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In this picture nearly 30 children sit on mats in neat rows with CARE USA CEO Helene Gayle. This preschool is the backbone for the delivery of services at the community level.

Photo credit: ©2008 Brendan Bannon/CARE



On the Cover

A young girl outside Biruh Tesfa, in Addis Ababa. Biruh Tesfa means bright future in Amharic and is a program for urban adolescent girls at risk of exploitation and abuse. For many girls going to Biruh Tesfa is their only hope of an education and a respite from their domestic work. Photo Credit: ©2010 Evelyn Hockstein/CARE



IMPACT2014

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WELCOME

Dear Friends of CARE,

Welcome to the Fall 2014 edition of IMPACT Magazine. As we enter this season of giving, I would like to extend my heartfelt gratitude for your loyalty and friendship. Since our founding in 1945, helping families and communities around the world has been at the heart of CARE's mission, but we could not do this work without your support. Your partnership has driven our success as one of the world's best and longest running humanitarian organizations, and has helped position us to continue making an impact for decades to come.

Poverty has changed since we first delivered CARE packages to a worn-torn Europe, and CARE has evolved with each step. From our forward-thinking stance on the importance of empowering girls and women, to our leadership on the topic of sustainable livelihoods and climate change, CARE has adapted to better address the needs of the world's most vulnerable communities for almost 70 years. In this issue of IMPACT Magazine, you will read about some of CARE's best practices and methodologies, as well as some of our newest innovations in the field.

We will travel to classrooms from Cambodia to Malawi and examine the many obstacles that keep children from obtaining critical primary and secondary educations. We will celebrate CARE's victory as a leader on the issue of food-aid reform, and how our resolve helped make U.S. food aid more efficient, faster and cheaper. We will visit Haiti, almost five years after one of the worst earthquakes in recorded history and see how CARE's community mobilization tactics are helping Haitians to rebuild better and stronger—equipped to face whatever crisis next comes their way. Finally we will go to the Balkans, a region that has endured decades of war and violence, and meet Korab, a 17 year old from Kosovo who, along with his fellow students in the Young Men's Initiative, is learning to end gender-based violence through CARE's progressive programs that engage men and boys.

These are just some of the highlights from our 900+ projects in 87 countries around the world that have helped millions over the last year. On behalf of the people, whose lives you have made better by being involved in our work, thank you. We hope you enjoy this issue of IMPACT Magazine.

Sincerely,

Helene D. Gayle, MD, MPH

Helene D. Layle

President and CEO

Your partnership has driven our success as one of the world's best and longest running humanitarian organizations, and has helped position us to continue making an impact for decades to come.





Breaking Down Barriers: Keeping Girls in School

BY AMANDA MOLL

rducating the youth of the world, especially girls, is one of the most effective tools we have for long-term family and community development. For every year beyond fourth grade that a girl remains in school, her future wages rise 20 percent. Farmers with just 4 years of education are 9 percent more productive than their neighbors with none.2 In families where women have an elementary school education, there are 15 percent fewer child deaths. For those women with a secondary education, the odds improve, with 49 percent fewer child deaths.3 An education provides access to economic livelihoods and is a key component in more equitable, healthful communities. Since its founding in

1945, CARE has worked to provide universal education opportunities for the world's poorest children, because we know that an education is one of the very best methods that a person can use to lift themselves, their families and their communities out of poverty.

Still, barriers to universal education remain. Worldwide an estimated 57 million elementary–school-aged children, 54 percent of them girls, do not attend school.⁴ Their older brothers and sisters, an additional 69 million adolescents, have also dropped out. Over the past 70 years, CARE has put forth a tremendous effort to understand and overcome the obstacles to education that these children face, particularly young women and girls. Some of the barriers

that we have identified and work to address include the gender inequalities between boys and girls, school safety, the need for children to work at home, language and early marriage.

MEASURING INEQUALITIES BETWEEN BOYS AND GIRLS: THE GEI INDEX

Current data suggests that we will see primary universal education for even the poorest boys by 2069; we won't see it for girls until 2089.⁴ This 20-year gap represents a generation of young women who will not have the same access to an education as their brothers simply because of their gender, placing them far behind on every development marker, from income generation to maternal health.

"Traditionally girls are socialized to be good wives. They are not expected to express themselves in public places or meetings. Their mobility is highly limited; they have to ask for permission. They are not expected to be doing things like sports. But thanks to education, things are changing."

CARE STAFF MEMBER TANZANIA

This disparity in education, and the lifetime of lost opportunities it engenders, stems from inequitable attitudes toward boys and girls. In many parts of the world, girls have a lower social status than boys; when resources are scarce and there are both real and opportunity costs associated with going to school, many families opt to educate their boys over their girls. Additionally classroom teachers, materials and methodologies are often skewed to favor boys.

Addressing these disparities is difficult work that requires measuring and tracking often unspoken attitudes toward gender. Changes in gender attitudes have historically been a challenge to measure systematically. CARE therefore developed a Gender Equitable Index (GEI), to measure the perceptions of gender in the schools and communities where we work. This quantitative tool measures multiple traits of gender equality and helps us understand the extent to which our programming needs to strategically address gender issues to keep girls in school.

