GENDER EQUALITY AND WOMEN'S VOICE

GUIDANCE NOTE

FEBRUARY 2018

CONTENTS

Acronyms

CSC	Community Score Card (CARE)
CSO	Civil society organisations
GBV	Gender based violence
GED	Gender equity and diversity
GEF	Gender Equality Framework (CARE)
GEWV	Gender Equality and Women's Voice
GPF	Governance Programming Framework (CARE)
INGO / NGO	International / Non-Governmental Organisation
LGBT	Lesbian Gay Bisexual Transgender
MEL	Monitoring Evaluation and Learning
SII	Strategic Impact Inquiry (CARE)
VSLA	Village Savings and Loans Associations / Plus (CARE)
WASH	Water, sanitation and hygiene

INTRODUCTION

"At its root, poverty is caused by unequal power relations that result in the inequitable distribution of resources and opportunities between women and men, between power-holders and marginalised communities, and between countries. CARE believes that poverty cannot be overcome without addressing those underlying power imbalances."

CARE 2020 Program Strategy, 2014

The **CARE 2020 Program Strategy** defines how CARE intends to tackle the underlying causes of poverty and social injustice and to bring lasting change to the lives of poor and vulnerable people. The Program Strategy outlines three components of CARE's core approach: strengthening gender equality and women's voice (GEWV); promoting inclusive governance; and increasing resilience.

These address three critical underlying causes of poverty and social injustice that are found, in different manifestations and dynamics, in the different contexts where CARE works: gender inequality and lack of women's voice, weak governance, and the increasing frequency and impact of humanitarian crises due to climate change, environmental fragility and conflict. **The promotion of gender equality and women's voice is therefore a core part of how CARE works everywhere,** in fragile and conflict-affected states and least developed countries, as well as in middle income countries or the Global North. It applies to our work in all program areas, including the four priority outcome areas in the Program Strategy - humanitarian response; the right to sexual, reproductive and maternal health and a life free from violence; food and nutrition security and resilience to climate change; and women's access to and control of economic resources.

The purpose of this guidance document is to provide CARE and partner staff with direction for implementing Gender Equality and Women's Voice into their work, by explaining:

- the importance of GEWV for CARE

- our Theory of Change

- the Gender Standards required of all CARE offices and resources to implement these

- the main models and innovations that we will scale up across the organisation

- our approach to partnership

The document is one of three guidance documents being developed to outline how to integrate the three elements of the CARE approach in our work. It builds on and links to previous CARE guidance on gender and empowerment and the many examples documented by CARE programs around the world.

CARE Gender Justice

GENDER, POWER & JUSTICE PRIMER

The state of gender and rights globally, and programming practices that work toward justice, strong communities, development and peace.

care

See the CARE GENDER, POWER AND JUSTICE PRIMER to explore how gender equality and women's voice intersects with the strategies related to each outcome area of the CARE 2020 Program Strategy:

GENDER-BASED VIOLENCE

FOOD AND NUTRITION SECURITY

SEXUAL AND REPRODUCTIVE HEALTH RIGHTS

WOMEN'S ECONOMIC EMPOWERMENT

HUMANITARIAN RESPONSE

THE IMPORTANCE OF THE GEWV APPROACH

> "The full and complete development of a country, the welfare of the world and the cause of peace require the maximum participation of women on equal terms with men in all fields."
>
> **Convention on the Elimination of Discrimination against Women, 1979**

Gender remains one of the most fundamental sources of inequality and marginalisation in the world today. Without the achievement of gender equality, women and girls will not realise their human rights. While women and girls have made major gains in the past two decades, gender inequality remains a major barrier to human development. The disadvantages and discrimination facing women and girls are a major source of inequality which cuts across both the private and public spheres.

While no single measure can capture the complete situation, a number of global indices measure the magnitude of gender-based disparities and highlight that discrimination based on gender impedes progress towards human rights-based social change that benefits women. The United Nations Development Program's Gender Inequality Index tracks education, economic and political participation and reproductive health across 152 countries highlighting

that, while gender inequality is evident in all nations, the regions most affected are Sub-Saharan Africa, Arab States and South Asia. The World Economic Forum's **Gender Gap Index** calculates the relative gaps between women and men in health, education, economy and politics across 142 countries, and shows the widest gap is in economic participation and opportunity. The Organisation for Economic Cooperation and Development's **Social Institutions and Gender Index** measures discrimination against women in social institutions (formal and informal laws, social norms, and practices) across 160 countries. Discriminatory social institutions perpetuate gender gaps across all development areas and impede progress towards social change that benefits all. The **Women Peace and Security Index** offers a more comprehensive measure of women's wellbeing by capturing both peace and security—and women's inclusion and justice—for the first time ever.

CARE's work on gender equality and empowerment has grown considerably over the last fifteen years, following the adoption of a human rights based approach to development and in acknowledgement of the necessity to meet the needs of all in humanitarian preparedness and response.

In 2008, CARE's move to the Program Approach profoundly transformed the way we tackle global poverty. One of the key drivers of moving to longer-term programming was a recognition that short-term projects were an ineffective vehicle to achieving sustainable impacts on the causes of poverty and injustice. This became clear in 2007 with the results of CARE's first global **Strategic Impact Inquiry** (SII) assessing the impact of CARE's work on women's empowerment. Of all the projects reviewed, only 15% had deep and lasting impacts for women's empowerment; 60% had good short-term, but not necessarily sustainable impacts; and 25% had unintended negative impacts on women. The SII showed that using a project-focused approach was a major limitation for CARE being able to contribute to transformational change on a broad scale. The development gains made during a project period, usually of two to five years, were often subject to reversal once the project ended, without a broader vision and commitment that would deliberately leverage sustained social change. This realization was a watershed moment for CARE.

Over time, more and more CARE offices identified gender inequality as an underlying cause of poverty and social injustice in the analysis phase of long-term program design. By 2013, 94% of our programmatic work partially or fully incorporated strategies to promote women's empowerment or gender equality.[1]

For almost two decades, humanitarian response has been committed to meeting the different needs of women, men, boys and girls, yet most humanitarian work globally still struggles to implement a gender equality approach in practice, particularly for rapid onset emergencies.[2] Failing to understand how relationships between women and men, boys and girls have been affected by crisis can costs lives and always affects the quality and effectiveness of the response.[3] CARE's Humanitarian Strategy (2015 update) deepens our focus on gender equality in humanitarian preparedness and response efforts; strengthens the ability of women and girls to have a clear voice in determining how humanitarian action should effectively respond to their rights and needs; promotes inclusive governance through enhanced ability of women and girls to have their voices heard and acted upon in humanitarian contexts; and strengthens accountability of power-holders to those affected and builds capacity.

WHO WE WORK WITH

WOMEN AND GIRLS, from the very young to the very old. This work often builds solidarity in women's or girls' networks, reflects on gender relations and expectations they face as women or girls [femininities] and take action for women's empowerment and gender equality;

MEN AND BOYS, which often involves coming together to reflect on gender relations and expectations men and boys face [masculinities] and taking action to transform oppressive gender norms and promoting gender equality;[4]

GROUPS FACING MULTIPLE INEQUALITIES on account of gender, class, caste, ethnicity, ability, etc. which we term *intersectionality* to understand how racism, ageism, sexism, and homophobia, are interrelated and continuously shaped by one another;

GROUPS WITH DIVERSE SEXUAL ORIENTATION AND GENDER IDENTITY (SOGI), who face violence and discrimination.[5] Throughout this guidance, we therefore refer to 'all/diverse genders'.

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1   CARE International Key Figures and Country List For FY13; CI Program Director, 2014.
2   Improving the effective use of humanitarian action: progress in implementing the Inter-Agency Standing Committee (IASC) Gender Marker: Foran et al, 2010.
3   Sex and Age Matter: Feinstien/Tufts/OCHA/CARE, 2011.
4   A 2014 CARE Program Approaches Coordination Team survey of 53 countries indicates that 79% of respondents said that their main impact group was one of particularly discriminated-against women and girls.
5   USAID (undated), Promoting and Supporting the Inclusion of Lesbian, Gay, Bisexual, and Transgender Individuals e.g. Oxfam study on Indian Ocean tsunami showed many Aravanis (physiological males with feminine gender identity) were almost completely excluded from aid distributions, temporary shelters and social security schemes. Gay Syrians are being targeted by pro- and anti-regime actors.
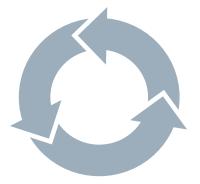
THEORY OF CHANGE AND STRATEGY

CARE's Gender Equality Framework (GEF) was developed to assist CARE staff in conceptualising and planning gender equality work. The GEF builds on existing CARE frameworks and tools, in particular the Women's Empowerment Framework (WEF). The GEF updates CARE's previous Women's Empowerment Framework to capture learning that our women and girls' empowerment approaches must be synchronised with and complementary to how we engage men and boys[6] and people of all/diverse genders for gender equality.

Refer to Annex 1 for key terms and definitions.

Figure 1: CARE's Gender Equality Framework

BUILD AGENCY
Building consciousness, confidence, self-esteem and aspirations (non-formal sphere) and knowledge, skills and capabilities (formal sphere).
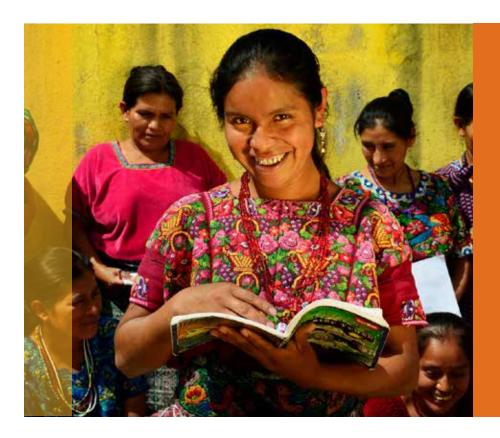
CHANGE RELATIONS
The power relations through which people live their lives through intimate relations and social networks (non-formal sphere) and group membership and activism, and citizen and market negotiations (formal sphere).

TRANSFORM STRUCTURES
Discriminatory social norms, customs, values and exclusionary practices (non-formal sphere) and laws, policies, procedures and services (formal sphere).

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6   CARE's Engaging Men and Boys for Gender Equality Series, Brief 1, page 3, explains synchronisation and the programming elements evident in CARE's engaging men and boys work, drawing on experiences from 20 countries.

