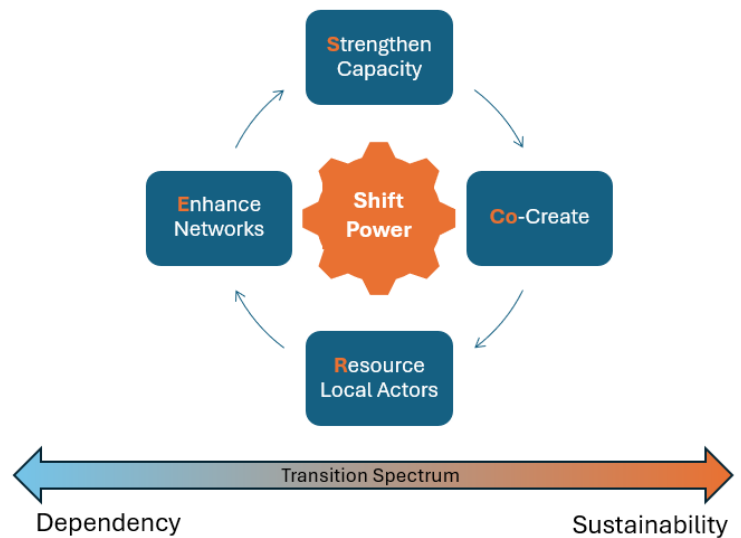




Localization at CARE

CARE seeks to contribute to the sustainable transition of leadership and ownership of development and humanitarian assistance to a range of public, private, and civil society partners. CARE's Localization efforts support diverse local actors in over 100 countries to define priorities, design solutions, drive implementation, and sustain efforts tailored to their unique development and/or humanitarian context. CARE does this while aiming to maximize impact across six priorities – Gender Equality, Humanitarian Response, Food Security, Water and Nutrition, Economic Justice for Women, Right to Health, and Climate Justice.

In line with CARE's **SCoRE Framework for Localization**, CARE fosters conditions and approaches that **shift power** to local actors by:



The SCoRE Framework for Localization

Strengthening Capacity: Enhancing the systems and capacity of local partners to implement and sustain programs and the change they enable, while supporting local leaders, amplifying marginalized voices, facilitating capacity sharing, and ensuring effective, inclusive, and accountable governance with and for their communities;

Co-creating: Bringing together the perspectives, needs, local knowledge and thought leadership of local partners, communities, impact populations, and other stakeholders to ensure that development and humanitarian responses are fit for the local context, demand-driven, and tailored to the unique needs of diverse communities, engaging them in design and throughout the project cycle we support;

Resourcing Local Actors: Channelling resources and strengthening systems to sustain and scale community level work, supporting local partners to absorb, grow, diversify, leverage, and manage their resource base; supporting the transition of key partners to direct donor funding and;

Enhancing Networks: Developing, strengthening and amplifying local networks that enable coordination, inclusive programming, capacity sharing, and collective action.

CARE's Theory of Change

CARE understands that in order to more sustainably meet needs in the countries we support and communities we serve, localization must shift power and grow capacity for local organizations to carry out their own mandates in response to local priorities. This requires new roles for organizations like CARE. Our Theory of Change thus hypothesizes that:

- **IF** we support local partners to identify their own needs with stakeholders and constituents and drive capacity strengthening addressing prioritized technical, operational, and organizational needs, while elevating their leadership, AND
- **IF** we apply a range of co-creation methodologies to regularly channel the perspectives, needs, and knowledge and leadership of local actors and communities into programming decisions, designs, delivery and documentation (monitoring, evaluation, learning), AND
- **IF** we support the channelling, leveraging, and diversifying of resources to build absorptive capacity of local systems actors that are critical to the sustainability of programs, services, and results across key sectors, AND
- **IF** we foster a robust and diverse network of local partners that are inclusive, accountable, responsive, and strive for broader engagement of marginalized / underrepresented populations to build effective, equitable, and mutually reinforcing relationships,

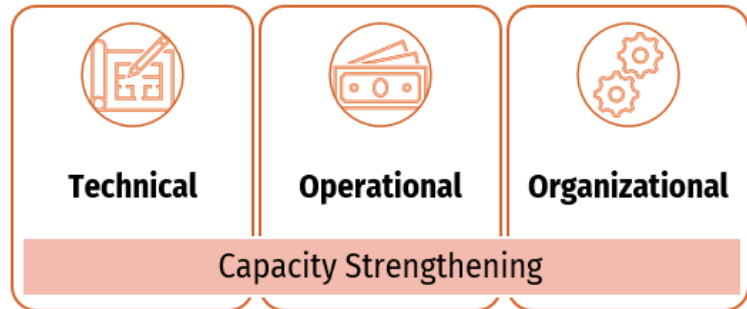
THEN, the actors and systems we support will be better equipped to lead the planning and delivery of quality results in an efficient, effective, and equitable inclusive way to achieve impact at scale, in response to demand-driven priorities set by local communities and partners. Consequently, leadership and funding for development, humanitarian, and nexus assistance will be successfully transitioned to local actors and systems for more sustainable impact beyond the life of the programs we support.

