

Good Practices



SALTO-YOUTH
EUROMED
RESOURCE CENTRE



Erasmus+
Tools for Learning



**Survey
about
personal
and
professional
impact
on
participants
of**

**SALTO
YOUTH**

**EuroMed trainings:
2008/2013**



EXECUTIVE SUMMARY

Introduction

This impact study aimed to address the following question: ‘To what extent have SALTO EuroMed training activities had a positive impact on personal and professional development in a Euro-Mediterranean context from 2008 until 2013’. From this research question, 11 different hypotheses were formed which would give the basis for analysing any empirical data which could be quantified to allow for interpretation and an answering of the research question. In addressing these hypotheses, data analysis from the two questionnaires focussed on several specific demographic factors; regional origin (it is widely acknowledged that there is a significant development gap between EU Programme countries and countries of the Maghreb and Mashreq regions), gender (as a fundamental aim of both EuroMed Youth and YiA programmes, gender equality was one of the most important demographics to be compared) and experience in youth work (to assess how experience influences what competences are developed). Furthermore two specific areas of EuroMed Youth work were also given special attention; TOTEM (because of its relevance for multipliers and more strongly professionally orientated objectives) and EVS (due to SALTO EuroMed beginning the accreditation process). Ultimately the study took on an empirical nature and used the data to either prove or disprove the 11 hypotheses which would then give the indication as to whether SALTO EuroMed training activities had a positive impact on personal and professional development of the individuals who responded. The data results and subsequent interpretations are treated as representative of the EuroMed region and are hence seen by this study as a valid source of data for which can be used to answer the study’s principal research question.

Demographics

However, before concluding the findings of the hypotheses, it is important to take an overview of the more essential demographic responses, primarily the response rate but also gender and experience in youth work. Out of the 882 participants who were invited to participate in the survey, 205 (23.24%) responded. This represents an era of SALTO-Youth EuroMed training where there has been less training courses than before, with a greater focus on short duration thematic events. However, one could say that this trend is set to be reversed due to the focus on EVS accreditation for MEDA NGOs – clearly representing a return to a more training orientated approach. Ultimately this demographic was lower than the previous study but was still a valid response rate to base data interpretation upon. When looking at gender, we see that a comparison with the previous study highlights that the situation has not improved, but has actually worsened. With only 30.43% of MEDA responses female, this data unfortunately suggests that the SALTO-Youth EuroMed training courses ‘Empowering Women’ have yet to result in increased female participation. While there is also a gender imbalance in the non-MEDA region with more females than males, this has not been deemed an issue (the difference is not so large) but highlights that – at the time of writing – no region is free of gender imbalances. Unfortunately this trend is mainly attributed to cultural traditions rather than an issue of youth work, and many changes in MEDA society will be needed for a reversal of this gender imbalance to take place. Finally, the report highlights that the most frequent youth workers to be involved with SALTO-Youth EuroMed training courses have been involved in youth work for 4-10 years. This was expected, is welcomed and hopefully will continue into the future as these youth workers tend to be best suited to utilising new skills and tools for project development, as well as representing the main stakeholders of youth work.

Data Interpretation

We will now summarise to what extent our 11 hypotheses have been successfully proved, and whether or not this can be considered constituting a positive impact on personal and professional development in the context of a SALTO-Youth EuroMed training activity.

Hypothesis 1: SALTO-Youth EuroMed training activities result in a positive socio-professional impact on participants in terms of strengthening professional and practical skills in terms of:



- Methodology (project methodology, intercultural education)
- Best practices (leading / managing youth projects, conflict management)
- Strategies (knowledge of European Procedures and priorities, partner networking)

Hypothesis 1 was indeed proven to be correct as the plethora of skills acquired, whether frequently or not, indicated a strong endorsement of the strengthening of professional and practical skills. While there were several differences between the two small regions, an emerging trend was that methodological skills were the most frequently picked up. These results are generally positive and confirm that hypothesis 1 has been successfully proven.

Hypothesis 2: SALTO-Youth EuroMed training activities result in a positive socio-professional impact on participants in terms of contributing towards an improvement in both personal wellbeing and professional orientation.

Data analysis was overwhelmingly positive regarding whether or not there had been an improvement in both personal wellbeing and professional orientation. Results to question 4 is also noteworthy as it suggests a rapid improvement in professional responsibility gained from training activities than when it was analysed in the previous report. Ultimately both questions 3 and 4's results demonstrated that hypothesis 2 had successfully been proved, however the demographic factors of gender (to a large extent) and region of origin (to a smaller extent) were influential in whether or not responsibility had increased or decreased. We conclude by acknowledging the validity of hypothesis 2 but acknowledging that demographic factors influence to what extent a positive socio-professional impact is felt.

Hypothesis 3: SALTO-Youth EuroMed training activities result in a positive socio-professional impact on participants in terms of producing competent effective EuroMed trainers and multipliers:

This hypothesis focussed on analysing specific data on ex-TOTEM participants. While a substantial number of ex-participants did not go on to do trainings, there is ample evidence to support that their opportunities were limited by external factors. Interestingly the slight majority who did go on to lead trainings accredited their trainer competences to the programme, whereas those who didn't manage to conduct a training pointed to external factors as the reason behind not doing so. That being said, a satisfactory number of ex-TOTEM participants went on to lead trainings indicating that there is a solid pool of competent and effective EuroMed trainers, ultimately indicating our hypothesis has been successfully proven.

Hypothesis 5: SALTO-Youth EuroMed training activities facilitate the empowerment of participants towards becoming more active citizens through a focus on providing new structures for ideas, dialogue, orientation, strategy development, and working methods:

While the data analysed strongly indicated that this hypothesis has been successfully proved, what is interesting is that even though the focus of the question was more orientated towards the professional dimension, many participants chose to acknowledge and emphasis the interdependent relationship between personal and professional development in training activities. The most frequent competency picked up was new strategies although most respondents also felt new ideas were valued, with the majority selecting more than one anyway. Supported by positive quotes from participants, hypothesis 5 was one of the more strongly proved hypotheses of the study.

Hypothesis 6: SALTO-Youth EuroMed training activities facilitate the empowerment of participants towards becoming more active citizens through a focus on strengthening existing youth networks and the facilitation of creating new networks that provide a platform for youth communication, exchange and engagement:

Questions 6, 7, 14, 14i, 14ii and 14iii all firmly endorsed hypothesis 6 as being successfully proved, with the most popular networks clearly being EU and MEDA orientated. However it was also highlighted by several respondents (noticeably TOTEM trainees) that their ability to develop networks due to increasing personal and professional capacities can only have a limited impact in the face of internal political difficulties. As most of these responses came from the MEDA region, this study bears in mind that political difficulties look set to continue into the

near future of the region with the fallout from the Arab Spring uprisings still not clear. Yet on the basis of the average respondent, it seems training activities are extremely effective at creating new networks and helping civil society actors expand existing networks through furthering contacts.

Hypothesis 7: SALTO-Youth EuroMed training activities facilitate the empowerment of participants towards becoming more active citizens through a focus on the dissemination and distribution of useful resources and tools

- Methodology (project methodology, intercultural education)
- Best practices (leading / managing youth projects, conflict management)
- Strategies (knowledge of European Procedures and priorities, partner networking)

Taking into consideration the response data in relation to SALTO-Youth EuroMed's distribution of materials, this study wishes to acknowledge that it is difficult to meet all EuroMed youth worker's needs. However, respondents appear to acknowledge that there is a satisfactory range of educational tools that allow youth workers to be able to engage in what they feel is necessary. Ultimately, only a very small minority felt resources had not been useful allowing us to conclude that hypothesis 7 has been proven.

Hypothesis 8: Through increasing the awareness of existing frameworks and structures, SALTO EuroMed training activities have encouraged organisations to implement a wider range of activities.

When concluding whether hypothesis 8 is proven or not, this study acknowledges that the response data is far from being decisive. While there were certainly many projects and initiatives following SALTO-Youth EuroMed training activities (and at the same time acknowledging in this the successful transfusion of knowledge and opportunities regarding funding frameworks and structures), there is no empirical evidence to suggest that organisations have been implementing a 'wider range of activities' (using the previous report as a basis for activity range). Therefore while we can safely say that through increasing awareness of existing frameworks and structures, organisations have successfully implemented many activities, we cannot say that the range of activities is more or less diverse than detailed in the previous report. This leads us to conclude that hypothesis 8 has been, at best neither disproved or proved, and at worst, completely disproved.

Hypothesis 9: SALTO EuroMed training activities encourage project creation and development through effectively promoting mobility as a tool towards fulfilling EuroMed objectives

This report will see the analysed data (here seen as the high number of mobility's and partnerships) as a solid base towards the promotion of mobility as a tool towards fulfilling EuroMed objectives. The data shows that despite the difficulties of the programme and ambitious aims of youth mobility, the framework of European funded grants for non-formal learning programmes still holds a massive appeal to those involved in youth work. It is also an endorsement of SALTO-Youth EuroMed's ability to increase awareness of these opportunities and effectively diffuse EuroMed norms and objectives to participants who incorporate such principles into future projects. We therefore conclude that hypothesis 9 is successfully proven and that training activities have encouraged project creation and mobility as a tool for EuroMed youth work.

Hypothesis 10: As an objective, such collaborative actions (as seen in hypotheses 8 & 9) would be hampered by hardening EU Member State immigration policies

While not becoming too drawn into historical analysis of the last seven years, we can clearly interpret the response data as disproving hypothesis 10. The factors most likely to have hampered EuroMed youth work in the previous years are political and financial issues as opposed to the VISA problems.

Hypothesis 11: SALTO EuroMed training activities promote a dynamic view of intercultural dialogue and diversity. Furthermore, through increased mobility, participants have greater

understanding of different cultures, support interculturalism and become active multipliers for intercultural experiences

Response data for hypothesis 11 clearly indicates it has been successfully proven. Through increased mobility, participants have indeed gained a greater understanding of different cultures, are more supportive of interculturality and are active multipliers for intercultural experiences.

Hypothesis 12: SALTO EuroMed training activities promote a dynamic view of intercultural dialogue and diversity. Furthermore, through promoting key European norms such as multiculturalism, diversity and inter-regional cooperation in YiA activities, projects have increased support for interculturalism.

In conclusion the general preference for communication as a value goes a long way to endorsing the priority of interculturality and diversity in SALTO projects, but evenly distributed responses of values also shows that the activities are successful in promoting key European norms such as responsibility and tolerance. Furthermore all 205 respondents answered that they would recommend a SALTO-Youth EuroMed training activity to a colleague or friend giving further endorsement to hypothesis 11 and 12 that the successfully transfused EU norms are further strengthened by ex-participants effectively becoming ‘intercultural multipliers’ in EuroMed youth work. We therefore consider both hypotheses 11 and 12 to therefore have been proved correct.

Conclusion

The study ends by acknowledging the respondents highlighting the political difficulties that have dominated the Euro-Mediterranean area from 2008 until 2013. A main conclusion, therefore, of this study is that the extent to which SALTO-Youth EuroMed training activities had a positive impact on personal and professional development in a Euro-Mediterranean context from 2008 until 2013, is more dependent than ever before on the external political circumstances of both regions involved. However, on a more optimistic note, 9 out of 11 hypotheses having been successfully proven meaning that this report feels confident in recognising that SALTO-Youth EuroMed training activities are extremely successful in impacting upon personal and professional development in general. Notable points include that over 75% of respondents found that they had increased their levels of professional responsibilities following a SALTO-Youth EuroMed training course and that there is a solid pool of competent and experienced ex-TOTEM participants who have previously led trainings, acted as multipliers and who pledged to continue both actions into the near future.

However, it is also important to note that the main three demographic factors investigated (gender, region of origin and experience in youth work) continue to heavily influence both the personal and professional development of EuroMed youth workers. While this is to be expected and accepted in regard to experience in youth work and region of origin (diversity is welcomed in the changing of priorities with regards to both these demographic factors), gender continues to be one of the principal issues prevailing in EuroMed youth work. Despite it being repeatedly highlighted and numerous initiatives aimed at countering it (including SALTO-Youth EuroMed’s Empowering Women training courses), the issue appears to have worsened. While SALTO-Youth EuroMed is doing all it can to tackle this problem, this the problem is more rooted in cultural traditions rather than an issues of youth work, and significant changes in MEDA society is necessitated for a reversal of this gender imbalance to take place.

We therefore conclude that SALTO-Youth EuroMed has consistently implemented effective and reputable training activities that have served to impact positively on personal and professional development in a Euro-Mediterranean context. The report ends by outlining potential future difficulties to SALTO-Youth EuroMed work (mainly the volatile political situation being experienced by MEDA countries) and suggests that remaining flexible and adaptable to their needs is the key to maintaining good EuroMed youth work. Ultimately the potential for political situations to strengthen or reverse progress in youth work has never been higher, but this report serves as proof that EuroMed youth work is an effective way to develop the personal and professional competences of participants in SALTO-Youth EuroMed training activities.



Notes



INTRODUCTION

Who are we?

SALTO-Youth EuroMed and Good Practices is one of eight SALTO-Youth Resource Centres in Europe and aims to work together with National Agencies and EuroMed Youth Units towards greater Euro-Mediterranean Cooperation. Working alongside the EuroMed Youth Programme, we organise various thematic trainings, seminars and conferences with the objective of supporting and reinforcing EuroMed Youth Priorities. Furthermore we take on the responsibility of compiling and disseminating educational tools and best practices in the field of youth and training in order to create a common memory and ultimately bring all sides of the Mediterranean Sea closer together.

For further information on Salto-Youth EuroMed and Good Practices Resource Centre, please visit the following link: www.salto-youth.net/rc/euromed/

What we intend to do

With the official end of the Youth in Action! Programme and subsequent launching of Erasmus+, now seems the perfect time to reflect and evaluate the impact of EuroMed Youth Cooperation. While a complete study on all EuroMed Activities in the last six years represents an almost impossible empirical study, the impact of the SALTO-Youth EuroMed activities on both personal and professional development of participants can offer an important insight into the progressive nature of EuroMed Youth Cooperation. Hence, this study has tackled the following research question:

‘To what extent have SALTO-Youth EuroMed training activities had a positive impact on personal and professional development in a Euro-Mediterranean context from 2008 until 2013’

We adopted the time period of 2008 – 2013 for the following three reasons.

- 1) SALTO-Youth EuroMed and Good Practices Resource Centre previously conducted a similar study for the time period 2003 - 2007. Hence a new fresh evaluation is needed.
- 2) As previously mentioned, 2013 represented the final year for project applications under the YiA programme. Hence future projects will need to be evaluated in the context of a new programme.
- 3) During this time period, SALTO-Youth EuroMed increased its emphasis on several themes identified as having been lacking in the time period 2003 – 2007. Therefore this study also seeks to identify SALTO-Youth EuroMed’s ability to incorporate participant feedback into its work.

How we are going to do it

Adopting this research question to be the main focus of this study, SALTO-Youth EuroMed implemented an empirical based approach to evaluating the impact of its studies. This was constituted by two questionnaires with one aimed at participants from Mediterranean Partner Countries [MPCs]¹, and the other aimed at participants from Programme Countries [PCs]², and other non-SMP/PC participants³. The questionnaires were based upon the major themes and hypotheses of this study (outlined in the following section) and were distributed using ‘Google Drive’ software, allowing for the automatic compilation of all survey submissions and their subsequent interpretation. The questionnaires themselves were composed of several different research approaches such as multiples choice items, questions needing short text response, questions needed expanded textual response, and various checklists. This facilitates a friendlier questionnaire that gives the respondent freedom to detail information at a level of their choosing and should not need be considered too time consuming.

Using two questionnaires is a necessity considering the different environments that the two civil societies have been operating within. While Civil Society has certainly felt the squeeze of the Eurozone crisis, these financial difficulties are nothing compared to structural changes in

1- The Mediterranean Partner Countries [MPCs] constitute the following states: Algeria, Egypt, Israel, Jordan, Lebanon, Libya, Morocco, Palestinian Authority of the West Bank and Gaza Strip, Syria and Tunisia
 2- Programme Countries include all 27 (28 only from 2013 onwards) Member States of the European Union [EU], all Programme Countries of the European Free Trade Associations [EFTA] (includes Iceland, Lichtenstein, Norway and Switzerland), as well as Programme Countries which are candidates for accession to the EU (Croatia [Member State of EU from 2013 onwards] and Turkey)
 3- Non-SMP/PC participants include all countries from South East Europe [SEE] (includes Albania, Bosnia and Herzegovina, Former Yugoslav Republic of Macedonia, Kosovo, Montenegro and Serbia) and Eastern Europe and Caucasus countries [EECA] (includes Armenia, Azerbaijan, Belarus, Georgia, Moldova, Ukraine and Other Countries [OCs] which structures cooperation with Russia)

countries such as Egypt, Tunisia and Morocco as a result of the Arab Uprisings. Hence while we can combine data together to give an overall trend of Euro-Mediterranean Cooperation, we must also acknowledge the importance of analysing the two regions separately and be willing to engage in critical comparison.

Why it is going to be different

While the last research study on the activities on SALTO-Youth EuroMed clearly establishing the successful and effective impact of training activities, this study has attempted to encourage a greater engagement with participants and also embrace a more critical and in-depth approach to evaluating training activities. It is important to note that SALTO-Youth EuroMed conducts final evaluations as a mandatory component of all its Euro-Mediterranean activities, and that this study looks to focus more on the personal, professional and structural impact of Euro-Mediterranean Cooperation. This study also had the advantage of researching a time period that has seen just two regional structures for Euro-Mediterranean Cooperation; Youth in Action! and EuroMed Youth IV. Both have dominated regional cooperation since the beginning of 2008 and 2010 respectively, thus enabling a more coherent comparison of training activity impacts. Furthermore, we will be able to effectively evaluate whether SALTO-Youth EuroMed has implemented the changes that were suggested in the 2003 – 2007 report. Through a comparison of the two empirical data sets we can see trends over 10 years and to what extent SALTO-Youth EuroMed has influenced EuroMed Youth Priority areas such as gender equality and participation. Furthermore this study has looked to provide two questionnaires that are identical in the evaluation of personal and professional impact of training activities, but provide for a separate regional evaluation in terms of successful projects in funding structures. While this may reflect a difficult and politically unstable period in the Mediterranean Partner Countries, it does allow us to clearly acknowledge the importance of this as a factor and not mask the difficulties in increasingly successful and effective European projects.