TRANSFORMATIVE CHANGE means addressing the structural causes as well as the symptoms of gender inequality, with the aim of achieving lasting change in the power and choices women have over their own lives, rather than just a temporary increase in opportunities.[7]

Our theory of change is based on CARE's experience that **achieving gender equality and women's voice requires transformative change**. CARE's theory of change for gender equality and women's voice work is outlined in the Gender Equality Framework (GEF) above and the graphic below.

CARE's extensive evidence base (**SII**) emphasizes that change needs to take place and be sustained in **all three domains** to achieve this impact. Change is also required in both **private and public spaces** (i.e. at individual, household, community and societal level) and CARE is doing cutting edge work across all these levels.

Figure 2: Theory of Change

BUILD AGENCY + **CHANGE RELATIONS** + **TRANSFORM STRUCTURES** = **WOMEN AND GIRLS realise their human rights and people of all genders and life stages live in gender equality**

The aim is to **build agency** of people of all genders and life stages, **change relations** between them and **transform structures** in order that they realise full potential in their public and private lives and are able to contribute equally to, and benefit equally from, social, political and economic development.

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7   DFID PPA Gender Learning Partnership, 2015, What works to achieve gender equality and women's and girls' empowerment?, p 3.

There are a number of assumptions inherent in this Theory of Change: [8]

- Individual agency is a key part of empowerment whereby conscious and empowered individuals take steps to achieve their rights;

- Gender equality must include men and boys as well as women and girls, and people of all/diverse genders, so that everyone is making necessary changes and is involved in the process of creating new, more equitably beneficial societies;

- Government actors are primary players, as duty-bearers who are responsible for following through on their international commitments and frameworks. Other social institutions and actors also have key roles to play;

- Civil society organisations (CSOs) play a critical role, e.g. through specific activities, through supporting advocates and women's rights organisations and/or holding duty-bearers accountable;[9]

- Combining gender-specific programming and advocacy on women's rights, complemented by gender-integrated programming is necessary to achieve gender equality; and

- Shocks and backlash against women's rights are to be expected, and thus change for women's rights may take time, involve setbacks and follow a non-linear change pathway.

Addressing gender inequality is **not just a technical issue; it requires challenging and changing unequal power relations** so CARE's work on gender equality and women's voice must not simply be a technical response, but also a political response, engaging political actors and supporting political movements. Much of CARE's work is with groups (e.g. community groups like VSLA, mother's groups, religious leaders, government officials) so facilitating dialogues that build consciousness of inequalities and building skills for collective action to challenge the inequalities, is critical to achieving greater impact.

In 2017, a **Gender Equality and Women's Voice Strategy** was developed which outlined 5 strategic directions for this work to 2020. They are: **CONNECT:** strengthen the community for the courageous pursuit of equality; **AMPLIFY:** knowledge and influence is a powerful mechanism for multiplying impact. **ILLUMINATE:** because people are at the core of our business and we must be walking the talk as an organization; **XCHANGE:** an innovative way to tap potential across CARE and fill unmet demand for TA; and **CATALYZE:** strive and adapt new strategies, bringing cutting edge thinking, resources and practice to CARE's work.

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8   Drawing on CARE's Strategic Impact Inquiry (SII) findings and adapted from A Theory of Change on Gender Equality and Women and Girls' Empowerment, DFID PPA Gender Learning Partnership (2015).

9   Which is why CARE strengthens and diversifies its collaboration with CSOs to collectively achieve gender equality and ensure women's voices be heard. See the CI Resource on Civil Society Collaborations for guidance on the new roles CARE can play partnering with CSOs.

GENDER STANDARDS

This section outlines the Gender Standards that all CARE offices are required to meet, grouped into program and organisational standards. These standards are in line with the **CARE International Gender Policy Common Standards** (2009) and incrementally set a higher benchmark for all CARE's humanitarian and development programming, policy engagement and advocacy priorities in the Global South and North, and organisational enablers to support programming, as we work towards CARE's 2020 Program Strategy.

Section 6 provides a set of resources to implement these standards, across the program cycle.

HUMANITARIAN AND DEVELOPMENT PROGRAMS WILL:

1. Incorporate **gender and power analysis**[10] and **data disaggregated by sex, age and other diversity factors** to inform actions, with participation by staff, partners and participants;

2. Articulate how programming will work across all three domains of the **Gender Equality Framework** and the **Governance Programming Framework**[11], explicitly **state gender equality results** and include gender sensitive **indicators** for every stage of the project or program cycle;

3. Include a **gender strategy** or gender action plan outlining roles, responsibilities, funding, work plans and accountability to meet gender requirements;

4. Identify potential programming risks and take steps to **mitigate unintended consequences** of backlash and gender-based violence, regardless of sectoral focus, especially in fragile and conflict contexts;

5. Form **partnerships with women's rights** movements to better collaborate towards shared goals and elevate the voice of marginalised people;

6. Undertake **participatory gender reviews** of projects or programs, document best practices and challenges, and create **mechanisms for cross-learning** within CARE and with partners;

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10   Does not have to be a separate process, however any situational analysis or formative analysis must include a gender lens.
11   GPF - building consciousness among marginalised groups, giving voice to inequalities and building skills for collective action; working with powerholders to be more responsive to the rights of marginalised people of all genders; and facilitating dialogues between power holders and marginalised groups.

To ensure that the approach is systematically applied in CARE's work, we need:

*   Enhanced **staff capacity** (commitment, understanding, know-how, resources);

*   Stronger **institutional accountability and leadership** to the approach;

*   An **organisational culture** that enables and rewards this work.

Refer to list of organisational enablers in Annex 2 for what this requires.

TWO KEY RESOURCES TO HELP TEAMS UNDERSTAND THE QUALITY OF OUR GENDER EFFORTS:

*   The Gender Continuum is a conceptual framework to reflect on the extent to which programming is gender transformative. The continuum has five points: from harmful on the left to transformative on the right (refer to the **Explanatory Note on CARE's Gender Focus**, 2012, for more details and project examples). The Gender Marker tool supports teams to assess where they are on the Continuum and move towards transformative programming. It is applied to both humanitarian and long-term development programs. Find out more about Gender Marker **here**.

*   Gender audit or organisational assessment tools will tell us how much we have integrated gender in our HR policies and processes and organisational culture. Find out more about Gender Audits and organizational assessment tools **here**.

GEWV: A CENTRAL ELEMENT OF THE CARE 2020 PROGRAM STRATEGY

The **CARE 2020 Program Strategy** outlines CARE's belief that strengthening gender equality and women's voice is one of three elements of CARE's approach to addressing underlying causes of poverty and tackling social injustice, along with promoting inclusive governance and increasing resilience. While efforts are currently starting to bring together the frameworks for these three elements of the CARE approach under one common Theory of Change, these frameworks already have strong connections. This section highlights the main ways in which GEWV is connected with or applies to the different elements of the CARE approach and the three CARE roles (Humanitarian Action; Promoting Lasting Change and Innovative Solutions; and Multiplying Impact). Further details on how GEWV can be integrated across the four priority Outcome Areas can be found in Annex 3, and in some of the highlighted examples under Section 5 below on core models and innovations.

The CARE approach

Gender and **governance** are both fundamentally about power relations, ensuring that people of all genders across different life stages have equal rights and opportunities to live a life of their choosing. Both the Gender Equality Framework (GEF) and the Governance Programming Framework (GPF)[12] emphasize the need to work on individual and collective agency and empowerment, relations between groups and power-holders, and the broader structure and enabling environment. Both frameworks highlight the need to work at non-formal levels, such as social norms, as well as formal institutions. Given women's marginalisation from public decision-making roles in most contexts where we work, our governance work particularly (but not exclusively) focuses on women's voice and collective capacity to negotiate and claim their rights. Including diverse women and men in public planning and decision-making adds value to informing services that are more responsive, draws from the knowledge, perspectives and ideas of diverse communities,

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12   See more in the Inclusive Governance Guidance.

and ultimately helps realise rights more effectively for a broader set of people. Our gender and governance work needs to promote women's collective actions by strengthening women's organisations and reinforcing women's agency within non-women's organisations, building relations and partnerships among women's organisations and between them and potential allies, and addressing structural barriers to women's participation through their representatives both in civil society as well as in policy change and implementation processes.[13] Particular attention needs to be paid in our work in gender transformative inclusive governance to: a) diverse forms of marginalization (or 'intersectionality', where women experience gender inequality in different ways depending on their class, ethnicity, age, or able-bodiedness, sexuality and sexual identity, amongst other aspects); b) the challenge of backlash at household, community, and other public levels, in response to women moving increasingly into public spaces; and c) the need to take into account women and girls' use of time, particularly unpaid domestic work, and ensure that increased meaningful participation in governance spaces does not add to the care burden faced by girls or women.

Increasing **resilience** focuses on supporting communities and marginalised households to cope, adapt and transform in response to adverse changes and shocks, arising from disasters, conflict or climate, political or economic stresses. CARE has developed an **institutional framework and Theory of Change** for resilience, drawing together thinking on disaster risk reduction, climate change adaptation and conflict sensitivity. Inclusive Governance, and Gender Equality and Women's Voice, are central pillars to CARE's Resilience approach. It requires that we:

- Integrate gender analysis in vulnerability and capacity assessments, addressing different levels of vulnerability, capacity, impact and resilience among boys, girls, men and women in various social groups.

- Develop programme strategies design and implementation, on differentiated risk analysis for women, men, boys and girls.

- Promote women's voice in resilience-building interventions, focusing on marginalised women.