Who We Work With

CARE operates through a range of effective partnerships including **communities, government, private sector, and civil society actors** as well as **research partners** in both development and humanitarian crisis settings. Each requires tailored approaches and pathways toward sustainable solutions. Learning from decades of community impact, CARE recognizes that a layered approach is often critical for getting to scale and coverage, and that partnerships with a range of actors are necessary to ensure that systems are in place to sustain and resource community structures, organizations, and activities, and that local populations and marginalized groups have a voice.

Strengthening Capacity

CARE approaches capacity strengthening as Capacity Sharing, Mutual Exchange, and Accompaniment based on locally-driven priorities, recognizing that local knowledge and capacity are often well established and beyond our own. Our many years of field presence and cultivation of deeply trusting relationships enables CARE to meet our partners where they are. To tailor for the needs of our diverse partners, CARE has been shifting to a more facilitative role for capacity enhancement across **technical, operational, and organizational** domains, to help them move along pathways toward growth, and greater sustainability for programs and services. Capacity strengthening is based on joint-assessment, self-assessment and development of capacity strengthening plans based on priorities that are mutually determined.



Technical Capacity Strengthening

CARE’s **Technical Capacity Strengthening** aims to ensure partners have the knowledge, skills and agency to undertake essential programs, services and self-help activities across priority sectors including food and water, health, education and work, climate justice, and equality across the humanitarian and development nexus. This is achieved through competency-based training, reflective and analytical methodologies, mentoring, supportive supervision, and technology-based approaches. CARE’s quality assurance approach combines technical support for essential programs and services that are evidence-based, standardized and scalable, with engagement methods for ensuring they are responsive to those for whom they are designed. Our system strengthening aims to ensure that front line workers and those they serve have a voice in defining problems and solutions, and benefit from strengthened planning, resourcing and coordination, support and supervision, supply chain, and monitoring capacity as well as governance and accountability for programs and services.

Building Gender Technical Capacity in Cambodia



CARE’s Cambodia’s **Feminists in Action** project works with six local partners to amplify their agenda by providing skill-building and other support requested by the partners. This ranges from gender-transformative programming to training on financial accounting and safeguarding measures within their organizations. In addition, the French government funded project supports opportunities for networking between feminist organizations and the creation of alliances to promote learning, enhance knowledge, and carry out advocacy. Partners activities focus on different areas of gender and development—preventing and intervening in gender-based violence, reducing gender injustice and discrimination in the community, delivering the foundation of financial literacy, business strategy plans for urban women’s street vendors, and engaging men, boys, and duty bearers. **Each project fosters inclusivity and diversity, such as migrant women, women farmers, people with disability, LGBTQI+, and indigenous and ethnic minority groups across the country.**



Operational Capacity Strengthening

CARE's **Operational Capacity Strengthening** addresses needs for project planning, management and accountability, with emphasis on elevating local partner leadership throughout the full project cycle from overall design through annual planning, management, MEAL, as well as financial and award management, compliance and risk mitigation. CARE's Award Management Solutions team provides compliance and risk management support, for a culture of creative and accountable capacity enhancing stewardship of resources for greater impact. This includes resources for grants and contracts management, compliance oversight, operational risk management, and monitoring and analysis.

CARE emphasizes capacity strengthening for MEAL, along with participatory methods that elevate local voice and can be locally-led. CARE offers a multi-level and multi-lingual on-line training for staff of partner organizations which includes key information, templates and tools, covering: 1) Foundations of MEAL - capacity assessment, developing a theory of change, and gender transformative MEAL; 2) Building a MEAL System - design and planning, feedback and accountability, managing evaluations, MEAL for advocacy; 3) Managing and Communicating Data - responsible data management, data analysis, data visualization and communication, and adaptive management.

Strengthening Financial Operations in Cameroon

In Cameroon, CARE applied a mentorship model under a USAID transition award to transfer leadership of USAID's **Continuum of Prevention, Care and Treatment of HIV/AIDS with Most At-risk Populations (CHAMP)** activity to a strong local prime partner, while continuing support to local CBOs for greater sustainability. The phased transition process aimed to prepare a local prime for management, financial oversight, and reporting responsibilities, based on selection among national NGO applicants. Due Diligence, Institutional Development and Organization Strengthening (IDOS), and NUPAS Pre-Award Survey assessments were conducted with each partner, and tailored organizational capacity strengthening plans were co-designed and then co-managed. Capacity support included virtual and onsite training, joint implementation, quality assurance, and coaching throughout the phased handover. Working closely with USAID, CARE supported the prime through a successful NUPAS plus remediation plan. **By 2022, CARE had successfully transitioned 100% of project leadership and funding.**



Organizational Capacity Strengthening

CARE approaches **Organizational Capacity Strengthening** as an **accompaniment process**, with tailoring for our diverse range of partners including government, civil society organizations and networks, and the private sector. The pathway to growth and sustainability must address the specific needs of each type of partner, sector, and humanitarian or development context, meeting each partner responsively where they are. CARE supports local partners to apply proven assessment methodologies and tools, adapted to address unique technical, operational and organizational needs. Capacity strengthening needs are jointly prioritized to ensure they are demand driven, and that methods for strengthening are fit for purpose.