In short, while this report looked to make reference to, and build upon the work of the 2003 – 2007 report, it has also committed to providing a fresh study that is more in-depth and more reflective of the two separate regions.

Definitions

Having already defined our study target group in terms of origins and regional structures, this section proceeds to give some working definitions for various terms made reference to throughout this study.

Training activities:

In general, SALTO-Youth EuroMed has implemented the following training activities in the last six years:

- Long Term Training Courses (including Evaluations Meetings)
- Partnership Building Activities
- Seminars
- Study Visits
- Tool Fairs
- Training Courses

However, SALTO-Youth EuroMed has occasionally been involved with International Conferences and Training of Trainers in EuroMed [TOTEM] (which included job shadowing)⁴.

Personal development:

The empowerment of any given individual that results in an improvement of their general wellbeing – as defined by that individual.

Professional development:

Understood by SALTO-Youth EuroMed to mean an improvement in an individual's

4- For further detail on what constitutes each Training Activity, please see the Youth in Action Programme Guide 2013

communication skills, leadership, training ability, report writing, time keeping or general management. Professional development is normally recognised through an individual receiving increased responsibility in their professional life in one or more of the before mentioned areas.

Euro-Mediterranean:

Euro-Mediterranean Cooperation and Context normally refers to the structures and programmes established to tackle the common challenges laid out in the Barcelona Declaration. In the context of youth, it often refers to the partnership between Europe and its Mediterranean neighbours in social, cultural and Human affairs which aims to promote understanding between cultures, exchanges between civil societies and develop human resources⁵.

Civil Society:

Civil Society is the aggregate of non-governmental organisations and institutions that manifest interest and will of citizens. It is society considered as a community of citizens linked by common interests and collective activity⁶.

Abbreviations

EECA	Eastern Europe and Caucasus
EFTA	European Free Trade Association
EU	European Union
MPCs / MEDA	Mediterranean Partner Countries
Non-MEDA	Combination of PCs, EECA & SEE
OCs	Other Countries
PCs	Programme Countries
SALTO-Youth EuroMed	SALTO-Youth EuroMed and Good Practices Resource Centre
SEE	South East Europe
YiA	Youth in Action! Programme

Report Focus

The report will aim to evaluate the impact of SALTO-Youth EuroMed's Training Activities, hence implying a focus on the Euro-Mediterranean area. However the decision was made that while it is key vision to base findings upon an empirical study of the Euro-Mediterranean region, this should not be at the expense of acknowledging the regional differences between MEDA and non-MEDA. Hence almost all empirical data will be first analysed on a regional basis before drawing any conclusions about a specific Euro-Mediterranean trend. As well as regional origin, the report will look to demonstrate that both gender and experience in youth work are all key factors when assessing personal and professional impacts of training activities. Hence, there are some themes and topics that will be more analysed than others due to a variety of factors:

- **Gender equality in personal and professional development as well as general participation**
 - As a principal objective of EuroMed youth work, gender equality was highlighted as a priority objective of SALTO-Youth EuroMed Training Activities following the results of the previous SALTO-Youth EuroMed Impact Survey of 2003-2007
- **The influence of experience in youth work**
 - While SALTO-Youth EuroMed training activities aim to achieve an experience balance within each group, it is also possible to analyse to what extent personal

5- See Barcelona Declaration, 1995
6- Oxford English Dictionary Online

and professional development differs based on this demographic

- **The status of inter-regional volunteering in the context of YiA and EuroMed Youth IV**
 - Given that SALTO-Youth EuroMed is currently in the process of accrediting MPC NGOs for EVS accreditation, it makes sense to evaluate its status over the past six years
- **The role of TOTEM in contributing towards EuroMed Youth Work**
 - A pillar of SALTO-Youth EuroMed activities for over a decade, TOTEM will be evaluated in the context of personal and professional development, as well as their contributions towards empowering Euro-Mediterranean youth

Gender and experience in youth work will often be used in empirical comparisons whereas inter-regional volunteering and the TOTEM focus will be covered in more specific areas of the questionnaire. The regional comparisons will also enable the appreciation of structural differences such as the conception of an NGO and its general functioning, as well as perceptions of volunteering and priority competencies.

Potential Difficulties

We shall also note here the potential difficulties when assessing the impact of essentially non-formal training activities, given that a key aspect of any non-formal education activity is that participants are not be formally assessed or have their progress measured directly related to the objectives and aims of the courses. Furthermore due to the broad range of themes that are encompassed in the SALTO-Youth EuroMed mandate, each training activity will have different objectives both in thematic terms but also in the project target group and output. Sometimes activities are aimed at newcomers to YiA and other times more experienced project managers, whereas often a project is purposefully a mix of the two. This means that establishing any kind of universal reference point for personal and professional impact is virtually impossible to reach. Instead the study aims to ask ex-participants their experience of the activity and to provide them a platform to express it in terms of impact terminology. As a non-formal education entity, we are open to embracing the individual perspectives of participants and consider this highly relevant, reliable and quantifiable information to base this study report on.

Introduction Conclusions

Having outlined who we are and what we plan to do with this survey, we will now outline the four major themes involved with the study and the subsequent hypotheses developed. The questions of the survey are designed to follow this structure and relate to the themes detailed below.

It is also worth noting that the Data Presentation and Analysis section will begin by interpreting the received demographic data which will give us a snapshot of to what extent SALTO-Youth EuroMed have managed to achieve the desired demographic balance.

FOUR MAJOR THEMES OF THE STUDY AND SUBSEQUENT HYPOTHESES

Professional competencies and personal development

- SALTO-Youth EuroMed Training Activities result in a positive socio-professional impact on participants in terms of:

1. Strengthening participants professional and practical skills in terms of:
 - a. Methodology (project methodology, intercultural education)
 - b. Best practices (leading / managing youth projects, conflict management)
 - c. Strategies (knowledge of EU Procedures & priorities, partner networking)
2. Contributing towards an improvement in both personal wellbeing and professional orientation
3. Producing competent and effective EuroMed Trainers and Multipliers

Professional and personal empowerment within EuroMed Cooperation

- SALTO-Youth EuroMed Training Activities facilitate the empowerment of participants towards becoming more active citizens through a focus on:

4. Providing new structures for ideas, dialogue, orientation, strategy development, and working methods
5. Strengthening existing youth networks and the facilitation of creating new networks that provide a platform for youth communication, exchange and engagement
6. The dissemination and distribution of useful resources and tools

Regional cooperation and subsequent impact

- SALTO-Youth EuroMed Training Activities encourage diversity of project actions and objectives

7. Through increasing awareness of existing frameworks and structures, partners have implemented a wider range of activities
 - Including: Youth Exchanges, European Voluntary Service (EVS), Job Shadowing, Evaluation Meetings, Study Visits, Partnership Building Activities (PBA), Seminars, Training Courses, Feasibility Visits, and Networking Events
8. Through effectively promoting mobility as a tool towards fulfilling EuroMed objectives
9. As an objective, such collaborative actions would be hampered by hardening EU Member States immigration policies

SALTO-Youth EuroMed as an 'Actor' and intercultural competencies

- SALTO-Youth EuroMed Training Activities promote a dynamic view of inter-cultural dialogue and diversity

10. Through promoting key European norms such as multiculturalism, diversity and inter-regional cooperation in YiA activities, projects have increased support for interculturalism
11. Through increased mobility, participants have a greater understanding of different cultures, support interculturalism and become active multipliers for inter-cultural experiences

DATA PRESENTATION AND ANALYSIS

Respondents and Demographics

I) Response Rate

(+Region) (+Country of Residence)

MENA	Number of responses	%
Algeria	4	4,35
Egypt	16	17,39
Israel	10	10,87
Jordan	6	6,52
Lebanon	8	8,70
Morocco	7	7,61
Palestine	19	20,65
Tunisia	22	23,91

Non MEDA	Number of responses	%
Albania	1	0,88
Armenia	1	0,88
Austria	3	2,65
Azerbaijan	1	0,88
Belgium	5	4,42
Bulgaria	4	3,54
Cyprus	3	2,65
Czech Republic	1	0,88
Denmark	2	1,77
Estonia	2	1,77
Finland	3	2,65
France	12	10,62
Germany	3	2,65
Greece	2	1,77
Hungary	2	1,77
Indonesia	1	0,88
Ireland	1	0,88
Italy	14	12,39
Latvia	2	1,77
Lithuania	2	1,77
Malta	3	2,65
Netherlands	2	1,77
Poland	3	2,65
Portugal	4	3,54
Romania	1	0,88
Serbia	1	0,88
Spain	8	7,08
Sweden	3	2,65
Switzerland	4	3,54
Turkey	11	9,73
Ukraine	1	0,88
UK	7	6,19

Total	92	100,00	Total	113	100,00
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Call for Questionnaire Participation:	882
Total respondents:	205
Response Rate:	23,24

From the infographic above we can see that out of the 882 participants who were requested by email to participate in the survey, a total of 205 responded giving a response rate of 23.24%. This study sees this response as a relative success given that this means just over 1 in 5 people responded to our call and while this is a slightly lower response rate than in the previous study (2003-2007 study invited 847 ex-trainees and received 242 responses at a rate of 28.57%), there are several factors that must be taken into consideration. Firstly, while the number of invitees may look roughly the same, it is noteworthy that our current 2008-2013 survey includes an extra year of study, demonstrating the decreasing number of trainings that have been present in the average SALTO-Youth EuroMed calendar. This can be accredited to the change of strategic direction of the resource centre which originally intended to build on several years of training programmes to a more issue-based and thematic approach.

In total there were 92 MEDA responses (constituting 44.88% of the total) to the 113 (55.12%) non-MEDA responses. As we can see from the infographic, the highest number of MEDA respondents came from Tunisia (22 respondents), Palestine (19 respondents) and Egypt (16 respondents). This was to be expected given that Tunisia is one of the countries who have been most involved in Euro-Mediterranean cooperation with a very active network of multipliers who are well coordinated by an effective EuroMed Youth Unit (EMYU). Furthermore Palestinian applications had always been relatively high and often yielded very active and involved youth workers and multipliers who were motivated to be involved in long-term learning projects. Finally on Egypt, it is worth saying that they have a large and professional pool of civil society actors and while they sometimes had difficulties being active due to internal dynamics, the quality of participating youth workers, multipliers and trainers is still very high. What can be considered a rather positive statistic is that all but one MEDA country had a participant response rate of above 5% of the MEDA total, demonstrating that the majority of MPCs have been appropriately engaged by SALTO-Youth EuroMed. The one anomalous result was Algeria's participant response rate of only 4 people constituting only 4.35% of the total MEDA response rate. Unfortunately this represents the relatively weak network of youth workers in Algeria, which is unlikely to improve given that there is no working EMYU and hence almost no activities to raise awareness on a national level. Subsequently it is therefore difficult to find motivated and effective Algerian participants for international projects. In the non-MEDA region, French, Italian and Turkish participant were the most frequent respondents (12, 14 and 11 respectively) which mirrors quite accurately the most engaged and active National Agencies (NAs) and Member States in Euro-Mediterranean cooperation (in terms of resource investment). Also with a high response rate were British and Spanish respondents, serving to illustrate how countries with a relatively higher population size will by extension, always have a numerically greater response. Using this size-ratio approach also allows us to consider response rates of countries such as Bulgaria, Cyprus, Malta and Portugal to all be relatively high and conclude that others such as the Netherlands and Germany are relatively low.

The report will only look to compare data on a regional basis – the MEDA region and the non-MEDA region – rather than on a country basis which would require breaking down the response data into over 30 different categories. Furthermore SALTO-Youth EuroMed activities actively seek to encourage the development of a Euro-Mediterranean identity within the professional sector of youth work, and subsequently look to engage all countries on an equal non-preferential basis. Therefore there is no mention of individual countries in a comparative context.

II) Gender

(+Region)

	Male	%	Female	%	Total	%
MEDA	64	69,57	28	30,43	92	100,00
%	58,18		29,47		44,88	
non-MEDA	46	40,71	67	59,29	113	100,00
%	41,82		70,53		55,12	
Total	110	53,66	95	46,34	205	100,00
%	100,00		100,00		100,00	

When talking about gender, the total of 205 respondents was comprised of 110 males (53.66% of total respondents) and 95 females (46.34%) which would suggest that while gender distribution is not completely equal, it is well within the boundaries of a margin for circumstantial fluctuation. However while this could represent an endorsement of SALTO-Youth EuroMed's recruitment strategy, further analysis reveals significant regional differences between MEDA and non-MEDA. Here we come straight to one of the major concerns raised by the last Impact Report of 2003-2007, that "[t]here are fewer women from Mediterranean countries taking part in training courses, creating projects and starting their own organisation" (SALTO-Youth EuroMed, INJEP, 2008). The MEDA female turnout of 28 (30.43% of all MEDA responses) as opposed to the MEDA male turnout of 64 (69.57%) does little to suggest that matters have improved. Disappointingly the situation is more than 10% worse than it was in the previous study where the MEDA female population constituted 41.46% of total MEDA respondents. This data is in spite of several trainings aimed specifically at increasing participation and engagement for MEDA females (See SALTO-Youth EuroMed publications on 'Empowering Women I, II & III') suggesting difficulties still remain. However from a recruitment perspective, SALTO-Youth EuroMed highlights here how female participation is influenced by several key factors including accessibility to opportunities, the possibility to travel etc. Federica Demicheli also (Project Manager of SALTO-Youth EuroMed Resource Centre) notes that female participants who have been engaged in these trainings have always been motivated, involved and enthusiastic, yet often face the challenge of having to balance their professional enthusiasm with family responsibilities. Interestingly there is also a juxtaposed gender imbalance in the non-MEDA region, with a greater number of non-MEDA females than non-MEDA males. While not considered an issue by this report (the imbalance is just below a 20% swing) the non-MEDA count of 46 men (40.71% of total non-MEDA respondents) to 67 women (59.29%) is a surprising results. It is this gender imbalance with a swing towards more female respondents that balances out the high MEDA male response rate, thus comprising a Euro-Mediterranean region where youth workers are comprised equally of both genders.

For now, the data allows us to conclude only that neither of the two regions are free of gender imbalances and that subsequently, the gender balanced Euro-Mediterranean region is not representative of its two regions. As previously mentioned, gender balance is a principle aim, objective and feature of training activities led by SALTO-Youth EuroMed. Therefore it will be analysed frequently in relation to other demographics, as a comparative tool when breaking down response data, and in the context of the previous 2003-2007 impact study. It is used in data analysis for all eleven hypotheses' over the four major themes and for the majority of individual questions.

III) Age

(+Region) (+Gender)

	MEDA						%
	Male	%	Female	%	Total	%	
18-30 years	27	75,00	9	25,00	36	100,00	50,70
%	42,19		32,14		39,13		
30-40 years	19	57,58	14	42,42	33	100,00	45,21
%	29,69		50,00		35,87		
40-50 years	15	83,33	3	16,67	18	100,00	42,86
%	23,44		10,71		19,57		
50+ years	3	60,00	2	40,00	5	100,00	26,32
%	4,69		7,14		5,43		
Total	64	69,57	28	30,43	92	100,00	44,88
%	100,00		100,00		100,00		

	Non MEDA						%
	Male	%	Female	%	Total	%	
18-30 years	11	31,43	24	68,57	35	100,00	49,30
%	23,91		35,82		30,97		
30-40 years	17	42,50	23	57,50	40	100,00	54,79
%	36,96		34,33		35,39		
40-50 years	14	58,33	10	41,67	24	100,00	57,14
%	30,43		14,93		21,24		
50+ years	4	28,57	10	71,43	14	100,00	73,68
%	8,69		14,93		12,39		
Total	46	40,71	67	59,29	113	100,00	55,12
%	100,00		100,00		100,00		

	Grand Total
18-30 years	71
%	34,63
30-40 years	73
%	35,61
40-50 years	42
%	20,49
50+ years	19
%	9,27
Total	205
%	100,00

As we can see, the infographic clearly indicates that a healthy majority of respondents are the same people who tend to constitute the main stakeholder age group of youth work (71 respondents [34.63% of all respondents] between the ages of 18 and 30; 73 respondents [35.61%] between the ages of 30 and 40). This trend is reflected in both regions meaning that the general Euro-Mediterranean statistic is an accurate representative of both Euro-Mediterranean regions. While the numerical gender imbalance inside MEDA persists, it appears to be more accentuated in certain age groups; in the 18-30 age group there is a 50% swing towards male respondents (MEDA Male: 27 respondents [75% of total MEDA respondents] against MEDA Female: 9 [25%]). The swing is even greater towards males [65%] in the 40-50 age group. While the older age groups could be considered as representative of a different era of youth work, what appears most worrying is that this trend continues to exist in what is arguably the most important stakeholder age group of all – the 18-30's. This is likely to be linked to the before mentioned issue of women in youth work as an ongoing EuroMed priority. The situation in non-MEDA is both similar and different to that of MEDA. While the 30-40 & 40-50 age groups both show an impressive gender balance, this is slightly skewed by the 18-30 and 50+ groups both having a clear female majority. This suggests that while the initial MEDA statistic showing that there are more males than females is valid regardless of age, the initial statistic of a high-female imbalanced non-MEDA region is also influenced by age. Hence the non-MEDA respondents are composed of a roughly gender balanced group of 30-40's and 40-50's, as well as quite extremely imbalanced 18-30 and 50+ age groups.

In terms of age distribution the regional distribution is quite impressive with their being no more than a 20% swing for one region in any of the 18-30, 30-40 & 40-50 age groups. While this is not the case for the 50+ age group, this report will not consider it an issue of significance due to it comprising the fewest number of major stakeholders of youth work. It is also worth mentioning that when considering important factors that influence personal and professional development of youth workers within the Euro-Mediterranean region, age is not a factor that appears to demand a radical change in policy. For this reason, the data analysis section does not utilise age as a comparative demographic factor.

