Towards principled and gender-transformative locally-led humanitarian response

CARE International reflections and recommendations on ECHO’s guidance on the promotion of equal partnerships with local responders

Introduction

CARE International (hereafter CARE) welcomed the inclusion of localisation as one of the priorities of the Communication on the EU’s humanitarian action. In particular, we appreciate the explicit commitments made to provide stronger support to local actors and responders in humanitarian emergencies, including the need to support capacity sharing, providing guidance on localisation to ECHO partners, and increasing contributions to pooled funds accessible to local actors. We also applauded the Council Conclusions on the above-mentioned Communication, as the document clearly emphasises the “need to step up support for local and national actors” and “encourages greater investment in local NGOs, including women-led and women’s rights organisations”.

CARE, as a signatory to the Grand Bargain and the Charter4Change (C4C) strongly believes that more must be
done to progress on the localisation of humanitarian action. This should include stronger accountability against Grand Bargain commitments, especially in terms of building genuine equitable partnerships, quality funding and supporting change at the country-level, if we want to ensure that the humanitarian response is as “local as possible, and as international as necessary”.

To turn these commitments into action, all humanitarian actors must do more. For ECHO, this would mean identifying internal barriers and opportunities for more equitable partnerships, especially with national and local NGOs. It is also essential for ECHO to embark on the necessary process to be better ‘fit-for-partnering’ – from leadership to organisational culture change to aligning policies and systems along with acquiring the intrinsic set of skills, competencies, resources in the broad sense. In this context, we are pleased to present our reflections, experience and recommendations for the development of ECHO’s guidance on the promotion of equal partnerships with local responders.

Re-thinking the approach to partnerships and localisation: CARE International’s experience

*Equitable Partnership* is central to CARE’s global vision and mission. We work with a diverse range of partners in the Global South and North, to maximise the impact of our programmes and to contribute to our organisational commitment to power redistribution and work towards greater local and women’s leadership in response and within the humanitarian system. In 2021, we laid down a partnership approach and a set of principles:

1) Holding fast to humanitarian principles of impartiality, neutrality, humanity and operational independence in our partnerships;

2) Acting as a convener, a connector and supporter of civil-society in all its diversity and with priority to marginalised women’s organisations given the disproportionate impacts of crises on women and girls;

3) Valuing interdependence and complementarity, building trust and transparency in a culture of equality, mutual support and respect for differences;

4) Recognising shared risk-taking, investment and accountability in partnership.

CARE integrates this partnership approach across its mandate in humanitarian response, aiming to be adaptable and flexible, paying attention to reciprocity and recognising the mutuality of what the partners bring to a partnership. As part of this effort, Humanitarian Partnership Platforms and a Humanitarian Partnership Community of Practice have been established to pilot and test new partnership modalities and share lessons learned and resources to advance our Confederation-wide localisation work – some of which are referred to further below.
In practice: meaningful humanitarian partnership across CARE

Piloting partnership modalities with non-traditional partners

CARE’s partnership approach includes an emphasis on engagement with non-traditional civil society partners with less formal structures that genuinely represent our impact populations such as women’s rights and women-led organisations, youth groups, and other networks and alliances from communities affected by crisis.

In this context, CARE selects partners on the basis of the mutual alignment of values and not solely on the basis of their grant management and financial capacity. Understanding and acknowledging the inherent power imbalances between CARE and non-traditional actors, CARE manages this proactively, applying the principle of ‘do no harm’ and seeking to be flexible, respecting its partners’ autonomy and understanding their interests.

As part of this effort, CARE has been piloting a flexible and mutually developed Memorandum of Understanding (MoU) with non-traditional partners in Nepal and Honduras, and through the Call to Action against GBV Field Implementation in MENA and West Africa. As per the pilot MoU, flexible funding of up to a maximum of USD 250,000 can be provided to partners following a rapid assessment against a mutual pre-award checklist focused on alignment in vision and mission, rather than on financial and contract management capacity. The funding support CARE can provide to its partners is contingent upon clear donor flexibility and/or prior authorisation, allowing for a risk-sharing approach with partners (reducing audit requirements and other heavy risks assessments).

Ultimately, working with non-traditional partners requires a transformative change within CARE and the way we work (including our policies, procedures and systems), as well as flexible donors to enable this approach.

