

Evaluating systems-level change and impact in CARE's programming in Ecuador, Ethiopia, Nepal and Uganda: A global report



October 2022

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Executive Summary

This report provides a detailed analysis and review of the evaluations of four CARE systems-level change projects - from Ecuador, Ethiopia, Nepal and Uganda - exploring the extent to which their actions influenced systems change and led to impacts in people's lives. It represents what is understood as the first time CARE has undertaken a deep dive evaluation into its systems-level approaches. The report begins with an overview of these projects and the Outcome Harvest evaluation methodology used across these countries to measure systems change, including the adaptations made to apply Outcome Harvesting to a systems-level project rather than standard CARE programming.

The report provides findings of systems change across CARE's six systems-level pathways – advocacy, social norms, social movements, service systems strengthening and social accountability, inclusive market-based approaches and scaling and adapting- which all found strong examples of CARE's work significantly influencing systems change, often in new and innovative ways. These findings detail not only the key systems change achievements, but also the strategies used by these CARE projects to do so and the other pathways which supported this success, as well as unintended outcomes and gaps identified by the review.

The report explores what these findings mean for CARE's strategic drivers of gender equal and locally led, highlighting that these systems-change projects played a central role in advancing CARE's gender equal commitments and advancing a localization agenda. While systems-level work sits under the globally scaled strategic driver within CARE USA, it is equally key to supporting the two other drivers.

The report explores the findings on systems-pathway integration (using more than one systems-pathway concurrently), providing new analysis which shows that multiple pathway approaches were central to the success of these systems-level projects. The report argues that using multiple pathways leads to more impactful programming, particularly where those linkages are highly strategic in the context of CARE's work. In particular, social movements and advocacy were found to be a critical intersection across all four countries. Pathway integration was also found to be key for sustainability, and gender equality was identified as a key glue that ran through the pathways, supporting their integration. Social norms change was found to be central to successful systems-level change, as the pathway which supported the greatest number of other pathways (not only influencing systems-change by its own, but as a key supporting tactic for broader systems change).

The report explores the impact on people's lives as a result of this systems-change across these countries. It finds that the actions of these systems-level projects successfully impacted on people's individual lives in a broad range of ways, supporting CARE's agenda for poverty reduction and social justice. In particular, this included positive impacts across the countries on individual empowerment (agency, self-esteem, self-confidence and skills), on greater employability and economic and business opportunities, and on increasing women's financial autonomy and economic empowerment.

The report explores the findings across the countries on sustained systems-change as a result of the project activities. It found that the focus countries continued to enjoy sustained systems change after the projects ended, including the ongoing positive impact of progressive policy and budget changes, the ongoing work of stronger and more influential social movements and strengthened systems, and the lasting effect of social norms changes among households, communities and institutions.

The report explores the significant lessons learned from this work to strengthen CARE's efforts at all levels. This includes the fact that these CARE COs are already implementing systems-level work –

which is having a significant impact - but are using different language, and lack rigorous understanding and conceptual clarity in relation to CARE's systems-level framework. In addition, there are significant opportunities to expand and strengthen the work within each of the pathways, and through pathway integration, and to leverage the combination of specific pathways. Equally, there are significant opportunities to strengthen the focus on gender equality and localization within systems-level approaches and align this work with CARE's gender equal and local led drivers. There are also critical lessons in relation to improving measurement and reporting, as well as future evaluations and the benefits and challenges when using the outcome harvest methodology.

Finally, the report provides recommendations for action to improve programming, research, evaluation, learning, measurement and reporting, capacity building and program design to strengthen and expand this already highly impactful work. The key recommendations include to: 1) Support a more deliberate and strategic focus on systems-level change across the work and project design of CARE COs; 2) Clarify areas of conceptual misunderstanding within CARE as it relates to systems-level change; 3) Elevate the critical role and effect of CARE's social norms and social movements work in achieving systems-level change and impact; 4) Expand and deepen the linkages between systems-change and CARE USA's gender equal and locally led pillars; 5) Prioritize and deepen focus on measurement and reporting of systems-level change and impact within COs and CARE; and 6) Undertake future systems-level evaluations, including the use of the outcome harvest methodology, with other COs.

1. Background and Introduction to report

CARE's ten-year strategy, [Vision 2030](#), seeks to deepen the organizational focus on systems-level change and impact, recognizing that this is essential to expanding CARE's reach and fulfilling the organization's mission to save lives, defeat poverty and achieve social justice (see further below). To support this, CARE launched a systems-level impact initiative to measure the effect of its programs that have influenced or changed systems, and the impact of this systems-change on people's lives. The initiative also aimed to increase capacity across the CARE confederation to design, finance and implement high-quality systems change programs, and to strengthen the focus on systems-level change within CARE Country Office organizational frameworks and strategies.

Four CARE Country Offices (COs) – Ecuador, Ethiopia, Nepal and Uganda - were selected to evaluate a project or program, and to synthesize the results for their own learning and program quality and to share globally to strengthen CARE's broader systems change actions. Their work was evaluated using CARE's systems-level framework and its six pathways to scale (see below), as outlined in [Vision 2030](#) and the organization's [Impact at Scale Guidance](#). This work was situated under CARE USA's FY2022-FY2025 strategic plan focus on globally scaled, and equally sought to make direct connections to both [gender equal and locally-led](#) as the other two critical "impact drivers" for the organization.

This work represents the first known time CARE has undertaken a deep-dive evaluation into its systems-level approaches, as opposed to a standard program evaluation. It was complemented by a separate in-depth focus on systems-level capacity building for these four countries, which took place between March and September 2022.¹ This was an iterative and collective learning journey, where engagement with the COs and the broader CARE confederation continually shaped the focus and lessons being learned around how to implement and improve CARE's systems-change approaches and best understand their outcomes and impact.² Ongoing engagement is now taking place with these COs to continue and strengthen their systems-level work.

This report is a detailed review, analysis and exploration of the four country studies, including the research data gathered and the iterative processes undertaken within each country. It provides findings and new analysis across the countries on the methodology used, systems change achieved, systems integration and its impact, as well as on the impact of this work at a population (individual) level. It also explores the sustainability of this systems change and its impact on CARE's gender equal and locally led drivers. The analysis further provides significant learning to strengthen CARE's work, at the national, regional and global levels, and recommendations for action to improve and expand CARE's systems-level programming, research, sharing, evaluation, measurement and reporting, capacity building and internal organizational systems.

Further information on individual Country Systems-level Evaluation Reports can be found at the following links: Ecuador ([English](#) and [Espanol](#)), [Ethiopia](#), [Nepal](#), [Uganda](#),

¹ Please see the separate CARE Systems Capacity Strengthening Impact Report [here](#) for further details

² Please see the separate capacity building report for further details

2. CARE's approach to systems level change and impact

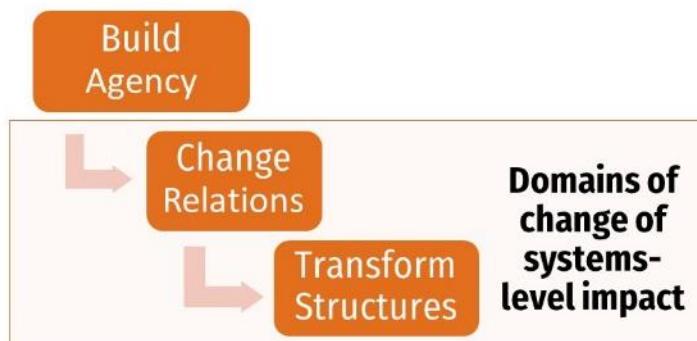
Systems-level change goes beyond the individual-level to achieve positive shifts in the underlying structures and supporting mechanisms which cause interpersonal, community, organizational, institutional, corporate and other macro systems to operate in particular ways. CARE achieves systems-level change through the cumulative effect of its own and its partners' programs and actions across multiple systems-level "pathways to scale"³, namely:

- 1) Advocacy to influence policies, programs and budgets of governments and other power holders;
- 2) Supporting and advancing social and gender norms change;
- 3) Supporting social movements to take collective action for change;
- 4) Service system strengthening and citizen social accountability;
- 5) Inclusive market-based approaches for economic and environmental sustainability; and
- 6) Scaling and adapting proven models through CARE and its partners, and indirectly with governments, private sector or the social sector.

CARE conceptualizes **systems-level impact** as the changes people experience in their lives because of effective systems-level change through these above pathways.⁴

CARE's systems-level work aligns with, and directly supports the realization of, CARE's [Vision 2030 Theory of Change](#) (ToC). CARE's ToC centers agency, relations and structures as the levels of change required to address the injustice of poverty and gender inequality. In particular, CARE's **systems-level change and impact supports CARE's actions to 'change relations' and 'transform structures'** (see Figure 1), and in doing so supports more sustainable change among individuals reached.

