





Partnership Standards are norms for **actions** and **behaviours** that guide our relationships with other stakeholders. They hold us accountable to nurturing truly **'equitable partnerships'**, which we understand as **collaborative** relations that systematically address **power imbalances**. CARE uses these Standards to monitor both the **quality** of our relations with partners and the **results** expected from them. Our Standards are grounded in **mutual understanding** and **respect** amongst all partners. They inform conversations from the **early stages** of every partnership and become an essential tool for regular **partnership reviews**. The 5 Standards will be (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.

<p>1. Co-ownership</p> 	<p>Our relationships are built on co-creating equitable partnerships that are informed by a shared vision and shared expected outcomes around gender equality and locally-led development and humanitarian action.</p> <p>Expected behaviours:</p> <ul style="list-style-type: none"> • We generate spaces for co-creation and shared decision-making, including operational co-design, joint implementation and co-responsibility in the review, learning and evaluation of programme impact. • We are actively anti-racist and challenge all forms of discrimination in our joint work, including behaviour rooted in post-colonial models and white supremacy culture, which have undermined locally-led action.
<p>2. Shared Risk Management</p> 	<p>Our relationships take joint responsibility for managing and mitigating risks, via well-resourced and up-to-date strategies and actions that are guided by the partner who holds contextual knowledge.</p> <p>Expected behaviours:</p> <ul style="list-style-type: none"> • We accept that risks (including financial) are inherent to our work, so we embrace a culture of openness to discuss these, while prioritizing the safety of CARE/partners' staff and the communities we work with. • We understand that risks change over time and impact organisations/individuals differently. Therefore, we commit to joint reviews that enable timely and mutually-agreed adaptations to mitigate risks.
<p>3. Collaborative compliance</p> 	<p>Our relationships honour our commitments to all stakeholders. Furthermore, our actions are guided by a sense of 'proportionality' when negotiating requirements, and openness to welcome different ways to demonstrate how requirements are met.</p> <p>Expected behaviours:</p> <ul style="list-style-type: none"> • Due diligence is guided by mutually agreed policy and practice that respect organisational identities, while enabling all partners to meet their multiple responsibilities. • Deliverables are agreed with consideration to donors' and partners' minimum requirements. They are reviewed regularly, with changes agreed respecting such minimum requirements.
<p>4. Adequate Investment</p> 	<p>Our relationships acknowledge inequalities in capacities and access to resources. We value the different contributions from all partners and believe that these are equally critical to meet our shared objectives.</p> <p>Expected behaviours:</p> <ul style="list-style-type: none"> • We acknowledge and appreciate all forms of investments (beyond financials), including knowledge, time, access and connections. • We ensure a fair approach to programme cost-sharing and investment in partners' core costs and capacities. All these are natural and regular topics for discussion during the lifetime of our partnerships.

5. Intentional learning & accountability


Our relationships set up explicit and intentional mechanisms for mutual learning and accountability. These mechanisms promote transparent and equitable access to information and spaces for joint reflection.

Expected behaviours:

- We invest time and resources into knowledge and information sharing, prioritizing participation in communities of practice or similar spaces for reflection. We address strategic or technical themes that are of common interest, with learning questions to be explored collaboratively.
- We proactively offer and seek honest feedback, demonstrating openness to discuss critical issues and commitment to manage conflict effectively, while timely acting on the feedback received.

The following **indicators** would support and guide partnership-related conversations, including partnership joint assessments. Through their use, we gather information on how we are exercising the behaviours expected for the standards we have set.

Partnership Standard	Indicator
1. Co-ownership	<ul style="list-style-type: none"> • % of partnerships defined and shaped jointly by CARE and our partners
2. Shared risk management	<ul style="list-style-type: none"> • % of formal partnerships that have mechanisms to ensure joint responsibility to manage and mitigate risks
3. Collaborative compliance	<ul style="list-style-type: none"> • % of formal partnership agreements that do not apply stricter requirements to partners than the donor requires
4. Adequate investment	<ul style="list-style-type: none"> • % of partnership or funding agreements that incorporate core and/or flexible funding • % of partnerships where partners' contributions beyond "design and implementation" of activities is recognized
5. Intentional learning and accountability	<ul style="list-style-type: none"> • % of public communications on programmes with impact, that acknowledge the contributions from partners, including naming them • % of projects implemented in partnership, with mutually agreed learning agendas or plans

Definitions:

- **Local organisations** are independent entities that are registered and/or operate at national or subnational levels in the country where CARE's programme is operating. Include non-registered social movements, networks, etc. A local organisation may or may not be affiliated to an international body (e.g. INGO, Network/Federation/Confederation, multilateral agency, etc.), but must have an independent Board enabling decisions to be taken by that organisation itself. A country office or field office or locally established body of an INGO where decisions are taken mostly by the global INGO leadership (e.g. with Headquarters in the global North) would not be consider as a 'local organisation'.
- A **partner** of CARE is an organisation that is not a Member, Candidate to Membership or office of a CARE Member. CARE Affiliates can be considered as partners, as they are independent organisations (governance and finance) and do not use the CARE Brand.