



I am very excited to announce the launch of our CARE International Humanitarian and Emergency strategy 2013 – 2020. This strategy is the result of the efforts of many CARE colleagues, who have contributed to its development and to its review in various discussions all around our CARE world. I want to sincerely thank everybody involved in the evaluation of the previous strategy, in the discussions and evolution of the shaping of the new one, and in so proactively supporting how this strategy can and should be an integral feature of our work now and in the future.

So, how did we get to our new global strategy?

INSIDE

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The CARE in emergencies newsletter is published by the CARE Emergencies Group in Geneva, Switzerland. To submit ideas, articles, corrections or complaints, please contact emergencycommunication@careinternational.org. The views in this newsletter are those of the authors, and do not necessarily reflect the opinions of CARE International.

Welcome to our new 2013 – 2020 Humanitarian and Emergency Strategy!

By Barbara Jackson

In the year 2007 all CARE members endorsed our [CARE International Humanitarian Mandate](#), which states that “responding to humanitarian emergencies is an essential part of CARE’s work to fight poverty and injustice and we recognize that emergencies are a cause and effect of both.” Today, five years later, we have taken this goal ever more to heart. We are launching a strategy that aims to bring emergency response to the core of our work. A strategy, which will enable us to deliver faster, more efficient and in the end more effective emergency assistance to people in need.

You might ask yourself: “But wasn’t emergency response always part of what we do?” Well, yes and no. CARE was founded in 1945 to alleviate suffering from the horrific man-made disaster known as World War II. Since then, we have responded to innumerable catastrophes, both natural and man-made. However, today we have arrived at a crossroads where we need to admit and recognize that we have lost momentum and a certain degree of credibility as a global responder to the needs and rights of people affected by disasters.

A sad fact: CARE is no longer a top responder

Despite having made considerable gains in the past five years in coordinating our emergency efforts, gaining greater coherency in our decision making processes

and our approaches while building internal capacity, we have fallen significantly behind our peer organizations. This is demonstrated by the decreased amount of our global portfolio being dedicated to emergencies; our low recognition with donors and the United Nations as being one of the primary agencies responding to emergencies; as well as the limited numbers of our deployable staff available to support Country Offices with their emergency assistance. In a recent report published by ALNAP (Active Learning Network for Accountability and Performance in Humanitarian Action) on the State of the Humanitarian System, CARE was specifically referred to as no longer being in the top group of humanitarian responders. Our external evaluation of our previous strategy clearly documented that we have not had the consistent leadership commitment and support to our global humanitarian aims and hence ultimately, to the rights and needs of those we are meant to serve.

We absolutely must turn this trend around. It is this challenge that has been the compelling foundation for the new strategy, which calls upon all of CARE to renew our commitment to our Humanitarian Mandate – and to millions of people who are increasingly affected by disasters.

A worrisome trend

According to the United Kingdom's Department for International Development, the total number of people affected by disasters in 2004 stood at 150 million. Compare this with the year 2010, where emergencies affected 263 million people. That is almost double in less than ten years lapse of time! This trend will only worsen if we consider population growth, climate change, increasing marginalization of poor people, and unplanned urbanization in vulnerable environments as well as potentially increasing political instability in many parts of the world.

Given our Humanitarian Mandate and indeed, the very premise upon which CARE was founded, we must ensure that we deepen, broaden and strengthen our capacities for effective humanitarian response. We must focus our efforts to maximize impact. In other words: we need to reach people with better and faster emergency assistance which not only alleviates their plight but builds upon the gains we make through our long-term development programs. We must also become more agile, more responsive and more

strategic in our humanitarian efforts given the rapidly changing context of the humanitarian arena. Dr. Patulino's article in this newsletter (*page 3*) speaks very convincingly to this volatile humanitarian landscape – we must strategically position ourselves with an eye to the future rather than to our current and past ways of working.

We want to be a leading humanitarian agency

The new Humanitarian and Emergency strategy can only be implemented successfully if we live and breathe it throughout all levels of the organization, if we bring together our resources more effectively and align our humanitarian and emergency work with our program goal of reaching women and girls. The goal ahead is evident: by the year 2020 we want to be a leading humanitarian agency which has lasting impacts on the needs of poor women, men, boys and girls affected by humanitarian crises. We want to be known for our ability to reach and empower women and girls in emergencies. This is ambitious - but it is also grounded in the reality of what is needed to end poverty. Only with ambition, with a strategic vision, and with collective ownership and drive can we work with others to achieve this end.