Figure 1: CARE's Theory of Change and systems-level impact



Through expanding its systems-level work, CARE **can reach far greater numbers of people and have greater impact**. CARE has ambitious targets to contribute to meeting the Sustainable Development Goals (SDGs) by 2030 – including supporting 200 million people from the most vulnerable and excluded communities to overcome poverty and social injustice (SDG 1) and that 50 million women and girls experience greater gender equality (SDG 4 & 5) – and achieving systems-level change and impact is central to tipping the scales towards enabling CARE to meet these targets.

³ Guidance Note: CARE approach to [Impact at Scale](#) (July 2020)

⁴ CARE is focused on systems-level change impacting the lives of people in six different domains (or "impact areas") – 1) gender equality, 2) right to health, 3) right to food, water, and nutrition, 4) climate justice, 5) women's economic justice and 6) humanitarian response.

Each of the above pathways to scale seeks to achieve different types of systems change, as part of CARE's broader systems-level impact. Table 1 below outlines each of the pathways and its related systems change.

Table 1: Overview of the CARE systems-level pathways

| Pathway | Systems change |
|--|--|
| Advocacy to influence policies and programs | Change in policies, programs, budgets. |
| Social norms change | Increased gender-equitable norms (or decrease in gender-harmful norms) at community-level. |
| Social movements | Fostering and strengthening collective action among conveners, allies, resource partners, amplifiers. |
| System-strengthening and social accountability | Increased capacity of institutions and services to provide inclusive and effective services and to fulfill their obligations. Greater social accountability. |
| Inclusive Market based approaches (iMBAs) | Markets that are more inclusive, uphold labor rights, and are sustainable (economically & environmentally). |
| Model Replication | Adopt and scale up proven models in ways that are context-specific while maintaining fidelity and impact of the core intervention. |

3. Introduction to the four target country projects

This section provides a brief overview of the projects/program evaluated within each of the four countries, including the problem the project was seeking to address, the solutions it used, its target population and its expected outcome and impact. This provides background context, prior to discussing the findings from the analysis across all these countries.

Humanitarian Assistance Program (PAH) in Ecuador

Problem: Ecuador is experiencing a significant increase in the flow of Venezuelan migrants and refugees entering the country, driven by a worsening political-economic context in Venezuela.⁵ Those arriving in Ecuador lack basic resources, are highly food insecure and have growing protection and social needs.⁶ Migrant women and people of diverse gender identities and sexual orientations experience discrimination, exploitation and violence during their journey to Ecuador, and local Health Services insufficiently respond to their needs.⁷ Previous policy commitments for greater attention to Venezuelan migrants were dropped after a change of government in Ecuador in May 2021. COVID-19 restrictions led to an 8.9% reduction in gross domestic product (GDP) across Ecuador, worsening everyone's livelihoods.⁸ CARE's rapid gender analysis (RGA) in 2020 and 2021 found that COVID-19 further increased Venezuelan migrants' risk of violence, sexual exploitation and trafficking, and reduced their access to health, food and livelihoods.⁹

Solution: CARE Ecuador's Humanitarian Assistance Program (PAH) responds to the Protection and Sexual and Reproductive Health (SRH) needs of the Venezuelan migrant population and vulnerable host communities in Ecuador. Created in 2018, PAH is implemented directly through CARE's five in-country offices (in Huaquillas, Ibarra, Manta, Guayaquil and Quito/National) and through partner organizations (see below). PAH activities include psychosocial support, healthcare, gender-based violence (GBV) prevention, multipurpose cash, legal guidance, case management and referrals, accommodation support, outreach activities, creation of support networks, educational awareness campaigns, collaboration with local government and public entities, and supporting training and job opportunities for young people. PAH employs a number of actions that link to CARE's systems-level pathways, including promoting changes in social norms, systems strengthening, promoting social accountability, supporting social movements, implementing inclusive market-based approaches, and policy advocacy.

Target population: Migrants and refugees, focused on lesbian, gay, bisexual, transgender, intersex, queer or others (LGTBIQ+) and women, and protection and health sector actors

Expected Outcomes and Impact: PAH seeks to build agency and resilience of vulnerable migrants and host communities and ensure responsible entities address their rights and protection, in order to provide participants with greater wellbeing and self-confidence to overcome their vulnerability. Although not originally conceived as such, PAH also sought changes in relationships, communities, and how systems and structures work for and with this target group.

⁵ Abuelafia, E. 2020. *Migration in the Andean region: impact of the crisis and expectations in the medium term*: Inter-American Development Bank

⁶ Ecuador Venezuelan Refugees – ACAPS, [June 2021](#)

⁷ November 2019, a study by ANálisis Rápido de Género in Ecuador

⁸ Central Bank, 2020

⁹ UN Women & CARE Ecuador, Rapid Gender Analysis on the situation of women and gender-sex diverse people: Effects of COVID-19 in Ecuador, May 2022; CARE, July 2021

Seizing the Moment (STM) project in Ethiopia

Problem: The remit of the Ethiopian Ministry of Women, Children and Youth (MoWCY), to advance the needs of women, children and youth, and hold other line Ministries to account for doing so, was made more explicit in 2018. However, this Ministry had limited organizational capacity to confidently address gendered barriers and limited tools with which to support and hold other ministries accountable on gender issues. The current National Policy on Ethiopian Women does not conceptualize the subordination of women as related to socially constructed gender roles and relations, nor does it consider fully the multi-dimensional forms of inequality that shape women's lives. Despite Ethiopian law stating that all sectors and Ministerial offices should address the affairs of women in their policies, laws, development programs and projects¹⁰, government does not have capacity to do so.

Solution: Funded by the UK's former Department for International Development (DFID), the project, *Seizing the Moment (STM): Working towards Gender Equality in government structures and policies with a focus on the Ministry of Women, Children and Youth (MoWCY)*, was a pilot project implemented by CARE Ethiopia between the period of July 2019 and June 2020, later extended until October 2020. The project worked with MoWCY to transform its internal organization while also supporting it with the external application of its Ministerial mandate. The project also leveraged on the recent more open legislative space within Ethiopia for civil society organizations (CSOs) and development partners to undertake advocacy and engagement towards the government.

Target population: Government Ministries

Expected outcomes and impact: The two project outcomes were: (1) Improved organizational capacity and working culture, especially around gendered norms at MoWCY – ensuring Ministry staff are more confident in addressing gendered barriers that constrain their effectiveness; and (2) In line with its new remit, MoWCY has better systems and tools with which to support and hold other Ministries accountable on gender issues. Although not originally conceived as such, the project also sought to achieve systems-level change through actions linked to a range of CARE's pathways to scale.

SAMARTHYA project in Nepal

Problem: Social movements in Nepal struggle with systematization and have limited ability to influence decision-makers. Landless people¹¹ have had the right since 1990 to farm the land on which they reside, but this land has remained unregistered and cannot be used for any economic purposes. Policies on land, agriculture and food security in Nepal are not sufficiently supportive of the needs of landless people and marginalized farmers, particularly women, and government lacks the knowledge to work with these groups. Community-led models to build climate resilience remain small-scale and are not integrated within government systems.

Solution: CARE Nepal's 'SAMARTHYA: Promoting Inclusive Governance and Resilience for the Right to Food' project was implemented in Udayapur, Siraha and Okhaldhunga districts between July 2018-June 2022, with support from CARE Denmark. The project was undertaken with social movement organizations, Community Self Reliance Centre ([CSRC](#)), the National Farmers Groups

¹⁰ Article 46 of Ethiopian Proclamation No.691/3A/3

¹¹ In Nepal, the landless lack formal documentation for the land they have been living on and farming on for generations, or they have no land at all and are either tenant farmers or farming on government land without permission

Federation (NFGF), and the National Land Rights Forum (NLRF)¹² and with technical partners, Local Initiatives for Biodiversity, Research and Development (LIBIRD), Clean Energy Nepal (CEN) and UN-Habitat. SAMARTHYA collaborated with local and provincial government to improve the policy context related to land, agriculture and food security for landless people and marginalized farmers, and supported these movements to engage with government and mobilized them to undertake advocacy to facilitate policy change and to hold duty bearers accountable. The project also strengthened government systems, and developed and institutionalized climate resilient scalable models in land and agriculture within government. SAMARTHYA further strengthened the internal systems and capacity within these social movements, supporting them to become more established and sustainable.

Target population: Landless and smallholder farmers, women, and social movements

Expected outcomes and impacts: The project aimed to increase momentum for the Right to Food agenda in Nepal, making it more contextualized, concrete, and systematic. SAMARTHYA expected to improve the lives of the target group through improved food and nutrition security. Although not originally conceived as such, the program also sought to achieve systems-level change through actions linked to a range of CARE's pathways to scale.

