Women's Empowerment:
the way forward to gender equality

Meeting Report
from Cairo Egypt
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1. Background

CARE has achieved more than a decade of progress in addressing gender equality, with a focus on women's and girls' empowerment, as a central platform for addressing poverty reduction. The progression has been made possible through the efforts of many gender champions over the years, and has resulted in the implementation and analysis of five years of the "Strategic Impact Inquiry" on women's empowerment, the endorsement of a CARE International-wide Gender policy, the "I am Powerful" campaign, and the recent launch of CARE's first "Women's Empowerment" report, among others. More than half of CARE country offices have launched long-term programs focusing on women and girls, indicating that a focus on gender equality will be integral to our program work for years to come. Complementing the work in program and policy and advocacy, CARE USA's Global Support Services are in the process of reviewing the Gender Equity and Diversity strategy and bringing new leadership and direction with the hiring of Allison Burden as the Senior Advisor for GED.

To take stock of past successes and lessons, and to articulate a clear path forward for FY11, 26 CARE gender experts met for three days in Cairo Egypt in May 2010. This meeting was endorsed and supported by three divisions in CARE USA: Global Advocacy and External Relations, Global Support Services, and Program Quality and Impact. The meeting objectives focused on:

- Reviewing progress on women's empowerment initiatives to date, including FY10 Women's Empowerment Report;
- Developing common understanding about our language for women's empowerment initiatives, to serve as a foundation for future messages and documents;
- Reviewing lessons from our efforts on using common women's empowerment impact measures to facilitate rolling out global impact measures in FY11
- Assessing progress on our internal organizational efforts to promote gender equity and diversity (GED) and to propose inputs for the GED FY11 workplan.
- Strengthening collaboration efforts across CARE with common workstreams for FY11 and to articulate next steps for communication about gender issues with leadership in CARE.

This report summarizes the main points of discussion and action steps proposed by the participants. The list of participants can be found in Annex A.

2. Reviewing Progress to Date

To both honor and stretch the historical memory of members of the group, the group undertook an exercise to review the timeline of CARE's work in gender over the past 10 (plus) years. Each person took the time to write on index cards their own knowledge of various initiatives that they knew about, dating them with the start date of that initiative, project, learning exercise, or document. The cards included notations from the country offices and RMUs represented as well as initiatives begun at headquarters of any of the three CI members present (CARE USA, CARE Austria, CARE Norway). The group posted the cards up on a long wall of the meeting room and reviewed them one by one. Comments from the group after the exercise reflected the impressive breadth and depth of progress of the initiatives, and also how the initiatives influence each other, creating waves of change. Some participants commented that "a lot of work has been done!" Others noted that there were more cards for the last several years than at the beginning – perhaps that is encouraging as progress (or perhaps loss of organizational memory?). Some noted that there have been struggles as well as achievements. Another summarized by saying that we have had waves of initiatives, and we are learning from past efforts that take us to the next level. The timeline was documented and is shared in Annex B.

3. Examining our Definitions and Language

Over the last several years we have worked to come to a clearer understanding of what we mean by "women's empowerment" through the Strategic Impact Inquiry. Since we are taking time during this meeting to take stock of past experiences we took the time in beginning of this meeting to re-examine and clarify our own assumptions about the definitions for the common terms that we use in CARE. The participants divided into smaller groups to review internal and external definitions for these terms and to report back to the larger group their own understanding of the terms. The groups reviewed the following terms:

A. Women's empowerment
B. Gender equity and diversity
C. Gender in a program context: Defining the continuum of 'gender' programming from "gender blind" to "gender neutral" to "gender sensitive" to "gender transformative"
D. Gender equality and gender equity
E. Engaging men and boys

Women's Empowerment
The small group discussed several definitions for

women's empowerment, including one from the CI Gender Policy, one from a UNFPA document, and the SII framework for women's empowerment. It was noted that part of the difficulty of a common definition is that the word "empowerment" is quite difficult to translate across languages. For example, the phrase "I am Powerful" does not translate into a positive message in Latin America, where culturally this phrase implies "I am exploiting you." So the CARE USA communications staff decided to transpose it into Spanish as "*Soy extraordinaria*" (I am extraordinary). Since we are a multi-lingual organization we must be mindful that what works in English does not work in other languages. Sofia S. recommended we use the phrase:

> *"promoting a fair distribution of power"*

in our programs and in our marketing materials to allow for greater flexibility across contexts and languages.

Some reflections from the larger group in discussions:

- Some said they had stopped using the word "empowerment" in their CARE work since the definition is so hard to pinpoint. For example, CARE Egypt is now using "gender equality" in program discussions.
- Are we using it as shorthand for something that is complex and hard to explain? Perhaps it is useful to use words that are easier to translate and explain, when explaining what are hoping to achieve.
- Our organizational concepts of empowerment have taken years to develop, and build on the CI Programming Principles, with thousands of people participating. We need to learn from and build on those efforts. The SII framework that describes women's empowerment talks about the importance of addressing agency, structure and relations, but we need to find a simpler way of explaining them since these concepts of "agency" structure" and "relations" need more explanation usually for someone from outside CARE
- The CI Gender Policy definitions are in an annex to the main document and may need to be reviewed at some point in the future.

Some definitions for Women's Empowerment

<u>Strategic Impact Inquiry:</u> Empowerment is the sum total of changes needed for a woman to realize her full human rights: the combined effect of changes in her own aspirations and capabilities, the environment that influences or dictates her choices, and the interactions she engages in each day.

<u>CI Gender Policy:</u> Involves awareness-raising, building of self confidence, expansion of choices, increased access to and control over resources and actions to transform the structures and institutions which reinforce and perpetuate gender discrimination and inequality. Empowerment comes from within; women empower themselves. Increase women's power through power to; power with and power from within which focus on utilizing individuals and collective strengths to work towards common goals without coercion or domination.

<u>UNFPA:</u> identifying and redressing power imbalances and giving women more autonomy to manage their own lives.

Gender Equity and Diversity

The small group reporting out on "GED" shared that they found by reviewing the definitions in the CI Gender policy and the CARE USA Gender Policy and Diversity policy, that we are using different definitions in different documents. We need to agree on and then operationalize our definitions.

Part of the issue of reviewing what is a minimum standard for GED in the organization, we discussed accountability mechanisms, which led to a robust discussion. Some points shared:

- Many GED activities and strategies are put into inconsistently across country offices or divisions, because it is based on individuals who interpret and apply it differently. It seems that much of it is elective. Are we forcing people to engage in GED activities or encouraging them to buy in philosophically? Is there some middle ground?
- The CI Gender Policy requires annual reporting including organizational HR policies. But who is responsible – CO's? RMUs? CARE lead members?
- Accountability might also mean more individual responsibility, and so providing people with information and tools that they can take back to their respective contexts and apply it.
- Sequencing reflection and learning: What is the best way to sequence CARE staff members' reflection on the justice issues inherent in gender and diversity work – should we work on programmatic issues first or internal issues first?

When the programming principles were first developed it was clear that they were to be applied both to programs and to the organization.

Why don't we link internal GED with programming more?