The CARE International Board has approved the new strategy. I am convinced that we have the genuine commitment, desire and will to meet the challenges that clearly lie ahead of us. I know that we have the capacity and, more importantly, the heart and the soul and the deeply abiding conviction that we must and can do more. Therefore I am confident that we all will achieve this goal together.

I hope that with the launch of this strategy we can count on all parts of CARE to come together, to build upon our great reputation and history to have greater impact on the lives of the many millions of people in need. They deserve only the best that we can provide.



*Barbara Jackson is
CARE International's
Humanitarian Director*

Chat with CARE's Humanitarian Director and the CEG team!

On **19 February from 11 to 15** (Geneva time: CET, UTC/GMT + 1 hour) Barbara Jackson, CARE International's Humanitarian Director will respond to your question in a **Skype live chat**. You want to find out what support your Country Office can get from CARE's Emergency Group to implement the Humanitarian and Emergency Strategy? You don't know how to include gender aspects into your emergency response and want advice? You would like to get an explanation of how CARE's emergency work will be strengthened in the future? If you have these and other burning inquiries, this is your moment to ask Barbara and the CEG team! Just add our CEG Skype name (**askCEG**) to your contacts, check how your local time zone (www.timeanddate.com) correlates to Geneva—and start to chat, discuss and argue. Find more information on how to use and install Skype here: www.skype.com





The changing humanitarian landscape: challenges and opportunities

A guest article by Dr. Sara Pantuliano

The launch of CARE's new strategy comes at a time of great change in the international humanitarian system, change which will inevitably affect how, where and under what circumstances the organisation will go about its work of delivering humanitarian and development assistance.

The [humanitarian landscape](#) is shifting in ways that may radically alter the concepts, traditions and practices that have for years underpinned the humanitarian system. Throughout the sector there is a great deal of interest in the opportunities which could arise for humanitarian action by the emergence of so-called 'new' actors and new partnerships.

The humanitarian sector has been strongly influenced by a Western-oriented evolution – in other words, the creation of organisations to respond to humanitarian needs in Europe in the aftermath of the world wars, CARE being one such example. Whilst these organisations have broadened their scope to populations globally, they are still funded mainly by Western governments, have their main offices located in Western Europe and North America and are guided by frameworks, practices and values that derive from the North. As other forms of humanitarian action play an increasingly significant role in addressing needs in crisis and conflict contexts, the humanitarian sector's Western-oriented nature and outlook are starting to be seen as major shortcomings to effective humanitarian action. Identifying ways to engage meaningfully and effectively with national governments, militaries, the private sector and civil society actors with diverse histories and perspectives on humanitarian action across the globe will be essential for CARE.

Crises such as the Haiti earthquake, the Pakistan floods and displacement caused by ongoing conflict in Sudan and South Sudan show the critical importance of engaging with national and/or international military forces. Principled civil-military coordination is critical to protecting humanitarian principles and ensuring the over-arching humanitarian goal of saving lives and alleviating suffering.

In reality, however, it is not easy to strike the right balance between maintaining the distinction between military and civilian actors and ensuring a necessary and appropriate level of interaction.

Even more challenging is engagement with armed non-state actors. Whether and how aid agencies engage with such groups in contexts like Somalia and Afghanistan will be integral to any effective humanitarian response to civilians caught up in areas under the control of militia groups. Here the challenges of engagement are complicated by the increasingly [stringent conditions](#) imposed by Western governments to ensure that aid will not benefit proscribed groups, even going so far as to [criminalise engagement](#) with specific armed groups.

Less problematic are the important new opportunities for engagement with 'non-traditional' humanitarian actors. It is notable that bodies such as the Association of Southeast Asian Nations (ASEAN), the Organisation of Islamic Cooperation (OIC) and the African Union have all emerged as humanitarian players within their regions in recent years.

A range of other factors are also putting pressure on agencies such as CARE. The [record number](#) of aid workers killed, kidnapped or otherwise attacked in the past year is a grim reminder of the growing insecurity humanitarian staff face. This serves to increase reliance on national staff as expatriates working in some of the most dangerous areas redeploy or withdraw. Host state restrictions on the access and movement of international staff and, in extreme cases, their expulsion will likely intensify this trend, bringing with it further limitations on the old ways of delivering aid.