National Policy Regulatory Program Support (NPRPS) program in Uganda

Problem: Women in Uganda, particularly poor and rural women, women with disabilities, or widows and single parent families, face huge challenges in accessing finance and markets and in setting up small businesses. This is compounded by social norms, which exclude them from positions of power and influence, and limit their access to information and ability to make their own financial decisions.¹³ Despite the viability of savings groups as a vehicle for women's economic empowerment (WEE) in Uganda, the savings group landscape in the country is fragmented, few standards exist to guide and regulate this work, existing savings groups require convening and support, and the public sector is an untapped opportunity for scaling-up savings groups.¹⁴

Solution: CARE Uganda launched a three-year National Policy Regulatory Program Support (NPRPS) program in January 2020 to test and build Women Economic Collectives (WECs) in Uganda, particularly savings and women's groups. Funded by the Bill and Melinda Gates Foundation (BMGF), NPRPS aims to support and drive strategic policy, regulatory and programmatic initiatives to scale up the Ugandan WECs agenda by December 2022. The program's three specific objectives are: 1) To strengthen the savings groups ecosystem through improving the legal and regulatory environment; 2) To strengthen government-led programs to deliver evidence and approaches on women's economic empowerment outcomes; and 3) To gain clarity on WECs through a landscaping study/mapping. The main stakeholders engaged included the Uganda Microfinance Regulatory Authority (UMRA), the Ministry of Finance, Planning and Economic Development (MFPED), the Project for Financial Inclusion in Rural Areas (PROFIRA), the Ministry of Gender, Labour and Social Development (MGLSD), Uganda Women Entrepreneurship Programme (UWEP) and the Institut de Publique Sondage d'Opinion Secteur (IPSOS) Uganda.

Target population: Government departments, private sector, un- and under-banked women

Expected outcomes and impacts: The program aims to both transform the ways women and girls participate in economies – especially the most vulnerable – and to enable the use of collective

¹² CSRC, NFGF and NLRF are national people's organizations/individual member organizations with a strong history of supporting and uniting disempowered farmers and communities and advancing their land and agricultural rights in Nepal

¹³ UWEP Baseline survey, 2021

¹⁴ Study in Kenya, Tanzania, Uganda and Ethiopia on viability of Savings Groups for WEE in Africa

platform models to address asymmetries of power, agency, information, and access to markets. Although not originally conceived as such, the program also sought to achieve systems-level change through actions linked to a range of CARE's pathways to scale. For the purposes of the evaluation, the NRPRS program was defined as not only as the original NPRPS activities but all CARE interventions that NPRPS is now leveraging upon, such as the several generations of village, savings and loans associations (VSLAs) programming in Uganda.

4. Evaluation questions, methodology & steps used across the four countries

4.1 Overview of the Outcome Harvest methodology used

Outcome Harvesting is a qualitative participatory evaluation approach which facilitates the collection ('harvesting') of evidence of what has been achieved and then, working backwards, determines whether or not and how a project has contributed to these changes.¹⁵ It involves evaluators, grant makers, stakeholders and/or program managers and staff in the identification, formulation, verification, analysis and interpretation of 'outcomes' in programming contexts where relations of cause and effect are not fully understood.¹⁶ Harvested outcomes include a description of who changed what, when and where it took place, significance of the outcome and how the change agent contributed to that outcome.¹⁷ Outcomes can be positive or negative, intended or unintended, direct or indirect, but the connection between the intervention and outcomes must be plausible and verified.¹⁸ Unlike some other evaluation approaches, Outcome Harvesting does not typically measure progress towards predetermined objectives and outcomes, but rather, collects evidence of what has changed, and then working backwards determines whether and how an intervention or project/program contributed to these changes or not.¹⁹ As the projects included in this evaluation were not originally conceived as systems-level projects deliberately employing systems-level tactics (as per the [Vision 2030 pathways](#)) this methodology was therefore appropriate for the task of documenting and evaluating their effect on systems-level changes and impacts.



This is understood as the first time CARE has undertaken Outcome Harvests to specifically evaluate systems approaches. CARE has previously used Outcome Harvesting for evaluating a number of specific projects in terms of their implementation, such as the CARE Outcome Harvest [evaluation of the OIKKO project](#) in Bangladesh. The CO staff and supporting CARE USA staff and consultants ensured that these systems-level evaluations built upon and learnt from these prior CARE experiences of using the Outcome Harvest methodology.

4.2 Research questions

A set of overarching research questions were standardized across the countries, to support the same focus in the evaluations and allow for comparisons across the four country findings. These questions are outlined in Table 2 below.

Table 2: Systems-level Evaluation Questions

- | |
|--|
| <ol style="list-style-type: none"> 1. <i>Process:</i> <ol style="list-style-type: none"> a. What did the program/project do and how were the systems-level pathways integrated across its activities? b. What were the implementation successes and challenges? What adaptations were made? Why? And how did it build on the lessons of prior programming? 2. <i>Systems and structural change:</i> <ol style="list-style-type: none"> a. What changes were achieved (or not) by the project through different systems pathways (applying the Vision 2030 pathways to scale framework)? |
|--|

¹⁵ Better Evaluation, Outcome Harvesting, available [here](#)

¹⁶ Ibid.

¹⁷ Wilson-Grau, R and Britt, H (2013). Outcome Harvesting. Ford Foundation, November 2013.

¹⁸ Better Evaluation, Outcome Harvesting, available [here](#)

¹⁹ Ibid.

- | |
|--|
| b. How did the systems-level changes across these pathways reinforce or support each other? |
| 3. <i>Population-wide impact:</i> How did those systems-level changes result in changes in individual level impacts on people's lives? |
| 4. <i>Sustainability.</i> How sustainable was the systems-level effect of the program? |

The research questions were also refined as the evaluations began, as part of an embedded ongoing **iterative and learning approach**. For example, the sustainability research question was initially intended to also measure the sustainability of the population-wide impact (in addition to measuring the sustainability of the systems-level effect) but this was subsequently deemed impractical in the available time and budget.

4.3 Methodologies used by the countries

Table 3 below highlights the methodological approaches used by each country to answer the above research questions. The overall approach was standardized across the countries, informed by a template Terms of Reference developed for the evaluation (see Annex D). Within that there were differences and nuances in the methodological approaches used by each country, influenced by their context and focus. These nuances were also impacted by time limitations (see below), where countries had to prioritize the focus of primary data collection.

All countries (with the exception of Ecuador) used secondary data analysis to answer the process question. The systems change question – the main focus of this evaluation research – were answered by all countries through the Outcome Harvesting (OH) primary data collection, using a combination of key informant interviews (KIIs) and focus group discussions (FGDs). In Nepal, field observations and a household (HH) survey were also used to answer this question. For the population-wide impact research question, two countries (Ecuador and Nepal) collected data to answer this question during the OH. The sustainability research question was where there was the least primary data collected, with only Uganda asking about this directly and the other countries reflecting on this on the basis of their broader findings. In collaboration with CARE USA, COs made the decisions about where best (on which research questions) to invest most time and resources during the evaluation given the short-time scale, current data available and expertise, and access to in-country consultant support to implement outcome harvesting. **This approach ensured that every country collected data for the central systems-change research question, and then data was gathered for other research questions that would maximize resources and best align with in-country realities and context.**

Table 3: Data collection approaches used by the four countries

| Country/research question | Ecuador | Ethiopia | Nepal | Uganda |
|---------------------------|----------------------------------|----------------------------------|---|---|
| 1. Process | Not collected | Secondary data analysis | Analysis of Secondary data and OH data | Secondary data analysis |
| 2. Systems change | OH data collection (KIIs & FGDs) | OH data collection (KIIs & FGDs) | OH data collection (KIIs, FGDs, field observations and HH survey) | OH data collection (KIIs) |
| 3. Impact | OH data collection | Not collected | OH data collection & Secondary data analysis | Analysis of Secondary data and reflections from OH data |

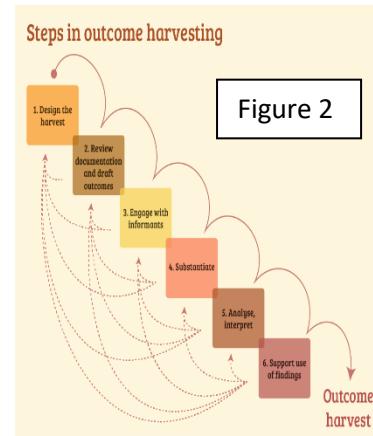
| | | | | |
|--------------------------------|---|---|---|--|
| 4. Sustainability | Reflections from OH data (not asked directly) | Reflections from OH data (not asked directly) | Reflections from OH data (not asked directly) | OH data collection & Secondary data analysis |
| Data collection undertaken by: | External consultants | CARE Country Office staff | Research Company | External consultant |

External consultants or an evaluation firm were appointed in Ecuador, Nepal and Uganda to undertake the data collection (as the harvesters), in collaboration with CARE USA.²⁰ In Ethiopia, CARE Ethiopia staff undertook the outcome harvest data collection themselves.