Our **Participatory Capacity Assessment (PCA)** process is based on USAID-supported OCA tools, focusing on domains of leadership, governance, strategic management, financial management, service delivery, advocacy and sustainability. This is adapted for emphasis on gender-centered and inclusive programming using CARE's **representation, inclusion, legitimacy, transparency, and accountability (RILTA) tool**. The participatory and demand-driven process involves board members, general members and key partner staff, and is adapted for the type of partnership or program. Methods include partner self-assessment, face to face discussion with CARE facilitators, and review of secondary data and documents. Findings on strengths and areas for improvement are jointly validated and used to inform an organizational development action plan. Partners take the lead in determining areas they can address internally, and those requiring external support.

CARE's comprehensive **Accompaniment Approach** brings together tailored packages of support activities to enhance the capacity of our local partners, based on capacity assessment plans, and the different pathways of our diverse partners and their type of organization. Our capacity strengthening approaches and methods aim to be responsive to the range of ways people learn and grow, including training, twinning, mentoring, coaching, and joint implementation with reduced and needs-specific roles for CARE over the life of the project.

Methodologies are adaptable to the different learning needs and preferences of the diverse range of individuals and organizations with whom we work. Capacity sharing workshops focus on building stronger monitoring systems, knowledge exchange platforms, jointly developed sustainability plans, feedback sessions, PCA domain-driven training, coaching, and mentoring, and cross-partner shadowing opportunities guided by domain needs. CARE and partners conduct joint reviews of PCA action plans and agreed performance improvement indicators. On an annual basis, local partners conduct perception-based self-assessments using the PCA tool, track progress of action items and key performance indicators, and provide feedback during partner meetings.

Organizational Capacity Strengthening for Humanitarian Partners in the Philippines



CARE's Philippines [Humanitarian Partnership Platform](#) supports partners to take a pro-active approach to emergency preparedness. As part of a pre-authorization process, CARE supports development of emergency protocols, building on long-term partnerships, pre-existing MOUs, ToRs, and completed due diligence processes. Proactively working to have these in place enables CARE to channel funds quickly, and for local actors to take the lead in emergency response efforts. We provide partners with tools for rapid needs assessment, demonstrating their use, accompanying them through the process and

reporting. Accompaniment continues through proposal development to help them to access the Emergency Response Fund.

Partner capacity needs assessments and planning incorporate [rapid gender analysis](#) within capacity needs assessments to ensure they are prepared with the gender sensitivity, commodities, and activities to enable women and girls to be part of emergency response. Network strengthening and training needs are based on analysis of capacity gaps and training needs of network members and includes SWOT and Risk analysis, during the network's general assembly meetings occurring twice yearly. Capacity strengthening plans are collaboratively developed with network members and determined through group decision-making and planning. The support also establishes agreements between partners to aid each other enabling expedited response when an emergency reaches a particular scale. Strong coordination with local government agencies, joint training, planning, and decision-making processes enable greater local resilience, enabling policies, and more sustainable efforts overall.

Actor-Specific Capacity Strengthening Pathways

CARE strengthens capacity working closely with public and private sectors as well as civil society organizations. While there are elements common to all three, understanding that their needs vary both for working with aid architecture and in the provision of information, goods and services, the critical milestones and outcomes require distinct pathways to sustainability. Our civil society partners are particularly diverse, encompassing local NGOs, community-based organizations and structures that are often less formal, and networks. This diversity requires CARE to play different roles and adapt to a range of needs in order to ensure our work is locally led. For example, when working with government partners and stakeholders, CARE plays roles of technical partner focusing on the strengthening of services and systems and supporting a range of engagement methods to ensure community voice, shared accountability, and locally led problem solving.

Public Sector Capacity Strengthening in Somalia

CARE works with our public sector partners to strengthen systems across education, health, agriculture and other sectors to help them to better achieve goals for equity, reach and quality. In Somalia, **CARE provides comprehensive support to the Ministry of Education, Culture and Higher Education (MoECHE)** and Federal Member States' Ministries of Education (FM MoEs), under the **USAID Adolescent Girls' Education in Somalia (AGES)** project. Through this work CARE has supported National MoECHE leadership to develop its Adult Education Policy and Curriculum Framework for non-formal education, a new Safeguarding Policy and related training by Regional and District Education Officers of school personnel, establish gender-responsive reporting mechanisms at school level, and rollout of social emotional learning programming and career guidance.



With our civil society partners, CARE often addresses similar needs, but also supports partners to identify needs for operational and organizational strengthening and growth, and together through accompaniment methods address gaps and needs. Locally led, globally connected, CARE takes a holistic approach to network development, connecting groups who are often marginalized, and linking them with platforms that enable them to amplify their collective voice, while supporting existing networks to evolve for greater sustainability and reach (See Enhancing Networks, on page 14). Finally, CARE partners with the private sector in many ways—to ensure information, commodities and services reach those in last mile settings, to systematically innovate and take promising work to greater scale, and as partners in sustainability allowing for resourcing beyond donor and government streams.