IV) Experience in Youth Work

(+Region) (+Gender)

	MEDA						%
	Male	%	Female	%	Total	%	
0-3 years	7	77,78	2	22,22	9	100,00	33,33
%	10,94		7,14		9,78		
4-10 years	26	65,00	14	35,00	40	100,00	50,00
%	40,63		50,00		43,48		
10-20 years	18	62,01	11	37,93	29	100,00	42,65
%	28,13		39,29		31,52		
20 + years	13	92,86	1	7,14	14	100,00	46,67
%	20,31		3,57		15,22		
Total	64	69,57	28	30,43	92	100,00	44,88
%	100,00		100,00		100,00		

	Non-MEDA						%
	Male	%	Female	%	Total	%	
0-3 years	7	38,89	11	61,11	18	100,00	66,67
%	15,22		16,42		15,93		
4-10 years	11	27,50	29	72,50	40	100,00	50,00
%	23,91		43,28		35,96		
10-20 years	18	46,15	21	53,85	39	100,00	57,35
%	39,13		31,43		34,51		
20 + years	10	62,50	6	37,50	16	100,00	53,33
%	21,74		8,96		14,16		
Total	46	40,71	67	59,29	113	100,00	55,12
%	100,00		100,00		100,00		

	Grand total
18-30 years	27
%	13,17
30-40 years	80
%	39,02
40-50 years	68
%	33,17
50+ years	30
%	14,63
Total	205
%	100,00

From the infographic, we can see that the majority of respondents have been involved in youth work from 4-20 years with the highest response rate in the 4-10 years' experience group (80 respondents comprising 39.02% of all respondents) and the second highest response rate is the 10-20 years' experience group (68 respondents comprising 33.17%). This was to be expected and is indeed welcomed as experienced participants are often those best suited to utilising new skills and tools for project development. However what might be considered slightly disappointing is that respondents from the 20+ years' experience group were more numerous than those of the 0-3 years' experience group. While we see a clear preference for more experienced youth workers, interestingly this has not meant fewer young people (as seen by the age data) and could mean that more young people have greater experience in youth work.

Similar to the trends seen in age demographics, the persisting gender imbalance continues to be present in the MEDA region regardless of respondents experience in youth work – the swing towards male participants is greater than 20% in every years' experience group. Again similar to age, the most alarming trend appears to be that those who are newest in the field of youth work (0-3 years' experience) are comprised of mostly male respondents from the MEDA region. Thankfully those respondents of both regions who have 4-10, 10-20 & 20+ years' experience show no more than a 10% swing towards any gender showing that, in terms of regional origin, experience groups were roughly well balanced in terms of gender. The one exception to this was the 0-3 years' experience group which shows the non-MEDA as having double the number of respondents as those in MEDA (18 to 9) suggesting that competent inexperienced youth workers are emerging a lot faster in non-MEDA. However it is worth acknowledging that both regions appear to have an emerging younger more competent generation.

In the non-MEDA region only the 10-20 years' has a gender swing of less than 10%, yet both 0-3 and 20+ years' experience groups are only just over a 10% swing and – given the low number – can be almost considered a gender balance with a slight preference for females overall. However the 4-10 group has a big swing in favour of females (Male: 11 respondents [27.50% of all non-MEDA 4-10 respondents] against 29 female respondents [72.50% of all non-MEDA 4-10 respondents]). Interestingly the highest respondent group (those of 4-10 years' experience) saw big inequalities in both regions of opposing nature. On the one hand, MEDA had a massive imbalance in favour of Men (26 respondents constituting 65% of total MEDA respondents) and on the other, non-MEDA has a massive imbalance in favour of women (29 respondents constituting 72.50% of total non-MEDA respondents). This only serves to emphasize the difficulty in balancing genders during trainings.

'Experience in youth work' is a key variable when considering the professional impact of any given training. As SALTO-Youth EuroMed trainings look to have a wide range of participants on their trainings, experience in youth work is normally one feature that can significantly alter the content of an activity. Training activities inevitably will always morph to suit the needs of the group; hence outputs can change depending on the experience of a group. Therefore 'experience in youth work' is frequently used as a comparative tools throughout the eleven hypotheses, and has relevance for all of the four major themes.

V) Type of Organisation (+Region)

	MEDA	%	Non-MEDA	%	Grand Total
A non profit / non governmental organisation %	81 88,04	50,31	80 70,80	49,69	161 78,54
A local or regional public body %	1 1,09	5,26	18 15,93	94,74	19 9,27
A body active at European level in the youth field %	1 1,09	16,67	5 4,42	83,33	6 2,93
A body active at international level in youth field %	6 6,52	60,00	4 3,54	40,00	10 4,88
Other %	3 3,26	33,33	6 5,31	66,67	9 4,39
Total %	92 100,00	44,88	113 100,00	55,12	205 100,00

In what must be considered an expected and positive indicator, the data above shows that the majority of respondents – regardless of region – participated in SALTO-Youth EuroMed training activities on behalf of ‘a non-profit / non-governmental organisation’. In fact when comparing regions, the results are almost identical numerically and both represent % majorities in terms of total responses to the question. The other noteworthy presence is that of local / regional public bodies (19 responses in grand total which represents 9.37% of all responses), with the majority (18) from the non-MEDA region. This is likely due to the well-established principal of match-funding and the subsequent demand for more public actors who could contribute funding to the YiA projects. Furthermore many youth workers from Youth Centres tend to belong to municipalities or other public bodies. Here we should also bring special mention to the vast differences between youth work in the EU and youth work in MEDA countries. These differences are further accentuated by comparing youth work in the Magreb – where many participants are youth workers belonging to relevant ministries and working in youth centres – and the Mashreq – where the majority of participants aren’t professional youth workers, but instead dedicate their free time to it. These results are similar to that of the previous study and mainly serve to emphasise that the main target group of SALTO-Youth EuroMed are those involved in non-profit / non-governmental organisations. With a very heavy preference for NGO representation, this demographic is not used as a comparative tool throughout the study. It’s relevance is more related to the different cultural approaches to youth work and does not have any direct impact on SALTO-Youth EuroMed training activities’ aims and objectives.

VI) Role in Organisation

(+Region) (+Gender)

	MEDA				Total	%	%
	Male	%	Female	%			
Coordinator	11	61,11	7	38,89	18	100,00	38,30
%	16,92		25,00		19,35		
Director	19	86,36	3	13,64	22	100,00	55,00
%	29,23		10,71		23,66		
Project Officer	9	60,00	6	40,00	15	100,00	57,69
%	13,85		21,43		16,13		
Social Worker	1	50,00	1	50,00	2	100,00	66,67
%	1,54		3,57		2,15		
Trainer	7	77,78	2	22,22	9	100,00	34,61
%	10,77		7,14		9,68		
Youth Worker	9	90,00	1	10,00	10	100,00	35,71
%	13,85		3,57		10,75		
Volunteer	9	52,94	8	47,06	17	100,00	51,51
%	13,85		28,57		18,28		
Other	0	0,00	0	0,00	0	0,00	0,00
%	0,00		0,00		0,00		
Total	65	69,89	28	30,12	92	100,00	44,88
%	100,00		100,00		100,00		

	Non MEDA						%
	Male	%	Female	%	Total	%	
Coordinator	10	34,48	19	65,52	29	100,00	61,70
%	27,74		28,36		25,66		
Director	6	33,33	12	66,67	18	100,00	45,00
%	13,04		17,91		15,93		
Project Officer	4	36,36	7	63,63	11	100,00	42,31
%	8,70		10,45		9,73		
Social Worker	1	100,00	0	0,00	1	100,00	33,33
%	2,17		0,00		0,89		
Trainer	9	52,94	8	47,06	17	100,00	65,39
%	19,57		11,94		15,04		
Youth Worker	8	44,44	10	55,56	18	100,00	64,29
%	17,39		14,93		15,93		
Volunteer	7	43,75	9	56,25	16	100,00	48,49
%	15,22		13,43		14,16		
Other	1	33,33	2	66,67	3	100,00	100,00
%	2,17		2,99		2,65		
Total	46	40,71	67	59,29	113	100,00	55,12
%	100,00		100,00		100,00		

	Grand Total
Coordinator	47
%	22,82
Director	40
%	19,42
Project Officer	26
%	12,62
Social Worker	3
%	1,46
Trainer	26
%	12,62
Youth Worker	28
%	13,59
Volunteer	33
%	16,02
Other	3
%	1,46
Total	205
%	100,00

For the purpose of analysis, this study will group the individual roles listed above into the following two descriptive groups:

- Direct Youth Actors: Include ‘Youth Worker’, ‘Social Worker’, & ‘Trainer’
- Vision & Coordination Roles: Include ‘Coordinator’, ‘Project Officer’ & ‘Director’
- Volunteers will always be analysed independently due to the diverse range of tasks and responsibilities they take on. Furthermore they often vary on a case by case basis.

It is worth saying early on that the above groupings are theorised to improve upon a similar measurement of ‘Role in Organisation’ created by the previous SALTO-Youth EuroMed Impact Report of 2003-2007. The old report attempted to group the roles listed above by their “Socio-professional category” and could be either “Senior Executives”, “Executives”, “Employees” or “Student, without professional activity”). These categories were then assigned a score from 1 to 4 based on their “Values on the social ladder” (SALTO-Youth EuroMed, INJEP, 2008). This report feels that such a grouping is no longer reflective of the reality of Euro-Mediterranean youth work and furthermore attempts to impose a hierarchical model of social utility on the complimentary and overlapping roles. Therefore this report’s updated categorisation attempts to remove any such notion of ‘utility hierarchy’ and instead reflect the dynamics of the diverse roles present.

The response data indicates that the two most popular roles in the Euro-Mediterranean region are those involved in decision making; Coordinators (47 respondents [22.82% of all respondents]) and Directors (40 respondents [19.42% of all respondents]). This could be considered an expected result as it represents the importance of project development and partnership networking in training activities and the subsequent demand for decision maker presence. Balancing this are high numbers of volunteers (33 respondents – above 15% of all respondents) which shows the other essential demographic requirement of SALTO-Youth EuroMed training activities – the presence of youth work stakeholders. Also above a 10% response rate are the positions of Project Officer as a Vision and Coordination role but also that of Trainers and Youth Workers (Direct Youth Actors) indicating that there is a healthy balance between the V&C and DYA roles. In fact the only low anomalous result for the Euro-Mediterranean region was that of a low response rate of ‘Social Workers’ (only 3 respondents in total). With the previous study only achieving a response rate of 2% (as opposed to this study which is 1.46%) we acknowledge that this may be due to the role being a very specific profession – one which is not altogether that frequently found in most MEDA countries. From now on, it will therefore be treated as an anomalous result.

When comparing regions, we find that once again the Vision and Coordination roles are the most popular in both, especially amongst the males. Coordinators, Directors, and Project Officers total 39 respondents (60% of all MEDA Male responses) with the Director position the most frequent (19 responses: 29.23% of total MEDA Male respondents). MEDA Male Direct Youth Actors total just under ½ of the Vision & Coordination roles with youth workers and trainers roughly equally distributed. In MEDA, it is essential to acknowledge any of the above roles can be considered voluntary roles as well as paid positions. The amount of volunteers in MEDA both male and female are equal but we must bear in mind the diversity of volunteer roles – and there is probably a similar gender imbalance in volunteer role redistribution similar to that we have seen already. While female respondents remain a minority for almost all roles in MEDA (consistent with age & experience in youth work) there distribution remains interesting. For example, MEDA women are overwhelmingly in Vision and Coordination roles compared to Direct Youth Actor roles: 7 Coordinators (25% of total MEDA females), 3 Directors (10% of total MEDA females) and 6 Project Officers (21.43% of total MEDA females) comprise 16 respondents (57.14% of total MEDA females) against 4 Direct Youth Actor role respondents (14.29% of total MEDA females). It is quite clear that the majority of MEDA respondents all come from Vision and Coordination roles (all make-up above 15% of total MEDA respondents) with only volunteers balancing that trend. The lack of Direct Youth Actor respondents is an unusual result given the known success and quality of training activities like TOTEM and could benefit from future research. Bernard Abrigani suggests that many of the MEDA participants who attend trainings have high levels of education (university level minimum) and feel that this – coupled with the skills gained on trainings – leads them to be more ambitious in their positions of influence. Therefore they are ultimately

drawn more to Vision and Coordination roles.

With regards to the other region – non-MEDA – the results are more encouraging in terms of gender balance. While women clearly dominate the Vision and Coordination roles, it is never by more than 17%, meaning they do not influence the relatively good gender balance in other roles. The most and least frequent roles are identical regardless of gender with the highest being the coordinator role and the least frequent being the before-mentioned anomalous result of social workers with only one respondent. With regards to the distribution between Vision and Coordination roles and Direct Youth Actor roles they are roughly equal for non-MEDA males but not for non-MEDA females. While the non-MEDA males show a healthy even distribution, the non-MEDA females are twice as likely to be in Vision and Coordination roles than Direct Youth Actor roles. Once again we see a preference for decision makers but acknowledge that when it comes to Direct Youth Actor roles, females from both regions have been in the minority. The total respondents of non-MEDA show an even spread of roles related to both Vision and Coordination, and Direct Youth Actor roles with the highest being the coordinator and the lowest being the social worker. While the low result for social worker is likely to be down to its narrow definition and region specific association, the frequency of coordinators is undoubtedly down to their professional enthusiasm for networking and project development – two key features of any SALTO-Youth EuroMed project.

The reason this demographic data will not be used as a comparative tool is that the important features associated with ‘role in organisation’ – here mainly seen as level of professional responsibility – varies significantly depending on the culture and country of origin. It is therefore not a good enough indicator to assess the potential for future action on the part of participants, which is instead better seen through their ‘experience in youth work’. Furthermore, measuring participant’s level of responsibility is directly addressed and quantified in hypothesis 2.

VII) Number of SALTO-Youth EM Activities (+Region)

	MEDA	%	Non-MEDA	%	Grand Total
1-3 activities	49	38,89	77	61,11	126
%	53,26		68,15		61,46
4-7 activities	25	52,08	23	47,92	48
%	27,17		20,35		23,41
8-14 activities	14	60,87	9	39,13	23
%	15,22		7,96		11,23
15+ activities	4	50,00	4	50,00	8
%	4,35		3,54		3,90
Total	92	44,48	113	55,12	205
%	100,00		100,00		100,00

From the data above we can see that a clear majority of respondents (64.46%) had participated in 1-3 SALTO-Youth EuroMed training activities and that as the number of trainings increases, the number of respondents decreases. These results demonstrate that activities always attempt to prioritise new participants and organisations in line with National Agencies’ policy of giving new comers a chance to participate. However the high number of respondents who participated in over 7 activities shows that there is a need for ensuring the return of good reliable participants. However the data does indicate that there are regional differences such as how it appears to be easier to recruit new participants from non-MEDA than MEDA. Having no direct relation to the aims and objectives of the four major themes, this demographic factor will not be used as a comparative tool throughout the study.

Theme 1: Professional competencies and personal development

We will now analyse the response data for the questions related to the hypothesis but be sure to take into consideration that that has already been considered for demographic data interpretation. The first hypothesis is the following:

- SALTO-Youth EuroMed training activities result in a positive socio-professional impact on participants in terms of strengthening professional and practical skills in terms of:
 - Methodology (project methodology, intercultural education)
 - Best practices (leading / managing youth projects, conflict management)
 - Strategies (knowledge of European Procedures and priorities, partner networking)

The two questions that will be analysed to prove or disprove the hypothesis are the following with the results presented beneath:

Question 1:

Did the activities have a positive impact on your professional skill development?
(+Region)

	MEDA	%	Non-MEDA	%	Grand Total
Yes	92	45,32	111	54,68	203
%	100,00		98,23		99,02
No	0	0,00	2	100,00	2
%	0,00		1,77		0,98
Total	92	44,48	113	55,12	205
%	100,00		100,00		100,00

Question 2:

What were the most useful skills you picked up as a result of the activity?
(+Region) (+Experience in Youth Work)

	0 - 3 YEARS					
	MEDA	%	Non-MEDA	%	Total	%
Budget Management	1	50,00	1	50,00	2	100,00
%	3,03		1,56		2,06	9,52
Conflict Management	2	66,67	1	33,33	3	100,00
%	6,06		1,56		3,09	5,88
Intercultural Communication	5	29,41	12	70,59	17	100,00
%	15,15		18,75		17,53	11,49
Intercultural Learning	4	25,00	12	75,00	16	100,00
%	12,12		18,75		16,49	11,68
Knowledge of European Procedures	4	28,57	10	71,43	14	100,00
%	12,12		15,63		14,43	16,87
Leading / Managing Youth Projects	5	50,00	5	50,00	10	100,00
%	15,15		7,81		10,31	10,10
Partnership Development	6	33,33	12	66,67	18	100,00
%	18,18		18,75		18,56	12,08
Project Methodology	6	37,50	10	62,50	16	100,00
%	18,18		15,63		16,49	14,68
Other	0	0,00	1	100,00	1	100,00
%	0,00		1,56		1,03	11,11
Total	33	34,02	64	65,98	97	100,00
%	100,00		100,00		100,00	12,03

	4 - 10 YEARS					
	MEDA	%	Non-MEDA	%	Total	%
Budget Management	4	66,67	2	33,33	6	100,00
%	2,42		1,42		1,96	28,57
Conflict Management	11	68,75	5	31,25	16	100,00
%	6,67		3,55		5,23	31,37
Intercultural Communication	31	50,82	30	49,18	61	100,00
%	18,79		21,28		19,93	41,23
Intercultural Learning	25	52,08	23	47,92	48	100,00
%	15,15		16,31		15,69	35,04
Knowledge of European Procedures	16	50,00	16	50,00	32	100,00
%	9,70		11,35		10,46	38,55
Leading / Managing Youth Projects	26	59,09	18	40,91	44	100,00
%	15,78		12,77		14,38	44,44
Partnership Development	29	50,00	29	50,00	58	100,00
%	17,58		20,57		18,95	38,93
Project Methodology	20	54,05	17	45,95	37	100,00
%	12,12		12,06		12,09	33,94
Other	3	75,00	1	25,00	4	100,00
%	1,82		0,71		1,31	44,44
Total	165	53,92	141	46,08	306	100,00
%	100,00		100,00		100,00	37,97

	10 - 20 YEARS					
	MEDA	%	Non-MEDA	%	Total	%
Budget Management	5	62,50	3	37,50	8	100,00
%	3,50		2,05		2,77	38,09
Conflict Management	13	54,17	11	45,83	24	100,00
%	9,09		7,53		8,30	47,06
Intercultural Communication	26	53,06	23	46,94	49	100,00
%	18,18		15,75		16,96	33,12
Intercultural Learning	23	41,82	32	58,18	55	100,00
%	16,08		21,92		19,03	40,15
Knowledge of European Procedures	12	48,00	13	52,00	25	100,00
%	8,39		0,68		8,65	30,12
Leading / Managing Youth Projects	18	56,25	14	43,75	32	100,00
%	12,59		9,59		11,07	32,32
Partnership Development	25	50,00	25	50,00	50	100,00
%	17,48		17,12		17,30	33,56
Project Methodology	19	45,24	23	54,76	42	100,00
%	13,29		15,75		14,53	38,53
Other	2	50,00	2	50,00	4	100,00
%	1,40		1,37		1,38	44,44
Total	143	49,48	146	50,52	289	100,00
%	100,00		100,00		100,00	35,86

	20 + YEARS						
	MEDA	%	Non-MEDA	%	Total	%	%
Budget Management	3	60,00	2	40,00	5	100,00	23,81
%	5,00		3,70		4,39		
Conflict Management	4	50,00	4	50,00	8	100,00	15,69
%	6,67		7,41		7,02		
Intercultural Communication	12	57,14	9	42,86	21	100,00	14,19
%	20,00		16,67		18,42		
Intercultural Learning	7	38,89	11	61,11	18	100,00	13,14
%	11,67		20,37		15,79		
Knowledge of European Procedures	8	66,67	4	33,33	12	100,00	14,46
%	13,33		7,41		10,53		
Leading / Managing Youth Projects	6	46,15	7	53,85	13	100,00	13,13
%	10,00		12,96		11,40		
Partnership Development	13	56,52	10	43,48	23	100,00	15,43
%	21,67		18,52		20,18		
Project Methodology	7	50,00	7	50,00	14	100,00	12,84
%	11,67		12,96		12,28		
Other	0	0,00	0	0,00	0	0,00	0,00
%	0,00		0,00		0,00		
Total	60	52,63	54	47,37	114	100,00	14,14
%	100,00		100,00		100,00		

	Grand Total
Budget Management	21
%	2,61
Conflict Management	51
%	6,33
Intercultural Communication	148
%	18,36
Intercultural Learning	137
%	16,99
Knowledge of European Procedures	83
%	10,30
Leading / Managing Youth Projects	99
%	12,29
Partnership Development	149
%	18,49
Project Methodology	109
%	13,52
Other	9
%	1,12
Total	806
%	100,00

Question 1 gives an instant first impression as to how participants responded to their training activity and is an excellent place to start given its positive results. All but two people responded “yes” representing a substantial endorsement of SALTO-Youth EuroMed’s training activities to have a positive impact on their professional skill development. Question 2 attempts to break the general endorsement of positive skill development down into more specific skills and to see if regional origin or experience in youth work has any influence on what skills trainees learnt.