Used in an evaluation of two large-scale USAID-funded projects, the GEI showed remarkable results. In comparison to girls who did not participate in CARE programming, girls who were engaged in CARE's education and leadership work scored statistically and significantly higher in attitudes about equality of rights and social norms. They were also more likely to respond positively to statements about equal rights.

Overall, boys who participated in CARE's programming demonstrated a greater appreciation of equality of rights and more positive changes in their perceptions of women's responsibilities and social norms than boys who did not participate. In two countries, however, boys from CARE projects showed lower rates than non-participating boys. CARE undertook further study to understand the meaning of these statistical aberrations. These additional studies revealed that the lower scores were not indicating a disregard for gender equality issues as they seemed to be at first but, rather, were showing that these boys had a more nuanced understanding of what equality of rights meant and were demonstrating that they realized their communities had not yet reached gender parity.

Tools such as the GEI are invaluable in uncovering and addressing the often silent gender perceptions that keep girls out of school. CARE remains committed to measuring and tracking these attitudes to help make education a universal right for all children.

SCHOOL SAFETY AND VIOLENCE

It is no surprise that when schools are not safe, students do not attend. Violence in schools is a common problem from conflict zones to seemingly stable communities.

WHAT HAPPENS WHEN GIRLS STAY IN SCHOOL **WAGES RISE 20%** for every year beyond 4th grade that a girl remains in school 15% FEWER CHILD DEATHS in families where women have an elementary education **49% FEWER CHILD DEATHS** in families where women have a secondary education

When students in a remote northern region of Bangladesh were asked which problem impacted them or their classmate's ability to attend school over the past month, most students mentioned violence in their community. Students are both keen observers of, and often entangled in, cycles of violence that impact their development and educational opportunities. Girls are particularly vulnerable.



Magret Banda,13, with her mother, Adesi Daiteni, and her grandmother, Tikondwenji Laisi. When Magret was 5, her mother sent her to cook and clean for her grandmother, the village herbalist. Her dream is to become a doctor. Photo Credit: ©2009 S.Smith/CARE

In a CARE study in Malawi, sexual abuse of adolescent schoolgirls was found to be staggeringly common.⁵ Perpetuated by teachers and fellow students, this abuse flourished in silence. Qualitative interviews revealed that girls often agreed to engage in sexual behaviors with teachers or other elders for much-needed money or passing exam grades. As a result parents withdrew girls from school, or girls withdrew themselves, in an effort to avoid this kind of harassment, statutory rape and sexual misconduct.

Much like universal access to education, violence against girls stems from widespread gender inequality. CARE works on multiple levels to uncover and address the issue of school violence including working with parents, teachers, community members, leaders and students themselves to raise awareness and develop solutions. Some of our methods involve building solid reporting mechanisms in schools and through community groups, while others use workshops that develop student skills in leadership, selfesteem and assertiveness. CARE aims to empower students to speak out when they see wrongdoing and to enable communities to support these students

when they do so. These methods create safer school environments for both girls and boys. When schools are safer more children attend them.

BALANCING WORK AT HOME WITH SCHOOL

In the developing world children and adolescents are often engaged in family duties that distract from their schooling. Domestic work for girls, such as cooking, cleaning and fetching water, and wage work outside the home for boys, are critical to a family's economic survival. However, an imbalance of time dedicated to these duties results in lost educational opportunities and progress. In India analysis of data collected by CARE in the northern state of Uttar Pradesh indicates that students who engaged in working for a wage had statistically significant lower literacy and mathematics scores than their classmates who did not engage in wage work.

"From the time the girl wakes up, she has to light a fire, draw some water [from a well or creek]; if there is some breakfast, she has to prepare it. When actually a boy simply wakes up, washes himself, takes the breakfast, and off he goes," says a rural community member in Malawi. Girls often bear the brunt of higher domestic workloads than their brothers.

In Honduras CARE's research indicates that girls can have 6 times the domestic workloads of boys their same age. As a result girls often arrive late to school or miss class altogether. This work cannot be made up later in the evening, because many of these communities



Daniela Elizabeth Lopez says, "Every day I try to set a positive example for others at school. I want to be a lawyer and fight for lives to be fulfilled." Photo credit: ©2013 Allen Clinton/CARE

do not have electricity, preventing study and work outside of daytime sunlight hours. 6 CARE works not only to address the gender imbalances that manifest through disproportionate workloads but also to ensure both boys and girls have protected time for education and childhood development without endangering their family's economic stability.

Working with households and communities has proven to be a successful strategy in addressing workload issues. In Cambodia CARE organized village support committees that help families balance household chores so that both girls and boys can attend school. After 4 years CARE's analysis of child workloads showed that boys reported doing more housework, creating less work for girls, along with other desirable outcomes.7 According to a father in Cambodia, "It is important that they [both boys and girls] can share the work. . . . It is useful that they share the work. It decreases violence in families."

