

Driven By Impact

Introduction and Purpose

CARE International approved [Vision 2030](#) in June 2020. V2030 lays out an overall direction for the Confederation of the impact we seek, the organisation we will become and the resourcing we need to achieve our impact. This report takes stock of **the impact we have achieved after 2 years**; it outlines what programme leaders of CARE will do to deepen and scale our impact and makes recommendations to National Directors and Council regarding priority areas of progress required in our organisation and our resourcing to accelerate our programme impact.

In Annex 1, you will find detailed analysis by impact goal, Annex 2 highlights the main documents reviewed to feed into this report and Annex 3 indicates who was interviewed/consulted.

Impact

CARE's impact data shows that more than 29.1M lives have been positively impacted by our work (15%) - this is a cause for celebration of the hard work of CARE and our partners. We are singularly placed amongst our peers to be able to measure our impact and report against the Sustainable Development Goals.

V2030 was developed in a very different world; since it was approved, we have experienced a global pandemic, increased conflict, and heightened consequences of climate change all of which have resulted in a huge increase in humanitarian need – increased hunger and food insecurity and deep economic crises affecting the poorest and particularly women and girls most. We have seen an increase in poverty

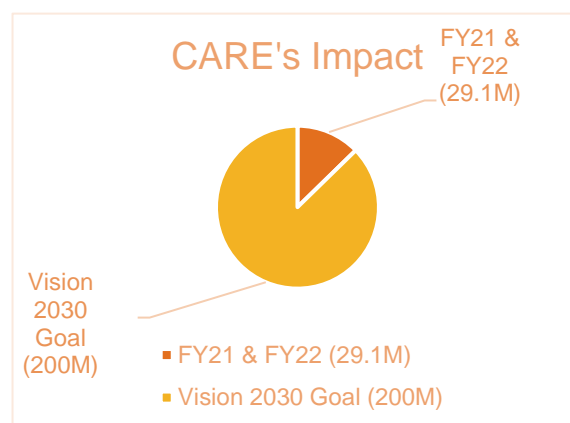
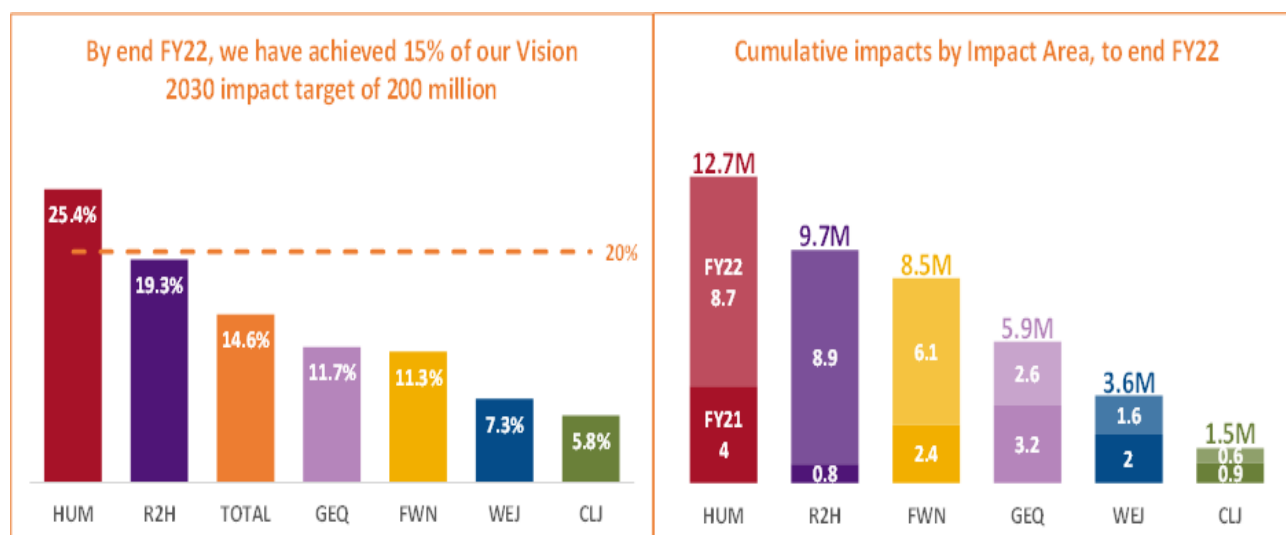


Figure 1 Note: Data is still being validated and the total for FY22 is expected to increase.