An ability to adjust strategy to meet the challenges and opportunities of the evolving humanitarian landscape will influence how effective and relevant CARE remains in supporting the needs and rights of the millions affected by humanitarian crises.



Dr. Sara Pantuliano is Head of the Humanitarian Policy Group, Overseas Development Institute (ODI)



Emergencies can be a game changer

How we can better link our humanitarian work with long-term development programs

By Sofia Sprechmann



CARE International's new Humanitarian and Emergency strategy 2013-2020 recommit us to our Humanitarian Mandate and to ensuring that emergency response is central to our core identity. Our mandate recognizes that humanitarian crises are both a cause and effect of poverty. It is therefore central that staff working on long-term development programs understand the roles that vulnerability to disaster and humanitarian crisis play in the lives of the people we work with. In fact, the first strategic priority ('The focus of our response') of the new strategy not only focuses on integrating humanitarian concerns in all of our work but on building our emergency response upon the strength of our long-term development programs.

What can we do to better integrate our humanitarian and long term programs?

It all starts with **analysis**. When we respond to emergencies, it is key to build on our strengths from long-term programs. Ensuring that emergency assessments and response strategies learn from and contribute to long-term program goals should be at the center of this analysis. And what are some of CARE's most important program goals? In recent years, as we have de-

signed programs at country and regional levels, a large proportion of these focus on **women and girls** – which is the main impact group of the new Humanitarian Strategy as well. Building on the already strong work we do in women's empowerment and gender equality in our long-term programs, we can further explore how to use the lessons learnt from these programs for strengthening our humanitarian response.

Another area for connecting our humanitarian and long-term programs is around **partnerships**, which is also a point emphasized in the new strategy. We know that partnerships forged in the midst of an emergency are very high risk (i.e. partners require time to build trust and get to know each other's style of work). How can the wealth of partnerships and relationships at community and national levels provide us with a strong foundation for our humanitarian work? This is a debate we need to deepen across teams in the organization.

Beyond the issues highlighted here, it is useful to remind ourselves of key learning from many years of experience as a leading organization in humanitarian and long-term development work. In the majority of countries in which we work, the impact groups whose lives we seek to improve are vulnerable to disasters and conflicts. We know that it is central for our long-term programs to fully consider this reality, taking vulnerability into account in our analyses, theories of change and program designs.

When a major emergency happens in a country, it can be a game changer. All of our long-term programs will be affected – we have seen this often and know that this is not a rare occurrence but unfortunately all too common. It is central to ensure that when we plan, design and implement long-term programs, we plan for and manage risk appropriately by working to mitigate disaster and knowing how we will respond if an emergency happens.

So, there is a question we need to ask frequently in program meetings at global, regional and national levels: How will we adjust our long-term programs when a disaster strikes so that we can ensure we still work towards our long-term goals? Being caught by surprise has a high cost. I am looking forward to continuing to debate this issue with teams across the organization. It is central for our long-term vision of a world in which people live in dignity and security.

Photo (top): A woman wanders through the destroyed streets of Port au Prince after a massive earthquake hit Haiti in 2010. CARE/Evelyn Hockstein

Sofia Sprechmann is CARE International's Program Director





“Women are disproportionately affected by natural disasters”

Jasveen Ahluwalia, CI's Emergency Gender Coordinator explains why we focus on women in our humanitarian work and what support Country Offices can receive for their emergency response

CARE's Humanitarian Mandate requires us to help those who are most affected in an emergency, regardless of race, gender or religion. Yet, the new Humanitarian and Emergency strategy places an emphasis on women and girls. How does that fit together?

Evidence from a number of sources, as well as CARE's own analysis and experience, overwhelmingly demonstrates that gender discrimination, or the denial of women's basic human rights, is one of the major causes of poverty. For women, poverty doesn't just mean scarcity and want. It means rights denied, opportunities curtailed and voices silenced. Emergencies have different impacts on men and women and often change household and community dynamics. Women are disproportionately affected by natural disasters and face specific challenges in armed conflict. At the same time, the changes in a community that happen after a crisis also open up new opportunities for positive change for the future.