Gender Analysis in Programs: a continuum of approaches

In our programs CARE is striving to include a more systematic approach to gender analysis before and during program implementation and evaluation, to more clearly understand the gender dynamics and issues that are specific to that context. Many of our programs include actions and strategies to address those gender inequities and power imbalances. Some projects and programs are more advanced in this work, and some have not come as far. How can we help move our programs towards doing a more systematic effort in this regard? We discussed this continuum, from "gender blind" to "gender transformative" approaches.

- Gender **blind** programming doesn't address what's going on with gender dynamics. It ignores it and does not take it into account. These are projects or activities that have not undertaken any kind of analysis and haven't included any particular activities or strategies about gender norms, unequal power dynamics related to gender, and don't use any gender measures for results.
- In **gender neutral** programming it is acknowledged that women and men may have different needs, and the programs aim to accommodate those different needs. There is no analysis of or strategies to address discrimination, power or inequalities based on gender.
- **Gender sensitive** programming means that the staff and the programs' objectives and strategies acknowledge gender inequities and seek to develop actions that adjust for and compensate for them. These programs try to limit harmful impacts on women but don't necessarily seek to transform the fundamental inequalities in the structures, the norms, the policies that limit choices for some.
- Gender **transformative** programming seeks to overcome the source of gender inequalities by transforming gender relations, structures, systems, norms, policies, attitudes and practices as a way to move towards gender equality.

Gender Equality and gender equity

Defined by the group as "equality between people of different sexes and sexual orientation, refers to the equal enjoyment of social, economic, and political resources and rewards." The important thing to note

is that while people have similarities and differences, they are still valued equally. Equality is not the same as equity and should not be used as synonyms. Equity refers to the process of setting into place systems that compensate for historical and social disadvantages that prevent men and women from operating on a level playing field. The CI Gender policy defines equity as "justice in the distribution of resources, benefits and responsibilities between women and men, boys and girls."
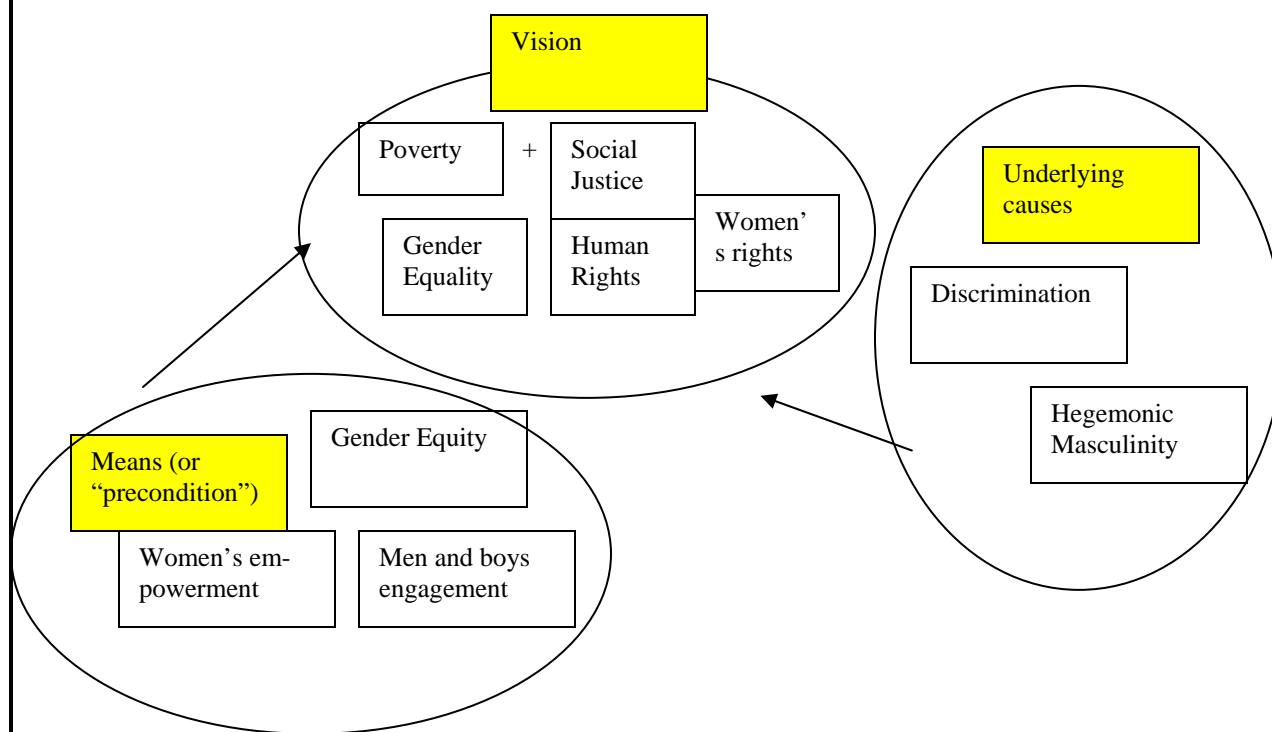
Engaging Men and Boys

The group that presented a definition for engaging men and boys noted that when we talk about men and boys we are talking about transforming relationships. We need to be careful in how we present this concept – it's important to reflect the transformation of social roles and expectations that allow everyone to reach their full human development potential. Others felt that working with men and boys should only be for the sole purpose of empowering women. Some noted as well that we should not use the phrase "engaging men and boys" since strategies and goals for engaging men will be different than that of engaging boys. We need age-appropriate approaches, and need to be cautious about using shorthand to explain complex ideas.

Others noted that there is a gap between our marketing of messages about working with women and girls, and our programming. Our programs are increasingly linking with social change movements, in which there is a diversity of opinion on engaging men and boys. Some feel that it is taking already limited resources that could go to women and girls. Of course there are various models of working with men and boys, and some encourage a more positive framework that focuses on strengths and commitment that men bring to the work.

One recommendation was to work on articulating with more clarity what is our purpose of working with men and boys.

Grete from CARE Norway noted that CARE's mission is poverty alleviation and social justice. One of the underlying causes of poverty we have identified is gender inequality. We have seen from analysis that historically women have been marginalized in all societies throughout the world. That is why we need to empower women. But that's not enough. We have also learned that we need to work with men and boys. We need them on board to achieve women's empowerment. We also see them as benefactors of gender equality. Work with men and boys in order to achieve gender equality, they are also a part of gender equality.