Figure 2: Summary of CARE's Impact – End of FY22



and social injustice¹. That our programs have demonstrated positive impact during this period is impressive. We are confident that we will achieve our overall 200M goal by 2030. At the same time, progress towards V2030 impact goals is inconsistent and our analysis indicates that this is due to the complexity of the contexts in which we work, our ability to consistently scale impact through addressing the deeper structural causes of poverty, as well as our ability to measure and validate impact. We seek to positively impact the contexts, increase our impact and our ability to measure it over time.

Summary Analysis of CARE's Progress – 2 years into V2030²

Impact Goal: 200M, total impact to date: 29.1M - 15%.

Data is still being validated and the total for FY22 is expected to increase.

Summary Analysis	Summary Actions
<ol style="list-style-type: none"> 1. We are on track to achieve our impact over V2030. 2. We have not adequately balanced the time we spend collecting and validating data, and time learning and making decisions based on the data. We have already taken action to shift this, and eliminated 40% of the PIIRS fields. We will reevaluate next year to further consider if more adjustment is needed, to right size our workload and maximize learning and informed decision-making. 3. Projects have challenges adopting the indicators (training, resources, capacity to measure) or don't report on indicators that are similar. 4. Across all impact areas (IAs) and in the context of gender equality impact, most of our impact is on building agency. There is very little reported impact on changing relations and transforming structures. 5. There are some surprises in the data that need further analysis (e.g., Asia with huge reach but very low impact, % projects NOT working with partners, decrease in WLO (Women Led Organizations) partners, etc) 6. At present there is a large concentration of impact in a small number of countries or programmes, we need to understand this better. 7. The pandemic still affects impact. Additional global challenges (hunger and worsening economic insecurity) have repercussions on our ability to contribute to more and lasting change 8. Most Impact Areas (IAs) expect greater impact to be achieved in the coming years, as IA strategies materialize (e.g., scaling of FFBS (Farmers Field and Business Schools), VSLA, Dignified Work), as advocacy processes succeed (e.g., US Government Farm Bill), or as we are better able to capture systems-level impact (e.g., COVID vaccinations - Fast and Fair) 9. Climate Justice is a new impact area; it has therefore had to develop new indicators, which are only recently being adopted by projects. Some are not reporting at all yet. In addition, for the last two FYs, we have observed very low reporting on climate change advocacy and influencing wins/impacts. 	<ol style="list-style-type: none"> 1. Ensure we measure high-impact work that is ongoing, including sustainably scaling solutions (e.g., FFBS, VSLA, Dignified Work solutions), advocacy (e.g., USG Farm Bill), and systems-level work (e.g., the Fast and Fair Initiative). 2. Improve guidance to measure IA and Pathways indicators and provide training, mentoring and Technical Assistance (TA) to more Project teams on how to measure impact 3. Pay increased attention to deliberately programming for and measuring change through our gender indicators particularly in relations and structures and improve the capture of impact that does not fully align with our indicators. 4. Be more intentional about capturing impact, with attention to large projects (projects with large reach or significant systems-level work) or projects that are strategic 5. Perform quarterly validation of impact data (Bogota outcome) 6. Do more sensemaking of the data, particularly exploring the connection between impact, gender, scaling pathways, and partnership because this will enable us to understand if the assumptions inherent in Vision 2030 are borne out to greater impact. 7. Reassess progress towards 2030 goals after FY23 data is reported and use this review of programme goals in V2030.

¹ <https://blogs.worldbank.org/developmenttalk/covid-19-leaves-legacy-rising-poverty-and-widening-inequality>

² In Annex 1, a more detailed analysis by impact goal highlights analysis by impact area (left hand column) and recommended actions to address concerns/gaps (right hand column).

Vision 2030 and the Changing World

V2030 lays out our intent to go beyond direct project level outputs (e.g. training teachers) to address deep relational and structural change in the broader system in order to achieve impact at scale and ensure that no one is left behind. This means, for example, identifying and addressing the underlying causes that keep girls out of school in order that all girls can access school and get high quality education. To do this, CARE must work with others locally in any given context.