Local leadership and a more equitable humanitarian system are critical to delivering on our goals. Decolonised humanitarian action, equitable partnership, and embracing of feminist principles are essential to CARE’s efforts to address power imbalances and inequalities in our own organisation, within the communities we work with, and within the wider humanitarian sector. CARE has been actively involved in a series of initiatives to advance our commitment to shift power and define what it means, in practical terms, to us as a Confederation. Among these initiatives, we highlight: 1) Our decision to join the Feminist Humanitarian Network which aims for a global humanitarian system that is responsive, accountable and accessible to women and their organisations, in all their diversity. 2) The Pledge for Change, bringing together leading INGOs to create joint strategies and significant steps towards decolonising aid. Ultimately, CARE seeks to support “locally-led, globally connected” approaches.
In practice: meaningful humanitarian partnership across CARE

CARE Denmark’s Local Leadership Strategy

In the framework of their strategic partnership with the Danish Ministry of Foreign Affairs (MFA), CARE Denmark (CARE DK) developed their Local Leadership Strategy, built on five commitments:

1. Increase and diversify CARE DK’s local partnerships and ensure that they are rooted in local challenges and priorities.
2. Increase the percentage of CARE DK programme funding that is allocated to and controlled by local partners.
3. Increase the capacity of CARE DK’s local partners to design and manage projects and to provide expert assistance in the three areas of focus: climate-resilient livelihoods, climate-smart humanitarian action, and innovation for sustainable solutions.
4. Increase the participation and leadership of local partners in the design, delivery and evaluation of CARE DK programmes.
5. Increase the presence and representation of CARE DK’s local partners in national, regional, and global policy forums.

In its analysis of the strategy, the MFA recognised that it sets ambitious objectives with a strong commitment to follow-up and deliver through the partnership period. The Danish MFA’s long-term funding commitment to CARE DK is an essential element to enabling the implementation of CARE DK’s Local Leadership Strategy.

CARE is committed to shifting power to local responders, especially women-led (WLOs) and women’s rights organisations (WROs) as evidence shows that women and girls are disproportionately affected by crises while they are often excluded from coordination and planning mechanisms in humanitarian response.

CARE International’s focus on women-led and women’s rights organisations

CARE defines women’s rights organisations (WROs) as those with an explicit purpose of advancing women’s rights or gender equality and labels women-led organisations (WLOs) as any non-governmental, not-for-profit, and non-political organisation where two-thirds of its board (including the Chair) and management staff/volunteers (including the Executive Director) are female, focusing on women and girls as a primary target of programming.

We refer to WLOs and WROs while recognising that not all actors will be formal organisations and that supporting movements, grassroots groups, activists and individual leaders are also part of the approach to achieve localised, women-led humanitarian action.

CARE has been advocating for a common definition for WOs and the IASC Gender Reference Group is currently working on it. Adopting the IASC GRG proposal for a common definition would represent a good opportunity for ECHO to contribute to ensuring humanitarian actors employ a consistent approach.

In fact, CARE has been working on women’s participation and leadership for decades, including in the humanitarian sector. For over twenty years and in contexts across the world, CARE has promoted and championed women’s participation through our programmes and advocacy, including on Women Peace and Security. We were also one of the pioneers on gender in emergencies (GiE), introducing our own gender marker just prior to the adoption of ECHO’s (to which we also contributed expertise), as well as embracing a broader, gender-transformative GiE approach, which has helped to shift social norms and approaches in crisis contexts. More recently, through evidence generated by our various Rapid Gender Analyses (RGAs) in specific crises, often in
collaboration with UN WOMEN, CARE has contributed to elevating attention to how gender inequality practically plays out during crises, to how differently women, girls, men, boys and people with different gender identities are impacted. This has resulted in successfully raising attention to the importance of catering for these different needs in response through, among others, creating opportunities to engage women and girls and crisis-affected individuals in all stages of the programming cycle. In addition, we have also recently embraced a more deliberate and systematic approach to address specific gaps in women’s and girls’ meaningful participation in decision-making, through our Women Lead in Emergencies (WLiE) gender-transformative model which supports local women’s groups to take a lead role in responding to the crises that affect them and their communities. This approach is being integrated across our efforts as a core part of all of CARE’s humanitarian response.

