FIRST CONSOLIDATED CARE INTERNATIONAL (CI) GENDER REPORT ON THE IMPLEMENTATION OF THE CARE GENDER POLICY

2011

REPORT SYNTHESIS

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>> PREFACE

CI is committed to focus on women's empowerment and gender equality in our key strategic decisions and our programming worldwide.

The CARE International Gender Network plays a leading role in supporting the implementation of CARE International's (CI) Gender Policy in CARE's work. Through this policy CARE seeks to promote equal realization of dignity and human rights for girls, women, boys and men and the elimination of poverty and injustice. This policy is explicitly designed to improve the incorporation of gender in programmatic and organizational practices.

This report is the *First Consolidated Gender Report on the Implementation of the CI Gender Policy*. It highlights multiple efforts and achievements made by CI members in implementing the policy, while assessing CI's success in meeting its commitments towards women's empowerment and gender equality. The report provides a clear set of recommendations for further enhancing our joint commitment to gender equality, which is a fundamental element in improving our impact in the fight against poverty.

Robert Glasser

Secretary General
CARE INTERNATIONAL

>> ACKNOWLEDGEMENTS

We would like to strongly express our deepest thanks to all CI members and the respective gender focal points for their highly appreciated support, for the compilation and submission of the very informative and enlightening CI Gender Reports and very useful and constructive feed-backs in the course of the reporting process which made it possible to compile *the First Consolidated Report on the Implementation on the CARE International Gender Policy*.

Further, we want to explicitly express our big thanks to Marcy Vigoda, Deputy Secretary General of CARE International, who provided us with valuable support and feed-back.

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>> INTRODUCTION

CARE International (CI) endorsed the CARE International Gender Policy in February 2009[1] in order for the organisation to take meaningful steps towards its commitment to support gender equality. The Policy marks a milestone in the organisational history of CI, as it not only commits CI to achieve gender equality and women's empowerment standards in Program Quality, but also to address organisational needs in order to "walk the talk".

The importance of implementing the CI Gender Policy across CI as a whole has become increasingly apparent as the CI Board decided to put women's and girls' empowerment on the top of its international agenda in November 2009. The ongoing commitment is also reflected in the CI wide consultation process on the 2020 Vision:

> *"(..) Within this global movement, CARE is known for its work across the relief, recovery, and development spectrum and its particular focus on empowering poor women and girls as a means to overcome poverty. CARE's credibility is a reflection of its success over the previous decade in improving the economic, social and political advancement and wellbeing of millions of poor women and their communities around the world (...)."*
> *(22.06.2011 by Robert Glasser)*

As stated in the CI Vision Statement, CARE:

> *... seek(s) a world of hope, tolerance and social justice, where poverty has been overcome and people live in dignity and security. CARE will be a global force and partner of choice within a worldwide movement dedicated to ending poverty. We will be known everywhere for our unshakeable commitment to the dignity of people.*

Within the CI Gender Policy, CI has committed to "Promote gender equality as an explicit internationally recognised human right." Therefore, the CIGN wants to point out in the spirit of the Convention on the Elimination of Discrimination against Women (CEDAW) which underlines, that "...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" and that the general concept of "Gender Mainstreaming (GM)"[2] shall be intrinsically linked to CI´s work.

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[1] See Annex 1 of the 1st CIGN Gender Report on the Implementation of the CARE Gender Policy which will be available on the Gender Wiki, once it is approved by the Board (November 2011); http://gender.care2share.wikispaces.net/
[2] Gender Mainstreaming was defined in July 1997, by the United Nations Economic and Social Council (ECOSOC)

In order for CI to appropriately support women's empowerment and to align programming, branding and communications around this, it is necessary to put gender equality at the heart of all our work. Hence, implementing the already endorsed CI Gender Policy is an essential step in that direction and will indeed help us realise our long term vision.

The CARE International Gender Network (CIGN)[3] was been mandated by the CI Executive Committee to produce consolidated reports on the Implementation of the Gender Policy.

The co-chairs (2009) of the CI Gender Network[4] have developed a specific reporting format,[5] in order to ensure that CI Members are reporting against a relevant matrix of indicators[6] accompanying the CI Gender policy. In March 2011, all CI Members submitted individual reports against the format and the indicators. These have been consolidated into this joint CI report.

Most importantly, this first CI Gender Report should be considered as a baseline to understand where the confederation is at in terms of meeting its commitments, and what CARE needs to improve and get better at. This Report highlights the key status of implementation, examples of some best practices as well as challenges faced. In addition, based on the CI Member Reports, the CI Gender Network has developed a set of key recommendations to the CI on what practical measures could be taken in terms of further delivering on the CIs gender commitments.

A more *in-depth version of the report* referring more closely to the individual CI Gender Reports initially submitted to the CIGN's Steering Committee will be available on the Gender Wiki[7], once it is approved by the Board (November 2011) or by contacting one of the CIGN chairs.

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[3] A network established in 2007 consisting of two focal persons from each CI member. The focal points serve as contact persons for the monitoring of the implementation of the CI Gender Policy, and most are also members of thematic working groups within CIGN bringing the commitments of the Gender Policy further.
[4] Since November 2010 CARE Osterreich, CARE Norway and CARE UK (contact CIGN co-chairs: ellen.beate.langehaug@care.no; barbara.kuehhas@care.at, martins@careinternational.org)
[5] See Annex 2 of the 1st CIGN Gender Report on the Implementation of the CARE Gender Policy which will be available on the Gender Wiki, once it is approved by the Board (November 2011); http://gender.care2share.wikispaces.net/
[6] See Annex 3 of the 1st CIGN Gender Report on the Implementation of the CARE Gender Policy
[7] See http://gender.care2share.wikispaces.net/

>> KEY RECOMMENDATIONS

1. PROGRAMMING RECOMMENDATIONS

Setting up Gender Equality and Women Empowerment Programs for success: Knowledge sharing, documentation, support of communities of practice and understanding of the results of the Strategic Impact Inquiry (SII)[8], are key when elaborating Gender Analysis and building upon the results.

CARE's focus has increasingly aimed to understand the underlying causes of poverty and injustice. In most country contexts where CARE works, gender inequality has been identified as a key driver of poverty and injustice. Over 90 percent of Country Offices have developed a program specifically focused on women or girls as their impact group. In this context, gender analysis is absolutely necessary to understand the norms and dynamics driving inequality. The CIGN recommends that the gender toolkit and the gender analysis framework (http://pqdl.care.org/gendertoolkit/Pages/core.aspx.), developed by the CIGN working group on "Tools Harmonization", be institutionalised as a training module for programme staff in headquarters and in country offices where CARE works.