It also means we need to act to influence global systems – the connection between our local and global work is critical. This is particularly important post-COVID where we saw the result of a poor health system globally (that meant some countries were able to stockpile vaccines, while others had none), where we are experiencing an economic crisis affecting the poorest most (e.g. in Sri Lanka and Latin America) and more recently where we have seen the conflict in Ukraine have direct consequences on food security across the globe (as Ukraine supplied 60% of the world's sunflower oil and Russia supplied huge quantities of cheap fertilisers). The result has been a massive, heart-breaking increase in humanitarian need, which is going unmet.

CARE's data indicates an increase in programming to respond to COVID-19 and to humanitarian need more

■ % people covered by UN humanitarian response ■ # People in need of humanitarian assistance
■ # People targeted by UN humanitarian response

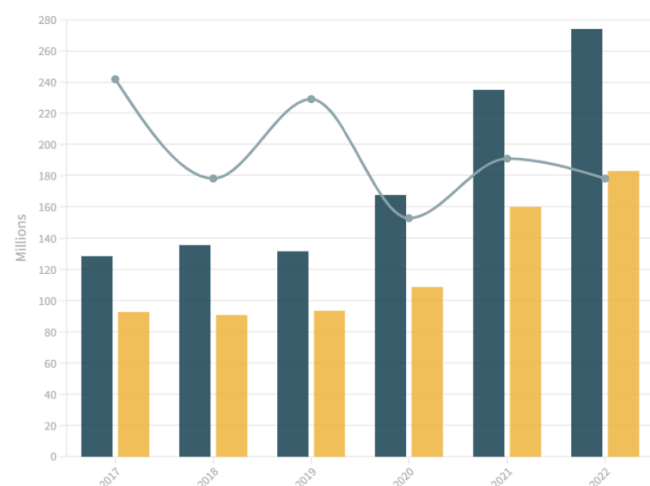


Figure 3: Source: LSE UK 2022

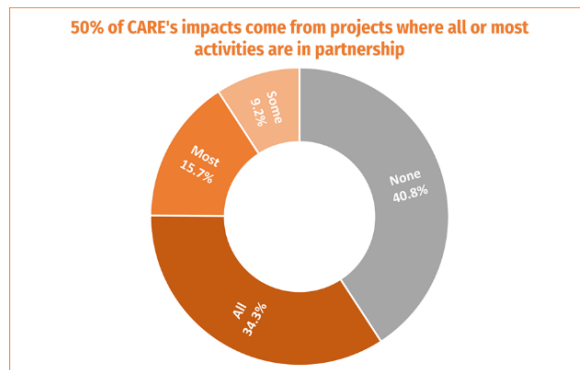
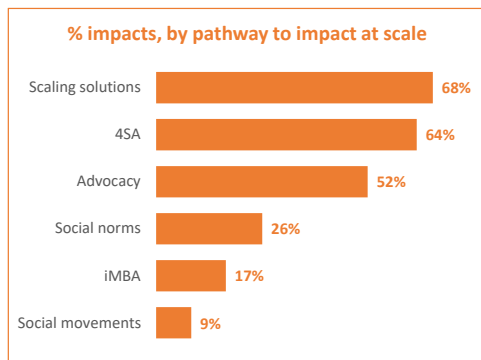
the most acutely affected by poverty and humanitarian crises.

V2030 lays out how to scale through 6 pathways to impact at scale: advocacy, social norms, social movements, inclusive market-based approaches, sustainably scaling models and systems strengthening and social accountability.

CARE's response: Gender Equality, Impact at Scale and Shifting Power

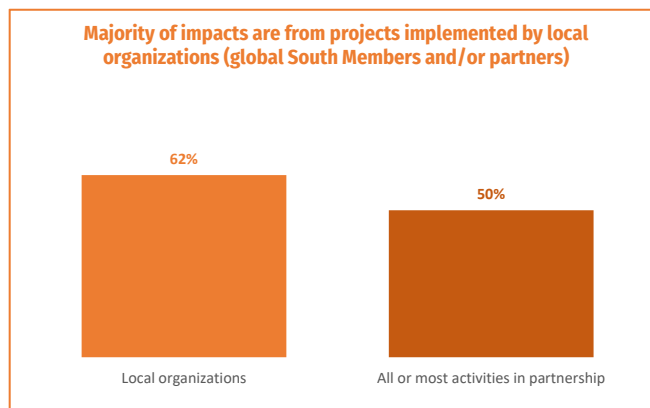
The next section of the report draws on multi-programme evaluations, studies, and reports to assess how well we are achieving our commitment to gender equality, impact at scale, and becoming locally led within our programmes. Emerging evidence confirms that programmes that advance gender equality seek systems level change (using the 6 pathways), and work in close partnership with local organisations play a central role in scaling CARE's impact.