Strengthening Private Sector Capacity in Bangladesh



Under **Strengthening the Dairy Value Chain (BMGF)**, CARE supported its private sector partners in Bangladesh to **dramatically increase the inclusion of the poorest dairy farmers (from 2% in 2011 to 55% in 2016)**, while eliminating contaminated milk and reducing wastage by 83%, and at the same time increasing business and profits. Factors enabling success included last-mile input shops with lower priced inputs (food and medicine for cows), improved and decentralized collection centers enabling quality testing closer to home,

pricing transparency, tools and training for women farmers, and recognition and correction by the partnership

of a market failure from lack of transparency in testing - both a missed opportunity for buyers to recognize and reward quality milk, and incentive for farmers to invest in better production . A five-year post-project study found that market actors (livestock health workers, retailers) continue to function, and that BRAC dairy continued to source milk from collection points

Key Tools and Methodologies- Strengthening Capacity

Participatory Capacity Assessment (PCA)- A process based on USAID-supported [Organizational Capacity Assessment \(OCA\) tools](#), focusing on domains of leadership, governance, strategic management, financial management, service delivery, advocacy and sustainability.

CARE's comprehensive **Monitoring, Evaluation and Learning (MEAL) Modules**- A multi-level and multi-lingual on-line training for partner staff with content, templates and tools covering: 1) MEAL Foundations - capacity assessment, developing a theory of change, and gender transformative MEAL; 2) Building a MEAL System – design and planning, feedback and accountability, managing evaluations, MEAL for advocacy; 3) Managing and Communicating Data – responsible data management, data analysis, data visualization and communication, and adaptive management.

Guide to Participatory Outcomes Focused Monitoring- A guide used by CARE to help local partners grow their ability to design and implement qualitative monitoring using Most Significant Change (MSC), Outcome Harvesting (OH), or Outcome Mapping (OM), which are participatory, outcome-focused qualitative methods.

USAID Non-US Organization Pre-Award Survey (NUPAS)- An assessment tool to help a local organization determine if it is ready to work with USAID.

PACT's Government Performance Handbook- PACT's handbook helps users and their government partners regularly review, document, and analyze government performance against a set of standard measurements. The results can then be used to adapt program approaches to improve performance at an individual agency, project, or program-wide level.

Harvard Kennedy School's Problem Driven Iterative Adaptation (PDIA) Toolkit- A learning-by-doing-approach that can be used to support public sector capacity strengthening

Co-Creating

Co-Creation is in our DNA as thought leaders in the development, testing and evidence building of methodologies that give voice, build agency, and grow coalitions between communities, local actors, and the systems that serve them. Aiming to transfer power while increasing sustainability, CARE systematically engages local partners in co-creation from pre-award design, throughout the project cycle and beyond the life of the project.

CARE's [partnership standards](#) guide our actions and behaviours in relationships with other actors and hold us accountable to nurturing truly 'equitable partnerships' – collaborative relationships which systematically address power imbalances, which are grounded in mutual understanding and respect. The 5 Standards are (i) reciprocal; (ii) welcoming and respecting of our differences; (iii) seeking to reduce unnecessary burdens; (iv) respecting organisational autonomy; and (v) promoting good stewardship of the resources we are entrusted with. Our Standards inform conversations from the early stages of every partnership and become an essential tool for regular partnership reviews.

In 2023, CARE commissioned a company called Keystone Accountability to [conduct a survey with partners](#) to hold ourselves accountable to our broader partnership commitments. CARE scored higher than average (Keystone

benchmarks against more than 90 INGOs) in soft skills like respect, transparency, leadership, listening, and learning. Commitment to gender equality, and to working collectively with partners to promote gender equality in their own organizations scored especially high.

CARE also works to elevate the roles that our partners play, while phasing CARE's own role to one of supportive partner. For example, a co-lead initiative with local partners in Nepal, '[flattening the hierarchy](#)' established six dimensions for good practice among partners addressing power dynamics related to leadership, trust, decision making, coaching and mentoring, sub-grant management, and program monitoring. Methodologies such as participatory planning and budgeting (PPB), and locally-led monitoring, evaluation and learning methodologies support the transfer of ownership and power.

Co-creation for Climate Adaptation in Zambia

In Southern Zambia, together with partners, CARE co-developed and piloted an approach to [Locally-led Climate Adaptation \(2022-2024\)](#) for communities facing greater climate vulnerability due to droughts, floods, and erratic rainfall. The phased process includes climate vulnerability and capacity analysis, local adaptation planning, learning events and policy advocacy, and ongoing monitoring and learning. Key lessons highlighted the **importance of devolving resources and decision-making resource to community priorities** based on local planning and budgeting, ensuring meaningful participation of women and girls who bear a disproportionate impact of climate change, and multisectoral engagement and buy-in.



Many of CARE's community engagement methods for ensuring local partner and community voice throughout the project cycle have been widely applied, received national endorsement, and tailored for use across sectors, contexts, and programmatic purposes. Some examples include our transformative [Social Analysis and Action methodology](#), [Community Score Card \(CSC\) methodology](#), [Service System Strengthening and Social Accountability \(4SA\) methodology](#). These have been applied to overcome barriers to service quality and access, locally tailor approaches for social and behavior change by addressing constraining social norms and structural barriers and enable non-threatening processes for improved governance and accountability through shared ownership and problem solving.

