



# Gender in Emergencies: Theory of Change

## Humanitarian practice has a problem with gender.

More women than men die in post-conflict situations from the indirect causes of conflict. It is still the case that gender-based violence (GBV) increases during a crisis. It is still the case that the voices of women and girls are ignored.

As a result of this the specific needs of all people, of all genders, of all ages, and all abilities are not met. The October 2020, Inter-Agency Humanitarian Evaluation of Gender Equality and the Empowerment of Women and Girls concluded that there remains a lack of systematic and consistent approach to gender in emergencies. This is particularly true where gender inequality intersects with aspects of identity and diversity including (but not limited to) race, caste, ethnicity, sexual orientation, and disability status in ways which can exacerbate unequal power dynamics. Failure to account for this has the potential to compromise our mandate to 'Do No Harm' and undermines our mission to advance gender equality.

Humanitarian crises offer a 'window of opportunity' to transform unequal gender relations and shift harmful gender norms but traditional, patriarchal and colonial models of humanitarian response are not designed to take advantage of this. While we seek greater gender equality for people of all genders, our impact population is primarily those people

that most experience gender discrimination: women & girls & marginalized groups (including people of diverse sexual orientations & gender identities).

At CARE we envisage an approach to humanitarian response which is needs based and aligned with humanitarian principles, and which challenges exclusionary and harmful practices. As a result, CARE seeks to approach humanitarian emergencies in ways which seek to account for and address the different impacts on women, girls, boys and men. At CARE we know:

- **We must** actively listen to all people, of all genders, of all ages and all abilities to understand their needs and to elevate their voice, and we must ensure their participation in the response. Only through this we can appropriately support people to respond to and recover from crisis.
- **We must** prevent, mitigate and respond to gender-based violence. In this way we can keep all people safe - including those who experience specific or enhanced risks, such as women and girls.
- **We must** ensure we meet the fundamental and specific needs of all people, of all genders, of all ages, and all abilities living in emergencies. In this way we ensure that we are not failing those who need life-saving support.

## CARE's Gender in Emergencies Vision

All people, of all genders, abilities, and ages living in crisis have their voices heard. They are safe and free from violence. Their fundamental and specific needs are met. Humanitarian actors accept, recognise, value and support their capabilities, voice, participation and leadership.



# How will CARE contribute to this vision?

As a humanitarian actor, CARE has an important role to play in achieving this vision. Through our programming and by using our power as a broker and convener, CARE's Mission is to contribute to this future.

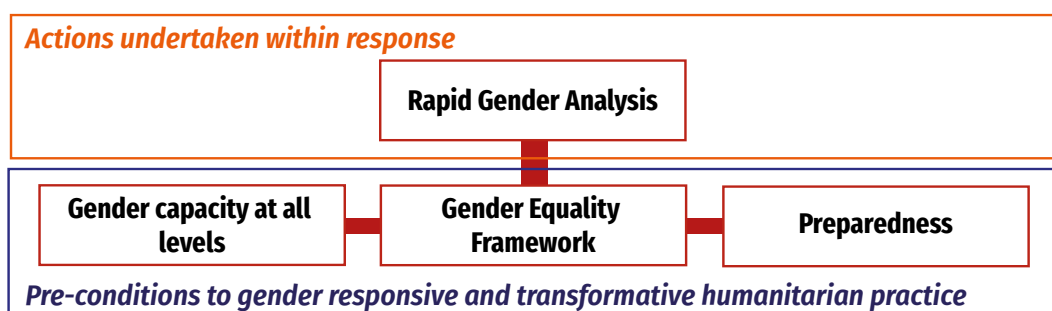
## CARE's Gender in Emergencies Mission

CARE supports gender responsive, and/or transformative humanitarian action which is safe, high quality, inclusive and intersectional. We demand decolonised humanitarian action, equitable partnership, and the embracing of feminist principles. We champion responses at scale that are increasingly gender-responsive, locally-led, locally-tailored, and globally-connected.