"At the beginning boys were very hesitant to not only give up their free time but also to do chores that are seen as girls' jobs in the community. But when the whole village, the whole community, started to have a different look on it, they could actually see that girls were going to school and they felt good about it. But it's a very slow process."

CARE STAFF MEMBERCAMBODIA

LANGUAGE

Imagine going to school and not understanding the language your teacher speaks. For many indigenous and ethnic minority students around the world, this is an everyday challenge and an obvious barrier to educational progress. To address this obstacle, CARE works to train teachers to effectively communicate across multiple languages and to establish bilingual and intercultural models of teaching in classrooms.



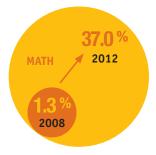
Sreyhung (pictured above) is 12 years old and is on track to be the first person in her family to complete her education. Before CARE began work to bring bilingual classrooms to her village in the province of Ratanakiri, Cambodia, the village school only taught students in Kumai, the national language of Cambodia. Yet Sreyhung, her family and her friends only spoke a local language, Tampun. As a result both of Sreyhung's older sisters dropped out of school.

CARE created a bilingual educational curriculum that provided teachers with the tools and training to teach students in both the national and local languages. With the new bilingual classrooms and teachers in her village, Sreyhung now plans to become the first graduate in her family and a teacher herself. She even gathers her friends in the mornings before class to make sure they all go to school together.

According to one teacher in Cambodia, "When there was only the national Khmer language in class, I saw that many students would not go to school. . . . The Khmer language made students afraid and shy. . . . When students better understand the lesson [in their local language], they continue to study and are more successful in their education, because their foundation is strong."

Similar CARE programs in Peru have shown that parental support for education increases with bilingual classrooms. Understandably when parents can comprehend what their children are learning, they are more involved in the education process. Worldwide, parental involvement is a strong indicator for success in school. After just 4 years of CARE's work with families and communities in Peru on bilingual education initiatives, the percentage of students passing standard math tests has increased from just 1.3 to 37 percent.8

RESULTS IN PERU



% students passing standard math tests INCREASED

THE FUTURE OF GIRLS' EDUCATION

CARE continues its work to increase the educational opportunities of all children, particularly girls, around the world. Through our intensive on-theground efforts and evaluative studies, CARE has uncovered and addressed many of the obstacles that prevent children and youth from attending school. Last year alone we facilitated access to quality basic and secondary education or technical training for more than 6 million people. As we encounter new barriers to education. we continue to design and implement meaningful projects to address them. One example of these continuing efforts is our programs to mitigate early marriages in Bangladesh and Nepal.

Bangladesh and Nepal have some of the highest rates of early marriage in

the world. Early marriage is typically defined as marriage before the age of 18, though it often occurs much earlier, well before girls are physically and mentally ready. In Yemen, for example, girls in CARE's project area were married at an average age of 12, and the majority, 73 percent, were withdrawn from primary school between grades 3 and 6.9 Paradoxically, the more education a girl has, the less likely she is to be married early, but child marriage inhibits education. To address this complex issue, CARE has created a multi-year project that will work not just with families and communities in Bangladesh and Nepal but also with advocacy leaders at the national level in each country to create more favorable social norms around gender equity and early marriage,

which we believe will lead to ever increasing numbers of girls in schools.

As we work toward universal primary education, CARE remains committed to breaking down the obstacles that stand in the way of this goal. Whether these obstacles are due to longheld social norms, such as gender inequality, incompatible studentteacher languages, or newly addressed challenges like early marriage, CARE will work with communities and partners to affect positive change. We do this work because we understand that a child with an education is both empowered and powerful — a person who can one day affect their own changes in their families, communities and nations. •

AMANDA MOLL is a knowledge and learning advisor for CARE.

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Agnes Ntenje, 14, is a grade 5 student in her village's primary school. She hopes to be president or a teacher. Photo Credit: ©2009 S.Smith/CARE



The Long Road to Victory: Food-Aid Reform

BY ANDISHEH NOURAEE

The passage of the 2014 Farm Bill received wide coverage by the New York Times, Washington Post and CNN. Media outlets highlighted the rancorous battle and hard-fought concessions such as new support for peanut and rice farmers and a cut in the food-stamp program. Generally unremarked upon, however, were the historic, bipartisan provisions to reform U.S. food aid. These provisions are the culminating victory of a decade-long battle CARE has fought for better, more effective and efficient U.S. foreign assistance.

FOOD FOR PEACE

CARE was founded with the creation of the CARE Package to deliver food and supplies to a Europe devastated by the Second World War. From before the first CARE Package set sail from the United States to Le Havre, France, CARE has been in close partnership with the American public and the U.S. government to achieve its poverty-fighting mission.

In 1954 the U.S. government launched the foreign food assistance

program for developing countries that eventually became known as Food for Peace. CARE joined the program immediately. Like the CARE Package, Food for Peace was conceived as a way for a nation with plenty to share its bounty with those who have little.

U.S. food aid began
in 1954 to address world hunger.
The program known as "Food for Peace"
has fed more than 3 billion people.
But the system is outdated
and needs reform.

