

**Grand Bargain in 2020:
Annual Self Report – Narrative Summary**

Name of Institution: CARE International

Point of Contact (please provide a name, title and email to enable the consultants to contact you for an interview):

Heather van Sice,
Head of Emergency Program Quality
email: vansice@careinternational.org

Date of Initial Submission: 16 February 2021

Date of resubmission with answers to ODI's questions: 23rd March 2021

Date of resubmission for publication: 31st March 2021

(NB. Please limit your answer to no more than **5 pages in total** – anything over this word limit will not be considered by ODI in their analysis. Please respond to all of the questions below.)

Grand Bargain in 2020

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 2020?

CARE stepped up its advocacy on **women participation** and leadership in humanitarian coordination bodies in 2020, both as continuity to existing efforts as well as due to the imperative to urgently elevate the voice of WLOs / WROs to respond to COVID-19:

- 2020 was marked by the design and kick-off of a new CARE Confederation wide campaign “She Leads in Crisis” (SLIC), as our new vehicle to ensure coordinated advocacy efforts on women leadership in emergencies.
- Under this campaign, CARE also formed a Women Advisory Board with the specific mandate to advise CARE’s Advocacy on women participation in humanitarian action.
- Further, CARE made significant progress adapting and testing of various gender transformative models to support Women Leadership in Emergencies (WLiE) at the grassroots. Findings and lessons learnt will be disseminated in 2021 in an effort to scale up these innovative promising approaches.
- CARE was successful in influencing a number of COVID-19 related IASC guidelines to ensure women participation is central to the response, including the IASC localisation guidance note in the context of COVID-19, that was initially fairly weak on gender equality and women participation;

CARE is particularly proud to have significantly contributed to the evidence base on the gendered impacts of COVID-19 through over 50 **Rapid Gender Analysis (RGAs)** in all parts of the world during 2020. In our report, “She Told Us So”¹, consolidated findings of nearly 40 RGAs and needs assessments conducted between March and June 2020 with local partners and experts, gathering the voices of more than 6,000 women, describe the catastrophic impacts of COVID-19 across multiple dimensions of their lives. These RGAs have been informing COVID-19 response plans as well as the 2021 HNOs / HRP and have also contributed to strengthening capacity of diverse humanitarian actors on RGAs, including local partners and WLOs.

Despite the fact that we are still not able to track and report on funding to local actors at overall Confederation level, we are pleased to note the significant increase in funding cascaded directly to local and national partners in 2020, **reaching 36% of all humanitarian funding received**². CARE will continue to work on aligning systems to better track commitments, including on funding to WLOs / WROs.

Question 2: How has your institution contributed to the advancement of gender equality and women’s empowerment³ in humanitarian settings through its implementation of the Grand Bargain? What results/outcomes have been achieved in this regard? (please

¹ <https://care.org/news-and-stories/news/she-told-us-so/>

² CARE's total expenses for humanitarian assistance activities in FY20 amounted to US\$253 millions. Of these expenses, US\$53 millions or 36% was implemented / spent by our local partners.

³ Refer to the IASC definitions of gender equality and women empowerment, available [here](#).