Whilst this mission is ambitious we must ensure that how we work, and what we do supports us in our journey towards the future we want to see. All crises are different and we must tailor our work to account for this difference: ensuring safe and appropriate gender integration but also pushing the boundaries of gender integration and meaningful inclusion, where possible, to build a more just humanitarian system.

## 1. The Foundations of the Gender in Emergencies Approach

In order for us to make progress against this mission it is important that CARE puts the foundations in place to ensure we can deliver the highest level of gender integration possible. Only by doing this will we ensure that we can deliver against our commitments. CARE outlines four foundational components of the Gender in Emergencies approach. One of these, the RGA is a foundational action to be undertaken within response. The other three are foundation preconditions to CARE being able to respond in crisis.



### 1.1 Rapid Gender Analysis

Underlying our work is the ability to define and understand the distinct and specific needs of all people, and particularly women and girls and other at risk groups. The Rapid Gender Analysis (RGA) tool was developed to help us to:

- **Understand barriers** to access and build an understanding of important stakeholders, institutions, authorities and dynamics
- **Create strategies** for the delivery of high quality humanitarian response which can meet the needs of all, and advance gender equality.

The RGA is different to the other foundational components of response in that it should be an action undertaken at the beginning of response, rather than as a precondition to response. CARE has developed a toolkit of questions as well as the RGA training course and other resources, including sectoral 'boost' questions in order to help ensure high quality RGAs can be developed quickly and provide relevant and actionable information. In some cases the RGA can be tailored to highlight specific aspects of context, or to fulfil specific needs. For example within our Women Lead in Emergencies model CARE has developed the RGA on Power and Participation (RGA-P) in order to help ensure that we understand the power dynamics informing response, and decision-making.

CARE offices conduct RGAs at country level and also often as part of the broader humanitarian response to a crisis in order to enable high quality gender integration.

## 1.2 Gender capacity at all levels

CARE cannot deliver against our organisational mission without ensuring that we have the capacity at all levels of the organisation to commit to and deliver gender equality. This means having the funding, the staffing, the knowledge, and the values in place to be able to put this work in to practice. It also requires buy-in from those making funding and strategy choices. We can see this gender commitment reflected at CARE in various ways:

- **Organisational commitment:** CARE has placed gender at the centre of both the Vision 2030 Framework and the CARE Humanitarian Strategy with commitments to deliver against this area of work.
- **Learning and Development:** CARE trains staff on an ongoing basis and has invested to ensure that staff have the knowledge to be able to successfully integrate gender into our work. This training addresses the spectrum of need on gender knowledge from fundamental gender training (for example the IASC e-training is a minimum requirement) to more specialist trainings available on approaches including Rapid Gender Analysis and Women Lead in Emergencies.
- **Specialist technical resources:** CARE funds a Gender in Emergencies Team, including sectoral specialists, in order to develop good practice and work with implementers and partners to put gender awareness at the centre of response. In addition dedicated resources, including within the Rapid Response Team, within CARE members and country offices help to ensure support to teams.
- **Accountability processes:** Through CARE's annual programme (PIIRS) reporting and sensemaking, and through gender reporting, CARE makes opportunities for CARE staff to regularly appraise progress, assess challenges, and learn.

