Over the past decade CARE Ethiopia has invested significant time, resources, and energy to build an Impact Measurement and Knowledge System capable of meeting our aspirations for evidence-generation, course correction, policy influence and accountability. Although we are not yet there in terms of our ambitions, the mission has greatly deepened its learning and understanding about what it really takes to both advance and measure with confidence social norms and gender transformation. This journey has helped in building a learning culture across our teams – one that helps us pause, reflect on, and learn how to increase the scale and impact of our work. We know there are gaps and we know what we need to do differently, and more of as we move into a new decade of programming and impact.

A bit of history...

CARE Ethiopia embarked on the Program Approach beginning in 2009, conducting participatory underlying cause analyses for three distinct impact populations – (chronically food insecure rural women (CFIRW), resource poor urban female youth (RPUFY) and pastoral school-aged girls (PSAG), followed by theories of change and program strategies for each of the three. The Country Office has consistently used these impact populations as a screen through which to measure change and impact.

In the past, CARE Ethiopia contracted out its Baseline, Mid Term and End Line Evaluations to local consultants and/or international consultants. However, the mission was increasingly frustrated at what was considered the provision of mostly basic analysis and that findings from evaluations were not reflecting the true reality of the change happening, especially in relation to its gender analysis and the nuanced change happening around gender and social norms especially. The CARE Ethiopia team knew (from anecdotal evidence and from our frontline teams observations and experience) that our efforts were resulting in higher impact and that, for example, women were now involved in decision-making processes and changes (however ‘small’) were happening in relation to gender dynamics (relations) and women and girls agency.

The mission knew it had to deepen its understanding around and measurement of social norm change, especially given our aspirations for women and girls empowerment and gender transformation more specifically. A critical moment was when CARE Ethiopia in partnership with the CARE USA Gender Justice Team, developed the Social Norms Analysis Plot (SNAP) methodology and began to use other methodologies that would better capture the nuance of social change.
What we have been doing

Cultivating a Gender Responsive Impact and Knowledge System.

CARE Ethiopia’s Impact and Knowledge System applies methodologies and tools that help us collect, analyze, report on and learn from changes in gender roles and relations, including unintended consequences. The SNAP methodology, Outcome Mapping, Gender & Power Analysis, Rapid Gender Analysis in emergencies, PhotoVoice, SenseMaker, CARE’s Community Score Card (CSC) and Rolling Profiles are key tools and approaches used across our programming. The SNAP framework in particular has been instrumental in our Adolescent Girls Programming – as we were interested in understanding how strong or influential certain norms are for specific behaviors, and if and when norms are shifting and weakening. The aim of the approach was to be light and quick, and to develop and test the use of vignettes for analyzing social norms combined with already well-known and used methodologies (e.g., surveys, focus group discussions (FGDs). Recognizing the realities of implementation, the goal was to design a practical assessment and measurement framework that could somewhat easily be incorporated into implementation.

CARE’s Social Analysis and Action (SAA) provides a critical platform for integrating gender and power analysis, the use of both qualitative and quantitative methods and tools for monitoring and evaluating changes, and including other cross-cutting and sector-specific indicators to monitor throughout the process. CARE’s CSC is being used most specifically in service delivery focused initiatives (to improve quality service), but is also proving to be an important tool for identifying, promoting and measuring gender and social aspects related to women and men’s specific needs and entitlements. The CSC has proved to be an important platform for amplifying women’s voice in particular.

Contributing to CARE’s Global Evidence System.

