



CARE International's Accountability

Current State Assessment and Emerging Approach

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INSTRUCTIONS

This document is interactive – with a number of ‘pop ups’ to provide more details or illustrative examples of the core content. To navigate:

- Click on the Table of Contents titles to jump to the relevant section. You can always click on the CARE logo on any page to take you back to the Table of Contents.
- Click on the hyperlinked words to see the related pop up.
- Click on the arrows to move left and right through the document.

Purpose

THE OPPORTUNITY

CARE recognizes that this is an opportune moment to bring together and leverage its commitment to and practice of accountability, both internally and externally, with a number of factors aligning:

- Learning from the implementation of the Humanitarian Accountability Framework over the past 5 years, and the momentum building around integrating the 'next generation' Core Humanitarian Standard that CI has played a key role in shaping;
- The pilots of an initial draft of a CI-wide Accountability Framework over the past few years, with findings from those involved, as well as other good practices led by different parts of the organisation;
- CARE's active membership in the INGO Accountability Charter, and the findings from their reviews over the past two years;
- Learning from and engagement with peer INGOs and their efforts to strengthen their accountability;
- The accountability commitments of the CARE 2020 vision and Program Strategy;
- The CI Governance Program Framework (GPF), laying out CARE's approach to inclusive governance in its programming to achieve sustainable development aims, and also committing to internally embodying the principles and practices of good governance and accountability that it promotes;
- The external drive for more accountable development in line with the changing role of INGOs and the Sustainable Development Goals, and the growing opportunities of digital innovations;
- CARE's governance reform and membership development work, whereby new governance mechanisms are being formed and the rights and responsibilities of members are being redefined;
- The set-up of the CARE Global network, and [the mandate for the CI Secretariat](#) to develop and host an accountability framework

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- The accountability commitments of the CARE 2020 vision and Program Strategy;
- The [CI Governance Program Framework \(GPF\)](#), laying out CARE's approach to inclusive governance in its programming to achieve sustainable development aims, and also committing to internally embodying the principles and practices of good governance and accountability that it

“Be it resolved that the CI Board endorses the development of CARE Global as a networked approach to enhance organizational effectiveness, and approves conferring clear authority and resources for the CARE Global “core” to administer the network, provide CI-wide accountability, and lead or facilitate critical shared initiatives on behalf of the confederation. The CARE International Membership commits to supporting the development of CARE Global and authorizes the CI Secretariat to develop and host an accountability framework, and put in place the capacities, binding tools and authority to hold all parts of the network (COs, regions and members; CG teams and working groups) accountable to 1) alignment and contribution to global impact, 2) financial viability, 3) compliance with CI wide standards, 4) contribution to shared initiatives and priorities.” (CI Board Nov 2015)

THE ASK

As a first step, the Program and Operations Committee commissioned a consultancy by Keystone Accountability to be co-led by the CI Secretariat's governance team, the CI Emergency Group's accountability function, and the CARE UK governance team, to assess CARE's current state accountability and recommend ways forward. This document summarises the key findings and suggestions from their report and builds on them to propose a way forward for FY17. It is structured in two sections:

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- I. Defining Accountability and Current State Assessment; and**
- II. Draft Framework and Next Steps – for Consultation and Feedback.**

The intention is to use it for broad discussion and consultation across CI, as well as with several key external experts, to come to a common understanding about CARE's approach to accountability and the steps required to get us there. Please engage, discuss and feed back!



SECTION I: DEFINING ACCOUNTABILITY AND CURRENT STATE ASSESSMENT

Defining Accountability

The INGO Accountability Charter defines accountability as:

- being transparent on what the organisation is, what it commits to doing and progress achieved
- engaging key stakeholders in meaningful dialogue to enable continuous improvement for those we serve
- using power responsibly and enabling stakeholders to hold us to account effectively

(Accountability is) The process of using power responsibly, taking account of, and being held accountable by, different stakeholders, and primarily those who are affected by the exercise of such power ([The Core Humanitarian Standard](#))

“Accountability is the people’s right and an organization’s obligation to account for its activities, accept responsibility for them and to disclose the results in a transparent manner. Accountability helps in achieving the CIC impact goal of decreasing rural poverty, vulnerability and social injustice in the South Caucasus and improving conditions for sustainable development, thereby contributing to stability and peace in the region. Accountability is a means by which we fulfil our responsibilities to our impact population and other stakeholders and the ways in which they may hold us to account for our decisions, actions and impact.”