## 1.3 Preparedness

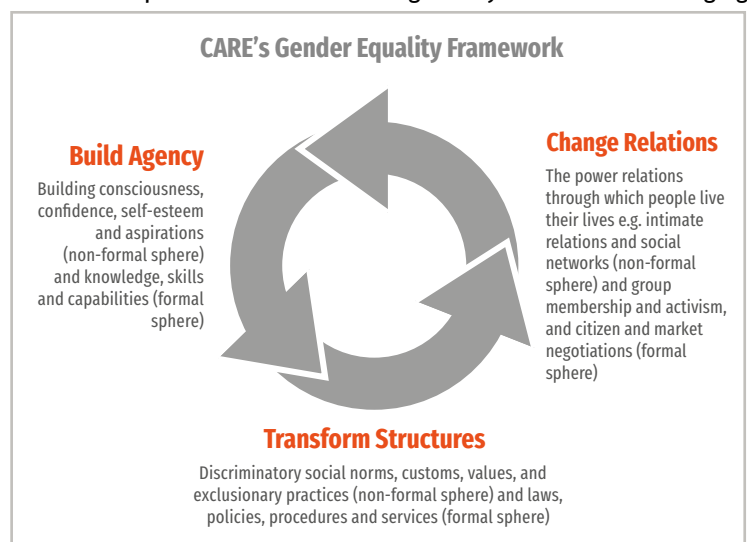
To be able to effectively respond to crises it is vital that preparedness processes also place gender at the centre. Emergency Preparedness Plans are required to include gender equality. [CARE's Gender in Emergencies Preparedness Planning \(EPP\)](#) toolkit provides clear guidance to teams which includes:

- Ensuring gender integration into broad preparedness planning, including approaches and tools for action planning. Guidance on training to staff and on ensuring a gender balanced team.
- Identification of a trained a Gender in Emergencies (GiE) focal point who is connected with the CARE International GiE Co-ordinator and other technical support in the GiE team.
- Identification women's civil society organisations to engage and partner with, in line with CARE's partnership approach and Partnership Guidance Note
- Engagement with inter-agency preparedness/coordination mechanisms. This can be in the HCT, Protection cluster, GBV sub-cluster, country and regional-level gender-working groups or task forces.

## 1.4 The Gender Equality Framework (GEF)

CARE's work in humanitarian emergencies is underpinned by the key concepts of CARE's Gender Equality Framework – building agency, transforming structures, and changing relations (see diagram right). The nature of the humanitarian crisis will impact how we use the GEF to inform our work and indeed, the way in which we integrate the gender equality framework would look different within a short-term multisectoral response compared to a long-term nexus programme. For example:

- **Agency:** Within a short term humanitarian response this may include ensuring that people of all genders have information on their rights, their access to services, and that they have access to the spaces and services they need. In longer term nexus programming we may find that we do more concerted work around building consciousness by using approaches such as [VSLA in Emergencies](#)
- **Relations:** Again the work we do around changing relations can take many forms. It may involve ensuring that responses deliberately seek to include people of all genders, and their organisations within spaces of decision- making. It may also focus on changing the nature of the partnerships that we have, for example by ensuring equitable partnerships with Women's Rights Organisations and Women-Led Organisations.
- **Structures:** We know also that it is important that we work on the structures that affect people's lives to ensure that diverse voices are listened to within response. This might mean working with local administrative bodies, as CARE does within approaches such as [Women-Lead in Emergencies](#) or it may mean working on the humanitarian system itself to ensure that at a minimum responses ensure that gender is prioritised. However, CARE should also fight for more equitable representation in coordination mechanisms for local organisations and particularly for organisations focused on inclusion, for example of people living with disabilities, for people of all genders, and for women-led organisations.