broadly; in fact, most of the impact we have seen in the first two years of V2030 is in health and humanitarian programming. While the context and our mandate require us to respond to humanitarian need; moving forward, it is critical that both our humanitarian and development work seek to address the broken systems that are failing to serve people in the long term – and particularly the most marginalised. We need to be deliberately working across the nexus between humanitarian and development work to address increasing needs in the growing number of fragile contexts, and we need to advocate to donors that this is crucial and non-negotiable; we need to strengthen local systems and partners to respond to emergencies by preparing ahead, and we need to focus on gender equality – as women and girls are



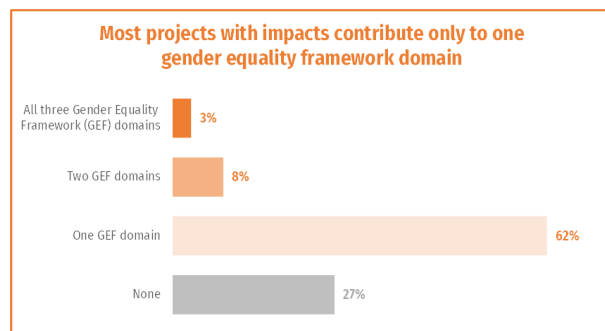
Our evidence suggests that integrating the pathways is effective; 68% of our total impact numbers came from projects that scaled solutions, and 52% came from projects that did moderate or intensive advocacy. Qualitative data indicates that using multiple pathways leads to more impactful programming. For example, linking our work with social movements and advocacy is a critical intersection that succeeds. Social norms change was found to be central to successful systems level change. Pathway integration and working with partners was also key for sustaining the impact of our work. CARE's focus on gender equality was identified as a key glue that ran through the pathways, supporting their integration. When CARE achieves systems level change ends, the impact is sustained after the funding including the ongoing positive impact of progressive policy and budget changes, stronger and more influential social movements and strengthened systems, and lasting effect of social norms changes (particularly in relation to gender) in households, communities, and institutions.

We need to systematically integrate gender equality into the work. At present, most projects with impact contribute to only one equality framework domain, however, our of change assumes that



the

gender theory



we will not achieve sustainable impact without working across all three domains (from individual 'agency' level, to relationship and structural change). While investments have been made in this area, they take time; more guidance continues to be needed. Close support will be required to help maintain momentum.

This is long-term work and requires us to think beyond the project and identify our role within the system. CARE needs to take a position of humility, deliberately working with others (such as governments, private sector, and civil

society) to collectively analyse what is working and what is not working in a system and collectively address the gaps. There are some impressive examples of systems-level impact work in [Nepal, Ethiopia, Ecuador, and Uganda](#). It requires us to be constantly learning and adapting, and it looks different in different contexts. In the first two years of Vision 2030, we have made significant progress in achieving impact and understanding how we will achieve greater impact. Critical to improved impact is improving programme quality.

We have defined [10 drivers of programme quality](#) and from our analysis this year the following areas seem to emerge as the **top priorities for the programming community at CARE**.