4.4 Outcome Harvest steps followed by the countries

Each of the countries following the standard steps of the outcome harvest process (see Figure 2), which were adapted for the purposes of evaluating systems-level change and impact. A detailed overview of the specific steps followed by each country, including similarities and nuances, can be found in Annex A. At a high level, the outcome harvest process across the four countries includes the following steps:²¹

- **Key finding: Preparatory step to clarify project systems-level connections:** As this was the first-known systems-level evaluations for CARE, a preparatory step needed to be added before step 1 of the OH to help to guide each country on understanding how their selected project/program activities related to CARE's systems-change pathways, thus supporting alignment during the evaluation. See for example, CARE Nepal's [matrix on SAMARTHYA project linkages to the six pathways](#) based on this preparatory step. Capacity building was also provided (see below).
- **Step 1. Design the outcome harvest:** This step includes: selecting/identifying the different stakeholders (see Box 1 below); deciding what information to collect and how; determining data sources; convening an initial reflection on substantiation; and planning the timeline.



Box 1: Different Outcome Harvest stakeholders related to CARE's systems-level evaluations:

- **Harvester** (the evaluator), such as consultants, evaluation firms or CARE Country Office.
- **Change agents** (who influenced outcomes), such as CARE project implementation staff and any implementing partner staff.
- **Social actors** (who experienced change due to change agents), such as government, non-government organisations (NGOs), etc (as relevant to the project/program).
- **Users** (who will use the results), such as CARE, partners, government, donors, and NGOs/civil society organizations (CSOs).

- **Step 2. Gathering data and drafting outcome descriptions:** This step includes: harvesters gathering and reviewing information and documentation; and harvesters writing preliminary outcome descriptions for review and clarification.
- **Step 3. Engagement with change agents, social actors, and informants on outcome descriptions:** This step involves the harvesters gathering data from these stakeholders to review or complete outcomes and collect (more) outcomes. This can be through e-mail,

²⁰ In Ecuador, data collection was undertaken by consultants Franklin Yacelga and J. Estacio Valladares. In Nepal, data collection was undertaken by research firm 3D Research and Development Solutions. In Uganda, the data collection was undertaken by consultant Godfrey Bwanika.

²¹ More in-depth information on these steps can be found in [this CARE presentation](#) and in [this resource](#)

skype, interviews, focus groups, workshops or other means of data collection. This process seeks clarity around the outcome description, significance and contribution.

- **Step 4. Substantiation:** This step involves the confirmation of the substance of an outcome by an informant knowledgeable about the outcome but independent of the program.
- **Step 5. Analyze, interpret and reporting:** This step involves organizing the outcomes so they can be interpreted and can answer the systems-level evaluation questions. A report on the evaluation process, findings and recommendations is developed.
- **Step 6: Support use of findings.** This step includes the dissemination of the findings, and use of the findings to inform programming, research and funding proposals.

In Step 1, one country (Nepal) held a design workshop, with the other countries using interviews to determine the information sources and useful questions. In Step 2, a mix of primary data collection and secondary data analysis were used by the countries to develop draft outcome statements. As part of step 3, countries used a mix of meetings, interviews, workshops, focus group discussions and household-based surveys to gather data directly from informants. In Step 4 (substantiation), verification was undertaken through meetings and interviews. This was done qualitatively in two countries (Ecuador and Uganda) and quantitatively using a questionnaire in two countries (Ethiopia and Nepal).²² For Step 5, all countries analyzed and interpreted the data to answer the research question. Each country then developed, revised and finalized an evaluation report based on the findings. Step 6 had the least dedicated time. The results were shared by the consultants with the CARE CO (and with one of the external stakeholders in the case of Ethiopia), and shared globally as part of a [CARE Global Evaluation Sense-making session](#) bringing together the countries. Reflections on learning as a result of these nuanced approaches are included in section 8. Details on methodological limitations can be found in section 7.

Global technical support: At all stages, the COs and in-country consultants/evaluators were supported by CARE USA and international consultants with ongoing input, guidance and resources (via email and check-in meetings). These resources were specifically tailored to evaluating a systems-level approach. An [outcome harvesting overview](#) on the overall process was shared with all countries. An [orientation workshop on the outcome harvesting methodology](#) (in both English and Spanish) was held for CO office staff and the consultants/evaluators, complemented by separate training on CARE's systems-level approach.²³ A [Step 1 checklist](#) was developed and shared. The Nepal CO developed an Outcome Harvest [design workshop agenda](#), which was refined following feedback. Guidance was shared on how to formulate an outcome statement (in [English](#) and [Espanol](#)).

A broad range of ongoing support and guidance was provided to COs and evaluators, including training on outcome harvesting, guidance documents and checklists, feedback and regular check-in calls

Guidance was shared on [analysis and reporting in Outcome Harvesting](#). An [evaluation report outline](#) was developed for the individual evaluation reports. Detailed feedback was provided on each country report. Finally, the [global sense-making session](#) was also an opportunity for each CO to share initial findings and receive feedback.

²² See reflections on how the qualitative vs quantitative process led to differences in the substantiation in lessons below

²³ Please see the separate Systems Global Capacity Strengthening Impact Report [here](#) for further details

5. Evaluation Review methodology

This review entailed a detailed analysis of the separate evaluation reports, findings and data across the four countries. It summarized, as well as interrogated and deepened, understanding on the key findings on systems change, systems integration, systems impact and sustainability of system change across these countries. This evaluation review also pulled out pertinent information from across the countries that relates to systems change influencing CARE USA's strategic focus on gender equal and locally led. Through a greater exploration of the systems-level integration data, the review further provides new data on the unidirectional and bidirectional pathway relationships within the studies. This data was also used to provide new insights through visualization of these pathway relationships. The review then looked across all the evaluation data and findings, and reflected on the experiences of engaging with the COs to support the evaluations, to provide comprehensive implications for learning and recommendations to strengthen CARE's work.

6. Evaluation findings

This section includes the analysis of findings across all four countries. It covers the following area:

- ✓ Findings on systems change overall
- ✓ Fundings on systems change for each of the six pathways.
- ✓ Finding on the impact of this systems change on CARE's gender equal and locally led pillar.
- ✓ Findings on the integration of systems-level pathways and its impact.
- ✓ Visualizing the relationships across the systems-level pathways.
- ✓ Findings on the impact of this systems-change on individual lives.
- ✓ Findings on the sustainability of systems-change.

6.1 Overall systems level change outcomes

This section documents the main system changes overall and the pathways employed by the four evaluated projects/program.

i. Overall outcomes statements

Combined the four evaluations identified 62 outcome descriptions related to systems change. These outcomes covered all six pathways. The number of specific outcomes per pathway are detailed in Table 4. While broader generalizations must be treated with caution (as these projects were not standardized in focus nor a representative sample of all the COs or CARE's broader work), it is noteworthy that social movements had the greatest number of outcomes, followed by systems strengthening-social accountability, then social norms. Inclusive markets and scaling had the fewest number of outcomes, which reflects the feedback from these Country Offices that this remains an area in which they require further capacity building.²⁴ The area of advocacy proved to be a key area of strength among the COs and the overwhelming priority action among the evaluated projects (see below). **Despite that, advocacy was not represented as well in the outcome statements (commensurate to its number of activities)**, which may reflect the fact that outcome statements were often combined (particularly on social movements and advocacy) and often contained multiple areas of change in the context of advocacy (which may have deserved being several different outcomes rather than just one), and evaluators and COs may also have desired to focus on other (less traditional) areas of the COs work. It also highlights the need to further support COs around understanding the change they have achieved.

Annex C contains a table with a summarized version of all 62 outcomes (as a statement) for each of the pathways. The full outcome statements can be found in the individual evaluation reports [here](#).

| Table 4: No of outcomes per pathway | |
|--|----------------|
| Systems pathway | No of outcomes |
| Advocacy | 5 |
| Norms | 12 |
| Social movements | 19 |
| System strengthening-social accountability (SS-SA) | 16 |
| Inclusive market-based approaches (iMBA) | 5 |
| Scaling and adapting | 5 |
| Total | 62 |

ii. Systems-level pathways employed by the evaluated projects

Not all the projects/programs evaluated focused on all the pathways. Table 5 below highlights the pathways that related to the evaluated project/program in each of the four countries. All CO projects worked on advocacy, social norms and systems-strengthening. Three projects focused on social movements. Inclusive markets and scaling were the least commonly used pathway, with two projects focusing on each.

