

CARE 2020 Program Strategy

Gender Equality and Women's Voice Guidance

Contents

Section 1: Introduction	1
Section 2: Importance of GEWV approach	2
Section 3: Theory of Change	4
Section 4: Applying the approach (minimum standards).....	5
Section 5: Links between elements of the CARE approach.....	6
Section 6: CARE's roles	8
Section 7: Outcome areas	11
Section 8: Core models and innovations	14
Section 9: Monitoring, evaluation and learning (MEL)	15
Section 10: Partnership.....	16
Section 11: Conclusion.....	17
Annex A: Institutional accountability and leadership	18
Annex B: Gender Continuum.....	20
Annex C: Core gender models and innovations.....	21

Section 1: Introduction

CARE's 2020 Program Strategy commits CARE, with our partners, to support 150 million people from the most vulnerable and excluded communities. As part of the CARE approach to tackling the drivers of poverty and injustice – along with inclusive governance and increasing resilience – gender equality and women's voice (GEWV) is central to everything we do as an organization – in both internal organizational practice and of course in our programming.

The purpose of this document is three fold: to provide guidance on supporting gender transformative change with concrete suggestions and examples; to outline minimum standards required of all CARE offices; and lastly to explain how GEWV supports other elements of the Program Strategy. The primary audience for this guidance is a broad range of CARE staff to support deeper integration of GEWV across all of our work, regardless of sectoral focus or functional area.

This guidance builds on over a decade of experience within CARE, informed by global best practice, on what is required to support truly transformative gender change in the lives of all people. The Program Strategy provides the impetus to 'raise the bar' for a more systematically conceived approach to GEWV *that builds on and further extends* our work to date. This document therefore aims to provide teams with clarity on CARE's approach along with the information and tools to take this forward.

Section 2: Importance of GEWV approach

Global evidence overwhelmingly demonstrates that gender discrimination and the denial of women and girls' basic human rights is one of the major causes of poverty. Systemic discrimination against women and girls has a detrimental effect on everyone, regardless of sex or gender identity.

While progress has been made in areas such as educational enrolment of girls, women's life expectancy and women's participation in the labour force, many challenges remain. Humanitarian and development workers are familiar with these challenges - high rates of gender based violence and maternal mortality, disparities in girls' schooling levels, lack of women's voice in households and society, and differential impacts of natural disasters and conflict on women and men.

Power and politics: Inherently, addressing gender inequality requires shifts in power relations. It requires us to focus on political struggles related to power and justice. It is fundamental to our ability to achieving outcomes related to food and nutrition security, women's economic empowerment, sexual and reproductive health rights and saving lives.

Why is gender equality critical for CARE's work and vision? Why must we invest in gender equality resources and include gender specific programming in every single program CARE offices implement? Why must we hold our staff accountable to gender equality results programmatically and organizationally? Some of the answers lie here:

- **Ending poverty:** CARE's vision is not simply to reduce poverty and social injustice but to end it. An end to poverty and social injustice cannot be achieved without gender equality;
- **Short term gains:** The valuable contributions that our projects make to women's lives – the health, security, economic and political gains that we help women achieve – may be wiped away without deeper changes in the rules and power relations that define how a society allocates resources among citizens. CARE must seize the opportunity to turn valuable short-term gains into long-term change by helping communities build more equitable structures and relationships;
- **Long term change:** CARE's program approach assumes that working with defined impact groups over time will have more sustainable impact than addressing gender equality project by project;
- **Humanitarian preparedness/response:** CARE believes it is not just possible, but imperative, to strive for gender transformative change in emergencies. Crisis both compound gender inequality and discrimination as well as provide opportunities for deep gender norms change and structural change that can impact positively on people of all genders, communities and nations.
- **Think holistically:** Gender inequity, power and resistance are central to women's empowerment and gender equality work. Humanitarian and development interventions are most helpful when they take a holistic, multi-level and broadly political view of gender equality. Changes that advance people's lives take place through many small steps; it is the linking and multiplying of these steps through appropriate networking and institutional strategies for broader based social change.
- **Addressing violence:** Gender based violence (GBV) is both a driver and a consequence of poverty, injustice and gender inequality and is therefore an essential issue across CARE's work. GBV is not only a core outcome of the Program Strategy, but also essential to CARE's roles and approach.
- **Scaling up:** Structural engagement with power holders can lead to more sustainable changes at scale. Lasting change requires deep political change which occurs when people work together in solidarity to challenge and transform existing power dynamics. It requires partnering with a range of actors and working in solidarity with social movements to change power relations in formal and informal/social institutions that maintain gender inequalities;

- **Structural change:** Given that institutions and systems themselves reflect existing inequalities and biases within a given context, effective and ethical programming must work in a way that responds to these imbalances rather than reinforces or ignores them.
- **Intersectionality:** We need to take into account how gender, class, sexuality, ethnicity, ability and other aspects of diversity intersect to support or detract from our work.

CARE's work focuses on empowering marginalized women and girls to voice their rights. CARE takes a transformative approach to its work on social justice and gender equality which emphasizes changing political, social, cultural and economic systems that are oppressive. Part of this approach is focused on strengthening voice and political participation of women at all levels of decision-making processes.

Given that women face specific challenges in relation to poverty, and given the systemic discrimination they face, CARE's vision of a world of hope, tolerance and social justice, where poverty has been overcome, requires that we explicitly address gender inequality. This requires us to focus on the political struggles related to power and justice. We do this in a transformative way, in part through the empowerment of women and also

Transformative change: Gender equality requires transformative change – that is approaches or activities that promote equal social norms and structures and support equitable relationships between all.

Gender synchronisation: involves coordinating engaging men and boys approaches with women's and girls' empowerment approaches – for separate and joint activities – to ensure work thoughtfully intersects with and complements one another to advance gender equality.

working in a gender synchronized approach¹, where people of all genders are able to challenge and recreate gender norms to achieve gender equality.

Specifically on girls, it is not effective and sufficient to provide them with skills, then expect them to conquer systemic injustice. So CARE's approach to empowering girls creates an enabling and equitable environment where young people can exercise their knowledge, skills, leadership and they are able to step into new roles and lead the change themselves.

Other groups face particular challenges due to their sexual orientation or gender identity. Seventy seven countries criminalize homosexuality and in seven, it is punishable by death.² Lesbian, Gay, Bisexual and Transgender (LGBT) people are often barred from education, starting businesses, finding employment and raising families, can face challenges accessing humanitarian aid and risk exploitation and violence³. There is an increasing need for CARE to focus on discrimination faced by these groups.

The CARE 2020 Program Strategy sets out our core approach to addressing underlying causes of poverty and injustice – strengthening gender equality and women's voice, promoting good governance and increasing resilience in poor communities. This is the foundation for all our work across the three roles CARE plays – humanitarian action, sustainable development and multiplying impact – and the outcomes we seek.

¹ Refer to IWDA's Toward transformation: synchronizing work with women and men for gender equality (2012), available [here](#).

² USAID (undated), Promoting and Supporting the Inclusion of Lesbian, Gay, Bisexual, and Transgender Individuals, available [here](#).

³ Ibid. E.g. Oxfam study on Indian 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, the former criminalizing homosexuality and condoning killing gay men, the latter to 'purify' society.