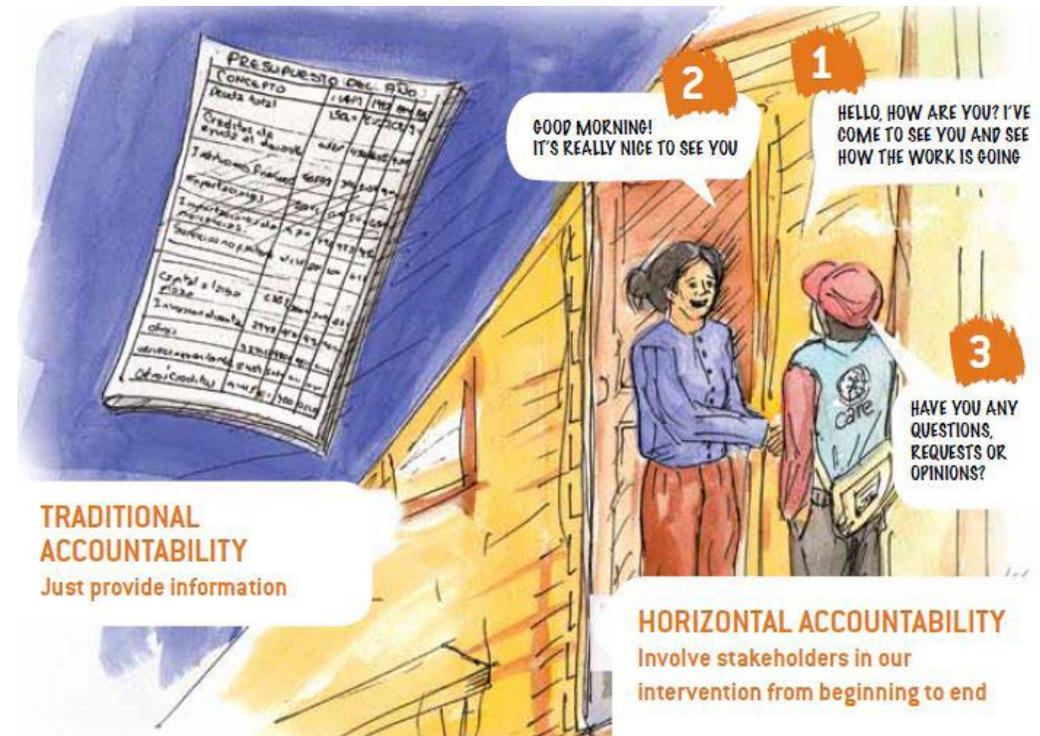
CARE International in the Caucasus Accountability Framework



All interviewees for the Keystone report agreed that an Accountability Framework in CARE should set out:

- why and how power holders are expected to listen and account to those people affected by their decisions and actions.
- how groups with little power (both internal and external constituents) are enabled to effectively hold CARE management, staff and implementing partners accountable for the commitments they have made and for the effects and impacts of their decisions and actions.
- And to describe this in a way that everyone at every level of the CARE network can commit to its principles, and use it to exercise meaningful voice as an integral part of CARE’s standard learning, decision-making and performance management systems.

“Accountability is not separate from performance management. You do not have performance management and then add on accountability. Accountability must be seen as a built-in feature enabling an agile and responsive management practice - the way decisions are taken, performance is managed, and success is defined and measured.”



Current State Assessment

STRENGTHS:

- New guidance for implementing the inclusive governance approach and a [governance framework](#) that could be applied internally
- Strong experience base with [humanitarian accountability](#) that can be built on
- [Pockets of good practice](#) and experimentation across CARE
- [Existing data and performance mechanisms](#) that could be adapted, streamlined/made coherent and used more intentionally
- Commitment to report on progress against and contribution to CARE 2020 Program Strategy through a common reporting framework
- New spaces in the CARE Global network (e.g. National Directors Committee, Strategic Leadership Teams), including an Organisational Development & Accountability Strategic Leadership Team

GAPS:

- Weak corporate/global culture and [systematic practice of accountability](#), with a particular gap in accountability in CARE's internal relationships
- Overly focused on self-assessment and reporting 'up', with very few feedback loops
- Weak accountability for members and decision-makers (power holders) – most is focused on CO level performance data
- Challenging to find key information or learning – not presented coherently and not accessible
- Lack of processes for analysis, learning and improvement – using the information systematically



CARE'S INCLUSIVE GOVERNANCE APPROACH

CARE's citizen-led governance programming is in step with leading practice by INGOs as well as private and public funders. It is guided by the 2020 Program Strategy and its [Governance Programming Framework](#). The GPF is a clear statement of what inclusive and accountable governance in society at large should look like. And much of what we propose for the future evolution of CARE's accountability systems is consistent with its principles.

The theory of change that underlies CARE's Governance Programming Framework is expressed in this diagram. In it, CARE identifies three preconditions for its vision of success in achieving sustainable development with equity:

- Empowered citizens
- Accountable and effective public authorities and other power-holders
- Expanded, inclusive, effective spaces for negotiation.

Many in CARE feel that these pre-conditions apply equally to CARE's own management systems and practice, and that its accountability framework and enabling systems must:

- Empower affected populations and staff
- Enable inclusive and effective spaces for negotiation
- Ensure accountable management and leadership.





