

Care Norway

Women Empowerment Program Annual Global Program Seminar

Mid-Term Review: Lessons learned and look ahead

18th to 22nd June 2012 Oslo, Norway



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Introduction

The Norad-funded Women Empowerment Programs (WEPs) of CARE Norway are just over halfway in their implementation; the current programs will conclude at the end of 2013. In the last quarter of 2011 through the first quarter of 2012, the seven program country offices (COs) (Myanmar, Tanzania, Uganda, Mali, Niger, Rwanda, and Burundi) carried out a participatory mid-term review (MTR) to highlight processes and most significant changes towards the intended outcomes and impact. The MTR was also designed to bring out the challenges facing effective and efficient implementation of the program, along with unexpected outcomes and lessons learned. The participatory aspects included a learning exchange / peer review between COs aimed at *cross-fertilization*, *peer-* and *experiential learning*.

The present workshop was designed to follow up the MTR, lifting up lessons for the rest of the phase and beginning to think ahead about another phase. The intention was to share experiences of the MTR process, discuss and further develop the programs that are currently being implemented in each CO, as well as to learn from the experiences of other COs. The objectives of the workshop were as follows:

- 1. Review and reflect on what COs have learned from the MTR of the WEPs
- Consider how stronger and focused advocacy components can be integrated in our programming
- 3. Review and reflect on experience on gender and engaging men
- 4. Reflect on current partnership approaches and financial situation of the programs
- 5. Preparation for a new program phase
- 6. Finalize and validate action plans

Opening remarks

Ms Torild Skogsholm, CARE Norway, formally opened the workshop with an introduction of the MTR, a brief run through of the indicative agenda for the seminar, as well as the activities planned outside the seminar. She explained that the main purpose of the workshop was to have an opportunity to bring everyone together to discuss the experiences and lessons learned from the MTR. She then discussed a bit of Oslo's history and welcomed everyone to Oslo and to the seminar.

Ms Benedicte Petersen, CARE Norway, followed with a welcome and details about the purpose of the workshop. She introduced herself as a new member to CARE Norway from February 2012, and acknowledged that up to now, she has only had a chance to visit Niger out of the seven program COs. She emphasized how great it was to meet participants from other COs and praised the good results that had been achieved under the current strategic agreement. She invited everyone to give their recommendations for the new program period to come beyond 2013, and thanked everyone in attendance.

The facilitator, Tom Barton, introduced the working approaches for the seminar, use of idea cards, small group strategies, mini-evaluations, and recap of each day with the use of 'eyes & ears'.

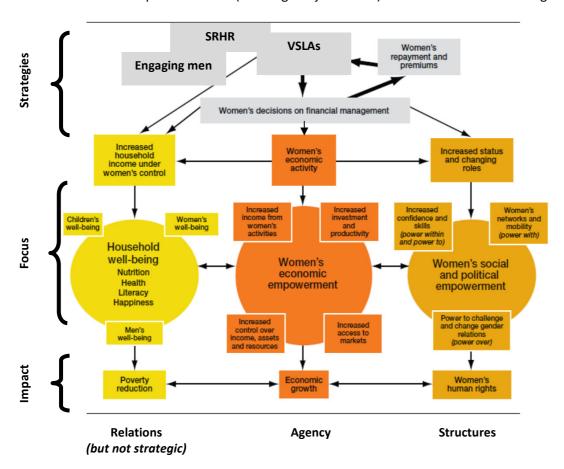
Objective 1: To review & reflect on what we have learned from the mid-term review of the WEPs

Outcome - MTR findings

During Day 1, Ms Selam Hailemichael initiated the substantive content of the workshop with a presentation on the findings of the MTR. She highlighted the need to convey the program outcomes and impact in an internally consistent and externally communicable manner. Consequently, she classified the main focus areas of the WEP and its indicators into four thematic areas: Economic Security; Women's Participation and Governance; Sexual and Reproductive Health (SRH) Service; Gender Based Violence (GBV).

Baseline – looking first at the program start up situation, Selam summarized the baseline findings of the WEP (done in 2009/10, reviewed and aggregated in 2010). She began by pointing out that members of Village Saving and Loan Associations (VSLAs) had a positive attitude towards women's economic empowerment and participation. According to the baseline, asset ownership and control was consistently higher for VLS members (where such groups already existed); and VSL members were able to use savings to cope with economic shocks. VSL members showed a consistently higher level of participation and influence on decisions made in community based groups compared to non-members; they also felt a stronger social connectedness. Lastly, it was found that VSL members were obtaining more SRHR information from reliable sources.

MTR - Selam emphasized that the MTR was intended to be a learning process that could facilitate constructive self-critical reflection. With the MTR, Selam said it was important to check if COs were on track with the program objective and also to look at how COs were contributing to change based on different development models (see diagram just below) and how this was unfolding in reality.



The above diagram¹ shows the different underlying assumptions that are at play when focus and emphasis is put on household wellbeing, women's economic empowerment or women's' social and economic empowerment. These different competing priorities are evident in the WEPs as well and we need to be conscious of these distinctions in order to not compromise focus particularly on women's human rights while working to bring about poverty reduction and economic empowerment.

New 'primary' data was collected with qualitative tools in the MTR (focus groups, key informant interviews and most significant change narratives). A common guideline was prepared by CARE Norway and then used by all the COs; it covered thematic content to be assessed, and included recommendations about questions and sampling in the field. This was done to make the MTR results comparable across the program countries. Assistance was provided by 'remote' (e-mail and telephone or skype conversations) to all the COs during their design and field implementation stages. The field data collection phase also included a peer review where each CO sent two WEP and partner staff to another CO to participate in the MTR process as a way to learn from the other office's experience. After the fieldwork, all COs did a preliminary analysis and then participated in a joint analysis workshop where all the WEP COs, the collaborating consultant and CN participated. The analysis workshop supported deep reflections about descriptive content, interpretations, and implications, as well as peer critiques. After the workshop, the COs wrote up reports on their MTR results and got multiple rounds of feedback from CN and the consultant.

At this point, Selam listed the various positive economic, social and political outcomes for women that were emerging from the synthesis of results for the seven COs.

1	
Key economic effects	The ability to enjoy being able to meet household (HH) expenses
	The ability to cope with economic shocks
	The fact that men acknowledged and appreciated women's economic empowerment
	The ability to obtain goods which were formerly exclusively owned by men
	Women enjoyment of improved property rights.
Key social effects	Gain in self-worth and confidence
	Increase in awareness of rights and entitlements
	Stronger social network, which provided more than monetary gains for many women
	Improved participation skills
	Contribution to community development, financially and through providing human resources
	Men became increasingly involved and supported the use of SRH services
	Men became involved in domestic work
	Improvement in HH relationship.
Key political effects	Women entering the public arena.
	Forming networks, some of which were very influential.
	Women's participation in community management structures.
	Election to public offices.
	Women in leadership positions have proved to be very vocal in communicating their interests.
	Government and traditional leaders consulting VSL members.

In spite of all the good effects mentioned above, there have also been some unexpected negative results. In some places, there were problems with women being forced to make repayments on loans, which had sometimes contributed to violence and even separation of spouses. Some groups exhibited a degree of intra-group discrimination, e.g., hierarchies and elitism within the groups meaning that some women were able to easily get loans but others were discriminated and not able to do so. This challenged the program's aim to work with the poorest. Additionally, in some areas, there was the potential for conflicts in households (HHs) as roles changed. Some men described

¹ Different development models illustrating the links between the different strategies and impacts (adopted from Linda Mayoux August 2009, Gender & Rural Microfinance: Reaching & Empowering Women)

women as becoming 'uncontrollable' or 'arrogant' when they began to have resources of their own. Other women complained that they faced a problem of men who began to withdraw their support for household expenses once the women had some money.

Furthermore, the program interventions were sometimes not very suitable for adolescent girl / youths. There appears to have been a lot of dropouts of girls from the VSL groups, as girls did not feel valued within the groups or the approach of the groups was not suitable to the living condition of the girls. These findings provoke questions about the extent to which programs are being adapted to the different needs of girls and younger women.

Another down side was that women's empowerment was, at times, narrowly understood as economic gain without attention to the other aspects of social and political empowerment. In the area of politics, when women organized very strongly to put up their own candidates, there was the risk of backlash or political animosity. There were also questions being raised as to where CARE draws the line on its own engagement when the work leads to promotion of women involvement in party politics.

Outcome - Further discussions based on MTR findings

Group work based on MTR findings

Some provocative guiding questions (see below) on the WEP and MTR experiences led to interesting discussions in peer groupings of COs.

- There are real & practical changes in living conditions but in what way do they address the underlying causes of why things are the way they are in the first place (what shows that the changes are long-term and non-reversible)?
- Increased income of impact group members has created **a window of opportunity but to what extent is this opportunity used**? By CARE? By Others? For what? What shows it?
- What are the **key lessons** that should be applied in the design of (any) new program?

Reflections from COs on these questions are presented below.

Lasting change that address underlying causes of gender inequality

The first group presenting emphasized the role of the household in ensuring that changes are long lasting and irreversible. They highlighted the need to solidify the foundation of knowledge in households, which is being supported through the information sharing in VSL groups. VSL groups pass on skills and information to women that are being further spread to their spouses and children in the home, and then further to the community. Women who have not been able to attend school themselves are using knowledge gained via VSL groups to encourage their own children and other children in the community to go to school.

There is evidence of mutual trust rising between men and women in the process of learning and sharing in the communities. There are also increases in social capital via networking, teamwork, and social activism. The VSL groups enable women to deal with problems and challenges together, for example, support for women who are victims of domestic violence. Some men have improved their interaction with women and more positive attitudes toward women's issues are being seen in some male leaders. Women's increase in mobility is also obvious, as women are free to move around. This is exemplified in Zanzibar, where Muslim women are now able to move around and away from the house freely. This in turn has provided women with increased self-esteem, confidence, and dignity.

The second CO group challenged whether deep causes are actually being targeted sufficiently to allow changing things in an irreversible manner. The group reiterated that what is being done is

sustainable as it has been working and running for many years already. They said that education for girls has started and is sustainable. Regarding health, they said that a women's health is under the men's authority and girls are socialized to look up to men. Today, however, women speak with self-assurance, are aware of their role and say they don't need to solely be under the provision of men. To realization is an irreversible discovery!

The third group began by highlighting important changes in the way women are perceived and are integrated into society. The first change mentioned was mainstreaming of women in decision making structures. The second change was improvements in the economic capacity of women. The third and last change was shifting attitudes towards women and building greater respect towards women. A reflection was then made, with regard to the above mentioned changes, inquiring as to whether they were related to the deep causes of poverty? And whether they impacted the conditions of poor people?

With regards to mainstreaming of women in decision-making structures, this is happening, but it is coming about because of the efforts of the women themselves. Increasing numbers of women have realized that they have to take part and be more active. Consequently, the community and society are changing, and women no longer have to remain in lower positions. The conclusion of this group was that what we do now is sustainable. However, there is need to give women the necessary skills to manage their economic independence, to link them to microfinance, and to help them move ahead and not backwards.

Maximizing the opportunities created by increased income

The first group referred to opportunities that women now have inside and outside the house. A question was raised in plenary as to the extent to which CARE utilizes these opportunities. VSL groups were described as entry points, equated to a door to a house. The presenting group expressed a need to work with marketing beyond savings, and to find income generating activities beyond what the VSLA participants do now. Additionally, there is a need to develop linkages with strategic partners such as the private sector (banks), government and SACCOs. In the case of Tanzania and Uganda where the government programs are not being successful, there is a need to reach out to the private sector. The presentation concluded with a strong recommendation to engage men to help build the basis for this "house" of knowledge, as women cannot do it alone. They also suggested to improve marketing of products and deal with quality control issues to be able to scale up women's economic growth.

The second group discussed increased income of VSL members, and where to go from here? The WEP initiative started with savings & loans, but it is now turning to political and social empowerment after assuring an income. People are seeking gender equity/equality through the door that has been opened to women via income generation. Economic development is happening through income generation and micro-finance, agriculture and food security, and social leadership.

Concerning income, the third group reflected on how VSLAs had helped the participants to move beyond their groups. They observed that VSLA members have had an impact socially and politically. These women have created cooperatives, and VSLs have invested in community activities in places like Mali. In Rwanda, the CO did a study to develop activities to help women participate in the entire production chain for increasing their income.

Aspects to replicate in future programming

The groups also included some recommendations for future work. They mentioned that VSL allows women access to income generating activities, but questioned if this is all? If poverty line is defined to be living with less than 1-2 USD per day, should it be the goal to bring all people above that

poverty threshold? At the moment, VSLA does not target the most vulnerable people. When VSL was introduced, it was identified as a strategy that would focus on the least developed. Now, we need to ask: are the least developed people being properly targeted? And to what extent does VSL bring in the extremely vulnerable people? Or to what extent is VSL capable to target the extremely vulnerable people? Is VSL a universal solution to all ills? Perhaps we need strategies that are different from VSL. We need to find ways to help people who do not have the possibility to become self-sufficient. Moreover, some countries have found that VSLA is not very effective for men. If we are going to address the most vulnerable, we will need to work with men, women, boys and girls. How can we assure that the strategies being used are proper for young men and women? We need to ensure that we include the young in the social transformations we are trying to bring about.

Based on the lessons, they suggest that it is imperative for women to have access to means of production and to improve the nutrition of families, e.g., through market gardens. There is also a need to concentrate on effective strategic partnerships for sustained advocacy toward politicians who change all the time. It is also important to develop an M&E system that works and makes useful data available for evidence-based advocacy. The groups recommended that baseline studies should include qualitative data from the beginning, as it is needed for analysis at the end of project. Additionally, they suggested that there may be a need to give preliminary assistance to extremely poor people to prepare them so that they can join the VSL groups. The presenting group also emphasized the need to target both men and women and think in terms of couples to assure implementations are as harmoniously as possible.

Plenary discussion after presentations

Several participants said that VSLAs may not be reaching the poorest, and there was a consensus on the need to understand what is driving this and how to tackle it. The Mali team mentioned that in Kampala, there had been a discussion as to whether vulnerable women were being properly targeted by the VSL groups. That discussion highlighted the need to analyze which types of women were not included in the VSLA and to evaluate what prevented them for participating. This would be useful to improve the next phase. They also suggested having VSLA for men to assure they are properly integrated.