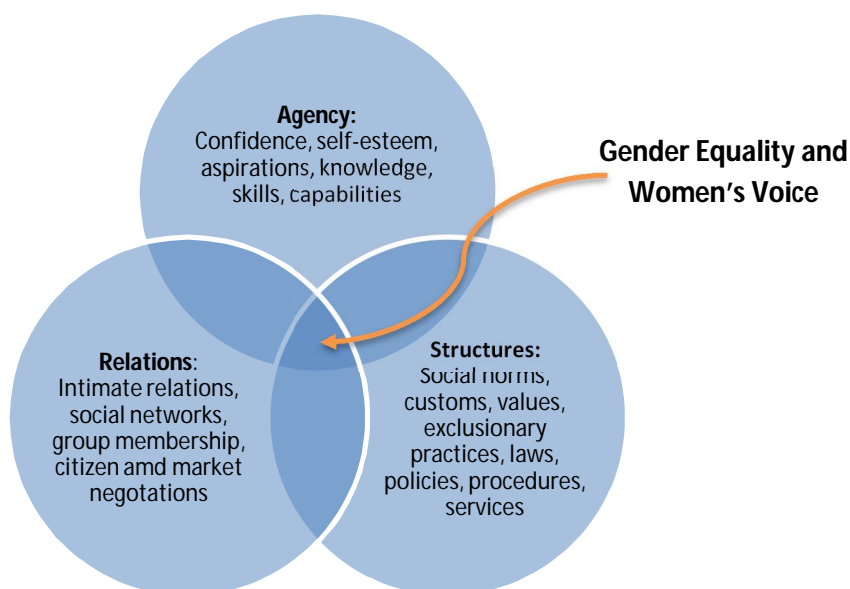
Section 3: Theory of Change

Our theory of change is based on CARE's experience that achieving gender equality and women's voice⁴ requires transformative change through a gender synchronized approach. This means that if we are to achieve gender equality, transformative change is required which necessitates approaches or activities that promote equal social norms and structures as well as support equitable relationships between people of all/diverse genders. CARE does gender transformative work through women's empowerment (including promoting women's voice) and a gender synchronized approach. This means we work with people of all genders to redefine gender norms to the benefit of society as a whole.

Our theory of change: If we use gender transformative strategies that:

- **Build Agency:** an individual's aspirations, knowledge, skills and abilities;
- **Balance Relations:** power relationships within households, communities and systems to build stronger and more equitable relationships; and
- **Challenge Structures:** underlying structural and institutional barriers including power imbalances, discriminatory social norms, policies and institutions;

Then gender equality and women's voice can be achieved. Change needs to take place and be sustained in **all three domains** to achieve this impact and requires attention in both **formal and non-formal spaces**.



Gender Equality Framework

The newly devised Gender Equality Framework updates CARE's Women's Empowerment Framework to capture learning that our women and girls' empowerment approaches must engage men and boys for gender equality in synchronized and complementary ways.

Strategies include:

- Supporting people to see a more equitable, positive future where they can live to their potential;

⁴ Women's voice was defined, in an earlier version of CARE 2020 Program Strategy, as: "Women and girls increasingly exercise their rights to participate in decision-making in public and private spaces, at all levels". CARE's work on women's voice focuses on these two domains and overlaps on the one hand with our women's empowerment work and framework (which covers women's empowerment in both the private as well as public domain) as well as part of our work on inclusive governance, which focuses primarily on the public domain.

- Explicitly raising consciousness of the power inequalities that oppress, and build skills to collectively shift power relations within households, communities, and systems;
- Supporting solidarity/collective action by groups that experience discriminatory practices;
- Producing evidence on how a gender approach positively impacts on poverty and social injustice;
- Engaging in a political process with public officials, policies, and laws and key stakeholders such as intimate partners, informal leaders and influencers, market actors, service providers;
- Focusing on CARE's own institutional policies and practices, including staff attitudes, beliefs, and skill sets for critical analysis and facilitation.

Section 4: Applying the approach (minimum standards)

At a minimum, all programming must be gender sensitive (as per Continuum in Section 6), with aims of moving toward gender transformative approaches. **The minimum standard is therefore to continually assess our work and move right along the Gender Continuum** (towards gender transformative). Existing tools and methods of assessment (such as PIIRS) indicate that the use of numerical labels along the continuum is helpful because this encourages teams to strive for an improved score and allows for comparative data comparison across programs, county offices, etc.⁵

CARE's Gender approach minimum standards

CARE's gender equality and women's voice approach includes the following **key elements**:⁶

1. All CARE offices **assess their own alignment and capacities** with gender equality principles and make commitments and concrete plans towards deepening it;
2. CARE **recruits staff and** identifies, where possible, **partners committed to gender equality** and reflect gender balance and diversity including in emergencies. When partners do not reflect gender balance, we engage them in dialogue and seek to transform their practice;
3. We **strengthen staff/partner capacity** so that they have awareness of personal gender biases;
4. Design, implementation and evaluation in humanitarian and development programming is **informed by current gender analysis** with participation by staff, partners and participants;⁷
5. All projects and programs include **one gender equality result at the highest outcome levels**, and that all outputs or objectives related to human behavior are sex- and age-disaggregated;
6. We seek to use a **gender synchronized approach** that engages men and boys (and people of all genders) to explore, challenge and transform gender norms;
7. Every project/program must produce a **gender equality action plan or strategy** that clearly outlines roles, responsibilities, funding and lines of accountability;
8. We **measure and hold ourselves accountable** to real gender equality change, as well as to learning what works and doesn't work through reflection and learning exercises;
9. We **address potential risks** including unintended consequences of backlash and violence regardless of sectoral or thematic focus;⁸
10. In our work with different groups, we **facilitate dialogues** to build consciousness of inequalities that perpetuate poverty and injustice, and **build skills for collective action**;

⁵ There are a number of tools to help teams. E.g CARE's Gender Marker or the [ISOFI toolkit](#) PRNA tool #2 page 47.

⁶ Concrete suggestions that can facilitate this are highlighted in Annex A Institutional Accountability and Leadership.

⁷ Gender analysis does not necessarily have to be a separate process, however any situational analysis or formative analysis must include a gender lens. Refer [here](#) for detailed guidance. Rapid Gender Analysis must be used in humanitarian settings, refer [here](#).

⁸ Refer to Guidance for GBV Monitoring and Mitigation within Non-GBV Focused Sectoral Programming [here](#).

11. We **bring in actors from feminist movements** to inform and improve our work and to identify ways to ally with movements to contribute to gender equality.

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

- a. Enhanced **staff capacity** (know-how, resources);
- b. Stronger **institutional accountability and leadership** to the approach (see Annex A);
- c. An **organizational culture** that awards and enables this work.

Section 5: Links between elements of the CARE approach

Gender Equality and Women's Voice: links to Inclusive Governance⁹

Gender and governance are fundamentally about power relations. To overcome *social injustice and poverty* unequal power relations must be transformed, ensuring that people of all/diverse genders have equal rights and opportunities to live a life of their choosing. While CARE's gender equality programming focuses on transforming unequal structures and power relations between women and men, our governance work concentrates on building effective, accountable and responsive relations between the state (or other power holders) and citizens. In a world where 50% of citizens are women, there is a clear overlap between efforts to support women's empowerment¹⁰, amplify their voice and promote gender equality, and governance work aimed at empowering citizens and making elected officials and services providers responsive and accountable regardless of gender or other identities.