- Work on individual and collective agency, and on empowerment, power dynamics and relations between groups and power holders, and the broader structure and enabling environment, through the lens of vulnerability to risks and shocks.[14]

CARE's roles for fighting poverty and inequality

CARE's goal in **humanitarian action** is to be a leading humanitarian agency known for particular expertise to consistently reach and empower women and girls affected by humanitarian crises. CARE's key focus in humanitarian aid is to save lives. We believe this cannot be achieved without understanding and responding to the different needs and capacities of all genders and life stages, which taking a gender equality focus enables us to do. CARE is committed to making emergencies work for everyone through its four-step **Gender in Emergencies approach** which underpins our four core technical areas of expertise: WASH, shelter, food security and livelihoods, and sexual reproductive health. CARE brings a longer-term view to its humanitarian work, including supporting people of all genders[15] to be more resilient in the face of disasters, conflict and protracted crises; connecting humanitarian preparedness and response work with recovery and longer term development. Crises and emergencies compound gender inequality and poverty and also provide a window of opportunity to be more transformative[16]. While acknowledging that gender transformative approaches will likely look different in crisis settings, humanitarian crises can also have a fundamental transformative effect on deep gender

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13   See Strategic Impact Inquiry brief on supporting women's organizing.
14   Increasing Resilience Theoretical Guidance Document for CARE International, December 2016, page 12
15   There is increasing focus on groups with diverse Sexual Orientation and Gender Identity (SOGI) in humanitarian response e.g. Nepal gender and protection overview 2015; Yemen Rapid Gender Analysis 2015; CARE Jordan case management Standard Operating Procedures 2015.
16   For example, in transition contexts being more deliberate in supporting local social movements and alliances in advocating at national level for political reforms that realize women's human rights, e.g. CARE Afghanistan's work with Afghan Women's Network and CARE Egypt's work with Network of Women's Rights Organisations

norms which, if encouraged and sustained, can have a positive impact on individuals, communities and states. CARE's humanitarian work provides an opportunity to address gender based violence and other protection challenges faced by women and girls[17] and promote women's voice. CARE will continue to engage in women's peace-making, peace-building and post-conflict governance and reconstruction processes[18]. CARE must use its humanitarian role to also transform the systems and institutions providing humanitarian relief by engaging with the humanitarian architecture and the cluster system for gender transformative work. This requires engaging in the GBV and Gender and Protection working groups. CARE's southern and local partnerships are critical for ensuring that voices from insecure communities are amplified and that the dominance of external actors (INGOs; UN etc) in setting the agenda is balanced.

Integrating GEWV is also essential for CARE's role to promote **lasting change and innovative solutions**. For change to be durable, CARE's Gender Equality Framework emphasises the need to build agency, change relations and transform structures (refer to Section 2). This requires change at multiple levels – formal and informal – including engaging social norms, the unspoken rules that influence human behaviour. CARE programming has wider impact and deeper influence when we are able to positively influence social norms change. This requires experimenting with an innovative mix of methods that foster communication, and harness the rich creativity of communities we engage to promote healthy relationships and expand choices and options for women and girls.[19] It also requires that the institutions and structures that support change need to be enabling, and stakeholders (from the public sector, private sector, and civil society) need the capacities and incentives to sustain change, as well as to adapt to future changes and shocks. Equally, innovative approaches across all CARE programming areas are developed with a view to future scaling up, and so involving key stakeholders is essential for creating their ownership and support for the institutionalisation of proven models. We also believe that a critical role for CARE is to work with partners to test new ways of addressing critical problems of inequality, discrimination and social injustice, learning from our experience around the world and adapting approaches to different contexts. We therefore need to promote innovation in the area of GEWV (see further details in Section 5 below).

CARE seeks to **multiply the impact** of its direct development and humanitarian interventions in several ways, such as promoting replication and adaptation by others and advocating with governments, the private sector and power holders for scale up and policy implementation/change. As noted above, scaling up requires that key stakeholders actively engage to support the adaptation, replication or expansion of proven models. Where we promote innovative approaches in our GEWV programming, we also then need to apply strategies to multiply impact to enable these innovations to be taken to greater scale. Advocacy and policy influencing are core strategies, both to strengthen GEWV and to multiply impact, and so require teams working on advocacy and gender to work closely together, at national and international levels. There is huge potential for broad reach and impact if we are able to engage across all levels and with a diversity of stakeholders from community to global. CARE advocates for women and girls' voices to be heard, and works to support feminist solidarity and advocacy for women's rights and leadership. In strategically engaging across levels, there is huge potential for a broader reach and impact from CARE's work by enabling women's voice to influence decision making from communities and civil society organisations to national levels and beyond, thereby shifting social norms as well as influencing policy enactment and implementation. CARE must amplify the voices from the grassroots level, including civil society, women's organisations and alliances by supporting their participation and pushing for their own access into decision making processes and forums. Women's rights organisations need to define the issues that are important to them, develop their own strategies and advocate on their own behalf. CARE's **Advocacy Handbook** provides important guidance, for developing, implementing, and monitoring and evaluating advocacy strategies, as well as managing the risks that are inherent in influencing work.

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17 For example, around early marriage in the Syrian response in Turkey. Also see Guidelines for Integrating Gender Based Violence Interventions in Humanitarian Action, IASC (2015).
18 See CI Advocacy Handbook, specifically Case Study 24 (page 29) related to CARE's work around UN Security Council Resolution 1325.
19 Examples include how social media campaigns highlight the issues of men's violence against women in Norway, Laos and Cambodia; and street art and hip hop in the Balkans to promote more equitable constructions of masculinity with adolescents.

CORE MODELS AND INNOVATIONS

CARE's strong evidence base (e.g. SII) emphasizes that programming for gender equality and women's empowerment requires fewer formulas, and a deeper commitment to understanding how gendered power relations change in context, over time. CARE believes gender equality and women's empowerment are about societal change, and not just individual change, so we need to build programs with longer time frames, support action in communities and beyond, link and facilitate strong partnerships and support for social actors, and retain a level of agility since we can't predict or control the pathways that social change will take.

The core models, or evidence-based examples of how CARE promotes GEWV, can be grouped in four main programmatic areas summarised below (See also: The CARE Gender, Power and Justice Primer). Annex 4 provides more detailed explanations and examples of the core models and innovations that CARE applies to its gender work categorized by Agency, Structure and Relations dimensions.

1. Strengthening Relationships and Solidarity Groups:

- Village Savings and Loans Association (VSLA+) Model: The purpose of the original VSLA model is to increase vulnerable women's economic empowerment, while serving as a platform for increasing awareness on different human rights related topics as well as increasing self-esteem and confidence. Building on this, the VSLA+ Model, developed in 2013, facilitates the creation of VSLA networks at higher levels up to the national arena, while providing different kinds of support to women based on their specific demands (leadership training, institution building, conflict resolution, etc.). Each level is enabled to become the natural counterpart of the local, district, provincial and national authorities to foster women's social and political participation. In the POWER project in Cote D'Ivoire, CARE has added gender action groups in each village, made up of village leaders, women and men, etc. to discuss generally all things gender and to act on village issues as identified.

This leaves the VSLAs to still discuss some gender issues and to focus on savings, loan and business, while the process of community change is done in the gender action groups, similar to Ethiopia where VSLAs and Social Analysis and Action groups run in parallel;

- **The Pathways program** builds on VSLAs and other existing collectives to support Farmer Field and Business Schools (FFBS) with women farmers. The project focuses on improving the productivity and profitability of poor smallholder women farmers by helping empower women to fully engage in agricultural systems. FFBS provide training that follows the seasonal cycle, so that farmers can apply what they are learning (about sustainable agriculture or market engagement) in real time and includes specific training modules on gender to create an understanding of workload burden, access to and ownership of resources, gender-based violence, household decision making and power analysis. Some sessions engage men and boys to support women's empowerment and changes in gender relations; similar sessions also involve whole communities;

- In Benin, the **Nutrition at the Centre** project engages husbands through men's VSLAs, grandmothers and traditional leaders to influence feeding and sanitation practices, especially for infants and young children, and hold dialogues about gender norms. This responds to the reality that husbands make purchasing decisions and grandmothers influence the types of food that pregnant women and children eat;

- EKATA groups: The child malnutrition program in Bangladesh, Shouhardo, used a combination of engagement strategies including women's empowerment through **EKATA groups** that created a safe space for women and girls to discuss real-life problems, gain literacy and numeracy skills and learn about and act collectively on gender issues like child marriage, dowry and domestic violence;

- CARE's **global learning brief on engaging men and boys** (p.4) identified the elements common across our work including: [a] conscientisation, [b] intimate dialogues, [c] building the base, [d] stepping out, stepping up, [e] alliances for advocacy; synchronized across all elements. This could be useful for teams to determine the most appropriate strategies and models to apply;

- Programs like **EMERGE**, used economic initiatives as an entry point to work more closely on gender with households. It provided training to married couples to enhance their communication with respect to matters such as money management, positive parenting, support for household work and decision making. Through this project, male change agents engaged with political and religious leaders to create space for a dialogue about GBV and develop alternative definitions of masculinity;

- **Journeys of Transformation** in CAREs Rwanda, Uganda and Burundi is a model that invites men and couples to reflect on rigid gender norms, to examine their personal attitudes and beliefs, and to question traditional ideas about household decision-making and division of labor;[20]

- **Young Men Initiative** in CAREs Balkans, DRC and Burundi is a ground-breaking program working with young men to deconstruct masculinity in their cultures and determine how gender norms and male socialisation lead to inequitable attitudes and behaviours;

- **Abatangamuco** in CARE Burundi, is a social movement of men supported by their wives or partners who speak out to their communities about their own transformation. Positive male change agents share their stories of positive personal change with their peers and communities to help influence others to critically reflect on and change their own beliefs and behaviours around violence and respect for women and girls;

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20   CARE and Instituto Promundo are carrying out a Randomized Control Trial of the Journeys of Transformation methodology in Burundi, starting in 2014, with results expected in 2018. CARE Rwanda is doing a RCT to test a combination of Journeys of Transformation with SASA in partnership with The London School of Hygiene and Tropical Medicine.

- **Husband schools** in Niger, which has been implemented by UNFPA as well as CARE, bring men over 25 together to discuss health issues, discuss how to support women's participation in community life and develop action plans;

- **Family Business Management Training (FBMT)** in Papua New Guinea works with smallholder coffee producers' families that typically run their business at the household level, sharing tasks inside the family. Women bear the burden of both productive and reproductive work, while men control the budget decisions. The FBMT engages both men and women to improve their financial and management skills and, at the same time, share the workload inside and outside the house in a more equitable manner that makes the whole family happier and more productive;

- **CARE's Tipping Point** project in Bangladesh and Nepal supports adolescents, their families and communities to promote girls' rights and dismantle the drivers of child, early and forced marriage (CEFM). Taking a developmental evaluation approach, this project began with intensive reflection and dialogue with staff and partners on topics of gender, sexuality and power. Its programming was formed based on community participatory analyses in project areas to identify the characteristics and nature of child marriage. Based on analysis, Tipping Point worked through adolescent groups for boys and girls to build leadership, support peer relationships and take action to prevent CEFM. Mobilization among adolescents – through theatre, religious festivals, sports and cooking competitions for boys – aimed to engage social change work at the community level to begin shifting the conditions that reinforce child marriage practices. In addition, Tipping Point worked to build relationships between parents and children to strengthen connection and accountability for child rights within families. At key moments, the project also engaged with schools, religious leaders and elected officials to promote and support girls' rights;

- CARE's Strategic Impact Inquiry reviewed the models used to **support women to organise**, outlining four approaches: [a] Organising women as recipients of knowledge, goods and services; [b] Working with women in groups to promote economic development (particularly VSLAs); [c] Leveraging groups to raise demands for gender equality; [d] Supporting groups to mobilise for women's rights.