HUMANITARIAN ACCOUNTABILITY FRAMEWORK

CARE's humanitarian programming is the original source of thought and practice influencing CARE's thinking on accountability. Part of the reason perhaps is that in humanitarian action there is such a clear 'entry point': clearly identifiable constituent groups, a more focused and coordinated structure in which a 'culture and practice' could take hold, donors willing to invest in accountability mechanisms, and a body of international experience and standards (which CARE has been at the forefront of, playing an important role starting with the HAP and now in the latest global consensus, the Core Humanitarian Standard).





Many of the interviews began with a reference to the Humanitarian Accountability Framework (HAF). Participatory Accountability Reviews and After Action Reviews. By most accounts, these reviews have generated useful local learning but have been used only periodically and have had little influence over management decision-making. Interviewees also cited [promising cases](#) that opened up local spaces for dialogue between disaster affected people and power holders through representative committees, complaints mechanisms and feedback mechanisms. But most felt that these are uneven and have not gone beyond isolated local pilot activities.

There is a huge appetite and opportunity for a coordinated attempt to collate learning and build towards a consistent CARE-wide accountability practice – building on learning from the humanitarian sector and expanding it more broadly. This is starting to happen – for example, after a pilot in Humanitarian contexts, CARE is adapting and testing a gender marker to hold the organization accountable to good gender programming at all stages of the project cycle.

RAPID ACCOUNTABILITY REVIEWS OF CARE'S PERFORMANCE USING A SCORECARD METHODOLOGY

An adapted Rapid Accountability Review activity is being piloted in humanitarian programs in the Philippines, Jordan and Bosnia. It uses a simple community scorecard approach to enable participants to score CARE's performance against three key 'accountability benchmarks':

- Participation
- Feedback, and
- Information sharing

In addition to a simple rating score, the discussions and experiences are also documented.

The exciting thing about this experiment is that participants are directly involved in generating standardized, comparative performance data that can be easily and cost-effectively collected and integrated into a performance management system.

The quantified rating scores can potentially be analyzed to show changes in performance ratings over time, across localities and even between agencies. Comparative ratings can be presented back to participants through simple visual graphs for further validation and analysis.

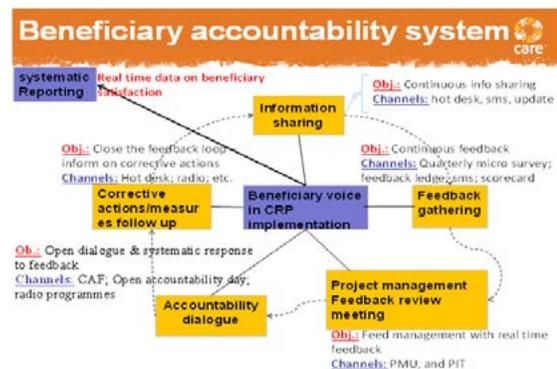




CARE HAITI COMMUNITY RESILIENCE BUILDING FEEDBACK

Another worthwhile experiment with the potential to inform feedback-based performance is a [community resilience program in Haiti](#) where a group of agencies including CARE is using DFID funds to develop a system for collecting and responding to regular feedback from affected people.

The pilot involves a feedback-based participatory learning cycle: continuous information sharing takes place through various channels,



quarterly feedback surveys of a large number of community members, internal analysis of feedback reports and reporting feedback back to communities in sense-making and validation dialogues.

MULTI-AGENCY LEBANON PILOT USING FEEDBACK TO MANAGE PERFORMANCE

In early 2016, CARE joined a pilot to develop and test a feedback-based performance management methodology. The DfID-funded project started in Lebanon and intends to extend to other humanitarian relief contexts. It uses very short 2-3 question micro-surveys of affected people focusing on their experience and perceptions of how well agencies are performing against the 9 CHS commitments.

The results data will then be analyzed turned into short comparative (benchmarkable) performance reports for discussion in community forums and more widely to identify specific causes of problems and seek agreement on corrective actions. These feedback cycles will repeat through the life of the response.





POCKETS OF GOOD PRACTICE

A few offices are innovating in interesting ways at the institutional level – but they are doing it on their own with little support. There is much potential to build on and tested practices that can be scaled up.

Community Score Card

[The Community Score Card](#) (CSC), originally developed by CARE Malawi in 2002, is a citizen-driven accountability measure for the assessment, planning, monitoring and evaluation of service delivery. The CSC can be used to gather feedback from service users and improve communication between communities and service providers. The CSC brings together community members, service providers, and local government to identify service utilisation and provision challenges; to mutually generate solutions; and to work in on-going partnership to implement and track the effectiveness of solutions identified. It can be adapted to a wide range of contexts. Watch the [video](#) to learn more.

Rwanda

[CARE Rwanda](#) is doing some interesting experimentation applying the community scorecard approach to staff-management reviews, and with testing digital forms of accountability.

In thinking how to strengthen accountability in Rwanda, the Country Office decided to begin with internal relationships and introduced a ‘management scorecard’ conducted twice a year. Staff reach a consensus rating on management performance at an ‘interface meeting’.