The group also worked on mapping the concepts as above in a Venn Diagram in order to clarify the relationship of each concept to each other which looked like this:

Vision

Poverty + Social Justice

Gender Equality

Human Rights

Women's rights

Underlying causes

Discrimination

Hegemonic Masculinity

Means (or "precondition")

Gender Equity

Women's empowerment

Men and boys engagement

Other thoughts that emerged from this mapping exercise:

1. We need a more nuanced, detailed understanding of what we mean by "Poverty" since this is CARE's ultimate goal.
2. Although the wording of the Theory of Change may need some modification, we acknowledge that it contains important pieces.
3. When we talk about WE, we should use the existing definition as described in the SII documents.
4. Yet, girls are not currently included in the definition of WE so we need to work at defining that (girls' empowerment).
5. Gender equality is not the same as Gender Equity so let's make it clear what the difference is.
6. We see seeing equality as a part of poverty alleviation. They are interlinked and intertwined, hard to tease apart.
7. Human rights are women's rights. We need to message more about human rights and women's rights in particular.
8. The issue of men and boys is still under debate. The purpose of working with men and boys is not clear. Some say the purpose is women's empowerment but not everyone agrees. We don't have consensus. We actually know less about the is-

sue of men and boys because we have less experience studying the issues and implementing the strategies and learning from them. We need more of that.
9. We need to be cautious about lumping men with boys as if they are one category. They are not, just as women and girls are not one category.
10. We have agreed to take out "strategies" from the concept map but the word "means" is understood by this group but we need a better word. What about "Precondition"? Perhaps we could recommend calling WE a "precondition" to achieving gender equality.
11. Our understanding of our framework of agency-structure-relation is quite valuable. No one is suggesting to discard that. We need to continue to work at all three of these levels. We need to be open to finding language to relate these concepts in ways that everyone understands, in achieving rights and advancing social justice.
12. We need processes in the next year to help map out and explain these concepts and their relationships, and convert them into simple messages to explain this to governments, donors, partners, beneficiaries, colleagues and ourselves internally.

Speed Phrasing
As a way of discovering the diversity of opinion in the room on how we are understanding and programming these concepts, we spent time sharing our opinions on the following statements:

1.Diversity means more than gender and race.

2.CARE is a women's organization. Why or why not?

3. Gender equity is a strategy, not a goal.

4.To achieve our mission we need stronger partnerships with women's and feminists movements.

5.CARE is seen as a leader in women's empowerment.

6.According to our Theory of Change, we cannot achieve our mission without the active engagement of women and girls.

7.Engaging mend and boys is a critical part of women's empowerment.

8.CARE can achieve women's empowerment without directly working with women.

The valuable component of this exercise is to explain to our peers how we understand some of what is often said or implied about our work, and to articulate what we believe about it. We also need to hear what others in the organization are saying, so it's important to listen carefully to the people in this room and then to the people who are stakeholders in this dialogue.

4. Giving guidance on how to use language to explain our work

What guidance can we give to people who are not part of these conversations, to explain these concepts and issues? We each have interactions with our peers internally and with people external to CARE. We need to be able to talk about these concepts in concrete ways that make sense to people. As an exercise to help explain the nuances of the key messages that we make, we asked small groups to provide feedback and additional information to help guide the way these messages are given to audiences. Each of the messages was derived from the report entitled "Strong Women, Strong Communities," the first Women's Empowerment report produced in May 2010.

1. Measuring empowerment is complex but vital. The challenge is to use measurements that are simple to use, but measure progress and are useful to capture the changes that women value throughout their life.
    Changed to:

Assessing empowerment is (complex but) vital and achievable. It involves identifying the changes that women value throughout their lives and measuring progress towards them.

Additional pointers and helpful hints from the group:

- Measuring women's empowerment isn't easy, but we need to do it. Need to choose something simple that is measurable.
- If you put caveats too much in the foreground, it's a turn off to readers. Want to reflect that it's complex, yet achievable.
- Wanted the message to be more specific. Choose an indicator that reflects progress towards all spheres. Example of indicator from Ethiopia: working with pastoralist girls on education, health, income generation. In order to capture the impact of these activities on the girls itself, decrease of FGC was used as an indicator. Would show that they improved in health, social status, are going to school more, and their families are doing better in their livelihoods.
- Should reflect women's own perceptions in indicators and measuring them as well. But don't mean that we necessarily use participatory processes to choose project indicators.
- Recommend that we remove words like "indicator" out of our public messages and use words like "Assessing, analyzing, understanding" which are more important than measuring.

2. No one can achieve success alone. CARE's work to achieve gender equality focuses on linkages and networks at local and national and international levels. Collective action by groups working together is an effective strategy not only for the individual benefit of those participating, but also contribute to structural change.
    Recommendations:
    Gender equality will effectively be achieved through its partnership, linkage, networking & collective action at local and national and international levels.
    Additional pointers and helpful hints from the group:
    How can we include nuance in messaging about how we are learning from our partners, that the interaction is not one way?
    The concept of "movements" is missing – can we include some language on social move-

ments?
Implications for this for program staff: How can we build CARE's skills/capacities to better support partners? Also, how can CARE generate funds for partners who are part of global movements?
Perhaps we can modify it to "gender equity objectives that CARE can achieve", not "CARE's gender equity objectives" (do they belong to CARE?)
Perhaps we can turn the phrase around to say: *Partnership, linkage, networking & collectives action at local and national and international levels will be critical for achieving gender equality.*

3. CARE has found that staff attitudes are key to success in women's empowerment. Each person is affected by cultural and social norms that shape behaviors, attitudes and values, and those inevitability influence his or her work. Thus, it is critical for CARE to invest significantly in staff training and reflection on gender equality.
   Suggested modification: *Staff attitudes are key to success in women's empowerment. Each person is affected by cultural and social norms that shape behaviors, attitudes and values. This influences his or her work. It is therefore critical to continue to invest in and upgrade skills and capacities of staff and provide time and means for reflection on gender equality.*

Additional pointers and helpful hints from the group:
- We need to strongly advocate for taking the time and resources to properly invest in the process of training and critical reflection for staff. We need to use evidence of positive return on the investment, of how this has improved the outcomes of our programs. One such example is the report "Meeting Challenges, Seeding Change: Integrating Gender and Sexuality into Maternal and Newborn Health Programming" which can be found on CARE USA's website at www.care.org/reprohealth.
- We need more mentoring in COs and regional management units, in divisions in lead CARE agencies, to develop leaders in how to support staff in this. It's critical to look at practical ways that gender is affecting staff in their personal lives.
- Could be rephrased to be less clumsy,

such as: *In order to work effectively on women's empowerment, staff need support to enable them to reflect on challenges and opportunities in cultural and social norms, which must be addressed in order for change to take place.*

4. We need to intentionally engage men and boys as equal partners to challenge unequal distributions of power and expectations that limit our potential. It takes everyone to achieve social change.
   Recommended modifications:
   *It takes both men and women to achieve social change. We need to encourage men and boys to engage as equal partners with women and girls to challenge power imbalances that limit **our** potential to achieve GENDER Equality/fully enjoy our rights and live with dignity.*

   Additional pointers and helpful hints from the group:
   Needs more clarity: What does it mean to intentionally engage men and boys, what are strategies? Need to disaggregate men from boys, these are different groups.
   The sentence structure is not clear – is this about "us" and "we" (CARE?) or third person.
   The phrase "power imbalances" is a huge concept, not sure how well people understand it.
   Can we change it to say "limits human potential" instead of "our potential?" How do we say it so that everyone benefits?

5. Senior level political commitment in any organization is important to ensure accountability and sustainability, and ultimately to success of a program that aims for gender equality as a goal.