For CARE, a major focus of our governance work is on empowering women to become active citizens and encouraging service providers to be more receptive and answerable to women's needs and demands. A focus on the enabling environment needs to address women's mobility, free up their time to participate and reduce conflict when they move into the public space. Also, people of all/diverse genders access services with different needs and in different ways; they have different capacities, opportunities and availability of time to get organised, participate and influence decisions that affect their lives. CARE's gender equality and women's voice approach encompasses both public and private spheres and focuses on all rights: political, economic, legal, social, cultural, sexual and reproductive. As governance is about '*exercise of power in the management of public affairs*,' emphasis is therefore on power relations within the public sphere, and this means also that our primary focus is on civic and political rights. While emphasis is on the public sphere, our inclusive governance approach is rooted and builds on the gender equality and women's voice programming at household level. Therefore teams working on gender and women's voice and governance teams should strive to increase the representation of women in institutional spaces from local to global levels, taking account of intersectionality (gender, class, sexuality and ethnicity).

A solid gendered approach to good governance goes beyond facilitating women's meaningful participation. Women without access to formal processes are also excluded due to violence, lack access to information (a foundational right to enable participation, accountability and ability to claim rights generally), restricted mobility outside the home, time paucity (due to unequal sharing of

⁹ This section developed in close cooperation with CIUK Governance team and partly based on a draft paper they developed on Governance and Women's Voice.

¹⁰ The perception of having control over decisions and issues that affect one's life; this involves having representation in the decision-making bodies that control the distribution of necessary resources. At the government level, this includes the extension of all fundamental social, economic and political rights. At the individual level, this includes processes by which individuals gain inner power to express and defend their rights and gain self-esteem and control over their own lives and personal and social relationships (CARE International).

domestic work), and limited access to peer social networks or schooling that facilitates literacy skills to read policy documents. Therefore governance processes need to take account of:

- Understanding why women are not currently fully participating, including questioning whether governance process and spaces (deep structures) themselves unintentionally excludes women;
- Shifting the gendered division of labor (to free up women's time for the public sphere);
- Addressing GBV (and increased risk of GBV as women enter the public arena);
- Equal access to information and training opportunities;
- Opportunities for critical reflection and analysis of power and discrimination;
- Opportunities to work in solidarity with others facing similar issues;
- Collective action and learning.

Actions might include:

- Training and supporting women to become local councillors (e.g. PAT program in Bolivia);
- Organise women to put forward their demands in local development plans and policies;
- Support and increase the participation of women in Village and/or Community Development Committees (e.g. TUUNGANE in DRC) or Peace Committees (WYPSP in Nepal);
- Gender budgeting (e.g. Participatory Voices & Vigilant Oversight, Acting Citizens projects, Peru);
- Support the participation of women in health councils, school management boards, and in the definition and use of community score cards and other social accountability mechanisms;
- Support women committees/quotas from local to national levels (e.g. ICDP in Papua New Guinea);
- Represent the diversity of the community. Key civil society actors and activists, including women's organisations, can support transformation towards social justice;
- Underlying causes of poverty/social mapping that promote inclusion and are community driven;
- Gender / social audits with key institutions;
- Gender reflection and dialogues with women and men involved in governance or service provision structures (e.g. Social Analysis and Action);
- Promote gender and diversity awareness education with service providers and officials;
- Bridge knowledge and information gaps that marginalize groups based on gender, etc;
- Engage household dynamics to support women's engagement and voice in decisions;
- Promote social norms change that recognizes women/girls' leadership and participation.

Actions to ally with women's organizations might include:

- Build capacities of local women's organisations who represent groups not yet championed by elite feminists to express interests and make proposals in policy spaces (e.g. LAC gender program);
- Learn from women's organizations e.g. in specific technical areas, coalition building, etc;
- Engage men and boys in ways that support women-led organizations and movement building;
- Support actions to increase the internal accountability and democracy of women's organizations;
- Mobilize around unrecognized rights and demands (e.g. GBV, unpaid/paid domestic work etc);
- Build coalitions and broker relationships between civil society actors (e.g. LAC gender program);
- Work with women and men parliamentarians to pass legislation promoting gender equality.

Gender Equality and Women's Voice: Links to Increasing Resilience

CARE's resilience approach focuses on strengthening poor people's capacity to absorb and adapt to shocks and stresses, manage risk and address underlying causes of vulnerability and transform their lives. One of the main causes of vulnerability and increased risk are power inequalities and exclusion

in society. Because women and girls are marginalized, they are more likely to be exposed to and vulnerable to natural hazards and a changing climate, both to immediate shocks, but also to ongoing and slow onset emergencies increasing challenges for their lives and livelihoods. In particular when we want to address underlying causes of vulnerability to disasters and the impacts of climate change, insecurity and conflict, and increase transformational capacities to cope with disasters, a gender analysis is needed looking at vulnerabilities as well as capacities of people of all/diverse genders.

In line with CARE's Gender Equality Framework, a holistic, multi-level and broadly political view of gender equality for resilience is suggested. This includes working to build new skills and confidence (agency), balancing power relations within households, communities and systems (relations) and challenging harmful social norms, structures and institutions (structures). We will address gender equality and women's voice by integrating it in all program phases and aiming for gender sensitive and, where possible, gender transformative program design. This is done to reach key outcomes (e.g. strengthened resilience, more climate-resilient livelihoods) *and* contribute to gender equality.

Activities could include:

- Systematically integrate gender analysis in vulnerability and capacity assessments and developing strategies to use this analysis in program design and implementation;¹¹
- Systematically promote women's voice in CAREs resilience programs and approaches; e.g. document learning and scale-up best practices in women's voice, participation in decision making and leadership of global, regional, national and local DRR/resilience frameworks and processes;¹²
- Working with households and communities to surface the knowledge and strategies for resilience and adaptation that diverse women and men hold;
- Exploring technological or community driven DRR strategies, being mindful of decision-making power, time/labor demands, and who benefits from such strategies (e.g. El Salvador);
- Training of and lobbying with public officials/power holders to increase responsiveness to the interests of vulnerable groups such as indigenous rural women (e.g. Proyecto Vida in Peru).

Section 6: CARE's roles

Promoting Lasting Change and Innovative Solutions:

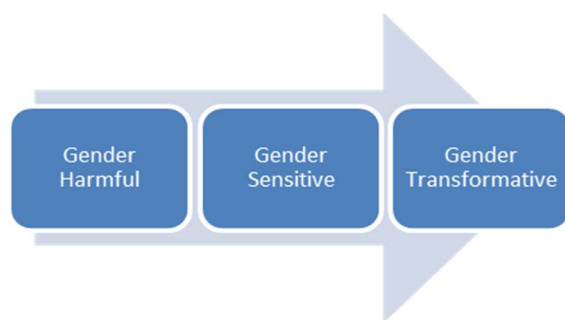
CARE is committed to a transformational approach across the domains of agency, structure and relations, working politically to transform power relations for lasting change. The Strategic Impact Inquiry on Women's Empowerment¹³ showed that where programs narrowly focused on advancing women's agency (skills, confidence, assets) this represented a missed opportunity as results tended to be reversible. As a rights-based agency our approaches are inherently intended to be transformative – we address underlying causes and not simply symptoms of social injustice or poverty. At a minimum, all humanitarian and development programming must be gender sensitive with a clear plan for moving toward gender transformative approaches.