- **Integrate gender equality, taking an intersectional approach (Programme Quality Driver 1 – Gender Equality and Inclusion):** Continue to push for transformative change across all three domains of the theory of change (when appropriate across dev-humanitarian-nexus). Need to ensure that systems leave no one behind. Sustained attention should be paid to:
 - Consistently meet the commitments laid out in our gender equality & inclusion policy globally, by systematically programming across the Gender Equality Framework
 - Consistently using and applying our gender analysis and gender markers tools.
 - Include indicators in all proposals that measure change in agency, relations, and structures
 - Addressing Gender Based Violence (GBV) systematically in our work across the full continuum from mitigation, prevention to response
 - Engaging men and boys (EMB) for gender equality using our EMB guidance and tools.
 - Working in partnership. If we are to centre gender equality in all we do, we need to seek out partners explicitly focused on advancing women's rights or gender equality, with a particular focus on Women-Led Organizations.
 - Scale up CARE's Women Lead in Emergencies model, across all crisis-response programmes, given positive evidence of its impacts on both gender equality and quality and inclusivity of humanitarian assistance
- **Ensure we have consistent community level feedback and accountability mechanisms in place (Programme Quality Driver 2 - Accountability and Programme Quality Driver 3 – Do no harm)** and that we act on the feedback we receive from partners and participants. **Invest in and improve our ability to measure impact at scale**, we need to more consistently sustain our capacity to meet programme quality and impact reporting requirements across the system, we should also pay particular attention to reporting on advocacy, inclusive market based approaches, social norms change, service systems strengthening and social accountability, and sustainably scaling solutions.
- **Work more effectively with other actors (Programme Quality Driver 4 - Partnership):** Address our culture of compliance-focused inflexibility, risk aversion and high control when it undermines our ability to work with others. **Respond to consistent calls from local organisations to devolve power and control to them**, provide more flexible funding to cover their own core costs to sustain their work. Their expertise and experience should be acknowledged, drawn on and recognised. In both humanitarian and development contexts, they understand the local system, they are sustainable actors in the local system and they can help ensure that impact is sustained over time. CARE should not seek to replace existing capacities or take credit for work that is achieved by others. We will work internally to improve our understanding of the implications of this on our organisational resourcing, structures, policies, and practices in the coming years.
- **Consistently think and act systemically to achieve impact at scale using a programme approach (Programme Quality Driver 7 – Sustainable Impact at Scale):** We need to incentivise and resource long-term programmatic thinking and action. This involves telling our story of impact at scale and influencing and finding donors to fund this way of working. CARE adopted the programme approach in 2011, but our commitment to this has not been consistent or sustained. Projects should form a coherent set of initiatives over time to improve the system. We also need to be linking our work vertically – from the local level to the national level, from national to regional levels and to the global level – where, collectively, the Confederation has strong influence through advocacy to effect change in global systems (e.g. through the Food Systems Summit, the global humanitarian set up, the private sector). At present, our donors priorities

5 things we've learned from analysing how we're addressing gender inequality

- Advocacy and social norms change, together, can be powerful;
- Addressing GBV is critical;
- Men must be included;
- Working in partnership is important;
- Real change takes time, in both humanitarian and development projects.

and overall projectised funding model undermine this. The bulk of our work is still implementing projects that effect short term agency level impact. This means we also need to **diversify our funding and attract more flexible funding**: Funds that enable long-term programmatic work are essential to achieving our impact goals. Our high dependency on restricted, time bound funding is undermining our ability to work with partners, to adapt and change course during project implementation, to weave together projects into a coherent program to achieve impact at scale, and to measure the impact of our structural change work. We should also **identify strategic opportunities to influence global policies across all impact areas in line with systems level impact goals** – some impact areas are playing a critical role globally to influence change, these efforts are increasing; we need to sustain and increase this work (e.g. RISE, the Cocoa Initiative, influencing the global food and humanitarian systems).

- **Systematically link our humanitarian and development work (Programme Quality Driver 8 – Adapting and Learning)**, given the changing global context, CARE and the global humanitarian system needs to become more deliberate about and more comfortable with nexus approaches.

Recommendations to National Directors and Council

As National Directors consider their three priorities – the humanitarian review, investing for impact, and presence, engagement and collaboration, the Programme Leadership recommends that they:

- **Contribute to impact and be accountable for it**: ensure that in all your decision making and communication, our impact is what drives us. Celebrate and support what contributes impact. Do not be diverted by the ‘vanity metrics of reach’³.
- **Ensure local leadership**: Align our approach to risk and our risk tolerance with our partnership and local leadership commitments. At present, we have low risk tolerance around finance and compliance but high-risk tolerance in relation to our external commitments around partnership (e.g., Grand Bargain and Pledge for Change) which are not being met; partners consistently feedback that we have very high levels of bureaucracy, we duplicate this with other INGOs, and we are not paying for core costs to enable partners to manage programmes over time.
- **Break down barriers** – behave and structure CARE to achieve systemic impact, connect our local and global work, play roles in the global north to address the structural causes of poverty that reside there; put in place structures and incentives to build strong connections between humanitarian and development programming; take joint responsibility for greater efficiency as CARE considers where we should be, and how we should be there; explore better ways to come together to support our work in the countries where we seek to have impact.