A question was posed as to whether the VSLA is a mandatory process for women to be empowered? This issue arose because in some countries women chose not to participate in VSLAs, but instead to use other activities which may enable them to be empowered, e.g., group discssions psycho-social support. This led to some discussion about who are the women that are benefiting from what VSLAs do. Are there other strategies that can be used, for example, relational strategy or advocacy, to include those who are not in the loop?

A point was made stating the need to look at structural and overall changes. The dialogue continued with a statement that the individual focus and program activity focus were as follows: the individual focus is to be on the poorest, while the program activity focus is to be that when community changes perspective of women, also the very poor and future generations of women benefit from that. Another comment referred to the need to target the HH level in order to change the status of women.

A further comment on how to reach the very poor was the need to work with local government as they have strategies to reach this segment of society. When the programs come to an end the government institutions will continue to help the vulnerable. It will not be possible to get rid of all the poverty, but the role of the CARE is to contribute to poverty alleviation.

Someone raised the question as to what is CARE's definition of the most vulnerable? We are already halfway in the implementation process, but has there been a definition of 'vulnerability' from the start? There is a need to understand what vulnerability means for the community. How does the community define poverty? What strategies does the community have to target poverty?

We also need to remember that VSL is not the only activity within the program. The poor benefit from programs on psycho-social support, trainings and sensitizations. The weakness of the VSLA is that only people who can save can join a VSL group. The people who are considered to be very poor are unable to save anything, but they are able to get benefits from other activities in the programs. How much data do we have to suggest that we do not target the poorest? VSLA is a self-selecting process and it's not tailored for certain categories of women/girls. In Uganda, girls who are out of school participate in VSLA, but those who are going to school have no means for saving money. What is to be done for them?

The role of CARE is to contribute and to raise questions as to which other partners or service providers in our catchment area can we link with to achieve greater impact together. We should not aim to replace the government, but to assist them. Is important to strengthen partnerships and cooperate with government to reach the very poor. We want to contribute toward poverty reduction, structural change, and other things that can assist development. We need to ensure that what is done results in long-term change.

CARE Norway's views are that in last 3-4 years, the Norwegian Government has stated that maybe development should aim for the people that are a bit better off and economic development will trickle to the poorer. In order to make the changes we all wish to see, who should be targeted? If we want to see sustainable social changes we may need to go for a different target group to achieve the desired changes.

Some participants said that while VSLA is a means to eradicate poverty, it is not the only strategy to help the poorest. In Rwanda, some kinds of people can't be included in a VSLA, e.g., the most marginalized cannot attend meetings in villages or join a VSLA, but there are still actions available that can reach the poorest. The poorest people need to be helped to become eligible to participate in VSLA. We can't target the poorest from the start to participate in VSLA.

Selam made some final reflections on the topics discussed above. CARE is not always reaching the very poor with VSLAs. But there are other activities that they benefit from. We thus need to make a decision: whom do we want to target? It is an assumption that other actors reach the poorest of the poor. But we need to define who are these others, and how do they reach the poorest? VSLA has given CARE an added value, and is therefore special for CARE. With regards to these other strategies, can we develop these into concrete and replicable approaches? How should we cooperate with others to maximize our impact?

Outcome: MTR as a learning process

Saliou Kane gave a presentation on "Individual Learning and Organizational Capacity Building: A ripple effects model". The focus of his presentation was on individual learning and how this evolves into organizational capacity building. Saliou made the analogy of dropping a stone in a pond and seeing the ripples spreading outwards from the point of impact.

The key points he discussed were as follows:

• Capacity is understood as the ability of individuals, organizations and society as a whole to manage their affairs successfully.

- Capacity building is investment in human capital, institutions and practices.
- Capacity building is like a drop of rain –individual learning- that lands on water and flows outwards to generate organizational change.
- Organizational capacity building implies applying learning outcomes at the organizational level to bring about change for the ultimate beneficiaries.

Two forms of learning have been identified that took place during the peer exchange:

- 1. Experiential learning utilizing real-life experiences for learning purposes. The Experiential learning cycle consists of: experiencing something, and then using concepts to describe the experience. It is a continuous cycle, as one continues to learn and correct the mistakes.
- 2. Action learning a set of logically interconnected activities that are structured specifically for achieving personal learning and organizational change. It is basically taking an action, such as a decision to learn, seeing the result and then planning for next time.

The prerequisites for ripple effects are that:

- One must have a learning need in the organization/CO
- Trainees must have resources and incentives to apply what they have learned
- Organizational needs assessments should be carried out
- The learning cycle should be continuous and not stop, e.g., after finishing an exchange
- Develop a system of organizational memory of CO

Saliou then challenged the participants with group work on how they have applied the MTR learning experiences in their countries. His guiding questions probed about how it has been done and the cost versus value generated in the MTR. The specific questions were:

- 1. What was the tangible value of embarking on the learning exchange (give specific examples)?
- 2. How can we compare the cost with the value generated?
- 3. What shows that learning has been applied?
- 4. What issues/costs should we consider when we budget for this kind of initiative in the future?

The facilitator explained that the questions posed by Saliou were related to the aspects of doing participatory MTR with peer exchange. In particular, considering the overwhelmingly positive response to the participatory, peer review approach, we need to consider how to show the benefits / value generated if we are to include it in future phases. The role of learning needs to be discussed, ensuring clarity and deepening with examples.

Discussion results

Tangible value of embarking on the learning exchange

Many countries valued the ability to have ownership / institutional memory for the findings of the MTR. Most appreciated the ability to have a participatory approach in the MTR, as well as having ownership of the findings and the use of untapped skills. Peer-exchange allowed for restructuring tools to better suit the WE framework. Some peers learned the use of the SASA tools to engage men from other COs and applied theses in their own WEPs. In Myanmar, it was the opportunity of being able to expand the VSL program, together with the opportunity to include senior managers in the process.

Comparing costs with value generated

Need look at whether the individual is bringing back learning to the organization and how was learning applied in organization? Cost efficiency should take into consideration unexpected costs, gender mainstreaming, report writing using concrete evidence, confidence in staff, and whether

benefit outweighs costs. Cost efficiency can be very demanding of human resources, as well as in institutional memory, due to staff involved in the process.

Applying the learning

In Myanmar, learning from the MTR analysis workshop has already been applied in training community animators about how to ask appropriate questions that probe beyond description and consider interpretations and implications. In other countries, there was positive feedback about providing quality assurance, and willingness to continue discussions regarding programs. The midterm reports have been improved, theory has been linked to practice, and lessons from the MTR have already been integrated into another project in Burundi.

Participants were encouraged to provide more specific examples regarding their experiences. Examples that were mentioned included:

- Building on tools that were shared In Burundi the SASA tool was used shared to strengthen the capacity of 30 people participating in the program.
- Timing for peer review in some COs the timing of the MTR overlapped preventing lessons learnt from other COs from being integrated.
- Coordination This was the first review conducted in its entirety by the staff of the COs; we need to think what can be improved so that each CO has enough time to plan and to budget for the exchange. It is a process that needs coordination and concentration and staff has other activities to be done simultaneously. Next time we should plan for it further ahead of time, but it is certainly appreciated and this process should be conducted again in future phases.
- Working with partners In Rwanda, the benefits went beyond MTR, e.g., in discussing partnership, reference was made to the way Niger and other countries work with their partners.
- Benefits of informal process COs said that they would not have learned so much in a more formal context. Although the review was complex, it has been done in the best way for CO learning and being given things that the COs can use.
- Participation and commitment to improve It has been the norm that there is some level of staff participation in reviews and evaluations; but before now there had not been full participation. Normally, staff are only invited to participate in data collection and consultants do all the analysis. This time, the staff participated throughout the process including the analysis. As such, they saw the emerging changes themselves and what was missing, so our staff were able to make specific proposals that they think will be feasible and useful given time and resource constraints. When working with a consultant, the staff don't have time to look into the report and see how to implement the learning. Now staff is fully aware of what they have to do to reach objectives.
- Self-critical CO teams have been able to pinpoint the weaknesses because when taking part in the full process, one sees all shortcomings. This is useful for consideration in planning the next phase of the program. We now know what has been done and what can be done better for the next phase.

Issues/costs to consider when budgeting for initiative

- Investment and capacity of staff to best participate in process, which relates to individual learning vs organizational roles/ priorities
- Time as a resource, e.g., shortage of human resources and opportunity costs; also timing for assessing the tools and results, not just the fieldwork.
- Travel and workshop cost
- Ensuring there is enough budget for M&E

Action planning, step 1

The first step of action planning focused on how to address selected key areas for improvement (identified in the MTR) during the remaining period of the current phase (i.e. up to the end of 2013). Tom started CO teams working on a worksheet (see matrix just below), with teams completing part of the task in the evening.

He gave advice to the teams before starting about using 'systemic capacity building' rather than just 'training as capacity building'. For issues that require 'capacity building', he said this involves four levels:

- a) tools (e.g., creating forms, data bases, etc.);
- b) knowledge & skills (e.g., through training, exchange visits, etc.);
- c) infrastructure (e.g., posting the right people, having software/computers, etc.);
- d) organizational (e.g., adjusting policies/procedures, organizational culture, structures, etc.)

He also encouraged participants to consider whether they would want/need technical inputs from anyone who is attending this workshop/seminar (e.g., from Norway, from another CO with relevant experience, etc.) – and whether they want any help with it within this week (if so, be sure to be clear about this in the strategy column – and ask for the needed support)

Worksheet questions

What issue	What strategy (how will you	What would show that the issue	How would addressing this issue
(what gap,	address the issue)?	has been addressed? (what	affect the programme outcomes?
challenge)		output)	(how would you know/show this)?

The individual CO results of this exercise were reviewed later in the week (see day 3 notes) and then used in the overall planning session on the last day of the workshop. The final consolidated action plans of the COs are included in the annex section of this report.

Outcome: "take-home ideas"

Tom started Day 2 by discussing responses to the mini-evaluation of the previous day. In particular, he reviewed the question about the biggest or most important "take-home" message from the first day, and why it is important. Participants' responses were gathered into five main clusters, as follows:

- a. Issues relating to targeting and reaching the poorest of the poor, and how this is being achieved. Very interesting comments were provided regarding this issue, and we will be weaving these into the workshop (both in action planning and discussion sessions).
- b. Value of working on an action plan for areas where we are not performing as well as we would like, i.e., where there is room for improvement. It is great to see that all are interested in action planning and that everyone will be able to take this back home to also build it incrementally; this will be an opportunity to work together and contribute individually to planning.
- c. Thematic issue of learning, and the value of learning as most of participants will recall, we have been reviewing these during the MTR.
- d. Findings of the MTR how significant those findings were and that they were already irreversible changes showing up. Many of these changes were seen to be solid.
- e. Capacity building Need to invest more in capacity building and the idea of systemic capacity building, not just training.

Objective 2: To consider how we can integrate stronger and focused advocacy components in our programming

Advocacy in the community

Ms Lillian Mpabulungi presented on the topic of Advocacy. She began by requesting people to remove their name and title tags so that everyone would only represent themselves and not their jobs in the discussions. Participants were then requested to pair up and to rapidly role play interactions between a community member and a leader around a complaint of girls being raped in the neighborhood.

Two of the pairs then volunteered to demonstrate their role plays for the larger group. After the role-play, everyone discussed their experiences. The feelings of those who played the community leader in this situation varied between feeling very proud of their work as a leader, to indifference or rejection of responsibility; in between these extremes were 'leaders' who wanted to help, but did not have the means, e.g., no money for transport or no knowledge of any services.

Other participants indicated that when playing the role of the leader, they felt compelled by the story and wanted to do something, but they simply did not know what to do. Another participant said that her thoughts were about the counselors, and how difficult it must be for them, how depressed they must get. Another participant said that he wanted to help, but the person was so upset that they were incoherent; even though he really wanted to help, he felt he did not know how to help. Another participant felt sympathy for the parents in these kinds of situations, and said parents facing these issues sometimes feel too much shame to approach the leader for help, so they try to fix it with the help of the extended family. Sometimes they are so ashamed they may not even take it up with their spouses.

After discussing leader perspectives, participants who portrayed parents were asked how it felt to play this role. Some felt they had problems to be understood by the leader. In this scenario the person felt that she was able to go to a leader who was knowledgeable and who could help her by lending her his support, but nothing else. Another mentioned that as a parent, he did not feel that the leader tried to put herself in his shoes, and therefore did not feel empathy. He felt he was being asked too many questions, instead of being provided with substantial help. He did not feel that the leader understood what he was going through. Particularly because he felt confused, and he felt he needed more empathy from the leader.

Lillian finalized the role-play scenario by indicating that the impression she got from the two examples (from those who played the leaders and those who played a concerned parent). Indeed, parents often feel quite abandoned and helpless. At the same time, many leaders lack information, details and to a certain degree resources.

Participants were invited to brainstorm as to whether anyone in such a position will want to be an advocate, for how long, and to think as to what impact this would have on his/her ability of being an advocate. A request was made for a volunteer to share one experience from being an advocate. One participant discussed how she saw in one of the role-plays that the leader suggested for the parent to reach out to the police, but if a police officer was one of the rapers, how does one deal with something like that?

Lillian pointed out that not all leaders are necessary willing to help, and that one should consider that some leaders are allies while others are opponents. Therefore, the advice is to be strategic, to try to get the person that can help in the best possible way. Tom joined the discussion and indicated

that the role-play exercise portrayed the issues surrounding having to reach out to a leader for help. But how could this have been different, if it was not just something that had happened last night, but rather something that had been continuous? As in this case one will not only have to consider the immediate result, but will then focus on the long-term impact that this will have in the community.

A participant then posed the question, as to what would leaders do when it comes to children who have to go alone to many different places? Therefore being vulnerable and potential targets for victimization. She suggested that this needs to be considered going forward. She also invited reflection to the point as to how parents and leaders can get involved in the implementation of laws assisting them with issues such as these, as well as with other similar issues.