CARE has adapted and refined a tool known as the gender continuum, to help us assess where we are and how to move further to the right hand side of the continuum. The continuum has three points:

¹¹ 1 - Gender-sensitive CVCA: Practitioners Guide available [here](#); and 2–Gender guidance on CVCA Field Tools available [here](#).

¹² For example, in context of global and national efforts to implement, monitor and evaluate the Sendai World Disaster Risk Reduction Framework). Milestones could include participation by local women's groups and women in crisis-affected communities into decision-making on, and monitoring of the Sendai Framework for DRR, SDGs and new climate agreement.

¹³ CAREs Strategic Impact Inquiry on Women's Empowerment – a 4 year multi-country research – established CARE's evidence base and a framework based around Agency, Structure and Relations. SII library [here](#) and summary [here](#).



harmful on the left, sensitive in the middle and transformative on the right (refer to Annex B for more details and project examples).

A GEVV approach means going beyond targeting women and girls as impact groups and includes systematically promoting women's voice, dismantling patriarchal norms, and working with all people as allies and partners to

challenge and redefine existing gender norms. Durable change comes from meaningful, inclusive, community designed and locally owned programming in which from the outset, CARE's support is directed at strengthening local partners and ensuring local participation across the project cycle.

Humanitarian Action:

CARE's primary objective in humanitarian action is to meet the immediate needs of affected populations in the poorest communities in the world with a particular intention to reach and enable women and girls empowerment in emergencies. Our humanitarian and emergency work also puts gender equality programming at the centre of everything we do. CARE brings a longer-term view to its humanitarian work, including supporting people of all genders to be more resilient in the face of disasters, conflict and protracted crises. Our programs make every effort to connect humanitarian preparedness and response work with recovery and longer term development. Therefore the approach that we take regarding gender equality programming in emergencies aligns both with the humanitarian principle of impartiality and imperative with our emphasis on women and girls in our long-term programming. As in our development work, CARE strives to ensure that our humanitarian response is not a one-dimensional approach focusing only on women and girls, but also on the dynamics between people at different societal, political and household levels for greatest impact.

Crises and emergencies compound gender inequality and poverty and also provide a window of opportunity to be more transformative and link to long term development. (For example, in transition contexts being more deliberate in supporting local social movements and alliances in advocating at national level for political reforms that realise women's human rights). Humanitarian crises can also have a fundamental transformative effect on deep gender norms which if encouraged and sustained, can have a positive impact on individuals, communities and states over time.

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. 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.

CARE's humanitarian work also provides an opportunity to address gender based violence and other protection challenges faced by women and girls (e.g. early marriage) and promote women's voice. In chronic emergencies and protracted crises, development and humanitarian programming may need to occur at the same time; and interventions should build on each other. CARE uses a transitional approach that transitions vulnerable people, especially women and girls, from being aid recipients to self-reliance in situations where relative calm are followed by times of violence and restriction.

Multiplying Impact

CARE seeks to multiply the impact of its direct development and humanitarian interventions. It can do this in a variety of ways and in this section, we highlight four areas: engaging social norms, research, advocacy and scale up.

Engaging social norms: Social norms are the unspoken rules that influence human behavior. CARE programming has wider impact when we are able to positively influence social norms change. This requires experimenting with 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. Examples include how traditional music and theatre are used to promote gender equality in Bangladesh and Nepal, coffee ceremonies and storytelling offer opportunities for dialogue in Ethiopia; or social media campaigns, street art and hip hop promote more equitable constructions of masculinity with adolescents in the Balkans.

Research: There is simultaneously too little and too much research on the links between women's empowerment and SRHR, GBV, women's economic empowerment, humanitarian response and food security outcomes. Too little has been researched, and yet most research demonstrates that it is key to have a strong gender equality approach in order to reach and sustain these goals. For example, impacts in women's economic empowerment are better achieved and sustained when coupled with gender transformative programming. CARE aims to improve its evidence generation in this area for several reasons. Firstly, to leverage learning on what the key ingredients are for effective gendered programming and the evidence base to demonstrate effectiveness on multiple areas of impact across sectors. This requires agreement on what types of research or evidence is needed.¹⁴ Secondly, to influence broader social change at scale through policy engagement. Thirdly, to provide strong evidence to attract investments and lastly, to support our public engagement role in the Global North and South to amplify the voices of marginalized women. Complemented by strong monitoring, evaluation and learning systems, our research products will allow us to present persuasive stories of our work, describe effective approaches used and evidence of changes achieved. Research must be fit for purpose whether the objective is to leverage learning for CARE programming, to be policy oriented with actionable recommendations for policy makers and/or robust scientifically validated data.

Advocacy: 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, works to support feminist solidarity and advocacy for women's rights and leadership in peace-building. 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 the grassroots to national levels and beyond, thereby shifting social norms as well as influencing policy enactment and implementation. In addition, by linking its advocacy work to research efforts, CARE needs to continually strengthen its capabilities to include evidence based advocacy (documentation, presentation, communication) on the positive impact of gender equality and women's empowerment approaches in our programming. CARE should promote the demand for and use of data to inform decision making and monitor the effect of change on the lives of women and girls. This includes communication for broader social change.

¹⁴ This could range from standard project evaluations to randomised control trials and global impact evaluations e.g. Strategic Impact Inquiry on Women's Empowerment.

CARE must amplify the voices from the grassroots level, including women's organisations and alliances by supporting their participation and pushing for their own access into decision making processes and forums. Women's rights groups need to define the issues that are important to them, develop their own strategies and advocate on their own behalf.

Scale-up & shared learning: This provides opportunities for institutionalizing successful interventions that transform power relations between men and women. We aim to ensure that successful programs are scaled up through shared learning and exchange with others. In so doing, CARE will ensure that development and humanitarian interventions are gender transformative. This will require changes to our own systems to ensure that they are better able to facilitate scale up and shared learning.¹⁵

Section 7: Outcome areas

CARE focuses on poor and marginalized women and girls across our programs. We address inequalities that exist at different levels with a lens of social justice, human dignity and empowerment. 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 choose to live free from violence and ensure that they have productive, secure lives with bodily integrity, no matter their gender/sexual identity, nationality, class, occupation.

CARE's 2020 Program Strategy commits CARE to four outcome areas:

Gender equality in economic growth

Women's economic empowerment is a critical component of women's empowerment and gender equality. A gender transformative approach to women's economic empowerment 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 available to people of all genders across the life cycle;
- Decreasing gender gaps in access to and control over key productive resources and processes at individual, household and wider levels;
- 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 prioritize 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;
- Recognizing the value of unpaid domestic work, and that governments and the private sector accommodate workers who provide that caring role;
- Identifying how financial institutions and markets themselves change to not exploit or exclude;
- Programming interactions with employers, government ministries and others to promote and reinforce gender equal labor standards;

¹⁵ E.g. Reaching New Heights report of CARE Bangladesh's Shouhardo program [here](#) or Strong Women Strong Communities report [here](#).