Our recommendations to ECHO to better support locally-led humanitarian action

Based on CARE’s lessons learned and good practices of our partnerships and programmatic work with partners in responding to crises from the onset, we recommend ECHO to:

1. Invest further in supporting local organisational capacities across the nexus, including local women’s leadership

Supporting capacity strengthening and sharing of national and local partners’ organisational capacity is key to ensuring they are best equipped to engage meaningfully and effectively in humanitarian response. But it cannot be just a one-off activity; it requires working with partner organisations over time, supporting the development of their institutional capacity with sustained investment to enable them to respond to emergencies at the scale and quality required when disasters hit. It also requires tailoring support based on the mandate and size of national/local partners – from small community-based groups to large national organisations, women-led organisations, social movements, etc. – as well as their existing strengths and context-specific needs, be it to deepen technical programming capacities relevant to humanitarian interventions or organisational core functions such as financial management, influencing, resource mobilisation, etc. This is a two-way exercise as partners have expertise in their own context, with deep knowledge of crisis affected communities, of their local political economy and power holders. When conducted in respectful recognition of mutual strengths and capacities, capacity strengthening and sharing with national and local partners in specific aspects of humanitarian response can effectively foster local expertise.

Given that local and national partners often have dual development and humanitarian mandates, capacity strengthening should be considered in the framework of the triple humanitarian, development and peace nexus and needs to start as part of preparedness efforts, ideally in peace time or well in advance of disasters occurring. Appropriate investments in advance of crises are key for NGOs (national/local partners and ECHO certified partners alike) to be able to provide a timely response.

At present, there is a large gap in this regard, as development donors are not looking into capacity strengthening for humanitarian response, whereas humanitarian donors tend only to fund the costs of specific life-saving response operations. Therefore, we urge ECHO to:

- Be more flexible to include capacity strengthening and sharing components in humanitarian proposals.
- Work actively to leverage other EU funding instruments to support on-going and longer-term capacity strengthening of national and local actors across the nexus.
• Support innovative approaches such as CARE’s Humanitarian Partnership Platforms (or other similar initiatives – see text box below for more information).

In practice: meaningful humanitarian partnership across CARE

Strengthening local humanitarian capacity through partnership, training and collaboration

*The partnership response to Cyclone Gita in Tonga jointly led by CARE and two local partners included capacity strengthening as one of its key achievements, especially around emergency preparedness and response, laying strong foundations for an effective action. During the response, CARE also provided a considerable number of training workshops as well as support through mentoring and accompaniment as part of technical deployments. These approaches led to an increased capacity of the local partners to respond to and lead in future responses.

*CARE established the Humanitarian Partnership Platform (HPP) in the Philippines in 2016, which is a shared ownership model with partners that enhances preparedness, timeliness, geographic scope, and relevance of emergency responses. Building on partnerships from the Typhoon Haiyan response, the platform has adopted a decentralised model – 13 organisations including national-level civil society organisations, women’s rights organisations and non-government organisations operating at the sub-national level to prepare for and respond to crises. CARE acts as a convener, donor, relationship and knowledge broker, capacity builder, and can provide surge support and direct implementation (as a last resort). The HPP serves as an avenue to strengthen the effectiveness and efficiency of CARE and its partners’ humanitarian and development work, through coordination, decision making, and collective action. CARE is now establishing similar HPPs in Nepal, Caucasus, and Guatemala, and sees great potential in rolling out this model in further contexts.

2. Systematically include partners at all stages of the humanitarian cycle, from country-level UN-led and donor planning, to programme design, budget development and final evaluation

Engaging national and local partners in humanitarian programmatic planning is key to increasing ownership, transparency and effective collaboration and improving the quality and timeliness of the response. In many countries, national and local partners are only occasionally or superficially integrated into humanitarian coordination structures and, as such, have limited influence on programmatic planning and specific response decisions, including in terms of priority-setting. Even where local and national partners are represented in higher numbers in clusters or equivalent and in Humanitarian Country Teams (HCTs) or equivalent, they report struggling to really influence decisions. Partners should be supported for their participation to be meaningful, which means ensuring they are able to influence, are listened to and supported to take on leadership roles, such as co-chairing clusters. The IASC Guidance on Strengthening Participation, Representation and Leadership of Local and National Actors in IASC Humanitarian Coordination Mechanisms sets minimum expected standards for participation and includes an accountability framework against which HCTs will have to report. We encourage ECHO to ask IASC global structures to share reports of specific crises’ level of adherence to this guidance, while also seeking inputs from local and national organisations about their level of satisfaction with their inclusion.
Recommendations on ECHO’s guidance on localisation