Great Lakes Advocacy Initiative (GLAI)

The first topic discussed was GLAI, which is a regional advocacy and grassroots activism initiative being implemented in Burundi, Rwanda, Uganda and Democratic Republic of Congo/DRC against GBV. 2012 being the final year for GLAI the countries are currently in transition phase to integrate GLAI's initiatives in the larger WEPs. The overall objective of GLAI is to contribute to the implementation of international humanitarian and human rights standards that protect the rights of women and girls in post-conflict and conflict situations as set forth in UNSCR 1325 and the complementary UNSCR 1820. In summary, GLAI aims to work in the prevention of and response / support to survivors/victims of GBV. The expected results for GLAI's work are as follows:

- Women and men at the grassroots level, as well as civil society organizations have increased skills and capacities to carry out evidence-based advocacy on Sexual Gender-Based Violence (SGBV) and conflict. This can be achieved through recruitment and training of activists through the WEP program. GLAI has also developed an advocacy manual and did capacity assessments of our partners.
- 2. Local, national and international policy frameworks and practices protecting women and girls from SGBV are enacted, tested, strengthened and better implemented. It is important for us to develop a case management system, perform policy analysis, identifying a platform nationally.
- 3. Meaningful participation of women and girls in relevant policy and decision-making bodies has increased, and women human rights, especially to political participation, are taken into account by the decision-making bodies.
- 4. Civil society organizations in the Great Lakes Region are linked at regional level to actively influence policy-making and law enforcement related to SGBV in (post-) conflict affected areas.

GLAI Results

Mr Jean-Baptiste Nimubona then did a presentation regarding the GLAI results (after 2 ½ years of implementation). Photos were used to summarize the results highlighting the following points:

 Gender-based issues are being addressed at the community level through working with grassroots activists. Activist groups are used in Burundi, Rwanda and Uganda to work with the community on this issue







- Role-plays are an important mechanism to initiate discussions on GBV
- Information about GLAI and its achievements are widely circulated through fliers and pamphlets,
- Large events as the national women's day are used to communicate key GBV messages by activists

- Activists interact with authorities at various levels and also women take part in the decisionmaking processes. In some places, some women even put forward their names as candidates in local elections
- There have been extensive exchange visits between Burundi, Rwanda and Uganda in relation to GLAI. These exchange visits enable women to meet, to discuss good and bad practices within advocacy. In these meetings regional and international advocacy issues are also discussed
- Work is also carried out preparing the activists within the Great Lake area for Regional Summits
 with high level meetings with governments. One such event was the International Conference on
 Great Lakes Region (ICGLR) where Heads of States from eleven countries discussed their
 approach to fighting GBV. A zero tolerance initiative was launched on the 8 March by the
 president of Uganda.

Challenges in implementing initiatives

Ms Olive Uwamariya conducted this presentation, where she used a set of 'footprints' on the wall to highlight 'steps' in advocacy linked to the major GLAI achievements as well as the challenges along the journey. She opened up the presentation with a reflection as to what needs advocacy. What is it that participants are trying to advocate for? She then went on to mention that in GLAI's specific case, it was specifically GBV, given the context of where the work was to take place. It then became apparent that there is a need to be very focused, as the topic is quite broad. The questions to consider are: What is the most critical issue that one is trying to address? Does this issue really need advocacy/ or is it just a matter of social change that you have to go through? For each issue identified, is there a real need for advocacy or does one need community mobilization for the issue to be resolved? What is the magnitude of the problem? Is it really a priority/critical issue?

Participants were invited to consider the case of Burundi, where a number of issues were identified that needed to be addressed. One was the National Action Plan for UNSRC 1325 and speeding up of the implementation of the Plan. Another was the case of Rwanda, where there is a very good legal framework in place, so what needed advocacy was proper implementation of the National GBV Law. In Uganda, it was advocating on the Domestic Violence Act to ensure that the Act gets passed. Her talk highlighted the need to do good groundwork, to do rights awareness, to ensure everything that is needed is in place, and where necessary to do good community mobilization.

Anastasia Olembo mentioned that during the earlier role-play, many community taboos persist concerning sexual violence and advocates need to know how to break the silence. There is a need to gather evidence and to dig deep to be able to understand where the issue really is, who is being affected, and what needs to be done. For the countries currently in GLAI, the work is being done with grassroots activists who are community members that are motivated to change, and with case managers to see that psycho-social support is being provided to the victims at the same time that advocacy is being conducted.

There are concerns about voluntarism, as most of the community volunteers are farmers and doing the work unpaid, though they work together with CARE staff who are paid. The question is how to work with these people without overwhelming them? Different strategies have been used to motivate them and to provide them with incentives, e.g., with training and skills, and trying to show them that they matter. In Uganda, volunteers have been provided with small payments (stipends). In Rwanda and Burundi, there have been other forms of material support, such as bicycles, umbrellas, rain gear and boots, as well as certificates after they go for trainings. But, how do we work with these people as change agents? There is a need to look for resources, in terms of time and expertise needed; and do a mapping of already existing resources. There is also a need to really analyze the data obtained and provide recommendations.

Where possible, COs should allocate a budget for advocacy. For Rwanda and Burundi advocacy budgets come from GLAI. Uganda has managed to integrate advocacy into the country office, so it is now within the program, which is very important. It is also important to involve people who are in the government, who know and care for your concerns, particularly, people in the local governments. All countries have also made strategic partnerships that already handle advocacy programs.

Towards the end of the presentation, Olive gave a few recommendations that are listed below:

- 1. Engage people in meetings and discussion; keep people revolving around the issues.
- 2. Identify people who are good at public speaking. They need to be engaged to ensure the right message is being passed.
- 3. Reflect around the issues. Consider if the issue in question has been addressed. All these things need to be reflected on, to make sure that it is incorporated into the advocacy programs.
- 4. Develop an advocacy strategy by taking the time to plan it. Make sure the senior people in your local offices are also committed to advocacy, that they understand it and support it. Ensure that if there is lack of knowledge you work towards building that knowledge.
- 5. Work on a long-term relationship with the media to ensure that they are your friends.
- 6. Lobbying is important, and it happens as you implement your advocacy program.

Lillian then showed a TV ad funded by CARE Uganda that has a message of empowering female children. The ad portrays the need for physical, emotional and psychological support.

Panel discussion

At this point, the three presenters came together for a panel discussion with questions and answers from the plenary participants. A suggestion was made by one of the participants to have a document illustrating how advocacy can be carried out step by step, including the results, as this could help other countries. A set of questions followed this suggestion:

- a) Could the panel provide clarification as to what is meant by 'activists'? What they are? And why were they identified as such?
- b) What is the role of girls as opposed to the one played by activists? What has the role of CARE been in this mobilization of girls mentioned? Not sure from the presentations about the level of involvement of CARE in such activities.
- c) Did not understand the risks involved in these countries, and how challenges were related to advocacy? Were they overcome?
- d) How is this work rooted within the WEP in the local countries?
- e) Is it possible to discuss lessons learned from advocacy?
- f) Could the panel expand on men-engaged approaches?
- g) Who were the strategic partners used in this initiative that was so successful?
- h) Looking broadly at CARE's work, which is to empower women and men and to work towards gender equality, and considering where CARE will be in 2020, how does GLAI interact with the broader women empowerment agenda?
- i) With regards to Lillian's role-play, could participants give their feedback on how advocacy is being carried out in practice?
- j) What is advocacy and what is it not?
- k) How is GLAI contributing overall?
- I) When in the process of GLAI was there a breakthrough point, i.e., where and when did the most significant changes start to happen?
- m) What are the means by which GLAI intends to sustain the positive changes that have happened?
- n) When looking at the budgets of the projects, one can see that advocacy does not have its own budget, which it should, in order to have an impact. What are participants doing to make sure

that advocacy is important for the other program initiatives? How will everyone move ahead if we do not have sufficient funds to carry out advocacy?

The panel then responded to the questions. They said that they are trying to document and to share the process/results to a degree by distributing annual reports as well as a quarterly newsletter. This is not documenting the strategy itself, but it is discussing some of challenges and achievements discovered in the process. GLAI is planning to make a documentary film showing the best practices and experiences across the region. Lillian pointed participants to the CARE USA manual², which is very good and discusses advocacy step by step.

How CARE works with strategic partners for advocacy was considered through the example of Burundi, where advocacy has been incorporated into other programs. Activists have been identified as facilitators. In Burundi, when it comes to mobilizing women for elections, there are more than 100,000 women involved in solidarity groups and these women have become widely involved thanks to the support and information provided by the CO.

Concerning activists, a panelist said that it can be either an individual or an organization; both are able to bring up issues within the community. For the most part in GLAI's experience, activists tend to be individuals. For strategic partners, it depends on whether their mandates are for advocacy.

When it comes to risks in advocacy, it can sometimes be tricky especially when local activists have to talk to local authorities or police offices (how to do it in a non-confrontational manner, not exposing individual activists to potential backlash). To address this risk, GLAI has tried to ensure that there is a coalition of activists at local, regional and international levels.

Regarding risks, being part of CARE one understands that there is a desire/need to play it safe, but the reality is that many times in advocacy, one cannot avoid the backlash. And therefore at times there can be a feeling that one might be left and disowned, but if CARE wants to do advocacy, everyone should know that is not rosy all the time. How safe are we intending to play?

With regard to male involvement in the initiative, one of the panelists started by saying that advocacy in the South is very culturally (mindsets/traditions) driven and sometimes you have to do a lot of work on trying to change these mindsets. The aim is to be able to implement a national level platform for men that are involved in the process. They are currently working on creating the structures to implement this strategy. The experience thus far has been that participation of men has been accepted at the highest levels.

A participant said in reference to GBV and Family Planning that GLAI has contributed very much in Rwanda. In Rwanda activists are chosen by the national women councils, and they are made up of people coming all the way from grassroots up to the highest levels.

One participant said it appears that we have only mobilized people, but not yet reached the advocacy process. Nonetheless, he said that this seemed to be a very important step already, especially as advocacy is not an easy job to do.

Advocacy is already being done, but the interpretation of what is advocacy is interpreted differently in the South and in the North. Thus, what is being done may not be considered advocacy in one place, but it does not necessarily mean that there is no advocacy at all. She then provided Rwanda as an example, a beautiful and complex place, where doing advocacy is very challenging. Sometimes

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² Sprechmann, S. & Pelton, E. (2001) Advocacy Tools and Guidelines: Promoting Policy Change. A Resource Manual for CARE Program Managers. CARE USA. Full document available at: http://www.handicap-international.fr/bibliographie-handicap/6SocieteCivile/Advocacy/CAREEng.pdf

the work being done is not considered as advocacy, because it is not "hardcore policy advocacy". Meanwhile, the legal framework has been strengthened and the strategy that was adopted was to advocate for implementation of laws that have been passed rather than new laws.

In most cases the government is asking what CARE is bringing to the table? What is CARE doing to improve the services? So, we really need to think as to how we make suggestions and recommendations while showing our added value.

On the question about whether GLAI is confining advocacy only to GBV; yes, to a large degree, as it is some sort of pilot program, from which everyone can learn going forward. Advocacy needs, however, to be included into the program budgets, as referred by one of the participants, is something very important for every CO to integrate it into their budgets. Advocacy should not be confined to GBV; there are other issues that also need to be advocated for depending on the context.

When asked about the breakthrough point in the process, the panelists said that this is country specific. In Rwanda, it was lots and lots of work to bring together a network of CSOs to take the advocacy agenda forward, but it is now very solid. It took a lot of commitment by people and resources to bring it together. From the point where the network was created (and became solid) changes have been seen. Another point was when the governments started incorporating advocacy into their working plans.

Presentation of CARE Norway efforts on Advocacy

Ms Lisa Sivertsen, head of Advocacy in CARE Norway, made a presentation on CN's advocacy efforts. She started by stating that CARE is about change, and thus the advocacy done by CARE should be about change. She pointed out that the discussion is just starting as to how to do advocacy in CARE, and there is a very long way to go. The "how" discussion, in fact, is never ending. There is a lot of complexity that one needs to navigate through, but it is very exciting. Someone has asked what is advocacy? But...there is no "one" answer for that question. We need to decide what kind of advocacy we will be doing. She showed a picture of an advocacy program being implemented by CARE in India. The program targets girls, and it gives them a second chance to attend school, where they were unable to attend the first time around. Work that CARE is doing so that people are able to stand up for themselves is advocacy! Sometimes one needs to focus in the law-making aspect of advocacy, one needs to fill gaps within national level in order to move forward; sometimes there is need to make sure that the laws in place are actually working. Perhaps the most important advocacy work to do is to help people stand up for themselves.

She then posed the question as to what is advocacy in the CARE system? She started her answer to this question by using the definition provided in CARE's advocacy handbook (by Sprechmann, cited earlier), which states that:

"Advocacy is a strategy to influence policy makers when they make laws and regulations, distribute resources, and make other decisions that affect peoples' lives. The principal aims of advocacy are to create policies, reform policies, and ensure policies are implemented".

She then stated that there are many things that can be put into this definition, yet the definition could be even broader. She said that a broader definition is likely to be incorporated into a new handbook once it is produced. She also suggested that some of the experiences discussed by GLAI should be included in the new handbook as case studies.

Continuing with the presentation, the focus turned to the approach to use. The aim is to move towards a more dynamic but also more grounded approach, which is intended to be the new

direction for advocacy for CARE. There are two separate types of approaches that were discussed: a) Local-to-global; and b) Evidence-based. Lisa mentioned that there is a lot of local, some national, little regional and almost no international advocacy work being done at the moment. When one hears and sees the work being done, one thinks, why is this not shown to the world? This should be shown in a global level. The suggestion is for GLAI to be taken to the UN next year, as it would be key to show the work from GLAI, at the highest possible level.

The global advocacy priorities of CARE are currently:

- Women, peace and security led by CARE UK.
- Climate change led by CARE UK.
- Sexual and reproductive health and rights led by CARE Denmark.
- Food security led by CARE US
- Cross-cutting issues: Engaging men, GBV, VSLA led by several CARE members.

Lisa explained that there is need to maximize impact by prioritizing. She used examples to illustrate that COs and CARE are gaining experience, but it is a must take the experience to the next level.

Discussion

- Looking at global priorities, what is the priority for CARE Norway?

 Ans: The answer was that CARE Norway is in process of defining these, but likely will focus on three advocacy topics more actively: women, peace and security; sexual and reproductive health and rights; and food security.
- When looking at presentation, it seems one is basically looking at issues of policy, implementation, influencing. But when looking at global issues of advocacy hope that grassroots and community work is included in the new definition.

Lisa agreed and hoped for the same, as she considered this to be part of the Vision 2020 document.

- When it comes to the issue of advocacy, who takes on the issue of ownership?