2. GOOD PRACTICES FOR GENDER HUMAN RESOURCE (HR) POLICIES

CI needs to lead by example and to 'walk the talk'. Beyond national labour laws, CIGN recommends CI members to develop a set of good practices for gender equal HR policies looking at key gender issues including leave and travelling for mothers and fathers, ensuring a healthy and conductive environment for work/life balance and facilitating women's access to certain positions given that they face different constraints compared to men. Gender responsiveness and experience should be included in job descriptions whenever possible, while gender responsive outcomes should systematically be incorporated in Staff Performance and Appraisal systems. This would encourage staff to be accountable to gender related results and also strengthen CARE's internal capacity.

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[8] Strategic Impact Inquiry (SII) CARE invested in a three-year 30+ country study to learn more about women's empowerment according to the lives of those engaged with CARE's programming, as well as to gauge what has been CARE's impact on women's empowerment and gender equality (Strategic Impact Inquiry, SII), see: http://pqdl.care.org/sii/default.aspx

3. GREATER ACCOUNTABILITY SYSTEMS IN PLACE AND A STRONGER CIGN

Stronger accountability systems in place and a stronger CI Gender Network: The limited buy-in or ownership of the importance of (resourcing) gender issues from some CI members' top management continues to be an impediment to the implementation of the policy. Therefore, the CIGN recommends that CI members include updates on the implementation of the CI Gender Policy into the reporting format of the semi-annual membership report to the CI Secretariat. At the same time, effective resourcing and strong accountability as well as a stronger engagement with CI relevant spaces, including working groups, would be created by strengthening CI members to contribute personnel or/and funding to the network. This would create a much stronger network that can support CI members in the implementation of the policy and help to pursue the development of a Centre of Excellence for Gender/Women's Empowerment.

4. DONOR EDUCATION

Focus on documenting and communicating links between gender equality and CI's vision of poverty reduction and social justice to secure future funding. A general lack of funding for gender mainstreaming in projects/programmes other than those specifically focused on women's empowerment and promoting gender equality emphasises the need to educate the donors on the link between gender mainstreaming and the actual project/programme shift. Each CI member should be encouraged to actively "engage partners, donors, governments and civil society organisations to promote and support effective, creative and impactful ways to promote gender equality".

5. CREATING SYNERGIES ACROSS THE CARE SYSTEM AND COORDINATION AT CO LEVEL

CI members should work much more closely and exchange ideas/experiences to create the highest level of synergies and cost efficiency. It is recommended to build capacity in house across the CARE federation and to work on retaining trained staff. The CIGN recommends establishing solid and in-house capacities on which to draw on, instead of depending too much on external consultants.

>> REPORT SYNTHESIS

a. Incorporating Gender Analysis in program design and as an operational feature

As per the CI Gender Policy CI members are committed to ensure, that: "the following standards are applied, monitored, adhered to and reported on:

- *Incorporate gender and power analysis as a mandatory operational and/or design feature.*

- *Be based on data disaggregated by sex, age and other relevant diversity factors such as ethnicity, religion, caste, etc."*

Status of Implementation

One important indicator of CARE's commitment to gender equality is how frequently CARE programs use a gender and power analysis as part of program design and operation. A majority of CI members stated that this indicator is difficult to measure due to the decentralised processes currently used for reporting programming quality and results.

All CI members report that the incorporation of gender & power analysis in program design/LRSP development and the P-shift processes is an important element to better understand existing power dynamics in society and develop relevant interventions to reach sustainable gender equality and women's empowerment. But Gender Analysis as such is so far not undertaken in all new programmes and projects. Only a few CI Members stated a strategic and systematic incorporation of the Gender Analysis in all of their major programmes/LRSP planning and/or projects; and no member has reported a full implementation yet.

There is a relatively wide variety of implementation of this result at the time of writing the report: An estimated 20% of the CI Members do have specific policies and strategies, sometimes paired with benchmarks, in place. Another approximate 30% of CI members reported having data available which demonstrates a number of programmes and projects that meet the gender analysis requirements. The remaining CI members do include gender analysis rather on an ad-hoc basis; often adopted mainly to fulfil donor requirements (to "think gender" during the design phase).

CARE's current capacity to understand and address gender power dynamics, social norms, gender bias and discrimination is inherently shaped by CARE USA's past investment in the Strategic Impact Inquiry (SII), which from 2004-2008 promoted a wider understanding of Women's Empowerment specifically in countries across the globe. While this has shaped staff's understanding and program frameworks, the practical implementation of strategies still lags behind.

Best practice examples

In order to integrate gender analysis into long-term programming, **CARE Australia** (CA) has developed guidance on the LRSP process which includes some points around conducting gender/power analysis. Design teams are encouraged to undertake a gender/power analysis and to address not just human conditions but also social positions and the enabling environment. Where such analysis is not possible during the design phase (due to timeframes, donor conditions, managing community expectations, etc) CA encourages gender analysis to be undertaken during the inception phase. CA is reviewing and revising this guidance for compulsory use.

At the onset of an emergency a rapid gender analysis tool can be consulted in CARE's Emergency Pocketbook, and a related version is available with the "Gender is Easy" tool produced by the Senior Gender in Emergencies Specialist at CEG. Country Emergency Preparedness Plans (EPPs) that have included a gender analysis have proven to be very useful in guiding a gender-sensitive emergency response, as demonstrated by the 2011 *After Action Review* in Ghana. The information should be collected by a trained and gender-balanced Emergency Response Team.

CARE USA together with CIGN has elaborated a toolkit for Gender Analysis which is now available on line and rolled out currently across CI in order to facilitate capacity building. (http://pqdl.care.org/gendertoolkit)

Challenges

The main challenges regarding the implementation of gender analysis in programme and project design include the inconsistency in the definition of gender related issues, the lack of common understanding of gender within CI members, staff and donors. The analysis of the reports demonstrates the need for additional capacity building, harmonisation of the understanding and definition of gender related terms and approaches, as well as the need for tools and resources to meet this commitment under the policy; especially as awareness about the importance of gender, gender mainstreaming, gender equality, women's empowerment, and GED increases within the organisation.

Specifically difficult is the implementation of gender & power analysis in emergency situations, due to short timeframes for proposal development. Though the CI Gender Policy explicitly states that gender & power analysis are a mandatory operational/design feature, advancements reported up to now still show room for improvement and coordination.

CARE, in part due to high staff turnover, is suffering a constant loss of institutional memory and specific expertise; demand is far beyond capacities.