- 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.

Women's and girls' rights to 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 empowers women and girls to identify the barriers to them exercising their rights including to pleasure, gender identity and sexual orientation. These barriers are often based on cultural norms and power differences between intimate partners, familial relationships, service providers and religious leaders. SRMH programming therefore strengthens women's decision-making, and supports women's negotiation skills within couples, families, communities and at the national and international level.

Global programming evidence demonstrates that we cannot address issues surrounding gender equality and women's voice without addressing gender based violence (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. Worthwhile to note that whilst issues of GBV often overlap with SRMH, it does not necessarily. For example, systemic denial of women's rights to economic assets or neglect of girls based on their gender, or forced conscription of men and boys into armed forces are all forms of GBV.

In practice this means, inter alia:

- Partnering with communities to identify, challenge and transform gender norms that restrict women's and girls' ability to realize their SRMH rights, and engage with community leaders, men and boys as allies in transformative change for gender justice;
- Partnering with communities to identify, challenge and transform gender norms that restrict women's and girls' ability to realize 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;
- Mobilizing women and girls to understand and claim their SRMH rights, through participatory models and approaches (e.g. TESFA in Ethiopia);
- Prioritizing women's voices in advocacy and policy debates to ensure that women's lived experiences meaningfully inform development priorities, GBV preventions and response measures and SRMH policies and programs;
- 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;
- Transforming the drivers of GBV 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 work 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.

People's access to quality, life-saving humanitarian assistance

CARE does not just deliver material support during emergency situations but looks closely at the needs of men, women, boys and girls during such situations and provides equal access to such support. CARE also promotes women's increased control over economic resources and bodily integrity, as well as meeting their psychosocial needs.

In practice this means:

- Integrate gender into the emergency preparedness planning (EPP) process by including a practical gender equality in emergencies training session and integrating gender into the scenarios; as well as preparing a Gender Action Plan and a Gender in Brief (include in EPP Report as annexes);
- Make sure every emergency project equally meets the practical and strategic needs of people of all/diverse genders as identified in the rapid gender analysis and makes change in at least one core area of gender equality inquiry in at least one dimension of agency, relations or structures;
- Participatory and inclusive approaches to planning and needs analysis (including rapid gender analysis in rapid onset environments that provides information about the different needs, capacities and coping strategies of men, women, girls and boys and makes clear recommendations for designing and implementing a gendered response);
- Clear and established processes to strengthen gender responsiveness including through the Gender Action Plan and Gender Marker process;
- Preventing sexual exploitation and abuse;
- Raising the concerns and voice of women and girls affected by conflict and disaster in policy engagement, advocacy messaging and community engagement;
- 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.

Poor and vulnerable people increase food and nutrition security and resilience to climate change¹⁶

Food systems cannot be just and sustainable if they do not have gender equality and women's empowerment at their heart. Excluding and marginalizing 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, CARE will focus on transforming the underlying gender inequalities and social norms to build women's agency, form more equitable relationships at the household levels, and create an enabling environment and equitable institutions for ensuring women's rights as human rights.

In practice, this means:

¹⁶ As articulated in "A Vision for Just and Sustainable Food Systems: The CARE 2020 Food and Nutrition Security Strategy", May 2015.

- Ensuring equitable distribution of food within the household including exploring, understanding and transforming processes of how and which crops are chosen, how food is grown, how it's harvested, produced, distributed, marketed, sold, accessed, purchased, cooked, and consumed;
- Ensuring fair access to water, land, inheritance rights for women, girls and marginalized people;
- 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 synchronized way for gender-just food and nutrition security;
- Strengthening women's collective voice in food policy decisions/implementation, agriculture & 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 organizations to work for gender equitable outcomes.

Section 8: Core models and innovations

CARE has adopted and adapted external models and developed models and innovations of its own that have proved to enable the scaling up of a gender equality and women's voice approach. The adoption, development and adaptation of approaches has resulted from multiple evaluations (at program, country, regional, global levels) over the years informing adjustments and contextualization.

It is important to consider how a number of innovations and models might come together in a gender synchronized way – that is, coordinating engaging men and boys approaches with women's and girls' empowerment approaches in separate and joint activities in ways that advance gender equality.

As CARE moves to deepen its work in support of gender transformative change, we acknowledge the need for a robust, deliberate approach for transformative work. This first requires testing and applying innovations to a particular context followed by scaling up promising innovations (and documenting, evaluating and sharing such learning). Finally after more testing, promising innovations can then be systematized into a 'model'. The process of identifying, contextualizing, testing, documenting, rigorously evaluating and scaling up needs to be done robustly and systematically, if we are to multiply the impact of our work. CARE's focus on long term programs further supports such processes.

Annex C provides an overview of key models and innovations in relation to:

- Staff capacity building and internal policies
- Gender integrated emergency response
- Structured space for critical self-reflection (whether staff, partners, gatekeepers, all genders)
- Building from women's own definitions of well-being and empowerment
- Building solidarity and leadership amongst women and girls
- A gender synchronized approach that engages women, girls, men and boys for gender equality
- Promoting collaborative and accountable relationships between impact groups and providers
- Media and mobilization approaches to challenging social norms
- Supporting alliances and movements for social change.

Section 9: Monitoring, evaluation and learning (MEL)

Section 3 outlines the theory of change in relation to our GEVV approach. This section proposes key impact/effect level indicators which can be used for measuring progress against the GEVV approach at a global level including in the organization and across outcome areas.

Organizational-level indicators:

- Gender and diversity in staffing and governance structures¹⁷;
- Steps taken to increase gender integration across human resource policies and practices;
- % of staff who have been part of GED trainings;
- % of CARE offices who have completed gender audits in past four years and have specific gender strategies with accountability mechanisms in place.

Program level indicators:

Gender equality forms an integral part of and strong focus of the Sustainable Development Goals (SDGs); the indicators for which are still being formulated (and will be completed by end 2015). In order to facilitate aggregation of data as well as to enable CARE to work within and relate its' work to the broader development effort, we propose that programs and projects can **choose indicators** that relate to SDG target areas (note these were drafted in June 2015 so may change; and once finalized will be written up as indicators):

- Eliminate all forms of **violence** against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation
- Eliminate all **harmful practices** such as child marriage and female genital mutilation
- Recognise and value **unpaid care and domestic** work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family
- Ensure **women's full and effective participation** and equal opportunities for leadership at all levels of decision making in political, economic and public life
- Ensure universal access to **sexual and reproductive health and reproductive** rights
- Undertake reforms to give women **equal rights to economic resources**, as well as access to ownership and control over land and other forms of property, financial services, inheritance and natural resources
- Enhance the use of **information technology**, in particular information and communication technology, to promote the empowerment of women
- Adopt and strengthen **sound policies and enforce legislation** for the promotion of gender equality and the empowerment of women and girls at all levels.

It is proposed that this section be updated as the targets and indicators are defined for the work related to SDG 5; these targets and indicators should then be adopted by CARE and integrated into our systems (such as CO standards, PIIRs) and programs and projects. It is recognised that not all programs and projects will use all the indicators, it is therefore proposed that a maximum of 3-5 indicators are selected for tracking.

