

**Grand Bargain in 2021:  
Annual Self Report – Narrative Summary**

**Name of Institution: CARE International**

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## **Grand Bargain in 2021**

**Question 1: Reflecting on the information you have provided in the Excel spreadsheet, please highlight the 2 or 3 key outcomes or results relating to the Grand Bargain that your institution achieved in 2021?**

CARE has made advances this year in its ability to **track and report on data and indicators**. Most notably, for the first time, CARE has been able to report on funding to national and local actors and to women-led organizations for the CARE Confederation as a whole. As CARE moved into the first phase of implementation of our Vision 2030 strategy, we overhauled and digitalized our Project Information and Impact Reporting System (PIIRS). We have used this system since 2015 to collect and analyse quality, reach, and impact data from all CARE projects (2021: approx. 1,500 projects). PIIRS has allowed CARE to expand our framework of indicators that deal with gender equality, accountability, and structural change.

CARE has also continued to make progress with cash programming, increasing our cash portfolio by US\$14 million compared to last year to a total of more than US\$94 million, while our voucher assistance reduced slightly by about US\$5m but remains at nearly US\$15 million. CARE was co-chairing the GB Gender and Cash sub workstream. Despite the closure of the main cash workstream in September, CARE has committed to continue to support the cash and gender sub workstream activities and to provide leadership on gender responsive cash programming.

**Question 2: Briefly explain how the outcomes contribute to achieving the Grand Bargain 2.0 enabling priority 1 (quality funding).**

*Enabling priority 1: A critical mass of quality funding is reached that allows an effective and efficient response, ensuring visibility and accountability.*

*(For ease of reference, see Senior Officials Meeting recommendations [here](#).)*

Externally, CARE reinforced our advocacy on quality funding, including by calling for multi-year investments in the institutional capacities of local and national responders, also as a signatory of the Charter for Change (C4C). We are specifically engaging key donors on their localization strategies (ECHO, still ongoing). We also contributed to influencing the three priorities of GB2.0, one of which is quality funding. Internally, as many of our partners have dual development and humanitarian mandates, we are leveraging these strategic partnerships to make longer-term commitments to support partners with their preparedness and response capacity strengthening efforts and share humanitarian capacity, including through our Humanitarian Partnership Platforms (HPPs). This includes multi-year funding commitments when donor grants make it possible. Unfortunately, our systems do not yet track the percentage of partnership or funding agreements that incorporate multi-year institutional capacity strengthening support for local and national responders.

**Question 3: Briefly explain how the outcomes contribute to achieving the Grand Bargain 2.0 enabling priority 2 (localisation and participation).**

*Enabling priority 2: Greater support is provided for the leadership, delivery and capacity of local responders and the participation of affected communities in addressing humanitarian needs.*

CARE's internal transformation and programs continued to center on devolving more power and resources to crisis affected people, especially women and girls and their organizations. In March 2021, we published our report card "[Time for a Better Bargain, how the aid system short-changes women and girls in crisis](#)". The report launched our global "*She Leads in Crisis*" campaign which demands gender just and women-led crisis response to today's global challenges that are driving humanitarian needs: Conflict, Climate and COVID-19. The report appraises the top eleven humanitarian donors and top five UN humanitarian agencies on three priority areas. The report found that, despite positive and often impressive multilateral, individual donor and UN agency initiatives since the 2016 World Humanitarian Summit, donors and UN agencies have fallen short, with notable exceptions, of significantly funding women's groups in fragile and conflict-affected states. One notable success has been increased gender parity in UN operations, showing that, with adequate political will and resourcing, change is possible. In this report, CARE also self-assessed how we are doing against the measured indicators. Despite our commitment to GEEWG and having over 66% of our partners be women's organizations, CARE lacked the disaggregated data to determine what portion of our humanitarian funding went to women's organizations. The report helped to address internal gaps and **CARE is able for the first time this year to report on humanitarian funding to women's organizations at overall Confederation level**. While the funding remains low (1.3%), having the data has renewed our commitment to significantly increase the quantity and quality of our funding to women's organizations. This resulted in CARE making a formal public commitment at the Gender Equality Forum in May **to reach 4% by the end of 2023**. Since the report card, CARE has continuously called for Grand Bargain signatories to follow suite and set, track and publish individual agency targets while stepping up efforts to support women and girls' direct, substantial and meaningful participation and leadership in humanitarian structures at all levels.

**Grand Bargain and cross-cutting issues**

**Question 4: How has your institution contributed to the advancement of gender equality and women's empowerment<sup>1</sup> in humanitarian settings through its implementation of the Grand Bargain? What results/outcomes have been achieved in this regard? (Please outline specific initiatives or changes in practice and their outcomes/results).** Please refer to the Guidelines for definitions of Gender Equality and Women's Empowerment, which are included in this self-report template package.