³ Kevin Starr – Don’t feed the zombies. [Failing Forward 2023](#).

Annex 1 – Detailed Impact Analysis by Goal

Gender Equality Impact Goal: 50M; total impact to date 6M – 11.7%	
Analysis: <ul style="list-style-type: none"> ✓ 32% of CARE's total impact comes from projects that report change on at least two of the three domains in the Gender Equality Framework (Agency, Relations, and Structures (ARS)). ✓ Only 19 projects can report changes against all three domains. ✓ At present, projects are most able to report agency level change. ✓ Unless we have greater levels of impacts on relations and structures, in addition to agency, we will not be achieving our theory of change and not be able to achieve gender equal impact at scale. ✓ Many projects report integration of GBV, but very few report impact. ✓ Education has 182K impact to date while we know there are programs that could demonstrate much larger impact. ✓ GBV is advancing in tracking access to services challenged tracking indicators that measure attitudes or risk of experiencing GBV. ✓ Under Women's Voice and Leadership there is still way to go in measuring self-efficacy 	Actions to increase impact: <ul style="list-style-type: none"> • Increased momentum in our impact measurement. • Embed learning from the GoDeeper Learning Exercise, the 5 key insights from the analysis of Gender Equal Programs as well as the CI Gender Vision 2030 Learning Exercise. • Lean in more on relational and structural change as well as our methodologies for measuring gender equal impact in these areas. • Identify the largest reach projects who report GBV integration and follow up to see how to improve impact reporting. • Improve our integration of gender equal approaches in CARE India – which represents a high proportion of our overall global impact. • Improved coordination and impact tracking of advocacy initiatives focused on Women's Voice & Leadership

Humanitarian Impact Goal: 50M; total impact to date 13M – 25.4%.	
Analysis: <ul style="list-style-type: none"> ✓ Humanitarian need has increased, the number of humanitarian projects in CARE have doubled since 2020. ✓ Our goal is to see our humanitarian target go down over time as need decreases; hence we should consider if a 'proportional target' is more appropriate than an 'absolute target'. ✓ Significant proportion (+75%) of impact coming from indicators relating to water, sanitation, hygiene, and food support. ✓ Improved impact reporting this year results from looking at the projects with the highest variances between reach and impact. ✓ There are still discrepancies by region – e.g., Asia/Pacific has by far the highest humanitarian reach reported, but limited impact figures – much of this is due to COVID figures included within reach figures ✓ 90% of projects are at least gender sensitive. ✓ Increase in the number of projects reporting they <u>do not</u> work with partners. Progress is inconsistent, 	Actions to increase impact: <ul style="list-style-type: none"> • Complete validation of humanitarian outcome data: Expect an increase in impact of 2-3 million from continuing validation process • Sustain the progress made in offices with highest variances between reach and impact for evidence of impact in future years. • Look at the linkages between gender and partnership and impact. • Improved and consistent progress on working in partnership in humanitarian contexts and particularly women led organisations. • Increased attention to tracking impact of humanitarian advocacy – we have more resources (a Humanitarian Advocacy MEAL (Monitoring, Evaluation, Accountability and Learning) Advisor)