²⁴ Specific trainings were subsequently run by CARE USA in these areas

Table 5: Systems-level pathways employed by the evaluated projects

| Project, Country | Project/Program focus | Advocacy | Social norms | Social movements | SS-SA | iMBA | Scaling |
|------------------|--|----------|--------------|------------------|-------|------|---------|
| PAH, Ecuador | Humanitarian, focus on serving the most vulnerable | ✓ | ✓ | ✓ | ✓ | ✓ | |
| STM, Ethiopia | Strengthen local ministries to be more gender transformative | ✓ | ✓ | | ✓ | | |
| SAMARTHYA, Nepal | Inclusive governance and resilience for the right to food | ✓ | ✓ | ✓ | ✓ | | ✓ |
| NPRPS, Uganda | Partner with government to improve the savings groups' ecosystem | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |

Key finding: CARE's work overall had a significant impact in changing and strengthening systems, making a real impact in the lives of people in its target areas.

6.2 Systems level change findings per pathway across the four countries

This section documents the main system changes for each of the six pathways found across the four countries. It also explores trends and any noteworthy differences or gaps within each pathway.

i. Advocacy pathway: influencing policies and programs across the four countries

Summary of advocacy change



Key systems change achievements in the advocacy pathway:

- Progressive changes in government policies, at local, provincial and national level.
- Progressive changes in government and private sector programs.
- Progressive changes in government budgets.
- Significant policy progression/development.
- Advocacy wins which support a more supportive policy environment.
- A range of unintended outcomes, including organic further policy and program development.

Key advocacy strategies used:

- Lobbying, campaigns and demonstrations.
- Policy review, papers and gap analyses (informed by national, regional and international policy contexts, and covering a breadth of topics); government policy submissions.
- Extensive primary data collection with stakeholders and women.
- Mapping key duty bearers.
- Evidence development and use, including use of CARE's existing RGAs.
- Partnership with government (to support co-creation); validation workshops.
- Developing model acts/legislation.
- Developing action plans and recommendations for government to adopt new policies.
- Supporting the creation of a government Technical Committees and/or membership of government Commissions and Steering Committees discussing the focus issue.
- Multistakeholder dialogues, National TaskForces and national consultations to drive policy change.

- Working through social movements, and women's groups and networks.
- Raising additional donor funds to support policy advocacy.

Main systems-pathways supporting advocacy pathway:²⁵

- Systems strengthening (analysis of government functioning, capacity building of government, supporting services put in place due to new policies).
- Social movements (supporting this advocacy, spontaneously driving this change).

Key finding: The evaluations found evidence of **successful progressive changes in government policies, programs and budgets due to CARE's work**. With respect to **policy changes**, the projects achieved a range of successes, including: changes to local authority policies to support migrants rights to employment (Ecuador city level); reforming the Organic Code for the Integral Protection of Children and Adolescents in Ecuador to include a focus on migrants and improving health, education, sex education, and youth protection; joint government regulations for care of GBV survivors (between Ecuador and Colombia); strengthening a focus on the needs of landless, small-holder famers and climate resilient agriculture within the Local Government Agricultural Act and Land Act in Nepal; and supporting the development of a national Savings Group Policy Framework in Uganda.

With respect to **changing programs**, the evaluations found a range of successes that were enabled by CARE's work, including: the development a National Action Plan Against Trafficking in Persons (provincial level in Ecuador); strengthened cross-border government programing on GBV prevention, human trafficking, and improving ARH and child protection for migrant and refugee populations (Ecuador and Colombia); the integration of gender transformative approaches within the 10-year plan of the Ethiopia Ministry of Women and Social Affairs; and new government programs for newly formalized farmers groups in Nepal to access subsidized production input seeds and saplings, solar irrigation tools, and water. Advocacy also targeted the corporate sector, such as local insurance companies being successfully lobbied to increase availability of agricultural insurance to project target groups (in Nepal). In Uganda, advocacy and a research study led to the establishment of a government COVID-19 recovery fund targeting women's groups and small enterprises.

With respect to **influencing budgets**, the evaluation found CARE's work expanded local government funding allocations for small-scale farmers groups in Nepal.

The evaluations found these projects also had a **significant influence on progressive policy change which had not fully materialized by the end of the project but had significantly progressed** (and their creation/adaptation may only be a matter of time). For example, the actions of CARE Ethiopia played a pivotal role in the groundwork and advocacy for Ethiopia's first ever National Gender Policy, and the drafting of a National Policy for the Prevention and Protection against GBV in Ethiopia. In Uganda, CARE actions supported the Development of Operational Guidelines on savings and self-help groups to be used by the government, set to be issued at the end of 2022.

In addition, there were a range of **actions and policy advocacy wins which did not achieve direct changes in laws or policies but that supported a more enabling policy environment**. An enabling policy environment in this context refers to a set of products, practices and/or attitudes that can positively affect the degree to which policy change can be established. These actions included: advocacy for the regularization of rights and identify of migrants and refugees in Ecuador; advocacy actions leading to the Constitutional Court in Ecuador declaring the Human Mobility Act 2021 unconstitutional; reviewing the National Policy on Ethiopian women to inform the first ever

²⁵ These supporting pathway findings align with CARE's FY21 PIIRS data across the organization

National Gender Policy; advancing legislative reform proposals to strengthen a focus within a 2016 Ecuadorian law on gender identity rights for trans migrants and other people identifying as non-binary; an agenda on children's rights that National Assembly candidates signed-up to, thus committing themselves to a parliamentary commission in this area; and submitting reports to regional and global bodies to support national policy advocacy (such as to the Inter-American Commission on Human Rights, the United Nations (UN) Rapporteur on Human Rights, and the 2022 UN Global Migration Review Forum).

These **policy changes were not only national, but also at regional and local levels**, such as provincial government policies in the context of Nepal. These policy changes were also at the **bi-national/cross border level**, such as between Ecuador and Colombia.

Unintended outcomes through advocacy

An important part of the evaluation findings on CARE's advocacy work was a number of unintended outcomes, including:

- i. Policy advocacy led organically to a set of further policy change actions by those supported by CARE. In Ecuador, for example, women's networks supported by CARE went on to create monitoring committees to monitor progress in the implementation of government policy commitments. In Nepal, partners who were engaged in CARE-supported policy advocacy became broader champions for the project.
- ii. Policy advocacy actions in which government was a key partner also led to further organic actions. In Nepal, for example, as a result of the broader engagement of government, local government departments outside the project target locations decided to adopt the new Acts being promoted by the project anyway, due to the perceived benefits of those changes.
- iii. Policy advocacy supported women's broader advocacy to flourish – emboldening women to come together and further stand-up for their rights - thus highlighting how this advocacy supports CARE's broader gender equality agenda.
- iv. CARE's advocacy actions attracted the attention of many different development partners, stakeholders and Ministries and became a broader national effort than originally anticipated, expanding scope and impact.
- v. Reviews of one policy led organically to reviews and advocacy for other policies. For example, in Ethiopia, policy reviews to support the new National Gender Policy identified a gap in policy focus on GBV. This led to the drafting of a separate National GBV Policy in the country.

These unintended outcomes speak to the iterative and dynamic nature of advocacy work, as noted in lessons learned below.

Key strategies used under advocacy pathway

The evaluation review identified the following key strategies being used in CARE's advocacy work:

- Lobbying to National Assembly or National Commissions, public campaigns, and demonstrations.
- Policy reviews, papers and gap analyses and government submissions, such as in the context of gaps with respect to the rights of LGBTIQ+ people and trans migrants in the Human Mobility Act in Ecuador, or limitations of the current National Policy on Ethiopian Women. CARE's policy analysis not only looked at the national, but also brought in the regional and global context. These reviews also covered a breadth of thematic areas related to women's rights.
- Undertaking in-depth national primary data collection to inform policy reviews and development with government.
- Mapping of key duty bearers.
- Empowering community leaders and members to support and drive policy advocacy.

- Evidence development and best practice reviews. This included using existing CARE's Rapid Gender Analysis studies to inform these advocacy actions (in Ecuador), research on self-help groups and savings groups (Uganda), and literatures reviews to identify trends and gaps in gender-responsive budgeting and propose a blueprint for how government could implement this budgeting approach (Ethiopia).
- Partnership with government. In addition to pressuring government through advocacy, engaging government as a key partner was critical to CARE's policy advocacy success and sustainability. This included jointly hosting a validation workshop to support policy change.
- Developing model acts/legislation (in Nepal)
- Developing clear action plans with government for policy change, and leveraging on these plans. In both Ethiopia and Nepal, action plan recommendations for government on next steps helped to advance new national policy development and provided a critical starting point for the CO's advocacy.
- Establishing Technical Committees (in Ethiopia) and membership of government Commissions and Steering Committees discussing land reform (in Nepal).
- Multistakeholder dialogues and coordination, National Taskforces, national consultations and CSO partnerships, to drive and support policy change (in Ethiopia, Nepal and Uganda).
- Supporting social movements and women's groups and networks (in Ecuador and Nepal) to undertake this advocacy.
- Raising additional resources to support this advocacy. For example, CARE Ethiopia raised an additional USD \$500k to advance its advocacy.