2. Social Norms Change:

- **The Farmer Field and Business School** (FFBS) is an innovation used in the **Pathways program**, being implemented in Bangladesh, India, Malawi, Tanzania, Mali, and Ghana, to structure market, gender, agriculture, and nutrition dialogues along the agriculture calendar creating structured spaces for reflection within agriculture programs;

- **Social Analysis and Action** (SAA) is a model that uses a facilitated process through which individuals and communities explore and challenge the social norms, beliefs and practices that shape their lives and health and can be adapted to other sectors;

- The **SASA!** Model, developed by Raising Voices – a non-profit organisation based in Uganda - seeks to inspire, enable and structure effective community mobilisation to prevent violence against women and HIV/AIDS and requires strong social empowerment movement, community based organisations and activists to criticise government;

- **The Tostan approach** – Tostan, a West Africa-based NGO working in six countries within the region provides community education to groups of 25-30 adults, and in parallel to groups of adolescents. Multiple topics are covered, including hygiene, sexual and reproductive health, decision-making, leadership and child development. Each participant is expected to "adopt" a friend or relative to share and discuss the information learned in these sessions. The curriculum draws on positive traditional practices to ensure sessions are relevant, participatory and empowering. Group actions are often accompanied by a public declaration;

- **Stepping Stones**, a training package developed by **Strategies for Hope**, focuses on gender communication and HIV, runs intensive (50 hours) training sessions that use participatory learning approaches, role play and drama to increase knowledge and stimulate critical reflection on contraception, risk taking, sex and love, gender-based violence, and one's own behavior. Parallel sessions are run for women. Older men and younger men are able to have separate discussions, and men have the opportunity to hear perceptions of women. Skilled male facilitators are an important ingredient of success;

- CARE's **Information Volunteers Program** in Turkey encourages members of refugee communities to become champions on raising awareness on the negative impacts of child marriage, supporting of positive community-based role models, promoting referrals and access to psychosocial support for GBV survivors, and organizing events that change opinions and practice towards child marriage. Volunteers conduct house visits, peer-to-peer education sessions, and group discussions on health and psychosocial risks of childbirth to girls;

- CARE also had experience working with the media to create new narratives. Find out more **here**.

3. Leadership and Collective Action:

- There are several examples of CARE's work at local and national level supporting women organisations to advocate for their agenda, working with and through civil society coalitions in influencing national actors: In Bolivia, Ecuador and Peru, CARE has supported **domestic workers' associations to advocate for their rights**, specifically for the ratification of International Labour Organization Convention 189 which, for the first time, mandates state supported protection to ensure decent work for domestic workers. In Sri Lanka, CARE engages with the Women's Parliamentary Caucus on legislative reform (violence against women, UN Security Council Resolution 1325). Other examples include engagement with the **Afghan Women's Network**; and **natural leaders in Bangladesh**;

- The **Great Lakes Advocacy Initiative** (Rwanda, Burundi, Uganda and DRC) models how to bring policy changes on GBV through evidence-based and bottom-up advocacy with proven impact at local, national, regional and international levels;

- **Gender Action Learning Systems (GALS)** is a community-led empowerment methodology for life and livelihood planning, collective action and gender advocacy for change; it supports a change of power relations vis-à-vis service providers, private sector stakeholders and government bodies. GALS starts with women and men as individuals, and helps them map a personal vision for change in their lives. Diagram tools are used to help people think through how to get from their current situation to their goals; a key focus is breaking through gender-based barriers that keep women and men from achieving their goals. A "gender balance tree" is used to analyze gender inequalities. The model can scale up through a community to form collective visions. The highly participatory processes and visual tools make the concepts easy to follow, even for people who don't read or write. Since GALS is flexible, it can be adapted to value chain development, for example, using market and value chain maps, and business road journeys;

- CARE's **Girls Leadership Framework**, applied across 28 countries, recognizes that quality education is foundational and the girls' leadership projects typically build upon CARE education work.

4. Inclusive and Accountable Institutions:

- CARE's work to promote lasting change also focuses beyond the communities with whom we directly work to influence broader social change at scale. Refer to the **CARE International Advocacy Handbook** for details on CARE's strategies, models and innovations outlining how CARE collectively has successfully shaped national, regional and global agendas;

- Community Score Card (**CSC**) is a citizen-driven accountability process to bring together community members, service providers and local government to identify underlying barriers to effective, high-quality service delivery and develop a shared improvement plan in any sector entailing service delivery. Originally developed by CARE Malawi, CSC has become an internationally recognized model for improving service delivery, and has been a central component of many of CARE's governance programs across sectors globally as well as being taken up by the World Bank. Note that in order to address gender issues the scorecard process needs to uncover how gender biases and perceptions affect the service by inserting and scoring a gender equality criteria. To ensure the CSC process is more gender-sensitive and addresses gender issues refer to the CSC **Implementation Guidance Notes**, specifically: Ensuring the CSC process is gender sensitive (pg.20-21) and Ensuring inclusion and participation of marginalised groups in the CSC process (pg.22-23);

- The **Human Rights Education Program (HREP)** for Women, a project of Women for Women's Human Rights and the Umraniye Women's Centre, took part in poor urban areas of Turkey with its first pilot in Umraniye, a poor area on the outskirts of Istanbul. Heavily informed by action research with women across Turkey, the program developed a participatory curriculum that lasts 16 sessions. HREP used a human rights framework to facilitate sessions, touching on civil, economic, political, sexual and reproductive rights, as well as topics like child rights, ending gender-based violence and gender-sensitive parenting. HREP worked with closed groups of women and eventually linked with the state to implement the program via trained social workers who facilitated HREP in community centres in cities across the country. Through this space, women involved in the project organized at the grassroots level to advance their needs and interests, and HREP took an active role to support HREP cohorts in networking, fundraising, capacity-building and linking with broader movements for women's rights.

APPLYING GEWV ACROSS THE PROGRAM CYCLE

All CARE offices are required to meet the Gender Standards laid out in the CI Gender Policy programmatically and organisationally. This section provides a set of resources to help teams implement the Gender Standards, grouped across the program cycle, as well as organisational resources. It is not intended to be exhaustive but represents much of CARE's gender learning. Therefore it seemed valuable to document this learning in one place, so that teams can select the resources most helpful to their needs.

GENDER AND POWER ANALYSIS: all projects and programs should integrate GEWV into their assessment and analysis as a mandatory feature across our work either as part of a situational analysis or a separate activity. CARE has a range of guidance and tools to support gender analysis for humanitarian and development programming as well as analysis for organisational change and advocacy purposes:

- The **Gender Toolkit** is a comprehensive online resource to support gender analysis in programming, organisational change and advocacy. CARE's **Good Practices Framework for Gender Analysis** outlines eight core areas of inquiry to support deeper analysis of gender and power relations;

- The **Gender in Emergencies Guidance Note on rapid gender analysis** provides guidance for use in rapid response situations and can be built up progressively over time;

- The Gender Climate Vulnerability and Capacity Analysis provides an analyses guide for analyzing vulnerability and capacity to adapt to climate change and build resilience to disasters at the community level, with a particular focus on social and in particular gender dynamics. Note: the original CVCA was gender-neutral. See **GCVCA Practitioners Guide**;

- Beyond programming, **organisational gender analysis** or gender audits form a fundamental part of integrating gender within CARE with implications on how we recruit, train and assess staff, gender sensitive policies

and practices across budgeting, partnerships and organisational priorities. See **CARE Canada**'s gender audit frameworks and tools.

DESIGN: There are a range of guidance and learning briefs which will be useful for teams to review the relevant topics when designing new projects and programs:

- The **CARE Gender, Power and Justice Primer** serves as a curated collection of basic information on the state of gender justice globally. It compiles statistics and evidence around what we know of gender and rights. It also outlines global commitments as well as promising programmatic practices to advance gender justice within international development and humanitarian contexts;

- **Strategic Impact Inquiry briefs** on Women's Empowerment related to crisis; group organizing strategies; violence; engaging men; village savings and loan associations; and HIV and AIDS prevention interventions;

- **Engaging men and boys learning briefs;**

- **Guidance for GBV Monitoring and Mitigation within non GBV-focused programs;**

- To include consideration of LGBT issues in humanitarian and development programming, advocacy and strategic partnerships, refer to **LGBT Vision for Action** (USAID);

- **Gender Peace and Conflict Training Manual;**

- **Gender in Emergencies Guidance Note series** including gender in the **emergency preparedness planning process** and **integrating gender into project design**;

- CARE **Advocacy Handbook** which provides steps in the advocacy planning and implementation cycle and case studies;

- The **CI Resource on Civil Society Collaborations** includes an inspiring list of many innovative roles CARE can play as well as principles to bring partnerships to a new level.

IMPLEMENTATION: Key guides for gender integration include:

- **Gender Orientation Pack** outlines key gender resources for humanitarian and development programming, describes the gender networks at CARE and explains how to access technical support;

- **Recruiting gender balanced teams** is a publication equally relevant to humanitarian and development;

- The **Gender Marker** tool supports teams to assess where they are on the Gender Continuum and move towards transformative programming;

- CARE India has developed a guidance note on **Gender Transformative Change** (GTC) integration into Detailed Implementation Plan (DIP) of projects across the domains of health, education, livelihoods;

- Gender action plan or **GAP** is both a tool and a process for planning a gender sensitive response. It is now a mandatory requirement for receiving CI Emergency Response Funds;

- To manage unintended consequences of backlash and violence, regardless of sectoral or thematic focus, refer to **ethical considerations to mitigate harm. Do no harm** approaches can also guide the analysis of unintended impacts;

- To facilitate dialogues between power holders and marginalised groups to build consciousness and give voice to inequalities, and build skills for collective action, refer to **Inclusive Governance Guidance**, **CSC** and **gender**, **promoting policy change**;

- To forge strategic partnerships with women's rights movements to inform our work, build the voice of marginalised groups and identify ways to ally with movements to contribute to gender equality, refer to **women's organizing brief** and CARE **Advocacy Handbook.**

MONITORING, EVALUATION & LEARNING: A global set of indicators and associated guidance for measuring impact and change in alignment with the CARE 2020 Program Strategy is available **here.** This includes indicators for each outcome area of the Program Strategy, the elements of the approach as well as the roles in projects and programs. This also includes a set of **9 supplementary indicators for GEWV.** As well as the global impact-reporting system, programs will still need to respond to their specific monitoring, evaluation and learning needs, in most cases related to requirements of donors/stakeholders. Other resources include:

- **Global MEL brief;**

- **Guiding notes, tools and indicators on monitoring changes to gender relations;**

- **CARE Canada's MEL library** for practical, field-based gender guidance, tools and tips;

- **WEIMI Guide** (Women's Empowerment Impact Measurement Initiative) helps teams to link project-level M&E to impact measurement systems at program level;

- Current mechanisms for generating, sharing and applying learning across CARE include the **Gender Wiki**, **Program Quality Digital Library**, CI Gender Network, Gender Working Group and other gender-related forums[21]. Examples of cross learning include **Strategic Impact Inquiry site**, **program review tools**, examples of joint learning on **GBV/household relations**, **GBV/education**, and **gender/climate change**.