Strategic skills rendered mix results with participants highly valuing ‘partner networking’ but never prioritising ‘knowledge of European procedures and priorities’ too highly. As we can see from the infographic, ‘partnership development’ was consistently highlighted as the one of the most useful skills acquired regardless of region or experience in youth work. However while it was always in the top 3 skills most frequently picked-up (always receiving above 15% of respondent groups), it was not always first. Contrary to this relatively high valued skill, ‘knowledge of European procedures and priorities’ was almost never among the most frequent skills acquired. This is likely due to the fact that many respondents found the partnership networking element a lot more practical and accessible than the theoretic and structural strategy of EU priority and procedure knowledge. Federica Demicheli notes that in the past, many participants find energy for the realisation of their local strategies in these international meetings and that the project development stage always helps them to build upon this and allows NGOs to be able to create wider opportunities for youth.

Despite having a combined 21.23% of all skills acquired by participants, best practice skills were not as frequently picked-up by participants as those associated with methodology or strategies. ‘Budget management’ was consistently highlighted as the least frequent skill acquired, regardless of region or experience in youth work, with only 21 (2.61% of total responses) respondents acknowledging it as an acquired skill. ‘Conflict management’ was also amongst the least frequent skills picked-up receiving 51 responses (6.33%). However the final skill associated with best practices – ‘leading / managing youth projects’ – was amongst the most well received skills, but also noteworthy for its regional variation. It received 99 responses (12.29% of total responses) and was consistently prioritised more by the MEDA region than the non-MEDA region (the only exception being the 20+ years’ experience group). Low yielding skills such as ‘budget’ and ‘conflict’ management are easily explained by their more specific and narrow concepts. While almost all SALTO-Youth EuroMed trainings will give time to developing ‘leading / managing youth projects’, ‘budget’ and ‘conflict’ managements are not generic skills which are applicable regardless of theme.

Methodological skills were by far the most frequently acquired during trainings as ‘project methodology’ and ‘intercultural education’ were amongst the most valued skills acquired and offered. With regards to ‘intercultural communication’, we see that it comprises over 15% of all respondents, regardless of participants experience in youth work or region of origin – making it the second most frequently acquired skill for all respondents (148 respondents constituted 18.36% of total responses). Furthermore ‘intercultural learning’ often comprised above 15% but not as frequently as ‘intercultural communication’. While never being ranked low, it was significantly more frequent for some experience groups than others and was crucially favoured by the non-MEDA region – normally accompanying intercultural communication. Regarding its relationship with ‘experience in youth work’, neither the 0-3 and 20+ years’ experience groups of MEDA collectively comprised 15%, yet for non-MEDA – regardless of experience – this skill was consistently comprised of above 15% of total respondents, even being the most frequent skill acquired for the 10-20 years’ experience group. Its grand total was 137 responses representing 16.99% of all responses. ‘Project methodology’ was also highlighted on several occasions and was frequently acquired in both regions for the 0-3 years’ experience group, and by the non-MEDA region for the 10-20 years’ experience group. It was overall the 4th most frequent skill to be acquired totalling 109 responses which made up 13.32% of all responses. Ultimately, the methodological skills acquired were the more indirect and generic of skills offered during training activities. Intercultural education is an inevitable part of any training and project methodology is essential to fostering outcomes and future cooperations. Federica Demicheli supports this by highlighting that many of the specific skills and topics are always linked to themes but with the focus being heavily placed on methodology.

Ultimately we find that despite the many small differences throughout the two regions in terms of acquired skills, what is clear is that both regions – regardless of years’ experience in youth work – consistently identified the methodological skills of project methodology and intercultural education as most frequently picked-up. Furthermore, the plethora of skills acquired, whether frequently or not, has given a strong underlying support for the findings of question 1 and supports hypothesis 1. The training activities have indeed had a positive socio-professional impact on participants in terms of strengthening their professional and practical skills. For many people, these activities can be their first step into the non-formal educational field and allow them to realise the potential for their professional or voluntary youth work. The trainings clearly provided participants an occasion to get in touch with different approaches, working methods and also different kinds of professions. For further details on this see the various SALTO-Youth EuroMed publications on TOTEM I & II, Training of Euro-Mediterranean Multipliers, and Let’s meet the three cultures (<https://www.salto-youth.net/rc/euromed/EMlibrary/emeducpub/>).

The second hypothesis is the following:

- SALTO-Youth EuroMed training activities result in a positive socio-professional impact on participants in terms of contributing towards an improvement in both personal wellbeing and professional orientation.

The two questions that will be analysed to prove or disprove the hypothesis are the following with the results presented beneath:

Question 3:

Did the activities result in your professional development?

(+Region)

	MEDA	%	Non-MEDA	%	Grand Total
Yes	91	45,96	107	54,04	198
%	98,91		64,69		96,59
No	1	14,29	6	85,71	7
%	1,09		5,31		3,41
Total	92		113		205
%	100,00		100,00		100,00

Question 4:

Following a SALTO-Youth EuroMed Training Activity...

(+Region) (+Gender)

	Male	%	MEDA Female	%	Total	%	%
I experienced an increased professional responsibility in my organisation, while maintaining the same position	23	63,89	13	36,11	36	100,00	47,37
%	35,94		46,43		39,13		
I experienced a change in my position / organisation that increased my professional responsibilities	26	72,22	10	27,78	36	100,00	45,57
%	40,63		35,71		39,13		
I founded my own organisation	12	80,00	3	20,00	15	100,00	57,69
%	18,75		10,71		16,30		
I experienced no changes in regard to my professional responsibilities and position in my organisation	3	60,00	2	40,00	5	100,00	20,83
%	4,69		7,14		5,43		
Total	64	69,57	28	30,43	92	100,00	44,88
%	100,00		100,00		100,00		

	Male	%	Non MEDA Female	%	Total	%	%
I experienced an increased professional responsibility in my organisation, while maintaining the same position	25	62,50	15	37,50	40	100,00	52,63
%	54,35		22,39		35,40		
I experienced a change in my position / organisation that increased my professional responsibilities	11	25,58	32	74,42	43	100,00	54,43
%	23,91		47,76		38,05		
I founded my own organisation	6	54,55	5	44,45	11	100,00	42,31
%	13,04		7,46		9,73		
I experienced no changes in regard to my professional responsibilities and position in my organisation	4	21,05	15	78,95	19	100,00	79,17
%	8,70		22,39		16,82		
Total	46	40,71	67	59,29	113	100,00	55,12
%	100,00		100,00		100,00		

	Grand Total
I experienced an increased professional responsibility in my organisation, while maintaining the same position	76
%	37,07
I experienced a change in my position / organisation that increased my professional responsibilities	79
%	38,54
I founded my own organisation	26
%	12,68
I experienced no changes in regard to my professional responsibilities and position in my organisation	24
%	11,71
Total	205
%	100,00

Like with the first hypotheses, respondent data to question 3 gives a significant endorsement to SALTO-Youth EuroMed activities with 96.59% of people saying ‘yes’, the activities resulted in their professional empowerment. Only 7 people out of 205 felt that the training activities did not, showing that regional origin did not play any role in determining peoples responses. Question 4 again allows us to analyse on a more detailed level, what kind of changes were facilitated by training activities, especially in relation to the level of responsibilities respondents were subsequently endorsed with following a training. Therefore the following options were available as responses for question 4:

- 1.** ‘I experienced an increased professional responsibility in my organisation, while maintaining the same position’
- 2.** ‘I experienced a change in my position / organisation that increased my professional responsibilities’
- 3.** ‘I founded my own organisation’
- 4.** ‘I experienced no change in regard to my professional responsibilities and position in my organisation’

Once again this question was designed to improve on the previous design on the SALTO-Youth EuroMed’s 2003-2007 impact report. Respondents were previously only given the option of selecting if they had; ‘changed position / structure’, ‘did not change position / structure’, or ‘founded their own organisation’. The idea of changing the focus to levels of responsibilities is that the formality of changing a formal title or position is not the only way of constituting a positive professional impact. Many participants of trainings often do not change their formal positions but take on the extra responsibility of project creation or partnership maintenance that are almost the inevitable consequences of training activities. What SALTO-Youth EuroMed wants to do is provide a question that gives space for respondents to truly express whether they feel they have taken on more professional responsibilities and hence had a positive professional impact.

The design of the question has indeed improved our ability to analyse participant empowerment and shows that a majority of respondents did increase their levels of professional responsibility following a training course. This is shown by 155 respondents out of 205 (75.61% of all responses) selecting options 1, 2 or 3. Options 1 and 2 were the most frequent responses with option 2 only just slightly more popular (79 respondents making up 38.54% of all responses) than option 1 (76 responses making up 37.07% of all responses). On top of this, 26 people (12.58% of respondents) impressively founded their own organisations – a higher result than option 4 which is considered here to be the healthy minority of responses. Indeed only 11.71% of respondents felt they not increased their professional competencies. This endorses the point made above regarding the design of the question – that many participants of trainings often do not change their formal positions but take on the extra responsibility of project creation or partnership maintenance that are almost the inevitable consequences of training activities. This represents not only the positive socio-professional impact on participants that trainings aim to achieve, but also that the more experience gained, the more youth workers are willing to test themselves from increased skills and self-confidence.

When assessing the impact of regional origin and gender on improving personal wellbeing and professional orientation, we see evidence here that the two are highly interrelated. Unfortunately the findings below indicate that the diffusion of skills and increased responsibilities has yet to significantly balance out gender engagement in both regions – here seen as a desired positive socio-professional impact. This has been most prevalent in the MEDA region but also penetrates the non-MEDA composition. Noteworthy findings that support this include that male MEDA respondents and female non-MEDA respondents were more likely to change job than their regional counterparts. Furthermore female MEDA and male non-MEDA respondents often did not change their position yet did increase their professional responsibilities. What illustrates a gender imbalance most sharply is a comparative analysis of respondents who founded their own organisation. In MEDA, out of 15 respondents who founded their own organisation, 12 of them were male, meaning that only 20% of MEDA youth work organisations founded would be done so by women. In non-MEDA, the results indicate a good gender balance for the founding or organisations, however, given the pre-existing demographic gender imbalance of respondents towards females, this does suggest that males are more likely to found an organisation than

females. We therefore observe that, regardless of region, men are much more likely to found their own organisation than women in the Euro-Mediterranean area. This can be explained by the following:

- For female MEDA participants, youth work is not always a professional choice and even if it is, it is often not their first preference. Maybe they are active at a national level in their NGOs as volunteers or responsible to specific projects so that the training activities allow them to increase their competences in these specific situations. Few women are then ready to move jobs or to search for new work
- For male non-MEDA, it is obvious that most of them are professionals who look for improvements in professional responsibilities mostly within the same NGO
- For male MEDA participants, the training activity has been at the start of a new career or leads to them beginning their own NGO. Many came from a background which had nothing to do with youth work or civil society and are eager to be as involved as possible in a newly discovered passion. The international activities also help to bring more consistency to their national work

For more information on the relationship between gender and the learning path of women, see SALTO-Youth EuroMed's 'Empowering Women' and the 'Supporting Learning' publications.

What we find is that the results clearly indicate a successfully proven hypothesis. Indeed from the data responses of question 3 and 4 we conclude that SALTO-Youth EuroMed training activities do contribute towards an improvement in both personal wellbeing and professional orientation. The overwhelming positivity of question 4 also suggests that the design of the question has improved upon that of the previous study and has set a precedent for positive professional impact to be measured in level of responsibility given by the relevant agents. However the hypothesis is not without reservation. Unfortunately question 4 also identified that to a large extent gender and to a smaller extent, region of origin are both continuing factors in the socio-professional impact of training activities. Despite its priority in EuroMed youth work there is no evidence to suggest here that the extra attention has resulted in any visible or quantifiable improvement. While one might question the ability of training activities to influence what appears to be a culturally rooted issue, greater gender equality is and will remain an objective of Euro-Mediterranean cooperation. Furthermore when women do come on the training, there is all the evidence to suggest that they will have their professional and personal competences augmented, however the recruitment of female participants and subsequent issues raised in the demographics section still persists as a key factor in EuroMed youth work.

The third hypothesis is the following:

3. SALTO-Youth EuroMed training activities result in a positive socio-professional impact on participants in terms of producing competent effective Euro-Mediterranean trainers and multipliers.

The four questions that will be analysed to prove or disprove the hypothesis are the following with the results presented beneath:

Question 12:

Did your experience of TOTEM improve your competences as a trainer in EuroMed Youth work? (+Region)

	MEDA	%	Non-MEDA	%	Grand Total
Yes	20	55,56	16	44,44	36
%	100,00		100,00		100,00
No	0	0,00	0	0,00	0
%	0,00		0,00		0,00
Total	20	55,56	16	44,44	36
%	100,00		100,00		100,00

Question 13:
Since completing TOTEM have you gone on to be a trainer for any EuroMed Youth Training Activities? (+Region) (+Gender)

	MEDA						%
	Male	%	Female	%	Total	%	
Yes	7	53,85	6	46,15	13	100,00	59,09
%	58,33		75,00		65,00		
No	5	71,43	2	28,57	7	100,00	50,00
%	41,67		25,00		35,00		
Total	12	60,00	8	40,00	20	100,00	55,56
%	100,00		100,00		100,00		

	Non MEDA						%
	Male	%	Female	%	Total	%	
Yes	5	55,56	4	44,44	9	100,00	40,91
%	83,33		40,00		56,25		
No	1	14,29	6	85,71	7	100,00	50,00
%	16,67		60,00		43,75		
Total	6	37,50	10	62,50	16	100,00	44,44
%	100,00		100,00		100,00		

	Grand Total
Yes	22
%	61,11
No	14
%	38,89
Total	36
%	100,00

Question 13 I:
If yes, how many? (+Region)

	MEDA	%	Non-MEDA	%	Grand Total
1 training	1	33,33	2	66,67	3
%	5,00		14,29		8,82
2 trainings	6	54,55	5	45,45	11
%	30,00		35,71		32,35
3-5 trainings	8	61,54	5	38,46	13
%	40,00		35,71		38,24
6-9 trainings	4	80,00	1	20,00	5
%	20,00		7,14		14,71
10+ trainings	1	50,00	1	50,00	2
%	5,00		7,14		5,88
Total	20	58,82	14	41,18	34
%	100,00		100,00		100,00

Question 13 II: If no, why not?

Lack of Project Opportunities

No trainings offered in your specialised topic

Not selected as a trainer

Personal reasons

This third hypotheses is designed to deal specifically with those who responded as ex-TOTEM participants. As the specific purpose of TOTEM was “To contribute to the quality improvement of training activities in EuroMed” and “To contribute, to the development of a network of trainers on a Euro-Mediterranean level and to be an active actor in the field of EuroMed Youth Cooperation” (SALTO-Youth Website, 2011), this provides the study with an excellent addition to seeing the training’s impact both personally and professionally. The immediate positive response to question 12 (100% of respondents felt that their experience of TOTEM improved their competencies as a EuroMed trainer) is a great endorsement of the training and suggests that the fundamental philosophy behind TOTEM was achieved. However the responses to question 13 allow us to be a little more critical of the activity’s long term impact on personal and professional impacts. It allows us to answer questions such as which gender did TOTEM empower more and explain why some participants were more empowered than others on the basis of region.

While there are both positive and negative conclusions to be drawn from respondent data, the main finding here is that an improvement in professional competencies does not always translated into a greater long-term professional opportunities for ex-TOTEM participants. This is demonstrated by the fact that only (61.11%) have gone on to be a trainer for EuroMed training activities. While this is a majority, it still means that 11 respondents (38.89%) did not follow up TOTEM by leading a training activity. Reasons for this (as responses to question 13ii) include the berated 2010 launch of the EuroMed Youth IV programme which subsequently meant the majority of opportunities were only available between 2010 and 2013. Furthermore these were the years of significant political upheaval associated with the Arab Spring and meant that civil society was one of many volatile sectors that did not guarantee fundamental securities.