In practice: meaningful humanitarian partnership across CARE

Involving partners at all stages of programming cycles

*In Bangladesh, the Joint Needs Assessment (JNA) Working Group, hosted jointly by CARE and the Department of Disaster Management, brings together a diversity of stakeholders around a common assessment approach to achieve a shared understanding of needs while fostering a coordinated emergency response. The Working Group includes more than 60 network members, including local CSOs, with trained analysts and staff members across the country that conduct the JNA to inform the Humanitarian Response Plan (HRP) and eventually support rapid response. Local members of the network are the backbone of the JNA system and capacity-strengthening is key.

*In Timor-Leste, under the Dili Flood Response Programme – a CARE Austria ECHO funded action – the affected communities led planning and budgeting in each village, resulting in each community achieving a unique set of activities suited to their needs, strengths and contexts. Community-led approach to proposal writing is essential in emergency response to build back better with their own knowledge in complementarity with national and international support.

ECHO needs to grow a practice of consulting with key local and national organisations and networks when developing its own programming and policies, pulling them into the conversation, in addition to consulting ECHO certified partners. Involving local and national partners requires cultural shifts both within ECHO and its certified partners. We firmly believe that this shift is possible. ECHO certified partners should adapt and adjust their own working modalities in order to create truly equitable partnerships that tackle internal entrenched colonial practices and patriarchy and allow for co-creation. ECHO should ensure that its certified partners work meaningfully with national and local partners as a matter of course, unless it is duly justified in a specific context. This could be done by including localisation objectives in the HIPs and holding certified partners accountable for them. Moreover, UN and INGO partners should be held accountable for upholding more equitable behaviours as “good intermediaries” vis-à-vis local and national partners. This could be done through the development of guidance and standards that strengthen the accountability of ECHO certified partners to local and national partners. For instance, one of the areas that CARE is working to reflect in its partnership standards is ‘Mutuality and Respect’, meaning to ensure an approach of mutual respect, interdependence and complementarity; partnerships that build trust and transparency and are based on shared and agreed vision, goals, values and/or interests; as well as accountability to existing commitments and mechanisms to reduce the prevalence of narratives that focus on “CARE-led, CARE-owned, CARE-branded” work.

3. Ensure genuine risk-sharing in practice – not just in theory

One of the main challenges of humanitarian partnership is the issue of risk-sharing, and this will require particular attention from ECHO in its localisation guidance. Different types of risks are naturally inherent to humanitarian action and while there has been a welcomed attention to accountability, the aid system has tended to transfer the risks to implementing partners – international, national and local. One result of this increasingly risk-adverse system has been more and more stringent requirements related to transparency, performance and accountability – initially imposed by donors on INGO contract-holders, and then passed on by these intermediaries to national and local partners. It is essential for donors – including ECHO – to accept a fair share of the risks of delivering aid in increasingly complex and insecure environments while working with all humanitarian actors to reduce these risks (e.g., through humanitarian exemptions for sanctions, upholding IHL, granting flexible funding, etc) in order to avoid that some humanitarian operations become too difficult to implement and fund, leading to significant unmet needs of communities affected by crises.
Recommendations on ECHO’s guidance on localisation

Specifically, CARE urges ECHO to develop an approach whereby risks are minimised and shared with all its partners, including and equally for local and national NGOs, rather than transferred. This must include:

- Supporting ECHO certified partners to conduct participatory organisational capacity assessments of local and national NGOs’ readiness to operate in complex environments to better understand gaps and strengths against core programming and organisational competencies, and better tailor capacity strengthening and sharing efforts based on such assessments. This will build trust, an essential factor, to ensure partners feel safe reporting allegations of wrongful conduct and other risks;