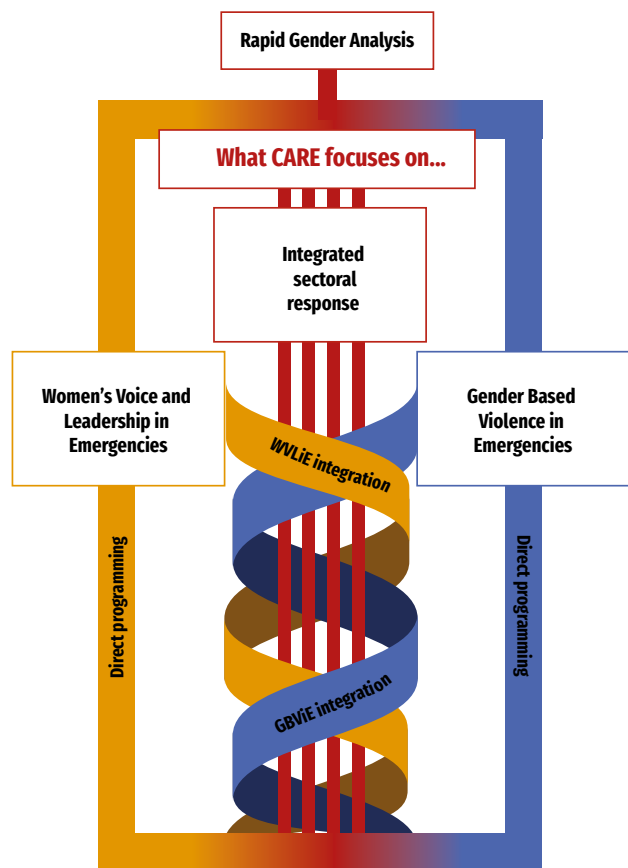


## 2. CARE's Gender in Emergencies Focus Areas

CARE focuses on three distinct but interdependent pillars of work within our Gender in Emergencies approach.

- **Women's Voice and Leadership in Emergencies:** We must actively listen to all people, including women and girls, to understand their needs and elevate their voice. Through this we will be able to appropriately support people to respond to and recover from crisis.
- **Gender Based Violence in Emergencies:** We must prevent, mitigate and respond to gender-based violence. Through this we will be able to address the profound risks of GBV and help keep all people, including women, girls safe and free from violence.
- **Gender integrated Sectoral Response:** We must ensure that our sectoral interventions meet the fundamental and specific needs of women, girls, and all people living in emergencies. Through this we will ensure that we are providing life-saving support to those who need it.

CARE chooses to focus on these three mutually reinforcing pillars because they are vital to ensuring we do no harm, and that we maximise our ability to have a positive impact on the lives of the people we work for and with. CARE believes that it is only by responding to all of these three dimensions, that we can contribute to our vision and achieve our mission.



### 2.1 Women's Voice and Leadership in Emergencies (WVLiE)

Women and girls are frequently first responders in crisis, and they often carry the load of providing assistance and support to their families and communities. However, they are also under-represented in humanitarian coordination and decision-making at all levels and are rarely meaningfully consulted on the design and delivery of response.

To address this CARE approaches WVLiE in three clear ways:

- Prioritising collective advocacy with women's organisations, women's movements, women's groups and local responders;
- Opening or creating spaces and opportunities for organisations or groups representing the most marginalised, crisis-affected people of all genders and in all their diversity;
- Consulting with women-led partners to ensure our advocacy priorities and approach reflects their agenda and priorities.

CARE as a humanitarian actor has an obligation to ensure that the voices of women and girls in crisis are heard. It does this through:

1. **Integration of WVLiE into programming:** WVLiE considerations and approaches are woven into projects and responses throughout the project cycle. Ultimately CARE seeks to embed some form of Women's Voice and Leadership work within all of our crisis response and programming to ensure we are appropriately supporting women to claim their right to participation.
2. **Dedicated WVLiE programming:** Some workstreams such as CARE's Women Lead in Emergencies programming focus entirely on supporting women's voice and leadership in emergencies. This programming is focused specifically on letting women set their own agendas and supporting with resources including activity budgets which they decide how to use. This support enables women to have a say and lead within humanitarian response but also within their households, communities, and within local, regional and national decision-making forums.

### 2.2 Gender Based Violence in Emergencies (GBViE)

Gender Based Violence (GBV) takes place in all spheres of life and is used to prevent people, particularly women, from making choices about their bodies, health, education, work, and lives. We know that in the midst of humanitarian crises the incidence of GBV increases and as a result it is crucial that CARE's humanitarian work seeks to address this at multiple levels, ensuring that we are supporting the safety and security of the communities we work with.



CARE's GBViE work focuses on three core areas, all of which are vital components to ensure that women, girls and others most at risk of GBV from diverse backgrounds are safe, respected, and valued:

- **GBV Risk Mitigation:** aims to make all programming safer and more inclusive, accessible and effective, transforming typical aid structures which may not consider the safety and needs of women, girls and other populations at risk.
- **Response:** addresses the consequences of GBV after it has occurred
- **Prevention:** aims to address the root causes of GBV. It mobilises communities to address harmful social norms and to change relations between women, their families and the wider community.

