, the replication of practices by the countries that exchanged experiences within the framework of the SSC, and the effective incorporation of the gender approach.

(6) The participation of tripartism, represented by the FPs representing the government, employers' and workers' organizations, has been more evident in Results 1, 4 and 5 of the RI Support Projects than in Results 2 and 3.

(7) The incorporation of the gender approach in RI Support Projects has been incipient. Studies on gender and CL have not been carried out to make the inequalities and gaps visible, which can generate evidence to design better policies. No plans/programs (or other products) have been developed nor has a specific budget been allocated that reveals the effective incorporation of this approach. Neither have alliances been established with regional and national institutions specialized in gender. The few advances have been in training the FPs on how to incorporate the gender approach in CL prevention and eradication actions, the toolbox on gender and CL, and mainly the preparation of the GSRI, although since it has been published recently, its implementation cannot be analysed yet.

(8) The ILO's contribution to the achievement of the results of the RI Support Projects has been very important in promoting the design or improvement of

public policies in a tripartite and consensus framework between the government, employers' organizations and the workers, promoting the preventive approach, providing technical assistance to governments to translate policies into strategies, plans and projects, and generating knowledge in the FPs through the exchange of experiences between countries, preparation of studies, and training actions.

(9) The financial and human resources available for the management of the RI are not sufficient to specify the products and achieve the expected results in the Support Projects and in the Strategic Plan of Phase II of the RI within the foreseen term.

(10) The RI has established itself as a model of intergovernmental coordination that is based on tripartite dialogue as the main strategy to accelerate national responses for the prevention and eradication of CL and the fulfilment of Target 8.7 of the SDGs. The main challenge is to expand the duties or responsibilities of the FPs so that they have a greater participation in the decisions of the RI. In addition, to seek to mitigate the negative effects of the high turnover of FPs.

(11) The RI has established itself as an intervention model that fosters fluid communication between the TS and the FPs and also, amongst the latter, through mechanisms based on the intensive use of new technologies of information and communications.

(12) The articulation of the RI with other UNS agencies (ECLAC, FAO and IOM) has contributed to the completion of some products and results of the Support Projects, especially those related to the implementation of the CLRISK/IVTI and the generation of knowledge. At the level of public institutions, this articulation has been permanently established with the MLs, through the FPs, and has been streamlined into all the results and products of the Support Projects. However, coordination has been weaker with other public institutions with powers and influence in the area of children and adolescents and with the National Committees to combat CL, and with civil society organizations.

(13) The ILO support at central, regional and sub-regional levels to the RI has been offered at the request of the RI and not on a regular basis. Likewise, it has been of a strategic and technical nature but not of political influence and has not allocated more financial resources for the management of the RI. Regarding AECID and AACID, the TS and the FPs value the RI

financial contribution and also the RI support to make the work of the RI visible.

(14) The FPs have strengthened the RI capacities to understand the multidimensional nature of CL, its relationship with other issues, as well as the effectiveness and efficiency of the preventive approach. However, one of the main challenges for the RI is that the application of these greater knowledge and capacities may become generalized in concrete actions in favour of the prevention and eradication of CL in the RI countries. It is also necessary to strengthen other types of capacities in the FP: mobilization of funds, management and use of statistics, evidence-based planning, and political advocacy with the government and, in the case of the FPs who are representatives of employers' and workers' organizations, with the RI own networks or bases.

(15) Regarding the immediate objective of the RI Support Projects, there are countries that have developed/updated the RI national policies, plans or strategies for the prevention and eradication of CL and the protection of adolescent work. Others have done the same with the RI Hazardous Work Listings. Some have adjusted the RI CL-related regulatory frameworks, and there are also those who have designed and implemented projects or programs to eradicate dangerous adolescent work, labour reconversion or protected job training for adolescents. On the other hand, the countries register less progress in specifying the multi-sectoral approach and an effective articulation between sectors, policies and programs linked to the SDGs that affect the elimination of CL, improve CL statistical measurement systems, and increase the budget for the prevention and eradication of CL. All of these are factors that can affect the sustainability of the results achieved and the intervention of the RI.

(16) Regarding the Strategic Plan for Phase II of the RI, the greatest advances in the countries have been in the first Result (preventive approach). In the second and third Result (removal of children and adolescents in CL below the minimum age, and protection and/or labour reconversion for adolescents of the permitted age, respectively), progress differs according to country; and the fourth Result (addressing illicit forms of CL) is the one with the least progress. The greatest contribution of the RI has been given in the first Result and in the third. On the other hand, progress in the second and fourth Results is attributable almost exclusively to the countries and not to the RI.

(17) The contribution of the countries to the RI has been given at the level of human resources (time and capacities of the FP), technical (provision of information) and political support for actions to be carried out and concrete products in their countries, within the framework of the RI. However, they have not made significant financial contributions to carry out these actions and products. This fact, added to the fact that the ILO has not allocated more financial resources for the management of the RI, generates a high financial dependence on development cooperation, which in turn limits the sustainability of the results achieved and of the RI itself.