   This group focused on the identifying the audience more so than changing the statement and implications for us as CARE:

   For internal audiences:
   - This statement has implications about how we do our work; we need to invest more in training and mentoring people on gender issues. Although we have public statements about how we need to support staff capacities and skills, along with attitudes and behaviors, this is not currently being budgeted. We recommend a way to bring this message to the EMT and SLT,

with a presentation on what commitment means for ensuring organizational priorities. Set concrete priorities, and demonstrate commitment and being realistic in the messaging and also clear on what the implications are for resources. We may need to be creative about resources which are limited. Because of limited resources, things don't always move forward quickly. Be more innovative with limited resources and perhaps collaborate across divisions, regions, etc.

- For external audiences, which includes USG, other government donors, and private sector donors: Articulate a clear reason for senior commitment, along with resources for staff capacity, and include these in the budgets. Encourage them to support work we're doing.

5. Implications for Global WE Impact Measurement Initiative

There was also a session that shared the participants experiences and inputs to inform the initiative being planned to deepen CARE's ability to measure it's impact on women's empowerment. The participants came up with a variety of recommendations for the initiatives:

- Integration and alignment with existing systems, experiences and knowledge
- Building organizational capacity across CIMs and RMU to support COs.
- Creation of appropriate structures and resources to support the process
- Focus on technical components around data collection, management and analysis.
- Emphasis need for related knowledge and learning systems

Processes
- Enable external views and input into system.
- Integration with what's already there and 'organic' and not to impose things.
- Building understanding and buy-in at the CIM, RMU and CO levels.
- Use pilot process to understand how to interlock with existing measurement systems (project M&E, framework agreements)

Structures
- Create appropriate organizational structures that allow IM to be carried forward.

- Create space for capacity and technical skills development across different levels.
- Create a resource team to support DRD PQs.

Resources
- Resource mobilization – calculate and insert costs for IM system in proposals
- Increase in number of dedicated staff to conduct work
- Have a point person in CO to carry this forward such as DM&E Adviser at Program Level
- Resources (staff, system, TA) need for capacity strengthened informed by capacity assessment (including money).

Capacity Building
- Create network of CO support systems through building capacity of DRD's PQ and relevant CIM's staff.
- Develop recommendations (do's & don'ts) to CIM on how to do programmatic Impact Measurement
- Develop clear and simple guidance materials for skill development in
- data collection & analysis
- research design data management
- Analysis, communications, and dissemination

Technical Issues
- Emphasis the need for a knowledge management system
- Implement a good data management system (skills, technical, and resources).
- Look at ways to integrate the women's empowerment indicators and sectoral indicators.

6. CI Gender Network and CI Gender Policy

Christina Stummer, Program Director from CARE Austria and Grete Benjaminsen, CARE Norway, presented to the group the collaborative work of the CI Gender Network (CIGN) which started in 2007, with 2 focal points from each CI member participating. The purpose of this network was to find better ways to coordinate among CI members on gender policies, requirements and recommendations. The objectives of the CIGN include:

(i)   To effectively promote and support the implementation of the CI Gender Policy
(ii)   To facilitate reporting mechanisms on CI Gender Policy implementing results

(iii) To enhance CI coordination undertaking joint CI initiatives on gender equality including gender equality and emergencies (please note there is already a CI level position who is a Senior Advisor for Gender in Emergencies, based in Geneva).

(iv) To create a venue for regular sharing of information, experience and tools on implementing gender equality – working groups currently active in reviewing information on: (1) the reporting mechanism for the CI gender policy, (2) a communication plan; (3) TOR and membership of the CIGN; (4) harmonization of tools; (5) global branding; (6) knowledge sharing and management. Any CO or region can join these working groups

(v) To explore as a long-term goal the concept of a "centre of excellence"

Christina and Grete also presented the CARE International Gender Policy, which was approved in January 2009. This policy outlines CARE International's commitments to promote gender equality for both within our organization and in efforts to sustain program quality. CI lead members together with CARE Member Partners are responsible for the organizational and programmatic components of the policy and to provide technical and financial resources at HQ, RMU and CO level. The CI Board asked for presentations regarding CI wide implementation annually. However due to the varied nature of the way each of the CI members is structured and functions, there is recognition that there will have to be flexibility in reporting – but there does need to be some sort of accountability mechanism within CI. The first report is due by July 2011. The monitoring systems are not yet in place to systematically collect data. The Ubora system is only with CARE USA countries, but the new "Directory" will be all of CI.

While the CIGN is made up officially of CI members only, it is recognized that CO-level and RMU etc. input is very valuable, and it's important to link with existing program quality and program support groups for input.

Feedback to CIGN on specific questions by small groups:

1. **How can CIGN support you to implement the CI Gender policy?**
   - Happy to see point J in the CI Gender

Policy which says ensuring adequate funding to realize commitments. If point J was carried out, the rest of it would be manageable. COs have own gender policy which is necessary due to specific contexts. This can be used to update CO policies.
- If it could help develop internal accountability mechanism this would be beneficial
- Update gender gap analysis: Need step by step guidelines for COs for planning with gap analysis, monitoring

2. **How can we make this policy as widely known as possible?**
   - Getting out policy through PQ groups that already exists. Let people know that the policy is already exists but that they can be contextualized
   - Difference between communicating a policy and suggestions as to how it can be operationalized. Have a practical checklist, specific action steps people can take to operationalize strategy
   - Almises no longer exists, everything incorporated in "blue book" in CARE USA.
   The units that we all work with should know they exist. One venue could be town hall meetings, brown bags, at staff orientation

3. **How can CIGN support to establish a CI internal knowledge management system?**
   - Should concentrate on existing systems and ways of knowledge sharing.
   - Most COs don't have access to huge web platforms, would be good to have a gender contact person in each CO who provides staff with updates and necessary knowledge.
   Make use of existing quarterly, annual, periodical information sharing sessions.

4. **How can we do a better job of providing a harmonized set of tools for CO's?**
   - There are so many great tools for gender analysis. They need to be available to staff. Sharing cross CO and making sure they are available but also making sure staff has the capacity to use them well and undertake in depth analysis. Burundi may use tools with men and women in the community but don't have an official gender analysis exercise. Discuss why we're using them, making sure lessons from different COs are shared across the or-

ganization. Another example is the manual called "Social analysis and action."

- Besides coordinating within and across CARE Cos, we need to more systematically work with other women's organizations or local organizations who have already developed locally contextualized tools.
- Language is an obstacle. Hard to find good guidelines in another language besides English. Make the effort to translate good documents

7. Gender Equity and Diversity in CARE

Stephanie Hudson led the discussion with a short history of GED efforts in CARE USA. She clarified that CARE USA has a "Gender Policy" and a "Diversity Policy" as part of the CARE USA employee handbook; these are 2 separate documents to date. The Gender policy was developed in 1993; she reviewed the waves of progress in advancing GED principles and some challenges regarding resistance to change within the organization since that date. There have been many passionate people who brought enthusiasm for change at CARE, and we need to applaud those pioneers. She noted that at one point it was strongly encouraged for staff to participate in GED training and mandatory for all managers to complete the "Managing for Diversity" training. Since 2005, in the course of the last 5 years, no GED advisor has remained in the position more than 15 months. While CARE USA has a series of workshops available. in comparison with other organizations like Oxfam or even ECB, our mandatory orientation to gender concepts is not strong. We need to close the gap between program and organizational mandate for GED.