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 commitment to the Grand Bargain has given additional legitimacy to our existing GEEWG commitments, enabling us particularly to link different priorities (such as GBV, Cash, more equal partnerships and localization, accountability, our work on gender analysis, etc) with GEEWG as the "glue" connecting these various streams of work.
- Even if we are still not able to report on funding to WLOs / WROs, we have made amazing progress in terms of reporting on GEEWG internally through various gender dashboards (e.g. on GEEWG, on GBV, on the use of gender markers) and data points (on the number of WLO / WRO partners, on the number of projects implemented with / by WLOs / WROs etc) in our PIRRS (Project Information Reporting System) system.
- The Grand Bargain commitment on needs analysis has supported the internal and sector wide institutionalization of CARE's Rapid Gender Analysis tool, which has been adopted as IASC guidance and on which on-line training in several languages is also available online.
- The evidence base generated by RGAs has made it possible to expand our global, regional and country level advocacy and program contributions on GEEWG in humanitarian actions by playing influential roles in relevant working groups, such as the GBV AoR at global level, the GBV Accountability Framework Steering Group, the IAWG SRH global Advocacy Group, the Asia Gender in Humanitarian Action (GiHA) regional working group, the Cash and Gender Sector working group. We are also an active advocate and voice on GEEWG in IASC processes and bodies at all levels, including in many countries' clusters and HCTs.
- We believe we have been particularly influential in ensuring GBV prevention, response and risk mitigation is elevated in humanitarian needs analysis and response plans. While the funding going to GBV remains alarmingly low compared to needs, 2020 marked a mile stone in terms of strengthened awareness among all humanitarian actors on the need to increase and track funding for GBV. Our advocacy as part of the GBV AoR led the Emergency Relief Coordinator to instruct HCTs to make sure the 2021 HNOs and HRP include GBV and contributed to prompting a frank dialogue between donors and OCHA / UN agencies on the need to unlock the barriers to funding for GBV and more broadly for GEEWG.
- As co-chair of the Grand Bargain Friends of Gender Group (FOGG), we have also been able to influence the different GB workstreams and particularly the ones on localization, transparency and needs assessments.

Question 3: 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 context and conflict settings, we embrace the humanitarian-development-peace nexus, acknowledging that the exponential increase in humanitarian needs⁴ 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. Most of our partners also have dual mandates and already work to operationalize

⁴ See OCHA's 2021 GHO which represents a 40% increase in

nexus programming with our support. CARE's people centred approach is also enabling the implementation of the nexus. We recognize that the people we serve require agile responses to their problems, responses that are able to meet immediate and life saving needs while simultaneously addressing more structural and underlying issues in a coherent and integrated manner. These underlying causes may be poor governance, conflict, the impacts of climate change, inequality, including gender inequality; streams of work or sectors where CARE has a wealth of experience and expertise. Together with our climate change and resilience colleagues, our conflict and governance colleagues, our gender teams, CARE staff and partners adapt approaches and models to deliver the best possible mix of program approaches based on the context. Anticipatory action, disaster risk reduction, preparedness, early warning systems, crisis modifiers are all part and parcel of our "toolkit" for nexus programming as documented in several learning briefs⁵. Our work on Women, Peace and Security⁶ is also conceptualized within the triple nexus to emphasize the need to work on WPS, regardless of where women find themselves on the aid continuum. The relief and recovery pillar of the WPS advocacy offers a particular opportunity to operationalize the nexus. CARE's Vision 2030 strategy further articulates our commitment to working across the triple nexus and we are currently updating our principles around working in the nexus.

Grand Bargain 2016-2020: Overall achievements and remaining gaps

Question 4: What are the 2-3 key achievements/areas of most progress by your institution since 2016? Please report on your institutional progress for the period 2016-2020, even if your institution did not become a signatory until after 2016.

Most main achievements across the five year period are similar to the ones reported as major achievements in the last year. In addition, we would like to highlight a few additional areas of significant positive change.

- The growth of CARE's Cash and Vouchers portfolio has been significant, reaching nearly US\$300m since 2017 and representing an increase of 90% in the number of countries using CVA. We are particularly proud of the wealth of agency-level guidance and documents on gender sensitive CVA that we have been able to develop and disseminate in various languages, such as tip sheets on coordination, minimum quality standards, case studies, evidence reports, after-action reviews on projects with CVA, etc all contributing to influencing and improving how gender responsive CVA programming is implemented. We do sincerely deplore the lack of progress on resolving CVA coordination issues at the global level that continue to hinder scale up;
- Transparency has also seen tremendous progress through continuous investments in and improvement of our PIRRS system, enabling us to report on our contributions to SDGs and other relevant global frameworks and on our commitment to GEEWG through additional dashboards and data sets, e.g. on the use of our gender marker, the number of projects implemented by WLOs / WROs and contributing to GEEWG, projects on GBV, etc
- We are also satisfied with progress realized on accountability and particularly on completing a Confederation wide CARE guidance for Feedback & Accountability Mechanisms (FAM) and having started a Humanitarian Accountability Learning Initiative (HALI) to ensure that CARE country teams and our partners develop capacity for an