(18) Although it is estimated that the COVID-19 pandemic will increase CL in LAC and affect the budget of governments and international cooperation funds destined to fight CL, there are also internal and external conditions that can be taken advantage of and powered by RI to provide a timely and effective response in the fight against CL. Regarding the former, the RI is an institution with the capacity for political advocacy and mobilization of resources from international cooperation. Regarding the latter, the following are worth noting: the start of the vaccination process, the probable reopening of schools, that 2021 be the International Year for the eradication of CL, the development, by the UNS agencies of knowledge and public policy recommendations to the countries on how to mitigate the possible impacts of the pandemic on the well-being of children and adolescents, and donors' concern not to backtrack on the achievements made in reducing CL in the region.

Lessons learned, good practices and recommendations

Lessons learned

(1) The CLRISK/IVTI has limits for its implementation, as it requires countries to have minimum conditions of availability and quality of statistical information and administrative records. The ML also requires the ability to access information sources generated by other institutions and political commitment at the highest level to promote the model. In addition, the implementation of Phase II demands that there be a supply of articulated public services and programs in the selected municipalities.

(2) There are factors external to the RI that contribute to explain the progress at the level of results of the

Support Projects and the Strategic Plan of Phase II of the RI, as well as others that limit these advances. Among the former, the following stand out: (a) interventions or projects (of the ILO or other institutions) related to the prevention and eradication of CL; (b) the countries are oriented towards meeting target 8.7 of the SDGs, of ILO Conventions No. 138 and no. 182; and (c) some countries have public policies aimed at making primary education and health universal, conditional transfer programs. The latter include: (i) economic factors such as underemployment, precarious employment, and informality; (ii) cultural factors such as the perception of the population and authorities that CL is normal and even desirable; and (iii) from 2020, the pandemic, some estimated negative effects of which are the increase in CL and the impoverishment of the fiscal coffers of the countries.

(3) The main difficulties for the countries to advance in Result 2 of the Strategic Plan of Phase II of the RI are: (a) the removal strategies of children and adolescents tend to be expensive and not very sustainable; (b) inspection systems lack sufficient human and financial resources to carry out their duties; (c) CL in the informal economy is difficult to make visible; and (d) some Caribbean countries do not have a legal framework to identify cases of children and adolescents in CL situations. Regarding Result 4 of the aforementioned Plan, the main difficulties for the countries to move forward are: (a) the complexities in the regulations of the countries make it difficult to establish and implement strategies to address illicit forms of CL; (b) countries do not usually have official statistics on hazardous work and WFCL because illicit forms of CL are not visible, and (c) tackling illicit forms of CL is often the responsibility of institutions that are not represented by the FPs of the RI.

(4) The mobilization of resources from international cooperation for the sustainability of RI is a very complex challenge to face due to the following reasons: (a) the resources that cooperation allocates for interventions by UNS agencies are increasingly reduced in CL in LAC; (b) the RI intervention model seeks to strengthen the capacities of the organizations in the countries to institutionalize the CL prevention and eradication policy, which is less visible (than if the focus were, for example, on removing children and

adolescents from CL) and therefore might be less attractive to finance; (c) it is very difficult to evaluate the impact of the intervention in terms of observed changes that may be attributable to RI, and this type of evidence is increasingly requested by funding agencies; (d) To carry out the RI intervention model, the permanent role of coordination and provision of technical assistance of the TS is key, which requires resources to cover the costs of the personnel of the TS and this destination of the financing is not very attractive to donors; and (e) in the current context of COVID-19, international cooperation organizations may direct their financing in LAC towards other issues.

(5) The RI can be replicated in other regions where CL exists, due to the following reasons: (a) the RI has many years of experience and can exhibit achievements and results; (b) it articulates a significant number of countries, with different languages, around common objectives and goals; (c) works with approach methodologies, tools and strategies that can be adapted to the realities of the countries that make up a certain region; and (d) there is willingness and interest on the part of the TS and the PFs of the RI in providing support and technical assistance to replicate the experience.

Good practices

(1) In Colombia, the Public Policy Line for the Prevention and Eradication of Child Labour and Comprehensive Protection of Adolescent Workers 2017-2027 and in Argentina the National Plan for the Prevention and Eradication of Child Labour and Protection of Adolescent Labour 2018-2022 include strategies and activities proposed by the RI, with an explicit mention of developing actions within the framework of the risk identification model (in the case of Colombia, an express allusion is made to the CLRISK).

(2) The promotion of the exchange of experiences, through the SSC, has allowed the countries to learn of the progress in the fight against CL achieved by their peers, identifying lessons learned and success factors. According to the FPs, it has been the most important mechanism to improve their knowledge and skills.

(3) The use of the WhatsApp platform has contributed to the consolidation of an intervention model that

encourages constant communication between the TS and the FPs and also amongst the latter.