However, it is still possible to identify several regional and gender orientated differences amongst the data. The two major findings are that women were more empowered by TOTEM than men in the MEDA region and that men were more empowered by TOTEM than women in the non-MEDA region. In MEDA, the data was far from inconclusive and only just yielded a positive result; that more ex-participants than not went on to do trainings. However, contrary to previous trends, it was the high frequency of females going on to lead projects that allowed for a positive result and saw 65% of MEDA participants engage in leading future trainings. Ex-male participants were far less convincing and were almost equally not leading future projects as much as they were. Contradictory to MEDA (and again previous gender balance tendencies) it is the non-MEDA males who had a strong healthy majority for future engagement, as opposed to women who were more likely not to go on to do trainings. This ultimately resulted in a strangely even total for non-MEDA (Yes: 9 respondents [56.25% of all non-MEDA respondents], No: 7 respondents [43.75% of all non-MEDA respondents]). One reason for this is given by Bernard Abrignani who suggests that – as MEDA women face a much tougher time in the initial application process – the ones who are selected tend to be very skilled, knowledgeable and prepared to build upon the training experience.

We also learn that, from question 13i, those who did go on to do trainings tended to do so on several occasions. 24 out of 34 (70%) led more than one training after completing TOTEM with the two most frequent number of trainings facilitated; ‘2 trainings’ (11 respondents); and ‘3-5 trainings’ (13 respondents). Most other results were sporadic except for the noticeable result that 4 respondents of MEDA (20%) had done 6-9 trainings. From this we can conclude that there appears to be a solid reliable core of trainers spread out in the Euro-Mediterranean region who have good access to opportunities and are endowed with the relevant competences.

We conclude that our hypothesis has indeed been successfully proved. A satisfactory number of

ex-TOTEM participants went on to lead trainings indicating that there is a solid pool of competent and effective EuroMed trainers. While a substantial number did not do trainings it is again worth mentioning the unfortunate situation of the EuroMed Youth Programme IV which had a delayed launch and did not start until 2010. This had followed on from a delayed EuroMed Youth III which meant that for long periods of time, there was no consistency to the programmes which were being used for EuroMed youth work (a state of flux between EuroMed Youth III, YiA, and EuroMed Youth IV was not useful for opportunity dissemination), and that when a consistency was finally established in around 2010, geopolitical events such as the Arab Spring saw the delayed starts to programmes such as EVS accreditation. This severely limited the number of opportunities for MEDA participants of TOTEM to lead trainings in essentially the environment they were trained to work.

Theme 2: Professional and personal empowerment within EuroMed Cooperation

The fourth hypothesis is the following:

- SALTO-Youth EuroMed training activities facilitate the empowerment of participants towards becoming more active citizens through a focus on providing new structures for ideas, dialogue, orientation, strategy development, and working methods.

The two questions that will be analysed to prove or disprove the hypothesis are the following with the results presented beneath:

Question 5:

What new inputs did your SALTO-Youth EuroMed training activity allow you to bring to your organisations?

(+Region) (+Experience in Youth Work)

	MEDA	%	Non-MEDA	%	Total	%	%
Motivation within your team for youth work	6	31,58	13	68,42	19	100,00	15,83
%	28,57		27,66		27,94		
New ideas	7	33,33	14	66,67	21	100,00	15,56
%	33,33		29,79		30,88		
New strategies and / or orientations and / or projects	5	29,41	12	70,59	17	100,00	12,23
%	23,81		25,53		25,00		
New working methodologies	2	22,22	7	77,78	9	100,00	9,38
%	9,52		14,89		13,24		
Other	1	50,00	1	50,00	2	100,00	12,50
%	4,76		2,13		2,94		
Total	21	30,88	47	69,12	68	100,00	
%	100,00		100,00		100,00		

Question 5 I: **Please give an example of the above**

What we find with question 5 is that all inputs appear to be well received. Indeed the high number of responses (506 for 205 respondents) suggests that most people felt that they had gained more than one input. This serves to illustrate how interrelated these inputs are and that training courses manage to successfully incorporate them in a holistic approach to maximise participant outputs. We see this by the frequency of inputs selected by respondents: The most frequent response was ‘new strategies’ which is not surprising given its positive identification in hypothesis 1. In this context we take it to mean the transfer of knowledge and expertise that SALTO-Youth EuroMed is able to pass onto participants. The second most frequently acquired input was ‘new ideas’ which links in heavily with ‘new strategies’. Both ‘new working methodologies’ and ‘motivation within your team’ were also frequently selected with both achieving just over 15% of the total distribution. When considering the data, while there are some small regional differences, experience in youth work appears not to have impacted too much on the data, suggesting it was not a key factor in what inputs were acquired. Many of these inputs will have been acquired due to the resources made available in SALTO-Youth EuroMed training activities. For example, the presence of national agencies will have been a big help for participants who wish to orientate themselves towards national and European priorities, thus leading to ‘new ideas’ and ‘new strategies’. The two random examples from each region below serve to illustrate inputs gained from participants and ultimately prove hypothesis 4 to be true:

Anonymous female MEDA respondent who has been in youth work for 10-20 years:

"These activities are an opportunity to change environment, it's relaxing and nice and therefore allow the participants to go back with new horizons, happy and calm.

Furthermore meeting new people allows me to get to know other cultures, other problems and ways of dealing with those problems. It's very important to be opened for new ways of handling multiculturalism and learning from each other."

Anonymous male MEDA respondent who was part of a graphic facilitation team for a SALTO-Youth Project and had been involved in youth work for 10-20 years:

"After my experience with the graphic facilitation team, I recognized that pictures, especially drawing has a huge effect on people. It does not attract only kids! So, it becomes one of my new methods on training "

Anonymous male non-MEDA respondent who has been in youth work for 20+ years:

"The fact of working facing different settings of cultural values, a different perception of what participation, leadership, culture, democracy, human rights mean, gave me motivation to challenge myself and my organisation, made me more curious towards the other and pushed me to experiment in and out of my organisation new tools for meeting the other"

Anonymous female non-MEDA TOTEM respondent who has been in youth work for 0-3 years:

"Meeting with other trainers can be an inspiring experience. It was out of the first TOTEM II residential activity that the idea of combining human rights, storytelling and intercultural learning in a single training came out and therefore the long-term project "Can ya Makan: Human Rights" was born."

The first anonymous quote shows that the training has been both a personal and professional empowerment. Personally she has emphasised the advantages of a non-formal atmosphere and the interculturality of the group which she then says has allowed a professional exchange of best practices, as well as new working methodologies related to multiculturalism. The second quote is quite unique as it involves somebody who was involved in both the organisational team, but also a trainee. For them it is precisely this combination of working on a professional level which led to new ideas regarding working methodologies. The third quote truly emphasised the personal empowerment he had felt through experiencing the multicultural element of a training and how it had motivated him to challenge both himself and his organisation. Again we see here the combination of personal and professional experiences leading to self-empowerment and more active citizenship – here demonstrated through an increase of motivation. The final quote is from a TOTEM participant who acknowledges the “inspiring” group dynamics as the catalyser for

new ideas, new methodologies and ultimately a new type of orientation. The subsequent long term project she details is evidence of how new ideas really are brought to life through the framework of European funding.

All four quotes can be considered as further evidence to say that in some way, SALTO-Youth training activities have empowered trainees both personally and professionally through various inputs. What is also noticeable is that even though the questions allude to a more professional dimension, many participants still acknowledge and emphasise the interdependent relationship between personal and professional development in training activities. We therefore believe that our fourth hypothesis has successfully been proved and that SALTO-Youth EuroMed training activities do indeed facilitate the empowerment of participants towards becoming more active citizens through a focus on providing new structures for ideas, dialogue, orientation, strategy development and working methods.

The fifth hypothesis is the following:

- SALTO-Youth EuroMed training activities facilitate the empowerment of participants towards becoming more active citizens through a focus on strengthening existing youth networks and the facilitation of creating new networks that provide a platform for youth communication, exchange and engagement.

The six questions that will be analysed to prove or disprove the hypothesis are the following with the results presented beneath:

Question 6:

Since your SALTO-Youth EuroMed training activity, has the network of your organisation been expanding in terms of:

(+Region)

	MEDA	%	Non-MEDA	%	Grand Total
New civil partner(s)	20	55,56	16	44,44	36
%	8,33		6,23		7,24
New EECA partner(s)	16	39,02	25	60,96	41
%	6,67		9,73		8,25
New European partner(s)	73	47,40	81	52,60	154
%	30,42		31,52		30,99
New institutional partner(s)	20	39,22	31	60,78	51
%	8,33		12,06		10,26
New local partner(s)	46	60,53	30	39,47	76
%	19,17		11,67		15,29
New MEDA partner(s)	62	48,82	65	51,18	127
%	25,83		25,29		25,55
Other	3	25,00	9	75,00	12
%	1,25		3,50		2,41
Total	240	48,29	257	51,71	497
%	100,00		100,00		100,00

Question 7:

Did you stay in touch with any other participants from your activity, and if so, for what reason(s)? (+Region)

	MEDA %	Non-MEDA %	Grand Total
Information request(s) %	31 13,08	33 12,09	64 12,55
Networking %	71 29,96	85 31,14	156 30,59
Project Development %	68 28,69	75 27,47	143 28,04
Social & Personal reasons %	64 27,00	76 27,84	140 27,45
Did not continue correspondance %	2 0,84	2 0,73	4 0,78
Other %	1 0,42	2 0,73	3 0,59
Total %	237 100,00	273 100,00	510 100,00

Question 14:

Since completing TOTEM, how have you increased your professional network? (+Region)

	MEDA %	Non-MEDA %	Grand Total
New civil network(s) %	9 14,06	3 7,32	12 11,43
New EECA network(s) %	5 7,81	2 4,88	7 6,67
New European network(s) %	12 18,75	12 29,27	24 22,86
New institutional network(s) %	12 18,75	5 12,20	17 16,19
New local network(s) %	12 18,75	6 14,63	18 17,14
New MEDA network(s) %	14 21,88	10 24,39	24 22,86
Other %	0 0,00	3 7,32	3 2,86
Total %	64 100,00	41 100,00	105 100,00

Question 14 I:
**Are you involved with your National Agency / EuroMed Youth Unit
as a national multiplier? (+Region) (+Gender)**

	MEDA						%
	Male	%	Female	%	Total	%	
Yes	6	54,55	5	45,45	11	100,00	61,11
%	46,15		71,43		55,00		
No	7	77,78	2	22,22	9	100,00	50,00
%	53,85		28,57		45,00		
Total	13	65,00	7	35,00	20	100,00	55,56
%	100,00		100,00		100,00		

	Non MEDA						%
	Male	%	Female	%	Total	%	
Yes	5	71,43	2	28,57	7	100,00	38,89
%	83,33		20,00		43,75		
No	1	11,11	8	88,89	9	100,00	50,00
%	16,67		80,00		56,25		
Total	6	37,50	10	62,50	16	100,00	44,44
%	100,00		100,00		100,00		

	Grand Total
Yes	18
%	50,00
No	18
%	50,00
Total	36
%	100,00

Question 14 II:
If yes, please explain your role

Question 14 III:
If no, please detail why

Responses to question 6 are positive results which confirm that partners have been expanding their networks in line with our fifth hypothesis. Predictably the top two results were the most frequently selected by a substantial amount due to their obvious relevance to the Euro-Mediterranean area. The most frequent was 'New European partners' with 154 people (30.99% of total respondents) with the second most frequent being 'MEDA partners' with 127 people (25.55% of total respondents). 'New civil partners' was the least frequently selected option indicating that they were the least represented at SALTO-Youth EuroMed trainings. In general regional origin had little impact on the two most popular 'partners' and only became a factor when the partner was region specific or sometimes more related to a particular theme. This also suggests that there is a certain specificity to the other 'partner' options. This would be a logical conclusion to draw as EECA partners would only be present on 'three region' projects in cooperation with SALTO-Youth EECA (happening a maximum of three times a year), institutional partners are more frequently involved in projects due to the presence of Programme Countries National Agencies, and local partners are more frequent in MEDA trainings due to the prominence of study visits and SALTO-Youth EuroMed's large MEDA NGO network.

Following almost exactly the same pattern as question 6, question 14 put the same question to TOTEM participants, and ultimately serves to strengthen previous findings. The top two were once again 'new European networks' and 'new MEDA networks' and are seen to be representative of the high presence of Euro-Mediterranean stakeholders. We again see a certain popularity for the institutional partners and local partners but acknowledge that it is an expected result to see EECA partners relatively scarce. Further to the point made about the scarcity of 'three region' projects, it is also important to note that doing projects amongst three regions requires a specific set of competences that not all NGOs have – especially those in the EECA who main regional partner in dealing with youth work tends to be the EU – and has little scope for the inclusion of MEDA partners.

Considering networking on a more personal level, question 7 acknowledges the principal reasons for participants staying in touch after a training activity, and analyses regional differences. The findings represent a significant endorsement for professional mobility and indicate that while there are some differences in prioritisation of communications, networks continue to be valued and nurtured by all involved in youth work. Strongly supporting hypothesis 5, 'networking' was the most frequently selected option, and received 156 responses (30.59% of total respondents). The second most frequently selected reason was 'project development' with 143 responses making up 28.04% of all respondents. 'Social and personal reasons' were also very popular with a 27.45% share of responses. However, what undoubtedly endorses hypothesis 5, is that only 4 out of 205 respondents claimed that they 'did not continue correspondence' demonstrating the continuing relevance of networks. In general, all the results were distributed rather evenly between the two regions showing that regional origin played little part in impacting upon whether participants continued communication with participants from their activities. However, there is a difference in priorities with MEDA respondents feeling that 'project development' is a more important reason to stay in touch with participants than 'social and personal reasons', whereas non-MEDA feels the opposite. One reason for this is that, as MEDA struggle more with mobility, the opportunity to develop projects and network is a major solution that addresses this issue in youth work. For example, in some countries like Palestine, mobility is severely limited by political factors, and projects such as Euro-Mediterranean cooperation can provide an excellent opportunity for young people to network across borders.

Moving the focus back to TOTEM, the question of whether ex-TOTEM participants are involved with their national agency / EuroMed Youth Unit is one of extreme importance, especially as all ex-trainees were receiving training so that it was hoped this would become a standard component of their professional identity as a EuroMed trainer. Unfortunately the results do not show this to be the 100% case. Only 50% of the total TOTEM respondents went on to become involved with their NA/EMYU as a multiplier. Male MEDA respondents were almost evenly spread between 'yes' and 'no' with a slight majority for no – contrary to the normal trends of male MEDA domination of higher positions. However it does follow on from the unexpected result of question 13 which saw a greater percentage of MEDA females go on to train than MEDA males. Once again, the female MEDA participants appear to have a very healthy involvement with their EMYU. In the other regions, non-MEDA male respondents were a lot more involved than their MEDA

counterparts – 83% of them going on to be involved as a national multiplier and only 1 not doing so. A very unhealthy majority of non-MEDA females responded no (80% of all respondents) as opposed to their MEDA counterparts who were much more involved than the men. Due to the high number of female no respondents, the total shows that more non-MEDA respondents did not get involved with their NAs/EMYUs following TOTEM than did.

Following on from question 14 and 14i, the two randomly taken text examples (one for each region) from the response database for questions 14ii) and 14iii) serve to better illustrate the difficulties facing expanding youth networks and individuals wishing to become active multipliers.

Question 14 II:

If yes, please explain your role

Anonymous female MEDA respondent who has been in youth work for 4-10 years:

“I am supporting the EUROMED YOUTH UNIT in Lebanon which has been facing problems due to the continuous changes of the Coordinator and some political issues. My organization has recently sent 2 volunteers to follow up on all the unit activities, in the meantime I am communicating with the General Director of the Ministry as consultant for the Unit”

Anonymous male non-MEDA respondent who has been in youth work for 4-10 years:

“Actually I am involved as a trainer to pool of trainers of Turkish National Agency.”

Question 14 III:

If no, please detail why

Anonymous male MEDA respondent who has been in youth work for 4-10 years:

“I've good contact with people that are working in the EuroMed Unit but because of bureaucracy in the Ministry they're not allowed to run trainings and invite people to participate... Unfortunately!”

Anonymous female non-MEDA respondent who has been in youth work for 10-20 years:

“Hard to say, EuroMed cooperation is not a priority in my country, we don't have many activities dedicated to this cooperation. Also the distance for me between my residence place (Rybnik - south of Poland) and National Agency is an obstacle to stay in close cooperation with NA (based in Warsaw). Moreover since I became a member of the board of my organization (one of the biggest that kind of NGO in Poland) I commit myself to its activities.”

What is astonishing about almost all of the quotes is that, to some extent, they take on a political dimension. The first response details that while she is supporting her EMYU through consultancy and resource support, the unit itself is suffering a high turnover of coordinators as well as some unspecified political issues. What is interesting is that it also acknowledges that involvement with the EMYU to some extent has very little to do with personal or professional competencies, especially in regions or countries which are experiencing political turmoil. Here we must acknowledge that the MEDA region has experienced an unprecedented level of political challenges in the years this report covers and concede that no matter how well their professional competencies have been developed, there is very little you can do as a civil society actor to change policy on your own. The second response simply notes that his involvement is in the national pool of trainers – here considered to be what SALTO-Youth EuroMed wished to be the minimum consequence of TOTEM training. The issue of internal political situation negatively impacting upon involvement as multipliers is further supported by the first response to question 14iii where the anonymous male respondent commented that his contact with the EMYU was excellent but their ministry was preventing them from hosting trainings and organising events. Again, further evidence that while professional competences and communications may be present, the political dimension can and does heavily impact on youth workers' capacity to act. The final response demonstrates a more complex issue for participants wishing to be more involved with their national agency, suggesting that geographical location and work demand can hamper one's ability to be involved. Furthermore he says that the national agencies priorities do not often extend to Euro-Mediterranean work so there is limited scope for involvement. The major point to take from the above quotes is that creating and strengthening networks is not always due to personal and professional competencies and can be largely influenced by the political

situation of a country or region. However, while it was only one quote that suggested geographical location could be an issue regarding cooperation with national agencies or EuroMed Youth Units, it does bear future investigation and could – with some development – be included as a demographic factor worth comparing with other factors. Ultimately we will acknowledge the data from questions 6, 7, 14, 14i, 14ii and 14iii to have supported the fifth hypothesis that SALTO-Youth EuroMed training activities facilitate the strengthening of existing youth networks and facilitate the creation of new ones. However we do also acknowledge that increasing personal and professional capacities can only have a limited effect in the face of internal political difficulties and that it is very much down to political orientation of various agencies to what extent ex-TOTEM participants can be involved with their national agency or EuroMed Youth Unit.