ORGANISATIONAL CULTURE AND CAPACITY BUILDING: several resources are useful here:

- **GED training modules** in multiple languages **here** - a crucial starting point for effective programming, and a niche field of work around which CARE has invested and innovated over the past two decades. Inner Spaces Outer Faces (**ISOFI toolkit**) also provides tools to integrate conversations on gender/sexuality into personal and work lives and program planning/implementation;

- **Mainstreaming Gender – Synthesis of Good Practice** provides teams with guidance on benchmarks for CARE as we define our global gender structure;

- **GED strategies & examples** and **organisational materials & tools CARE Bangladesh**;

- **CARE Canada's gender audit frameworks and tools**;

- CARE is committed to reporting to beneficiaries, donors and the public on gender progress in CARE's work e.g. **implementation of Gender Policy**, **GBV Global Impact Report.**

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21 E.g. GBV, Women Peace & Security, Engaging Men & Boys, Impact Measurement. Check in on the Gender Wiki for updated listings.

PARTNERSHIP

At the heart of Gender Equality and Women's Voice is an assumption that transforming power dynamics through political processes requires us to build solidarity and work collectively in partnership with others. We stand in solidarity with the poorest and most marginalised and leverage our unique role and reputational capital as an international NGO to broker negotiations with power holders who are critical to achieving changes in institutional policies and practices. Creating an enabling environment and opening up spaces for women's rights and gender justice organisations and civil society is a very important role that CARE can play, particularly in relation to gender equality issues.

WHO DO WE PARTNER WITH?

- Local and national women and girls' rights organisations

- Men and boys networks for gender equality

- LGBT rights organisations[22]

- Other civil society organisations such as formal NGOs, informal networks, faith based organisations, social movements, labour unions, trade associations, non-profit media and think tanks

- Local and national governments who have responsibility to fulfil rights and alleviate poverty through policy change and enforcement

- Regional and global networks of women's rights activists[23] and other civil society allies

- Private sector actors

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22 Or specialized consulting agencies E.g. Stonewall, HIV/AIDS Alliance or others that have this expertise.
23 E.g. Women's International League for Peace and Freedom (WILPF) and Global Network of Women Peacebuilders (GNWP).

Globally, civil society organisations or CSOs (particularly those at the grassroots) are experiencing shrinkage of space and power and face increased risk to challenge power holders.[24] Meanwhile, the global financial crisis and austerity measures in the Global North have increased competition over the limited resources available for development and humanitarian crises, at the same time that resources for development previously allocated to CSOs are increasingly diverted to address humanitarian crisis or allocated to global private sector actors and foundations where accountability towards international standards and human rights remains limited. Roles are increasingly unclear between international NGOs, UN, CSOs, military and diplomatic missions as well as private actors. This competition and 'mission creep' undermines the ability of actors to work together and the increasing bureaucratisation of aid renders many local CSOs unable to compete for resources. The consequences are that voices of women's groups are unheard. There are some encouraging signs with some donors placing greater emphasis on funding local organisations. CARE must use its partnerships to become an advocate to challenge the marginalisation of women's organisation and trends opposed to increasing downwards accountability and ensure adequate investment in local CSOs.

CARE's added-value in terms of Women's Voice is that we have a history of relationships and programming with women at grassroots level, and can use it for example to help national women's rights organisations (often capital city based) to build their outreach and constituency with those women in rural areas. In addition, women's rights organisations often focus on civil and political rights (or if they are working in development sectors, it is at small-scale). CARE can add value to support and scale-up their influence. Significant attention has been paid across CARE to advancing partnerships to date. We need to continue to connect and innovate toward deeper and more long-term partnerships especially in engaging perspectives from the Global South. We can consider new business models by partnering with others, and encourage non-traditional partnerships such as broad informal social movements, foundations or global private sector actors for impact at scale.

In order to scale up our impact on Gender Equality and Women's Voice, we need to clarify our Theory of Change to strengthen civil society in each of the contexts we have a presence, with a special emphasis on women's organisations and networks, and civil society organisations promoting women's rights. If we truly want to support the empowerment of women over their own development, we will have to prioritise and increase direct and long-term core support to partners genuinely and legitimately representing women and working for gender equality, over sub-granting to these organisations to deliver towards our own objectives.

Each CARE office is encouraged to identify a minimum of two priority strategic CSO partners on women's rights and gender justice (which might include Engaging Men and Boys or LGBT rights groups) to build a long-term partnership across multiple projects/multi-year linked to one or more of the Program Strategy Outcome Areas. It is recommended that the two 'strategic partners' be at the following levels: [1] At least one national-level NGO/CSO with capacity to engage in advocacy and multiplying impact; and [2] at least one grassroots-level community-based organisation working in areas relevant to prioritised programs (e.g. linked to one or more of the Program Strategy Outcome Areas).

In working in partnership, we recognise:

- It starts with us[25] as we want to become a partner of choice, selected by others for what we can offer. This means we need to:

    - Build clear and committed leadership towards partnership;

    - Develop a global partnership strategy firmly rooted in the diversity of local and regional context where we have presence;

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24   Mandeep Tiwana; Civicus, quoted in Independent Press Service here.
25   And it can also end with us, as demonstrated by CARE Sri Lanka which transformed its institutional nature to become a partner of choice as a social enterprise consulting for other development actors.

- Transform our own systems and processes to render them less bureaucratic, less unequal in power and more inclusive to facilitate flexibility in real time;

- Invest in capacity building of staff (ours' and our partners') in partnering skills and give them continuous support;

- Develop a working culture that is enabling for partnerships through incentives, revised accountability lines and best partnering practices.

- We should approach partnerships as we approach programs, setting and committing to clear long term goals rooted in a jointly developed Theory of Change, allocating the relevant resources for the partnerships to achieve their objectives, and constantly monitoring, reviewing and evaluating partnerships in order to correct trajectories when required and demonstrate collective impact;

- Each partner has different skills and capacities and these can complement and be complemented by the skills and capacities of others. CARE's main role is to support, facilitate and capacitate CSOs to conduct their own advocacy based on their strategic plan. We should approach partnership being open to mutually identify how we can work together to achieve common goals, which means facilitating partnerships as networks of peers with multidirectional relations, rather than as portfolios of partners with only bilateral relations with us;

- Each partner has different access to and influence over power holders; we should respect this and avoid crowding each other out or competing for space, and instead join forces in inclusive and diverse consortiums in which the benefits of access and influence of some members are shared with all;

- We should seek to partner on an equal basis, with full self-awareness of our strengths and weaknesses, listening to our partners and maintaining an open dialogue and a readiness to learn from one another with mutual respect of each other's work and positions;

- Partnership can and should include relationships where no financial transaction is involved;

- Where grants are made, we should not only recognise that organisations require 'core support' to survive and that we should offer them this support and call upon our donors to do so, but we should be firmly convinced and advocate that investing directly in a strong, diverse, accountable and efficient civil society that considers gender equality as a core value, is key to progress. In order to do so, we should invest in depth, with a limited number of partners over a long period of time through multiple funding streams;

- Our voice should not replace the voice of women and girls who experience poverty and injustice in the countries we work; we must facilitate power holders to hear their voice first hand, acknowledging that we can also work directly in our influencing role;

- We should identify partners with strong gender equality programming skills to gain and learn from their experiences and work to increase their influence;

- We should avoid setting the agenda; we should promote genuine joint decision-making, enabling others to set the agenda and being ready to follow; we should proactively invite others' feedback and honest appraisal of our efforts before we start assessing our partners.

There are a number of resources that can help teams assess and plan for effective partnerships, including the Gender in Emergencies Guidance Note on **gender sensitive partnerships** and **CI Resource on Civil Society Collaboration** with associated tools and resources.

CONCLUSION

Over the last decade, CARE's approach to women and girls' empowerment and the evidence base we have accumulated has considerably advanced our thinking on what works to advance gender equality. Our conceptual frameworks, tools and vocabulary have become much more nuanced and robust. This guidance therefore sets out CARE's approach to transform gender norms, structures and relations with a focus on the empowerment of women and girls complemented by synchronised activities with men and boys that advance gender equality and women's voice. This document sets standards for all CARE's humanitarian and development programs, policy engagement and advocacy priorities in the Global South and North as we work towards CARE's 2020 Program Strategy.

The Program Strategy provides the impetus to further deepen and broaden our gender goals and approaches. Additionally, it acknowledges that achieving GEWV requires major shifts in power, politics and justice. Stepping up CARE's efforts to strengthen leadership and accountability for performance on internal gender policies and reforms and increase capacities to deliver on our core gender equality mandate, complemented by excellence in gender programming, will ensure CARE's credibility and market position, among other things. This supports resource mobilisation from key donors who are willing to invest in effective actions towards gender equality. This in turn helps CARE meet its goal of supporting 150 million people from the most vulnerable and excluded communities to overcome poverty and social injustice by 2020.