Key supportive pathways for advocacy

Several other systems-level pathways were key to CARE's advocacy successes, including:

- **Social movements** were crucial in supporting CARE's actions and advocacy for the development of policies (in Ecuador and Uganda). Supporting and enhancing these movements to undertake this work was also key (in Ecuador and Nepal). This also increased the legitimacy of these social movements to speak out on behalf of their members and be recognized by government as part of their advocacy (in Ecuador). Social movement actions led to a greater focus on their needs within government plans and strategies.
- **Systems strengthening:** Equally important was CARE's efforts to capacitate government departments and officials to support policy development, and connecting the thematic areas of policy advocacy to support for government programming in that same area (particularly in Ecuador and Ethiopia). In addition, supporting government to create mechanisms for mainstreaming gender equality in its work, also reinforced efforts to include gender-responsive budgeting as part of policy advocacy (in Ethiopia). This was preceded by analysis of the government's functioning and ability to implement any new policy. CARE also supported the strengthening of services put in place as a result of its policy advocacy (for LGBTIQ+ groups in Ecuador).
- **Social norms:** Informing policy reviews and the focus of policy advocacy.
- **Scaling:** Increased scale-up by government in Nepal necessitated amendments to the local Agricultural and Land Acts.

Gaps identified: It was not always clear the extent to which these advocacy successes were primarily due to CARE's efforts, versus the efforts of its partners, but nevertheless CARE can be proud of the policy change achievements it has clearly enabled. Given this specific challenge, CARE seeks to measure its contribution, not attribution, when it comes to advocacy and influencing wins. The policy advocacy actions were also found to mainly focused on government, and while this is critical, there was a more limited focus on other decision makers (such as donors or UN agencies).

ii. Social norms pathway: social norms change across the four countries

Summary of social norm change

Key systems change achievements in the social norms pathway:

- Shifted norms around masculinities, with men playing a greater role in childcare and domestic tasks.
- Changes in household gender norms and decision-making.
- Communities were engaged to shift norms and practices on sexual diversity, the root causes of gender inequalities and women's financial roles.
- Community norms around sexism were shifted to promote gender equality, particularly for migrant and refugee women.
- Duty bearers were engaged to successfully shift their norms and attitudes, leading to improvements in programming and supporting women's participation in public spaces.
- Social movements/CSOs were also engaged to internally reflect on their norms, and promote women's rights internally.



Key social norms change strategies used:

- Mapping of norms and practices.
- Engaging men/reflection spaces and workshops on positive masculinities.
- Spaces for meetings and dialogues among different groups (migrants and host communities in Ecuador).
- Using CARE's Social Analysis and Action (SAA) approach for group reflection and actions.
- SAA training of trainers (ToT) with Ministry staff, creating trained facilitators who then cascade the model to their co-workers.
- Family and community discussions, using a gender transformative household dialogue model and a community dialogue manual.

Main pathways supporting social norm change:

- Inclusive markets pathway.
- Social movements.
- Advocacy.

Successfully engaging men to promote more positive masculinities. In Ecuador, CARE successfully challenged social norms about masculinity that promote men's sole role as the provider, limit their participation in childcare and domestic tasks, grant them privileges, and promote women's subordination, with men found to be behaving in more egalitarian ways in their homes. In Nepal, it was important to work with men, as well as women, in promoting climate adaptation technologies and supporting both to become economically empowered, particularly given the masculine norm around being the breadwinner and the potential backlash from men towards women's economic empowerment (WEE) where they are not engaged.

The evaluations also found **changes in household-level gender relations and decision-making** as a result of CARE's actions. In Nepal, women's access to farmers groups and their networks, and increased income among women, led to men being more supportive of women's rights. In Uganda, family-level discussions led to improved household communication and dialogue between men and women, with couples developing joint savings and investment goals together.

Successful changes to attitudes in the communities as a result of CARE's actions. Attitudes of families and communities shifted positively towards sexual diversity in Ecuador, leading to greater acceptance of family members who are lesbian, gay, bisexual, transgender, intersex, queer or others

(LGBTIQ+). In Ecuador, host communities also become more aware, understanding and accepting of migrants, improving coexistence and creating bonds between these groups. In Ethiopia, engagement with communities to explore the root causes of harmful norms dissipated initial resistance to these topics, and led to a greater willingness among those communities to explore them, and greater desire, recognition and actions for change. In Uganda, community-level initiatives challenged harmful gender norms, discriminatory beliefs and practices that were preventing women from accessing finance and markets, and re-negotiated these, increasing appreciation of women's role and involvement in financial decisions, promoting women into positions of social and political influence in communities, and addressing power inequities. In Nepal, women were also supported to form groups to map local harmful social norms and practices and address their needs, and their actions shifted community attitudes, leading to a focus on addressing gender and social norms being embedded within local climate resilience models.

Key finding: The evaluations found CARE's work **successfully shifting norms among duty bearers**, bringing a more unique focus to this work (which tends to focus primarily on community members). Exploring gendered norms and attitudes and practices with government officials, including senior leadership, in Ethiopia led to greater understanding among these officials of how gender and power affects their lives. These officials then committed to taking practical steps to challenge harmful norms and promote equality, including where these norms negatively impacted their own lives. The reflection sessions also helped government staff to understand the ways in which their own views might be gendered and increase their gender sensitivity in their day-to-day activities in the workplace. The evaluations also found CARE engaged social movements and local government staff in Nepal, and national government in Uganda, around the rights of women, leading to more meaningful participation by these groups in public and municipal forums and other planning and decision-making processes. As a result, these public and municipal forums then better responded to and prioritized women's needs. This also supported these women to become further leaders and change agents, including as community leaders, who then continued to drive social change.

The evaluations also found that **partners and social movements were engaged around their own internal gender norms**, such as CARE's work in Nepal to increase a focus on women's participation and voice within the technical work and decision-making structures of social movements. As a result, a requirement was agreed that women should hold key leadership roles in these movements and that they should have overall 50% or 60% female participation.

A limitation identified in this review was that among at least one CO **certain activities were conceptualized as social norms change while these were actually individual/agency-level strategies and not norms shifting strategies**. For example, psychological assistance, building self-esteem and related capacity building, or solidarity/therapeutic/support groups for survivors of violence. While critically important activities, which may be part of a norms shifting package, these activities alone would typically lead to changes in individual-level agency, particularly in the context of humanitarian work, rather than systems-change.

Key strategies under social norms pathway

The evaluation review identified the following key strategies being used in CARE's social norms work:

- Mapping of norms and practices.
- Engaging men/reflection spaces and workshops on positive masculinities.
- Spaces for meetings and dialogues between different groups (migrants and host communities in Ecuador).
- Using CARE's Social Analysis and Action (SAA) approach for group reflection and actions.
- SAA training of trainers (ToT) with Ministry staff, creating trained facilitators who then cascade the model to their co-workers.

- Family and community discussions, using a gender transformative household dialogue model and a community dialogue manual.

Supportive pathways for normative change

Several other systems-level pathways were key to CARE's social norms successes, including:

- **Inclusive markets pathway:** Livelihoods support through inclusive markets activities supported norm changes among community attitudes towards migrants.
- **Social movements:** These movements continued to drive norm change through their actions.
- **Advocacy:** Advocacy and influencing supported actions to persuade government to undertake SAA within its work. This was specific to advocacy, and not policy advocacy, however.

Gaps identified: The evaluations did not directly explore the connection between social norms change and policy advocacy. For example, how could shifting internal government gendered norms lead to more supportive policies. There was also no focus on understanding the relationship between norms and policy implementation and efficacy. For example, why are some existing progressive policies often misused or prove to be not effective for advancing gender equality. Finally, no specific unintended outcomes related to normative change were identified in the evaluations.

iii. Social movements pathway: Actions by social movements and partners across the four countries

Summary of social movements

Key systems change achievements in the social movements pathway:

- Social movements were a key mechanism for promoting the rights of migrants and refugees, landless and small holder farmers, and un-banked or under-banked women.
- Enhanced technical skills among these movements.
- Strengthened allyship and connections among these movements.
- Improved internal systems within the movements.
- Greater legitimacy of social movements, leading to their recognition by authorities as a key interlocutor to address the needs of their groups.
- Broadened reach of social movements.
- Improved inclusion within social movements, particularly women's participation.



Key strategies used related to social movements:

- Supporting the formation of new social movements, including using a "leaders in emergency" methodology (Ecuador).
- Assessing the specific needs of social movements (Nepal).
- Technical training and capacity building of movements (in Ecuador and Nepal), particularly on undertaking advocacy and joint actions.
- Building movement connections/networking among and between movements.
- Supporting collective actions and activities by movements.
- Enabling cross-border collaboration and exchange among social movements (at Ecuador and Colombia border).
- Strengthening internal systems and operations within social movements (in Ecuador and Uganda).

Main pathways supporting social movements:

- Advocacy.

- Systems strengthening.
- Social norms.