Management rate themselves on the same tool and then both results are compared, discussed and improvements agreed.

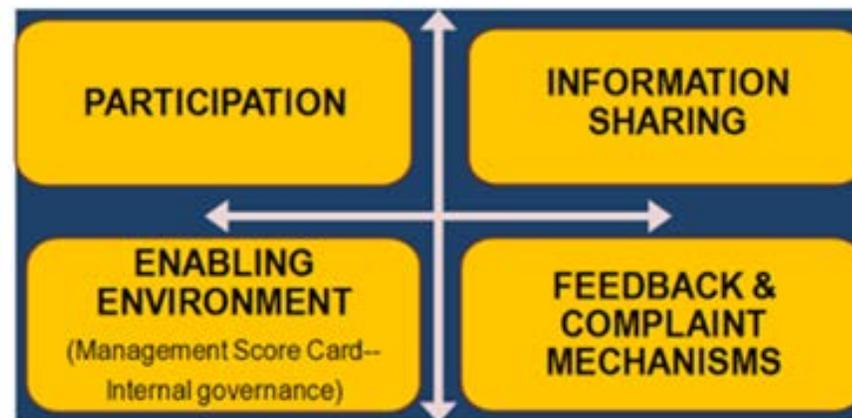
CO leaders enthusiastically state that this led to almost immediate improvements in staff motivation and relationships, and made the next phase – broadening externally to partners and communities – much easier. They report that there is no finger-pointing, and as staff came to see this as normal, their fear to give critical feedback dropped.



Management find it helpful to manage expectations, and it builds collective commitment and energy. They claim that this approach of leading by example – start by making management accountable and demonstrating the benefits – works better than trying to impose accountability through compliance standards and reporting that can feel very rigid. *‘Accountability must be lived, not imposed’*, they say. *‘The staff of CARE need to have a voice if you want to ask them to give impact groups a voice. Accountability becomes less threatening if people see it as part of the culture that applies to everyone’*.

CARE Rwanda is also experimenting with an electronic information sharing and feedback system with partners and impact groups through mobile phones.

CARE RWANDA ACCOUNTABILITY FRAMEWORK





Caucasus

CARE Caucasus has implemented a CO Accountability Framework, which has included new engagement practices with implementing partners. They recognize that partnership is an important part of accountability, and view sub-contracting as power relationship – not a partnership unless you consciously make it so.

To change this dynamic, CARE Caucasus has taken several steps. They organize mutual 'expectation clarifying' meetings with partners. They write all contracts not as sub-contracts for services, but as mutual commitments – that specify how each partner can hold the other accountable. 'We then systematically collect and report their feedback... how they experience us, the quality of our work, our responsiveness, the progress towards our shared goals. We publish the feedback in our project reports. We benchmark it and discuss it.'

Gia Glonti, the Mission Director, describes it in these terms: Accountability should not be a struggle for power – rather it should be a mutual commitment to work for shared outcomes in the most effective way possible. The quality of our relationships with our partners are critical. We need to find ways of measuring and monitoring this too.



Peru

In the wake of the 2007 earthquake, Peru incorporated in its emergency response a number of mechanisms which allowed the affected population to understand and influence programming and provide critical feedback. Over the following years, that practice evolved into a more systematic approach to forward accountability, expressed in the [“Guide to the organisation of systems for NGO accountability to the community.”](#) Since then, accountability practice has been incorporated progressively in the CO through the implementation of the Institutional Policy for Accountability and Transparency, and has become a core part of its

THE BENEFITS OF ACCOUNTABILITY FOR CARE PERU

- It improves our work.
- It brings us greater credibility and trust.
- People consider us more legitimate and our example is a reference for others.
- It prevents and/or reduces various forms of corruption, for example, favoritism, nepotism, the wrong use of resources, fraud or any form of conduct harmful to personal integrity.
- It contributes to organizational learning and maturity.
- It builds the capacity of the population and empowers people.



CARE UK

CARE UK's Staff Representative Group (SRG) is an internal accountability space designed to hold the senior management team (SMT) to account. The group arose out of a demand from staff for a more systematic and institutionalized means for SMT to justify and communicate decisions, and most importantly, to generate a safe space for staff to voice their concerns. The SRG is a nominated group of up to 5 staff members representing the different departments within CARE UK. Their role is essentially one of liaison between staff and the SMT, to provide information, ensure that unrecognized issues are raised and advocate for these with the SMT.

The SRG has various channels for staff to raise issues or provide feedback:

1. a staff reps email address and log;
2. a suggestions box (which has fallen by the wayside due to lack of use);
3. staff satisfaction surveys;
4. a staff forum;
5. and periodic meetings with the SMT, HR, and the CEO.

As a result of the SRG's activities, CARE UK staff have also been able to ensure union recognition – SMT has recognized the Unite union – and recently elected 3 representatives (“shop stewards”). Now, the SRG acts alongside these shop stewards who have the mandate to negotiate with SMT on pay, organizational structure, and working conditions.