One CI member emphasised clearly that gender is often a trade off due to competing funding interests/donor priorities. Several CI members also reported being very cautious to define projects as Gender Equality and Women Empowerment projects due to a lack of understanding among donors of the gender mainstreaming approach to development.

Main recommendations

Setting up Gender Equality and Women Empowerment Programs for success: Knowledge sharing and learning, training and resourcing and understanding of the results of the Strategic Impact Inquiry, are key for elaborating Gender Analysis and building upon the results. The development of a standard training module with a clear definition of minimal requirements for Gender Analysis for Program staff/Program&Project Design, by highlighting CARE's Women's Empowerment Framework (SII) and the "Underlying Causes of Poverty Analysis", is highly recommended in order to guide Program staff in the field and in HQs across the organisation.

Accountability: Gender Analysis shall be understood as mandatory to all Programs at proposal and design stage (or latest at inception level) and to all strategic processes such as P-shift, LRSP and Emergency Preparedness Plans (EPP). Mechanisms to ensure compliance at Country Office level have to be developed, and monitored by the respective Lead Members and supported by non lead CI members. Handing over leadership to and supporting the Country Offices in those processes are regarded to be important features for success and ownership of the results, and thus really boosting program quality.

Continuity in knowledge management & analysis capacity: CARE, in part due to high staff turnover, is suffering a constant loss of institutional memory and gender capacity. Therefore it is important to proactively address this issue and make sure that staff at CO and CI member level know what has been elaborated already in a specific country/region regarding gender analysis and build upon it. It is important that every Country Office/CI member and CIGN recommends that every CO and CI member has a focal point for collecting the gender related institutional memory. Proactive measures in keeping knowledgeable staff and in-house capacities, would contribute to cost-efficiency and effectiveness of CARE.

Resourcing and Joint research and coordination: It has to be practice, for different CI members working with a CO, to jointly support to accomplish gender analysis. Further and closer collaboration in order to create the necessary synergies for success on the ground are highly recommended. Different CI members could consider a kind of "basket funding" for specific programs.

Donor education and Branding: If CI includes minimum gender analysis requirements into all proposals as mandatory (as some of our donors already do), it will then be easier to educate those less committed donors and brand CARE International as "the" organisation committed to implementing gender equality and women's empowerment programming based on evidence based analysis.

b. Gender sensitive Monitoring and Evaluation

According to CARE's International Gender Policy, CARE's programs are committed to: *"include relevant and feasible gender sensitive indicators for every stage of planning, implementation, monitoring and evaluation, for results to explicitly state gender equality results, and to be based on data disaggregated by sex, age and other relevant diversity factors such as ethnicity, religion, or caste."* The CI members have committed to apply, monitor, adhere to and report on this commitment.

CI members have committed to provide evidence of how the programming interventions are effectively contributing to the changes envisaged in the field of gender equality and women´s empowerment. In the light of the actual aid & development effectiveness debate, it is very crucial for CI to prove and provide evidence based data on the relevance, impact, effectiveness, efficiency and outputs of the work being done; which are common standards in monitoring and evaluation.

Status of implementation

In general within CARE, it seems that M&E systems are often still primarily used to observe data mainly at output level: e.g. the compilation of numbers of men and women reached. This disaggregation of data is often used to justify whether an intervention is being "gender sensitive".

CARE has to proactively move far beyond this approach. Within its M&E work, CARE has to try to understand the changes that programmes are having on women and men, boys and girls at outcome and impact level. CARE is furthermore seeking to build up organisational learning through analysis and evaluation of possible synergies and conflicts between poverty reduction and gender inequalities. As CI members are committed to the importance of gender sensitive Monitoring and Evaluation, there are different approaches on how to integrate M&E systems in programming.

Best practice examples

The evidence provided by the CI Member Reports shows that there are a lot of inspiring ongoing efforts in order to improve applicable M&E frameworks and methodologies, which can be highlighted as best practices.

In 2009, at a workshop held in Uganda, COs and some CI members, through a participatory process, defined the most relevant women's empowerment outcome indicators to focus on, in some specific sectors, for an eight-country **CARE Norway** programme. Since then, the approach has been piloted and has even expanded to other COs through cooperation with other CI members. The explicit goal is, that over time, the results in M&E will provide evidence of the effectiveness of the interventions and evidences for attribution to CARE's work, as well as allowing aggregation of data and comparison across countries.

Another promising multi-country undertaking is the *Women's Empowerment Impact Measurement Initiative (WEIMI)*; which focuses on Program Impact indicators for women's empowerment and was

initiated by **CARE USA**. It is currently implemented in six pilot COs across all the regions and builds on the Strategic Impact Inquiry (SII) on Women's Empowerment and work undertaken by CARE USA, CARE Norway, CARE Austria and several COs to consolidate key impact and outcome indicators which emerged from the SII process.

Another encouraging initiative has been the development of a draft "*Quality Tools Guidance*" (April 2010) for promoting program quality across the project cycle, integrating early versions based on the CI program standards framework and more recent thinking around the program approach and Unifying Framework by CARE Australia (CA). CA is reviewing and revising this guidance for compulsory use. Some projects have been designed using the draft CARE "*Global Impact Indicator Categories*".

Other CI members have also reported M&E standards in line with the CI Gender Policy, which they apply to their programming; like the usage of a *revised template* for annual reporting by programs supported by CARE Denmark. This template attempts to harmonise reporting to various donors and includes a question about progress in mainstreaming gender at program level, or the "minimum program standards" which includes specific reference to gender related M&E used by **CARE Österreich.**

An upcoming report (July 2011) commissioned by CARE and OCHA with the Feinstein International Centre of Tufts University shall provide further guidance on collecting sex and age disaggregated data and doing gender analysis to inform humanitarian programming. By doing this, CARE hopes to strengthen practices within CARE as well as the whole humanitarian community.

Challenges

Although so many encouraging initiatives are on the way, challenges have also been identified by the different CI members. A multitude of questions came up in the individual reports, for example: does gender sensitive monitoring and evaluation of data have to be conducted in *every* project or *only in gender related projects?*; which diversity relevant indicators need to be considered? (e.g. cross-cutting categories like age, ethnicity, caste, etc); how to avoid gaps in the consistent disaggregation of data by sex; how to include gender sensitivity into the more quantitative survey tools; how to include the impact group effectively into participatory evaluations; how to share knowledge gained effectively across stakeholders; specifically how to strengthen the data analysis capacities in order to inform the next programming cycles and learning and how to ensure "gender-sensitivity" of evaluations?