Annex 1: Definitions

Gender: is not about biological differences but a social construct that defines what it means to be a man or woman, boy or girl in a given society. It carries specific roles, status and expectations within households, communities and culture. Individuals may also self-identify as neither male or female, or both male and female.[26]

Gender equality: the equal enjoyment by people of all genders and ages of rights, opportunities, resources and rewards. Equality does not mean that all genders are the same but that their enjoyment of rights, opportunities and life changes are not governed by whether they were born female or male.[27]

Women's empowerment: the combined effect of changes in a woman's own knowledge, skills and abilities (agency) as well as in relationships through which she negotiates her path (relations) and the societal norms, customs, institutions and policies that shape her choices and life (structures).[28]

Women's voice: the capacity to speak up and be heard, from homes to houses of parliament, and to shape and share in discussions, discourse, and decisions that affect women.[29]

Transformative change: interventions that seek to target the structural causes as well as the symptoms of gender inequality leading to a lasting change in the power and choices women have over their own lives, rather than just a temporary increase in opportunities.[30]

Synchronisation: coordinate activities with women and men together, as well as separately, in ways that complement and build on each other to positively transform individual behaviour and social norms in ways that support greater gender equality.[31]

Gender integrated programming: gender considerations must be integrated throughout all humanitarian and development programs and projects. This requires gender analysis at all stages: conception, proposal development, program design, implementation and monitoring and evaluation.[32]

Gender specific programming: strategic targeted initiatives or programme components to promote particular aspects of women's rights or address specific gender gaps.

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26   Explanatory Note on CARE's Gender Focus, 2012. English, Arabic, Spanish, Portuguese, and Nepali.
27   CARE International Gender Policy (2009), updated to amend 'men, women, boys and girls' to 'all genders'
28   Explanatory Note on CARE's Gender Focus, 2012. English, Arabic, Spanish, Portuguese, and Nepali.
29   World Bank Group (2014), Voice and Agency, Empowering women and girls for shared prosperity, page xv.
30   DFID PPA Gender Learning Partnership, 2015, What works to achieve gender equality and women's and girls' empowerment?, p 3.
31   Refer to IWDA's Toward transformation: synchronizing work with women and men for gender equality, 2012.
32   Gender integration definition adapted from InterAction. An excellent example is CARE's guidance on GBV monitoring and mitigation in non-GBV focused programming.

Annex 2: Organisational Enablers

Implementing a transformative gender approach requires gender integrated programmatic goals and strategies as well as critical organisational enablers – leadership, accountability, investment and innovation; without these, the organisation across all its parts, is putting itself at risk. If CARE does not step up its efforts to strengthen leadership and accountability for performance on internal gender policies and reforms and increase capacities to deliver on our core gender equality mandate, we will lose credibility and market position, among other things. This then undermines resource mobilisation from key donors and we lose ground to other actors that are increasing their capacities and organisational commitments to gender equality.

Integrating a gender approach requires:

POLITICAL WILL AND ORGANISATIONAL CULTURE:

- Strong, visible, active leadership that promotes gender equality tied to organisational outcomes.

- Reflect gender equitable norms in organisational culture (e.g. working hours, locations, flexible work practices, addressing unconscious bias toward specific leadership qualities, etc.);

- Foster staff space to question and debate power and inequality and link staff to management;

- Review/reform HR policies to reduce institutional gender bias especially recruitment/retention;

- Ensure equitable opportunities for professional growth and development;

- Gender balance and representation from the global South and women's movements across board and senior management, alongside initiatives that promote women's leadership in CARE;

- Make CARE a place that takes psychosocial wellbeing serious for program participants as well as staff, particularly those on the frontline such as humanitarian and GBV support staff.

ACCOUNTABILITY MECHANISMS:

- Identify women's rights organisations to provide advice, feedback and influence CARE;

- Articulate/implement mechanisms to ensure accountability to impact groups and partners;

- Resource/implement systems to prevent sexual exploitation and abuse as per CARE's PSEA Policy;

- Undertake gender audits and track/create budgets for gender training etc;

- Managers systematically demand and use gender data/information for decision-making and organisational change and monitor gender progress organisationally and programmatically.

INVESTMENT IN GENDER CAPACITIES:

- Internal capacity development work (personal, organisational, programmatic) is absolutely foundational to programming excellence, across functional areas and from Board level down;

- Apply best practice to allocating responsibility for applying a gender lens including capacities, leadership and accountability for designating gender skills in teams;

- Bring teams together for sharing and learning on programmatic and organisational gender best practice;

- Support capacities foundational to gender work e.g. facilitation, engaging power and politics, partnership, analysis/learning, GBV, fundraising and communications, advocacy, risk mitigation, contextual responsiveness; conflict, masculinities, gender in emergencies, allying with women's movements.

NETWORKING FOR GENDER INNOVATION:

- Support space for women to network and develop leadership with a critical power/justice lens;

- Strategic partnerships with respected global networks of women's rights activists (e.g. Association for Women's Rights in Development, Women's International League for Peace and Freedom, Global Network for Women Peacebuilders, NGO Working Group on Women, Peace and Security);

- Engage staff to be GEWV champions, leaders and supportive bystanders with diverse stakeholders;

- Invest in studies and knowledge generation for gender integrated development practice;

- Invest in staff incentives to learn and adapt lessons in promoting gender transformative outcomes.

MESSAGING AND INFLUENCE:

- Align constituency messages/brand with best evidence on gender transformative gaps and successes;

- Support and align with external social movement allies to advance our gender work;

- Use opportunities for CARE's unique role in policy spaces to influence policy-makers or governance bodies at all levels towards more gender-equitable policies;

- Build donors' capacities to understand and support gender-transformative resourcing and funding.

Annex 3: Integrating GEWV across Program Strategy Outcome Areas

This section outlines key aspects of what integrating gender equality and women's voice looks like across each of the CARE 2020 Program Strategy Outcome Areas.

CARE believes that change needs to take place and be sustained in all three domains of change of the Gender Equality Framework to achieve sustainable impact. In each of our Program Outcome Areas, we strive to not only achieve goals in relation to the 'sector', but to do so in ways that create more flexible roles for people of all/ diverse genders across the life cycle. This enables all individuals to live free from violence and ensure that they have productive, secure lives with control over their own bodies and decision-making, no matter their gender and sexual identity, nationality, class or occupation.

In particular, across the four Outcome Areas:

1. HUMANITARIAN ASSISTANCE

CARE does not just deliver material support during emergency situations but looks closely at the needs of people of all genders and life stages and provides equal access to such support.

In practice this means:

- The CARE Gender in Emergencies Approach[33] applies to all humanitarian work:

  1. **Rapid Gender Analysis:** Rapid Gender Analysis is a tool developed by CARE. It ensures humanitarians to have real-time sex and age disaggregated information, gender analysis, and practical insight into the effects of a crisis on women, men boys and girls. The **RGA toolkit** includes a step-by-step guide to conducting Rapid gender Analysis quickly.

  2. **Minimum Commitments:** The **Minimum Commitments** on Gender, Protection and Diversity are a tool meant to make gender sensitive and inclusive programming tangible, simple and practical. First used by country clusters, they became a key resource for the global WASH cluster that developed minimum commitments for the safety and dignity of affected people. CARE has been involved from the start in the piloting of the tool and is now working on widening its uptake.

  3. **Women Lead in Emergencies:** Women Lead in Emergencies is a pilot initiative from CARE to ensure women's voice influence every level of humanitarian decision-making. The Women Lead initiative works across humanitarian and development programming drawing on expertise from advocacy, localisation, gender, governance, social movements and girls' leaderships. Women Lead in Emergencies is a flexible four-step process to build women-led approaches whereby women's voices count.

  4. **Gender in Monitoring and Evaluation:** CARE and its partners need to find out if humanitarian action is leading to better programming for women, men, boys and girls. CARE has a multi-pronged approach to monitoring and evaluation including the CARE Gender Marker to review gender integration; gender in emergencies indicators; Gender in Crisis to look at the after-action review with a gender lens; and gender in emergencies evaluation.

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33   Under construction but will be posted here.

- Implementing the Minimum Initial Service Package (MISP) for reproductive health in crisis settings;

- Raising the concerns and voice of women and girls affected by conflict and disaster in policy engagement, advocacy messaging and community engagement, including through empowerment of female project participants and partnerships with civil society groups representing women from crisis-affected communities;

- Strengthen women's voice in humanitarian response not just limited to gender and GBV issues, as well as promote meaningful participation of women and men in all aspects of peace and security;

- Addressing masculinities and men's experience, including GBV, in humanitarian settings. Men are often under pressure to fulfil the gendered expectations and when they fail this they can resort to other measures, such as violence, to uphold their position.

- Working with and building mutual capacities for gender transformative work as a critical component of our partnership work, based on shared vision, values, learning and joint contribution of resources.

2. SEXUAL, REPRODUCTIVE AND MATERNAL HEALTH AND A LIFE FREE FROM VIOLENCE

CARE supports the achievement of sexual, reproductive and maternal health (SRMH) rights for women and girls as well as rights to bodily integrity and autonomy of choice. Our SRMH programming[34] embeds key rights principles – not just the right to life and to health, but also the right to reproductive self-determination and bodily integrity, and the principles of equality, non-discrimination and accountability. So our program innovations aim to create the conditions – personal, social and structural — that enable people to realise these rights.

Whilst issues of GBV[35] often overlap with SRMH, they do not necessarily. For example, systemic denial of women's rights to economic assets, our work under women peace and security, neglect of girls based on their gender, or forced conscription of men and boys into armed forces are all forms of gender based violence (GBV). Global programming evidence demonstrates that we cannot address issues surrounding GEWV without addressing GBV, so this is both an essential element of the CARE Approach as well as an Outcome Area in the Program Strategy. GBV is both a driver and consequence of gender inequality and clearly limits opportunities and support for those affected, acting as a threat to their inclusion in governance and development processes as well as humanitarian response. CARE's niche includes a focus on transforming root causes of GBV as well as integration of GBV work across programming as an essential component for increasing resilience and reducing risk.

In practice this means:

- Partnering with communities to identify, challenge and transform gender norms that restrict women's and girls' ability to realise SRMH rights and a life free from violence, and engage allies among local influencers and people of all genders for transformative change and gender justice;

- Mobilising women and girls to understand and claim their SRMH rights, through participatory models and approaches;

- Prioritising women and girls' voices in advocacy and policy debates to ensure that women and girls' lived experiences meaningfully inform development priorities, GBV preventions and response measures and SRMH policies and programs;

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34   See also the SRMH global strategy, July 2015.
35   See also the GBV global strategy, March 2015.

- Strengthening GBV prevention, protection and response in humanitarian action, and program innovation alongside GBV integration across 'sectoral' development work for durable outcomes;

- Systematically incorporating strategies and activities that prevent GBV and mitigate unintended consequences of our programming, including providing appropriate services for survivors;

- Addressing men and boys' own experiences of violence can be an important GBV prevention strategy by influencing social norms on violence, on masculinities, and creating more equitable relations across people of all genders, promoting open communication in intimate relationships and communities, and working to change gender relations;

- Taking a survivor-centred approach that strengthens justice for GBV survivors and addresses issues of impunity, redress and the pursuit of justice in a broader sense; and possibly a restorative justice approach that also focuses on the perpetrator and that person's needs while engaging other stakeholders to acknowledge and work on their needs all together;

- Understanding the different parts of our programming that contribute to 'a life free from violence' as one of the Program Strategy Outcomes: our work on women, peace and security through UN Resolution 1325, child marriage, female genital mutilation/cutting, human trafficking, etc;

- Sensitizing service providers, engaging law enforcing agencies on addressing GBV and advocating for enhancing investigation skills on sexual violence cases.