¹⁷ Currently this is narrowly defined in PIIRS looking only at national versus international status of staff, and only at CO level, not member level. Need to define how we measure diversity.

Building on systems and practices used to date for internal learning, there are opportunities to strengthen mechanisms for generating, sharing and applying learning across CARE (through the gender wiki, Program Quality Digital Library, CARE International Gender Network, Gender Working Group and other gender-related forums¹⁸). To strengthen our knowledge and learning we need to consider how we optimize our systems to minimize the costs of sharing knowledge; increase the rewards to recognize and encourage knowledge sharing; develop simple metrics to establish expectations and accountabilities; and invest in an intelligent knowledge management function¹⁹.

Section 10: Partnership

At the heart of the GEVV approach 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 marginalized 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.

Globally, civil society organizations or CSO's (particularly those at the grassroots) are experiencing shrinkage of space and power and face increased risk to challenge power holders.²⁰ 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. Roles are increasingly unclear between INGOs, UN, CSO's, military and diplomatic missions²¹. This competition and 'mission creep' undermines the ability of actors to work together and the increasing bureaucratisation of aid renders many local CSO's unable to compete for resources. The consequences are that voices of women's groups are unheard. CARE must become an advocate within development and humanitarian arenas to challenge 'mission creep' and ensure adequate investment in local CSO's.

The Program Strategy encourages CARE to have stronger strategic partnerships at all levels (local, regional, global), as well as clear guidance for engaging with civil society. This could encompass a variety of alliances and partnerships with those who take similar or complementary approaches (women's refuges, men's groups for gender equality), are able to work on a larger scale (consortiums), and/or who have responsibility to fulfil rights and alleviate poverty through policy change and enforcement (local/national governments). Significant attention has been paid across CARE to advancing partnerships to date. We need to continue to connect and innovate toward deeper partnerships especially in engaging perspectives from the Global South. We can consider new business models by partnering with others, and encourage non-traditional partnerships for impact at scale.

In working in partnership, we recognise:

- Each partner has different skills and capacities and these can complement and be complimented by the skills and capacities of others. We should approach partnership being open to others to mutually identify how we can work together to achieve common goals;
- 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;

¹⁸ E.g. GBV, Women Peace & Security, Engaging Men & Boys, Impact Measurement. Keep an eye out on the gender wiki for updated listing.

¹⁹ When Good Intentions Are Not Enough: a think piece on Knowledge Management in CI, Matt Bannerman, June 2014.

²⁰ Mandeep Tiwana; Civicus, quoted in Independent Press Service [here](#).

²¹ Humanitarian Practice Network [here](#).

- Partners should seek to partner on an equal basis, with full self-awareness, 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 recognise that organizations require 'core support' to survive and we should offer them this support and call upon our donors to do so;
- 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;
- We should avoid always setting the agenda; we should enable others to set the agenda and be ready to follow; we should proactively invite others' feedback and honest appraisal of our efforts;
- We should transform our own systems to render them less bureaucratic, less unequal in power and more inclusive to facilitate flexibility in real time.

Section 11: 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, concepts and vocabulary have become much more nuanced. The 2020 Program Strategy provides the impetus to further deepen and broaden our gender goals and approaches. Additionally, it acknowledges that achieving gender equality and promoting women's voice requires major shifts in power, politics and justice.

This incrementally sets a higher standard for all CARE's humanitarian and development programming, policy engagement and advocacy priorities in the Global South and North as we work towards CARE's 2020 Program Strategy. Thus this guidance sets out CARE's approach to achieve gender transformation on 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.

Annex A: Institutional accountability and leadership

In addition to gender integrated programmatic strategies and objectives, implementing a transformative gender approach also requires organizational leadership and accountability; without it, the organization across all its parts, is putting itself at risk.

The 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 inter alia lose credibility and market niche. This in turn will undermine CARE's prospects to mobilise resources from important donors including NORAD, Gates, USAID, DFID and the EU and mean that we lose ground to other competitors that are increasing their capacities and their organizational commitments to take over CARE's niche.

Integrating a gender approach requires:

Political Will and Organizational Culture

- Strong, visible, active leadership that promotes gender equality tied to organizational outcomes.
- Reflect gender equitable norms in organizational 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;²²
- 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 feminist organizations to provide advice, feedback and influence CARE;
- Articulate/implement mechanisms to ensure accountability to impact groups;
- 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.²³
- Managers systematically demand and use gender data/information for decision-making and organizational change and monitor gender progress organizationally and programmatically.

Investment in gender capacities:

- Internal capacity development work (personal, organizational, 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/learning on programmatic/organisational gender best practice;
- Support capacities foundational to gender work e.g. facilitation, engaging power/politics, partnership, analysis/learning, GBV, fundraising/comms, advocacy, risk mitigation, contextual responsiveness; conflict, masculinities, gender in emergencies, allying with women's movements.

²² For an example, see "Developing an Equitable and Empowering Workplace Memo" CARE USA.

²³ See CARE USA's Organizational Gap Analysis Guidelines, [link](#) at bottom of page.

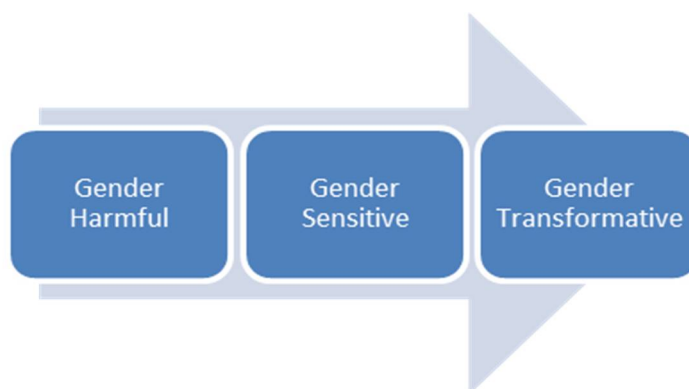
Networking for gender innovation

- Support space for women to network and develop leadership with a critical power/justice lens;
- Engage staff to be GEWV champions/leaders/supportive bystanders with diverse stakeholders;
- Invest in studies and knowledge generation for gender integrated development practice;
- Invest in staff incentives to learn/adapt lessons in promoting gender transformative outcomes.

Messaging and Influence

- Align constituency messages/brand with best evidence on gender transformative gaps/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/support gender-transformative resourcing and funding.

Annex B: Gender Continuum



At a minimum, all humanitarian and development programming must be gender sensitive with a clear plan for moving toward gender transformative approaches.

Gender harmful

Either takes advantage of rigid gender norms and existing power imbalances to achieve program objectives in an exploitative way; or fails to take account of gender relations with no consideration to how gender norms and unequal power relations affect achievement of objectives or how objectives impact on gender. If projects don't understand and take account of gender issues, it is most likely that harm will be done and remain unknown.

Example (exploitative): A poster that shows a person, who is HIV-positive as a skeleton, bringing the risk of death to others, will reinforce negative stereotypes and will not empower those who are living with HIV. Showing only virile, strong men in condom advertisements reinforces a common stereotype of masculinity.

Example (failing to take account of gender): Focusing on women in child health programming assumes women have the power, decision-making and sole responsibility to care for children without challenging the prevailing gender norms around (shared) parental responsibility. It also fails to understand social norms that may restrict women's mobility and decision-making ability to access and pay for appropriate health services, that in turn may discriminate in particular against girls, unmarried women, ethnic minority women, and women living with a disability.