Definitions of the meaning of impact and outcomes seem to vary across CI, and data collection for M&E seems to be regarded as easier than the accurate data analysis and consistent feeding-back into the programming and learning cycles.

Capacities, although improving, are still far from meeting current organisational needs. CO and CI members vary in their understanding and capacities; and harmonisation on the grounds of different systems or competing programs is a challenge. Consistent integration of research has also sometimes been reported as challenging.

Externally, CI members and particularly the Gender in Emergencies Group (within CEG) have reported challenges with regard to donor requirements: Some CI members have claimed, that donor reporting formats do not provide space for real gender sensitive M&E, and in some cases – for example in the case of ECHO (EU Emergency Funding) - gender sensitive M&E has been pushed back, which hampers implementation of our CI Gender Policy on the ground.

Main Recommendations

Strengthen capacity of data analysis: Though data collection generally seems to work, challenges were reported in analysing the results of M&E and feeding them back into the programming cycles. In this regard capacity building in writing up the TORs, finding the "right consultant" or creating in-house capacities; having a clear concept of evaluation, and also especially of analysing the data, and feeding the learning back into the program/project cycle are critical. The information and lessons learned that emerged from the findings of the Women's Empowerment SII (that can be found at http://pqdl.care.org)should be a minimum requirement for in-house and external M&E staff (to be included in the TORs).

Creating synergies across the CARE system and coordination at CO level: CI members should work much more closely and exchange ideas/experiences to create the highest level of synergies and cost efficiency. Building capacity in house across the CARE federation and working on retaining trained staff is highly recommended. The CIGN recommends establishing solid in-house capacities on which to draw on, instead of depending too much on external consultants. Such internal capacity could be coordinated through CIGN mechanisms.

Participatory evaluation: Some CI members have expressed the wish to conduct more participatory evaluations with the direct participation of female and male beneficiaries; in the light of CARE's downward accountability this option should further be explored.

M&E as gender sensitive and "gender transformative": In the light of the current "Vision 2020 process" the CIGN members would suggest the use of a combination of the terms "gender transformative" and "gender sensitive". This would embrace the concept that gender is central to promoting gender equality and achieving positive development outcomes. It takes on the task of transforming unequal gender relations to promote shared power, control of resources, decision-making, and support for women's empowerment.

Educating donors: Clearly state CI member's commitment to gender sensitive M&E and make donors aware of its importance, especially ECHO.

c. Funding to meet commitments and formulate staff work plans and budgets

According to the CI Gender Policy, CI members are committed to: "ensuring sufficient funding to meet gender requirements and to formulating staff work plans and budgets accordingly." Funding to support specific work plans and budgets is essential in order to ensure adequate application of the commitments in the policy. Specifically, organisational changes require staff and budgets to effectively address attitudes, belief systems and structures deeply embedded in the organisation as a whole (as opposed to a limited focus on programme/project interventions).

Status of implementation

Most of the reported progress in terms of funding to meet commitments in the gender policy relates to programming. By and large, there is a lack of funds available for CI members to ensure that internal staffing and/or staffing policies are aligned with the CI Gender Policy. This includes areas such as sustainable project/programme budgeting and necessary technical assistance within e.g. women's empowerment programming, engaging men programming, gender mainstreaming etc.

All the CI member's Reports show that specific funding accommodating gender commitments is available almost solely in programming explicitly focusing on gender and women's empowerment.

In general, the reports underline that it is easier to meet the commitments in the gender policy in programming where CI Members have strategic long-term "framework agreements" with major institutional donors. This provides CI members more flexibility in how the funding is then spent.

Best practice examples

There are several CI Members reporting promising progress in attracting both restricted and unrestricted funding to meet the commitments within the CI Gender Policy, particularly supporting gender in programming. Some of the examples are emphasised below:

- **CARE Peru**'s strong commitment to gender related issues is expressed for example, in the allocation of unrestricted budget resources for the establishment and consolidation of the Gender Equality Program.

- **CARE Denmark** demonstrated that after the introduction of the gender guidelines 2007-2009, CARE Denmark's main donor Danida, which is generally supportive of CARE's work with gender, provided flexible financial support to cover it through the framework agreement.

- Through both unrestricted and targeted restricted fundraising, **CARE USA** has invested in the development of their three signature programs, (Mother's Matter, Power Within and Access Africa) including support for gender and power analysis; development of gender strategies by teams within programs and COs; and subsequent funding of proposals that target women and girls as impact groups.

- With both restricted and unrestricted funding, **CARE Norway** has increasingly invested in new positions incorporating gender focus and building capacity among staff in CARE Norway as well as in RMUs and COs in order to accommodate the need for specific competence in gender relations and women's empowerment programming. This includes the re-formulating of staff work plans and budgets to accommodate the building of gender expertise in e.g. economic security, engaging men in gender equality and sexual and reproductive health and rights. CARE Norway successfully approached their MoFA to fund the post of the Senior Gender in Emergencies Specialist based in Geneva to provide overall leadership for CI in relation to Gender in Emergency Response within the framework of CI's humanitarian emergencies policies and strategies.

- **CARE Österreich** has financed Gender Advisors through the framework agreement with ADA, which allows support to the Country Offices and in-house capacities, and to develop trainings and engage in international fora.

- There may be potential to attract funding to contribute to the implementation of the gender policy through specific public fundraising activities. In 2009, CARE Norway organised a national telethon campaign that raised funding for women's empowerment and engaging men in gender equality programming from 2010 - 2014. Approximately 50% of the funding is being used specifically on engaging men in gender equality. Engaging boys and men more strategically is considered to be an important step by the 10 COs involved. In order to secure necessary capacity building in this innovative programme area, CARE Norway has budgeted some of its own funding for technical assistance by experts as well as for relevant research to address gaps.

- Between 2009 and 2011, CIUK allocated strategic funding from Dfid to support the regional gender programme in LAC and to fund the position of the regional gender advisor. Dfid's strategic funding was also used to fund research on the impact of conditional cash transfer on women's empowerment.

Challenges

Difficulty of attracting funding from institutional donors: Despite the examples above, a considerable number of CI Members report that it is difficult to attract funding from institutional donors to enable CARE to give sufficient focus to the commitments in the CI Gender Policy. Current funding from major donors is mostly restricted in a way that does not explicitly encourage enhanced focus on integrating gender elements.

Limited funding opportunities from private donors: Currently, there is limited private donor funding opportunities for the purpose of integrating gender elements into the organisation and programming level. Several CI members' reports emphasise that private donors are most concerned with producing "quick results" and hence focus on short term projects not taking into account a comprehensive and sustainable approach.