If CARE seeks a world of hope, tolerance and social justice we must address gender inequality. Working on gender equality means that we ensure that both women and men are consulted and that their different needs are taken into consideration throughout the design, implementation and evaluation of our work. Even though a critical aspect of promoting gender equality is the empowerment of women, it doesn't mean that we work exclusively with women. It means that we work with women, girls, boys and men to *free* women's potential to the benefit of society as a whole. The benefits of women's empowerment are not limited to women. Global evidence suggests that female and male citizens of more equitable societies are, on average, wealthier, healthier, and better educated than in countries where women are most marginalized.

What does a successful emergency response look like in terms of gender?

Let me name a few examples. A successful emergency response:

- Has a gender balanced team which has the ability to assess and respond to the different needs of men, women, boys and girls, and who know and respect CARE's codes of conduct;
- Is based on a good gender analysis including sex and age disaggregated data (SADD). This means we analyse the different power, roles and needs of women, men, boys and girls within the community, and how these have been affected by the crisis;
- Bases the emergency response strategy, program design and implementation directly on the gender analysis;
- Incorporates a gender lens in all of our sector programs, as well as looking for opportunities to implement interventions directly and to prevent gender-based violence wherever possible;
- Ensures that we are monitoring the different impacts of our response on women, men, boys and girls, including by using gendered indicators and monitoring tools which allow us to see and track the different impacts by sex and age.

Can you name some examples where Country Offices have included gender plans in their response?

Since July last year, when a Country Office applies for funding from the CI Emergency Response Fund (CI - ERF), they need to submit a Gender Action Plan with their proposal. Since then, ten Country Offices, including Mali, Niger, Cameroon, Bangladesh, Lesotho, Myanmar, Cuba, Benin, Haiti and Sierra Leone have developed gender action plans (also called GAPs) for their responses. The GAP is a practical planning tool, which helps the Country Office think through the concrete actions they can take from the outset of the response. This is to ensure we meet gender standards, such as analyzing different needs and capacities of men, women, boys and girls and reflecting this in the design of the response.

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FACTS

- * Over half a million women continue to die each year from pregnancy and childbirth-related causes.
- * 30 out of the 50 countries currently ranking lowest on global indicators of mothers' and children's well-being have recently experienced armed conflict or host substantial refugee populations.
- * On average, greater numbers of women die during and after natural disasters than men, with up to four times more women killed after the 2004 Boxing Day tsunami.

What we are able to see from the GAPs is that it is very important to really understand the gender context in the community and in the household. How do these dynamics affect the access to support, capacities, coping mechanisms, and the ability to engage in decision making of women and men affected by the crisis? Where the response has been designed on this understanding, we can see more effective and more sustainable impacts. For example, as part of their emergency response CARE Mali worked with long-term partners of their women's empowerment program, ensuring that household level nutrition needs are met while strengthening existing community structures to address food insecurity.

What are they main challenges when planning a humanitarian response that integrates the different needs of women and men?

One of the biggest challenges remains around the collection and use of sex and age disaggregated data (SADD). SADD is simply data which can be broken down and analyzed by sex and by age. In 2011, CARE partnered with Tufts University and OCHA to conduct research into the importance of SADD. This research shows that sex and age disaggregated data significantly impacts the quality of our intervention and is one of the tools we can use to significantly improve our impact. The other area that is frequently overlooked is the need for gendered indicators, which help us understand the different impacts of our response on women, men, boys and girls.

Here is an example of the importance of SADD. In a country where we were working with refugees, data showed us that the level of school drop outs stood at 40 percent. While this number in itself was significant, we could also observe, thanks to data segregated by sex, that around 85 percent of these 40 percent were girls. Once we began exploring the underlying reasons for these drop outs, it was easy to revise our strategy to ensure greater impact. If this sex disaggregated data had not been available, we would not have been able to identify and analyze the problem. When we fail to use SADD and/or gender and age based analyses, our interventions can be misguided, fail or put vulnerable groups at risk. SADD, gender and generational analysis, enables us to deliver assistance more effectively and efficiently.

What are the main lessons learnt?

The success stories come from Country Offices where senior leadership has consistently modeled a strong commitment to gender equality and ensured that dedicated capacity exists or is built over a period of time. Otherwise, the integration of gender issues remains at the level of 'ticking the box'. Here are a few more lessons learnt:

- For any assessment it is important to train data collection and data entry teams in gender-based analysis (which requires sex-specific data) and to ensure a balanced team that includes women as members of the assessment teams.