CARE Ethiopia’s commitment to the organizations Global Evidence System entails integrating and reporting annually on a common set of 25 global indicators plus other supplementary indicators, as applicable to projects and initiatives. This allows for the collection and consolidation of coherent and comparable reach, outcome and impact data, at country, regional and global levels. As part of CARE’s

CARE’s Journey Piloting Social Norms Measures for Gender Programming

Beginning in 2014, a small team across CARE came together to develop and pilot new measures for social norms through an iterative learning process across three pilot sites in Ethiopia and Sri Lanka. Go to this link to read the report on the experience and learning on translating social norms theory into practical measurement tools for development programming, featuring the use of CARE’s Social Norms Analysis Plot (SNAP), a new framework developed to measure if and how norms are changing; qualitative vignettes; and survey questions.
global efforts to meet the Sustainable Development Goals (SDGs), CARE Ethiopia and our partners have contributed to positive impacts, especially for women and girls, especially in addressing SDG 1 – No Poverty; SDG 2 – Zero Hunger; SDG 3 – Good Health and Well Being; SDG 5 – Gender Equality; SDG 8 – Decent Work and Economic Growth; SDG 11 – Sustainable Cities and Communities; SDG 13 – Climate Action; and SDG 16 – Peace, Justice and Strong Institutions.

Applying the CARE Markers.

CARE Ethiopia uses simple, easy to use ‘Markers’ to help grade (on a 0-4 scale (Harmful, Neutral, Sensitive, Responsive, Transformative) whether our humanitarian and development work is prepared for, designed, and implemented in a way that ensures women, men, boys and girls benefit equally. The markers also show if our work will contribute to increasing gender equality, along with assessing the degree to which inclusive governance and resilience is integrated (see CARE’s Gender, Governance and Resilience Markers).

CARE’s Gender Marker in particular has helped us deliver on our commitment to achieving gender equality and empowerment for women and girls through both humanitarian and development programming. CARE’s Gender Marker specifically measures the integration of gender into programming along the CARE Gender

Recent analysis of CARE Ethiopia’s Gender Marker application indicates that 88% of CARE projects have adapted project activities to meet the distinct needs of women, men, boys and girls, supported by specific gender activities advancing gender equality through all three dimensions of CARE’s Gender Equality Framework: agency, structure, and relations. 27% are Gender Transformative and 48% are Gender Sensitive, with 59% of CARE projects were informed by an in-depth, project specific gender analysis of distinct needs, roles, relationships, protection risks and power dynamics of and between women, men, boys and girls.

CARE Projects by Level of Gender Integration
Continuum from harmful to transformative enabling us to improve on and support more effective gender integrated programming. The Gender Marker is also used in combination with the CARE Ethiopia’s Impact and Knowledge System to help teams reflect on the integration of gender in order to learn from and improve the gendered approach of our work.

The Spotlight: What we have learned

Investing in transformative measurement processes requires commitment from all levels (especially from Senior Leadership) and the adequate resources (time, $, the ‘right’ people (community members, staff, partners and donors). Ensuring staff involvement and closer oversight instills ownership over evaluative processes (from contracted out Baselines to End Lines).

Measuring social and gender norm change requires ‘human centered design’ approaches that are participatory, qualitative, transformative and empowering. The process of measurement itself should support meaningful reflection and social transformation – including for CARE staff and partners.

Preliminary data and anecdotal evidence suggests that an increase in female staffing lends itself to higher gender marker scores (see CARE Ethiopia’s Institutional Reform Report that captures the organizations gender transformation Journey).

Rapid Gender Analysis in CARE’s humanitarian programming is critical to deepening understanding and learning about both impacts and opportunities for more gender transformative approaches and interventions.

In our humanitarian programming especially, more effort is required in ensuring age disaggregated data is collected and changing protection risks and needs are mapped out, understood and resulting in appropriate program shifts.

Projects that generate excellent evidence and use quasi experimental designs often take one third of the budget. This can compromise quality of implementation and ultimately compromise the research findings - something that needs to be understood by donors.

The international bias for quantitative data is not beneficial when attempting to understand complex social change. Both quantitative and qualitative research and measurement approaches are required for understanding the pathways to social change, and normally have a higher $ cost. Its imperative that donors understand the value of both research approaches in producing robust evidence of what works and doesn’t work, and are prepared to cover these costs.