A summary of current confederation level performance and accountability mechanisms is listed below. Some mechanisms will align neatly, some will need to be adapted and improved, some could be removed/replaced.



MECHANISM	PURPOSE AND STATUS
INGO Accountability Charter Report	External review of CARE against the Charter's nine core parameters (thus far only on the CI Secretariat, to be expanded once the Accountability Framework with CI wide data is in place).
Program Strategy Indicators	Indicators for measuring impact and change of the CARE 2020 Program strategy.
Annual Impact Reports	Yearly in-depth impact reports provide a deeper analysis of outcomes (FY16, humanitarian and SRMH impact reports; FY17 and FY18, women's economic empowerment and FNS and resilience to climate change impact reports).
Annual Reports	Capture and communicate stories of success and programmatic and financial data for each member and many COs and regions.
PIIRs	Collects annual data on projects and programs, for CI-wide use
CI Performance Functions and standards for COs	14 functions, 22 standards and 48 measures of success applicable to a wide range of CO 'presences' and including members that program in their own countries. <i>Feedback from Keystone about need for improvement, planned for FY17</i>
CARE Member Partner survey (since 2013)	Assess CMP performance by Country Offices about the quality of the service that they receive from the CI members that they work with (CMPs). <i>Noted by Keystone as the only current mechanism for feedback with high potential, but under-utilised with little space for analysis, discussion and improvement.</i>





MECHANISM	PURPOSE AND STATUS
CMP identity and performance survey, 2014/15	Developed to reflect the new challenges that the organization will face in pursuing its 2020 vision and organizational changes related to CARE Members role and relevance – a member ‘presence review’ tool. Self and peer methodology to assess member capacities and identify gaps vis-à-vis the changing role and relevance of members. <i>Piloted by CIUK with CARE India and facilitated by CI Secretariat in 2015.</i>
CI Gender Standards	10 programmatic and organisational standards, adapted from the CI Gender Policy, to be applied by all CARE offices (see CI Gender Equality and Women’s Voice Guidance Note .)
Humanitarian Accountability Framework	Guiding framework for how CARE’s accountability is applied to our humanitarian work. Integrates the commitments of the Core Humanitarian Standard.
Financial data KPIs	Key performance indicators in financial management of members and business units.
Fundraising KPIs	Assure common safety and security principles and standards for all CI operations, with a template to measure standards through facilitated self-assessment by members, including peer checks. (not yet assessed – drafted in FY16).
CI Safety and Security Principles and standards (not yet assessed)	Assure common safety and security principles and standards for all CI operations, with a template to measure standards through facilitated self-assessment by members, including peer checks.





MECHANISM	PURPOSE AND STATUS
CI Risk Management Framework	Risk Management framework for CI. Under development with the CI FAR (<i>for CI Secretariat; and top 10 risks for CI confederation</i>)
CI Global Presence Monitoring, Presence review and Business Planning	Consistent mechanism for reviewing CI presence role, relevance and impact and long term business planning. Common framework used and status tracked; <i>aim for FY17 for ongoing monitoring and learning of CARE's global presence.</i>
Advocacy procedures and sign offs	Guidance and support of coordinated advocacy, and “sign-offs” that need to be obtained to account for the safety and security risks to our staff, the risks to our operations, the sensitivities of individual CI members, legal and reputational risks, and need to improve quality and coherence of our efforts. <i>Fast track sign-offs for humanitarian crisis being revised.</i>
CI Complaints Policy	CI Secretariat monitored complaints line, directed to most relevant party in CARE for response.
Climate Smart progress and indicators	Monitoring under discussion by the National Directors Committee
Preventing Sexual Exploitation & Abuse (PSEA)	Policy, purpose and status – in place since 2009, currently under review to be updated





ACCOUNTABILITY IN CARE'S INTERNAL RELATIONSHIPS

This is the area of deepest dissatisfaction by all interviewees. While there is plenty of evidence of CARE successfully empowering and strengthening the voices of affected populations (the humanitarian term) and to impact populations (in more developmental programs) in respect to governments and other external power holders, albeit in pockets and not made systematic, there is little evidence of effective and responsive feedback loops in respect of CARE's own performance management. This is fundamentally about building an open and inclusive culture of responsibility and commitment to shared values and to learning.

As with external accountability, systems and mechanisms should be put in place to foster meaningful feedback loops between leadership and staff leading to open dialogue and problem solving. The good news is that there is already some experience to build on in individual members and offices – it just needs to be taken to the global level between and amongst the various parts of CARE.

A growing body of work shows that simple feedback loops that generate performance data and include public dialogue over the ratings are a practical option.

“There is a large accountability gap in CARE. There is a strong need for a system that works. But it must be applied across all levels.”

“The whole system needs to be held accountable for what happens on the ground.”