Based on questions from Stephanie, the group made the following recommendations for follow up:

Leadership

The draft GED strategy calls for a review by and endorsement from the EMT and SLT. How would your group advise the GED core team in engaging with the EMT & SLT and gaining approval of the proposed strategy?

- Give positive messages about country on current state
- Cite industry trends such as aid effectiveness, donor interest,
- Anticipate increase scrutiny due to "I am Powerful" campaign-donor interest if you say you're all about women, show us how you walk the walk internally as well
- Find ways to encourage Helene Gayle. Find support from CI (POC) to specifically talk to

Helene. Get the CDs and RDs to provide encouragement as well.

Management and Accountability

Accountability mechanisms have been the most challenging aspect of the GED framework. In light of the organizational shift and emphasis on indicators, metrics & measurements (i.e. Program Impact and UBORA), what are some concrete actions the GED core team should consider in overcoming this challenge?

- Too much focus on "how" and not enough "who." Should be another column about who's going to be accountable.
- We need to find accountability mechanisms for Cos on GED. CDs often set the tone and culture for the organization by country, but senior management also. Could we include questions on interview panels about past history and experiences with GED work?

Communications & Learning

Over the past ten (10) years a great deal of organizational investment has been made in developing a learning organization with respect to GED. However, organizational structures, systems and processes are not adequate in facilitating sustained learning among staff. What are some innovate ways the GED core team should consider in overcoming these barriers?

- Comprehensive and ambitious strategy. Who will be responsible and who will help COs be implement/operationalized
- GED advisor action plan integrate in UBORA, AOP planning process (Fy11)
- Include orientation for all hires in actions
- Institutional recognition for leaders who champion GED at all levels (management and staff)

Trust & Integration

CARE has rallied around the idea of increasing trust within the organization, particularly as it relates to decision making. Where CARE struggles is in our conversations around power structures. Yes, we are trying to make sure every voice is "at the table," but are we listening to every voice that comes to the table? Are we inviting the appropriate voices to the table?

- Guidance/guidelines need to be provided on "how to"
- Work needs to be done in group decision making. Are we really listening to all voices? Collective decision making process where

we listen to all voices. It's about decisions that have already been made
- Organizational feedback through APAA
- GED in recruitment and orientation
- Responsibility and authority/decision making
- Shared leadership (trainings for managers in order to have an enabling environment)

Talent Management

Over the past 10 years CARE has focused on representation. We have made significant strides in paying attention to our gender balance. As an organization we struggled internally with representation. We are challenged in our ability to attract qualified diverse candidates and retain high performers. As the core GED works with HR in assessing recruitment practices and Talent Management strategy, how do we ensure processes reflect GED principles without sacrificing the quality of the hire?

- The group felt that it's important to ensure synergies between 5 strategic areas. Talked about accountability and how it has to happen on all levels, that it's modeled at all levels
- Current talent management process should be reconsidered
  - Lack of transparency
  - Many don't know how it works
  - Highly subjective process. Scoring varies on different elements
  - Many managers go through talent management process and never discuss it with direct reports.
  - Critique should be that not enough resources have been put into talent management. Do we say scrap current talent management process, or work on changing it?
  - Professional development plan vs. talent management for the organization. Perhaps the matrix isn't about individual performance, perhaps it's about CARE/ succession planning. People are not clear with the distinction
  - The group felt that we have gone backwards in hiring more women in COs in senior level position.
- Work load (travel and work load is a problem); standardize work/life incentives
- Mobility in the organization remains limited for national staff

o National staff very long and difficult process to move up in positions
o Depends on leadership team in CO

8. Women's Empowerment Report

- **Objectives of the session:**
  1. Outlining the process for developing the first annual report on Women's Empowerment
  2. Brainstorming 'uses' of the report: developing by-products from the report with information and key messages tailored towards specific audiences and contexts.
  3. Suggestions and recommendations for the next report on Women and Girls empowerment – process, structure and content.

The need for an organizational report on Women and Girls empowerment:

There are exciting developments in the U.S. and global policy environment highlighting the importance of women's empowerment to poverty alleviation. There is a global momentum recognizing empowerment of women and girls as a key issue.

NGOs, international organizations and think tanks are producing reports on 'why women' but not enough explain 'how.' CARE, through the years we have invested in our Strategic Impact Inquiry on Women's Empowerment, which analyzed dozens of projects aimed at alleviating poverty through women's empowerment, has identified approaches that effectively empower women.

It is envisaged that an organizational report will be produced on a regular basis (annual, once in two years) focusing on specific themes such as Access Africa, Maternal Health, Girls Leadership, Hunger, Climate Change, GBV etc. We need to apply lessons learned from the process of developing the first report to the upcoming reports.

Translation into other languages is currently proposed. LACRMU has kindly agreed and offered to translate the first report into Spanish. Spanish version should be available shortly.

The team and the partners:

- PQI (Program Impact Unit); Policy and Advocacy Unit; Communications unit as the main coordinators of the report
- Steering Committee was established to elicit par-

ticipation from experienced staff across the organiza- tion from Country Offices, Regional Management Units (RMUs), other CI members, PQI Technical Units including signature program representatives and GAER (Global Advocacy and External Relations) division

Challenges and constraints in developing the first report:

- This is the first time CARE has put out a report aimed at reinforcing our position as a lead INGO dedicated to women and girl's empowerment. We are learning as we go.

- Women's empowerment as an issue is broad and cross-cutting. Many sectors are enthusiastically contributing examples, which contributed to the report's richness. In the short-term, gathering evidence and synthesizing required more time than originally anticipated. Also, several projects on the ground were not set up to measure the impact on women's indicators as outlined in the global indicators framework. It was thus difficult to get 'impact data' from the field.

- Relatively short timeframe and modest resources (financial and human) to develop this type of a report.

- Absence of a gender expert/advisor within CARE when the report was produced (majority of FY 10 timeframe) limited the ability to bring in high-level women's empowerment expertise and knowl- edge.

- Defining the audience for the report at a global level that would cater to various contexts, audi- ences and needs was a challenge. It was thus decided that the first report will be broad and ge- neric in nature providing CARE's thinking, analy- sis and examples from the field.

How to use the report?

- Since it was deliberately decided to keep the first report more broad and generic, it was also recog- nized that different audience will need specific and different content. For example, academic institutions, sister NGOs and some other partners may be interested in knowing more about the methodology and rigor of the Strategic Impact Inquiry that some other audiences such as some individual donors etc may not be interested.

- It is thus recommended to develop further spe- cific by- products at the CO level and global level; and for different audiences such as peer NGOs, institutional donors, individual donors, founda- tions etc. that will build on the content and the

recommendations provided in the main report – ie policy recommendations, articulation of CARE's Women's Empowerment model, examples from the field.

- An example of how a specific by product was developed to cater to a specific context and audi- ence is the Policy Brief on Women and girls em- powerment that was developed in May 2010.