- Significantly increasing investments in strengthening and sharing capacity to increase local and national NGOs’ readiness for working in complex settings, including i) to conduct access and risk assessments that should inform decisions on access strategies, programmes and operation modalities’ aligned with humanitarian principles; ii) to develop and roll out access strategies, safety and security management plans and associated duty of care policies, and applying a gender lens throughout to address the specific risks and needs of female humanitarian workers and of women’s organisations delivering sensitive programs (e.g. on GBV, Conflict-Related Sexual Violence, Sexual and Reproductive Health and Rights); iii) to roll out basic training on IHL, Core Humanitarian Principles, Counter Terrorism regulations, relevant sanctions’ regimes if any, Do No Harm, Accountability to Affected People (AAP) and Protection from Sexual Exploitation, Abuse and Harassment (PSEAH) and any relevant specific domestic laws (e.g. refugee rights etc);

- Fully covering the operating costs, including risk management and safety and security-related costs, of local and national NGOs. Such funding should be long-term to ensure acquired capacity is sustained over time rather than lost between short-term projects, as is now too often the case.

ECHO also needs to adjust its approaches to enable INGOs to operate effectively (and feasibly) on an equal foot with national/local partners. For instance, we appreciate ECHO’s creative thinking on what is possible within the legal framework to respond in challenging contexts, such as the flexibility around remote monitoring in Syria. We would welcome more of such creative and flexible approaches from ECHO, which would enable ECHO certified partners to build effective responses in collaboration with national and local partners in difficult contexts.

We welcome the continued conversation on risk-sharing led by the Netherlands and ICRC in the framework of the Grand Bargain. We encourage ECHO to leverage this initiative to have a frank discussion with its own certified partners and make tangible progress on this front. A reinforced partnership approach to risk management between donors and humanitarian actors, where a common understanding of risks is developed, will lead to better risk management and significant efficiency gains.

Risk-sharing will only be possible through increased awareness, shared and common risks analysis, reinforced systems and capacity strengthening of all stakeholders (donors, international, national and local partners), knowledge-sharing, increased transparency (which requires building trust and ending punitive measures), and access to quality funding to retain capacity over time.

4. Prioritise national and local partners’ participation in advocacy fora and let them lead the agenda

There is an important role for ECHO and its certified partners to play to ensure that national and local partners can engage in high-level relevant spaces where they can influence structures, policies, legal frameworks and / or social norms while addressing the most urgent needs and long-lasting drivers and challenges. ECHO partners should consistently consult with and make sure the views of national and local partners, including WROs, WLOs
and women leaders, are actively included in advocacy priorities and agenda setting as well as in defining influencing tactics – reflecting locally-led priorities and agendas. Donors like ECHO should also advocate for and facilitate the creation of spaces and opportunities for organisations representing the most marginalised and affected people as well as front line responders to participate and speak in relevant advocacy settings, from local to global. ECHO, as a leading global humanitarian donor, can proactively ensure that a diversity of NGOs and humanitarian actors are consistently included in relevant EU, UN and other global fora, such as at the IASC structures at global and country level, as well as in the Grand Bargain which, despite its localisation commitments, is not yet an inclusive space for national and local actors.

It is particularly important to ensure space for women leaders and WROs/WLOs, as women’s meaningful influence on humanitarian decision-making — especially at the higher levels — remains limited in both protracted and sudden onset emergency responses. Women’s participation is still inadequate, largely because the humanitarian sector, but also the contexts in which crises take place, are infused with a heavy patriarchal culture. ECHO must consistently engage stakeholders who are not often heard or included in humanitarian decision-making spaces and coordination structures at all levels, including diverse national and local WLOs and WROs working with persons with disabilities as well as refugee-, IDP-led organisations in decisions that concern them. This also includes promoting and resourcing the active participation of a range of organisations in NGO fora and country-level localisation dialogues (e.g. by ECHO encouraging and participating in the Grand Bargain National Reference Groups).

In practice: meaningful humanitarian partnership across CARE

Facilitating influencing opportunities and spaces for national and local partners

*Following the call for nominations for co-facilitators for a dialogue process about localisation launched in November 2020, a joint application was submitted by The Foreign, Commonwealth & Development Office (FCDO), CARE Turkey, Syria Relief and NGO Forum in Northwest Syria. As result, Northwest Syria (NWS) was selected as one of the focus countries for the dialogue process about localisation. The dialogue focused on identifying three overarching themes (financing; partnership and capacity building; humanitarian planning and decision-making) that were discussed with key stakeholders (donors, INGOs and National NGOs) and resulted in a series of recommendations for donors, INGOs and national NGOs.