Through the program the U.S. government bought surplus grain from U.S. farmers for aid organizations like CARE to distribute in poor nations around the world. Using food provided by the U.S. via Food for Peace, CARE responded to the Biafran crisis in the 1960s, the cyclone in Bangladesh in the 1970s, the Ethiopian famine in the 1980s, and crises in Ethiopia, Rwanda and Somalia, and Sudan during the 1990s and today. Since 1985 Food for Peace has supported the work of aid organizations through a process known as open market food aid monetization. The U.S. ships food overseas, which aid organizations then sell to support their programs.

CARE is proud of its decade's-long association with food distribution programs underwritten by Food for Peace. There is no disputing that such food aid has helped save the lives of millions of people. Nevertheless, as CARE's experience over several decades helped us develop a deeper understanding of poverty's causes, and as the needs of the world's poorest communities shifted, we began to recognize the need for food-aid reform.

SAVE MILLIONS MORE PEOPLE THROUGH...

LOCAL AND REGIONAL FOOD PROCUREMENT

Local and Regional Food Procurement means purchasing food locally.

ELIMINATION OF MONETIZATION

Monetization means selling U.S.-grown food on the open market.

Speaking at the July 2004 ceremony marking the 50th anniversary of Food for Peace, then-CARE President and CEO Peter D. Bell addressed the need to modernize U.S. food aid:

[W]e have learned that food resources, while extremely valuable, are not enough by themselves to improve people's lives. To advance food security and end hunger over the long term, we need to look beyond the direct distribution of food.

The U.S. spends around \$2 billion annually to help feed the world's poor. CARE's position, eventually adopted by the bipartisan Congressional alliance that passed the 2014 Farm Bill, is that food-aid money should be spent as efficiently as possible and in a manner that does not undermine the long-term food security of the very people it is supposed to help.

CARE's push for food-aid reform focused on two key areas of the U.S.'s food-aid program. First, it called for an increase in the local or regional purchase of food for food aid — meaning food destined for poor communities abroad should be purchased as close to the final destination of the food as possible.

Chris Barrett, professor of economics at Cornell University and co-author of "Food Aid After Fifty Years: Recasting Its Role" has written extensively about how relying exclusively on shipping U.S. grain overseas is outmoded and inefficient. According to Barrett, the U.S. grain surpluses common when Food for Peace was created are long

gone. In addition, shipping grain overseas from the United States takes months — months that people in emergencies don't have. And shipping is expensive. Most of every dollar dedicated to sending U.S. food abroad as foreign aid is spent on shipping, not food. A 2009 U.S. Government Accountability Office study found that local and regional purchases of food for food aid in sub-Saharan Africa would cost 34 percent less than purchasing and shipping the food from the U.S. A 2012 Cornell study put the savings at more than 50 percent.

There was, and remains, strong resistance to reforming U.S. food aid. It comes mainly from the organizations that have built large operations around the existing system. The transportation spending that impartial studies consider waste, the shipping industry considers vital revenue. Agri-business is reluctant to lose a customer for its grain. Finally there are the aid organizations that benefit from shipping U.S. grain overseas.

Many aid organizations rely heavily on food-aid monetization through the Food for Peace program to fund their overall operations. By 2006 it was estimated aid organizations were generating between \$200 and \$280 million annually from this practice.4

Though the money raised through food-aid monetization was spent on other vital humanitarian aid and development programs, the practice had a downside. By bringing U.S. grain into developing countries and selling it at low cost, aid organizations were undermining the very farmers and farm-related businesses who all agree are key to long-term, sustainable food security.

CARE was among those organizations until its experience and research led to a major shift in its stance on the issue. In 2006 CARE called for an end

WHY **REFORM?**



Emergency aid shipped overseas takes on average **130 days** with as much as half the funding spent on transportation and overhead, not food.





This is slow and expensive



Monetization can undercut smallscale, local farmers, and about **30%** of funds go to shipping and administrative costs — not to development programs.



This is unfair and self-defeating

to food-aid monetization — kicking off a unilateral pledge to phase it out of our programs at great monetary cost. We were the first of the large aid organizations to do so and, for many years, one of only a few willing to make

a financial trade-off to abide by what we believed was in the best, long-term interests of the communities we serve. Here's what CARE published in 2006:

CARE has long been associated with food-distribution programs and can be justifiably proud of some of the accomplishments achieved through food-aid programming in assisting the poor, vulnerable, and crisis-affected people throughout the world. . . . At the same time, however, it is clear many of the practices of procurement, distribution and management of food aid — as well as the politics of allocating resources for food aid — are not always compatible with [CARE's mission and vision of serving people and families in the world's poorest communities].

By September 30, 2009, CARE will transition out of monetization.

CARE's 2006 pledge to stop selling food aid on the open market rocked the U.S. foreign-aid community. In 2007 *Time* and the *New York Times* both reported CARE's pledge, noting it was in effect walking away from at least \$45 million per year in operating revenue.

Blake Selzer, a senior policy advisor for CARE who led our foodaid reform advocacy effort from 2008 to 2014, says there was general consensus within the aid community that food-aid monetization was harmful — the U.S. remains the only large donor nation that allows it — but that no other big U.S. organizations were willing to go as far as CARE by rejecting it.