 Ans: Lisa explained that advocacy has had very low priority within the CARE system, which has turned into low resources. But CARE Norway has done some research and comparison with other peer organizations and we see that they are putting a lot more resources and efforts into advocacy. Consequently, it has been understood that there is a need to prioritize, and one should note that this is a whole discussion in itself. It is a big challenge, but Lisa considers this is the challenge that everyone is facing no matter the amount of resources available.
- There are big challenges posed by coordinating all levels of advocacy (global, national and regional), and there is a need for information of the work being done nationally and internationally to be transmitted. Is the agenda set by CARE International (CI) members? Or who is setting the agenda?

Ans: Lisa responded that CARE is a very fragmented organization, and thus lacks a very strong, coherent drive within the organization. She said that risk analysis is a crucial part of each individual COs analysis if that office is going through that process. Additionally, she mentioned that CARE has been risk averse, partly because of the lack of resources, but that she sees the need to navigate through these difficult topics.

Action planning - step 2

Participants were given an hour after lunch to work on action steps related to integrating and scaling up advocacy strategies within their WEPs. A worksheet with the following questions was distributed, and CO teams were encouraged to do the task on their computers.

What issue	What sources of	What do you think	Coalitions – who	Coalitions – who	What technical
do you	relevant evidence	would be the most	could you partner	do you (or could	resources/inputs
want to	on this issue?	important	with on this issue	you) partner with at	would you need to
address		advocacy	at national level	local/grassroots	achieve good,
with		approaches that	(and do you	level on this issue?	effective advocacy
advocacy		you want to scale	already have a		on this issue?
approaches		up/integrate on this	working		
		issue?	relationship or not)		

The individual results of this exercise by COs were reviewed later in the week (see day 3 notes) and then used in the overall planning session on the last day of the workshop. The final consolidated action plans of the COs are included in the annex section of this report.

Outcome: Discussion with Norad on civil society

Benedicte introduced the speaker for Norad, Terje Vigtel, who is the Director for the Civil Society Division. Before his presentation started, she raised four questions that she hoped he would discuss during his presentation. The questions were as follows:

- 1. With regards to partnership for development, how have the priorities of Norad changed post-Busan?
- 2. What are Norad's plans on continuing an engagement with CSOs in the North and the South? Are there any strategic changes? Will there be a different emphasis or division of labor and expectations between northern and southern CSOs? And if so, what are they?
- 3. Has Norad had any experience with other WEPs, which might lead to recommendations to the CARE program.
- 4. For impact tracking, what is Norad's current thinking on what would be regarded as credible results?

Benedicte concluded her questions by saying that it would be valuable to receive key guidelines in the issues raised.

Terje started his presentation by emphasizing the importance of people in Oslo having more contact with people who work on the field; he mentioned that the seminar was a great opportunity for doing this. He continued by discussing his last meeting in Zambia. At that time, he met with a local leader who complained that outsiders always make suggestions, proposals and share ideas as to how things should be done, but outsiders never listen to what the local residents or leaders have to say. Terje said that people working in development need to gain the confidence of the people they are working with in order to get real opinions of people, otherwise people will only say what one wants to hear. He expressed the need to communicate in a way that allows people to gain the confidence of those one is talking to. He also indicated that he understood that the participants have a complicated agenda, as they need to work with areas which have to do with rights, with empowerment, minorities, and people who are not necessarily in the center of the political attention in some countries. But he highlighted the work being done by participants, as they are there to discuss, convince and to have a dialogue with people.

He then praised the efforts of the work done on the field, which he was able to see two years ago. He mentioned that he was particularly impressed by achievements in Burundi. During a meeting he attended in Burundi, he felt that they are on the track of doing the right kind of things.

According to Norad, they are not really concerned with CARE as an organization, but rather they care about what is happening in other countries, because the work being done by Norad is working with civil societies. He indicated how important it is to select the right kind of partners. He suggested the possibility of a discussion for the future as to how this process should happen, and suggested as a possibility to have organizations from within individual countries as participants in the discussion.

Terje continued by discussing how there are so many countries that have developed, changed, have good representatives and have organized civil societies, which allow organizations to be set up locally, as opposed to continue using organizations from abroad. In some cases, there are advantages to using a Norwegian NGO, while in other cases it could be direct funding which could be the most effective way of dealing with things.

This, in turn, brings the question as to what is the advantage of making use of the CARE system to develop a country, e.g., within Burundi? And how does one see the alternative? Terje mentioned the desire from Norad to have an open discussion with COs. He invited comments as to the role of a Norwegian/international NGO vs. a local NGO. He then talked about partners and who they are? He said that Norad tends to like partners with the same good, liberal, progressive ideas as Norad itself has; and they are the ones Norad likes to discuss with. But it is known that they are not necessarily the most representative ones. Terje mentioned his reluctance to work with some organizations, in particular those organizations that can be a little bit conservative, a little bit reactionary, those who have some views of development Norad does not agree with, but at same time he recognizes that sometimes those organizations are more representative of the people. He then went on to explain that maybe Norad and consequently COs should be willing to discuss/talk with people Norad does not necessarily agree with. He emphasized that so far they have not been very good at that, and therefore there might have made some mistakes in their choice of partners.

Terje then explained that for example in Zambia, where people trust churches and the traditional leaders, it would likely be beneficial to find partnerships with people in those groups. He mentioned that because people have confidence in them, people talk to them, and therefore they should be the partners one looks for, instead of the modern NGOs in the urban areas. He discussed a study on this topic from Kenya, where the winners were often the leaders of the church and the losers the politicians. This in a nutshell highlights the need to discuss the issue of the partners that COs are aligning with.

Terje mentioned that in other countries, new groups and individuals want to take part in the development cooperation. Specifically some meetings (in South Africa and other places) are to be conducted with interested parties in creating local NGOs. In those meetings, Norad is hoping to channel their experiences thus far. The big challenge to consider is as to how to communicate and how to discuss these experiences? He said that the evaluations conducted by Norad have shown that very often development assistance is successful within a specific area but the wider effects are not there.

Terje noted that CARE has a very ambitious agenda, working with development through working with women and rights issues. He posed the question as to how? And went on to say that the "how" question is the most important. He said that CARE is very effective at presenting their objectives, and ambitions, but Norad still wondered as to how to do it? It's important for Norad to be here, to understand how CARE is doing things. He also mentioned that it is interesting to listen

when participants tell the stories of when they have failed. Because Norad works with empowerment of women, how do the participants do it? He admitted that there have been so many failures within that area. He pointed to that fact that there are so many nice resolutions that have been passed, but in practice, in the remote countryside one does not notice much of what has been agreed upon. He then posed the question as to how to approach the difficult issues? He concluded his presentation by saying that Norad regards CARE as a very good partner and mentioned that Norad would like to hear a discussion on how CARE goes about implementing the many great ideas the participants have.

Discussion

Benedicte summed up the presentation in a few words and invited participants to contribute to the discussion by raising any questions or comments they had regarding the presentation.

A participant from Uganda thanked the Norwegian Government for its contribution to Uganda. He said that Uganda's civil society would also like a lot of support from bilateral partners, especially around the operating environment, as current policies are affecting the way we work, and are simultaneously affecting some of the progressive concerns raised with regards to choice of partners. He encouraged the team from Norad to accompany the team of CARE Norway to Uganda in particular, and also to the other COs, so that Norad can see the work on the field for themselves.

A participant from Tanzania said she appreciated the funding provided, especially as there are very few countries willing to fund gender-based organizations, such as CARE, since they see it as a dividing issue. She then went on to encourage that future governments continue with this trend.

A participant from Niger spoke about her experience in a country where there is lots of political instability. She said that many people talk about civil society, but leave out women. However, thanks to the 20 years presence of Norad in Niger, women are no longer left out. She said how significant this could be if it could be brought to scale, in order to mobilize women (and their civil society), as this would be a huge contribution that Norad is currently looking for, and that other individual countries are also looking for.

A participant from Mali talked about the question on impacts that had been referred to in the presentation. He said that CARE in Mali has thought about it and thereafter adopted a program approach. In Mali, women and children are the most vulnerable parts of society, so for the past five years our focus has been on women, young girls and children. In Mali, the CO has reached many breakthroughs and is ready to move on, but it also says that one cannot just start something and then leave it. There is a need for continuity to be able to maintain the changes in society. In these efforts, the Mali CO is also working with local partners.

A participant from Rwanda briefly discussed CARE's work in Rwanda. He described Norad as the most flexible donor, and said that thanks to Norad funding in Rwanda they have been able to implement programs in a more relaxed manner. So long as the results achieved, they were given a certain flexibility. He said that the challenge now being faced is how to sustain the results achieved. He said that their civil society is very committed, and the CO is working closely with local partners. However, with regards to funding for civil society, he said that it is not continuous and the CO is trying to strengthen it, but the fact is that after a few years, CARE tends to need to move to new projects because of changes in funding availability. What the CO wants to see is partnership (and sustain it) between CARE and civil society, as this is considered to be very important for real rooting action.

The last participant explained that it is very good that all COs start to think about a new strategy that has a sustainable and irreversible impact. She then mentioned that Norad and CARE have had a very important role to play within civil society in the COs. She indicated that in her opinion one should not keep nurturing a child, who is now able to walk and which is now able to do many things independently. She then asked a question for all to consider: "but is it the right time to let this child manage on his own?"

Benedicte thanked everyone for their participations and opened the floor for presentations from CARE on selected promising practices.

Case Study - GLAI

Lillian gave a brief description of the GLAI (see also above "The Great Lakes Advocacy Initiative"). She explained that the first picture shown was of Teresa, a grassroots activist from Rwanda. Teresa has a very striking story, where she talks about the experiences she has had relating to GBV. She is a very strong and vocal activist for change. Lillian explains that these stories show how change can come about. She took the opportunity to reassure participants that GLAI is working to obtain data to help in empirical studies.

She stated that it is important to link grassroots activists with policy makers, as advocacy is for policy change and for effective implementation of these policies. She then went on to say that GLAI wants these women to talk for themselves, and for those in small communities to find ways to have their voices heard. Local society needs to be aware that they need to work hard to ensure there is sustainability, because the organizations helping at the moment might not be there indefinitely.

She continued by discussion on how GLAI is taking advocacy work to the region, through the ICGLR (a regional body). What is being done is bringing the grassroots voices to the authorities, and there are leaders who will help change the lives of women. An example of this is the Ugandan president, who recently initiated a zero tolerance policy for violence against women, which was of major importance for Uganda. Lastly, she mentioned that being an activist needs being persistent and working hard to allow for change.

Case study - Engaging Men for Gender Equity: Male Engagement in CARE Norway's WEP

Ms Maimouna Toliver presented first on the topic of male engagement. She started by questioning what it means when one talks about male engagement for gender equity. She said it means that one makes deliberate efforts to guide/support men through a process of positive self-transformation. She added that it means that one recognizes that men are products of their socio-cultural context. Furthermore, it means recognizing that men have vulnerabilities and that the women-centered efforts being used may neglect those vulnerabilities; as such, there is the risk that it contributes to heightening women's vulnerabilities. Lastly, it means that one does not just 'add and stir' men into the programs, but that one deliberately and strategically thinks of ways to engage men and boys by taking into account their needs and by recognizing and capitalizing on their potential as partners for social change.

She went on to a second question, asking why engaging men would be necessary. To this, she explained that one needs to work with men and boys to affect power dynamics between men and women, at both the household and community levels. Men are usually the power holders in society, and working with them means that they can influence other men, and that they can help to change community norms. Just as relationships with men influence women's participation with CARE, CARE's work with women also influences men, thus, one needs to be aware of how the WEP is impacting on the power dynamics at an intimate level. We need to be sure that we are not putting women at risk, and that we are not reinforcing traditional gender roles, e.g., increasing women's

caretaker role by extending it to a productive level; attempting to transfer rather than share power; or contributing to trading off responsibilities but rather to a sharing of responsibilities.

Maimouna then dealt with how male engagement is integrated in CARE Norway's WEPs. She began by explaining that male engagement is integrated to maximize the impacts of the WEPs, by ensuring that one is addressing the relational aspect of women's empowerment. She continued by saying that the activities in the program countries promote spaces and activities for men and women to interact and engage in joint reflection on gender issues. She pointed out two main strategies that have emerged as deliberate approaches of COs in efforts to integrate male engagement. The first one, used in several programs, is to adopt more couple-based, mixed-sex approaches by which women and men implement community activities together and/or by which couples engage in dialogue on various issues (e.g., gender, SRH, GBV, etc). The second approach, also adopted by several programs, is to target men in a more specific manner by creating safe spaces for men to meet and reflect on gender issues, and by engaging men in community advocacy efforts.

Regarding achievements, she said that all the programs have reported greater communication between couples at the HH level. There is a reported increase in joint decision-making about household finances (e.g., Rwanda) and other issues; more discussions between couples on SRH issues (e.g., in Niger and Mali there is an increase in the numbers of pregnant women going for preand post- natal consultations). Uganda reports an increase in men's participation in care giving and contributing to HH activities traditionally assigned to women; Rwanda also reported increases in husbands taking on HH chores. Burundi and Uganda both reported decreases in rates of violence against women (VAW) as a result of changes in male attitudes; the male change agent model adopted by Burundi and Uganda is challenging other men to change. This effort is also supported by men's involvement in community advocacy activities for the prevention of GBV and appropriate response to cases of GBV. In Burundi and Uganda, the male change agents are being called upon by community members to help resolve various interpersonal conflicts.

Maimouna then discussed some of the lessons learned from this process of trying to engage men. She said that joint dialogue/reflection sessions with couples had helped to build mutual respect and appreciation. Providing men with economic opportunities helps them to feel empowered and prevents GBV. Additionally, having some men-only spaces allows men to share challenges and receive and provide support to one another. Furthermore women can also share their personal stories, which can assist in self-transformation, and also to encourage others to contemplate their own behaviors. On the other hand, it has been noted that engaged men may suffer backlash from other men who perceive them as interfering in personal affairs. But what is important at the end of the day is that involving men in a deliberate manner makes them feel valued.