CARE's goal for GBV integration is for all projects to mitigate GBV risks at a **minimum**. Where it is safe, relevant and/or appropriate CARE should also seek to prevent GBV, and respond appropriately to disclosures of violence. However, it may be that in some contexts such interventions would not be possible to integrate safely and therefore should not be undertaken.

As with GBViE, CARE works in two different ways in order to implement its GBViE programming:

1. **Integrated GBViE programming:** GBViE considerations and approaches are woven into projects and responses throughout the project cycle. As noted above some form of GBViE integration should be present in all response, in the form of risk mitigation and this is a requirement across all impact areas.
2. **Dedicated GBViE programming:** In some contexts CARE might also manage projects that focus entirely or specifically on GBViE through explicit risk mitigation, prevention, response or advocacy interventions.

## 2.3 Gender Integrated Sectoral Response

Humanitarian need is at unprecedented levels with 270 million people estimated to be hungry, and 72 million people displaced – the highest figure on record. CARE is committed to meeting our commitments to humanitarian principles and recognises that only through needs-based, gender responsive and transformative programming can we make sure that we are not perpetuating inequality or excluding marginalised people, and particularly women and girls, from life-saving assistance.

CARE recognises that sectoral responses are required which strongly integrate gender and an intersectional lens and which can therefore meet the needs of all people. In addition our sectoral programming must also understand and address the distinct and specific risks associated with programming, including barriers to access. CARE's multisectoral work falls across four clear areas: Food and Livelihood Security, Shelter, Health, Sexual Reproductive Health Rights (SRHR), and Water, Sanitation and Hygiene (WASH).

Across these sectors CARE looks to integrate gender responsive and transformative approaches by:

- Understanding need from a gender perspective (e.g. through Rapid Gender Analysis)
- Integrating minimum standards for gender responsive programming (e.g. through the WASH and SRHR minimum commitments for safety and dignity of affected people)
- Integrating gender in to sectoral guidance (e.g. CARE's Gender-Transformative Shelter Guidance)
- Integrating GBViE and WVLiE throughout sectoral response including through for example GBViE risk mitigation, embedding Protection from Harassment, Sexual Abuse, and Exploitation (PSHEA), and through the integration of approaches like Women Lead in Emergencies.



### 3. How does CARE work to ensure Gender in Emergencies within response?

The humanitarian sector needs to better account for gender within response. CARE has and continues to work as a pathfinder within the sector: setting an agenda which supports change. Through this we push the boundaries of good practice and drive new standards in gender transformative humanitarian response. We do this in three ways:

1. Innovation
2. Accountability to minimum standards and good practice
3. Meaningful localisation and shifting power

Through these pathways CARE seeks to shift humanitarian practice both internally, by **driving and supporting internal change** and also externally, by **supporting and advocating for external change**.

#### 3.1 Innovation

The number of humanitarian disasters is increasing and with it, the level of need. Traditional ways of providing humanitarian support will not enable us to meet this need. Because of this CARE has trialled and scaled approaches which address some of the more pervasive operational problems within response. CARE continues to ensure we are innovative in our approaches: finding new ways to improve the quality and impact of our work.

##### How CARE drives and supports internal change

- Developing and piloting new approaches designed to address gaps or problems within our humanitarian response, ensuring this responds to the experiences of partners and local actors (e.g. Women Lead in Emergencies which was designed specifically to provide usable tools which could be scaled).
- Developing usable and adaptable tools and guidance to limit barriers to use and provide examples of how it has been operationalised to ensure we avoid 'one size fits all approaches'. Rapid Gender Analysis has been used to this end with adaptations made for specific contexts or types of programmes (e.g. The RGA on Power and Participation).
- Facilitating learning within CARE on our work, giving space to those with experience to share and guide our future work. Ensuring access to accompaniment and training for staff and partners seeking to scale new work (e.g. training on case management in emergencies).