*In the aftermath of the Nagorno-Karabakh humanitarian crisis, CARE Caucasus facilitated access for local CSO partners to the inter-agency humanitarian platforms to strengthen the engagement of local voices and their experience in strategy development and action.

*In the framework of the ECHO-funded “Accelerating Localisation through Partnership Programme”, CARE UK, peers and local organisations conducted a series of research pieces that identified partnership practices most conducive to localisation as well as the pathways to localisation, identifying the crucial shifts towards localisation at country level. CARE and peers then ensured that local organisations had opportunities to bring relevant recommendations and experiences to global and national policy-making spaces.

5. Improve the volume and quality of funding to local and national NGOs

ECHO’s ways of working, rules and regulations currently do not facilitate access to funding by national or local partners or provide funding to ECHO certified partners which would be conducive to supporting them to adopt more meaningful, equitable partnership modalities. The complexity of ECHO partnership and audit requirements, the limited administrative overhead allocations, and practices such as payment in arrears create heavy administrative and financial burdens. While direct financial support by ECHO to local actors is not possible given
the 1996 Humanitarian Regulation, there are still a number of measures that ECHO can take to improve the volume and quality of funding managed in partnership with national and local actors. One of them is that when providing funding through international partners, pooled funds and other “intermediaries”, ECHO holds intermediaries accountable for cascading the various quality funding provisions to frontline responders and for including local and national partners in proposal designs and in grant negotiations. Any financial rules and regulations applicable to intermediaries should be communicated publicly by donors, to ensure secondary recipients can claim the flexibility to be passed on to them and to hold intermediaries accountable for doing so.

In addition, we strongly encourage ECHO to consider the following avenues:

a. **Provide quality (flexible, multi-year, predictable and unrestricted funding) is the most transformational strategy to support localisation**, especially for national and local partners who often lack funding that can be frontloaded to respond quickly to emergencies. For example, where resources are reaching women’s organisations, they are typically small-scale and short-term. Small amounts of funding can stimulate learning and innovation, but they do not enable vital expansion, scale-up and strengthening of organisational and operational capacity, needed to ensure localisation shifts from rhetoric to reality. Multi-year predictable funding is needed to support institutional development and organisational strengthening. Importantly, ECHO should also allow its certified partners to budget for national or local partners’ support costs (e.g. dedicated overhead costs) beyond their own indirect cost percentages. This point should be part of a broader discussion on covering the real costs of implementing humanitarian interventions, both direct and indirect costs – where ECHO’s current threshold for indirect costs already does not cover its certified partners’ own verifiable costs.

b. **Harmonise and simplify systems and procedures** in order to minimise the burden on partners (including by using the 8+3 reporting template) and ensure that partners have an active role in agreeing to processes of control and verification that minimise liability and risk. To this end, ECHO should make bold efforts to reduce bureaucracy, simplify the contracting cycle, as well as harmonise further with other donors, including reconsideration of burdensome ECHO-specific tools such as the Single Form. ECHO has overall made little progress in reducing administrative burden with the Single Form still asking for a considerable number of details, despite having signed onto the Grand Bargain. In addition, it is important to consider a simplification of the contracting process and timeline in order to streamline the revision of the submissions, to reduce the delays in the signature of the contracts and therefore to avoid gaps between contracts which affect in particular NGOs with low cash flow as well as the quality partnership with national and local NGOs. Significant steps in this direction are critical for localisation to be effective.

c. **Support pooled funding accessible to** national and local organisations, including WROs/WLOs. In addition to contributing to Country-Based Pooled-Funds (CBPF), ECHO should also ensure that these are accessible not only to large, national NGOs, which may have more administrative capacity, but also to WROs/WLOs as well as smaller local organisations and Community-Based Organisations (CBOs), representing perspectives of crisis-affected people. They should have a seat in the management committees of the CBPF to ensure an inclusive, gender-responsive approach to the use of the funds.
6. Place gender equality at the centre of humanitarian action through partnership with women-led and women’s rights organisations

CARE prioritises the needs of women and girls in emergencies as both a humanitarian and a human rights imperative. We believe that gender equality and the empowerment of women and girls must be redefined as a combined rights and needs based framework. Framing gender equality in humanitarian action as a fundamental rights issue to ensure it gets the attention it deserves, is not in contradiction with the prioritisation of needs.