Case Study - REMA 1000: Making Markets Work for Women

Ms Leticia Pima gave a presentation focused on how COs are working to make markets work for women. She began by explaining that the program is a three year initiative, with a budget of \$200,000. The program aims to develop and integrate innovative business tools, methodologies and strategies to enable VSL groups to produce quality market driven products and access viable market through three intermediate goals, which are:

- 1. For women to enhance their business skills and understanding of their markets
- 2. Improve the sales of products and goods produced by VSL women business groups
- 3. Improve the access to distribution channels.

According to the first intermediate goal, Leticia discussed the accomplished activities. These are:

- The mapping of women VSL production to know their operation and status in general
- Market analysis and selection of value chain product for branding and promotion

- TOT training to 25 CBTs in entrepreneurship skills
- TOT training to 25 CBTs in basic record keeping
- Value of additional training in soap making
- Safety production methods training.

Leticia shared what has come out of the market analysis for the different products. The market analysis was conducted through the value-chain approach to find out the best and most potential



value-chains within VSL groups production boundaries in the district of Kinondoni and Micheweni. The following products were selected: in Kinondoni it was soap making (bar soap), food processing (pickle processing), flour processing (soya, cassava), candle making and soap making (liquid soap); and in Micheweni – Pemba, it was candle making, pickle processing, and coconut oil soap making (bar soap).



In training for record keeping, the community based trainers realized three main achievements. Twenty-five CBTs received this tailor made design of training. The training centered on systematic documentation and on custodians of simple and understandable primary business records. Through this training, VSL members understood how to prepare

cashbooks, stock control books, sales day book, and purchase day book basing on the single entry system.

Entrepreneur training was conducted separately at Kinondoni and Pemba, and involved a total of 62 VSL members. This training was designed to accomplish three things:

- a) to impart entrepreneurship knowledge and skills to VSL members enabling them to point out and handle the level of risk entrepreneurs are subjected to.
- b) to enable VSL members to succeed amidst all the challenges, and regardless of the type of business operation in order to achieve business growth.
- through this training VSL members were then exposed to different entrepreneurial knowledge and techniques, which enables them to face different challenges within their business surrounding.

Leticia said that the ability to add value to the products, which was described in the market analysis, has been of major importance. It is being applied in the training for soap producers that focuses on producing standard and quality soaps according to the required specification. With this training, VSL members were able to produce quality liquid and bar soaps meeting the required standards.

Regarding the second intermediary goal of trying to improve the sale of products and goods produced by a VSL women business group, the project provided appropriate equipment for micro processing of identified products, e.g., candle making equipment that is produced locally and is affordable. Information was also provided to facilitate women in business groups for access to participate in trade fairs and exhibitions, as well as assistance with product branding and packaging. Lastly, local media were engaged for promoting various VSL events.

Discussion

Benedicte summarized the three presentations referring to promising practices and gave Norad the opportunity to comment on the presentations.

The representatives from Norad said they were impressed with the achievements presented. They mentioned that the promising practice is individual and based on the context, but it has to do with how to bridge the gap between a good idea and reality. For those coming from Africa, the

representative said that he often wonders when will Africa reach the tipping point and then develop very quickly. He said that he would look more and more closely into relationships between Norwegian NGOs and the local civil societies. Therefore it was important for COs to know that they will need those examples and ways to explain their achievements. These kinds of meetings (this seminar) are very important for Norad in continuing to support COs, and to be able to argue their cases in front of the Norwegian Government. He reiterated that Norad's aim is the development of civil society within the countries that the participants represent.

A second representative from Norad also gave her comments, mostly posed as questions. She asked about VSL groups and how women are selected. How is the VSLA taken as a starting point, and what is next? What is the wider effect of the income generating activities? What are the quantitative results of the efforts, which have been done training people, producing products, marketing the products? Is it effective to produce things and then market/sell them?

A representative from Burundi express her gratitude for the Norad support, and shared a pamphlet. She mentioned that the story described in the pamphlet was a sustainable one. She also said that in her CO they are already thinking very hard of setting up a national movement that engages men. Leticia also addressed some of the questions posed by the second Norad representative. She said the initiative mentioned in her talk is built into the larger WEP in Tanzania. Not everyone is an entrepreneur, but nonetheless many of them have great ideas. Some of these women have been selected to participate in a pilot program, which if successful, the CO is hoping to be able to scale up nationally; currently, it is only being done in two places within Tanzania.

Objective 3: To review & reflect on our experience on gender and engaging men

Critical analysis of preliminary action plans, steps 1 & 2

Day 3 started with group work to exchange and strengthen the initial steps in the CO action plans. The countries were teamed up (Burundi/Niger, Mali/Rwanda, Tanzania/Myanmar/Uganda), and critically analyzed each other's action plans using constructive criticism (acknowledge strengths, pinpoint issues to be improved and give specific solutions) on idea cards to share in plenary. The content received by the various countries were as follows:

Burundi	- could learn from Niger's experience (tools) on Access Africa for their work on linking VSLA to Microfinance Institutions (MIF).
Mali	- should focus on working with the implementing partners as there are only two years left of the program. They need to document effects of their work, make an evidence approach, and learn what data to collect for the evidence base.
Myanmar	- should review their operational and organizational strategy and identify issues better, ex. look beyond drop- out rates. They should plan together with the communities and VDC to prevent drop outs. They also need to strengthen the linkages between newly trained auxiliary midwifes (AMWs) and the government health structures.
Niger	- could improve many things in their strategies, but should focus on gaps in the M&E and possible outcomes of this.
Rwanda	- should be more specific on their actions, ex. use the male engagement training manual. They need to include the goal on men engagement in their AP and should reflect on application and enforcement of laws to go beyond only sensitization.
Tanzania	- needs to make a clear advocacy strategy and guideline. Their M&E system is not comprehensively tailored to regularly collect and update program data, so they need to develop functional data collection tools to establish a data base and train staff in designing M&E.
Uganda	- should share their learning experiences on advocacy initiatives with the GLAI countries.

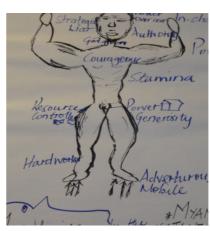
Some general comments from participants after the sharing session were that they need to be clear who their strategic partners are. They need to do power and gender analysis on every level (stories, assessment data) to reach the goal of Women Empowerment and to collect sex disaggregated data to see how boys and girls perform differently, e.g., regarding education and health.

Outcome: Definition of concepts related to gender

The gender advisors (Anastasia Olembo, Maimouna Toliver and Marjo Riitta Tervonen) led this session where the participants were challenged to visually depict their understanding of key concepts related to gender. The participants engaged in lively group discussions and enjoyed planning how to present their topic in a creative way.

Definition of masculinity

The Tanzania/Myanmar/Uganda group presented a drawing of a man and defined that masculinity equaled: handsome, thinker, overseer, in charge, powerful (biceps/triceps), very generous (broad chest), strategic (sometimes use lies to get what they want), God given authority, resource controllers (use money to get what they want), power house, hard worker, adventurous and very mobile.



Gender transformative programming

The Tanzania/Myanmar/Uganda group had a role play of a community meeting bringing people together. The decisions came from both woman and men and the chairperson was a woman.

Different forms of woman empowerment

Burundi presented a drawing depicting the situation of an empowered woman as someone who has her own fields and animals, a good house, she is no longer kept in her house, she has access to information, she is cheering a meeting with many participants, demanding her rights, her children go to school, woman and husband go together to health center to learn about reproductive health and she listens to the radio and the news.

Gender equity/gender equality

A group participant presented a poster showing gender equity/equality of: a) rights - both boys/girls and women/men should have the same rights, e.g., to education; b) opportunities - women and men should enjoy the same opportunities to exercise their talents; c) sharing roles - both genders should manage the HH resources, decide how to use the money and enjoy life; d) sharing responsibilities - women should have access to economic activities like men; men should take responsibility and be involved in pregnancy care, get information from the health care center and support feeding the child.

Gender blind/aware programming

Participants had a role play in two parts. Part 1: Four people sit in a meeting in a village in Burundi. A minister working with gender visits the group to see how they are planning gender equity. The group leader is selected by the community. After the group had analyzed the deepest causes of poverty for women/men/boys/girls, they discussed which actions to take to reduce poverty and they started attending training sessions, also the men. Part 2: All participants go blindfolded to their seats and bump into chairs on their way. The group said that achieving gender sensitivity requires a thorough analysis in the beginning to avoid doing harm.

Gender exploitative/accommodating programming

A group participant presented two drawings. Drawing 1 showed gender exploitative programming: In most patriarchal societies, men are the bread winners in the HH, so why not focus on the men so they can support their families? However, if we do only this, then we will build upon existing inequality and imbalances in the society where the women have to rely on the men for money. Drawing 2 showed gender sensitive programming: There were two VSLA groups, one for men and one for women. The presenter asked: Both groups are economically empowered, but when will the VSL groups meet so men know what is going on with the women? In most societies women cannot talk in public when men are there, so when will they start to discuss women issues with men present?

Gender transforming

CARE Norway had a role play showing different stages in gender transformative development (in the first scene a woman cleans the house and takes care of the baby while the man gives a speech at work and just relaxes when he comes home. In scene two the woman gives a speech in the parliament, while the man stays at home, but he is not able to make dinner or take care of the house. In scene three the man and woman both share the work at home and both work and give speeches in the parliament).

Summary of concepts related to gender

Maimouna summarized the presentations from the groups and posed some pending questions as follows:

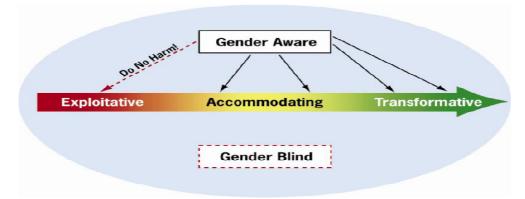
- To be gender aware means to include women and men, to analyze causes of poverty among women, men, girls and boys and to conduct participatory analysis.
- Gender exploitative includes supporting existing imbalances. Are there any positive sides of being gender exploitative?
- Can gender accommodative programming reinforce existing differences? To be gender blind can cause risk or harm.
- Gender transformative programming can change norms and roles, requires transformation, and gender equity. It's difficult to distinguish between equity and equality, which is easiest to introduce in communities?
- Gender equality includes equal chances and opportunities and joint decision making. Does gender equality include sharing of roles and responsibilities for women and men?
- Women's empowerment requires that they receive information, are no longer locked up in the house, have their own property (land, animals etc.), the family goes to the health station together, the woman demands her rights.

Woman's empowerment framework

After the group presentations some definitions related to gender were clarified by the gender advisors. While gender equity means that the opportunities, rights, benefits and resources are equal for all, gender equality means that every person can access these opportunities, rights, benefits and resources no matter who or where they are. Women's empowerment is the sum of changes needed for a woman to realize her full human rights – the interplay of changes in the three dimensions of: a) **Agency**: her own aspirations and capabilities; b) **Structure**: the environment that surrounds and conditions her choices; and c) **Relations**: the power relations through which she negotiates her path.

Gender analysis need to use gender sensitive indicators and address issues like masculinity. Gender awareness needs to be <u>deliberate</u>. We need to ask whether all our approaches and strategies are leading to transformation.

The gender advisors emphasized this point with the 'gender integration continuum' graphic:



Engaging men and boys in gender equality:

The gender advisors stressed that CARE should work with men and boys because

- Changing men's and boy's attitudes, behaviors, identities and relations is a key condition for progress on women's and girl's empowerment and gender equality.
- Gender is the relationship between men and women, so we need to include both
- Engaging men and boys in programs that empower women and girls can help prevent or reduce harmful backlashes.
- Rigid gender norms and stereotypes can have a detrimental impact on men's and boys' own health and wellbeing.
- The women impact group members demand it.

Men have multiple roles in the family: progenitors, gatekeepers to health services, nurturers, contraceptive users, supporters or resistors of partners' contraceptive use, change agents, sources of violence or sources of support, providers or jobless, often have more power than women but do not necessarily perceive themselves as empowered.

Some tensions in focusing on men and boys relate to

- 1) the possibility of backlash for women (men take over the benefits arising from working on women empowerment)
- 2) whether it is possible to talk about power and vulnerabilities in a relational way (to talk about men's vulnerabilities without losing sight of women's disadvantages and vulnerabilities)
- 3) resource scarcity (will resources allocated to work with men take away resources from empowerment of women?)
- 4) economic empowerment: engaging men to support women's economic empowerment: and what of men's economic disempowerment?
- 5) whether women's gains are men's losses? Will men give up privilege? Can we find ways to engage men that are "win-win"?

"Gender synchronization" means that we work on 1) both women's and men's engagement for gender equality and 2) the intersection of gender-transformative efforts reaching men, boys, women and girls to create strategies that engage people in challenging harmful and restrictive constructions of masculinity and femininity that drive gender-related vulnerabilities and inequalities and hinder health and well-being.

Work on gender in the field

COs were requested to share their experiences in working on gender. CARE Burundi have used the 'Abatangamuco' (male change agents) model to increase sharing of responsibilities and decision

making within the household, stop violence and improve interactions between spouses. Change agents travel throughout their communities sharing personal stories of positive change to encourage others to reflect on gender norms. Men encourage other men to join and changes in social norms have occurred.

CARE Rwanda has partnered with the Brazilian organization ProMundo to train couples and analyze aspects preventing gender equality. Men who followed the training have organized themselves in clubs and spread their messages in the community. This has resulted in changed attitudes and increased support to women.

Regarding research and innovation initiatives, CARE is taking the lead in facilitating national studies on men's attitudes and behaviors on gender equality in Rwanda and Mali. To enhance advocacy and influence, CARE is a member of the Men Engage Alliance and participates in a new global campaign to increase men's engagement in care-giving activities (refer: www.men-care.org).

In Uganda, a program called "Responsible Man" is running. The community selects the Responsible Man to assist in organizing and mobilizing the community. A Responsible Man is a man who has been transformed, meaning that he has changed his role to better organize his family in partnership with his wife. In the case of GBV, the responsible men mediate conflicts and share their personal stories. Men who have undergone such tangible transformations are now forming a network of Responsible men that will help to scale out this program. Uganda also encourages local council leaders to speak up and make public announcements promoting women's empowerment.

Tanzania uses animators to promote dialogues within the community, especially to discuss difficult topics and find solutions. It has been quite successful, but needs to be strengthened.