“To become a culture, accountability must be systematic and routine. A key feature of how we work together. It must be embraced by all levels and resourced from the core.”

Quotes from Keystone interviews with CARE staff

Recommendations

- Bring together a small task force to link the pieces
- Frame a high level, coherent Accountability Framework with external and internal dimensions that integrates performance management (what we do) with accountability practices (how we do it)
- Make it light touch and phase it in
 - » Start by aligning, and adapting where necessary, existing mechanisms
 - » Simultaneously test pilot a handful of innovative processes (with a focus on digital accountability), draw on existing innovation and good practices, and assess which should be scaled up.
- Ensure transparency and ease of access to key information e.g. visual, interactive displays
- Build in regular cycles of analyzing and using the findings
- Focus on building mechanisms for feedback loops throughout

“Accountability is not separate from performance management. We speak of ‘(mutually) accountable performance management’ when the voices of affected groups have a meaningful (but not the only) say in how performance is understood, assessed and managed. A strong management voice demanding accountability to principles, policies, contractual commitments, the law etc. is fundamental – but while it can help CARE reflect critically on its systems and practice and perhaps become more responsive, on their own these cannot be seen as ‘accountability mechanisms’. They must be accompanied by practical feedback mechanisms through which groups can actually hold decision makers publicly accountable for their commitments and the impacts of their decisions and actions.”

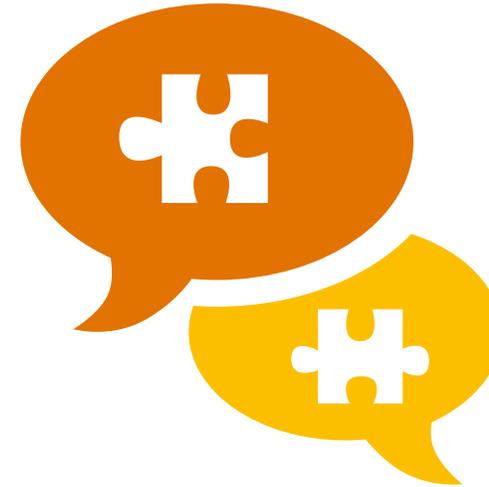
SECTION II: DRAFT FRAMEWORK AND NEXT STEPS – FOR CONSULTATION AND FEEDBACK

This section is intended to engage colleagues and key stakeholders to gain their feedback. It includes a draft accountability framework, some explanatory accompanying guidance, and proposed next steps to phase in the framework in FY17.

As you are reading, please consider the questions below for your feedback.

Guiding Questions for Feedback

1. What is your overall reaction to the draft framework?
2. Do you have any suggested changes to the performance dimensions or to the accountability commitments?
3. What is your reaction to the initial outline of the guidance note?
4. Do you have any suggested changes to how guidance should be framed?
5. Do the suggested next steps for FY17 seem reasonable?



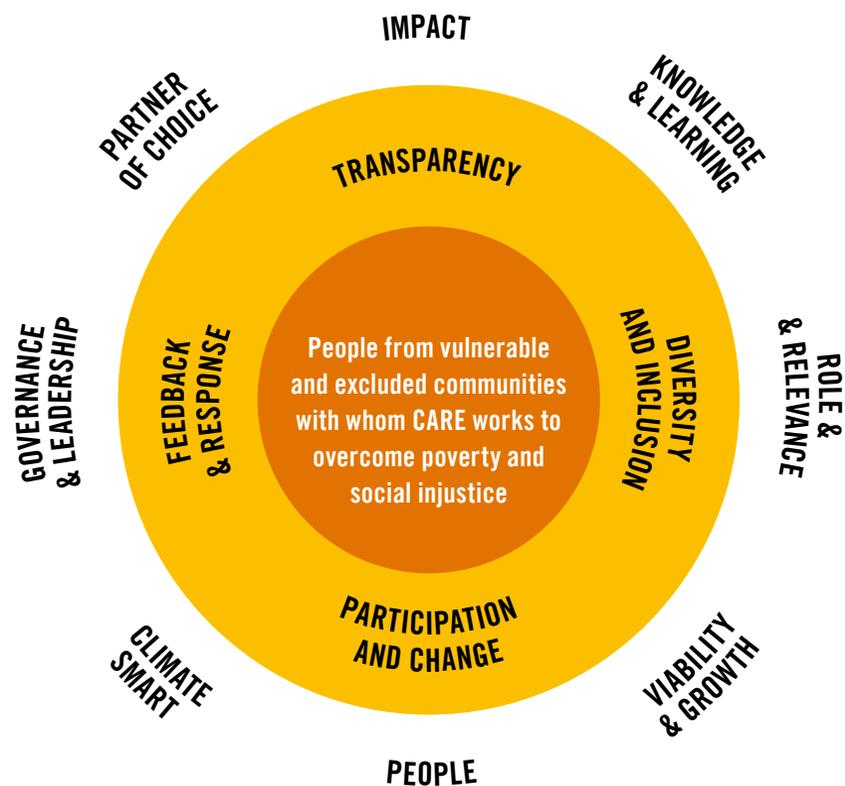
Please send your thoughts on these questions, as well as any other comments, concerns and suggestions, to Sarah Ralston at ralston@careinternational.org, or through discussion on a consultation call.