The sixth hypothesis is the following:

6. SALTO-Youth EuroMed training activities facilitate the empowerment of participants towards becoming more active citizens through a focus on the dissemination and distribution of useful resources and tools

The three questions that will be analysed to prove or disprove the hypothesis are the following with the results presented beneath:

Question 8:

Did you find SALTO-Youth EuroMed's educational tools useful? If so, which ones? (+Region)

	MEDA %	Non-MEDA %	Grand Total
Educational Reports	42 47,19	47 52,81	89
%	28,77	27,33	27,99
Magazines	28 51,85	26 48,15	54
%	19,18	15,12	16,98
Tool box	70 46,98	79 53,02	149
%	47,95	45,93	46,86
None of the before mentioned	6 23,08	20 76,92	26
%	4,11	11,63	8,18
Total	146 45,91	172 54,09	318
%	100,00	100,00	100,00

Question 9:

Do you subscribe to the EuroMed info newsletter?

(+Region)

	MEDA %	Non-MEDA %	Grand Total
Yes	74 48,37	79 51,63	153
%	80,43	69,91	74,63
No	18 34,62	34 65,38	52
%	19,57	30,09	25,37
Total	92 44,88	113 55,12	205
%	100,00	100,00	100,00

Question 9 I:
If yes, are the contents useful in the framework of your activity?

(+Region) (+Experience in Youth Work)

	0 - 3 YEARS						
	MEDA	%	Non-MEDA	%	Total	%	%
Almost always %	2 22,22	40,00	3 16,67	60,00	5 18,52	100,00	10,64
Frequently %	1 11,11	16,67	5 27,78	83,33	6 22,22	100,00	8,57
Occasionally %	3 33,33	37,50	5 27,78	62,50	8 29,63	100,00	13,56
Almost never %	3 33,33	37,50	5 27,78	62,50	8 29,63	100,00	27,59
Total %	9 100,00	33,33	18 100,00	66,67	27 100,00	100,00	13,17

	4 - 10 YEARS						
	MEDA	%	Non-MEDA	%	Total	%	%
Almost always %	14 35,00	73,68	5 12,50	26,32	19 23,75	100,00	40,43
Frequently %	14 35,00	48,28	15 37,50	51,72	29 36,25	100,00	41,43
Occasionally %	9 22,50	37,50	15 37,50	62,50	24 30,00	100,00	40,68
Almost never %	3 7,50	37,50	5 12,50	62,50	8 10,00	100,00	27,59
Total %	40 100,00	50,00	40 100,00	50,00	80 100,00	100,00	39,02

	10 - 20 YEARS						
	MEDA	%	Non-MEDA	%	Total	%	%
Almost always %	11 37,93	64,71	6 15,38	35,29	17 25,00	100,00	36,17
Frequently %	9 31,03	39,13	14 35,90	60,87	23 33,82	100,00	32,86
Occasionally %	4 13,79	21,05	15 38,46	78,95	19 27,94	100,00	32,20
Almost never %	5 17,24	55,56	4 10,26	44,44	9 13,24	100,00	31,03
Total %	29 100,00	42,65	39 100,00	57,35	68 100,00	100,00	33,17

As well as being the resource centre for all EuroMed youth work cooperation, SALTO-Youth EuroMed is also responsible for the dissemination and distribution of 'best practices' publications and researches. These questions go some way to successfully proving hypothesis 6 and demonstrate the continuing relevance of tools for a Euro-Mediterranean audience. From the response of question 8 we can see clearly that the most popular educational tool was the 'tool box' with 149 respondents making up almost 50% (46.86%) of total responses. This is most likely due to its relevance and applicability in non-formal learning youth work. Educational reports (89 respondents [27.99% of total responses]) and magazines (54 respondents [16.98% of total responses]) are well used but not as popular as the toolbox which could be due to their more informative / theoretical nature as opposed to the very practical toolbox. It would seem that the educational tools are not region specific – a positive result seeing as the SALTO-Youth EuroMed publications are aimed at a Euro-Mediterranean audience – however, there is a big difference between regions when it comes to respondents selecting 'none of the before mentioned'. Non-MEDA respondents who selected 'none of the before mentioned' did so twice as frequently as MEDA respondents. The difference in appreciation can also be considered from the before mentioned difference between professional youth workers and those who do it in their spare time. For professional youth workers – as tends to be the case in programme countries – there is a much easier access to educational tools whereas for many volunteer NGO workers in MEDA, SALTO-Youth EuroMed tools are the only access they have to material for professional youth workers. Therefore, we find that all SALTO-Youth EuroMed's tools are more useful than not, and those such as the toolbox are still widely appreciated and in use. Again the clear existence of a EuroMed civil society is demonstrated by the clear demand (indicated here to be successfully met) for tools and resources to improve EuroMed youth work.

With regards to question 9, a high number of respondents indicated that they do subscribe to the EuroMed info newsletter but many also do not. In MEDA there appears to be a higher engagement than normal with the newsletter (Yes: 74 people [80.43% of all MEDA respondents]) whereas in non-MEDA a lot more people do not subscribe to the newsletter (No: 34 people [30.09% of all non-MEDA respondents]). As mentioned before, it is worth noticing that in non-MEDA youth workers often have access to a much larger variety of material and are less dependent on its content. However in non-MEDA, the concept of NFL is still relatively new and unheard of, hence it is highly relevant to their work and practices.

In general the newsletter is subscribed to but could be aiming to engage more, particularly with regards to a non-MEDA audience. Question 10 yields mixed results with a healthy majority feeling that the newsletter had been 'frequently' useful, yet the second most frequently selected option being 'occasionally' as opposed to 'almost always' – however they are almost equally selected. The two most frequent options selected were 'frequently' and 'occasionally' demonstrating the activities ability to straddle the middle ground. 'Almost never' was positively the response selected last by all groups whereas:

- For the 0-3 years' experience group, the newsletter was 'not very useful'
- For the 4-10 years' experience group, it was 'frequently' or 'occasionally' useful
- For 10-20 years' experience group, it was 'frequently' useful

We can use this data to conclude that the more experienced respondents were, the more they found the newsletter useful and more appropriate to their needs. When concluding whether hypothesis 6 has been successfully proved or not, we must consider that most of the data received was very favourable and positive regarding SALTO-Youth EuroMed's distribution. While it is often impossible to please everyone, there does seem to be a satisfactory range of educational tools that allow youth workers to be able to engage in what they feel is necessary. The small minority of 26 respondents who selected 'none of the before mentioned' (8.18% of total respondents) to question 8 suggests that, in general, we can conclude the hypothesis has indeed been successfully proven. SALTO-Youth EuroMed training activities indeed facilitate the empowerment of participants towards becoming more active citizens through a focus on the dissemination and distribution of useful resources and tools.

Theme 3: Regional cooperation and subsequent impact

The seventh hypothesis is the following:

7. Through increasing awareness of existing frameworks and structures, SALTO-Youth EuroMed training activities have encouraged organisations to implement a wider range of activities

The four questions that will be analysed to prove or disprove the hypothesis are the following with the results presented beneath:

Question 10:

Did you submit your project application in the framework of Youth in Action / EuroMed Youth IV?

(+Region) (+Gender) (+Experience in Youth Work)

			Yes	%	%	No	%	%	Total	%
MEDA	Male	0-3 years	1	4,00	14,29	6	15,38	85,71	7	10,94
		4-10 years	8	32,00	30,77	18	46,15	69,23	26	40,63
		10-20 years	10	40,00	55,56	8	20,51	44,44	18	28,13
		20+ years	6	24,00	46,15	7	17,95	53,85	13	20,31
		Total	25	100,00	39,06	39	100,00	60,94	64	100,00
				67,57			70,91			69,57
	Female	0-3 years	2	16,67	100,00	0	0,00	0,00	2	7,14
		4-10 years	7	58,33	50,00	7	43,75	50,00	14	50,00
		10-20 years	3	25,00	27,27	8	50,00	72,73	11	39,29
		20+ years	0	0,00	0,00	1	6,25	100,00	1	3,57
		Total	12	100,00	42,86	16	100,00	57,14	28	100,00
				32,43			29,09			30,43
	Total	0-3 years	3	8,11	33,33	6	10,91	66,67	9	9,78
		4-10 years	15	40,54	37,50	25	45,45	62,50	40	43,48
		10-20 years	13	35,14	44,83	16	29,09	55,17	29	31,52
20+ years		6	16,22	42,86	8	14,55	57,14	14	15,22	
Total		37	100,00	40,22	55	100,00	59,78	92	100,00	
Non MEDA	Male	0-3 years	4	12,90	57,14	3	20,00	42,86	7	15,22
		4-10 years	8	25,81	72,73	3	20,00	27,27	11	23,91
		10-20 years	11	35,48	61,11	7	46,67	38,89	18	39,13
		20+ years	8	25,81	80,00	2	13,33	20,00	10	21,74
		Total	31	100,00	67,39	15	100,00	32,61	46	100,00
				41,33			39,47			40,71
	Female	0-3 years	6	13,64	54,55	5	21,74	45,45	11	16,42
		4-10 years	17	38,64	58,62	12	52,17	41,38	29	43,28
		10-20 years	17	38,64	80,95	4	17,39	19,05	21	31,34
		20+ years	4	9,09	66,67	2	8,70	33,33	6	8,96
		Total	44	100,00	65,67	23	100,00	34,33	67	100,00
				58,67			60,53			59,29
	Total	0-3 years	10	13,33	55,56	8	21,05	44,44	18	15,93
		4-10 years	25	33,33	62,50	15	39,47	37,50	40	35,40
		10-20 years	28	37,33	71,79	11	28,95	28,21	39	34,51
20+ years		12	16,00	75,00	4	10,53	25,00	16	14,16	
Total		75	100,00	66,37	38	100,00	33,63	113	100,00	
Grand Total:			112	100,00	54,63	93	100,00	45,37	205	100,00

Question 10a:

Were your projects accepted?

(+Region) (+Gender) (+Experience in Youth Work)

			Yes	%	%	No	%	%	Total	%
MEDA	Male	0-3 years	1	4,76	100,00	0	0,00	0,00	1	4,00
		4-10 years	7	33,33	87,50	1	25,00	12,50	8	32,00
		10-20 years	7	33,33	70,00	3	75,00	30,00	10	40,00
		20+ years	6	28,57	100,00	0	0,00	0,00	6	24,00
		Total	21	100,00	84,00	4	100,00	16,00	25	100,00
				67,74			66,67		67,57	
	Female	0-3 years	2	20,00	100,00	0	0,00	0,00	2	16,67
		4-10 years	5	50,00	71,43	2	100,00	28,57	7	58,33
		10-20 years	3	30,00	100,00	0	0,00	0,00	3	25,00
		20+ years	0	0,00	0,00	0	0,00	0,00	0	0,00
		Total	10	100,00	83,33	2	100,00	16,67	12	100,00
				32,26			33,33		32,43	
	Total	0-3 years	3	9,68	100,00	0	0,00	0,00	3	8,11
		4-10 years	12	38,71	80,00	3	50,00	20,00	15	40,54
		10-20 years	10	32,26	76,92	3	50,00	23,08	13	35,14
20+ years		6	19,35	100,00	0	0,00	0,00	6	16,22	
Total		31	100,00	83,78	6	100,00	16,22	37	100,00	
Non MEDA	Male	0-3 years	3	12,00	75,00	1	16,67	25,00	4	12,90
		4-10 years	5	20,00	62,50	3	50,00	37,50	8	25,81
		10-20 years	9	36,00	81,82	2	33,33	18,18	11	35,48
		20+ years	8	32,00	100,00	0	0,00	0,00	8	25,81
		Total	25	100,00	80,65	6	100,00	19,35	31	100,00
				38,46			60,00		41,33	
	Female	0-3 years	4	10,00	66,67	2	50,00	33,33	6	13,64
		4-10 years	16	40,00	94,12	1	25,00	5,88	17	38,64
		10-20 years	16	40,00	94,12	1	25,00	5,88	17	38,64
		20+ years	4	10,00	0,00	0	0,00	0,00	4	9,09
		Total	40	100,00	90,91	4	100,00	9,09	44	100,00
				61,54			40,00		58,67	
	Total	0-3 years	7	10,77	70,00	3	30,00	30,00	10	13,33
		4-10 years	21	32,31	84,00	4	40,00	16,00	25	33,33
		10-20 years	25	38,46	89,29	3	30,00	10,71	28	37,33
20+ years		12	18,46	100,00	0	0,00	0,00	12	16,00	
Total		65	100,00	86,67	10	100,00	13,33	75	100,00	
Grand Total:				100,00			100,00		100,00	

Question 10b:
If your project was accepted what kind of project was it?
(+Region)

	MEDA %	Non-MEDA %	Grand Total
Youth Exchanges (Action 1.1 / 3.1) / Euro-Med Youth Exchanges (Action 1) %	15 32,61	34 30,63	49 50,52
Youth Initiatives (Action 1.2) %		9 8,11	9 9,28
Youth Democracy Projects (Action 1.3) %		3 2,70	3 3,09
European Voluntary Service (Action 2) / Euro-Med Youth Voluntary Service (Action 2) %	10 21,74	26 23,42	36 37,11
Training and Networking Project (Action 4.3 / 3.1) / Euro-Med Youth Training and Networking (Action 3) %	21 45,65	51 45,95	72 74,23
Youth and Policy Maker Meetings (Action 5.1) %		6 5,41	6 6,19
Total %	46 100,00	111 100,00	97 100,00

Question 10c:
Please describe a project you implemented (Text Example)

Responses to Question 10 are far from decisive and while no clear conclusions can be drawn there are several factors to be analysed. The result distribution of the 205 participants who responded to question 10) is 54.63% 'yes' (112 participants) to 45.37% 'no' (93 participants). Those who submitted projects seemed to be influenced minimally by gender but strongly by region of origin (and subsequently the relevant funding framework). However we also see that the more experienced a youth worker was, the more likely they were to submit a project; the 4-10 (MEDA) and 10-20 years' (non-MEDA) experience groups were the respondents who submitted a project most whereas the 0-3 years' experience group were equally (region wise) the least likely to submit a project. Therefore we can say that gender influenced participants submitting a project minimally, region of origin substantially, but experience in youth work was the most influential factor. However, the regional differences did allow the Euro-Mediterranean region as a whole to look more balanced than the individual regions themselves – for example more people in MEDA did not submit a project application than anywhere else and their 55 'no' responses constituted 59% of total no responses showing more than a 15% swing towards MEDA than the original demographic regional distribution. The MEDA total for 'yes' is low with 37 respondents (40.22% of all MEDA responses) compared to the 55 respondents (59.78% of all MEDA responses) of 'no' suggesting that many MEDA participants of trainings did not submit applications. Contrary to this non-MEDA respondents submitted many more applications (over double that of MEDA). As previously mentioned regional differences (most noticeably low MEDA submissions) are likely due to the socio-political reasons of many of the regions countries and also to do with the difficulties with the EuroMed Youth IV funding programme.

Question 10a) offers a more concrete endorsement of hypothesis 7; out of the 112 people who did submit a project, 96 (85.71%) of them were successful. Furthermore, there is also evidence to suggest that 'experience in youth work' is once again an influential factor. Contrary to the results of question 10, this is a very positive result that demonstrates that the majority of organisations and participants have the potential to follow up on a SALTO-Youth EuroMed training activity with project development and implementation. It also suggests that awareness of frameworks and structures for finance were successfully diffused to participants. However it is clear that regional origin plays a big part in whether projects are accepted – twice as many non-MEDA projects (65 to 31) were accepted. In the projects that weren't accepted, there was no indication that regional origin made a big difference due to the low numbers (6 MEDA and 0 non-MEDA) as such a healthy low total means interpretation is not worthwhile. In MEDA the most successful group were the 4-10 year group (again regardless of gender) whereas in non-MEDA the most successful group were the 10-20s (regardless of gender). The 0-3 years' experience group were consistently the least frequently successful group in terms of project submission regardless of regional origin or gender suggesting that a lack of experience is a key factor. However this should not be interpreted too negatively as while they may not submit a project, it is generally seen as a successful welcome to the EuroMed framework and still brings a lot to their personal and professional competences as demonstrated by the first two hypotheses.

In terms of analysing what kind of successfully approved projects respondents were implementing, it is important to acknowledge here that regional origin again plays a decisive role. This is due to the fact that if you were from a programme country you could apply as the applicant organisation for any six project types, as opposed to MEDA countries who were only able to apply to one of three project types (Under EuroMed Youth IV) but could also be a partner to a programme country applicant organisations in three out of the six project types available. This is due to the difference in programmes where under the YiA structure, programme countries could choose one of the following actions in question 10b:

Youth Exchanges
(Action 1.1 / 3.1)

European Voluntary Service
(Action 2)

Youth Initiatives
(Action 1.2)

Training and Networking Project
(Action 4.3 / 3.1)

Youth Democracy Projects
(Action 1.3)

Youth and Policy Maker Meetings
(Action 5.1)

This was opposed to the MEDA countries who were applying to the EuroMed Youth IV programme which began running in 2010 and could choose from one of the following actions in question 10b:

 **Euro-Med Youth Exchanges
(Action 1)**

 **Euro-Med Youth Voluntary Service
(Action 2)**

 **Euro-Med Youth Training and Networking
(Action 3)**

While identical in substance to the programme country equivalent, the programmes are funded through entirely different means; YiA through DG Education and Culture and EuroMed Youth IV through DG Development and Cooperation. MEDA organisations could participate in YiA funded programmes but only as a partner and only through Action 3.1. The three actions provided for MEDA organisations to apply for projects were chosen due to their success and relevance in the YiA programme, therefore it is no great surprise that both regions have the same priority of project types in terms of most frequent activity successfully applied for. Training and Networking Project (Action 4.3/3.1) / EuroMed Youth Training and Networking (Action 3) were categorically the most frequently developed projects. Second and third most frequently selected were youth exchanges and the volunteer programmes respectively showing that regional origin plays almost no role whatsoever what kind of project you apply for. However what regional origin and subsequent programme available does change is the raw volume of projects that are successfully approved. As is to be expected there was a far greater amount of funding for the YiA projects than for EuroMed Youth IV and this is reflected in the fact that the % distribution between regions for specific actions is always above double for non-MEDA over that of MEDA. For example, out of the 72 Euro-Mediterranean respondents who applied for training and networking actions, 51 (70.83%) of those were non-MEDA as opposed to 21 (29.17%) being from non-MEDA. The same is seen in youth exchanges where out of 49 Euro-Mediterranean respondents just under 70% of them were non-MEDA, a similar statistic for those doing voluntary programmes where 72% of the 36 total Euro-Mediterranean respondents were from non-MEDA. Out of the total 157 projects successfully applied for, 111 (70.70%) of those were non-MEDA, a significant 15% shift towards non-MEDA from the original 45% MEDA / 55% non-MEDA regional distribution. We conclude that non-MEDA simply had more projects accepted irrespective of project type due to the proportionate funding of YiA over EuroMed Youth IV and the latter's belated launch due to political factors. While we do see a healthy distribution of different project types in both regions, it is interesting to note that in non-MEDA, no non-Action 3.1 projects managed to achieve above 10% of the total non-MEDA projects applied for. While actions such as Youth Initiatives (Action 1.2), Youth Democracy Projects (Action 1.3) and Youth and Policy Maker Meetings (Action 5.1) all received successful project applications, they only achieved a combined total of 18 projects - 16.22% of all non-MEDA projects. This is likely to be due to the fact that all of these actions are more difficult areas to access and require more refined and developed competencies than those for applying to training courses or youth exchanges. This report would again like to emphasise that these actions are NOT open to MEDA participants and hence cannot be considered in a wider Euro-Mediterranean context.