In Niger, the main approach is couple dialogue, mixed sex groups, working with men to understand the roles they want to play and gender platforms. Some achievements are increased couple discussion and decision making regarding contraception and reproductive health, and more male leaders involvement in the defending of rights of girls and women. Adults are encouraged to teach young people about these issues and this facilitates intergenerational dialogue. Some challenges are ensuring rigorous monthly monitoring and strengthening the engagement of youth and COs. In addition, the CARE Norway male engagement strategy has not been clear.

Mali uses intergenerational dialogues where old and young express their views in a forum. They first work with the youth to make them express their views freely and think how adults might react to this. Then they have a forum where old and young interact, discuss and try to understand how each other is thinking and how the thinking about the issues raised have changed over the years. At the end of the day, commitments are made at the community level. To ensure that each topic is covered fully, they only take one issue per forum. A study is being conducted to find the impact of the program and how to strengthen it, but the scale had to be reduced due to security issues in the country. There have been achievement related to the use of contraceptives, but the achievements were not as good as hoped. CN will continue its technical and financial support and Mali will continue to use media to target male-engagement.

A TED video "Men Box" by Tony Porter was screened; this film discusses what characters men should live up to according to their society. It showed how girls and boys are educated differently by their parents and the society and how this influences how men and women perceive their roles and how they behave with the opposite gender. The care message was that the liberation of men is tied to the liberation of women.

Maimouna stressed that it is important to consider where we are, and discuss with our partners to make them aware where they are, on the Gender Integration Continuum from exploitative via accommodating to transformative (see diagram 2 pages above). A program may have all these three aspects depending on how you view the program and every CO is at different places on the continuum. Transformation is a long term goal. The Mali Men engage program is a strategy to move away from exploitation. Anastacia commented that when you see women empowerment only as a job nobody will believe in it, e.g., in an office some employees may be transformative and some exploitative, but CARE employees should show by their actions what they stand for. Thus the gender policies should be internalized in the CARE offices to hold the leaders accountable.

The participants requested tools or indicators to better assess where they are at on the continuum. One tool is Gender Equity & Diversity (GED) gap analysis where the technical team works with senior managers to assure it is implemented. The gender advisor from Tanzania shared the COs experience in that funds are normally not available prior to writing a proposal in order to conduct proper gender analysis; but in one occasion the CO received funding from the Melinda and Bill Gates foundation to conduct gender analysis at the program design stage. This is something that CARE Norway could negotiate with Norad about.

Learning lessons

The mini-evaluation on day three included a question probing about lessons being learned by this point in the seminar that will be good to take back to their COs; the emerging results were clustered as follows:

Gender:	Learned about concepts on gender & on how to assure that progress on the WEP is gender transforming.
MTR:	Lessons learnt from the MTR process & action plan & way forward for remaining period will be shared with
	the WEP staff back home.
Sharing:	The process & meeting has included much sharing which enriches learning experiences across the program
	& WEP, deliberate efforts to share good practices. Learned from other country offices, CN & Norad.
Norad:	Got acknowledgement from Norad on what we are doing. CARE needs to focus on our role in strengthening
	the civil society
Action	How we are building an action plan & how we can be honest & realistic in the remaining implementation
planning:	period & revisions needed to achieve that.
Men	Have learnt about Engaging men approaches of other COs & will adapt the most appropriate to our country.
Engage:	Learned how women empowerment, advocacy at all levels & engagement of men can be connected as
	opposed to fragmented.
Advocacy:	We learned about advocacy initiatives that we can use in our CO

Objective 4: To reflect on partnership, financial situation and preparation for a new program phase

Process: financial situation, trends on budget, and use of telethon and Norad funds

Norad: Kjell Stokvik from CARE Norway made a presentation about the financial situation of the WEPs. Kjell informed that reallocation of funds between countries is possible, and highlighted the need for budget revision to enable forecasting as unspent funds can cover needs in other CO. Funds not spent by 31/12 have to be returned to Norad. If CARE is not able to spend the funds that are received, this will decrease their image as an agency able to handle this amount of funds in a proper way.

Question from plenary: Currently the COs receive final installments in September. Is there possibility to receive this in August to be able to use the funds in a timely manner?

Answer: CN transfers the funds when it is obtained from Norad, so CN can't promise to send the funds earlier, but it is important that COs inform CN if they need extra funding, so resources can be allocated in the best possible way. To prevent problems with using all funds by the end of the year when there are gains on the exchange of the last transfer, the COs should incorporate the exchange rate gains into their budget request, use a high exchange rate, periodically review the budget and recalculate after every installment. Kjell added that if the COs need more money they should request it at the recap stage August-September, as Norad does not allow cost-extension.

The current Norwegian government has adopted a zero tolerance policy on corruption. Anti-corruption measures are increasingly demanded by the donor community, thus the COs will have to sign an agreement regarding their **anti-corruption/fraud policy**. A trend from the donors in Norway that will be picked up by other European donors is that action against corruption has to be taken at a very early stage, i.e., immediately if there is any suspicion of a problem. Donors want to see the procedures on what has been done to solve the situation. Thus fraud of any funds, from CN or other donors, should be reported to CN. A summary of the incident will be reported directly to Norad and from 1 July, it also has to be published on the CN website. In case of proven fraud, the CO has to repay the money, and a poor track record on handling fraud may result in a full stoppage of funds to the CO or exclusion of that CO from CN. CN will give the COs information on their anti-corruption and anti-fraud policies soon and he requested the COs to send CN their existing policies on how they deal with these issues so CN can work together with the COs to develop a uniform policy.

Several participants requested that CARE and Norad help them to implement strategies against corruption and requested guidelines on how their civil society partners can handle the money to assure the transparency Norad requires. Norad rejected a proposal from CARE to share the risks when dealing with civil society. CN stressed the need for a thorough risk analysis in the programs and to show how the COs plan to manage those risks. The COs have to make sure their partners can be accountable at the same level as the CO, and if the risk is too high, they should stop the partnership.

Pamodzi: which is a system that allows CN to access directly the CO's financial records and work closely with the COs on finances, will soon be established. The COs need to ensure their financial information is up-to-date and **revise their budgets** periodically based on changes in spending and currency. In 2012, Norad will conduct a detailed **financial review** (probably in November) to see the chain of funds transfer (from CN to COs) and cost structure of COs and their partners. There is also likely to be a **program review** to check how CARE operates and its capacity; this will be done to evaluate whether CARE qualifies for another new 5-year contract.

Telethon - The Telethon money should be used for Men Engage programming and to scale up VSLAs to strengthen the four thematic focus areas in the WEP. There were some startup problems regarding using the money from the Telethon as COs found it difficult to identify suitable partners (i.e., ones with experience in men engage) as well as lack of capacity for CARE in men engage programming. The projected burn rate of 70% is far from being achieved. In 2010 only 24% of the budget was spent, in 2011, 62% and on average so far in 2012, it is only 13%. The money should be integrated in the regular programs, but some countries complained of too little guidance from CN. CN is assigning two staff (Hilde and Ellen Beate) to make an operational plan for the money and support its implementation. He also pointed out that Norad supported the Telethon with 35 million NOK, so the use of Telethon funds has to be reported at the quality level of the Norad report (financial and narratively).

The period for using telethon funds ends by end of 2014. If according to COs expenditure reports due by 30/09/2012 the spending is lower than 70% of the 2012 budget, funds will need to be reallocated.

There is 10% line flexibility (for reallocating funds between budget lines). However, before doing this it is important that the COs check whether this will have an impact on the action plan. Reallocation of funds above this is possible when the CO has strong arguments in favor of it and needs to inform CN in advance. Kjell emphasized that the focus to increase burn rates should not compromise program quality.

The trend that NGOs go into large programs with funding from many donors poses logistical and financial challenges to the COs when they report according to the requirements of the different donors. At present, each donor has their preferred reporting requests and due to accountability issues Norad has rejected previous requests of submitting one report, but CN will keep on negotiating with Norad to accept this.

Partnering/working with others - Update since 2010 Mali workshop on partnerships

Prior to the seminar, the participants were given partnerships self-assessment tools to evaluate the quality of the WEPs partnership approaches. The findings were summarized by Selam Hailemichael and Saliou Kane as follows:

- 1. Does the partnership have objectives and are these SMART?
 - a. Strategic partners' objectives are related to program activities, from the reports of COs, thus owned by CARE and shared with the partner (not developed jointly and not long term and often lack objectives regarding M&E).
 - b. Implementing partners' objectives are made through joint planning of partners and COs and it seems they are shared. Objectives focus on the programs, and are anchored in the partnership. Partnership is formalized so responsibilities and employment of partners and COs are well defined. There was frequently need for capacity building in different areas, although the partners are selected due to their expertise and experience in specific fields.
- 2. Are costs of working in partnership known?
 - The actual costs are usually known after the activity and not before in the case of working with strategic partners. All COs shared costs with their partners and in strategic partnerships both partners are financially independent, which makes it more cost efficient than with implementing partners.
- 3. Does the partnership take into account the culture of the different partners?
 - a. Most times it's a clear understanding of the mandate and what task will be assigned to the various partners. Strategic partners are usually informed about the program by CARE beforehand, but CARE is not so flexible.
 - b. Culture was not an issue for implementing partners, or for corporate partners. It is good to have diversity of cultures. Many of the COs reported that the power relation between them and implementing partners was even without any hierarchy.
- 4. To what extent is the mode of communication open to the partners and the public?
 - a. Strategic partners share activities and program outcomes through informal collaboration, making it difficult to involve outside members.
 - b. Implementing partners share a common ground with the COs. Forums are widely used to share outcomes and serves as a meeting ground to communicate on a regular basis.
- 5. Is the collaboration effective to achieve what we have obliged ourselves to deliver?

- a. Strategic Partners: As the type of collaboration depends on the activity and program, progress can be vis-à-vis with these objectives. When an activity or program ends, the partnership also tends to end.
- b. Implementing Partners: Dependency is quite clear. When it comes to evaluating work of IPs, the contract framework is a reference. Both parties monitor the activities, program and how the partners are on track towards achieving the goals in the framework.

Partnership review

The countries teamed up to discuss, and reflect on the following questions:

- 1. What are implementing partners?
- 2. What are strategic partners?
- 3. How do you work with implementing as compared to strategic partners?
- 4. How do you work with partners who are stronger than you/CARE?
- 5. What are the 3 main challenges in working with strategic or implementing partners?
- 6. What are the possible solutions for the challenges?

Results of the discussion

Implementing partner was defined as a partner with whom the CO has a formal contract for certain duration and share certain resources with. **Strategic partnerships** are based on clear objectives, but not necessarily on funding from CARE. The partners pool their resources (human, financial), share responsibilities and risks. Strategic partners can have national or local level influence, they may be state institutions, and are often used for advocacy. The COs have close relations, including memorandums of understanding, with the implementing partners. Strategic partners only meet at certain stages.

Challenges - Issues regarding civil society face particular challenges when it comes to political issues. In situations where CARE can no longer express their own wish and is not able to go further in the negotiation, they have to withdraw as CARE is not allowed to compromise its values. Challenges with strategic partners include not being able to commit resources (time human resources etc.), having conflicts between internal policies, and also personality issues. It's a challenge to make the intervention sustainable with ad-hoc ways of working. In some cases there is no common memorandum of understanding; if personnel change, the loss of institutional memory may lead to less attention to the partnership or discontinuation. A challenge for working with implementing partners is that CARE is perceived as a donor so the relationship is seen only in terms of contracts and dependency. The partner organizations may have different mandates. A further challenge is that the partners may lack depth of competencies or human resources; if the partner organization is dependent on one person, and that person becomes unavailable for any reason, the organization falls apart.

The solutions to the challenges are that both partners should be open to learning, and CARE should recognize the positive aspects the partners bring and invest in capacity building of the local NGOs to prepare them to become independent. CARE needs to start perceiving partners as having the equal value however challenging this may be in reality. CN is in the process of defining strategic partners and developing a strategy on how to work with them.

Action planning - step 3

The next action planning step for COs was to address key challenges for working with partners in the WEPs. They were given the following matrix and asked to have their ideas ready for inclusion in the consolidated planning to be done on Friday.

	What are the most important action steps for addressing challenges with partners:	What technical inputs/resources would	How will you know that you have successfully
Leading challenges,	2 for strategic partners, and	you need to achieve these	addressed the
by type of partners	2 for implementing partners	action steps?	challenges?
Leading challenge/s			
for strategic partners			
Leading challenge/s			
for implementing			
partners			

Preparing for the new phase - beyond 2013

Benedicte made a presentation on the potential priority areas in the new phase of framework agreement after 2013 with the following highlights:

CARE has to find a platform and strategy that makes the organization a relevant development actor in the Norwegian and international development arena. An overall strategy for CN for 2014 to 2018 will be developed and CN's humanitarian strategy will be revised based on the new CI Humanitarian strategy; in addition, CN's advocacy, marketing, communication and partner strategies will be revised.

There is an increased focus on counteracting corruption by following up development funds more carefully. Increased demand for results based management, cost-benefit analysis and pressure on proving ones added value as donors are looking for best value for their money. The trend pursued by the Norwegian government seem to be concentration of funding for selected limited numbers of partners and funding channels for increased impact. Thus there will be increased focus on which agencies are the most effective in reaching a large portion of the community and in achieving impact at scale.

CN need to be clear on the competencies we possess and identify what competencies we need to keep, strengthen and/or obtain. In the new phase, focus on Women's empowerment and gender equality, fulfill women's rights, humanitarian assistance, long-term development and advocacy will be maintained. VSL and Engaging Men will be further developed and integrated in the WEP as methodologies, not run as a side projects. CARE needs to perform systemic capacity building of partners (infrastructure, skills, training and systems) for empowerment. Better integrated advocacy in the country programs across thematic focus areas and especially advocacy on WEP and gender quality could be an added value of CARE. CN will support work to strengthen civil society and democratic development for poverty alleviation. There is also a need to strengthen M&E through using common indicators, result based management and document strategies and models to secure evidence based approaches. CARE also needs to better explain how and why the results within a program or project have contributed to social change and the impacts thereof.

Working session on planning for a new phase of the WEP

To plan for the new phase of the WEP, the countries teamed up and had lively discussions around current and future thematic areas. The responses were written on idea cards and shared in plenary.