##### How CARE supports and advocates for external change

- Presenting our approaches to the wider sector to ensure that others have the opportunity to provide constructive feedback and to learn from experience. Our RGA methodology has been adopted by the humanitarian sector (IASC Gender Handbook) and is recognized by the UN as a cutting-edge approach to ensure a more gender adequate response. It has resulted in a significant increase in the availability of gender analysis for emergencies.
- Documenting our approaches and providing tools and guidance. For example, our recent guidance on Gender Based Violence in Emergencies and tools like the Participatory Shelter Gender Assessments add important tools to sectoral response.
- Developing sector leading trainings on our tools and approaches. For example, CARE has been a pioneer in online Gender in Emergencies training and since 2016 have trained more than 1000 people across more than 100 agencies.
- CARE is active in the digital space and has incubated the Fatima App which supports quality data collection. This is available in the Fatima Light format, free to all humanitarian actors.

#### 3.2 Accountability to Minimum Standards and Good Practice

CARE's GiE Team works with CARE's humanitarian teams and sectoral leads, and others to ensure there are clear and actionable minimum standards. It is through this that CARE can ensure that we do no harm, and respond to the needs of all people.

##### How CARE drives and supports internal change

- Integrating sectoral standards and guidance in to our programming, for example the inter-agency minimum standards for Gender Based Violence in Emergency programming.
- The GiE team works with humanitarian actors within CARE to build on and embed innovative tools and guidance. For example the Gender in Emergencies team developed the gender marker for use in humanitarian and this was then adapted and scaled across all CARE programming.
- Working closely with sectoral leads in order to develop tools and approaches which place gender at the center of sectoral practices and ensure women are safe and that their rights are understood and upheld.
- CARE ensures relevant technical assistance is available to projects, helping to ensure that teams have the support they need to hold themselves accountable to providing high quality responses.

## How CARE supports and advocates for external change

- CARE's Humanitarian Teams ensure key guidance is also available externally. For example, CARE's Global Shelter Team has published guidance on integrating Gender into shelter programming and responses.
- More broadly, CARE hosts learning sessions, produces learning documents and promotes good practice whilst also learning from others. CARE also makes space for local actors, women's organisations and other humanitarian stakeholders to share their work and advocate for change.
- CARE takes on leadership positions within responses, for example in Myanmar CARE co-leads the sub-cluster on GBV and through this works to ensure high quality gender integration within the response.

## 3.2 Meaningful Localisation and Shifting Power

We know that unequal power dynamics embodied in humanitarian response frequently perpetuate harmful practices which fail to account for the needs of marginalised groups, including women and girls.

Patriarchal and colonial norms within our response can limit our effectiveness by incentivising inefficient and uncontextualized responses, and creating systemic barriers to ensuring the safety and voice of women and girls in emergencies. Without challenging this we cannot ensure that the fundamental and specific needs of women and girls are met.

As such, across our three areas of work CARE's GiE team seeks opportunities to fund, and support locally-led response: working towards a **feminist humanitarian system (see box to the right)** which can effectively meet the needs of people in crisis.

### How CARE drives and supports internal change:

- Partnering more equitably with local actors, moving away from direct delivery towards approaches which financially and operationally support partners to implement.
- Developing models of partnership with WLOs and WROs in which they are resourced and consistently included, where their leadership is recognised and made central to our responses.
- Actively including not only the voices of partners and power-holders but also of women affected by crisis so that they have the opportunity to both participate in and influence our decision-making.
- CARE supports southern leadership in this space, for example CARE Egypt leads CARE's Gender Based Violence in Emergencies work. CARE has also hosted a number of south to south trainings on models including Women Lead in Emergencies.