Draft Accountability Framework

CARE is part of a worldwide movement to realize our vision of a world of hope, tolerance and social justice, where poverty has been overcome and people live in dignity and security. We have been entrusted with power and resources to contribute to this vision, and are responsible for the decisions we make, the way we manage and use our resources, and the results of what we do. We are keenly aware that our efforts directly and indirectly affect the lives of the people for and with whom we work, and seek meaningful ways of being held accountable for our commitments and the impacts of our decisions and actions.

CARE has mechanisms to report and receive feedback internally and from a number of its key external stakeholders, including governments, donors, the public, and partners, but we place particular emphasis on strengthening our core accountability to people from vulnerable and excluded communities with whom CARE works, especially women and girls.

CARE's Accountability framework brings together CI-wide performance and accountability commitments. In order to shed light on, improve and be held to account, we commit to monitoring, evaluating, learning from and improving our impact, our organisational health, and our accountability principles and practices. Click on the graphic to the right for definitions of the 8 key performance dimensions and 4 key accountability practices.



Click on the graphic for definitions



CARE assesses, and puts in place mechanisms for others to assess, its performance in:

Impact	We commit to achieving measurable impact on poverty and social injustice, as the pinnacle performance metric for our work.
Partnership	We commit to working in mutually beneficial and accountable relationships with a diverse range of partners and allies towards a shared goal.
Knowledge and Learning	We commit to capturing, using and sharing social and organisational knowledge, and learning from good practices and mistakes.
Role and Relevance	We commit to ensuring that the role we play in the movement against poverty and injustice is the most relevant and appropriate at local and global levels.
Governance and Leadership	We commit to effective governance and leadership of the organisation that ensure impactful, healthy performance and model CARE's accountability commitments.
Fundraising & Financial Viability	We commit to responsible financial management, ethical fundraising and long-term viability and vibrancy in line with impact goals.
People	We commit to supporting our people to do their jobs effectively, and to treating them fairly and equitably.
Climate Smart	We commit to reduce CARE's direct and indirect carbon footprint and contribution to climate change, and the impacts of unabated emissions.





CARE commits to the following principles of acting accountably, and puts mechanisms in place to enact each one in our internal and external relationships:

Transparency	We commit to honestly and openly sharing key information about our performance with our stakeholders in public, accessible ways.
Feedback and Response	We commit to seeking, capturing, listening to, acting on and responding to feedback.
Participation	We commit to working in genuine partnership, to integrating the voices of those who are affected by decisions, and effectively engaging and creating space for the participation of key internal and external stakeholders.
Diversity & Inclusion	We commit to valuing, respecting and encouraging diversity, and seek to be inclusive non-discriminatory in all that we do.



Guidance

The guidance developed for the AF will outline:

- The supporting information for each area of performance
- The mechanisms for enacting the accountability practices at various levels (e.g. ways of demonstrating internal and external transparency and participation, etc)
- The minimum responsibilities for each part of CI to apply the AF
- The process flow for when/how information is collected, at what point it is analysed and discussed, how we learn from it and take steps for improvement, and how it is shared.
- Ideas and opportunities for innovation and piloting new forms of accountability, with a focus on digital.



Information will be presented as a dashboard snapshot, with the ability to click through for [more details about various parts of the organisation](#). An annual report on the state of CARE's accountability, also required to be prepared for the INGO Accountability Charter and other external platforms, will analyse the information, assess the extent to which CARE has embodied the accountability principles, highlight promising practices and cases and identify areas for improvement.

Our accountability framework applies to relationships in multiple directions – both internally, to our relationships with and responsibilities to each other as individuals and entities in CARE International, and externally, to key stakeholders. CARE is a signatory to and active member of a [number of external frameworks](#) which have been integrated and adapted.



An indicative set of relevant information is outlined below – noting that there are gaps that will need to be phased in over time:

- **Corporate Level** (confederation wide)

- » CI wide map and key info on overall presence (PIIRS, CPRs and member reports)
- » Program Strategy outcome and change indicators
- » Humanitarian performance and accountability data
- » CI Gender Standards
- » Global partnerships inventory (and feedback where available)
 - *will need to evolve
- » Summary data on organisational health (human resources and financial)
- » Global fundraising targets and donor inventory/numbers
- » Summary good governance indicators (Board and leadership composition, transparency of materials/minutes, inclusivity)
- » Progress on climate smart
- » Spotlight on good practices and innovations throughout the confederation





- **Member Level**

Click on each member, transitioning member, and CI Secretariat, to see their relevant information, plus a link to their current strategy/AOP and their annual report.