Focus on thematic area

1. Where is CARE's added value on each of the four current thematic focus areas?

Economic empowerment / economic security		
VSLA	 Long-term experience with the VSLA approach and can give technical guidance to others On-going development and adaption of VSLA model towards the poorest, those who started to increase their economic capacity through linking with micro-credit institutions, etc.; VSL is a proven model for economic empowerment of the poor 	
Partnership	Strong partnership with the corporate sector	

Targeting	Targeting the poor/marginalized women		
	en's participation in decision-making		
Networking / linking	 Projects & methods (VSLA) aim at creating social movement beyond immediate economic results CARE's solid experience in linking grassroots to national level participation in decision making 		
Mainstreaming	 Women's participation is mainstreamed into all projects as a method of working Combination of VSLA with themes of rights & political participation of women 		
Building capacity of women	 Capacity building for the women to participate in political affairs/positions Good methodology in building self-confidence of the women 		
Community base	Long-term engagement within the community (grassroots)		
Other	 Facilitates process of change Use of score cards to promote community participation CARE is non-political, non-religious organization 		
SRHR			
Partnering with	Networking with strategic partners, MoHs		
health sector	 Strengthening community structures Long-term experience in SRHR (especially MCH, adolescent RH, HIV, family planning, advocacy) 		
Social change	SRHR includes social analysis & aims at structural & cultural changes		
tools	 Social change tools, approaches that favor social change (SAA, SASA, MBE) Women empowerment framework – agency, relations, structure 		
Link with VSLA	VSLA as a platform for awareness raising Advantage of integration of SRH in VSL groups		
Men engage	Male engagement as an approach to promoting SRHR aims		
Advocacy	Lobbying, advocacy		
GBV			
Advocacy	Evidence based advocacy on GBV (CARE has a niche in community based advocacy)		
Integration / mainstreaming	 Advantage of integrating GBV interventions in VSL groups CARE's holistic approach at integrating initiatives Helping the most vulnerable & marginalized to access their rights (program principle) 		
Engaging men	Engaging men as an integrated component of CARE's GBV approach		
Partnering	Networks & alliances with strategic partners Experience on working with different actors		
Ensuring services	Case management, rights based approach, survivor centered support		

2. Are there other thematic focus areas where we should be working? If so, what area and how does it link with women's empowerment?

Climate & natural	Disaster risk reduction & increasing integration of DRR & emergency humanitarian interventions with long term development
resources	Climate change – inadequate water, land for agriculture; no food, water
	Domestic energy (time, funds, costly)
	Access to sustainable energy, linked to women empowerment, access to costs for education, security, etc.
	Resource based conflict - Women more affected, e.g., water, land, forests
Resilience	Reinforce the resilience of VSLA women & groups
	 Reduce the risk of catastrophes (planning, prevention); reinforce economic empowerment of women
	Food security/resilience
Education	 Functional adult literacy - Enables women to function in the roles they are playing, e.g., in VLSAs; Enables women to negotiate, to lead, etc.
	 Education for the girl child – without education, there is no self-esteem, expression of self-worth; no or limited meaningful participation in decision-making; no negotiation; stigma; limited access to opportunities
	Basic education - Addresses longer term women empowerment issues, e.g., SRH
Target	Engagement/involvement of youth – young girls, boys, in school
groups	 New potential target groups – youths (boys & girls) for job access, participation; urban population
Nutrition	Nutrition of mothers & children

3. Focus on the implementing approaches/tools - At this stage, where are the different implementing approaches/tools (VSLA, Men engage etc.) essential for achieving the desired outcomes of the themes?

	Implementing approaches/tools						
Thematic focus areas	VSLA	Men Engage	Capacity building	DM&E, Knowledge management, & Learning	Partnering / working with others	Advocacy	Rights based approach
Economic empowerment / economic security	Savings & loans – strong IGA increases funds, get increased savings & assets Addresses issue of access to financial services Strengthens savings to be able to cope with economic shocks	 For collective ownership Power holders Leads to support of women empowerment & gender equity (avoid resentment, backlash) 	 Ensures sustainability – skills attained are permanent To benefit more from the increase in funds, e.g., SPM, FL, 	 Tracking performance Quality control Documenting best practices, learning & sharing 	 Scale up Geographical coverage Creating linkages 	Governments increase in resource allocation for poverty alleviation programs	For inclusivenessBeneficiary centered
Governance / women's participation in decision-making	VSLA is the base for organizing the women	Transform the social norms & attitudes that discriminate women from participation	Increase capacity for action by women Acquire the knowledge on rights, roles & responsibilities of women	Demonstrate evidence Learn & strengthen approaches	Reinforce civil society to influence systems	Lobbying on the structural/political causes	To take up aspects of equity, equality, discrimination, & accountability
SRHR	VSLA is not the best approach because many of the women are over 40 yrs. (using contraceptives is not linked with economic capacity)	Control & necessary to work with men	Important to do capacity building of CARE's staff & service providers – to enable them to address root causes; to justify the information	Tracking impact; improving programming; resource mobilization; advocacy; learning	 Expertise; resources; Replication – greater/broader impact Sustainability 	Improving policy, implementation Improving legal framework Quality of service Behavior change	Inclusiveness of the poor Equity (services, needs)
GBV	VSL entry point to talk about sensitive issues like GBV VSLA as a solidarity group can be a counseling forum & advisory	Role models, decision/policy makers Redefine masculinity Institutional to involve perpetrators	Government – (structure) improve services & referral mechanism Family – (relation) decrease incidence Women – (agency) strengthen awareness & self-confidence	Need to know the what, the how to assess level of achievement Evidence based approaches Share learning outcomes Replicate / scale up promising practices Critical reflection	Need multi- sectoral responses Economy of scales Complementing capacity & playing different roles	 Awareness raising on rights Grounded advocacy 	Ensure legal framework & implementation

Review of action planning step 3 – partnering

The following points summarize the key steps proposed by the COs for improving partnering.

CARE Norway - Keep the Norwegian government accountable for implementing their policies ex. 1325 and protection) based on input from COs (Afghanistan). Create a debate on the White paper on Global health (SRHR, awareness rising of GBV, Men Engage etc.). Get increased media focus on food security (DRR/prevention, adaptation/mitigation) based on evidence from COs (Niger and Mali).

Uganda - Inadequate availability of services. Do UCPV analysis and resource mapping in communities. Negotiate and demand services for marginalized population and how they influence service provision.

Myanmar - Participate in developing women protection laws. Involve CARE Myanmar in developing national strategic plan for advancement of women.

Tanzania - Advocacy for improved SRH at district and local level. Men become change agents for improved maternal and SRH.

Rwanda - Illegal marriage. Influence of establishment of law. Mobilize for better implementation of the law by lobbying.

Burundi - Participation of VSLA members in decision making. In 2010 1740 VSLA members were candidates and 509 were elected in local elections. Networking: work with civil society organizations to influence the government to review the penal code.

Niger - Raising the quota law and getting it passed; Educate young women

Mali - Women become land owners. Convention on land management

Objective 5: To finalize & validate action plans

Clearing the parking lot

Issues the participants found important to address on the final day included: VSLA - VSLA for the poorest of the poor? What is the added value of having male only VLSA groups?

M&E - M&E of VSLA, SRH and Advocacy; how to reconcile the global WEP common indicators with the expectations in the reports to ensure consistency

Action plans - How to put in place a system to regularly monitor the implementation of all the plans we have drafted this week? How to integrate the monitoring of the three plans GLAI, WEP and partnership?

CN priorities - Make clear the key priority themes, strategies and approaches for the remaining period and the new phase. CARE Norway should be better at focusing

Research - Budget for research on what has contributed to the change in men and Cross fertilization of Men engage in the region

Long term - What are the visions and long term perspectives on how CARE will be a relevant organization in 20 years in a changing economic, political, environmental and donor context and how it will affect CO, CARE International and the CARE system.

Many participants commented that the workshop had required hard work, but they had learned a lot! Some participants were concerned that some countries may drop out of the partnership with CN in the next phase.

Action planning – step 4: Consolidated plan

This final step focused on consolidating the action steps for the WEPs in each CO. COs were asked to bring together all the draft action plan components, and lessons learnt from this workshop. They worked with their CN advisors, and then presented their plans to one other for validation. The following matrix was used for this activity.

A: Action plan table

What are the most important	What technical	How will you/we know that	By when?
action steps	inputs/resources would you	you have successfully	
	need to achieve these action	addressed the challenges?	
	steps?		

B: Ensuring the plan will be enabled

How will you ensure that your WEP action plan fits with (or is feasible with) your CO AOP (country office annual operating plan to confirm that there are no conflicts, and also see where there are opportunities to integrate activities within the AOP.

Results

The consolidated action plans are presented in ANNEX 3 of this report.

Closing session

Final evaluation

All participants completed a short final evaluation – summary results in ANNEX 4

Closing comments

The General Secretary & Program Director of CARE Norway thanked all the participants for their active participation and contribution at the workshop; and then the floor was opened for representatives of all the program countries to also say a few final words.

Annexes

ANNEX 1: Workshop participants

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ANNEX 2: Indicative agenda

	Session	Key topics/ questions
Monday		
		ed from the mid-term review of the WEPs
9:00 am	Workshop opening	Opening remarks, ground rules, expectations, etc.
	Preparations	Setting the stage (global processes & changes)
	MTD findings	Brief recap of MTR process
	MTR findings	What are the emerging patterns Deeper reflection by COs
		Lessons learned & Recommendations on:
		- program implementation (resource utilization)
		- program achievements
Pm	Capacity building	Reflect on cap building experiences
	3	Lessons learned & recommendations
	Action planning	Planning remaining period (in relation to important mile stones):
	, ,	Steering measures to strengthen weak areas identified by the MTR
		End of term evaluation
Evening	No arrangements	
Tuesday		
	o consider how we can integrate stronge	er and focused advocacy components in our programming
9:00 Am	Advocacy	Integrating advocacy
		Lessons learned from GLAI
		Transition planning and how to systematically integrate advocacy in the WEPs
Pm	Exchange with Norad	Presentation from Norad
		- How has Norad's priorities changed after Busan?
		- Norad's plan on continuing engagement with southern CSOs
		Presentation from COs
		- GLAI – experiences from the countries and the region
		- Engaging men experiences
		- CN's engagement with corporate partners – experience from Tanzania (REMA project)
	Action planning	Action planning on integrating advocacy
From 5 o'cloc	k CARE Café	Profiling CARE & mingling with CARE friends, other NGO staff, university students, etc.
Wednesday		
	review & reflect on our experience on g	
9:00 Am	Gender	Experience with engaging men initiatives – achievements, challenges, way forward
		-feedback from regional gender advisors from regional reflections
		- Individual CO update on status
Pm	Gender transformative programming	How to ensure that our programs are gender transformative?
	Action planning	Ways forward with regards to - gender transformative programming
		- engaging men Initiatives
From 7 pm	Social evening	- engaging men midatives
Thursday	Gooda everning	
	reflect on partnership, financial situation	on and preparation for a new program phase
9:00 Am	Financial situation	Trend on budget use of telethon & Norad funds
0.007	Partnership	Update from COs since 2010 Mali workshop on partnership & way forward
Pm	New phase	Preparing for a new phase
		- Emerging trends
		- Identifying & capitalizing on CARE's added value
	Action planning	Action planning in relation to preparation of applications for the new phase
Evening	No arrangements	
Friday		
Objective: To	finalize & validate action plans	
9:00 Am	External meetings	External meetings between CO representatives, Norad, UD, others
Pm	Finalization of AP	Finalization and validation of APs
	Conclusion	Final evaluation
		Final words
Evening	No arrangements	

ANNEX 3: Consolidated action plans

Burundi

What are the most important action steps	What technical inputs/resources would you need to achieve these action steps?	How will you/we know that you have successfully addressed the challenges?	By when?
Exchange Visit of experience in Rwanda Adaptation of Access Africa strategy and implementation of a strategy of linkage	- Budget - Internal resource (Expertise from CARE Niger)	Existence of VSLAs receiving credits	July 2013
Capacity building (activists, leaders of VSLAs, Abatangamuco) to support psychosocial aspects of program Development of psychosocial indicators	- Budget - Support of the International Consultant paid by ADA	Case management indicators developed	December 2012 September 2013
Strengthening of women members of VSLAs at level of provinces and municipalities Train members of networks of advocacy techniques, communication with the media Support networks in the implementation of the authorities which govern Linking networks with other organizations	- Budget	Existence of action plans for advocacy networks	April 2013 June 2013 October 2013 October 2013
Gender Based Violence : Implementation of UNSCR 1325 through the adoption of inheritance law	- Budget allocation	WEP Quarterly/Annual reports	December 2013
Implementation of Kampala Declaration on SGBV through the adoption of GBV specific law	- Budget allocation	- Men Engage Alliance - Adoption of the Act	September 2013
Capacity building support (Ministry in charge of gender; SPPDF)	- Budget	Reports, GBV evidence reports	December 2013
Develop Strategic Partnership to scale up keys models : VSLA model	- Budget	Number of partnerships developed around VSLA	June 2013
Organize perception assessment based on relationship between CARE and implementing partners	- External national consultant - Technical support from Regional Partnership Think Tank	Perception Assessment Report	June 2013
Develop a guideline based on the assessment findings	- Organize exchange session	Evaluations on the improvement relationships	September 2013

Mali

What	are the most important action steps	What technical inputs/resources would you need to achieve these action steps?	How will you/we know that you have successfully addressed the challenges?	By when?
•	Identify other strategic partners who have an interest in pursuing the strategy of engaging men	Support coordination of civil society organizations	List of Strategic Partners Promotion of male involvement strategy by the Ministry of Advancement of Women	September 2012
•	Identify implementing partners under the WEP for strategic partnership		A Memorandum of Understanding is available	August 2012
•	Advocacy for access and control of land for women	Technical support from the Department of Promotion of Women, Children and Family Best practices in lobbying	Availability of land management agreement which takes into account women's needs Number of VSLA women who access and control land	June 2013
•	Advocacy for women's representation in management bodies of land	Technical support from the Department of Promotion of Women, Children and Family Best practices in lobbying	- Number of joint management committees in which VSLA women are members	December 2012