Wherever possible CARE builds on methodologies already in place and locally endorsed, applying learning from these methods to our work. Additionally, CARE prioritizes capacity strengthening for locally-lead monitoring, evaluation and learning (MEAL) through its on-line course which is available to partners as well as CARE staff.

Using Community Score Card to Co-Design Vaccine Rollout in Malawi



CARE developed its Community Score Card (CSC) methodology in Malawi in 2002 and has since adapted it across country contexts and sectors as a means of systematic community engagement to ensure that public services are accountable to those they serve. During the COVID-19 pandemic, the [CSC was adapted in Malawi](#) to ensure trust, accountability, and accurate information while using it as co-design methodology for people-centered vaccine roll-out with potential to reach last mile settings. An SMS platform and WhatsApp groups enabled

remote CSC allowing stakeholders to identify major concerns around the vaccine and its delivery, understand significant perception gaps between providers and community members, women and youth, while creating locally-driven solutions to combat vaccine hesitancy and misinformation. Real-time data sharing enabled immediate decisions and actions, rapid feedback, and vaccine readiness in remote settings. Recognizing its value, **the CSC was included in the national budget as a cornerstone of the National Deployment and Vaccination plan** for accountability and adaptation, while protecting family planning budgets which were vulnerable to reduction.

Girl-led Action Research in India and Nepal

Under CARE's [Tipping Point Program](#) (2013-2023) CARE India and Nepal engaged girls from poor and Dalit communities in a beneficiary-led action research process which equipped girls to identify collective issues and put forward solutions to concerned stakeholders (government, community leaders and parents). The process explored the right to education, child and force marriage, access to adolescent-friendly health services, and traditional norms leading to the limitation and exclusion of girls and women. Two District Level Girls Right Forums were established which in turn put forward an 8-point memorandum to the Chief Minister and the Social Development Minister of Province. **Over 2000 girls were engaged in the overall process** which included a package of life skills, and trainings in advocacy planning, mentorship and leadership, and proposal writing training for a subset of young female leaders.



CARE applies co-creation methods for generating local innovation and evidence-building by establishing **locally-led learning agendas** within and beyond project cycles, and through the use of incubator and impact funds, and entrepreneurship and social venture methods. CARE is also recognized as the architect of innovative tools and methods to assess outcomes and impact of locally devised solutions such as out [Most Significant Change approach](#) to [Outcomes Harvesting](#), and methods applying community approaches such as [SenseMaker](#), [PhotoVoice](#), and [Constituent Voice](#) – giving voice to collective and shared experiences to those who are marginalized or lack formal training.

Youth-led Co-Creation in Bangladesh



CARE now supports USAID's **Bangladesh Integrated Youth Activity** (USAID Bijoyee) – a five-year, \$35M initiative grounded in *Positive Youth Development* (PYD) that aims to contribute to more effective, inclusive, locally-led development by and with Bangladeshi youth by enhancing the capacity of local youth-led organizations while preparing them to directly receive funds. Rooted in power shifting and power sharing, Bijoyee aims to model localization, youth leadership, empowerment, and inclusion in its management structure, with CARE initially leading, while strengthening

capacity of youth-led organization partners to take over the consortium leadership in the 3rd year. **Bijoyee prioritizes inclusive youth participation in design, staffing, management, monitoring, and research, fostering internal and external transformation in power relationships and gender and social norms.**

Key Tools and Methodologies- Co-Creation

Social Analysis and Action (SAA)- A facilitated reflective process, adapted for use across sectors to bring community members together to solve challenges, facilitate social and behavior change, and improve governance and accountability, while building shared responsibility and leveraging local resources to co-design development solutions.

Co-Creation: an Interactive Guide- A USAID guide to undertaking transformational co-creation processes.

Community Score Card (CSC)- A participatory process that enables community engagement with service providers to track progress on priority challenges and solutions using citizen collected data.

Rapid Gender Analysis Toolkit-A five-step process with links to tools to examine gender roles, responsibilities, capacities and vulnerabilities, which is used for program design and later for problem solving.

Constituent Voice – A methodology for getting community groups involved in planning projects and defining success, giving and getting feedback for performance improvement, as basis for adaptive management.

USAID Collaborating Learning and Adapting (CLA) Toolkit- Curated tools and resources from USAID that can be used to help integrate CLA into development work.

USAID Documenting Adaptive Learning Toolkit: Templates and Resources to Support the Documentation of Adaptive Learning.

Resourcing Local Actors

Based on decades of experience with our donors and systematic input from our local partners, CARE has been updating our own systems to be more flexible and responsive to local needs. Our **Due Diligence** processes are tailored by the type of partnership as well as the level, complexity, and flexibility of funding sources, with an adapted approach for emerging and institutionally young partners. In response to a global survey of local partner perceptions of critical 'pain points,' and another focused on learning from successes (as defined by local partners), CARE has been systematically updating its **systems and procedures** to improve simplicity, efficiency and equitability in its sub-grants management, reshaping our approaches to enable more rapid fund transfer,

particularly in humanitarian aid context. To be responsive to demand-driven capacity needs of our local partners who aim to avoid dependence on a single donor and seek to diversify their resource base, we support them to develop resource mobilization strategies and/or action plans. This may include cost recovery for services, working with private sector partners, and pursuing funds from other donors. Within networks this would also include capacity and resource sharing and pooling of funds.