CARE's report card "[Time for a Better Bargain, how the aid system short-changes women and girls in crisis](#)", our *She Leads in Crisis* campaign and our 2021-2023 humanitarian program and advocacy strategies all center the advancement of GEEWG in the humanitarian aid system. By

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<sup>1</sup> Refer to the IASC definitions of gender equality and women empowerment, available [here](#).

utilizing these resources to influence Grand Bargain signatories at global but also at country level, CARE has contributed to the advancement of GEEWG in humanitarian action. We successfully led a joint NGO advocacy effort to ensure that GB2.0 put GEEWG, including participation of crisis affected women and girls and their organizations, at the center of the new framework. We were also successful in influencing the IASC-guidance note on strengthening participation, representation and leadership of local and national-actors to ensure it tracks WO's participation in HCTs & clusters, effective 2021.

In 2021, CARE scaled up our Women Lead in Emergencies model (see "[Don't plan for us, plan with us](#)"). The WLIE model seeks to support and empower crisis affected women and girls to influence response efforts. We also built on last year's momentum around **Rapid Gender Analysis (RGAs)** in the context of COVID and conducted RGAs in more than 20 humanitarian crises, greatly expanding their use to partners and additional countries. By expanding the use of RGAs through trainings (CARE has trained nearly 300 participants from 90 agencies in 60 countries in RGA), more local responders have had access to tools and knowledge to apply a gendered perspective to their responses, with a movement toward mainstreaming RGAs in all programming. In Mali, 12 staff and partners were trained to facilitate RGAs in all programs. We are collaborating with OCHA and GenCap to institutionalize RGAs more firmly into the annual HPC process. There is also a continued need to ensure that HNOs, MSNAs, hunger & food strategies systematically include gender and age disaggregated data & reflect GEEWG. We have therefore initiated updating the [Sex & Age Matter](#) report which is expected to be published in 2022.

Given the unprecedented hunger crisis the world is facing, we have redoubled efforts to highlight the gender gaps in the hunger / famine prevention and response. CARE-FAO-WFP jointly conducted an RGA on food security, which we hope to publish soon. In the meantime, CARE updated our 2020 "[Left Out Left Behind](#)" & "[Sometimes We Don't Even Eat](#)" reports through a policy brief "[Don't Leave Them Behind: Global Food Policies Continue to Fail Women](#)" published in December 2021 that analyses how 84 global reports, strategies, and policies on the hunger crisis released between September 2020 and December 2021 fail to sufficiently address the reality of women and girls and gender inequality.

CARE has also been a leading voice for gender considerations in the Grand Bargain 2.0. through our continuing role as co-chair of the **Friends of Gender Group (FOGG)**, jointly with UNWOMEN. In 2021 specifically, the FOGG contributed to the needs assessment workstream to ensure gender considerations are considered in the JIAF methodology and the FOGG also participated in the reflection meeting during which the JIAF external review findings were discussed. The FOGG is proud to have managed to have five women's organizations participate in the GB annual meeting for the first time, with one of them speaking at the event.

**Question 5: How has the humanitarian-development nexus been strategically mainstreamed in your institutional implementation of the Grand Bargain commitments?** Please explain how your institution has linked commitments 10.1 - 10.5 with other commitments from other workstreams.

As a development and humanitarian organization working in most of the world's fragile contexts and conflict settings, CARE embraces the humanitarian-development-peace nexus, acknowledging that the exponential increase in humanitarian needs can no longer be met and

that it is urgent to shrink the needs and invest in tackling the root causes of crises, building resilience and durable solutions. This is clearly articulated in CARE's Vision 2030. Advancing Nexus programming has been a core part of our global strategy development process in 2021. During this process, we agreed on the need to align our thinking and understanding of the Nexus and a small team was formed to draft common principles. This process is ongoing at the time of writing this report.

**Question 6: Has your institution taken any steps towards improving risk sharing with its partners? If so, please describe how.** *(For ease of reference, please see a set of actions to enhance risk sharing as suggested in the Netherlands and the ICRC [Statement on risk sharing](#).)*<sup>2</sup>

As mentioned in our 2020 report, though closing slowly, there remains a gap between our program aspirations and vision on equitable partnership and our compliance and risk management approaches. Parts of CARE continue to see partnership as high risk, particularly if donor rules and regulations and the operating environment are complex and the risk of fraud and corruption is ranked high. Our new Partnership Policy (2020) specifically refers to the need to change our approach from risk avoidance and risk transfer to risk sharing. Changing our practice is a priority but also requires donors to play their part. In the Netherlands, CARE is actively participating in the joint efforts of the Dutch Relief Alliance and the Ministry of Foreign Affairs to arrive at a risk sharing framework.

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<sup>2</sup> During the 2021 Annual meeting and in consultation leading up to this Signatories have expressed a strong interest in advancing the risk-sharing agenda. As communicated, the Netherlands, ICRC and InterAction are in the process of setting up a Risk Sharing Platform. This work will benefit greatly from an inventory of Signatories' risk-sharing practices.