"All aid organizations were arguing for a more flexible approach to food aid," Selzer says, "But CARE was the only organization that said we won't sell U.S. grain in the markets of developing countries to fund our operations anymore. We instantly became leaders of the food-aid reform movement because we were leading by example."

"It was a risky move and some people said it wasn't pragmatic," says Dr. Helene Gayle, who became President and CEO of CARE in 2006, as the decision to forgo income from monetization was being finalized.

"I thought it was the right move, though we were going out on a limb by ourselves. But our call to end open-market monetization instantly carried more weight, from the hallways of Congress to the White House and beyond. And the media started covering it. Our decision put arguments for ending food-aid monetization on the front page of the *New York Times*. We helped shift the thinking on U.S. policy and in many ways began moving the needle on food-aid reform."



Blake Selzer speaks during the 2011 CARE Conference on the issue of food-aid reform. Photo Credit: © 2011 CARE



A woman tending to her crops in Topa, Mozambique. Photo Credit: © 2010 Ausi Petrelius/CARE

Selzer, who joined CARE in 2008 because of its food-aid position, says progress toward enacting food-aid reform began gathering pace after CARE's decision. In 2006 the Bush administration proposed making the Food for Peace program more flexible for the first time. In 2008 the U.S. government allowed a small pilot program for local and regional procurement of food aid. In 2011 CARE helped launch a coalition of aid organizations to lobby for food-aid reform. Selzer says he saw the tide turn in 2013 when food-aid reform, which had been overwhelmingly opposed in Congress, almost got through the House.

"It was having aid organizations unified on the issue and having the bipartisan leadership of the Foreign Affairs committee that helped us, for the first time, get close to passing it," Selzer says.

One of the reasons for food-aid reform's steady accumulation of support, even from representatives of farm states who had previously resisted it, Selzer says, is because, over time, they came to understand that food-aid reform was not going to put a dent in the livelihood of U.S. farmers.

"We weren't eliminating shipping U.S. food. We were saying we want flexibility so we aren't mandated to ship from the U.S. to pay for development programs,"

he said. Explaining how it would make U.S. foreign aid more efficient was also very persuasive. The results of the 2008 pilot program on local and regional procurement of food aid showed how the same amount of food-aid money could reach a lot more people.

"By allowing greater flexibility for the U.S. to respond to global food emergencies in a smarter, more efficient manner, these provisions will enable us to reach many more hungry people around the world," said Gayle.

Selzer credits Sen. Debbie Stabenow (D-Mich.), Sen. Barbara Mikulski (D-Md.), Rep. Ed Royce (R-Calif.), Rep. Elliot Engel (D-N.Y.) and others for their leadership on food-aid reform. The changes for which CARE successfully advocated include provisions that will give the U.S. greater flexibility in the way it responds to food emergencies overseas as well as reduce the inefficient use of monetization to fund important development programs. By sourcing more food locally, emergency aid will reach people in urgent need more quickly and in a way that strengthens farms and farm-related businesses in developing countries.

"Our goal isn't to provide food aid," Selzer says. "Our goal is to offer people the ability to grow their own food and improve their livelihoods. The cliché about teaching some to fish is true."

ANDISHEH NOURAEE is a staff writer for brand and communications at CARE.

CARE ADVOCATES FOR FOOD-AID REFORM THAT **RESULTS IN...**

Faster, more flexible delivery of emergency food aid



Local economies jump started



More money available for development projects









Endnotes

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Building Community in Haiti: It Takes a Village

BY RICK PERERA

mmanuel Beauvoir, a law student and community volunteer, descends a set of clean, concrete steps that were recently built as part of CARE's Neighborhood Improvement Program in Port-au-Prince. Almost 5 years after one of the worst earthquakes in recorded history struck on January 12, 2010, killing an estimated 100,000 people, the Haitian capital remains in the midst of recovery. CARE was a first responder to the disaster and remains in Haiti today, working shoulder to shoulder with volunteers such as Emmanuel to rebuild stronger, more

economically viable communities. More importantly CARE helps to strengthen the community ties that are necessary for Haitians to face the future crises that are inevitable given Haiti's unique vulnerability to natural disasters.

Every day Emmanuel travels to law classes from his home in Ti Sous, a rugged hillside community where transportation has always been difficult. When much of the neighborhood collapsed in the earthquake, transportation, along with so many other aspects of daily life, became impossible. CARE works in Ti Sous, and other neighborhoods of the hard-hit Carrefour district outside Portau-Prince, to re-build vital physical infrastructure so that community members like Emmanuel can make their way to the classes and jobs that are integral to economic revitalization. Neighborhood volunteers select the most important improvements, and CARE trains them to manage these project activities themselves. Examples of improvements currently underway include stable walkways, stairs and a new gravity-fed system that will bring safe drinking water to Ti Sous residents.

"There are a lot of community organizations that are ready to work towards development, participate and contribute," says Emmanuel, who serves as a leader on the Ti Sous Humanitarian Committee. "It's the people of Haiti that are living the reality every day and have a lot to offer in that process."