Support for Transition Awards. CARE has been working to prepare our long-term local partners to be better able to receive direct funding from USAID. Under recent and current awards, CARE facilitates the transition of partners to enable their direct funding based on the completion of cycles of targeted capacity building and resource transfer. Through a mentorship model, CARE works to transfer management, financial oversight, and monitoring/reporting responsibilities to the identified local prime, using a phased approach which helps them to assume responsibility for supporting other local subgrantees, bringing new partners on board to ensure geographic and target group coverage. The model has provided tailored accompaniment and the progressive transfer of staff, implementing sites, and skills to local partners.

Leading a Transition Award in Cameroon

In 2019, CARE received a USAID transition award under the **Cameroon CHAMP Project** (2014-2022) to transfer program, administrative, and fiduciary management to a lead local NGO partner. An application process identified Care and Health Program (CHP), a local NGO responding to HIV and reproductive health and rights of vulnerable populations, to take over as prime. In a subsequent phased process, CARE transferred the lead to CHP which had three regional sub-offices and experience with international donors but no direct USAID funding to date. Due Diligence, Institutional Development and Organizational Strengthening (IDOS) and NUPAS assessment (the latter in collaboration with ASAP) led to tailored capacity strengthening plans. To maintain support for other local implementing partners, phase-over began with the Douala sub-offices, transitioning the other geography and headquarters and the CHP office in Yaonde, in 6-month increments. CARE's capacity strengthening and accompaniment focused on tools, systems, governance structures, training, coaching, and M&E; technical and program transition was accomplished through joint planning, review of policies, systems and procedures for quality assurance, and co-design, and joint supervision. CHP communicated directly with CBOs and regional partners, national and regional structures, and clinical partners. **Staff as well as program phase-over enabled the program to continue to achieve its targets with CHP ready to take over full leadership after a two-year period.** Learning from CARE's evaluation of the Transition found the decentralized approach to be necessary along with simplified systems for fund transfer, HR personnel and additional financial training by the local prime for its subgrantees, while the readiness of existing CBO partners enabled a smooth transition.



Resourcing Local Actors in Humanitarian Settings

CARE has robust processes and infrastructure needed to ensure smooth sub-granting across diverse contexts, with agile, administratively light grant-making systems developed for its 2022 Ukraine humanitarian response, and its BHA funded Women's Voice and Leadership in Emergencies small grants programming in Kenya and South Sudan. Our policies, procedures, tools and templates are translated for ease of partner use. To facilitate better preparedness for rapid response and efficient resource transfer, CARE provides training in use of Modality Decision Tools (MDTs) for CSOs and local government officials. Humanitarian responses present significant localization challenges, with a remarkably low % of humanitarian response funding reaching local partners (1.2%

in 2022) which is a major barrier to rapid response. Recognizing the urgent need to significantly accelerate transfer of resources to local partners for a faster and larger scale emergency response, CARE has been evolving and replicating its Humanitarian Partnership Platform (described below) demonstrating its potential with 76% of humanitarian funding reaching local partners, and better reach of the response.

Resourcing Local Women's Groups in Humanitarian Settings



Under USAID's [Women's Voice and Leadership in Humanitarian Settings](#) program, CARE works to advance locally-led capacity strengthening with local partners in Afghanistan, Colombia, the Democratic Republic of the Congo (DRC), and Nepal. One local partner serves as the lead in each country, supporting a cohort of 15 grassroots women-led organizations (WLOs). Each country has a separate local learning partner that implements the project's monitoring, evaluation, accountability, and learning plan. While set in humanitarian contexts, the approaches, model for local leadership, and resulting capacity gains provide highly relevant learning for women-led organizations, networks, and those serving marginalized groups in development contexts.

Getting Humanitarian Aid Directly to Local Partners in the Philippines

CARE has been supporting USAID in the Philippines through the [Humanitarian Partnership Platform](#) (HPP) initiated in 2015, together with a network of local NGOs, cooperatives, private companies, faith-based groups, and women's organizations from across the country. Humanitarian responses present significant localization challenges, with a remarkably low % of humanitarian response funding reaching local partners (1.2% in 2022) which is consequently a barrier to rapid response. This platform sought to address this and other challenges, resulting in ground-breaking improvements in resource transfer, with **76% of humanitarian funding reaching local partners, enabling better coverage of the response.** Careful learning with local partners identified four important shifts that made this possible – a pre-authorization process to enable partners to access resources for rapid assessment and distribution; gender mainstreaming enabling solutions to practical challenges limiting participation of women and girls in the response; more effective coordination and partnership across diverse local actors for better coverage in last-mile settings; and capacity strengthening based on the perspectives of local partners and communities. The platform as well as the learning have endured beyond the crisis allowing better preparedness, operational efficiency, feedback and accountability mechanisms, and enhanced capability of local partners. The approach is now being adapted for use in Nepal and Malawi.