There exists overwhelming evidence of gender discrimination as an underlying cause of poverty and marginalisation, leading women and girls to being disproportionately impacted by the effects of disasters while exacerbating the violation of their human rights. Humanitarian programming that fails to apply a human rights-based approach and account for the differing roles and power dynamics between men, women, boys and girls’ risks exacerbating gender inequalities and doing harm. Disasters often disrupt and displace social structures and relations, creating opportunities to promote gender transformational change, such as women taking on more leadership roles in their household and community during disasters, relief and recovery. While urgent, lifesaving action is critical in crisis response, CARE firmly believes that gender transformative action that put women’s and girls’ rights at the centre is essential to an effective response. Along this line, there is also evidence that WLO and WRO not only uphold the realisation of women’s and girls’ rights, deliver effective programmes and services for crisis affected women and girls but also deliver better gender equitable programmes benefiting entire communities. However, as already referred above,

- Women’s lack of participation in humanitarian responses *severely limits our effectiveness*, according to the UN.
- Local women’s organisations are *not consulted in nearly half* of all humanitarian responses.
- In the global COVID-19 response, women make up *70% of the health workforce – but hold only 5% of the leadership positions*.
- *Less than 0.1% of COVID-19 funding* has been directed to local and national NGOs, and women-led organisations are likely to have received an even smaller share of this money.

As part of the localisation agenda, it is essential that humanitarian actors acknowledge women’s and girls’ roles as service providers and agents of change, as well as the best representatives and spokespersons of their own needs and capacities in humanitarian crises. Whether women and girls have organised themselves into a women-, youth- or girl-led group, or they come forward through a community initiative, they have to be consulted and their voices, specific needs and solutions have to be heard.

It cannot be assumed that local humanitarian initiatives will automatically result in an inclusive or community-based approach, let alone ensure the participation of women and girls. Thus, ECHO should ensure that women’s
equal, direct, substantial participation and empowerment is integrated explicitly into all mechanisms to strengthen the role of local actors in humanitarian action. This can only be realised through the direct and substantive inclusion of diverse women in positions of power in relevant humanitarian coordination structures at all levels, from country HCTs and clusters or equivalent, Country Based (CBPFs) and other Humanitarian Pooled Funds and other crisis or sector-specific pooled funds, donor governance advisory boards, regional and global IASC bodies, from local to global. In addition, ECHO could be more deliberate in including women’s organisations and embracing a gendered approach to ECHO’s strategy. This could include the appointment of gender champions at different levels of the ECHO structure in addition to the gender experts, regular Gender Equity and Diversity training for ECHO staff, etc.

In practice: meaningful humanitarian partnership across CARE
Supporting Women leaders and Women’s Rights Organisations

*CARE’s Women Lead in Emergencies (WLIE) approach focuses on working with groups of women and girls directly affected by crisis, rather than individuals, to build women’s and girl’s solidarity and collective influence over the decisions that affect their lives. It does this by seeking out existing women’s groups in the community, like refugee associations, solidarity groups, savings groups or faith-based groups, and inviting them to participate in Women Lead. This approach has five distinct but iterative components that CARE and its partners use to support women to collectively act on the issues that affect their lives before, during and after crises. It entails reflecting together, conducting participatory analysis of gender, power and public decision-making, co-creating solutions, and then acting and learning together.

*In Uganda, the ECHO-funded APEAL action has integrated WLIE activities for Congolese refugees, allowing many of them to increase their meaningful participation in community, including supporting other vulnerable people in the community. For instance, women’s refugee groups supported in the programme have gone on to support other survivors of gender-based violence to report incidents and to access health services. Similar stories are emerging from WLIE programming across six countries and show that when women have access to the right tools, they have the power to lead and to raise their voices for the most vulnerable.

*CARE’s strategy in South Sudan puts women and girls front and center, including by delivering gender-transformative humanitarian assistance. To achieve this, CARE South Sudan has embarked on a journey to develop its partnerships with local actors. In 2018, 3 partnerships with local actors were supported (1 with a WRO). In 2019, 19 partnerships were signed with local organisations (16 with WROs). Currently, CARE South Sudan has 29 local partners, including 22 WROs and 1 research partner, representing around 15% of the office portfolio. CARE supports a wide range of strengthening actions, from legal registration to setting up accounts, from supporting partners’ advocacy work to building WROs networks and coalitions.