Myanmar

What are the most important action steps	What technical inputs/resources would you need to achieve these action steps?	How will you/we know that you have successfully addressed the challenges?	By when?	Comments (internal)
Strengthen the coordination mechanism among local players (VDC & AMW & MW)	Reference materials & lessons learned documents from other areas/countries.	AMW & MW coordinate together to address SRH related health issues in the villages.	April -2012	Comment: to consider the power source who will support the coordination mechanism.
Capacity building for VDCs(conflict resolution, planning & organization skill, management, set up/strengthen clear roles & responsibility) Honorarium & motivation & social recognition	Reference materials & lessons learned documents from other areas/countries.	Reduced VDC turnover (both male & female members)	July-2012	
Research on harmful, rigid gender norms & address harmful, rigid gender norms (The research should also cover information for ME strategy)	Get technical assistance from CARE Norway, in identifying appropriate resource persons. This TA can also help us developing strategy to address those norms & engaging men.	Strategy to address harmful, rigid gender norms in place	2012-2013	
Evidence based advocacy to develop domestic violence law & revising women protection law. (Myanmar does not have DV law yet) Use voices of GBV survivor/victim in advocacy process	Technical Input related to Advocacy Strategy formulation Lessons learned from other countries with GBV advocacy experience.			Comment: 6 could be part of 5, to show how you will know i.e. voices of GBV survivors included in campaigns/advocacy(tentative) Program level research??? Comment: required resources might include research, data. Developing indicators would require Human Resource & time
To develop a more formal partnership agreement with Department of Health	Partnership strategy (strategic partner).	- Regular & effective corporation mechanism between CARE & DOH.	Nov-2012	Comment: : Issue should be lack of partnership guideline CARE Myanmar doesn't have a partnership strategy for CO but there is one to be developed in July-2012 with support from regional technical advisor.
Strategic partnership with GEN (Gender Equity Network) & identify other strategic partners on the national level working on Women Empowerment to strengthen CARE MM WEP	Same as above	More coordinated work within GEN. E.g. research	On-going	
To understand capacity gap & resource gap within CARE & Partner	Tools or guidelines for partner capacity assessment (strategic partner)	Partner capacity building plan developed & implemented	2013	CN will share its partnership strategy when finalized.
Identification of potential implementing partner	Tools & guidelines for partner selection (implementing partner)	CARE MM WEP is working with implementing partner at local level.	July-2013	CARE MM is currently directly implementing WEP. There are potential partners at local level who could promote Gender & Men Engage in the communities. One example is Shan Culture & Literacy Association The rationale behind attempt to work with partner after MTR are: 1) to use the geographical reach of partner organizations to scale up the impact, 2) to develop a local player after CARE leaves the area, 3) to develop a long term partnership with a CSO
 Intensive monitoring & supporting, & proper handover process will be needed to build a partnership relationship within a shorter time frame. 	- Tools to monitor partnership - Partner capacity assessment & capacity building plan (selective)	Partner organization(s) have competence & confidence to promote Gender & ME at the end of CARE WEP.	After local partner(s) are identified	

Niger

Wha	It are the most important action steps	What technical inputs/resources would you need to achieve these action steps?	How will you/we know that you have successfully addressed the challenges?	By when?
•	Integration of risk management as a component of the program	- Additional financial resources - Sharing results with MMD-RC Mali	Women group members and groups are aware and take into account the aspect of systematic risk; Local initiatives continue to be developed by women and their group to address the risks of food insecurity.	From 2013 to develop an initiative on RA- RC MMD larger if resources are available based on the results of RA to be completed in late 2012.
•	Political support for women elected	Experience in other countries	Elected women know better and mastered their roles and responsibilities; The elected are reinforced on gender and the gender strategy of the program.	Ongoing
•	Monitoring and evaluation (process documentation and publishing)	Expertise / financial resources	Existence of a database (at the program and each partner CSOs to implement) that meet the information needs of the program; The staff of the M & E unit (level program and CSO partner) know and have mastered the techniques to capture / measure changes, document them and communicate related indicators of effect and impact of the program	Continuous
•	Education of the girl (advocacy theme)		The number of girls attending school has increased (to determine% versus time of the current level).	from 2014
•	Transformation of social norms in favor of equity and gender equality	Reallocation of resources for 2012 Expertise to capitalize on the initiative of men committed	Revision of curricula in schools to be gender sensitive The proportion of women who practice their rights increases (access to RH services, political participation)	
•	Have a relevant strategy to consolidate the social movement of equity and gender equality at regional / national	Experiences of social movements in other countries to inspire us	Social movement and consolidated operating at regional and national levels.	
•	Raising the capacity (financial, programmatic, planning, M & E aspects)		The Partnership assessment tool will demonstrate that the CSO moved from one level to higher level. The rate of resource consumption becomes regular and consistent with principles of financial management	
•	Engage CSOs to create an active civil society (act when necessary, act as a force against discriminatory policies)	Financial resources to support the development plan organization CSO		

Rwanda

What are the most important action steps	What technical inputs/resources would you need to	How will you/we know that you have successfully addressed the	By when?
	achieve these action steps?	challenges?	
Partnership	Technical support from CO partnership coordination	- Existing capacity building plans	By December
Organizational capacity assessment of implementing partners	team (Development of required tools; assessment)	- Increased performance	2012
Joint implementation planning	Technical support from CO partnership coordination		
	team (Development of required tools; assessment)		
Advocacy	Technical inputs (Care Norway, Regional gender	- A consolidated document in place	By December
Develop WEP advocacy strategy	advisor, CO SMT, partners)		2012
Implement the advocacy strategy	Technical inputs (Care Norway, Regional gender	- Level of changes in policies & procedures	By the end of
, , ,	advisor, CO SMT, partners)		2013
Gender equality & Male engage	Technical support ECARMU gender advisor	- Changes in household interaction	By December
Revisit approaches used around behavior change & gender equality		- Men will contribute to the women empowerment & not being opponent to it	2012
Scale up male engage across WEP intervention area	Technical backstop of CN, strategic & implementing	- Scale up strategy implemented	By the end of
	partners; ECARMU gender advisor	- Number of men touched & changed	2013
Operationalize GBV referral system in WEP geographical area	Partners	- Issues of GBV are properly addressed & in a good collaboration of involved	Mid 2013
, , , , , ,		partners	

		- Report on effective services	
M&E	Technical support from CN, CO PQLM	A revised M&E system is shared	By December
 Revise M&E system (to capture indicators on new strategies: advocacy, literacy, governance) 			2012
Development of M&E tools	Technical support from CN, CO PQLM	Systematic use of M&E tools	By December 2012
Introduce a data processing & analyzing software	Consultancy	M&E software introduce	By December 2012

Tanzania

What are the most important action steps	What technical inputs/resources would you need	How will you/we know that you have	By when?
	to achieve these action steps?	successfully addressed the challenges?	
 Improving Monitoring & Evaluation Review all performance monitoring indicators to clarify their meaning & what it takes to collect the information related to the same. Improving the quality of the data collected & develop improved tools for collecting quantitative & qualitative data Capacity building DME for WAGE program staff Documenting processes of strategies applied in the program: animation; planning & budgeting processes at the local level; engaging men & boys Refining performance of outcome indicators (data collection tools) 	Technical assistance (internal & external) to strengthen the WAGE II program M&E plan. Technical assistance in documentation of strategies using different methodologies: booklets; video	Data collection tools refined & applied Data base in place for data storage Documented strategies / processes for sharing Consistent data from the field collected in accordance with the M&E plan Good program implementation reports	By November 2012 Within the remaining 18 months (one for the remaining six months & the rest will be done next year)
Develop & finalize strategy / guideline for EMB Learn from experiences in implementing the Burundi Abatangamuco program Learning from other stakeholders in this area through the Men Engage Tanzania Network	Support from the CO Gender Advisor Internal resources for experiential learning & participation in networks Participate in the men engage training in July	- Functional Men Engage Strategy in place - Changing attitude of men towards women empowerment models - Type of support provided by men in relation to women empowerment - Peaceful coexistence in household - Men involved in activities previously left to women - Men support for various women empowerment initiatives	Within the next six months Next year
Improving Partnership	- Technical Support from the Country Office Sub grant	- Vibrant NGOs with functional organizational	Within the next 18 months
 Capacity building of local NGOs especially in the areas of financial management, fundraising (proposal writing) & good governance Strengthening of the partnerships with various CSOs & change from direct implementation to partner staff supportive supervision 	Manager - Internal resources to strengthen areas of growth of the local NGO partners	systems - Strategic, & implementation partners, networks, coalition & government institutions - Coordinated partner organizations	
Capacity Building Strengthen the Capacity of CARE Tanzania & partner staff on advocacy & lobbying Define the level of advocacy agendas from the grassroots to national level	- TA for staff & partners capacity building to strengthen skills & competencies in lobbying & advocacy - TA from CO Policy & Advocacy Coordinator	- At least one advocacy agenda from the grass root level linked to the national level advocacy work - Grass root activism - National networks, & coalitions formed to support advocacy at national level - Policy change	By the end of next quarter (August 2012)

Uganda

Issues What issue (what gap, challenge)	What are the most important action steps	What technical inputs/resources would you need to achieve these action steps?	How will you/we know that you have successfully addressed the challenges?	By when?
Review governance programming (participation, accountability & service delivery) Review the peace building & conflict resolution component Re-strategize livelihood Re-structure/re-strategize engaging men initiative Integrate SRHR & education/literacy in programming Final program evaluation – GLAI	Reviewing staff competencies & needs + hire if need be Formalize partnership & linkages identified during the stakeholders analysis Explore fundraising opportunities for unfunded aspects Renew attention & focus on land right, land conflict/disputes & GBV intervention Conduct periodic conflict analysis Build capacity in Conflict Sensitivity Review NUWEP livelihood strategy & initiatives Strategize integration of SRHR & education in NUWEP	- Consultants/Researchers - Information/Existing research reports - Cross-learning & exposure - New staff (?) - Support from CI WGs - Funds	- Realigned JD & staff on board - Plan & frameworks/strategies developed & implemented - MSC cases - Issues defined membership/MOUs with allies/partners	December 2012 2013
Impact measurement & knowledge management	Review program framework & refine indicators Application & testing of the measurement system Roll-out knowledge management guideline Baseline information (update) Improve documentation of output & outcome	- Expert/consultant in M&E - Funds for an M&E software	A functional system in place Updated Baseline	Dec. 2012 – 2 nd Qtr 2013
CO internal process Roll-out & buy-in of NUWEP CO transition (CPR) Transition to new program framework	Communication & package for visibility to various stakeholders Facilitate & manage the change process e.g. Input in the LRSP process	- SMT buy-in - Cl buy-in		FY2013

ANNEX 4: Summary of final workshop evaluation

Which of the objectives for this workshop were met during the week and what shows it?	Which of your own expectations were not met at the workshop and what shows it?	If you were to organize/ facilitate a similar workshop, what would you do differently?	What suggestions for the content focus of the next annual program workshop in 2013?	Any other comments that you think could be helpful to the workshop facilitators/ organizers	When you leave here, how will you describe this workshop (nature of learning and sharing) that you have been working with?
- All topics are covered, and the action plans and high level of participation show it - Very rich experience sharing - Were able to make new friends	- None - I would have liked to hear more about the MTR results & discuss the findings. Now the overall findings remain a bit unclear to me - How the MTR issues/ recommendations across COs will be followed up/dealt with - Technical discussion on gender, advocacy and partnership was too short and shallow. We were able to share experiences between countries but no in-depth analysis of these topics - A clearer overview of where the WEPs are in terms of implementing the engaging men programs - How to integrate stronger and focused advocacy - Time was not enough to explore all the issues in depth - The discussions were not conclusive No clear indication of the themes to prioritize for the next program period - When we developed action plans, these were based on activities already ongoing in the COs and not necessarily reflecting the needs that were identified - Putting CARE's activities and strategies in perspective of the international context & the current trends in development	- Make it 4 days than 5 days - Have a half day break in the middle of the week - Keep topic on financial management separately - Allow for in-depth discussion and then develop action plans - Allow more group discussion time & use more role plays - A bigger conference room - More discussion time for the negative factors affecting program implementation in the COs	- Take 1 – 2 issues to be discuses for deeper analysis & exchange - Sharing on concrete experiences from COs on men engage, women's empowerment, VSLA, SRH, etc. supported with documentation - Focus on how we work instead of what we do - How can we address the weaknesses/gaps identified through the MTR - Men engage & clear advocacy agenda - Program quality in terms of M&E at outcome & impact - Accountability & partnership - CN to share their advocacy strategy - Capacity building for activists, social movement and political influence - Have representatives from strategic partners attend the workshop - Funding pipelines and CN's strategic interest areas - Ways forward after 2013 (new framework agreement & priorities) - Have the workshop early in 2013 to discuss a new framework agreement with Norad - How new themes as education can be integrated in the WEPs - Organize the workshop where we could have a field visit to interact with impact group members - Rotate the countries where the workshop will be organized	- Great translation - Peer review is nice but it would be nice to get conclusive feedback from the technical advisors - Do not pack to many topics into one week. Focus on less issues and get enough time to discuss them - Make sure the idea cards are well managed and used - Use energizers - Serve warm lunch that is suitable to participants' habit - Use conference room with windows - Try to place participants in hotels that serve meal other than breakfast - Have the workshop in the same place as where participants are staying - Try to finalize task within the workshop hours	- Able to form friendships - Great but exhausting - Too many topics to cover, but very motivated participants. Fantastic eyes & ears presentations - It was a reflective workshop to identify gaps to be addressed - Stepping away from day to day work allowed focused and deeper reflection - The COs are at a different stage in their WEP - Incremental action planning - Well organized workshop but feedback/ exchange cross-country could be improved - Very participatory, based on concrete experience, learning and knowledge sharing workshop - I will say in CARE we do not fear discussing difficult issues in plenum in a participative and transparent way - We were able to meet and get great understanding of the perspective of different donor representatives and stakeholders - Able to get a better understanding of the strategic guidelines of CN

ANNEX 5: Link for workshop files

The files for this workshop, including all presentations, workshop notes, and selected photographs are available to view at the following DropBox link:

https://www.dropbox.com/sh/7c99z0nu9h0grrd/a79AXftHJO

Invitations to join this link were sent to all participants in the workshop. Joining the link (which is free) gives you access to all the files in a downloadable/retrievable format.

The one ground rule is not to delete files, though you can certainly add files to the folder. There are some size limits, so we will only be posting selected photographs since they take up a lot of bytes.

If you have not received an invitation, please communicate with Tom Barton or Selam Hailemichael and we will re-invite you at your preferred e-mail address.