CARE's Private Sector Strategies for Localization

CARE works closely with private sector actors for a wide range of programmatic as well as resourcing purposes. These enable the work we support to achieve more sustainable resourcing of commodities, community service providers that complement the public sector, and reach into last mile settings. As such they constitute a critical pathway to make programming more sustainable by creating markets and responsiveness to market forces, demand for goods and services, supply chains, leverage of local resources in problem solving, and support for local networks evolving from our social enterprise and social innovation incubators. Women's economic empowerment is central to our work with private sector entities. Strategic private sector alliances are essential

components of CARE's work in agriculture, VSLA scale-up, safer work environments for women, health social enterprise work, and climate justice.

Raising Capital for Women-Owned Companies



INVEST engaged CARE USA to raise capital and develop the technical assistance facility for the [CARE SheTrades Impact Fund](#), a blended finance gender investment fund in collaboration with Bamboo Capital Partners and the International Trade Centre. The fund finances companies that are women-owned and/or women-led, have a large female employee base, produce essential goods or services that improve women's prosperity, or procure from women-owned or women-led businesses. **By offering capital alongside technical**

assistance, the fund aims to help its investees address unconscious bias, incorporate women's input into company decisions, and improve policies and practices to reduce inequities. Market changes have required responsiveness from CARE and the fund partners to ensure that the fund meets investor demands while maintaining its focus on impact.

Innovating with the Private Sector to Strengthen Local Business in Zambia

In the [Peri Urban Community Driven Models for Equitable Services \(COMEQS\) Solid Waste Project](#) (2014-2018), CARE worked in partnership with the Peoples Process on Housing and Poverty in Zambia, and the Water Trusts of three local towns, the Lusaka City Council, and the Lusaka Water and Sewerage Company to keep trash off the streets through a locally devised and tested fee system for cost recovery building on local water trusts. The results included stronger businesses (**profits increased 8.6 times**), regular and better paid jobs (from \$42 to \$160 monthly; 64% are youth and 62% are women), and less illegal trash dumping, with a modest investment from UKAID and Comic Relief (\$1.5m), benefiting over **300,000 satisfied people now living in cleaner neighborhoods**. These water and solid waste systems continue a decade later; success is attributed to putting communities in charge of solving their own infrastructure problems.



Public-private Partnerships in Madagascar



USAID supported a CARE-led consortium to test private sector models for sustainable water and sanitation (WASH) services in rural Madagascar, with strong accountability mechanisms between government, private sector and citizens at the core. Through effective public-private partnerships, [the RANO WASH project](#) demonstrated feasible approaches to ensure strong community engagement, service quality, and effective governance to keep partnerships equitable, sustainable and affordable for sanitation, hygiene and water quality. This involved developing and strengthening markets, business

models, and entrepreneurship for user-preferred WASH services and products, while increasing provider access to financial services and products to expand their enterprises.

Community-Led Total Sanitation (CLTS) was developed to increase demand and strengthen markets as well as practices. Commune-level system strengthening (commune development WASH plans, commune WASH agents and CLTS) linked with regional and national policy and strategy proved critical for coordination, decision making, and capacity strengthening. **Retrospective analysis of the learning and adaptation process has demonstrated that 95% of communities served remained free of open defecation after 2 years beyond life of project.**

Key Tools and Methodologies- Resourcing Local Actors

CARE Partner Funding Agreement and Due Diligence Toolkit- An Internal toolkit with due diligence tools and program eligibility assessments that helps right-size local partnerships based on the capacity of the partner.

USAID Modality Decision Tool- Tools to help local actors to be better prepared for rapid response and expedite resource transfer in emergencies

USAID Social Enterprise Business Planning Workbook- A tool developed in partnership with PEPFAR to support social enterprise leaders. Originally designed for social enterprises in the HIV space.

USAID Social Enterprise Readiness Assessment- A decision-making tool to help organizations decide if they want to shift to a social enterprise model

Enhancing Networks

CARE aspires to be the most dynamic, diverse, and largest network of organizations and individuals fighting poverty and standing with those in crisis and for over 77 years has worked to establish, nurture and engage local networks to unleash the creativity and collective action of a locally-led, globally connected network of social enterprises, country office platforms, local organizations, civic participants, and private sector partners operating in more than 100 countries. Through network formation, CARE works to facilitate space for marginalized groups to find their collective voice in advocacy for greater quality and social justice, ensuring local leadership as the network matures.

CARE uses its role as convener to bring longstanding partners together in robust networks and social movements, while creating platforms for those seeking to work collectively but lacking formal institutions to bring them together. Recognizing the diverse range of networks already established, CARE also plays roles of ally and resource partner to effectively support locally defined movements, and through its global platform CARE works as amplifier to help propel the stories of grassroots movements to reach global audiences.

Rather than adhering to traditional partnership models - where movement actors are frequently brought onto a program or project as a subgrantee or implementing partner - CARE works with movements through the accompaniment framework. This envisions CARE as supporting, resourcing, and promoting the agenda and vision of movement actors, decentralizing our role while elevating the role and voices of grassroots activists.

Establishing a Global Network of Village, Savings and Loan Association Members

As a pioneer in supporting local entrepreneurship and village savings and loan activities (VSLA), CARE has been implementing a VSLA scaling strategy which globally aims for the most impactful routes to reach 62 million VSLA members by 2030. The pathway to greater scale and sustainability relies on four pillars – integrating VSLA as a foundation of development programming, engaging governments as scaling partners, engaging corporations as scaling partners and engaging VSLAs in supply chains and distribution networks, with adaptation for humanitarian contexts and actors.