Developing the Policy brief on women and girls empowerment for the US Government

An example of developing an additional by product based on the main report is the Policy Brief devel- oped specifically for the US Government – both the congressional staff as well as the Administration. This policy brief was developed specifically for the NCC (National Conference and Celebration) – CARE's annual advocacy conference in the US. The policy brief was developed as the Policy Advocacy Unit recognized the need to have one document with clear and common call for action for one Govern- ment.

Policy brief took the specific recommendations from the main WE report and used them to frame specific recommendations for US Government, clearly articu- lating call for action i.e. what should the USG do to advance the issue of women and girls empowerment. The policy brief also highlighted the project examples from the WE report and reiterated the "how to" pro- gram and mainstream issues of women's empower- ment and gender.

Facilitated discussion on the following themes:

Possible uses of the report by the participants and recommendations for future reports:

- All of the participants thought this first report is a great and a useful attempt to define and articulate CARE's understanding and approach to Women and Girls's empowerment. Several participants re- marked, "at least we have a publication for the exter- nal world that talks about our work", this definitely helps to establish CARE's position in the field and a leader in the field. Several participants also felt strongly that CARE should develop a 'position paper' on Women and Girls empowerment based on the report. The position paper will be useful as a guide for policy advocacy, establishing strategic partner- ships and developing key communication messages.

- There is a need to develop regional and national reports based on the global ones to address specific context, themes and audiences for example, a report on women in the Middle East might look very differ-

ent than women in the Balkans; or a report with a regional breakdown which would highlight the different contexts. This could be used for an internal advocacy tool with local governments

- There is a need to review the themes, content and the structure of the report. There was a lively discussion on whether the next report should be more global in nature and not focus too much on CARE – for example, 'state of the women around world', 'because I am a girl – prototype' etc that has combination of global statistics, analysis backed by program examples. This would of course require organizational commitment, huge financial and human resources and time. There was a strong push to include more stats and analysis at the global and regional levels

- Men and boys is suggested as a possible theme for one of the future report.

- One of the suggestions was to invite program examples or advocacy examples to highlight women's movements and other organizations. This could focus on what can we, NGOs, learn from the social movements and how best can we possibly collaborate with them.

- Another suggestion was to outline the concepts and definitions related to women and girls' empowerment in the next report.

- Several participants raised the question whether producing such a report annually is too ambitious! How will we collect data annually from the COs for the report? Is producing the report once in two years more possible and pragmatic? Translations into other languages is important and so is its dissemination across CARE and globally to other partners. It may also be useful to develop a one-pager on "how to use the report".

- For next reports: make the themes more focused, develop a conceptual framework and parameters early on, establish a working group and steering committee that can provide input and feedback in finalizing the framework and then help collect evidence based on the framework. We will also need to establish systems for collecting the data – maybe provide the framework to the COs for evidence generation.

- It was recommended to retain the focus of the report as being 'generic' while developing 'specific' by products for various contexts and audiences.

9. Recommendations and Next Steps

There is obviously much talent for and passion about more commitment, effort and attention for gender in the organization and especially in this room. But many in the room also feel that the demand for greater attention and commitment (especially in resources) needs to be taken to the senior-most levels of the organization – in CARE USA and other CI members. This group suggested drafting a short and pithy set of messages for the senior level members of CUSA and other CIM, based on the outputs of this meeting.

How to stay engaged and involved as the work progresses: Doris presented the history of how the Gender Unit came be established this last year in CARE USA, and the discussions within CARE about the various demands for Gender support and leadership. Jean Michel Vigreux worked with a small group of volunteers to draft the JD and help craft the plan for the unit, including a broader network of people who are contributing to a larger gender agenda globally, since no one unit or team has either the capacity or the mandate to be everything or do everything about gender. There are many gender champions and excellent work going on globally and we need to find a way to support that and learn from it.

Doris presented the proposed CARE USA Gender Working Group theme teams for FY11:
1. CI Gender Policy – and Tools Harmonization [this will help populate the CIGN working groups]
2. Gender Policy Advocacy and Communications
3. GBV Program Support
4. Women's Empowerment measures
5. Gender Equity and Diversity internal organizational policies and procedures
6. Also, everyone will be invited to join the information sharing list serve, which will be facilitated by the Gender unit.

The larger group asked questions about the GWG structure, asking how the theme teams will be held accountable. Each theme team will have a facilitator who will work on a specific TOR, and report on the progress on those to the larger GWG quarterly. These will be presented to the SLT quarterly as well. Each member of the group will have permission from supervisors to participate, and it will be a part of the APAA process for each individual.

In the last session, the larger group made specific recommendations for action steps, with a communication plan for it for the outcomes of the meeting. The groups chose to provide action steps for two themes for the meeting:

1. Conceptual Mapping
   - The terms "Girls empowerment" and "men and boys" are terms that are thrown around in conversation without understanding what they really mean. We need to all come to some clearer understanding and agreement on what we mean by them.
   - Many of us feel that they are more than strategies to attain something else. By saying that it's a complex relationship only muddies the water. We need to tease out how they are related. In the end we could not all agree on a single conceptual map that explain where and how women's empowerment and engaging men and boys fits into the puzzle.

- We clearly need to articulate what the purpose of our work in struggling with gender is – is it for the purpose of women's empowerment? For human development (i.e. achieving each person's full development potential)? For poverty reduction? When is it instrumentalist (using someone's energy and outputs for someone else's achievements rather than one's own)? Are instrumentalist approaches ever ethically OK?
- We did agree that gender equality is part of our long-term vision, as a part of poverty and social justice.

There was a lively discussion about the first recommendation from the small group (below). Some asked: Are we saying that poverty is about more than income for poor people? Some pointed out that of our global indicators, only one was about income. One person noted that social injustice and poverty are not mutually exclusive.

Concept mapping-Next Steps Recommendations

Implications or Action Steps	Communication Plan (what information to whom)	Decisions that are needed for actions to happen	Resources that are needed	Who will be responsible?
A broader definition of poverty – needs to be discussed at a broader level in the organization to avoid instrumentalising women.	The need to do this needs to be brought to the EMT and request that they put together a group, resources and process; CI members	The EMT needs to accept that there is a need for this and resource	Staff time and money, get someone to do a literature review and review of internal documents; money to do phone calls and meetings	EMT to delegate Doris or Maliha responsible for coordinating the deliverables of this current meeting with 4-5 people as backup spokespeople
Elaborate Theory of Change (assumptions, domains) and socialize it	Same as above as definition of poverty must be done alongside or as part of ToC	As above	Staff time and money;	As above
Creating coherence in messages amongst all related areas for the organization (eg. GED, women's programming, women's platform, policy and advocacy	Once we get a final product of the concept map and associated definitions ; take this to respective EMT members understand it; CI members; CIGN	CI needs to ratify the overall concept map and definitions; Map needs to be refined with some other stakeholders	Communication costs; staff time; meeting costs	Doris with the help of the gender network
	For all of the above: Maliha and Doris inform JMV Madhu Kate inform Cathy Woolard Stephanie informs Patrick Solomon; -Have follow up conversation with CI			

2. Men and Boys Recommendations
Next steps/ actions

- Need definition clarity on what we mean by "engaging men and boys," what is the purpose/ justification and based on what evidence?
- We need better articulation of what are the strategies (promising practices?) for both (a) men and (b) boys (which are probably different from each other). Also, we need to articulate where / how does it fit within the our strategies for WE/Gender Equality?
- Focus on documentation and dissemination: search out existing documentation on approaches / models / frameworks from CARE or elsewhere
- Knowledge / learning: What are the gaps in our knowledge about men and boys? What studies are we conducting? What are the lessons from these?
- Engaging with movements: Men Engage Alliance – (5 sub-regional groups). How can COs and regions connect with this alliance? We (CARE USA/ CARE Norway) have approached the network with our application for membership which might take a while to process. We need to build broad organizational awareness about what the alliance is about and push for greater engagement.
- Establish a CARE-wide Network: re-establish existing network for knowledge / experience sharing (create a working group with TOR)
- What are the indicators: how do we measure this work? What are some promising ways of measuring change?