Lack of unrestricted funding allocated to the implementation of the policy beyond programming: CI members report that there is a general lack of unrestricted funding for the purpose of implementing the CI Gender Policy commitments although there is a need to move beyond the commitments applying to programming. There seems to be a challenge to seriously take into account how the policy requires organisational changes in areas other than programming. Some CI members report that there is a general lack of understanding and ownership of what the gender policy actually means and how it relates to every staff member's work.

Reluctance from some CI members to incorporate gender programming into budgets: Some CI members are reluctant to actively promote the necessity to budget for integrating key gender aspects into projects. There is a perceived risk that budgeting for gender could negatively influence budgets needed for other important aspects. For example, one CI member emphasised that the nature of their projects occasionally forces them to make a choice between mainstreaming disaster risk reduction and gender.

Main Recommendations

Donor Education: Focus on documenting and communicating the link between gender equality and CI's vision of poverty reduction and social justice to secure future funding. The general lack of funding for gender mainstreaming in projects/programmes, other than those specifically focused on women's empowerment and promoting gender equality, emphasises the need to improve donors' knowledge on the link between gender mainstreaming and the actual project/programme. Each CI member should actively "engage partners, donors, governments and civil society organisations to promote and support effective, creative and impactful ways to promote gender equality" (ref gender policy's commitments) – and to coordinate financial support to enable CI to meet commitments (including formulating staff work plans and budgets).

Use unrestricted funding to put gender on the agenda: Considering the current challenges of attracting funding from private as well as institutional donors specifically to enable CI members to meet certain key components of the policy commitments, CI members should allocate some unrestricted funding (usually coming from the public) to support gender organisational and programming objectives. Ultimately, that would also enable CI members to use increasing programming evidence to show how GE impacts positively on poverty reduction. This evidence could then be used to advocate private and institutional donors to invest more consistently in GE programming.

Focus on building momentum in each CI Member to invest additional resources in meeting commitments in the gender policy including pursuing the development of a CI Centre of Excellence for gender/WE: In order for CI members to prioritise funding in meeting their commitments it is essential that serious efforts are made to enhance the understanding and ownership of the policy among all staff across all levels and departments. Many CI members have recommended more serious efforts at providing relevant staff training within gender in general and in the gender policy in particular.

Invest in Gender Advisors with key expertise: Focus on attracting new funding or channel unrestricted funding to Gender Advisors in the regions in order to meet the high demand for technical gender expertise in COs. Populate the CI Roster for Emergency Response (RED) with gender advisors to be deployed to emergencies and build the gender capacity of other positions in the roster (i.e. team leaders).

d. Human Resources

Through the CI Gender Policy, CI members committed to the following: "Human Resources policies and practices will adequately address gender equality. CARE members will track and report annually on gender balance in staffing and governance structures and implement specific strategies to balance male/female representation."

Status of implementation

The analysis of the CI members' reports demonstrate a lack of sufficient HR policies and strategies to address gender equality and to bring the necessary organisational changes required by the Gender Policy to turn CARE into a truly gender transformative organisation (as per CARE's aspirations defined in the 2020 Vision draft).

The implementation of the CI Gender Policy into HR policies and practices varies from very committed CI members, who have designed internal policies, strategies and operational plans to specifically address gender related issues, to CI members who have no formal procedures or policies in place beyond the minimum legal requirements. In fact, a significant number of CI members are referring to their respective national labour laws as the framework they comply with.

More specifically, e.g. CARE USA and CARE Australia, tend to have a set of HR policies, institutional strategies and organisational plans to achieve the gender policy results, while the smaller lead members do not have those systems and plans in place yet.

It is encouraging though that a significant number of CI members (lead and non lead) are expressing a commitment to doing more in the following months and years to achieve this result.

Gender Composition of staff

As shown in figure 1, the large majority of CI members have a predominance of female staff with some CI members having up to 75% of their staff as women. In Europe and North America, this is very much in alignment with other non governmental organisations and specific to a sector which usually attracts more women than men.

Figure 1: *Gender Compositions – CI Members Headquarters 2010*
    *) no data submitted   **) data from 2009
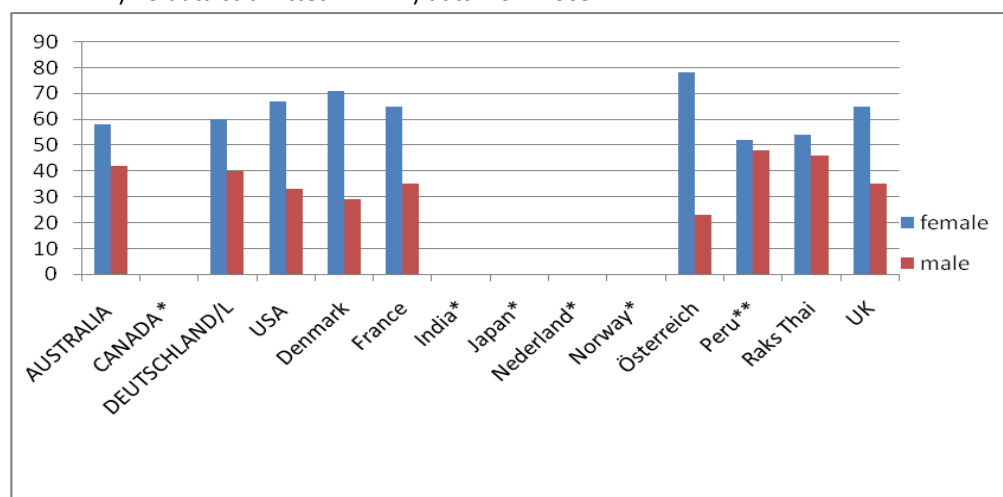
It is necessary though to highlight a consistent gender pattern among the majority of CI members: despite an overwhelming presence of women across the organisation, women tend to be less present at Senior Management Team (SMT) level and are consistently in minorities at the board level. Only three out of nine CI members, who submitted gender data, reported having a dominance of female staff in their SMT, while only two CI members have a 50/50 balance at their SMT level.