Hypothesis 7 focussed very much on wanting a 'wider range of activities' and while we certainly find that there is a satisfactory distribution between the 3 most popular activities, it does not look like this can be extended to the more region specific actions. However we should note that it is the role of SALTO-Youth EuroMed to promote interregional cooperation and therefore it is only logical that there should be a much higher focus on those actions where regions can work together. With this in mind we feel that hypothesis 7 can be proved successful, however we will also analyse some written responses to question 10c to see if this supports or disproves and previously drawn findings.

Question 10c:

Anonymous female MEDA respondent who has been in youth work for 4-10 years:

Project: Be Brave: Express yourself" Euro-Med Youth Programme IV ENPI South Region Grant

Hosting organisation: YWCA-Beirut

Date: 16-21 November 2013

Description: In line with the YWCA objective to strengthen freedom of expression and dissemination of the culture of inter-community dialogue among young women and youth, the YWCA-Beirut initiated a training course under the title of "Be Brave: Express Yourself". The Contracting Authority was the Ministry of Youth and Sports and it was funded by the European Union. Twenty young leaders from Egypt, Italy, Hungary and from 8 different associations in Lebanon gathered here, to receive training on the freedom of expression. The training was not lecture structured but rather an interactive and dynamic learning experience using non-formal educational methods, where all the participants discussed their ideas freely."

Anonymous male non-MEDA respondent who has been in youth work for 10-20 years:

"The youth exchange "Gender equality: is everything for anyone?" was an invitation to the young people from all over Europe to look for the answers regarding the principles of gender equality and antidiscrimination methods. The exchange took part in the Spiritual Retreat House of Kulautuva, the town situated in the close neighborhood of Kaunas, Lithuania, from September 26 till October 4 of 2010. The groups of leaders and young people (8 people in each group) from Norway, Germany, Wales and Lithuania took part in the exchange."

What appears interesting about the two results is that neither of them would be what one may consider a typical Euro-Mediterranean project. The first respondent from MEDA appears to have implemented a rather large scale initiative to which EuroMed Youth IV funds might have been part of a wider fundraising initiative. However the project does appear to have followed the basic principles of non-formal learning therefore we can consider it somewhat of a success. It also raised the important point that this study failed to acknowledge or facilitate an empirical expression for, which is that some organisations may use YiA / EuroMed Youth IV funding as part of match-funding towards a wider grant initiative of some kind. Ironically this endorses the hypothesis even more than our own previous data as it suggests organisations are very tenacious in using funds to fulfil a wide range of objectives. The second quote is more familiar to what we would expect as a consequential project from SALTO-Youth EuroMed trainings, however it is not a EuroMed project. Only including programme country members this youth exchange involves partners from Lithuania, Germany, Norway and Wales on the topic of gender equality. This is a clear example of YiA projects working effectively and efficiently and while it is slightly disappointing as an example that lacks MEDA partners, as we have seen from the data above the majority of projects will not include MEDA due to several difficulties that we have already highlighted.

From all of the data above we are once again giving a tentative response to whether the hypothesis has been proved or disproved. While there have certainly been many projects and initiatives following SALTO-Youth EuroMed training activities – here successfully related to the transfusion of knowledge and opportunities regarding funding frameworks and structures – to say that organisations have implemented a 'wider range of activities' would be without empirical basis. When we consider the findings of the previous report, we see that actually there is no evidence for a wider spread of project ideas. Therefore while we can safely say that through increasing awareness of existing frameworks and structures, organisations have successfully implemented many activities, we cannot say that the range of activities is more or less diverse than detailed in the previous report.

The eighth hypothesis is the following:

8. SALTO-Youth EuroMed training activities encourage project creation and development through effectively promoting mobility as a tool towards fulfilling EuroMed objectives

The ten questions that will be analysed to prove or disprove the hypothesis are the following with the results presented beneath:

Question 10ci:

If neither, is your organisation planning on applying to become an EVS accredited organisation?

(MEDA Specific Question)

	MEDA
Yes	14
%	100,00
No	0
%	0,00
Total	14
%	100,00

Question 10bi:

Were you involved as a sending or hosting organisation for EVS volunteers?

(+Region)

	Non-MEDA
Yes	31
%	47,69
No	34
%	52,31
Total	65
%	100,00

Question 10cii) [MEDA] & 10bii) [non-MEDA]:

If you were involved in an EVS project, please indicate if your organisation was:

(+Region)

	MEDA	%	Non-MEDA	%	Grand Total
A hosting organisation	7	28,00	18	72,00	25
%	50,00		58,06		55,56
A sending organisation	7	35,00	13	65,00	20
%	50,00		41,94		44,44
Total	14	31,11	31	68,89	45
%	100,00		100,00		100,00

Question 10civ) [MEDA] & 10biii) [non-MEDA]:

How many volunteers did you host?

Question 10cv) [MEDA] & 10biv) [non-MEDA]:

From which countries did your EVS volunteers come from?

Question 10cvi) [MEDA] & 10bv) [non-MEDA]:

How many volunteers did you send?

Question 10cvi) [MEDA] & 10bvi) [non-MEDA]:

To which countries did you send EVS volunteers?

(+Region)

	...by MEDA organisations
Volunteers hosted...	94 (23.04%)
Volunteers sent...	51 (13.56%)
Total number of EVS hosting partnerships established...	13 (10.32%)
Total number of EVS sending partnerships established...	13 (20.97%)

	...by non-MEDA organisations
Volunteers hosted...	314 (76.96%)
Volunteers sent...	325 (86.44%)
Total number of EVS hosting partnerships established...	113 (89.68%)
Total number of EVS sending partnerships established...	49 (79.03%)

	Total
Volunteers hosted...	408
Volunteers sent...	376
Total number of EVS hosting partnerships established...	126
Total number of EVS sending partnerships established...	62

Question 10e:

Having been successful in past applications, do you plan to submit a project application in the future?

(+Region)

	MEDA %	Non-MEDA %	Grand Total
Yes	28 33,73	55 66,27	83
%	90,32	84,62	86,46
No	0 0,00	2 100,00	2
%	0,00	3,08	2,08
Maybe	3 27,27	8 72,73	11
%	9,68	12,31	11,46
Total	31 32,29	65 67,71	96
%	100,00	100,00	100,00

Question 10g:

Despite not applying in the past, do you plan to submit a project application in the future? (+Region)

	MEDA %	Non-MEDA %	Grand Total
Yes	39 67,24	19 32,76	58
%	70,91	50,00	62,37
No	2 50,00	2 50,00	4
%	3,64	5,26	4,30
Maybe	14 45,16	17 54,84	31
%	25,45	44,74	33,33
Total	55 59,14	38 40,86	93
%	100,00	100,00	100,00

Question 10i:

Having been unsuccessful in past applications, do you still plan to submit a project application in the future? (+Region)

	MEDA %	Non-MEDA %	Grand Total
Yes	5 35,71	9 64,29	14
%	83,33	90,00	87,50
No	0 0,00	0 0,00	0
%	0,00	0,00	0,00
Maybe	1 50,00	1 50,00	2
%	16,67	10,00	12,50
Total	6 37,50	10 62,50	16
%	100,00	100,00	100,00

For the following hypothesis we first need to reiterate the objectives of EuroMed (defined here as the objectives of SALTO-Youth EuroMed & EuroMed Youth IV) and clearly state what we are looking to see in the data. Taken directly from the EuroMed Youth programme website we see the programme's objectives is "to support and strengthen the participation and contribution of youth organisations and youth from the Euro-Mediterranean region towards the development of civil society and democracy. The specific objectives are:

- To stimulate and encourage mutual understanding between young people within the Euro-Mediterranean region and to fight against stereotypes and prejudices
- To promote active citizenship among young people and enhance their sense of solidarity
- To contribute to the development of youth policies in the different partner countries"

EuroMed Youth Programme. (2010). Objectives.

<http://www.euromedyouth.net/OBJECTIVES.html>. Last accessed 12/10/2014.

Having already analysed the empirical value of project applications, this hypothesis now uses the data of Euro-Mediterranean volunteering as an indicator of the success of promoting mobility in the context of these objectives.

Indeed we do see data suggesting high levels of organisational involvement with volunteering mobility; a highly relevant indicator of mobility and also quite useful for the current accreditation process of MEDA NGOs towards hosting and sending young people across national borders. In MEDA, a total of 25 out of 92 ex-trainees responded giving a response rate of 27.17% initially suggests that volunteer mobility is not the most accessible of actions to get involved in (already suggested through MEDA selecting it as least frequent action engaged in for question 10b)). Furthermore most organisations who responded positively to this question were either fully involved with the process – 6 respondents were both hosting and sending organisations (24% of total responses) – or not involved at all (13 respondents making 52% of total responses). There were a few (5 respondents) who had just been sending organisations but only 1 respondent whose organisation was hosting only. However when asked if they were planning on becoming accredited organisations for volunteer programmes in the future, 100% selected 'yes' indicating that while the enthusiasm is there, it is most likely EU procedure and technical language that have dissuaded involvement in the past. Issues such as these will be addressed in the various upcoming SALTO-Youth EuroMed activities taking place towards EVS accreditation for MEDA NGOs.

Similar trends appear in the non-MEDA region with 65 out of 113 non-MEDA participants responding positively when asked whether they had been involved in sending / hosting EVS volunteers. While this certainly indicates higher levels of organisational involvement with volunteer mobility – a positive response rate of 57.52% (over double that of MEDA) – it still shows to some extent a lack of engagement with the whole question of volunteering as a tool for mobility. Furthermore of the 65 who chose to answer the question only 31 (47.69%) answered yes to being involved as a sending or hosting organisation, giving an overall response rate of 27.43% for volunteer involvement. This was essentially an equal distribution for 'yes' and 'no' and makes it quite clear that the EVS programme is not the most accessible action inside programme countries and in MEDA. While it is widely acknowledged that the EVS programme is very administratively and practically demanding, it is still one of the most successfully recognised tools for learning in the entire of Europe. With accessibility limited and no previous system of accreditation, NGOs had to know the network well to work effectively in its system. However during the new accreditation process, SALTO-Youth EuroMed will take a lead role in allowing NGOs to gain skills and competencies through international activities which will also facilitate the creation of new networks.

Despite the low response rate, many MEDA organisations claim to have hosted volunteers (94 volunteers) which is significantly more than it sent (51 volunteers). However the number of partnerships established for MEDA sending and hosting was both the same (13) meaning that when organisation hosted volunteers, they took many from one organisation rather than several different partners. There is also a good equality in the number of volunteers hosted and sent by non-MEDA organisations (314 and 325 respectively), however there is a big difference in the number of hosting and sending partnerships established (113 and 49 respectively) meaning that sending organisations sent a lot more volunteers per partnership than when they hosted. We clearly see that non-MEDA NGOs are more active in all arenas of volunteers due to the advantages of the old YiA system over the EuroMed Youth IV programme. The Euro-Mediterranean conclusion must be that there are roughly the same number of volunteers hosted and sent in 6 years (408 and 376 respectively) but that far more hosting partnerships were established than sending ones – suggesting NGOs sent large numbers of volunteers at a time, perhaps representing the popularity and less logistically demanding short term group EVS. This is supported by the grouping of questions 10civ) [MEDA] & 10biii) [non-MEDA] to questions 10cvi) [MEDA] & 10bvi) [non-MEDA] where the results emphasise low numbers of partnerships for many volunteers. It seems that the main difficulties in dealing with volunteer mobility are addressed through the sustaining and strengthening of the core partnerships developed. While the number of partnerships for the number of volunteers seems quite low, this may instead paint the picture of a sector reliant on a core pool of competent EVS partners. Hence hosting organisations would rather have one effective partnership for many volunteers than several partnerships for several volunteers. However while this is good for partnership development, it is less positive for the diversity of cultures that is valued by the EuroMed objectives. Still, given that the accreditation of MEDA NGOs is just starting, this report will see the analysed data here as a solid base towards the promotion of mobility as a tool towards fulfilling EuroMed objectives. After all there were a high number of mobility's and partnerships outlined above which can only be a positive thing. We can further see this through an analysis of the data collected for questions 10e, 10g, and 10i, outlined below:

The data above moves away from volunteering and is more about measuring people's future intentions regarding EuroMed activities. As we can see, it is almost exclusively positive results, beginning with question 10e where well over 90% of respondents are considering applying for a future project (94 people: 97.92% of total respondents) with the vast majority of these being a definite 'yes' (88.29%) and the rest a maybe (11.46%), and 0 respondents for 'no'! Furthermore for question 10g, enthusiasm is still high (89 people making up 95.7% of respondents), however it is worth mentioning that for this question, there were more 'maybes' (31: 33.33%). Yet what is astonishing is that these project applications still appear to appeal quite widely to audiences suggesting that training activities do a good job of promoting opportunities. Finally for question 10i, 100% of those who had failed with their applications in the past were considering applying in the future with the vast majority sure of it. Understandably for those who had not applied in the past there was a number (a tiny minority) who intended not to submit an application in the future. What we have seen here is that despite the difficulties of the programme and ambitious aims of youth mobility, the framework of European funded grants for non-formal learning programmes still holds a massive appeal to those involved in youth work and is furthermore an endorsement on SALTO-Youth EuroMed's ability to increase awareness of these opportunities and effectively diffuse Euro-Mediterranean norms and objectives to be worked towards in future projects.

The ninth hypothesis is the following:

9. As an objective, such collaborative actions (as seen in hypotheses 7 & 8) would be hampered by hardening EU Member States immigration policies

The two questions that will be analysed to prove or disprove the hypothesis are the following with the results presented beneath:

Question 10d)

What were the main difficulties you encountered? (+Region)

	MEDA %	Non-MEDA %	Grand Total
Cultural differences %	4 8,16	14 77,78	18 11,54
Difficulties with VISA %	6 12,24	27 81,82	33 21,15
Financial problems %	10 20,41	19 65,52	29 18,59
Finding participants %	4 8,16	11 73,33	15 9,62
Finding reliable partners %	5 10,20	16 76,19	21 13,46
Political problems %	11 22,45	5 31,25	16 10,26
Problem with EU administrative procedures %	7 14,29	6 46,15	13 8,33
Rejection of your application %	1 2,04	5 83,33	6 3,85
Other %	1 2,04	4 80,00	5 3,21
Total %	49 100,00	107 100,00	156 100,00

Question 10f)

Why did you not submit a project application? (+Region) (+Gender)

	MEDA		MEDA		Total	%	%
	Male	%	Female	%			
EU administrative procedures were too complex %	4 10,26	100,00	0 0,00	0,00	4 7,27	100,00	66,67
Political Climate was unfavourable %	10 25,64	58,82	7 43,75	41,18	17 30,91	100,00	80,95
You did not find reliable partners %	6 15,38	75,00	2 12,50	25,00	8 14,55	100,00	53,33
Your organisation did not have the logistical resources %	2 5,13	66,67	1 6,25	33,33	3 5,45	100,00	42,86
Your organisation did not have the sufficient financial resources %	11 28,21	78,57	3 18,75	21,43	14 25,45	100,00	66,67
Your organisation did not support the project %	4 10,26	66,67	2 12,50	33,33	6 10,91	100,00	60,00
Other %	2 5,13	66,67	1 6,25	33,33	3 5,45	100,00	21,43
Total %	39 100,00	70,91	16 100,00	29,09	55 100,00	100,00	58,51

	Non MEDA		Non MEDA		Total	%	%
	Male	%	Female	%			
EU administrative procedures were too complex %	0 0,00	0,00	2 8,70	100,00	2 5,13	100,00	33,33
Political Climate was unfavourable %	1 6,25	25,00	3 13,04	75,00	4 10,26	100,00	19,05
You did not find reliable partners %	4 25,00	57,14	3 13,04	42,86	7 17,95	100,00	46,67
Your organisation did not have the logistical resources %	2 12,50	50,00	2 8,70	50,00	4 10,26	100,00	57,14
Your organisation did not have the sufficient financial resources %	3 18,75	42,86	4 17,39	57,14	7 17,95	100,00	33,33
Your organisation did not support the project %	2 12,50	50,00	2 8,70	50,00	4 10,26	100,00	40,00
Other %	4 25,00	36,36	7 30,43	63,64	11 28,21	100,00	78,57
Total %	16 100,00	41,03	23 100,00	58,97	39 100,00	100,00	41,49

	Grand Total
EU administrative procedures were too complex %	6 6,38
Political Climate was unfavourable %	21 22,34
You did not find reliable partners %	15 15,96
Your organisation did not have the logistical resources %	7 7,45
Your organisation did not have the sufficient financial resources %	21 22,34
Your organisation did not support the project %	10 10,64
Other %	14 14,89
Total %	94 100,00

The major difficulties outlined by respondents in question 10d demonstrate how regional origin does make a huge difference in assessing activity impact. While both regions highlight ‘financial problems’ as one of the top 2 most frequent difficulties involved with EuroMed youth work – this is not a surprise given that both the EU and the Arab world are still currently experiencing one of the most difficult financial periods of modern history – other reasons tended to vary to some extent based on region. Difficulties with VISA – one of the major issues raised by the previous SALTO-Youth EuroMed study was only the fourth most frequent difficulty in MEDA whereas it was clearly the most frequent problem experienced by non-MEDA. Here we have to assume that non-MEDA are referring to their work with the MEDA region as the majority of the Programme Countries enjoy the privileges of free movement under the Schengen agreement. Considering that VISA arrangements for MEDA citizens has only become stricter in recent years, it says a lot about the regional instability than it is so low on the list of difficulties in youth work. Instead MEDA appear to be struggling mainly with political problems, financial resources, and getting to grips with EU administrative procedure – three difficulties that make up over 55% of all MEDA respondent feedback against a slim 12.24% for VISA issues. However we can still acknowledge the difficulties of VISAs due to the high frequency of non-MEDA respondents claiming it as their most frequent difficulty. However many MEDA respondents still commented that it was more difficult than ever to acquire VISAs and non-MEDA agreed saying that communication with embassy’s has yielded few positive results. In fact, given the current political upheaval, it seems that the situation of VISAs has actually regressed since the previous report and that its recommendation to endorse free movement of people within a Euro-Mediterranean community is further away than ever. This looks ultimately to continue until the region stabilises politically all the way from a top-level – problems such as resolving the Islamist question – right down to a grass roots level where countries such as Algeria refuse to even support the maintenance of a EuroMed Youth Unit. However political problems in non-MEDA appear to be at an all-time low when it comes to youth work – indeed it was the least frequently selected difficulty in the entire region managing less than 5% of the non-MEDA total. This is most likely due to the healthy separation between state and civil society, but also the public demand for investment in tackling youth unemployment. The most common criticism of any European government at the time of writing is often that there is not enough being done to tackle youth unemployment – a demand most often answered through several layers of governance including EU funding. The Euro-Mediterranean totals would suggest that difficulties with VISA remain the biggest problem affecting youth workers, closely more frequently than financial problems. However we reject this by claiming that while the VISA problem still exists, it is ultimately no longer the most damaging factor in hampering collaborative actions related to EuroMed youth work. The difficulties politically, financially and culturally (here referring to the unfamiliarity with EU bureaucratic procedures) have all outstripped free movement of people as an issue. This results of question 10d ultimately go a long way to disproving hypothesis 10, however we will now also analyse the results from 10f and 10ii.