3. FOOD AND NUTRITION SECURITY AND RESILIENCE TO CLIMATE CHANGE

Food systems cannot be just and sustainable if they do not have gender equality and women's empowerment at their heart. Excluding and marginalising women from these domains also weakens the unique perspectives and knowledge they hold – particularly where household management and nutrition are primarily undertaken by women. In order to achieve CARE's vision of gender-just food systems[36], CARE will focus on transforming the underlying gender inequalities and social norms to build women's agency, form more equitable relationships at household levels, and create an enabling environment and equitable institutions for ensuring women's rights as human rights. CARE's work in relation to building climate resilience is not limited to the food and nutrition security context and there are also a number of overlaps and complementarities with gender equality in economic growth (i.e. transforming market systems; ensuring women's mobility and inclusive economic systems; promoting women's ability to negotiate for fair treatment and equal pay). Tackling the double injustice of climate change and gender inequality includes: fair and gender-equitable allocation of responsibilities and resources to tackle climate change and build resilience; work to strengthen community resilience to climate change; integrate gender into climate-sensitive activities; tackle social inequalities in activities in the face of climate-related disasters. Women's voice is also central to advocating for climate action, including building climate resilience for the poor as well as emission reductions.[37]

In practice this means:

- Ensuring comprehensive gender-sensitive climate capacity and vulnerability assessment in food and nutrition security programming;

- Ensuring the realisation of the right to food through equitable access to, and improved availability and utilisation of food. This will include using a gender lens when exploring, understanding and transforming processes of crop or breeding choice, cultivation practices; and marketing, purchasing, preparing and consuming food;

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36   As per A Vision for Just and Sustainable Food Systems: The CARE 2020 Food and Nutrition Security Strategy, May 2015.
37   See CARE's Double Injustice report, 2014.

- Ensuring equal access to water, land, pasture, forest and marine resources and inheritance and tenure rights for women, girls and marginalised peoples;

- Transforming market systems to ensure women's access to, control over and equal participation in and benefits from them; supporting cooperatives as livelihood strategies; understanding how value chains work and promoting women's roles in them (moving them higher up the value chain);

- Ensuring women's mobility and inclusive economic systems to enable access to productive assets, services, jobs and markets;

- Promoting women's ability to negotiate for fair treatment and equal pay;

- Engaging men and boys in a gender synchronised way for gender-just food and nutrition security;

- Strengthening women's collective voice in food policy decisions/implementation, agriculture and nutrition systems via collective action, access to information, resources and leadership training;

- Involving power holders to understand and challenge gender norms, and act in accountable ways to the rights and interests of women and girls;

- Building capacity in partner organisations to work for gender equitable outcomes;

- Strengthening strong and equitable asset bases; increasing individuals' equal access to resources, including inputs, information (e.g. market, price, climate), decision-making power, finance, natural resources, strengthening their adaptive capacity to climate impacts and ability to deal with loss and damage, and supporting recovery mechanisms that are accessible to both women and men, such as household savings and formal safety nets;

- Ensuring adherence to social and environmental standards and good practice to ensure women and girls access to incentives, benefits and rewards of agriculture and natural resource programs;

- Upholding the right of women smallholders to productive, equitable, resilient and sustainable farming systems and promote women's access to and control over relevant inputs appropriate to their production and consumption needs and preferences; and the use or exchange of locally appropriate, climate sensitive crop varieties.

4. WOMEN'S ACCESS AND CONTROL OVER ECONOMIC RESOURCES

Women's economic empowerment is a critical component of women's empowerment and gender equality. A gender transformative approach to women's economic empowerment[38] decreases gender gaps in access to and control over key economic resources in ways that radically change exploitative markets and work places so that all people benefit from the changes.

In practice this means:

- Changing financial information, education, services and service provision such that the most useful financial products are equally universally available to people of all genders;

- Decreasing gender gaps in access to and control over key productive resources and processes at individual, household and wider levels;

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38 Women's economic empowerment page on Minerva.

- Ensuring that women and girls experiencing crisis have equal opportunity to participate in and control the benefits of economic activities. Designing economic growth programming that equally increases women's and men's resilience in the face of crisis and emergency;

- Promoting a more equal sharing of productive and reproductive labor such that women can concentrate on and prioritise business activities equally with men;

- Examining the impact of women's economic empowerment on the whole household, to ensure that the burden of domestic work is fairly distributed;

- Recognising the value of unpaid domestic work, and that governments and the private sector accommodate workers who provide that caring role;

- Identifying and promoting how financial institutions and markets themselves change to not exploit or exclude;

- Programming interactions with employers, government ministries and others to promote and enforce labor standards which ensure decent work for all;

- Changing gender stereotypes around what women and men do for a living, where they move and who they interact with so as to form a strong vision of women as businesswomen, business owners and economic leaders;

- Acknowledging the stress many men face as a consequence of the male breadwinner stereotype, in difficult economic situations;

- Identifying and challenging cultural and social norms which inhibit gender equality in economic growth in the informal economy e.g. barriers to mobility, participation and association, use of technology, market access, market information and use of productive assets;

- Promoting women's meaningful participation in trade unions and in work related decision-making processes from the individual company level up to international labor and economic negotiations.

Annex 4: Core Models and Innovations

CARE has adopted and adapted external models and developed models and innovations[39] of its own to enable the scaling up of gender equality and women's voice programming. The core models or evidence-based examples of how CARE strengthens GEWV can be grouped in three main areas aligned with the Gender Equality Framework. It cannot be overstated, however, that there are strong linkages and interplay between these areas:

Building Agency

Changing Relations

Transforming Structures

BUILDING AGENCY: What works in one context to transform the lives of women and girls may not have the same impact elsewhere. And while actions to improve their lives may not be transformative on their own, they may be important steps in a change process requiring a long-term vision. Common approaches, models and innovations to build Agency (among others) used by CARE include:

Building awareness and skills

- **Village Savings and Loans Association (VSLA+) Model:** The purpose of the original VSLA model is to increase vulnerable women's economic empowerment, while serving as a platform for increasing awareness on different human rights related topics as well as increasing self-esteem and confidence. Building on this, the VSLA+ Model, developed in 2013, facilitates the creation of VSLA networks at higher levels up to the national arena, while providing different kinds of support to the women based on their specific demands (leadership training, institution building, conflict resolution, etc.). Each level is enabled to become the natural counterpart of the local, district, provincial and national authorities to foster women's social and political participation. In the POWER project in Cote D'Ivoire CARE has added gender action groups in each village, made up of village leaders, women and men, etc. to discuss generally all things gender and to act on village issues as identified. This leaves the VSLAs to still discuss some gender issues and to focus on savings, loan and business, while the process of community change is done in the gender action groups, similar to Ethiopia where VSLAs and Social Analysis and Action groups run in parallel. See Women's Empowerment Program evaluation from CARE **Niger** 2015 (English) and CARE **Mali** 2014 (French) that demonstrate major achievements in terms of women's political participation and social empowerment. Also see the 2012 **Mind the Gap** report from CARE Rwanda that explores gender dynamics in relation to VSL methodology;

- **EKATA groups:** The child malnutrition program in Bangladesh, Shouhardo, used a combination of engagement strategies including women's empowerment through **EKATA groups** that created a safe space for women and girls to discuss real-life problems, gain literacy and numeracy skills and learn about gender issues like child marriage, dowry and domestic violence. See also Relations, below. The **evaluation** (p.96) states that the strategies used by Shouhardo to increase women's agency and address gender power are contributing to increased social sensitization to women's entitlements;

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39 A model is understood as a distinctive approach to social change, with clear advantage over other approaches, with demonstrated cost-effectiveness and added value that is recognised by others – see in particular page 17 of Michael Drinkwater's document on operationalizing Program Approaches, Seeing and Acting in the World Differently. Models can be developed by CARE and partners, or developed by others and adapted by CARE to different contexts. A model should have evidence of its effectiveness, while innovations are new approaches being tested, around which evidence has not yet been developed.

- **Engaging men and boys work:** CARE's engaging men and boys programming provides structured spaces for men and boys to reflect on power and privilege in their lives, socially prescribed gender roles including for men and how gendered expectations affect their lives. See below.

Structured space for critical self-reflection with key actors

- The **Farmer Field and Business School (FFBS)** is an innovation used in the Pathways program to structure market, gender, agriculture, and nutrition dialogues along the agriculture calendar. It uses a participatory approach to create structured spaces for reflection within agriculture programs.

- **Social Analysis and Action (SAA)** is a model that uses a facilitated process through which individuals and communities explore and challenge the social norms, beliefs and practices that shape their lives and health. CARE Ethiopia has adapted the SAA model for different projects in its food security programming including We Rise.

- The **Social Impact Incubator** developed by CARE, the Segal Family Foundation and ActionAid in Burundi, brings together representatives and staff of small and emerging indigenous civil society organisations with a strong gender focus for a six months mentoring process aiming at strengthening them individually and institutionally. This initiative increases the voice of women's organisations within civil society, as well as women's voice inside other civil society organisations.

CHANGING RELATIONS: Changing relations across all genders is a critical dimension of achieving gender equality. Common approaches, models and innovations used by CARE to change relations (among others) include:

Building solidarity and leadership amongst women and girls

- CARE's **Girls Leadership Framework**, applied across 28 countries, recognises that quality education is foundational and the girls' leadership projects typically build upon CARE education work e.g. **IGATE** project in Zimbabwe combines community mobilisation approaches, literacy training, girls' leadership development, economic development and grass roots advocacy. The **ITSPLEY** program in Bangladesh, Egypt, Kenya and Tanzania uses sports as a vehicle for leadership development and girls' empowerment, and the Marketplace Model as a tool for developing organisational partnerships and individual capacity;

- CARE's Strategic Impact Inquiry reviewed the models used to **support women to organise**, outlining four approaches: [a] Organising women as recipients of knowledge, goods and services; [b] Working with women in groups to promote economic development (particularly VSLAs); [c] Leveraging groups to raise demands for gender equality; [d] Supporting groups to mobilise for women's rights;

- Shouhardo's **EKATA groups** (see also Agency above) have been successful in establishing a forum where women and girls can freely and openly express themselves. Through this process, women and adolescent girls are able to make plans for the future, make plans for transformative actions, and participate in leadership development (**evaluation**, p.104).