- Respect and acknowledge roles and responsibilities of women and men at household level when designing humanitarian response.
- Establish a family-specific (not community-specific) targeting approach. Diversity between families within an affected community needs to be better taken into account.
- Give more specific consideration in the design of relief projects to the gender division of labor, and the different responsibilities and coping strategies within the household.
- Ensure that the design of the distribution system is based on a thorough understanding of the social structure of the affected population, including the information on groups that could be marginalized and neglected in distribution.
- Always include gender dimensions in project objectives and key performance indicators, components and beneficiaries and institutional and implementation arrangements.
- Always use participatory approaches for the design and implementation – both vis-à-vis local communities as well as local partner organizations – to identify and target vulnerable men, women, boys and girls more effectively, and to contribute to progress towards gender equality at the community level.
- Use gender terms (“men and women” instead of “people”) in all proposals, policy documents and plans. Writing both words is important for raising awareness and prompting consideration. However words must be followed up with actions that ensure both groups are considered throughout planning and implementation.

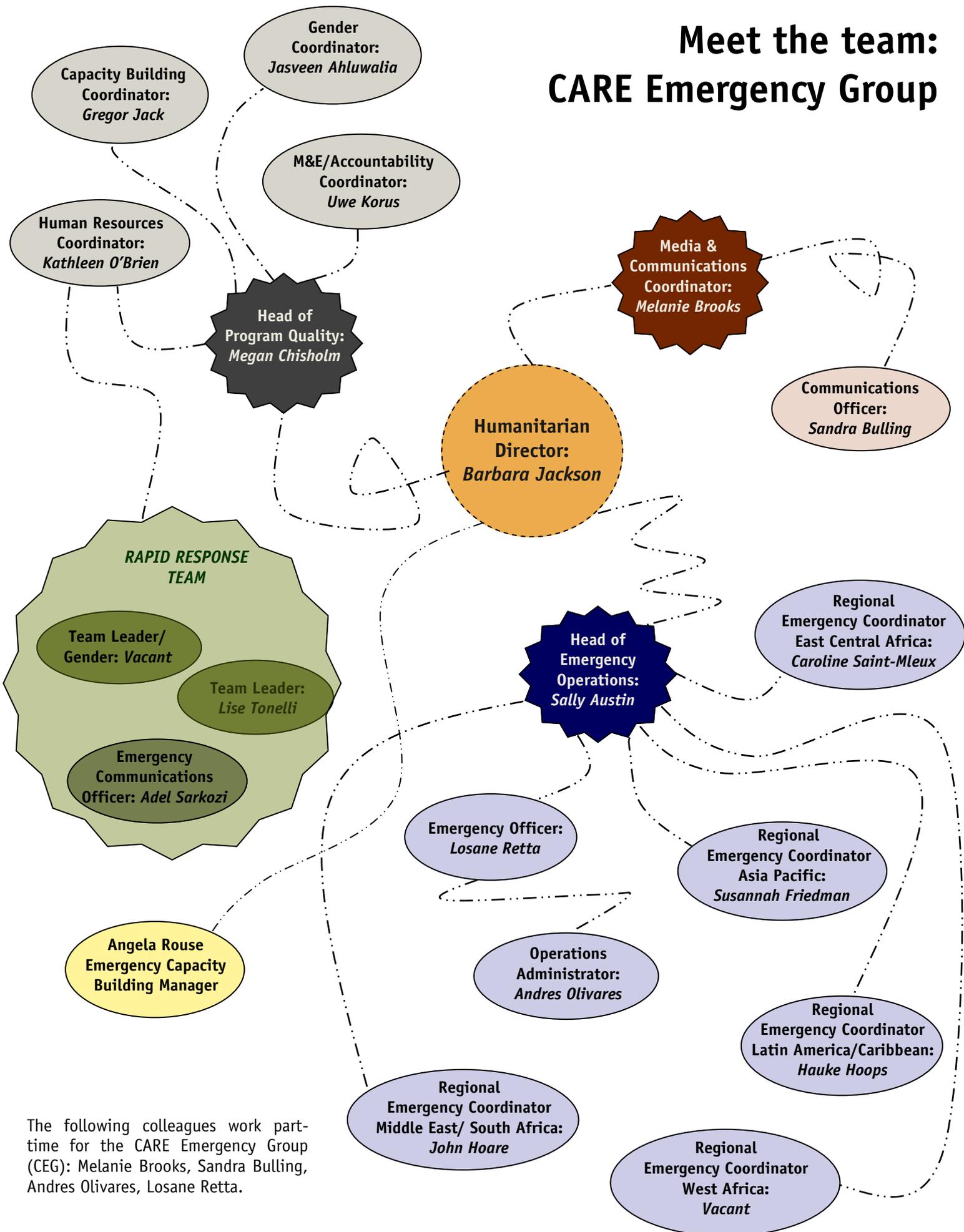
What support can Country Offices receive from CI's Senior Gender in Emergency Advisor when responding to an emergency?