Gender sensitive

Respond to the different needs and constraints of individuals based on their gender and sexuality. While they may improve women's, men's or diverse genders' access to protection, treatment or care, they do little to change larger contextual issues that lie at the root of gender inequality and don't fundamentally alter the balance of power in gender relations.

Example: A project where community decision-making forums are scheduled at times based on when women and men say they are available, childcare is provided on site, and considerations are made to ensure meeting spaces are accessible in terms of location and duration.

Example: CARE Rwanda provided humanitarian aid to refugees from DRC in 2012, focusing on SRH, GBV and solid waste management. Activities included family planning and anti-natal services, provision of male condoms and sanitary pads, HIV prevention, GBV awareness and referrals, and installation of solar lighting for latrine blocks.

Gender transformative

Approaches address all three domains of the Gender Equality Framework. They examine, question and change rigid gender norms and imbalances of power by encouraging critical awareness among people of all/diverse genders of gender roles and norms; promote the position of women; challenge unequal distribution of resources and allocation of duties between men and women; and/or address power relations between women and others in society. This requires gender specific work addressing gender inequalities in two or more core areas of inquiry; ensuring that women take leadership roles at all project levels and in all key decision making bodies; and cultivating behaviour and attitude change in people of all genders.

Example: EMPOWER program in Benin addressed GBV works not only with women providing them with legal assistance and safe havens but also with judiciary, policy, lawmakers to ensure cases are dealt with sensitively and effectively, ending years of systemic impunity for GBV.

Example: In the SAMRAKSAHN program in Nepal, CARE supported women to take leadership roles in risk assessment, community mapping and DRR activities to control flash floods. This helped change perceptions that women in the community are vulnerable and unable to be actors in their own lives. Men also joined in when they saw women's actions.

Annex C: Core gender models and innovations

We have attempted to gather together and organize the key innovations and models that CARE uses in its gender programming but will note that there are many approaches that CARE teams have used to address gender inequality. Defining what we mean by innovations and models will be useful (suggested definitions in footnote²⁴) and organizing this list in a way that is useful to teams. *Suggestions welcome.*

*Denotes innovations and models that are (also) used to analyze/address gender based violence.

Italics denotes the different spaces that CARE works in (rather than intervention approaches), which may be useful to describe the diversity of CARE's work (as per socio-ecological model in GBV Strategy [here](#)).

Innovations

Staff capacity building and internal policies	
*GED training modules CARE USA 2003-2013 <i>Personal / individual</i>	These modules bring together a series of training on Gender Equity and Diversity; the six modules are: 101 – Managing diversity and inclusiveness in a multicultural workforce; 201 – Dialogue across differences; 301 – Managing for Diversity; 401 – Gender Training; 501 – Engaging men and boys for gender equality; Training of Trainers. These modules have proven to: build basic awareness of many diversity dimensions including diversity of perspectives, work styles, worldviews; enhance participants understanding of power dynamics, build dialogue skills; improve skills/practices of managers of diverse teams; build basic understanding of gender & gender stereotypes, discrimination and violence; explore institutional and traditional barriers to gender equity; understand “hegemonic masculinity” and how it determines social norms related to the socialization of boys, concepts, and practice of power, violence, sexuality (including homophobia); and strengthen practical skills for gender synchronized programs. Link here
Gender Audit (also known as gap analysis) CARE USA <i>Institutions</i>	'Organisational Gap Analysis Guidelines: A Resource Guide for Advancing Gender Equity & Diversity within CARE' provides a useful framework and guidance on conducting gender audits to assist teams to assess organizational processes, structures and culture that help or hinder gender equity and diversity. Link here
Gender in Humanitarian Response	
*Gender Rapid Analysis CEG <i>Family and intimate relations, Solidarity groups and allies, Community relations and services, Social norms</i>	The Rapid Gender Analysis (RGA) provides essential information about gender roles and responsibilities, capacities and vulnerabilities together with programming recommendations. It is used in situations where time is of the essence and resources are very scarce. It can also be used to update or verify gender information that is already available. It should be used in conjunction with the Inter-Agency Standing Committee (IASC), Gender Handbook in Humanitarian Action, especially for sector specific guidance. Link here
Gender marker CEG <i>Family and intimate relations, Solidarity groups and allies, Community relations and services, Social norms</i>	CARE Gender Marker is a simple, easy-to-use tool that grades on a 0-2 scale, whether or not humanitarian relief work is prepared for, designed, implemented in a way that ensures women, men, boys and girls benefit equally; and if it will contribute to increasing gender equality. It draws on the concept of the IASC Gender Marker to ensure gender equality is part of the Consolidated Appeals Process. Link here
*Gender action plan CEG <i>Family and intimate relations, Solidarity groups and allies, Community relations and services, Social norms</i>	The GAP is both a tool and a process for planning a gender sensitive response. Draws on IASC's 'ADAPT and ACT collectively to ensure gender equality' and lessons learned by CARE and peer agencies in delivering a gender sensitive response. CARE introduced in 2012, now mandatory requirement for receiving CI Emergency Response Funds. Also being prepared voluntarily as part of funding proposals for donors including DFID and Australia's DFAT. Link here

²⁴ Suggested definitions: Innovation: The act or process of introducing new ideas, devices, or methods. Increasingly, an innovation implies not only something new, but something, if successful, that is a game changer (UNICEF). Model: An inter-related set of practices with their associated premises, principles and approaches that: has ownership broader than CARE refers to a body of verifiable, credible evidence that can articulate the scale (breadth and depth) of the change amongst the impact group, involves building evidence, policy influencing, and broader leveraging, offers a clear and unique advantage over other approaches, with demonstrated cost-effectiveness and added value that is recognized by others. Innovation definition referred to in Innovations and CARE consultancy, Madhu Deshmukh & Bill Philbrick, 2014. Wording definition for model by Michael Drinkwater and Mary Picard, Scaling Up Impact in a Program Approach: ARSHI case study, CARE Bangladesh, 2011.