Figure 2: Gender Composition CI members SMT2010/2011
   *) no data submitted   **) data from 2009
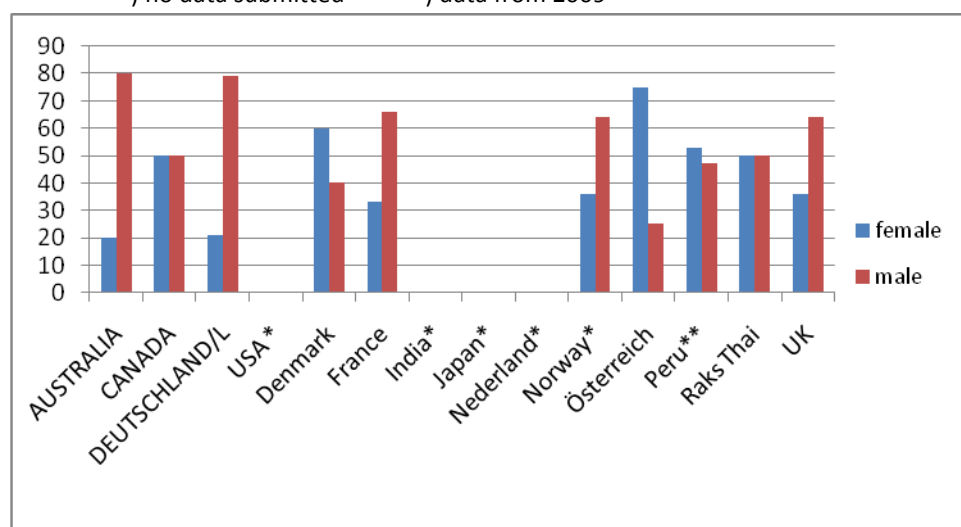
COs remained dominated by male staff and some of the Lead members commented on the difficulty for some COs to recruit women in field positions (particularly in emergency settings and also specific to some sectors like Logistics, WASH etc), highlighting the need to do much more in relation to developing gender focused HR policies.

Figure 3: Gender Composition – Country Offices 2010

*) no data submitted **) data from 2009 ***) CARE Cameroon not included
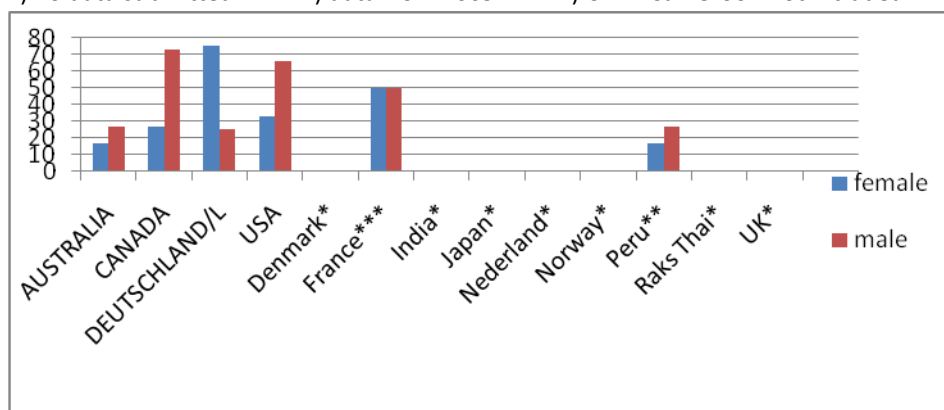
Gender Trainings

A large majority of CI members have specifically raised the need for gender training. A number of CI members are already providing such training to their staff and COs on a regular basis, while a few members are planning to do so in the future.

Some of the lead members have designed a series of online courses that are available to all staff through the CARE Academy. Lead members have also held a number of targeted trainings for program staff, marketing and communication staff and a range of GED trainings for programme staff, gender focal points and staff across the organisation focusing on gender concepts and personal reflection on change. The CI emergency group has also promoted an online Inter Agency Steering Committee (IASC) Gender Course entitled 'Increasing effectiveness of humanitarian Action for Women, Girls, Boys and Men'. This course is mandatory for staff at CEG (CI Emergency Group), ERWG (Emergency Response Working Group) and RED (CARE Roster of Emergency Deployment) and participants in both CHEOPS (CARE Core Humanitarian Programs) and ELMP (CARE Emergency Leadership and Management Program) courses for operations and management in emergencies.

Best practice examples

Some great examples of best practices are coming from the southern CI members who have set up a number of innovative policies and mechanisms to monitor their Gender HR policies.

CARE Peru has an Equity Committee for consultation, monitoring and support of the implementation of their Social Equity Policy by channelling complaints or suggestions to the relevant bodies and monitoring that they are being addressed and resolved promptly.

CARE India's HR have incorporated into their structure a psychosocial support team which addresses issues relating to psychosocial stress in the work environment. This is responding to the reality of a CO with long working hours in a patriarchal society where as reported by CARE India "*most women still go home to take care of cooking and child care responsibilities*".

Best practices among lead members include a programming and organisational 'Gender Equity and Diversity' (GED) action plan developed by **CARE Australia**. The plan, focusing on Australian operations, ensures that GED principles are embedded in policies and practices that affect staff and business operations.

CARE USA's Executive Management Team also approved a GED strategy in 2010 following wide consultations.

It is also interesting to highlight that CARE Gender in Emergencies' strategy includes a section on organisational culture that looks at staffing issues including work/life balance, living/working conditions for male and female staff, sexual harassment etc.

Below are a few examples of interesting policies and practices across CI members:
- CARE Australia 'TELL US Policy' which provides a confidential/anonymous mechanism that facilitates learning about wrongful conduct within the organisation and protects the staff that use the mechanism."
- Specific gender sensitive employee handbooks that usually include the CI Gender Policy
- CARE USA implemented a number of gender sensitive policies including the Diversity Policy, a code of conduct, a Prevention of Sexual Exploitation and Abuse policy, as well as a breastfeeding policy along with a policy for travel during pregnancy and maternity and paternity leave.

Some CI members have also pointed out the need to create a friendlier work-life balance, especially if CARE is to retain female staff. Long working hours, frequency of travel and the work load (including at home after normal working hours) is often a major constraint especially for women and even more acute in emergency settings.

Main Challenges

Lack of buy-in from senior management: A few examples coming out of the reports - including one CI Member specifically referring to the Senior Management team's approval of a 2-year Gender Strategy Action plan which was then never implemented - evidence a lack of buy-in from some CI members' senior management. This remains a main constraint in getting some of those internal policies and strategies in place.

No consistent and effective system to track and analyse gender data: Besides CARE USA (through UBORA), CI members do not have the systems in place to track data in a consistent manner and then use this data to inform choices and decisions.

CI Gender policy not properly resourced: The implementation of the policy has not been effectively resourced by most CI members. Consequently, often no specific staff member has been mandated to advance the policy implementation. When staff have been allocated responsibilities to move forward the implementation of the policy, this has been an 'add-on' to their existing job responsibility and not always formally incorporated into their job description in order to realistically enable them to do what they are supposed to do.