Gender synchronised approaches to engaging men and boys. It's critical to have structured spaces for men and boys to reflect on masculinities, gender, power and privilege in their lives as well as on how they are also themselves trapped in socially prescribed gender roles. Bridging communication gaps requires synchronisation, that is a sequenced strategy for members of a group to discuss issues separately (e.g. in women-only and men-only spaces), balanced with dialogues across groups (e.g. across intimate partners). In this work, we focus on male partners of women we engage with (e.g. VSLA+) but also religious leaders (refer to CARE Nederland resources) and political leaders (CARE Sri Lanka's Engaging Male Parliamentarians to Champion Gender Equality). We have a particular responsibility when working with organisations focusing on men and boys that their work is in line with priorities of women's rights organisations (and in partnership with) so as not to control the change process. Some examples of models used include:

- A number of country offices have developed strategies on working with men and boys, including Myanmar, Vietnam, Burundi, Mali, DRC. See **here**;

- CARE's **global learning brief on engaging men and boys** identified the elements common across our work which could be useful for teams to determine the most appropriate strategies and models to apply;

- **Inner Spaces Outer Faces (ISOFI)** helps staff and partners better understand gender, sexuality and power. Connected to this is work specifically on couples' communication;

- **Journeys of Transformation** in CAREs Rwanda, Uganda and Burundi is a model that invites men and couples to reflect on rigid gender norms, to examine their personal attitudes and beliefs, and to question traditional ideas about household decision-making and division of labor;[40]

- **Young Men Initiative** in CARE Balkans and its offspring in DRC and Burundi (Sisi Vijana) is a ground-breaking program working with young men to deconstruct masculinity in their cultures and determine how gender norms and male socialisation lead to inequitable attitudes and behaviours;

- The **Tipping Point** initiative in Nepal and Bangladesh addresses child marriage through a focus on facilitating and learning from innovative strategies to influence change-makers and root causes of child marriage.

- Other examples include Happy Families in Sri Lanka, the Model Men Groups in Uganda, The Ecole mon Marie/ Frere in Mali/Niger, and work with boys against early marriage in Tanzania.

Promoting collaborative and accountable relationships between impact groups and providers

- **Community Scorecard** or **CSC** is a citizen driven accountability process to bring together community members, service providers and local government to identify underlying barriers to effective, high-quality service delivery and develop a shared improvement plan. It is simple to use and can be adapted to any sector entailing service delivery. Originally developed by CARE Malawi, CSC has become an internationally recognised model for improving service delivery, and has been a central component of many of CARE's governance programs across sectors globally as well as being taken up by the World Bank. Note that in order to address gender issues the scorecard process needs to uncover how gender biases and perceptions affect the service by inserting and scoring a gender equality criteria. To ensure the CSC process is more gender-sensitive and addresses gender issues refer to the CSC **Implementation Guidance Notes**, specifically: Ensuring the CSC process is gender sensitive (pg.20-21) and Ensuring inclusion and participation of marginalised groups in the CSC process (pg.22-23).

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40   CARE and Instituto Promundo are carrying out a Randomized Control Trial of the Journeys of Transformation methodology in Burundi, starting in 2014, with results expected in 2017. CARE Rwanda is doing a RCT to test a combination of Journeys of Transformation with SASA in partnership with MRC.

- Case Management and Grassroots Activism Model, used in the **Great Lakes Advocacy Initiative** or **GLAI** (Rwanda, Burundi, Uganda and DRC) to address GBV at the community level combines the fight against GBV and the response to GBV cases. The model focuses on three levels: capacity of duty bearers, community awareness and support, and accountability of duty bearers to the community. Two types of community volunteers are involved: case managers who focus on assisting GBV survivors and grassroots activists who focus on advocacy for better prevention and response services in the community in general;

- The **Results Initiative** in Rwanda, Kenya and Ethiopia, worked with local partners to help strengthen health care systems to improve family planning information and services, and to engage communities to identify and address barriers to family planning. This included training and support to peer educators and community health care workers to initiate and sustain dialogue with couples, VSLA groups and communities about gender roles, sexuality and family planning.

TRANSFORMING STRUCTURES: Across the three roles CARE plays (humanitarian action, sustainable development and multiplying impact) CARE works in partnership with a range of actors from civil society as well as government and the private sector. Common approaches, models and innovations used by CARE to transform structures (among others) include:

Working on service delivery with government and other actors. Working with a range of power-holders, including the state, private sector and traditional leaders, to improve their ability to fulfil their obligations and be more responsive, transparent, and accountable to marginalised groups, particularly women.

- Examples include much of CARE and partners' work to strengthen technical capacities and/or accountability systems within **service providers**. In Zambia, CARE and partners developed a successful one-stop model of **Coordinated Response Centres** where GBV survivors could access medical, psychological and legal support. In **Bangladesh**, CARE trained district level officials on good governance, including participatory planning and inclusive budgeting;

- In some contexts the **private sector** is equally or even more powerful than the state itself, there is particular attention to promoting greater responsiveness and accountability of companies, at all levels in value chains. In **Cambodia**, CARE is working with the private sector to reduce GBV and sexual harassment in Cambodian workplaces (specifically the hospitality, entertainment and garment industries) as well as work with commune authorities, police and three ministries to improve GBV response.

Media and mobilisation approaches to challenging social norms. There are many examples across CARE using innovation to challenge social norms through civil society engagement, alliance building, community engagement, media and other art forms, etc.:

- Community theatre and media campaigns seek to draw in wider audiences to begin discussions on negative social norms. Examples include how social media campaigns highlight the issues of men's violence against women in **Norway**, Laos and Cambodia; and street art and hip hop in the **Balkans** to promote more equitable constructions of masculinity with adolescents. The WESAL project in Yemen sought to raise public awareness and influence policy makers to address GBV. CARE's partner the Yemen Women's Union was provided with capacity development to use interactive community theatre to raise awareness and mobilise communities to address GBV issues; and also use evidence based advocacy messages to contribute to national social movements in addressing GBV. The project was implemented simultaneously in **Egypt** and Jordan beside Yemen;

- Another important aspect of the Zambia model **Coordinated Response Centres** above was the prevention element consisting of an intensive three year period of media awareness campaigns, community education and mobilisation activities designed to increase knowledge and change attitudes and behaviour regarding gender among men, women, service providers, leaders, youth and children;

- The **SASA!** Model, developed by Raising Voices, seeks to inspire, enable and structure effective community mobilisation to prevent violence against women and HIV/AIDS and requires strong social empowerment movement, community based organisations and activists to criticise government.

Supporting alliances and movements for social change

- **SAKSHAM** project in India where CARE mobilised community-based organisations to develop leadership among sex worker communities which in turn formed a registered federation to leverage advocacy and support sex worker rights;

- **ITSPLEY** program (see also under Relations above) supported boys and men to join advocacy efforts with women and girls - male youth groups advocated on early marriage and sexual harassment and older men participated in demonstrations for women's rights, providing the critical mass needed for change;

- Costing Violence Against Women or **COVAW** from CARE Bangladesh is an initiative to influence communities by making convincing arguments of costs and consequences to prevent domestic violence. It attempted to demonstrate to the community that violence against women is not only a women's issue but has consequences for the family, community and the state. The COVAW approach needs to further test low cost ways of spreading the work to make it a model that can be scaled up;

- **Abatangamuco** in CARE Burundi, is a social movement of men supported by their wives who speak out to their communities about their own transformation. Positive male change agents share their stories of positive personal change with their peers and communities to help influence others to critically reflect on and change their own beliefs and behaviours around violence and respect for women and girls;

- Beyond movements being created as a result of CARE's programs, there is a whole world of existing organisations, networks, coalitions and movements working for social change and gender equality that CARE can support and partner with. The **CI Guide on Civil Society Collaborations** describes and illustrates several roles that CARE can play in order to multiply the impact of our GEWV approach, such as opening spaces and creating an enabling environment, building relations and investing in organisational capacities.

Advocacy and policy change. CARE's work to promote lasting change also focuses beyond the communities with whom we directly work to influence broader social change at scale. Please refer to the **CARE International Advocacy Handbook** for details on CARE's strategies, models and innovations outlining how country offices, members and CARE collectively have successfully shaped national, regional and global agendas, including:

- CARE has a long track record at local and national level in supporting women organisations to advocate for their agenda, working with and through civil society coalitions in influencing national actors, including the parliament and relevant ministries. In Bolivia, Ecuador and Peru, CARE has supported women's organisations for policy change in regard to **domestic workers rights** to adopt International Labour Organisation Convention 189 which, for the first time, mandates state supported protection to ensure decent work for domestic workers. In Sri Lanka, CARE engages with the Women's Parliamentary Caucus on legislative reform (violence against women, UN Security Council Resolution 1325). The **Great Lakes Advocacy Initiative** (Rwanda, Burundi, Uganda and DRC) models how to bring policy changes on GBV through evidence-based and bottom-up advocacy with

proven impact at local, national, regional and international levels (**see evaluation**). Other examples include engagement with the **Afghan Women's Network** and **natural leaders in Bangladesh**;

- Strategic examples of CARE's global level actions include bringing grass roots women's organisations from the global South and voicing their concerns and priorities at events such as **Commission on the Status of Women (CSW)**. CARE actively engaged in the **post-2015 sustainable development process**, played an instrumental role in elevating gender equality into the process and content of the **World Humanitarian Summit** and into global dialogue on the **gendered impacts of climate change**.

Research and publications. Many of the above examples of reports and research provide evidence to influence broader change and learning. Increasingly we work with academic organisations in our research and evaluations. An example of this is our partnership with the London School of Hygiene and Tropical Medicine and national partners in a programme to end GBV in Rwanda.

We use research evidence in our advocacy to governments to improve policy and practice; we can also influence donor investment and practice through our research as well as peer and partner organisations. Our research and publications also inform our own learning and improves programme quality.

![care® logo]

Founded in 1945 with the creation of the CARE Package, CARE is a leading humanitarian organization fighting global poverty. CARE places special focus on working alongside poor girls and women because, equipped with the proper resources, they have the power to lift whole families and entire communities out of poverty. Last year CARE worked in 87 countries and reached 82 million people around the world. To learn more, visit www.care.org.