Gender synchronised approaches and/or Engaging Men and Boys	
*Young Men Initiative, CARE Balkans <i>Family and intimate relations, Solidarity groups and allies, Social norms</i>	This ground-breaking program worked with young men aged 13-19 to deconstruct masculinity in their cultures and determine how gender norms and male socialisation lead to inequitable attitudes and behaviours. The approach was successful in changing attitudes in a more gender equitable way. Link here
Promoting Leaders Empowering Youth, CARE Bangladesh <i>Family and intimate relations, Solidarity groups and allies, Community relations and services, Social norms</i>	This program from CARE Bangladesh used multiple tactics to address gender inequity in poor communities. Boys and men joined advocacy efforts with women and girls, to address structural gender inequality. Male youth groups advocated on early marriage and sexual harassment. Older men participated in demonstrations for women's rights. The addition of men and boys to these women's advocacy efforts may have tipped the critical mass needed for change in some of these communities.
Building empowerment and solidarity	
*TESFA CARE Ethiopia 2010 <i>Personal / individual, Family and intimate relations, Solidarity groups and allies</i>	Towards Improved Economic and Sexual Reproductive Health Outcomes (TESFA), a 3 year project to improve economic and SRH outcomes for ever-married adolescent girls. Relies on peer-education within small group settings modelled on CARE's VSLA approach. Community support is provided by small groups who meet monthly to support girls and receive their own training on gender and health. They also reach out to other community members to share knowledge about topics like child marriage. Integrated the SAA approach (see below) at two levels: SAA and capacity building for negotiation and communication skills as part of the SRH intervention package with the girls' groups, and at the community level to facilitate dialogue among community members aimed at challenging norms around early marriage. Link here
Girls' leadership development Various countries <i>Personal / individual, Family and intimate relations, Solidarity groups and allies</i>	CARE's Girls Leadership Framework recognizes that quality education is foundational and the girls' leadership projects typically build upon CARE education work through applying this framework in over 28 countries. And to measure changes related to leadership opportunities the youth leadership index has been developed and used in conjunction with the Gender equitable index. E.g. Improving Girls Access Through education (IGATE) project in Zimbabwe combines community mobilization approaches, literacy training, girls' leadership development, economic development and grass roots advocacy. Link here
Promoting collaborative and accountability relationships between impact groups and service providers	
*Costing Violence Against Women (COVAW), CARE Bangladesh <i>Family and intimate relations, Solidarity groups and allies, Community relations and services, Social norms</i>	COVAW is an initiative that explored a new avenue of influencing 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. COVAW has yielded impressive results for prevention of domestic violence and more generally as an approach to triggering social change and shifting norms. However, there is a need for further testing beyond the existing operating areas, by documenting it thoroughly and disseminating beyond CARE. The COVAW approach needs to further test low cost ways of spreading the work to make it a model that can be scaled up. COVAW also needs to integrate more active reflection and learning component so that it can evolve naturally rather than relying on training and activities in an orderly and repetitive fashion. Summary link here and other documents in the series here
Supporting alliances and movements for social change	
*Abatangamuco, CARE Burundi <i>Family and intimate relations, Solidarity groups and allies, Social norms</i>	The Abatangamuco approach is an important part of CARE Burundi's program approach to social change towards gender equality. Abatangamuco is a social movement of men who speak out to their communities about their personal transformation that supports a more egalitarian society. Through a process of Appreciative Inquiry involving public testimony and hosting discussions, Abatangamuco positive male change agents/role models in Burundi 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 behaviors around violence and respect for women and girls. The Abatangamuco also engage with local chiefs and traditional leaders, government, and media. Link here

Models

Gender synchronised approaches and/or Engaging Men and Boys	
*Journeys of Transformation, CARE Rwanda <i>Personal / individual, Family and intimate relations, Solidarity groups and allies, Social norms</i>	This model 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 labour. So far, this has resulted in more equal sharing of reproductive work in the household, higher revenues from women's participation in VSL, and a reduction in violence against women. ²⁵ Link here
Structured space for critical self-reflection with key actors	
Social Analysis and Action and ISOFI toolkit, CARE USA <i>Personal / individual, Family and intimate relations, Community relations and services, Social norms</i>	Social Analysis and Action (SAA) is a facilitated process through which individuals and communities explore and challenge the social norms, beliefs and practices that shape their lives and health. Refer to the SAA Guidance Manual and ISOFI Toolkit. ISOFI provided CARE staff with time and space for reflection and experimentation, tools and appropriate technical support for the effective integration of gender and sexuality issues into their personal lives, their professional work lives and their program planning and implementation. Link here
VLSA + (engendered VSLA) <i>Personal / individual, Family and intimate relations, Solidarity groups and allies</i>	Its purpose 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. The VSL model involves the voluntary formation of groups of 20-30 self-selected participants who make regular savings contributions into a central fund, from which they can then take loans. The VSL model has been proven to enable group members to invest in small business and as such improve the economic situation of their household.
Promoting collaborative and accountability relationships between impact groups and service providers	
Community scorecard (engendered), CARE Malawi 2012 <i>Community relations and services, Social norms, policies and institutions</i>	Inclusive governance – supportive and accountable structures are required for girls, women, boys and men to be fully empowered. The Community Scorecard (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 plan for their improvement. Can be used to pay particular attention to specific groups like adolescents, to identify barriers to equitable access and provision of quality services including policy barriers. The CSC is simple to use and can be adapted to any sector entailing service delivery. CARE Malawi developed CSC methodology to develop a sustainable model to improve health services. CARE's CSC tool was rapidly taken up by the World Bank, who used it in education and health sectors of The Gambia. Since 2002, the 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. CARE has made use of the CSC methodology in a wide range of sectors, in countries that include Rwanda, Tanzania, Malawi, Ethiopia and Egypt, taking on a variety of roles that range from direct implementation to providing technical training and support. Link here
*One-Stop Model of Support for Survivors of GBV CARE Zambia & partners 2005-2011 <i>Community relations and services</i>	Building on similar models of comprehensive care in South Africa, Kenya, Malawi and Uganda, CARE and partners developed a successful one-stop model of Coordinated Response Centres (CRCs) where survivors could access medical, psychological and legal support. This model sought to reduce the incidence of GBV in Zambia through a combination of greater knowledge of changed attitudes towards gender inequalities, as well as access to comprehensive services for GBV survivors to meet their medical, psychological and legal needs. Link here
Media and mobilisation approaches to challenging social norms	
SASA! Mobilising Communities to Inspire Social Change, Raising Voices, 2013 <i>Personal / individual, Family and intimate relations, Solidarity groups and allies</i>	SASA! Program seeks to inspire, enable and structure effective community mobilisation to prevent violence against women and HIV/AIDS. Guide includes strategies used. Focus on raising awareness; talking about power; building sympathy with women GBV survivors. Power analysis is critical to build up the curriculum. Require strong social empowerment movement, CBOs/activists to criticise gov't. Link here
*One-Stop Model of Support for Survivors of GBV <i>Social norms, policies and institutions</i>	See above. Another important aspect of this model was the prevention element consisting of an intensive three year period of media awareness campaigns, community education and mobilization activities designed to increase knowledge and change attitudes and behaviour regarding gender among men, women, service providers, leaders, youth and children.

²⁵ Slegh et al., 'I can do women's work', 2013.

Building empowerment and solidarity	
<p>*EKATA/REFLECT, CARE Bangladesh <i>Personal / individual, Family and intimate relations, Solidarity groups and allies</i></p>	<p>The SHOUHARDO program in Bangladesh aimed to reduce malnutrition and made great gains in the stunting rate among children 6 to 24 months old. Part of the explanation was in the comprehensive nature of SHOUHARDO and the focus on women's empowerment, primarily done through EKATA groups where 20 women and 10 teenage girls met to discuss their circumstances and generate solutions to the problems they faced. The most important element of EKATA is in creating a safe space for members to openly discuss real-life problems that can be connected to broader social analysis. Through EKATA groups, members gain functional literacy and numeracy and learn about gender issues, including GBV, early marriage, and verbal divorce. Beyond empowering individual EKATA members, its group members have essentially become a mediator for resolving domestic violence issues, as well as ending dowry and early marriages. EKATA seems to be a promising model but needs more collaborative work and thinking around the model characteristics. This group also identified "evidence of the model!" as an area that needs more attention. Link here</p>