Whenever an emergency or crisis hits your country, the CARE Emergency Group will assist you both throughout and after an emergency: by coordinating and supporting technical expertise to ensure quality programming, releasing rapid financial support through the CI Emergency Response Fund (CI ERF), coordinating with Members to help fundraise, and supporting accountability systems. In order to strengthen our focus on gender equality and empowering women and girls, CEG can provide you with tailored training and support on gender assessment and programming. We can inform you on how to use gender and gender-based violence tools related to assessment, and we support proposal writing, design, implementation and monitoring and evaluation. We can provide this technical support either remotely or through a deployment to your Country Office.



*If you have more questions, please contact
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Meet the team: CARE Emergency Group



The following colleagues work part-time for the CARE Emergency Group (CEG): Melanie Brooks, Sandra Bulling, Andres Olivares, Losane Retta.



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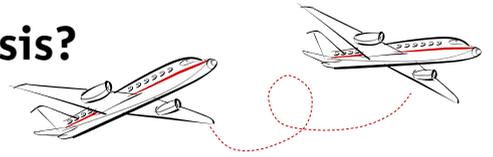


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Flying out to an emergency or humanitarian crisis?



We are excited to announce that CARE International UK have secured a partnership with Emirates Airlines that will get us out to emergencies faster and save us money. Emirates are asking its 5 million frequent flyers to donate air miles to us through its regular member's newsletter. In addition, when we are responding to specific crises, Emirates is willing to send emails to its frequent flyers asking them again to donate Skywards Miles.

In the first month of the partnership we have received a total of 2.5 million

air miles. This is equivalent to approximately \$100,000 worth of flights or 45 return airfares. These miles are now available for any staff member working on an emergency or humanitarian crisis.

Please have a look at the [eligibility criteria](#) and see if you can benefit from this opportunity and save CARE money. For those of you who are able to use Emirates Skywards Miles, we ask for just one thing in return: We need you to provide some brief information on the emergency that you are supporting and what you will be doing so that we can demonstrate to Emirates the impact of

the partnership. We would appreciate it if you could supply us with a blog or human interest story and a few photos on your return. This is a chance for us to demonstrate how you are saving and rebuilding lives all around the world.

To find out how you can take advantage of this exciting new partnership you can view all you need [here](#) on Minerva (if you don't have a Minerva password, please contact kmod@care.ca) and if you have further questions please contact airmiles@careinternational.org



Photo: Ausi Petrelius /CARE

IN BRIEF

Where to find the strategy documents:

The new Humanitarian and Emergency Strategy 2013-2020 has been uploaded on Minerva (in [English](#), [Spanish](#) and [French](#)). You will also find supporting documents, such as summaries, factsheets and Frequently Asked Questions. If you don't have a Minerva

password, please contact kmod@care.ca to access CARE's information sharing platform. If you have any questions concerning the new Humanitarian and Emergency strategy, don't hesitate to send an email to askceg@careinternational.org

A package is on its way!

As part of the launch of our new Humanitarian and Emergency Strategy, we sent a package to each Country Office, CARE Member and Regional Management Unit,

containing communication materials such as emergency posters (see last page), gender posters and the CARE Emergency Factsheet. If you have not received the package yet, please do let us know by sending a short message to askceg@careinternational.org

Please view the next page to see what the new poster looks like!



Responding to today's emergencies.
Helping communities prepare
for tomorrow's.



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As part of CARE's global mission to fight poverty and social injustice, we:
• Build resilient communities • Respond to emergencies • Help families recover