- » Snapshot of organisational health data
- » Highlights of good practices/areas of innovation
- » Self assessment (plus potential peer review or 'scorecard' rating space, to be piloted) of presence alignment with CARE 2020 Program Strategy and contribution to shared priorities
- » CIM survey results, and space for comments on planned actions/improvements
- » For transitioning members – monitoring report and learning on their transition

- **Country Offices** (and regional/sub-regional information where relevant)

- » Key PIIRS data (number staff, budget, program info)
- » Presence review and strategy
- » Annual report
- » Space to describe/highlight their accountability practices and findings



CARE is a signatory to and holds itself accountable to internationally accepted humanitarian standards and codes of conduct, and we work with other aid organizations and United Nations agencies to improve humanitarian action and to influence policy. Some key networks in which CARE is involved or is a signatory to:

- [INGO Accountability Charter](#)
- [Core Humanitarian Standard](#)
- [Charter4Change](#)
- Code of Conduct for the International Red Cross & Red Crescent Movement and NGOs in Disaster Relief
- The Sphere Project
- Humanitarian Accountability Partnership International (HAP)
- Active Learning Network for Accountability and Performance in Humanitarian Action (ALNAP)
- People in Aid

Next Steps



- Small task force with points from the Inclusive Governance team, CI Secretariat Governance & Accountability and CEG's accountability function to:
 - » Consult with key stakeholders on a draft framework
 - » Map current mechanisms to the draft framework, assess which to continue, which to adjust/adapt to better align and which to discontinue. Begin with what we have in FY17.
 - » Test a handful of pilots in the next year with a focus on digital accountability (several already planned and funded) and continue engagement/collaborations with leading external organisations in this field

- Institute regular process flow of how information is analysed, discussed, shared and acted on - start with a few in FY17, expand as needed as we go.
- Begin reporting on what we have, with the first 'populated' framework for discussion at the NDC meeting in November 2016 and in other subsequent meetings – noting that some areas will have gaps or show indicative information
- Focus on transparency and accessibility of information - present as a dashboard snapshot, with the ability to click through for more details and to see relevant information about various parts of the organisation
- Assess findings from pilots, integrate new mechanisms and update guidance for FY18

Concluding Thoughts – Looking Ahead to a More Accountable Development

A new ethos and practice of accountable development is required.

Increasingly the value of CARE's impact– and the value of all actors claiming to contribute to the development agenda – will be determined by impact populations and those struggling for social justice that we seek to partner and align with, rather than our self-assessments and the opinions of donor governments. Beyond the need for INGOs themselves to be held to account for their role, the SDGs place a strong emphasis on citizens holding their governments and all actors involved in the development agenda to account for their commitments. CARE has a niche opportunity and a clear role to play building on industry-recognized and tested strengths from its past governance work, leveraging the emphasis in the CARE 2020 Program Strategy and the Governance Program Framework, which will require taking the following steps:

1. Capturing and communicating real impact. The most critical mark of our performance, our value add and our contribution at local, regional and global levels to sustainable development will be the extent to which we can demonstrate our impact. Only by openly holding ourselves, and being held by others, to clear global targets and measuring outcomes and change, will we be able to justify our role in global movement.

2. Putting performance and contribution to the development agenda in the hands of our core clients. Local communities and networks, as well as local governments and institutions, will increasingly take ownership as development decision-makers, setting their own agendas and defining the way external actors engage in their space. Technology now allows previously un-empowered individuals to cumulatively assess and hold others accountable – customers rate restaurants and patients rate doctors, and this trend will increasingly spread to development. Successful organizations use this as an opportunity to improve rather than a threat to expose them. Defining ways to genuinely listen to, engage and be shaped by local and national development priorities, and demonstrate our contribution to impact on them, will be core to the legitimacy to have a presence in many countries. CARE is already investing in 'constituency voice' and feedback loop pilots to this end, and has the opportunity to expand this, attend to them more broadly and make them systematic – making the community scorecard approach digital, assessing CARE's and other institutions' commitments and contributions to the Sustainable Development agenda with citizen-generated data. Open data and opportunities for moving beyond self-assessment to peer and constituency assessment will signify the extent to which we view our

raison d'être as for the benefit of and 'publically owned' by others. Greater transparency brings greater opportunities to engage constituencies as true shareholders in CARE's work, and also raises greater risks in an open source world, which should be monitored and mitigated as ongoing business practice.

3. **Modeling the standards to which we hold others.** As internal business practices become more rigorously scrutinized, publicly demanded and viewed, CARE will increasingly need to demonstrate the ways we embody internally the principles of inclusive governance and accountability that we hold others to – including reflecting global diversity and external voice in our decision-making at all levels, and instituting democratic processes and spaces for negotiation.

Thank you for your feedback on CARE's efforts to strengthen our accountability!

We appreciate your input. As a reminder, please send in your suggestions, ideas and comments to ralston@careinternational.org and/or to schedule or join a call to discuss. Feel free to share more broadly with others for their feedback as well.