Local worker Ylerne Divert, a trained mason, adds that Haitians are willing to pull together — they just need the skills and organization to do so. "I see the community's role as to give whatever support we can. I'm ready to do anything I can to help the work."



Ylerne Divert trained as a mason to work on construction projects in Carrefour. Photo Credit: ©2014 Evelyn Hockstein/CARE



People salvage their personal belongings from the remains of their homes in downtown Port-Au-Prince, following the 2010 earthquake. Photo Credit: ©2010 Evelyn Hockstein/CARE

Marceau Joceyln, supervisor of social coordinators for CARE's Katye Nou Pi Bèl (Neighborhood Beautification Project), explains that CARE has transitioned from immediate earthquake relief to longer-term recovery efforts. A key strategy of those efforts is to mentor and link fledgling community groups so that residents can independently continue sustainable urban development beyond CARE's direct involvement.

"We facilitate bringing together existing smaller organizations into a network that can plan and oversee improvements with CARE's support," explains Marceau, who recruits local volunteers like Emmanuel to work on projects such as the improved walkways and water kiosks.

Emmanuel became a community leader in the temporary camps that sprang up after the quake. He and his family were luckier than most in the Carrefour district — though they lost their home, all of them survived. They found their way to a makeshift shelter in an empty lot that would eventually become a camp for displaced persons. Across Haiti the quake left a staggering 1.5 million

people homeless and in temporary camps with no public services.

Today more than 90 percent of displaced people have left the camps — some returning to their previous homes, some building or renting new ones, some continuing to use transitional shelters provided by CARE and other agencies.¹ Others, however, remain in precarious circumstances, and CARE's goal is to see as many as possible integrated back into the fabric of community life.

"By providing improved services in neighborhoods, we are helping create a 'pull factor,' making it more attractive for families to relocate here."

MARCEAU JOCELYN

CARE SUPERVISOR OF SOCIAL COORDINATORS

Of course short-term relief targeted at camp residents, such as safe water and health care, was crucial to saving lives in the early period



With training and seed funding from CARE, Angélène Jean opened a small shop on the porch of the house where she and her family live with a host family. Photo Credit: ©2014 Evelyn Hockstein/CARE

following the quake. But CARE was careful not to create incentives that could encourage people to stay permanently in temporary camps or even to move there from underserved neighborhoods. These neighborhood improvements included better public services, financing programs to help pay rent and construction costs, and safer and more hygienic schools.

This long-term, holistic approach to emergency response is one of CARE's particular strengths. Although many humanitarian actors provided immediate relief after the earthquake, few have the intimate connections and local expertise CARE has cultivated through 60 years of working with the people of Haiti.

Creative tactics are helping ease the transition of displaced people back into established neighborhoods. One of CARE's most innovative approaches, known as retrofit, matches homeless families with homeowners whose houses were damaged but still standing. In exchange for financial support and technical assistance to rehabilitate

their houses, homeowners agree to host a camp family, rent free, for a minimum of 1 year. The displaced families seek their own hosts, often old friends or neighbors, ensuring the most compatible pairings.

The success of the retrofit project is exemplified in the seaside community of Association des Pêcheurs (APEC 2 or Fishermen's Association). This closeknit community of fishermen came together to house those whose homes were destroyed. One member of APEC 2, Angélène Jean, 30, watches her four children while her husband is away fishing. She also tends a small shop that sells basic groceries, soap and toiletries. Until CARE came to the neighborhood, her family and 30 others like her were crowded into tents and makeshift shelters near the rocky beach where men repair their nets and unload the day's catch.

"We lived under a tarp for 4 years. People were sick, and the heat was terrible," says Angélène. "When the CARE organizers and engineers came to look at the houses, I was so happy, because I didn't know what to do."

As instructed by the project staff, she

approached her friend Fleurime Gracia, 30, whose modest house had suffered cracked beams and collapsed walls. In exchange for repair help, Fleurime, her husband and two children happily made room for their neighbors. After a couple of months living together, everyone is getting along well, says Fleurime.

The program has arranged rent-free housing for all of the displaced families of APEC 2 for at least 18 months - 24 months when a non-occupant landlord signs up with a rental property. Local construction workers trained by CARE and hired by the homeowners complete the repairs. This method ensures that rebuilding is completed according to earthquake-resistant codes, while introducing new skills into the community. CARE also works with the host and quest families to develop plans for income after their lease arrangement runs out. Participants choose productive enterprises — like Angélène's small retail shop — and receive seed capital and training to get them up and running. With the money she's earned, Angélène is already scouring neighborhoods looking for a place the family can afford to rent.

"We earn more than we ever did before, when our only income came from the fish my husband caught that I sold at the marketplace" Angélène says. "We're paying school fees for all of our kids, and hoping to save up enough so he can buy his own fishing equipment instead of working for others."

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Every step of CARE's earthquake recovery strategy includes close cooperation with the Haitian government, from national ministries to municipal authorities. CARE brings community activists together with their governmental counterparts to jointly plan and execute development initiatives, improving links and fostering the responsiveness of authorities to the needs of their constituents.