Through decades of development, CARE has established a global network of over 800k VSLAs, with over 17m members, including over 13.7m women across 64 countries. Beyond the economic empowerment and asset development that it offers members, VSLAs provide social affiliation, a collective voice, and a platform to rapidly deliver information and support addressing needs across sectors (e.g. epidemic response, WASH).



Fortifying Domestic Workers' Networks in Latin America



CARE strengthens local systems and networks while leveraging our influence to connect local changemakers to global movements. For example, since 2010, CARE has worked with **organizations of domestic workers in Latin America – particularly women's domestic workers** – to promote their right to dignified work, and to connect these organizations to networks, governments, social movements, international organizations, and the private sector at national, regional, and global levels to better support a collective agenda of domestic workers' movement in the region. Under Equal Value, Equal Rights,

CARE established partnerships in Ecuador, Peru, Brazil, Guatemala, Mexico, Colombia, and Honduras to engage in research, exchange experiences, communications strategic planning, while building coalitions and capacity, with the goal of influencing public policies, organizational strengthening, and improving the lives of more than 10 million domestic workers across the region. CARE leveraged its global role to help convene a regional alliance for domestic workers' rights, connecting global and regional organizations with regional domestic workers' movements. Through alliances with women's associations at national and regional levels, and the strengthening of a regional network focused on domestic workers, CARE has helped press for important changes in national legislation and contributed to the **ratification and implementation of ILO Convention 189 (protecting the rights of domestic workers) in Ecuador and Bolivia, as well as the ratification of the ILO Convention 190 (violence-free workplace).**

Tapping the Power of Networks for Data

CARE's [Women Respond Initiative](#) builds on CARE's Rapid Gender Analysis work, needs assessments, and our longstanding relationships with women leaders and networks all over the world to better understand the unique situation COVID-19 has presented and to use that data to adapt our programming and advocacy efforts to meet those challenges. It puts women's voices and experiences at the center of CARE's global COVID-19 response and provides unique insights into women's experiences leading, the evolving challenges they face, and their advocacy with leaders at local and global levels. Based on findings from this research, CARE released the She Told Us So report in 2020 and the follow-on She Told Us So Again study in 2022. These reports found that 55% of women reported gaps in their livelihoods in 2020, and 71% reported gaps in 2022; 41% and 66% reported food security issues in 2020 and 2022 respectively; and, in 2022, 63% of women said that their greatest need is mental health support. Based on feedback from this Initiative, **CARE has advocated globally for greater equity in programming**, a renewed focus on the needs and priorities of women and girls as identified in the study (including livelihoods, food, mental health, and gender-based violence services), investment in women leaders, and better data quality.



Growing Networks to Empower Garment Workers



As one of five Impact Growth Strategies in which CARE has invested resources for multiplying our impact at scale, [Made by Women](#) has proven its potential to **economically empower 8 million women garment workers** through dignified work. Made by Women engages women, businesses, governments, and civil society partners across ten countries in Asia (Bangladesh, Cambodia, India, Indonesia, Lao PDR, Myanmar, Nepal, Pakistan, Sri Lanka, Vietnam) and in Ethiopia, addressing violence and harassment which are critical barriers to safe employment.

Working in partnership with the International Trade Union Confederation (Asia Pacific) has been instrumental in helping us learn how to work with trade unions while networking and connecting home-based and women factory worker collectives to wider civil society platforms to strengthen women's leadership and amplify the voices of women garment workers. Nurturing network development has been an important pathway to both sustainability and scale of women's economic empowerment, with both positive and cautionary learning about power shifting.

Key Tools and Methodologies- Enhancing Networks

[Advocacy Influencing Impact Reporting \(AIIR\) Tool](#)- A CARE tool that local networks can use to document and measure the impact of their advocacy efforts.

[Network Field Guide](#)- A set of tools for designing and implementing networks

[PACT Network Strengthening toolkit](#)- A set of educational publications developed by Pact's Capacity Development team that explores the theories, approaches, and step-by-step techniques of analyzing and strengthening networks

Measuring Results

CARE's internal global systems track relevant outcomes for our localization and sustainability efforts, and aim to answer questions that reflect power shifting, the nature of the partnership, partner roles in a project, what portion of projects have a learning agenda that was defined and implemented with local partners, and local feedback and accountability mechanisms involving local stakeholders in design and feedback. CARE is currently undertaking efforts to begin measuring and reporting on the following indicators:

- % of CARE's projects ensuring local partners are engaged or leading in each aspect of collaboration with CARE noted above
- % of project funds reaching local partners
- % of projects which have local partners providing technical leadership in one or more areas
- % of projects with locally defined learning agendas

In FY 2024 alone, CARE:

- Worked with over 1,274 local partners
- Carried out 47% of its activities with and through local partners, with 32% of activities including at least one partner that was a local women's rights and/or women-led organization
- Channeled 22.6% of program funds through local partners (\$198 million).



For more information on CARE's Localization work, contact Emily Usher Shrair at Emily.Shrair@care.org