<p>some significant progress in some countries and a reversal in others.</p> <ul style="list-style-type: none"> ✓ Decrease in projects reporting they work with WLOs (Women Led Organizations). ✓ Little impact reported so far from Humanitarian Advocacy efforts. 	<p>who is well integrated with the rest of the Advocacy MEAL cohort and Advocacy Working Group.</p> <ul style="list-style-type: none"> • Scale up Women Lead in Emergencies (WLIE) as a core model across CARE's humanitarian response.
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Right to Food, Water, Nutrition Impact Goal: 75M, impact to date 9M – 11.3%	
Analysis: <ul style="list-style-type: none"> ✓ In FY22, reported impact has doubled compared to FY21. We know from Strategy 2020 that our ability to better capture impact improves over time. We have 8 years ahead. ✓ We anticipate significant 'wins' or tipping points to achieve the 75M because of the cumulative effect of programmes that we have started since 2020 which will translate into impact particularly: ✓ Significant impact will come from Farmer Field Business School scale up (e.g., governments adoption, increased funding in the upcoming 3 to 4 years). ✓ If we succeed in our efforts to get a more flexible and women farmers' inclusive USG Farm Bill, it will result in a substantial increase in impact. ✓ However, the world is a worse place compared to 2020 when we set the 75M target. All indicators have deteriorated (access to food, nutrition, food security, access to water), this may have a significant influence in our ability to reach the impact target. 	Actions to increase impact: <ul style="list-style-type: none"> • Improve our ability to capture impact through: <ul style="list-style-type: none"> ▪ Identifying the projects that have high reach numbers but not reporting impact. ▪ Providing TA to specific projects (large) before they submit data in the PIIRS to help aligning project information with PIIRS requirements. ▪ Organizing mentoring sessions for regional and CO focal points in a more systematic and interactive way. ▪ Developing a guidance note on common reporting issues and train CO and regional focal points. ▪ Carrying out catalytic impact studies.

Women's Economic Justice Impact Goal: 50M, impact to date 4M – 7.3%	
Analysis: <ul style="list-style-type: none"> ✓ We are not on track to achieve our 2030 impact goal, but we are confident that we will exceed the target. ✓ There is a lack of understanding of indicators, how to integrate them into projects, and how to successfully report against them. This is not the fault of country teams; the underlying reason is the organisational change around WEJ over the past year. ✓ As with the Right to Food Water and Nutrition, there are potential areas of high impact in the future e.g., Dignified Work programming which aims to have impact on 20M by 2030, the scale up and government adoption of VSLA resulting in an estimated 24M impact and WEJ related impact of Inclusive Market Based Approach (iMBA) ✓ iMBA has not yet used global indicators or created processes for harmonizing Vision 2030 metrics with project-level M&E. This means potential WEJ related impact from IGNITE, Care 	Actions to increase impact: <ul style="list-style-type: none"> • Some additional impact will be recorded by June 2023 (estimated to be approximately 1/2M) • Identify high reach/low impact programmes and follow up to understand better why impact has not been reported. • Improve guidance on use of impact indicators. • Work with programme and MEAL staff to improve impact reporting. • Develop robust reporting systems for large systems-level programmes like RISE. • Ensure iMBA WEJ-related impact measurement and RISE impact into PIIRS. • As the new WEJ global team perform their functions, increased

Social Ventures, Care Impact Partners is not yet captured.	collaboration across the confederation to increase WEJ impact
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Right to Health Impact Goal 50M; total impact to date 10M - 19.3%	
Analysis: <ul style="list-style-type: none"> ✓ The impact thus far is not a reflection of the intended impact we sought to have in our strategy (health systems strengthening and SRHR). This is not surprising given the pandemic and it is right that we adapted our work to respond. ✓ The pandemic highlighted the failures in the health system and our work in India shows that effecting lasting change in the health system enabled it to respond to the pandemic (although it was still overwhelmed and less able to respond to other health needs). ✓ COVID also highlighted how unequal access to health services is for different populations. ✓ 91% of Impact numbers so far come from India; only 4 other countries have more than 100K impact (Iraq, Uganda, Nepal, and Tanzania). ✓ There seems to be misalignment between the project portfolio and the PIIRS indicators 	Actions to increase impact: <ul style="list-style-type: none"> • Expect a significant increase in impact through validation of CARE USA COVID 19 impact data • Learn from and expand our health systems strengthening work as a confederation – learning from our work in India. • Increase consistent and coherent work in alignment with the strategy across the Confederation. Bring together CARE India, Raks Thai, Austria, Australia, Canada, France, Norway, and USA. • Influence the health system to ensure its ability to adapt to new demands and sustain on-going health services. • Carry out strategic and coordinated advocacy and investment to address the global shortage of Front-Line Health Workers, their professional development and compensation • Ensure our health work advances gender equality - particular attention to services that target women and girls; ensure that we are integrating gender analysis from the design of health programs and integrate Social Analysis and Action to all health programming to address exclusionary social norms. • Explore the misalignment between our projects and PIIRS indicators and resolve.