In one initiative, CARE cooperates with Haiti's Ministry of Public Works to train local construction workers in skills like carpentry and masonry that are code compliant. These skills will help make the community more resistant to future disasters, says Dierry Léger, who has worked with CARE since taking office as deputy mayor of Carrefour in 2012. "There has long been a problem with construction quality, with people building houses without respecting building standards," he



Angélène Jean (right) speaks with Fleurime Gracia, a member of her host family. Photo Credit: ©2014 Evelyn Hockstein/CARE

says. "Organizations like CARE have been providing training to masons and technicians working in this area. It's still a challenge getting the bosses to build according to norms, but things have changed."

CARE's efforts to build better links between community members and officials gives additional legitimacy to communities like Ti Sous that originated as informal settlements without official recognition and where many residents lack clear title to their plots, a thorny issue that must be resolved before structures can be rebuilt.

With his enthusiasm, energy and dedication, Dierry exemplifies the partnerships CARE is building with local leaders, both community activists and elected officials—partnerships that point to a more self-sufficient future.

"I encourage CARE to continue to work in our neighborhoods," the deputy mayor says. "I'm here to continue our cooperation, with all my heart, because it's for my people, my community and my country."



Dierry Léger, deputy mayor of Carrefour, with Jean Joseph Francoeur, CARE shelter project manager. Photo Credit: ©2014 Evelyn Hockstein/CARE

RICK PERERA is a staff writer for CARE.

Endnote

1. International Organization for Migration. (2014, June). Displacement Tracking Matrix Haiti. Retrieved August 18, 2014, from http://reliefweb.int/report/haiti/displacement-tracking-matrix-dtm-haiti-round-19-june-2014.



Ending Gender-Based Violence: Working with Men and Boys

BY JOHN CROWNOVER

ender-based violence (GBV) is one of the most widespread but least recognized human rights abuses in the world. Globally 1 in 3 women will be raped, beaten, coerced into sex or otherwise abused in her lifetime.

Survivors face long-term physical and social problems, and it is widely recognized that if GBV is not addressed, the Millennium Development Goals, along with other markers for global development, will not be reached.

Preventing and responding to GBV has been an integral part of CARE's commitment to promoting gender equality and ending poverty for almost 20 years. From conflicts and natural disasters to stable, long-term development projects, CARE has enacted extensive GBV programming

in 61 countries throughout Asia, Africa, Eastern Europe, the Middle East and Latin America.

To address the complex and multiple causes of GBV, CARE works with individuals, couples and families, communities and societies through a combination of prevention and response strategies. One of CARE's signature methods to address GBV is our work to engage men and boys in the process to end violence. Working with women in isolation can inhibit positive community and family-level change and can even endanger those women we work to support. We have also found that men and boys benefit from turning a self-critical lens on the patriarchal roles and attitudes they are so often expected to assert.

refers to any harm perpetrated against a person's will on the

Gender-based violence (GBV)

basis of gender and is based on an unequal power between men, women, boys and girls. Women and girls are often the targets of GBV because social norms and beliefs perpetuate their second-class status.

GBV includes physical, sexual and psychological abuse of women and girls; trafficking; traditional practices such as female genital cutting, forced marriage, and honor crimes; and widespread sexual violence and exploitation during and after conflicts and natural disasters.

"I coordinated a workshop on masculinity and gender ...and it was during this workshop that I began to view men differently. I came to realize that they are themselves struggling with the consequences and requirements of their own socialization, and that they often do not even realize it."

FEMALE CARE STAFF MEMBER WEST AFRICA

By addressing those attitudes and behaviors that inhibit equality, CARE aims to help reduce violence and bolster community safety and beneficial family interactions. Involving men as our partners and allies in our work against GBV can benefit all family members. Our program participants reported better gender relations and less violence, and CARE staff have been positively affected as well.

GENDER EQUITY WORK: WESTERN BALKANS

CARE's work in the Balkans to address GBV has been particularly successful, despite the social and geographic complexities of the region. The area's recent history in the Yugoslav and Bosnia Wars has exacerbated the patriarchal attitudes and violent behaviors of the current generation of young men. From an early age, many boys in the Balkans are taught that being a "real man" means being a provider and protector. In preparation for these roles, boys are often raised to be aggressive and competitive. If boys show interest in domestic tasks

traditionally associated with women or if they display their emotions, they may be ridiculed or even attacked by their families and peers.

The tumultuous post-conflict recovery has entrenched militarized masculine role models in the culture. These violent gender ideals have generated rising levels of GBV and interpersonal violence across the Balkans. Young men are quite often the primary victims themselves whether through bullying or other socially acceptable demonstrations of strength and control.1 Violence in intimate relationships, homophobia, and the notion of physical strength as a core feature of being a man are pervasive. Further, boys lack knowledge about basic sexual and reproductive health facts.2 Taken together, these characteristics have contributed to an environment particularly conducive to GBV.