Main Recommendations

Greater accountability systems in place and a stronger CI Gender Network: As mentioned earlier, the lack of buy-in from some CI members' top management continues to be an impediment to the implementation of the policy. Therefore, the CIGN recommends that CI members assign responsibility for accountability to a single member of senior management, and to include updates on the implementation of the CI Gender Policy into the reporting format of the semi-annual membership report to the CI Secretariat At the same time, effectively resourcing CIGN by encouraging CI members to contribute personnel or/and funding to the network' joint activities would create a much stronger network that could support CI members in the implementation of the policy.

Good practices for gender equal HR policies: Beyond national labour laws, CI should develop a set of good practices for gender HR policies looking at key gender issues including travelling for mothers and fathers, ensuring a healthy and conducive environment for work/life balance, facilitating women's access to field positions given that they face different constraints compared to men.

Institutionalisation of gender training for staff: CI should produce standard generic training modules for gender equality that can be adapted to specific contexts and realities. Such training should be systematically included in orientation programmes so it becomes mandatory and good practice for new staff to receive such training. Additionally, specific training for HR staff should be developed and HR staff should be encouraged to engage much more actively with the CIGN (having HR representation among focal points would be a good start).

Gender responsiveness/experience incorporated in job description and appraisal systems: Gender responsiveness and experience should be included in job descriptions whenever possible, while gender responsive outcomes should systematically be incorporated in Staff Performance and Appraisal systems. This would encourage staff to be accountable to gender related results and also strengthen CARE's internal capacity.

Tailored strategies to attract more women to decision-making positions and field level positions: More women should be at the Senior Management level and within the CI member's Board. Thinking creatively about strategies to attract more women at CI members' higher level of management would be important. Further, as field officers are at the very centre of CARE's work, there is a big need to attract and retain a balance of female staff at field level to engage women and men.

e. Reporting to Beneficiaries, Donors and the Public on progress on gender equality

The CI Gender Policy states, that: CARE executive and senior management staff report regularly to beneficiaries, donors and the public on progress on gender equality in CARE's work through appropriate reporting channels.

Status of implementation

Even though this result is about commitment to implement appropriate reporting channels, it is also about ensuring that Executive and Senior Management are reinforcing CI key messages about women's empowerment and gender equality. Unfortunately, none of the CI members has commented on their executive and senior management staff reporting to different audiences on women's empowerment and gender equality. The information provided in the individual reports does not allow making any conclusion on the reasons explaining why the executive and senior management staff are not reporting to beneficiaries, donors and the public.

- **Reporting to beneficiaries**

CI members currently do not report to beneficiaries on progress towards gender equality with the exception of Peru and Thailand. While Peru has a progressive policy in place specifically for accountability stating mechanisms for reporting to beneficiaries, Thailand has reported in a more ad hoc way to beneficiaries when working with women's networks, without reporting directly to general community members.

- **Reporting to donors**

Upward accountability is strong among CI members, reporting as per their donors' reporting format which usually includes a section on gender equality as a cross cutting issue. Some CI members commented on the challenge of reporting on gender equality progress in instances when donors have no interest in such outcomes. Surprisingly, despite the gender mainstreaming push of the last few years, a number of donors, including major donors like ECHO, are often not interested in progress towards gender empowerment. For example CARE Österreich commented on the lack of awareness regarding the importance of gender specific indicators in emergencies at donor level. A few CI members have used gender data and CARE's progress and findings on women's empowerment to sensitise and further engage donors on the importance of gender empowerment. Generally, CI members tend to include gender balance among their staff in their report.

- **Reporting to the public**

The analysis of the reports showed that CI members (such as e.g. CARE France or CARE USA) articulate gender inequality as a root cause of poverty when communicating and reporting to the public.

Several CI members report to the public using the internet as an effective way of communication. Besides their respective website, where annual reports and programme information are uploaded, CIGN are increasingly using social networks -like facebook - to raise public awareness on women's empowerment and gender equality.

Best practice examples

CARE Peru has a policy of accountability covering internal and external accountability. The policy provides a framework under which CARE Peru provides clear and timely information about their work, encouraging good practices on reporting back to communities and beneficiaries.

An interesting example of reporting messages has been **CARE Norway** who increasingly reports to the public emphasising the importance of gender equality for development and poverty reduction, including the importance of engaging boys and men in gender equality work.

Furthermore, **CARE USA**'s "Strong Women Community Report" is also a strong example of reporting to donors and the community.

Challenges

Lack of interest of some donors about gender equality: CI members have been expressing the lack of interest that exists among some donors in regards to gender empowerment, including important donors like ECHO. This remains a major challenge in terms of reporting back to donors on CI progress towards GE. No reporting on women's empowerment reinforces the lack of awareness about the importance of gender equality in poverty reduction and social justice.

Aligning CARE branding, communication and programming: Another challenge for CARE is the difficulty to align its branding, communication and programming work on women's empowerment and GE. Reporting to the public is too often used as a mechanism for fundraising and not perceived as an opportunity to better inform our audience about the causes that sustain poverty.

Recommendations

Proactive engagement with donors on women's empowerment and gender equality: CI should use women's empowerment information/data/findings generated across the organisation much more effectively and strategically to sensitise and proactively engage with donors who are still little convinced about or even interested in gender equality. If GE is truly at the heart of our federation, it is CI members' responsibility to take every single opportunity to report on gender equality and raise awareness of its importance as a structural cause of poverty. CARE USA, in collaboration with the CI advocacy committee, is currently drafting advocacy guidelines that can be used with donors and policy makers on issues of women's empowerment and gender equality.

Raising the public's awareness about the importance of Women's Empowerment and Gender Equality: As mentioned earlier, one of CARE's challenges is to align its branding, communication and programming on women's empowerment and gender empowerment. Therefore CI needs to be very pro-active in regard to educating the public on the importance of women's empowerment and gender equality for poverty reduction and social justice. Linking women's empowerment to the poverty reduction and social justice/ human rights agenda is essential in getting donors to support much more work on gender equality.

Encouraging the Executive Management staff to reinforce our message on gender equality: The executive management should take the responsibility to report consistently on progress towards women's empowerment and gender equality. A practical way of doing this would be for CI members (programme and communication teams jointly) to prepare 'talking points' for the executive management so they can reinforce CI key messaging on women's empowerment and gender equality.