(4) The actions carried out by the TS to be able to integrate English-speaking countries into communication spaces, providing them with simultaneous interpretation in virtual meetings or immediate translations on WhatsApp, have been strongly highlighted by English-speaking FPs of the Caribbean, who consider it an essential factor to explain their growing participation and integration in these spaces.

(5) The rapid response capacity and flexibility of the RI to adapt to the new context of the pandemic and not delay the planned activities. The RI PAIRE V and AACID Support Projects adjusted their activities to strengthen the capacities of the FPs, exchange experiences and prepare studies, orienting them to the identification and analysis of the effects of COVID-19 on CL in the region. Likewise, the confinement and compulsory social isolation measures established in the countries motivated the RI to strengthen the capacities of the FPs to use social networks and access virtual platforms.

Recommendations

(1) Promote, in the countries that make up the RI, a greater use of the information generated by the CLRISK/IVTI (For the TS, ILO Regional Office, ECLAC, FPs of governments and ML of the countries that comprise the RI, High priority, Short term)

(2) Promote, within the framework of SSC, a greater exchange of experiences, mainly between Latin American countries with those of the Caribbean. In addition, that in a greater number of countries the learning generated from these exchanges is applied in designing or improving policies, plans, strategies and actions related to the prevention and eradication of CL. (For the TS and PFs of employers' and workers' organizations, Medium priority, Short-term)

(3) Incorporate in a more effective way the gender approach in the RI intervention, through the following actions: (a) carry out a diagnosis to identify the mechanisms, advances, effective and potential limitations of the effective incorporation of the approach of gender in public policies to combat CL in the ML and in other instances of the public sector in

the countries that make up the RI; (b) promote the collection of statistical information available in the countries to measure UDW and care work within the home and analyse the advantages and disadvantages of CLRISK/IVTI being able to incorporate it into its model; and (c) establish alliances with key regional and national institutions on gender matters. (For the TS and FP of governments, employers 'and workers' organizations, to the ILO Regional Office, High priority, Short term)

(4) Co-finance the TS Coordination position, designate as TS Coordinator a specialist who is currently part of the regular ILO staff or designate a specialist or technical expert from the ILO to support the work of the TS (technical assistance, follow-up and monitoring and mobilization of resources) as part of its regular functions (For the ILO Regional Office and ILO Headquarters, Very high priority, Medium term).

(5) To make the RI management even more effective and efficient, it is suggested: (a) to expand the duties or responsibilities of the FPs so that they have a greater participation in RI decisions and thus a greater representation in their countries; (b) promote greater coordination of the FPs representing employers' and workers' organizations with the countries they represent; and (c) develop and implement protocols for the transfer of knowledge and information to the FPs that join the RI, in order to mitigate the negative effects of the rotation of the FPs (For the TS, High priority, Short term)

(6) Carry out training actions aimed at strengthening the following capabilities in the FPs: (a) mobilization of funds from public and private resources and cooperation agencies, (b) management and use of statistics and planning based on evidence, and (c) political incidence (advice, lobbying) in the National and Local Committees to combat CL so that the prevention and eradication of CL is addressed more effectively by the institutions that make up said Committees and, in the case of FPs representing employers' and workers' organizations, political advocacy (advice) with their own networks or bases (For the ILO Regional Office, High priority, Short term)

(7) Promote the positioning of RI in spaces where decision-makers participate, such as CELAC, MERCOSUR, SICA, CARICOM, the Global Business

Learning Network, PAHO, the G20, European Union Forums, the RIAL, the Quito Process, OAS, among others (For the Regional Directorate of the ILO, Government PF, employers' and workers' organizations, financing partners, Medium priority, Medium term).

(8) Regarding access to financing for Phase III of the RI, try to involve, in addition to current partners, others such as OAS, WB, IDB, UNICEF, WHO, SEGIB, for which it is suggested: (a) incorporate CL into other related issues that are a higher priority for cooperation (such as the situation of refugees and migrants from Venezuela in LAC or the socio-economic recovery strategy in the face of the COVID-19 crisis); and (b) incorporate CL in a more global dimension (programs or initiatives) rather than a regional one. (For the TS, PF of governments, employers' and workers' organizations, and to the ILO Regional Office, Sub-Regional Offices and PARDEV, Very Priority high, Short term).

(9) Carry out advocacy (advisory) work with the governments of the countries that make up the RI so that the interest and commitment to the subject of CL materializes in: (a) a larger budget for the prevention and eradication of CL and protection of allowed adolescent work; (b) an inter-sectoral approach and effective coordination between policies and programs related to the SDGs that affect the elimination of CL: health, education, employment, formality, poverty reduction, social protection; and (c) a periodic update of the statistical information from official sources (For PFs of governments and to the TS, ILO Regional Office, Very high priority, Short term)

(10) In the current context of COVID-19, identify those strategies and actions that are most likely to contribute, from the RI, to reverting the effects that the pandemic will bring on the increase in CL, identifying the ToC that sustains them and based on evidence. (For the TS, the FPs of governments, employers' and workers' organizations, the ILO Regional Office and the UNS agencies, High priority high, Short term)