In a baseline survey conducted by CARE in Sarajevo, Zagreb and Belgrade, CARE found a significant level of violence in surveyed youth. The young men reported strong incidence of inequitable attitudes and behaviors towards gender and hyper-masculine notions of manhood. The schools reported that a culture of violence was very much a part of many families and that young people often grew up in homes that have experienced family violence.³

THE YOUNG MEN'S INITIATIVE: CREATING POSITIVE SOCIAL CHANGE

To address these entrenched attitudes toward gender in the Balkans, CARE leads a coalition of local, regional and international organizations called the Young Men's Initiative (YMI). YMI, now 7 years old, seeks to promote positive masculine role models, nonviolence and gender equality through a combination of educational workshops and

community campaigns. YMI's curriculum is designed to elicit critical reflection on the social drivers of violence. YMI also promotes more positive peer culture among adolescent boys, particularly around the issue of high-risk alcohol consumption, which is linked to an increased likelihood of violence in many settings and is prevalent in the region. YMI is implemented in vocational high schools to ensure high levels of participation among boys in the important 14 to 18 year-old age range. Adolescence is a pivotal moment when attitudes and behaviors are still being developed and are therefore more open to positive social change.

VIOLENT ACTS COMMITTED BY YOUNG MEN

Violence against another young man/boy %

65 77 69
SARAJEVO ZAGREB BELGRADE

Emotional violence against ex-girlfriend %

20 22 10
SARAJEVO ZAGREB BELGRADE

Physical violence against ex-girlfriend %

5 1
SARAJEVO ZAGREB BELGRADE

Sexual violence against ex-girlfriend %

12 13 5
SARAJEVO ZAGREB BELGRADE

Baseline Survey with Secondary School Young Men



Korab (pictured above) is a 17-year-old high-school student living in Prishtina, Kosovo. Korab grew up during Kosovo's post-war period of social and economic turmoil. In his family and community, men always made the decisions. He thought it was perfectly normal that his sister carried the bulk of the domestic chores and that he and his friends made overt sexual comments to girls they passed in the streets. Through his engagement with YMI, Korab learned about sexual harassment and gender inequalities and began to see his environment differently. Along with his peers in the YMI groups, he began to step out of the confining roles that described how men and boys should behave. Korab realized that it wasn't fair for his sister to have extra work at home while he did not. He also realized how harassment affects girls and women. Working with CARE's partner in Kosovo, Korab has been promoting a new version of what it means to be a young man one that doesn't accept that violence is a necessary part of masculinity. Through street demonstrations and messaging campaigns, he is changing his community's view, one person at a time.

YMI PROGRAMMING: MEASURING SUCCESS

Over the course of the 2012–2013 school year, CARE and the International Center for Research on Women conducted an evaluation of our progress to combat GBV in the Balkans. The results of the studies were overwhelmingly positive. We found that our work with

men and boys, particularly at the impressionable adolescent age, resulted in a number of important gains.

- Boys had more equitable attitudes towards women. Boys were 5 to 15 percentage points less likely to think that a woman's primary role was to stay at home and cook.
- Boys were less homophobic.
 Boys were 3 to 17 percentage points less likely to think it was acceptable to beat a gay person.
- Boys were less likely to think violence is acceptable against women and as a general solution to their problems.
- Boys had more open ideas about what it meant to be a man.
 There was a 27 percentage point improvement in the number of boys thinking that characteristics other than physical strength were the most important to manhood.

Given the success of YMI programming, CARE has used the best practices and methodologies developed in the Balkans in other countries with endemic GBV problems. CARE country offices in the Democratic Republic of the Congo and Burundi have already enacted similar programs that engage men and boys, and Lebanon and other Middle Eastern countries are evaluating how best to integrate this work into existing projects. Throughout CARE we believe that a comprehensive approach to support gender equality will reduce violence against women and, more broadly, in families and communities everywhere.

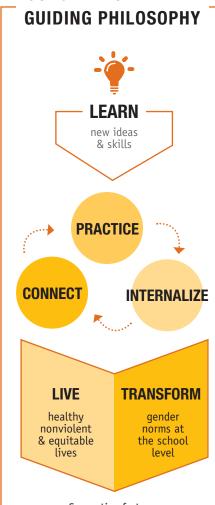
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Endnote

- 1 International Center for Research on Women. (2013, November). YMI Synthesis Report. Evaluating the Implementation and Effectiveness of CARE International Balkans' Young Men Initiative.
- 2 Ibid.

3 Ibid.

YOUNG MEN'S INITIATIVE:



Supporting factors:

peer-to-peer approach, experiential learning, safe spaces, facilitators as role models, sustained engagement through multiple programming streams.

Boys should be understood not as obstacles to peace and gender equality but rather as critical allies in promoting nonviolent, healthy relationships and communities. YMI holds that if students learn about violence and how to question dominant gender norms, and if they have a chance to practice these new ideas and skills in safe spaces, then they will have a greater likelihood of internalizing this information which, over time, will result in living more gender-equitable, healthy and nonviolent lifestyles. Moreover, as group norms begin to change, the program helps foster a more tolerant, accepting environment at the school level.



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