Key finding: Social movements and partners were found to be a key mechanism used to drive change. The evaluations found impactful work by CARE Ecuador to engage with and support social movements to recognize and promote the rights of migrants and refugees, including trans migrants, women, children and young people. In Nepal, CARE's work with social movements led to these movements securing greater rights, treatment and individual land certificates for previously landless small-holder farmers who had been disenfranchised by government for many years.

A key focus of work documented in this pathway was not only engaging social movements, but also COs working with partner organizations, networks, women's groups, member organizations and others to support social change.

The evaluations found CARE supported the **creation of new social movements**, such as training community leaders that were survivors of GBV and supporting them to form networks in Ecuador to advance the rights, needs and empowerment of survivors.

Technical training and capacity building of social movements and partners by CARE further **strengthened their technical skills and informed, empowered and supported their actions, particularly around advancing gender equality**. For example, in Ecuador, CARE trained its movement partners on the needs and rights of migrants and refugees, particularly women survivors of GBV, pregnant women, child migrants, and LGBTIQ+ people and trans migrants, improving the support these movements provided to these groups. CARE Ecuador also strengthened the ability of social movements to undertake needs assessments for migrants, sex workers and the LGBTIQ+ community, including employing CARE's RGA approach and holding consultations with children and adolescents. A key focus of CARE's work across Ecuador, Nepal and Uganda was training and capacity building for these movements and networks to undertake effective advocacy and joint advocacy actions, particularly for supportive policy change and for improved services, supporting the advocacy pathway (see above) and systems strengthening pathway (see below) respectively. In Uganda, CARE also trained women's economic collectives on group solidarity, life skills and gender critical consciousness and entrepreneurship. In Nepal, skills building on gender-inclusive approaches further supported these movement to better consider the needs of women and vulnerable groups within their actions, and as such implement gender-inclusive climate resilient agriculture, leaseholder farming and home garden management with a focus on women's empowerment.

CARE's actions **supported collective actions by these movements**, including advocacy for policy change (see advocacy pathway) and joint actions around key events, such as International Women's Day and 16 Days of Activism against GBV. Collective movement actions in Nepal also supported the scale-up of climate resilience models (see scaling pathway). These movements also took actions to shifting harmful social norms among communities around the rights of women (thus supporting the social norms pathway). Social movements' collective actions were supported by the research/landscaping and evidence developed under the advocacy pathway, the focus of which the movements informed, and then used to outcomes to support their work.

The evaluations also found that CARE's actions **supported connections and allyship across movements and networks**, including collaborations and exchanges. For example, in Uganda, CARE supported a platform for sharing lessons learned and best practices on WEE across the movements in Uganda. This platform facilitated collective, complementary and harmonized actions, breaking down silos and enabling larger scale operations, thus optimizing resources. It also fostered greater

trust, solidarity and cohesion among these movements, and in doing so supported sustainable movement building.

CARE's actions also focused on **strengthening the organizational structures, internal operations, and leadership of these social movements**. In Nepal and Uganda, CARE supported social movements to improve and formalize their structures, including creating clearer working mechanisms for their groups and a more effective leadership structure (Executive Committee). Internal social movement operations and more inclusive governance was also supported by CARE in Ecuador through the development of Standard Operating Procedures (SoPs) for social movements, and in Nepal through supporting social movements to put internal policies and procedures into place. CARE also strengthened referral systems so that social movements and other organizations could link people they engage to the services they need, such as to sexual and reproductive health (SRH) services, psychosocial support or legal protection in Ecuador. An important focus of this work was also **improving the participation of their target groups within the decision-making structures and strategic priorities of these social movement**. For example, in Ecuador, CARE supported social movements to increase child participation and trans migrant representatives within their work. And in Nepal and Uganda, CARE supported increased women's participation within these movements.

The evaluations found that these strengthened social movements/networks then became more **recognized as legitimate voices for their communities and on the needs of their members**, which increased government and other sector engagement with them. For example, in Nepal, through having more formal structures, the social movements were able to be recognized and could formally register with the government at ward, district, province and federal levels. These movements were also increasingly invited by municipal government to land and agricultural meetings. In Uganda, Women's Economic Collectives became recognized by government and the private sector, increasing their influence and bargaining power. This increased recognition also improved the ability of these social movements to raise resources.

Strengthening the reach of social movements was found to be a further key part of CARE's work. For example, in Nepal, CARE supported the expansion of the geographical presence and activities of people's and farmer's movements NLRF and NFGF (see above) from 48 to 63 districts, and 53 to 60 districts respectively. In Uganda, women's social networks and Women's Economic Collectives (WECs) similarly enjoyed greater reach thanks to CARE's support. This expansion also provided opportunities to strengthen inclusion, particularly women's participation, within these movements across the countries. CARE's actions were also found to have supported social movements and groups with communication, such as supporting the Transgender Project in Ecuador to reach trans people using innovative communication strategies, or supporting other movements to exchange issues and strategies through using Digital platforms (such as Facebook).

Unintended outcomes through social movements

A number of unintended outcomes as part of CARE's work with social movements were identified across the countries, including:

- i. The degree to which social movements were key actors in the successful changes to local and national policies and regulations achieved by the projects/program. The integration of the advocacy and social movement pathways had not been articulated as a deliberate strategy by the projects, but had proven to be highly successful.
- ii. Social movements that had been supported by CARE in Ecuador to advance the rights of GBV survivors, began separately and on their own initiative undertaking community surveillance of GBV cases and monitoring the implementation of government commitments.
- iii. The expansion and legitimization of social movements supported their viability. In Nepal, the increasing reach and new found abilities of the social movements NLRF and NFGF to undertake campaigning on the rights of landless and marginalized farmers increased their

legitimacy and recognition among the target group, other CSOs and the government. This increased their profile and support for its work.

- iv. Female participants within social movements reporting feeling respected for their voices and their social status had increased within the movements.

Key strategies under social movements pathway

The evaluation review identified the following key strategies being used in CARE's social movements work:

- Supporting the formation of new social movements, including using a "leaders in emergency" methodology (Ecuador).
- Assessing the specific needs of social movements (Nepal).
- Technical training and capacity building of movements (in Ecuador and Nepal), particularly on undertaking advocacy and joint actions.
- Building movement connections/networking among and between movements.
- Supporting collective actions and activities by movements.
- Enabling cross-border collaboration and exchange among social movements (at Ecuador and Colombia border).
- Strengthening internal systems and operations within social movements (in Ecuador and Uganda).

Pathways supporting social movements

Several other systems-level pathways were key to CARE's social movements successes, including:

- **Advocacy pathway:** Research and evidence developed for advocacy purposes supported social movements in their collective actions, and informed and influenced government to better recognize and support these movements. For example, in Uganda, CARE-supported policy framework changes led to self-help groups/savings groups in Uganda being officially recognized and regulated. This meant that these groups had more certainty and were better placed to secure funding (grants and loans) and improve women's access to funds.
- **Systems strengthening:** Government investment in these networks - such as through a COVID-19 Recovery Fund in Uganda supported by CARE's systems strengthening - supported social movements to be more impactful and effective. As a result of CARE's systems strengthening actions, governments also convened meetings with social movements to engage directly with and support them.
- **Social norms:** Focusing on social norm change with the internal processes of these movements strengthened a focus on gender equality and women's rights within their external actions.

Gap identified: The review found that evaluations lacked a clear definition of what constituted a social movement in the context of this pathway. In some contexts, this was referred to as a people's movement, or in other contexts the movement was essentially a network/consortium of partner organizations. Social movements were also used interchangeably with voluntary savings and loans association (VSLA) groups. This is worthy of greater clarification.

iv. Systems-strengthening and social accountability pathway: Systems strengthening across the four countries

Summary of systems strengthening

Key systems change achievements in the systems strengthening pathway:

- Health system has improved understanding of the needs of the target groups and is better able to address their needs.



- Improved attitudes and greater gender sensitivity by health providers towards their clients.
- The adoption of new health protocols and tools to improve quality of care.
- The quality, quantity and timeliness of government climate-resilient agricultural services improved.
- Laboratory equipment and medical supplies increased.
- Greater responsiveness of the protection system to violations of human rights.
- Institutionalization of a gender transformative approach throughout the work of one Ministry (in Ethiopia).
- Improving internal government operations, including systems to guide the implementation of new policies and plans.
- CARE seen as a key go-to technical partner for government on advancing gender equality and gender transformative approaches.

Key strategies used for systems strengthening:

- Building technical capacity of health officials.
- Supporting implementation of the Minimum Initial Services Package for SRH in Emergencies (MISP).
- Building organizational capacity.
- Partnership with government, particularly local government.
- Training health system professionals using modules for protection system capacity building, covering migrants, GBV, human trafficking and technical regulations.
- Training of government on gender transformative approaches.
- Integrating CARE's SAA approach into government community discussion manuals.
- Revising existing government Gender Leveling Tool and including indicators from a gender transformation perspective.
- Integration of Gender Responsive Budgeting (GBR) into the work of government.
- Assessment of government external operating context
- Assessment of government human resources and organizational performance.
- Establishing and supporting internal government mechanisms for improved implementation of the policy changes and plans facilitated by CARE and its partners.
- Providing ongoing follow-up support, through establishing technical working groups.
- Develop posters and leaflets for mass dissemination by government.
- Training of government staff on new digital information collection systems.