Climate Justice Impact Goal: 25M, impact to date 1.5M – 5.8%	
Analysis: <ul style="list-style-type: none"> ✓ We are not on track to achieve the impact goal by 2030. ✓ This is a new impact area for CARE with new indicators, which are recently being adopted by projects and some are not reporting at all yet. ✓ Need to adjust the indicators themselves: Some indicators have high program quality standards placed on them or are unclear. ✓ For the last two FYs, we have observed very low reporting on advocacy and influencing wins/impacts. 	Actions to increase impact: <ul style="list-style-type: none"> • Reword and clarify indicators for FY23 reporting. • Orient all project teams on impact indicators before the next reporting cycle. • Map-out all advocacy and influencing projects and provide TA on reporting. • Follow up where there have been no returns or low reporting. Identify the projects that have high reach numbers but not reporting impact to understand the issues and provide support for evaluation and reporting. • Provide TA to specific large projects before they submit data in PIIRS. • Organize mentoring sessions for regional and CO focal points during the impact data validation process in a more systematic and interactive way.

✓ There were not returns or low reporting from some specific programmes where we know programming has happened.	<ul style="list-style-type: none"> • Develop a guidance note on common reporting issues (e.g., projects reporting sample size of the evaluation as impact population) and train CO and regional focal points. Having such a document would also help with troubleshooting when projects ask for help. • Assess progress after FY23 data has been submitted and review impact goal/strategy.
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Annex 2 – Key documents feeding into this report

Name	Date	Author
PIIRS Impact Data	April 2023	CARE
Evaluating systems-level change and impact in CARE's programming in Ecuador, Ethiopia, Nepal, and Uganda: A global report – Exec summary	October 2022	CARE
Gender Equality through Savings Groups: Gender Integration and Gender Equal Approaches in VSLA Programming – ECA report (Rwanda, Burundi, Ethiopia, and Uganda)	2022	CARE
Her Voice: listening to women in action– Summary report	March 2023	CARE
Learning from Failure	2022	Rebecca Rossetti, MS, MPH and Tara Roth, MS, MPH
CHS report	April 2022	CHS
Sex and Age still matter	2023	Tufts, UNW, CARE
4SA Learning review	2023	CARE
5 things we've learned from analyzing how we're addressing gender inequality	2022	CARE Jenny Conrad
INTER-AGENCY HUMANITARIAN EVALUATION of the COVID-19 Humanitarian Response	2023	IASC
Emerging findings - Vision 2030 Learning Agenda (draft)	2023	CARE

Annex 3: Interviews and Consultations

Impact Area Strategy Team:	Claire Mathonsi, Amira Taha, Heather Van Sice, Juan Echanove, Joyce Sepenoo, Inge Vianen/Sarah Lynch, Davide Costa/Tim Bishop.
SLT PQI ND Champions:	Ashika Gunasena and Frederic Hauptert
SLT PQI:	Nidhi Bansal, Madhu Deshmukh, Michael Alandu, Vivian Thabet, Kjersti Dale, Aisha Rahamatali, Jay Goulden,
Kjersti Dale	CARE Norway
Daniel Seller, Elisabeth Schrieber, Karen Knipp-Rentrop	CARE Austria
Vivian Thabet	CARE Egypt
Alexandre Morel, Marina Ogier	CARE France
Lisbet Ilkjaer	CARE Denmark
David Leege, Brittany Dernberger	CARE USA
Nidhi Bansal	CARE India
Benoit Wyn	CARE Czech Republic
Viviana Zaldivar Chauca	CARE Peru
Budhi Bahroelim	YCP Indonesia
Merlijn Van Waas	CARE Netherlands
Rislan Ahamed	Chrysalis
Holly Robinson	Gender Consultant (global learning agenda)
Natia Katsia	CARE Caucasus
Maxime Michel	CARE Canada
David Sims	CARE Australia
James Huitson	CARE International Secretariat
Ebony Riddell-Bamber	CARE International Secretariat – Chair of Advocacy Working Group
Sarah Eckhoff	CARE USA – Senior Gender Advisor
Ximena Echeverria	CI Secretariat, Monitoring and Evaluation Coordinator
Emily Janoch	CARE USA
Lona Stoll	CARE USA