### How CARE supports and advocates for external change

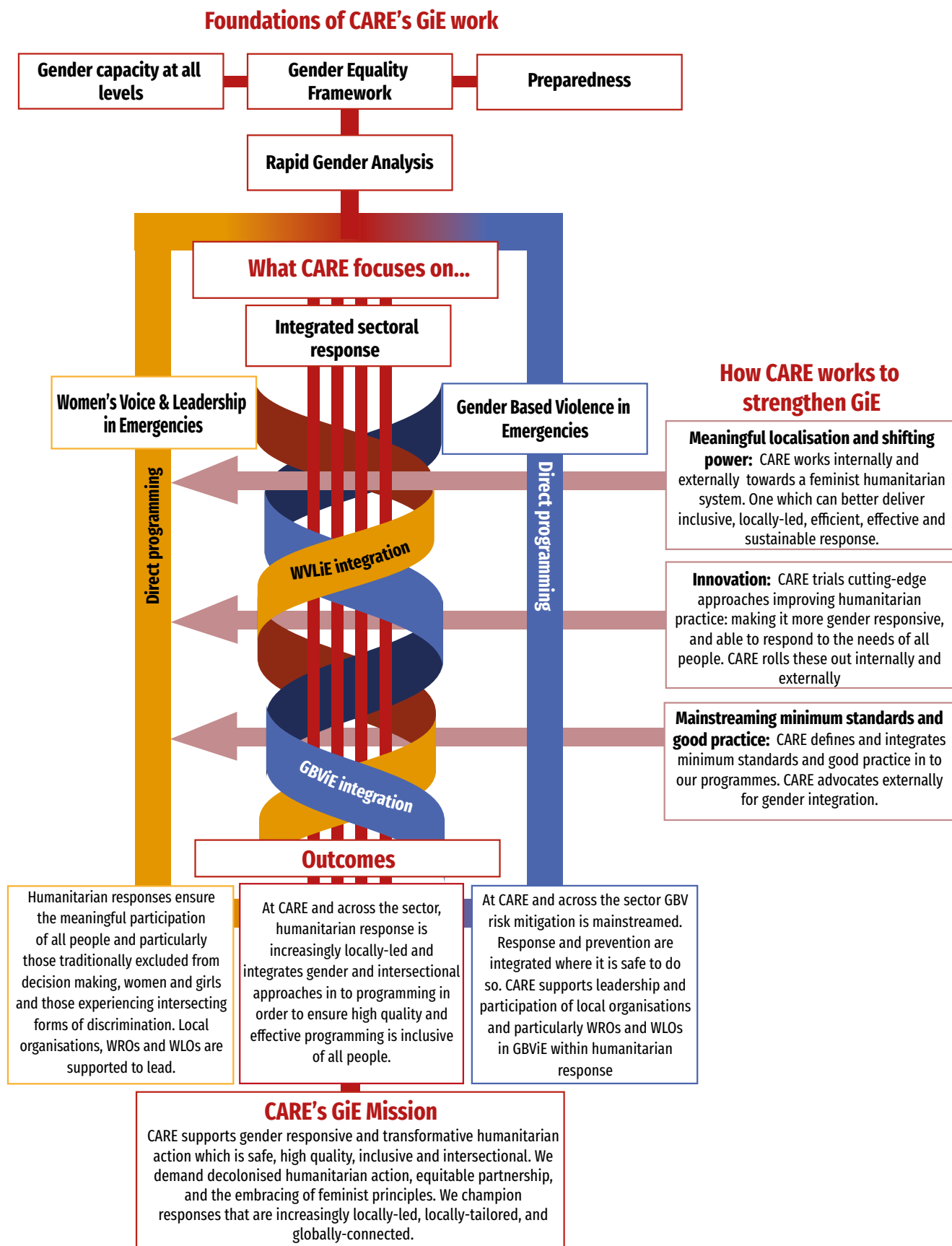
- CARE works through the Call To Action on Gender Based Violence in Emergencies Initiative to advocate for the engagement, leadership and participation of local organisations and local leaders, particularly women and women's organisations within response.
- CARE works meaningfully in partnership, collaborating with others to elevate the voice of local actors including women's organisations. For example, recent advocacy around the Ukraine response saw CARE partner with 14 local partners in order to advocate for better donor funding approaches to locally-led response.
- CARE supports the RGA Cooperative, an independent organisation in West Africa to deliver Rapid Gender Analysis research and reports throughout the region.
- Through engagement in sector-wide initiatives and platforms CARE uses its voice to advocate for change including in the way that humanitarian funding is provided.