⁵ CARE Canada Annual Impact and learning review, The humanitarian-development Nexus, September 2019 and MENA's Doing Nexus Differently, Summary Paper 2018

⁶ CARE Advocacy Policy Position on Women, Peace and Security, December 2020

efficient implementation of FAM. Given the many scandals of fraud, corruption and Sexual Exploitation and Abuse in the humanitarian sector in recent years, it is fundamental to have operational FAMs in place, with an ongoing review mechanism.

Question 5: What, in your institutional view, have been the main achievements of the Grand Bargain signatories, as a collective, since 2016? Please indicate specific commitments, thematic or cross-cutting issues or workstreams where you think most progress has been made collectively by signatories.

Drawing from our responses to the survey on the future of the Grand Bargain, we believe that the Grand Bargain has added the most value on localisation. Yet, five years into the Grand Bargain, implementation of localization remains at an early stage. Institutional donors are not willing to manage an exponential number of grants by directly funding local partners, defaulting on UN agencies, INGOs, UN and / or NGO managed pooled funds, without sharing the associated risks. Unfortunately, UN agencies and INGOs alike have made limited progress. Caught between unfit systems and policies designed to support direct implementation, a low appetite for risks embedded in organizational cultures where donor compliance dominates, and unspoken fears about our own long term existence, UN agencies and INGOs have failed to transform to truly support the localization agenda and the associated redistribution of power. Despite this limited progress, **the Grand Bargain has generated the much needed and indispensable dialogue to unlock the change process.** It is important to build on this progress to date in the next phase of the Grand Bargain.

Question 6: What has the Grand Bargain not been able to achieve in its five year tenure? What outstanding obstacles, gaps, areas of weakness still remain after five years, in terms of improving the efficiency and effectiveness of humanitarian action? Please indicate specific commitments, thematic or cross-cutting issues or workstreams where you think there remain key gaps or obstacles.

Progress on **flexible funding and on capacity strengthening of local actors**, two critical enablers of localization, is lagging behind. The most progress on flexible funding was achieved in 2020 to enable front line responders' agile responses to COVID-19. It was amazing to see how, suddenly, more flexibility in donors' and UN agencies' rules and regulations became possible after limited progress in four years. Moving forward, CARE hopes that these more flexible arrangements can be maintained. On the other hand, even under COVID, very limited to no progress has been recorded in multi-years and more predictable funding as well as in terms of funding for capacity strengthening of humanitarian actors.

Risk and the Grand Bargain

Question 7a: How has risk (financial, operational, reputational, etc) affected your institution's implementation of the core commitments since you became a signatory to the Grand Bargain?

Though closing slowly, there is still a gap between our program aspirations and vision on equitable partnership and our compliance and risk management approaches, slowing down progress on a number of commitments, including on localization and flexible multi-year funding. Program support functions (finance, administration, grants and contracts, audits, legal) and certain members in the Confederation tend to continue to see local partners as high risks,

particularly if donor rules and regulations and the operating environment are complex and the risk of fraud and corruption is ranked high.

Question 7b: How has your institution sought to mitigate or address these risks to enable implementation of the core commitments? CARE has benefited from its humanitarian partnership learning hub in the Philippines and from our participation in Charter for Change to tackle issues around risk. By learning from others' and our own experience and through cross departmental conversations on localization, on equitable partnerships, on building trust and joint work to revise policies (e.g. the current Partner Funding Policy revision process conducted by a multi-disciplinary team), we are making progress. The recent conversations on decolonizing aid and tackling racism, white supremacy and privilege and discrimination in our sector have led CARE to listen even more deeply to partners. Since September 2020, CARE, with a few likeminded peers, supported by Degan Ali, has embarked on an introspection journey during which these difficult questions will need to be faced. In parallel, we are reflecting on how using feminist principles more systematically across all our work can also transform the organizational culture and ways of working.