Men and Boys decisions that are needed:
- The commitment that is needed to move this forward is already stated in the CI Gender Policy, and recommended by the SII. However we need champions across CARE International.

Men and Boys Communication Plan:
- Need a simple and clear articulation of how engaging with men and boys contributes to WE. Action points need to be communicated
- Tailored to different audiences

M*en and Boys Resources Needed*
- Focal point with funded mandate (John Crownover from NWB and Grete Benjaminsen volunteered)
- TA support – strategy development, training
- Studies
- Gender analysis

Note:

Annexes to this report are shown on the following pages:

Annex A. Participants

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Annex B. Timeline mapping exercise on gender initiatives across the CARE world

1998

- NORAD strengthening women's rights in Bosnia

- Livelihood framework, through gender analysis

- Gender Equity and Diversity - began to look at how we function and operate as an organization. more consistent in program, do we model that internally as how we work in an org. It started prior to 1999, but at a conference in 1999 we laid out GED which is what most people are familiar with now. Data analysis defined GED for CARE, the vision of where to go internally and start framework that we currently have representation, trust, and learning.

- In Egypt, service delivery, school building project-transformed into education quality and community involvement. Credit built in program is background for education work in Egypt. Village Savings and Loans solidarity groups started before 2000. Some Country offices like Malawi started to adapt a model that was developed in Egypt. The model focused around working with women, looking at economic empowerment, expanding that to look at social empowerment, what it meant for women. This was global and CO-level.

2000

- Rights-Based Approach reference group started

- In Bosnia, CARE started to focus on women's rights. Gender equality policy passed as part of legal framework in Bosnia. How to translate national policy to have meaning at local level. Work around human trafficking focused on women started at that time

2001

- In Latin America, social equity teams in each country focused on internal issues and those that were reducing maternal mortality began a strong women's rights focus especially in the Andean countries.

2002

- Nepal report on social inclusiveness resulted from CARE Atlanta initiative. CARE Nepal adopted new framework.

2003

- Resource materials called "Gender building blocks" produced and disseminated by Elisa Martinez

- Gender gap analysis initiated in some COs.

- CARE UK 1st partnership RBA tools for empowerment analysis

- In Bosnia: Began work on preventing human trafficking and GBV

- ARMU- women and girls at the center of all its work. Every AOP would have 1 objective related to women and girls. Made explicit focus on women and girls

    Andean countries. Education programs started gluing together into regional reflection, looking exclusively at quality of education and focusing on girls. Much more energy

2004

- Inner Spaces, Outer Faces Initiative funded by the Ford Foundation, designed to help CARE SRH program staff look internally at gender biases, how they influence the way we design our programs. The training and experimentation for gender transformative initiatives started in India and Vietnam, lots of global learning from this. Follow up grant from Ford Foundation for last 3 yrs in health program. Final report on results of initiating gender equality into MH programming are available in hard copy on the resource table.

- SRH team in Atlanta started the Innovations Projects which were focused on 4 countries' efforts to implement gender and sexuality into health programs. These included explicit ways for staff to use reflective practice and began using gender measures in M&E.

    1st SII meeting that developed framework

2005

- Women + girls checklist and code of practice-global initiative following sphere part of 11 NGOs 200 NGOs signed onto .Signed onto as CI.

CARE USA worked to develop checklist specifically focusing on women and girls in HIV and AIDS

- Influencing PEPFAR. USG biggest investment on HIV and AIDS-policies that didn't speak to RBA and work CARE was doing. Anti prostitution, abstinence policy. Worked with USG to influence PEPFAR. Current phase of PEPFAR puts women and girls in center of advocacy

- Performance management SII in LAC-systematically looking art all designs and evaluations to see extent to which focus on gender equality. Data since then on work in LAC

- Great lakes advocacy group- Burundi DCR, Uganda Rwanda working together around sexual and GBV grass roots advocates building advocates at grass roots level. Almost finished and had Norway funding. Now initiative- The DRC Congo is no longer part for various reasons, difficult programming. Also changed still very country focused and trying to learn from regional experience. Always had **challenges** linking to international advocacy around that. Build strong foundations, not try to do all things at once wasn't happening effectively. Learned need to focus, need to be realistic in what we can achieve. In second phase took a step back and building capacity at local level. In longer run scale up and focus on regional advocacy and global advocacy. Kevin one of original founding fathers

2006

- CI gender network-founded after conference in Uganda, realized be necessary in order to avoid different CI members with different standards and approaches, come up with network representing focus points for gender from different CI members, policy and standards throughout the organization. Working on this and how to implement those. In 2006 this group came together, still working on this currently. Not finalized.

- SII meeting Oslo- really important moment, a number of CI members first look at scale of what SII had been and started to process meeting

- 2006-2008 SII phases 2 and 3-same

- CARPE Momento meeting -Uganda Kevin hosted-put key issues of women and girls on CARE'S map bringing other CI members GBV as an issue put on map at this meeting

- Integrating SII findings-Cross continental program including work in Uganda Burundi and Nepal women in conflict holistic approach economic empowerment while also working to social interventions advocacy and structure levels. Includes learning component even for partners to meet on annual basis and exchange learning. Lots of similarities.

- Balkans engaging men and boys-GBV and gender equality started to look at men and boys around this time. Situational assessment that looked at sexual and reproductive health issues which brought up men and boys. In 2007 began qualitative research good starting point for looking at issues.

- Engaging men inquiries that some men and women identified powerful stories of change focused on domestic GBV, motivations for change especially with men. Continued to work with this group and still are

- Staff from 4 Latin America CARE offices undertook a cross visit to Rio de Janeiro to visit the gender equality work conducted by Instituto ProMundo. The review of "Project H" helped Latin America teams think about how to include specific strategies to address machismo with men and boys in their work.

- Gender and peace building Psychosocial Support

- Gender and climate change adaptation CARE Austria involved in how to gender into global strategy

- 2006/7-ECARMU regional strategy dig. Been resurrected all CO AOP now have objective around that. Stephanie's conducting gender and diversity training.

2007

- Extension of SII

- Underlying causes of poverty analysis

- Nepal: Gender analysis framework -CO been instrumental to design programs and target community has really brought lots that not already addressed. Gender analysis, has been institutionalized in care Nepal before start any project do underlying causes of poverty. Gov and UN has commissioned study teams and went to CARE area and put CARE as best case study and to replicate within other NGO. CARE Nepal giving guidance to SDC

- Not talked about supply side. Service provider capacity has not been broadened. Evaluation was just done by government and said should

be replicated in other international originations the underlying causes of poverty.