Strengthen CI's downward accountability: Reporting back to beneficiaries is a transparency and accountability commitment. CI members (and specifically Lead Members) should encourage this level of reporting with their respective country offices. There are a number of good examples coming from country offices that could be adapted and used elsewhere. For example, CARE Peru's policy of accountability provides a good model to learn from.

f. Assessment and enhancement of organisational capacity to implement the policy

According to the CI Gender Policy, the CI members are committed to "assess and enhance accordingly the organisational capacity for the implementation of the policy". Every CI member has presented through their report a qualitative assessment of their performance and capacity to implement the policy.

Status of Implementation

The gender policy explicitly encourages each CI member to "*devise a context specific and realistic implementation plan, including appropriate investment of resources, monitoring and evaluation mechanisms*". However, few CI members refer to such strategies and action plans in their report, and several members pointed out that this would have been beneficial to have in place throughout the implementation period. Some CI members reported that the lack of a specific strategy has made the implementation more of an "ad hoc" effort. Most members reported that they consider their organisation to be at the very initial stage of implementing the policy.

Several CI members pointed out that there hasn't been a formal process of assessing its organisational capacity for the implementation of the policy. Many referred to the fact that this was the first time they summarised and compiled progress made towards the Policy. Producing the first report has demonstrated how few systems are currently in place to collect, analyse and report gender-specific information for programmatic or organisational measurement. Serving as a baseline, it is also a very good opportunity to draw more organizational attention to the policy and steps to implement it.

Some CI members have been active in developing and using various gender tools that are considered to be highly relevant in terms of contributing to the implementation of the gender policy such as Pamodzi and Ubora which were introduced by CARE USA.

Many CI members have staff that are interested and engaged in gender related issues, either as gender focal points or as Gender Advisors. For the most part, these are the staff that have been tasked by their respective organisations to report on the gender policy.

Best practice examples

CARE Australia showed a number of gender assessments which have taken place to help them better understand their strengths and gaps regarding mainstreaming gender, including: CA Gender, Equity and Diversity (GED) organisational gap analysis in 2008-9, Country office rapid gender assessment in all CA COs in order to better understand gender practices and strategic directions in 2009 as well as a mapping exercise of all CA COs to gather information on gender capacity building efforts in 2010.
The findings and recommendations from these assessments will be incorporated into a five year gender strategy being developed by CA. This is being overseen by the GED Working Group and aligns with CA's 2015 strategy. The gender strategy will identify and prioritise actions required to enhance CA's ability to implement the CI Gender Policy.

CARE USA has set up a Steering Committee for Gender equality and diversity concerns that incorporate staff from around the globe and Executive Management Team members, with a plan to meet quarterly to review progress, successes, and strategies for forward momentum.

CARE UK reported that the CI Gender Network meeting in Atlanta November 2010 spurred increased momentum within the organisation (including the Senior Management Team) to make substantial progress towards the commitments in the gender policy. In January 2011, an internal Gender Working Group was launched, which was given further emphasis at an all staff meeting on Gender in February 2011. This enabled CIUK to move forward, working together with representatives from all departments and with the full endorsement of the Senior Management Team.

CARE Canada carried out an informal assessment on gender equality attitudes and needs in programming and public engagement in 2009. This assessment led to the creation of a gender action plan for the organisation. The action plan, which touches on all areas in the CI gender policy required more resources to be implemented. With a new Gender Advisor on staff, the action plan is currently under review, with the rolling out of some activities starting in April 2011.

Challenges

Budgetary constraints: Several CI members reported budgetary constraints as a major reason for not prioritising to comprehensively implement the policy. One CI member specifically reported that due to "extraordinary work pressure, it has been necessary to scale back the engagement in gender issues in the past couple of years".

Collecting and systematising data: Many CI members reported that it was a challenge to collect and systematise data on what they had done in terms of implementing aspects of the gender policy.

Lack of institutional commitment: For most CI Members, endorsing the gender policy did not translate into devising strategies or action plans on how to move forward the commitments, and often it has been left to committed, individual staff to meet parts of the policy commitments. This has made many CI members' efforts in meeting the gender policy commitments vulnerable to turnover of key staff.

Lack of gender advisors across the federation: Although new gender positions and/or gender focal points in programme departments have been funded in or by several CI members, less than a half of single positions are dedicated to human resource management for internal mainstreaming. Several CI members specifically pointed out that there are staff with gender knowledge and skills, but no one is mandated to be a gender expert and provide technical support across the organisation.

Limited resources and expertise: CI members highlighted the limited resources and Gender expertise in CI member offices, CO and regional levels.

Lack of gender related organisational culture: The organisational cultures were in some cases presented as not conducive to the changes required by the policy. This was raised as an important issue as the very society which perpetuates inequity and patriarchy is also the same system from where some staff members have internalised their gender stereotypes and beliefs.

Recommendations

CI Gender policy to be embedded at senior management level: CIGN would suggest that it is vital that CI Members should embed the accountability and responsibility for implementing the CI Gender Policy within the top management of their organisation to secure ownership and implementation of commitments by all levels and across all departments.

Need for a strategy and action plan for the implementation of the policy: CI Members should develop a comprehensive strategy and action plan for how to implement the gender policy. This will contribute to embed the strategy in the Senior Management Teams as well as ensuring relevance for all staff in every department. It will also ease the process of collecting relevant data and reporting on progress in the next gender report.

It is instrumental that **effective accountability mechanisms to implement the commitments made in the Gender Policy** are being set up in order to speed up serious efforts at implementing the CI Gender Policy across the organisation. The CI Gender Network recommends the CI to critically review existing accountability mechanisms also in light of the shift over to placing women's empowerment at the core of our work (and thus the great need to strategically address gender at every level). The CIGN is willing to take accountability for coordination of commitments across CI for the implementation of CI Gender Policy, given appropriate resources. The current resources in the CI Gender Network are very limited and do not reflect the actual need, e.g. for constructive monitoring and evaluation of the Gender Policy implementation as well as for development of necessary harmonised tools.

Lack of accountability mechanisms: It is important that effective accountability mechanisms are in place to enforce the implementation of the gender policy at an organisational level. The CI Gender Network recommends the CI critically review existing accountability mechanisms also in light with the shift towards women's empowerment embedded in the 2020 vision (emphasising the great need to strategically address gender at every level of the organisation). The CIGN is currently undertaking a review process and will propose an accountability mechanism for the CI Gender Policy. The current resources in the CI Gender Network are very limited and the existing structure and resources allocated do not allow for adequately responding to CI members' needs.

Investing in existing gender resources and skilled staff: Enhancing the overall organisational capacity to implement the CI Gender Policy would require all CI members and the CI Secretariat to invest in gender resources and skilled staff. Appropriate staffing will be instrumental in building a coherent and focused approach to gender and women's empowerment, and would be a way of retaining gender expertise.