At first glance we can say that the results of question 10f appear to endorse the findings of question 10d. The two most frequently responded answers to this question were that the ‘political climate was unfavourable’ (21 respondents: 22.34% of total responses) and ‘your organisation did not have the sufficient finances’ (also 21 respondents 22.34% of total responses). We can look at unfavourable political climate in several ways when considering its high MEDA response presence. As previously stated the region underwent some of the most politically turbulent years in their post-colonial histories during the Arab Spring, but we also see that the structural engagement from the EU failed to materialise until three years after the end of EuroMed Youth III. This not only affected MEDA youth workers but also non-MEDA youth workers who wished to create various partnerships and projects and were suddenly forced to do so under the less EuroMed centred YiA programme. However, the most frequent response was once again related to finances as most respondents selected that their organisation struggled to find match / complimentary funding. Yet this was not only limited to MEDA and was ranked in the top two non-MEDA reasons for not submitting a project. This is only to be expected given the difficult financial circumstances of the last seven years as outlined above. What some may consider a silver lining is that gender appears to play almost no role whatsoever in reasons for not submitting a project application, suggesting that while accessibility to positions and opportunities may be limited (as seen in the demographics) there is no inherent disadvantage for those who do manage to be in a position to make an application. What is also interesting to note is the high number of non-MEDA participants who selected ‘other’. While this was only the case for the non-MEDA region, it does suggest that the options given were not appropriate or relevant for these respondents – suggesting that future studies may have to make this particular question region specific in order to successfully process the wide range of reasons for not submitting project applications. Ultimately the results of question 10f only go on to endorse the findings of question 10d; that political problems and financial difficulties are the most common difficulties in the Euro-Mediterranean region. This would certainly represent a socio-political deterioration of the Euro-Mediterranean region which previously was considering VISA difficulties to be the biggest issue facing youth work. While not becoming too drawn into a historical analysis of the last seven years, we can use the data interpretation above to indeed conclude that hypothesis 9 has been disproved and that the factors most likely to hamper EuroMed youth work are political and financial factors as opposed to VISA issues.

Theme 4: Intercultural competences and SALTO-Youth EuroMed as an 'Actor'

The tenth hypothesis is the following:

10. SALTO-Youth EuroMed training activities promote a dynamic view of intercultural dialogue and diversity. Furthermore, through increased mobility, participants have a greater understanding of different cultures, support interculturalism and become active multipliers for inter-cultural experiences.

The three questions that will be analysed to prove or disprove the hypothesis are the following with the results presented beneath:

Question 16) When sharing your activity experience with friends and family, how important was the intercultural element?

(+Region) (+Experience in Youth Work)

	0 - 3 YEARS						
	MEDA	%	Non-MEDA	%	Total	%	%
The most important element	7	53,85	6	46,15	13	100,00	14,61
%	77,78		33,33		48,15		
Significant	2	15,38	11	84,62	13	100,00	12,38
%	22,22		61,11		48,15		
Worthy of mention	0	0,00	1	100,00	1	100,00	9,09
%	0,00		5,56		3,70		
Not the most important thing	0	0,00	0	0,00	0	0,00	0,00
%	0,00		0,00		0,00		
Not worth mentioning	0	0,00	0	0,00	0	0,00	0,00
%	0,00		0,00		0,00		
Total	9	33,33	18	66,67	27	100,00	
%	100,00		100,00		100,00		

	4 - 10 YEARS						
	MEDA	%	Non-MEDA	%	Total	%	%
The most important element	20	55,56	16	44,44	36	100,00	40,45
%	50,00		40,00		45,00		
Significant	16	41,03	23	58,97	39	100,00	37,14
%	40,00		57,50		48,75		
Worthy of mention	4	80,00	1	20,00	5	100,00	45,45
%	10,00		2,50		6,25		
Not the most important thing	0	0,00	0	0,00	0	0,00	0,00
%	0,00		0,00		0,00		
Not worth mentioning	0	0,00	0	0,00	0	0,00	0,00
%	0,00		0,00		0,00		
Total	40	50,00	40	50,00	80	100,00	
%	100,00		100,00		100,00		

	10 - 20 YEARS					
	MEDA	%	Non-MEDA	%	Total	%
The most important element	11	40,74	16	59,26	27	100,00
%	37,93		41,03		39,71	30,34
Significant	17	45,95	20	54,05	37	100,00
%	58,62		51,28		54,41	35,24
Worthy of mention	1	25,00	3	75,00	4	100,00
%	3,45		7,69		5,88	36,36
Not the most important thing	0	0,00	0	0,00	0	0,00
%	0,00		0,00		0,00	0,00
Not worth mentioning	0	0,00	0	0,00	0	0,00
%	0,00		0,00		0,00	0,00
Total	29	42,65	39	57,35	68	100,00
%	100,00		100,00		100,00	

	20 + YEARS					
	MEDA	%	Non-MEDA	%	Total	%
The most important element	7	53,85	6	46,15	13	100,00
%	50,00		37,50		43,33	14,61
Significant	7	43,75	9	56,25	16	100,00
%	50,00		56,25		53,33	15,24
Worthy of mention	0	0,00	1	100,00	1	100,00
%	0,00		6,25		3,33	9,09
Not the most important thing	0	0,00	0	0,00	0	0,00
%	0,00		0,00		0,00	0,00
Not worth mentioning	0	0,00	0	0,00	0	0,00
%	0,00		0,00		0,00	0,00
Total	14	46,67	16	53,33	30	100,00
%	100,00		100,00		100,00	

	Grand Total
The most important element	89
%	43,41
Significant	105
%	51,22
Worthy of mention	11
%	5,37
Not the most important thing	0
%	0,00
Not worth mentioning	0
%	0,00
Total	205
%	100,00

Question 17)

The intercultural learning involved in the training activity had an impact on: (+Region)

	MEDA %	Non-MEDA %	Grand Total
Your personal values	45	79	124
%	48,91	69,91	60,49
Your organisation's values	33	20	53
%	35,87	17,70	25,85
Both	12	14	26
%	13,04	12,39	12,68
None	2	0	2
%	2,17	0,00	0,98
Total	92	113	205
%	100,00	100,00	100,00

This final section aims to evaluate to what extent the interculturality of training activities was able to make an impact on participants personal and professional lives. The hypothesis believes that the mobility element to SALTO-Youth EuroMed trainings has always indirectly fostered cultural exchange and promoted it as key personal and professional value. Considering the results of the first question, it looks as if the result has been mainly positive with the majority of respondents feeling that the intercultural element was either ‘the most important element’ or ‘significant’. Furthermore absolutely 0 respondents thought that the intercultural element was either ‘not the most important thing’ or ‘not worth mentioning’, showing high appreciation across both regions and participants of all experience for the diversity of cultures present in projects. MEDA respondents selected ‘the most important element’ 3 times as the most popular response (0-3 years’, 4-10 years’ and 20+ years’ experience) meaning it was a strong second most frequent response out of all total responses (89 people responded making it worth 43.41% of all respondents). However non-MEDA always balanced this out in every experience group by preferring the “significant” selection to the second most selected option ‘the most important element’. In terms of the impact of experience in youth work, it seems it played very little role once you compared the % with the original demographic distribution. In conclusion we find that the responses to this particular question are a strong endorsement for participants highlighting interculturality as a significant factor in their training activity. It certainly seems, therefore, as if the projects had a very strong indirect effect towards promoting it as a personal value. We will now see below in more detail to what extent it impacted on their personal and professional values.

The responses for question 17 appear to be quite simple to analyse and consequently make a strong case for empirical analysis on a Euro-Mediterranean basis. This is due to the fact that both regions have selected the same top 3 results for the most frequent impact of intercultural learning. First, both regions feel that it is their personal values which have been most impacted upon, with second being their organisational values, and third being both. While quite a positive results in general we could be quite critical and say that we would like the both section to be higher, or at least argue that the organisation element would have a greater regional impact. However when we consider some of the previous questions, many respondents felt that the personal impact of the training activities would motivate them to make a bigger impact on their organisational activities. Not only is this then both a personal and professional impact but it also suggests a desire to make an impact on a higher level. Furthermore only 2 respondents out of 205 felt that the training had an impact on neither their personal nor organisation's values, giving another massive endorsement to SALTO-Youth EuroMed training activities. Drawing from the analysis above, this report feels quite confident in claiming to have proved the tenth hypothesis true; SALTO-Youth EuroMed training activities promote a dynamic view of intercultural dialogue and diversity. Furthermore through increased mobility, participants have indeed gained a greater understanding of different cultures, are more supportive of interculturality and are active multipliers for intercultural experiences.

The eleventh hypothesis is the following:

- 11.** Salto-Youth EuroMed training activities promote a dynamic view of intercultural dialogue and diversity. Furthermore through promoting key European norms such as multiculturalism, diversity and inter-regional cooperation in YiA activities, projects have increased support for interculturalism.

The two questions that will be analysed to prove or disprove the hypothesis are the following with the results presented beneath:

Question 18)

Please select up to three values related to the training activity (+Region)

	MEDA	%	Non-MEDA	%	Grand Total
Autonomy	9	50,00	9	50,00	18
%	2,71		2,41		2,55
Communication	58	43,61	75	56,39	133
%	17,47		20,05		18,84
Democracy	23	54,76	19	45,24	42
%	6,93		5,08		5,95
Diplomacy	12	50,00	12	50,00	24
%	3,61		3,21		3,40
Respect for Gender Equality	27	61,36	17	38,64	44
%	8,13		4,55		6,23
Respect for Human Rights	35	42,17	48	57,83	83
%	10,54		12,83		11,76
Respect for Minority Rights	11	34,38	21	65,63	32
%	3,31		5,61		4,53
Responsibility	45	46,88	51	53,13	96
%	13,55		13,64		13,60
Solidarity	35	50,00	35	50,00	70
%	10,54		9,36		9,92
Sustainability	33	50,00	33	50,00	66
%	9,94		8,82		9,35
Tolerance	40	44,94	49	55,06	89
%	12,05		13,10		12,61
Other	4	44,44	5	55,56	9
%	1,20		1,34		1,27
Total	332	47,03	374	52,97	706
%	100,00		100,00		100,00

Question 20)

Would you recommend a SALTO-Youth EuroMed activity to a colleague or friend? (+Region)

	MEDA %	Non-MEDA %	Grand Total
Yes	92 44,88	113 55,12	205
%	100,00	100,00	100,00
No	0 0,00	0 0,00	0
%	0,00	0,00	0,00
Total	92 44,88	113 55,12	205
%	100,00	100,00	100,00

Once again it appears that regional origin has very little impact when considering the main values ex-trainees have associated with SALTO-Youth EuroMed activities. The most frequent response was ‘communication’ and clearly indicates a continuation of the emphasis on interculturality. It received a grant total of 133 responses (making up 18.84% of all total responses) and was made-up of 58 MEDA and 75 non-MEDA responses. Highlighting it as the most important value allows us to see how strongly present this element is in all training activities, whether it is the direct or indirect focus. The second most frequent response is ‘responsibility’ and would appear to be associated with the more project related side of the training activities. With a grand total of 96 people making up 13.60% of all responses, this value was especially high in the MEDA region with 45 responses as opposed to the 51 non-MEDA responses. We can see this being strongly related to theme 3 and the responsibility of participants to fully engage with the training to maximise the educational impacts. And finally both regions third most frequently selected is that of tolerance with 40 MEDA respondents and 49 non-MEDA respondents giving a grand total of 89 (12.61% if all responses). What is also positive is that we see most of the values given were well distributed with no one value achieving more than 20% of total responses. This not only reflects the wide range of themes that SALTO-Youth EuroMed implements, but also endorses the fact that many training themes are interrelated. In conclusion the general preference for communication as a value goes a long way to endorsing the priority of interculturality and diversity in SALTO-Youth EuroMed projects, but the evenly distributed responses of values also shows than the activities are successful in promoting key European norms such as responsibility and tolerance. Furthermore all 205 respondents answered that they would recommend a SALTO-Youth EuroMed training activity to a colleague or friend giving further endorsement to hypothesis 10 and 11 that the successfully transfused EU norms are further strengthened by ex-participants effectively becoming ‘intercultural multipliers’ in EuroMed youth work. We therefore consider both hypotheses 10 and 11 to therefore have been proved correct.

Conclusion

Between 2008 and 2013, SALTO-Youth EuroMed organised 36 training activities (52.94% of the 68 total SALTO-Youth EuroMed activities), 23 training courses less than between 2003 and 2007 despite there being an additional year for this study. While this can certainly be seen as representative of a change in strategic direction it is important for a number of reasons:

- It saw a reduced response rate in the questionnaire from the original 2003-2007 study
- The focus on trainings was secondary to more short-term thematic based courses
- It coincided with increasingly difficult political situations which have been recognised to severely limit the viability of Euro-Mediterranean youth work.

Ultimately, this study must acknowledge that while the majority of hypotheses were successfully proved, there has been a major shift in the environment in which Euro-Mediterranean youth work takes place. This is highlighted in the findings of hypothesis 9 which shows that it is only a minority who now consider VISA problems to be the main handicap to cooperation in youth work projects, and instead a majority who highlight the internal political situation of their country as the determining factor to their level of involvement. During the course of this study, EuroMed youth work has experienced significant changes from the global financial crisis, the Eurozone crisis and the Arab Spring Uprisings. These global macro-level events have led to more precise issues such as delays to the EuroMed Youth IV programme and changes of national agency priorities away from the Mediterranean. A main conclusion of this study is that the extent to which SALTO-Youth EuroMed training activities had a positive impact on personal and professional development in a Euro-Mediterranean context from 2008 until 2013, is more dependent than ever before on the external circumstances of both regions involved.

However, on a more optimistic note and as previously mentioned, with 9 out of 11 hypotheses having been successfully proven, this report feels confident in acknowledging that SALTO-Youth EuroMed training activities are extremely successful in impacting upon personal and professional development in general. Notable conclusions include that over 75% of respondents found that they had increased their levels of professional responsibilities following a SALTO-Youth EuroMed training course and that there is a solid pool of competent and experienced ex-TOTEM participants who have previously led trainings, acted as multipliers and who pledged to continue both actions into the near future. Notable difficulties affecting EuroMed youth work are in line with the situation outlined above as respondents found internal politics prevented involvement or simply that there was no money to support their project ideas. However, it is also important to note that the main three demographic factors investigated (gender, region of origin and experience in youth work) continue to heavily influence both the personal and professional development of EuroMed youth workers. While this is to be expected and accepted in regard to experience in youth work and region of origin (diversity is welcomed in the changing of priorities with regards to both these demographic factors), gender continues to be one of the principal issues prevailing in EuroMed youth work. Despite it being repeatedly highlighted and numerous initiatives aimed at countering it (including SALTO-Youth EuroMed's Empowering Women training courses), the issue appears to have worsened. While SALTO-Youth EuroMed is doing all it can to tackle this problem, this the problem is more rooted in cultural traditions rather than an issue of youth work, and significant changes in MEDA society is necessitated for a reversal of this gender imbalance to take place. We therefore conclude that SALTO-Youth EuroMed has consistently implemented effective and reputable training activities that have served to impact positively on personal and professional development in a Euro-Mediterranean context.

While the previous report was able to end with several clear-cut suggestions, this report feels that, ultimately, SALTO-Youth EuroMed's main concern in the coming years will be to ensure that it is able to be flexible and adaptable to sudden and unexpected changes in the MEDA region. Since the beginning of the Barcelona Process of 1995, it could be argued that the post-Arab Spring Uprisings era represents the most volatile and unpredictable MEDA region needing to be addressed by the EU. While it is clear that youth work is a major part of this, greater recognition of its overlapping priorities with other areas of Euro-Mediterranean cooperation may be the only way to ensure the welcomed influence of SALTO-Youth EuroMed training activities continues to be relevant to both regions. All 205 respondents answered they would recommend a SALTO-Youth EuroMed training activity to a colleague or friend. Such a strong endorsement only serves to reinforce the role of EuroMed youth work in developing the MEDA region, yet the potential for political situations to strengthen or reverse progress in youth work has never been higher.

SALTO-Youth EuroMed would like to end by extending its thanks to all respondents who participated in the impact survey and by welcoming future opportunities to work together towards the development of Euro-Mediterranean non-formal youth work.

Good Practices



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