- 1st long term program focused on women's empowerment. Was the hardest to develop

- Bangladesh -- Coalition of 37 orgs came together and made clearer commitment to do something tangible around GBV looked at developing policy in Bangladesh around domestic violence. Don't know if it's been passed yet, but pretty close.

- CARE Austria gender -strategy developed and had overall focus on gender and women's empowerment all programs should comply with certain standards including gender

- May 2007 Combating women's violence Egypt-1st program used to work on WE generally, 1st time this issue and explicitly contains 3 main advocacy, strengthening civil society, community.

- CARE USA's SRH team launches "RAISE" a global initiative to address SRH in conflict and emergencies in collaboration with Columbia University and Marie Stopes Int'l

- SII WE VSLAs 2007/8 –impact on VSL on WE. Malawi. Internal reflective process, linked with global SII utilized resources from elsewhere

- 2007/8-CARE USA Theory of Change- put focus specifically on women and girls

2008

- Program approach Istanbul-long term programming need to focus. Can't change women and girls lives without having program approach.

- Signature programs -launch 3 signature programs which focus on life cycle of women and girls

- Consultation for I am powerful- "Soy extraordinaria"- El Salvador

- Social analysis and action-global training packet on how to do social analysis and issues of discrimination

- UN SC 1325 women peace and security women are included and their voices are heard in peace building process, protection increased in conflict situations -start of work on implementation of UN resolution started to work at CO level, since then is at peak of international advocacy groups on trying to influence 10yr anniversary of resolution indicators to ensure

- Gender strategy NW Balkans, Roma women became increasing focus on work

- Global impact indicators-looked at history to see what has taught us in terms of what to measure and talk about globally

- UN 1888. (2008-present) CI advocacy initiatives GBV evidence coming out of great lakes countries security council resolution n follow up 1820 conflict and sexual violence. Encouraging UN to adopt specific policies and appoint someone who would e responsible for GBV in conflict. Exciting cause US held presidency security council to deliver same message in all countries see CARE language in resolution and someone has been appointed

- Sierra Leone - Impact mitigation since 2008-very new for CARE SL. Funds from Germany FGC one underlying cause of poverty in country strategy to build capacity to mitigate GBV

- Burundi -- P-Shift near the end.

- Yemen working on gender, however in 2009 with PTL program, starts to focus on building other projects around it that specifically target women and WE

2009

- CI gender policy approved

- VSLAs-women and ex combatants in DRC-Access Africa engaging with several Cos participation with people not being received by society ex combatants how to promote integration in VSLA and micro finances

- LAC region and program-building on mainstreaming gender. Took different approach, started with analysis in 2009 interviewed 60 LA feminists what the role of NGO should be in fight against women inequality. Briefly, the results of that study showed that local feminists feel that international development organizations like CARE or donors of int'l development programming fragment their work. This causes them to lose sight of the overall goal which is to attain a better society in which women and men live differently together. Not helping us in advancing women equality in the region. The primary recommendation of the interviews was to examine and address the sexual division of

labor, so the LAC region is currently working on that as a strategy.

- Women's rights movement CARE Egypt small initiative that will impact all of our work. Said to have women's rights work, but the main issue is that it's not integrated. Could be opportunity to integrate all work

- CARE Norway began drafting a framework on Women's Empowerment with NORAD funding for 8 Cos. CARE Norway started developing the current framework which came into action in January

- El Salvador-Patsy Collins Trust Fund initiative

2009

- Jordan-coming together of 2 important WE programs in Jordan around strengthening civil society and other around political participation. Nucleus of what we hope will be WE program in Jordan

- CARE Norway-working with men and boys is important to gender equality. Also preparing for big funding event in Norway. Started merging with 10 CO to develop national strategies on how they can work. Collaboration with ICRW and Norwegian researcher specialist on masculinity. learning workshop in Oslo in November

- Foreign assistance reform USG-Big process going on in US to reform how donor government goes around foreign assistance and how to meaningfully incorporate gender. It is part of everything we do, and CARE is providing real examples.

- Patsy Collins 8 countries- situational analysis the studies were looking at barriers to girls education, showed some of social status of girls. Shame has been restricted to education unit relevant to many other.

- EL Salvador-very important initiative for us. Explicit point on political empowerment for women.

- Currently designing program of gender equity in Central America.

- CARE USA participated in a Cairo + 15 meeting, the "Berlin call to action." CARE participated in conference looking at reproductive health rights from RBA trying to engage NGO community from that. 500 people working for action plan for 2015.

- Development of reporting mechanism for CARE International Members' implementation of CI gender policy. Push forward gender policy within CI. Vienna meeting decided what CI members are to provide senior management with reporting mechanism. To senior management. Finalized but hasn't been launched yet.

- Initiatives on and off to develop regional gender strategy for Middle East. Picked up again in late 2009 and early 2010 still in process. Hope to get done by end of year

2010

- First WE report

- Women and Agriculture design across 6 countries. Mali Tanzania, Bangladesh. Draws from SII puts women empowerment in goal which is new for natural resources program

- CEDAW-member of women's rights network. Presentation of report in Geneva to advocate for reform in personal status and domestic violence

- Balkans: I am a Roma woman campaign-gender program strategy building on some of previous work

- Egypt: VS+L started

- CARE NEPAL supporting movements to address structure land rights, women's rights

- Supporting Ethnic marginalized communities movement

- CARE US: Breast feeding policy approved

- IVAWA (2001-present) USG legislation care drafted and revised, hoped to see USG pass to kick up response to violence against women thru USA foreign assistance programs. Focus on prevention. Technical staff worked to make it holistic, transformative process. Hasn't been adopted yet, but many concepts have been taken forward. President and Vice President were key sponsors of legislation. Excellent example of how CARE can take evidence from its approaches to donor governments helping root cause of problems

Annex C. What are we each planning to do next? Note cards collected on the last day

A	To be an active member of the men and boys working groups. Identification, sharing info/resources, etc. Also contribute to IM of Women's Empowerment.
B	Check if CARE Norway is working to take on the responsibility of work around engaging men
C	Networking/sharing information, knowledge Contribution to GBV program support
D	Clarify who in my region would be interested in joining gender teams. Negotiate time with my --colleagues to join a group
E	"Socialize" (disseminate, promote learning on) the Women Empowerment report, WE impact measurement initiative and mobilize relevant staff to engage in both processes workup with Madhu/Maliha.
F	Work on WE impact measures in FY11
G	Brief my team leadership about key workshop outputs, discuss my teams' contribution to achieving CARE's women's empowerment agenda
H	Identify staff to lead the work at CO level
I	Desk staff at CO level stable funding to retain them
J	Buy in from CO leadership
K	CO current strategies
L	Capacity gaps and proposed actions
M	We don't have simple focused systems to measure this. We are too complicated. Simple and clear set of things we can do
N	It has to be part of the existing system as part of what we are already doing—incorporated into AOPs