#### What do we mean by a 'feminist humanitarian system'?

- Is collectively and unwaveringly committed to **achieving gender equality**, recognising and responding to the systemic drivers of inequality, and using emergencies as catalysts to advance women & girls' rights.
- **Acknowledges the patriarchal and colonial dynamics** within itself, that often exclude or downplay the contribution of those identifying as women and minorities, particularly those from the Global South.
- Takes responsibility for **identifying unjust formal and informal power relations within itself** by regularly critiquing the extent to which its structures and processes reinforce patriarchal power relations through humanitarian action.
- Actively **shifts power to women-led organisations** working in humanitarian contexts in the Global South by ensuring that they are resourced and consistently included, and that their leadership is recognised and made central in shaping the humanitarian system.
- Facilitates safe spaces through its coordination mechanisms, **wherein actors working at all levels can be heard**, and the expertise of diverse responders - including those identifying as women - is acknowledged and respected.
- Recognises that there is **no one-size-fits-all approach**, thereby ensuring that nobody is left behind.

## 4. CARE's Gender in Emergencies Theory of Change

CARE's brings together our foundational work, our pillars and our approaches to strengthening GiE in order to illustrate how we believe Gender in Emergencies at CARE can have the most impact: not only on our own work but how we can help to reshape and strengthen the broader humanitarian community to understand, and address the fundamental needs and rights of all people, of all genders, all ages, and all abilities, living in crisis.







## 5. Areas of Future Exploration

CARE seeks to continually improve, challenging ourselves to strengthen our approaches, listening to and learning from others, and working towards a more gender-just humanitarian system. As we continue to implement our 2030 Strategy CARE will further explore:

### 5.1 Partnership and Locally-Led Humanitarian Action

CARE's 2030 Humanitarian Action Strategy aspires to and commits to more locally-led and locally-tailored humanitarian action. This is also in line with commitments that CARE has made, including through the Pledge For Change. And CARE's GiE Team will continue to champion this work. This will mean exploring new and better ways to work in partnership with others, it means exploring new ways of funding, new ways of working, it means de-risking the participation of others and using our power to make space for others. This will be a key area of exploration going forward.

### 5.2 Inclusive and Intersectional Response

CARE aspires and commits to truly inclusive and intersectional responses by appropriately considering all forms of diversity and discrimination, e.g., based on age, disability, race, ethnicity, sexual orientation, status (refugee, IDP, migrant, stateless), to most effectively meet the needs, and support the capacities, of people of all genders affected by crisis. Through our Gender In Emergencies work we must continue to challenge ourselves in our understanding of inclusiveness and intersectionality: ensuring that we make and cede space to diverse voices to broaden our understanding of how we all must account for diversity, inclusion and account for intersectional power dynamics within our work.

### 5.3 Broadening our work on WVLiE

CARE is rapidly scaling the Women Lead in Emergencies model, however we know that all responses are different and therefore it is necessary to ensure that we have approaches to Women's Voice and Leadership that can flex with different funding modalities and contexts. For this reason CARE will be seeking to develop further guidance on how to ensure the effective mainstreaming of Women's Voice and Leadership in Emergencies. CARE will also work to understand how we can use this work to enhance accountability to affected populations.

### 5.4 Forging new connections with CARE's Gender Equality work

CARE's Gender Equality work continues to lead the sector on supporting gender equality and women's rights and there is greater scope to forge meaningful connections with this work in emergencies. For example, CARE's VSLA team have worked through the VSLA in Emergencies approach to adapt the VSLA model to build longer term resilience in crisis. CARE's Education Team have found ways to provide impactful education programming in crisis. CARE's Gender in Emergencies team will work closely with others in the gender space in CARE to build on this work and look for new opportunities to support gender equality in crisis.

Please contact us to find out more about CARE's Gender in Emergencies work.

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