Main pathways supporting systems strengthening:

- Social movements.
- Social norms.
- Advocacy.

The evaluations found that CARE's actions had **strengthened the capacity of health officials and providers, together with government, better addressing the needs of the target groups**. For example, in Ecuador, CARE and its partners collaborated with the Ministry of Public Health and local government to build the technical capacity of health officials and health facility providers (at all levels) to better understand, assess and address the needs of migrants and refugees, women survivors of GBV, pregnant and lactating women, and LGBTIQ+ people. Pharmacists were also sensitized through information and inductions to expand drug provision to migrants and refugees using a payment card system (as part of the inclusive markets pathway).

Key finding: An important part of this work, which plays to CARE's strengths, was also sensitizing these health providers, to **provide rights-based, gender-sensitive, non-discriminatory care**. CARE

Nepal also improved the attitudes and empathy of government staff around the provision of climate-resilient agricultural services in the country.

The evaluations found that CARE's actions also **supported improved quality of services through enabling the adaptation of new health protocols and tools**. For example, clinical protocols were adapted in Ecuador to ensure they provided greater attention to supporting migrants with treatment of obstetric emergencies, pregnancy, childbirth, postpartum, child malnutrition, and use of family planning, including community referral mechanism for emergency obstetric cases. Case management processes for migrants' medical treatment needs were also strengthened. In addition, an 'Integral Management Model' across Ecuador and Colombia was developed together with local governments in each country to improve access and cross-border referral systems and ensure timely response and continuation of any medical treatment for migrants and refugees. These steps led to greater numbers of migrants and refugees accessing improved care.

The **quality, quantity and timeliness of government climate-resilient agricultural services also improved** following systems strengthening support. In Nepal, CARE's actions improved the delivery of subsidized quality seeds and supplies, access to water, agricultural insurance and minimum support price for farmers' products (which were previously unavailable to the target groups).

The evaluations also found **laboratory equipment and the provision of medical supplies** were enhanced among health centers in Ecuador for SRH and sexually transmitted infection (STI) screenings, pregnancy tests and HIV tests, expanding access to these examinations for adolescents and migrants, including from the LGBTIQ+ community. In Nepal, CARE's actions led to the employment of increased numbers of government staff responsible for local agricultural services, which improved service provision and support to farmers.

Systems strengthening also included **capacitating the protection system to improve its responsiveness to violations of human rights**. In Ecuador, CARE trained councils, prosecutors' offices, police stations, the Human Rights Secretariat, the Ministry of Foreign Affairs and Human Mobility, specialized judicial units (on violence against women and the family) and political leaders, so that they better understood and applied rights-based, gender-sensitive, adequate and timely protection services to vulnerable migrants, refugees and host communities. This led to improved responses to violations of rights to migrants and refugees.

Key finding: In Ethiopia, CARE built the **capacity of the Ministry of Women, Children and Youth (MoWCY) to institutionalize a gender transformative approach throughout its work**, reorientating its focus on transforming the power dynamics, structures and other root causes which reinforce gendered inequalities (and not only dealing with the symptoms of gender inequalities). This included supporting the government to integrate CARE's Social Analysis and Action (SAA) approach into government community discussion manuals. In doing so, CARE positively altered the way the Ethiopian government undertook its training, leading to a much more empowering and solution-driven approach.

Key finding: The evaluations found that once CARE and its partners had achieved policy changes and commitments among governments, these governments were then also **supported by the projects to strengthen the design and implementation of the systems necessary to implement these policy changes**. In Ethiopia, CARE supported the revision and finalization of a Gender Leveling Tool to support gender mainstreaming and institutionalization across government (in line with the new draft National Gender Policy), and educated government on understanding the tool and how to use it, as well as supporting the MoWCY in its role holding other Ministries to account. CARE Ethiopia also supported and trained the government to develop a mechanism for Gender Responsive Budgeting (GBR) to ensure line Ministries plan and submit gender inclusive budgets. In

Nepal, the government was supported to implement a categorization-based ID card for farmers, which helped them to gather details of the farmers, particularly female farmers, in each municipality who should benefit from production inputs and services aligned to the new policy changes. In Uganda, the government was supported to improve the performance of its women's economic empowerment (WEE)-related systems, including the roll out of a new digital grants one-stop information center and online grants management information system (MIS) to respond to the new policy environment. The Ugandan government was also supported to develop a comprehensive database of women's groups, and to create a technical committee to support the rolling out of harmonized WEE approaches, and provided with guidance on implementing the new policy commitments. In Ecuador, a Technical Working Group was formed to focus on implementing training plans for Council officials on the rights of migrants and refugees, which were part of newly agreed government commitments.

The evaluations also found that **government was supported to improve its internal operations to be more gender transformative**. In Ethiopia, an assessment of the Ministry of Women, Children and Youth's internal culture, human resources, procedures and capacity and legitimacy, identified key gaps, challenges and inconsistencies, as well as few women in technical positions. Recommendations were made to the Ministry based on this assessment regarding staff recruitment, training, appraisals and development, clearer job descriptions and grading, policies and procedures. As a result, a new Human Resources (HR) strategy, staff attraction and retention models, and a comprehensive communication system across the Ministry was developed and endorsed by senior leadership.

These activities were found to be complemented by **social accountability actions**, though only in Nepal. In Nepal, farmers and landless groups were supported to hold duty bearers accountable for the services they provided, particularly within local-level committees, leading to service provision that was more responsive to their needs.

Unintended outcomes through systems strengthening

A number of unintended outcomes related to CARE's work on systems-strengthening were identified across the countries, including:

- An unintended positive outcome in Ethiopia was that the government community discussion manuals no longer only focused on negative norms, but were amended to include a new focus on supporting, appreciating and encouraging positive norms in the community.
- CARE became seen as a go-to technical partner for government on advancing gender equality and gender transformative approaches, beyond a perception that its expertise was more around service delivery. This was particularly the case in Ethiopia, where the Ministry began turning to CARE as a key trusted source of advice on advancing gender equality.
- The government in Ethiopia was found to be apprehensive in its capacity to implement its mandate around gender equality and women's rights, creating an opportunity for CARE to provide support for more gender inclusive governance.
- The government of Uganda started to have increased appreciation of savings groups as an entry point in communities, which then informed the government's actions around addressing the barriers that undermined WEE in Uganda.
- The actions of CARE and its partners across all countries strengthened working relationships with government, and increased appreciation and trust between government and civil society, which created confidence between the public and private sector.

Key strategies under systems strengthening pathway

The evaluation review identified the following key strategies being used in CARE's systems strengthening work:

- Building technical capacity of health officials.
- Supporting implementation of the Minimum Initial Services Package for SRH in Emergencies (MISP).
- Building organizational capacity.
- Partnership with government, particularly local government.
- Training health system professionals using modules for protection system capacity building, covering migrants, GBV, human trafficking and technical regulations.
- Training of government on gender transformative approaches.
- Integrating CARE's SAA approach into government community discussion manuals
- Revising existing government Gender Leveling Tool and including indicators from a gender transformation perspective.
- Integration of Gender Responsive Budgeting (GBR) into the work of government.
- Assessment of government external operating context
- Assessment of government human resources and organizational performance.
- Establishing and supporting internal government mechanisms for improved implementation of the policy changes and plans facilitated by CARE and its partners.
- Providing ongoing follow-up support, through establishing technical working groups.
- Developing posters and leaflets for mass dissemination by government
- Training of government staff on new digital information collection systems.

Pathways supporting systems strengthening

Several other systems-level pathways were key to CARE's systems strengthening successes, including:

- **Social movements:** Through their actions, social movements pushed for better services under systems strengthening pathway. These movements highlighted the gaps in government services responding sufficiently to their needs, leading to greater focus and engagement of government on improving related services.
- **Social norms:** The aforementioned gender norms sessions with government officials (see social norms pathway) led to the integration of SAA in the Ministry's community discussion manuals. This led to an improved capacity on addressing social norms within government.
- **Advocacy:** Changes in laws and policies facilitated by CARE's work was found to then create new mechanisms and frameworks that then drive stronger delivery systems and responses.

Gaps identified: The review of the evaluations found that only CARE Nepal appeared to clearly integrate systems strengthening and social accountability within its actions under this pathway. The other projects focused principally on systems strengthening, with a limited or no direct focus on citizen accountability. Exploring ways to strengthen those linkages is advisable.

v. Inclusive-markets pathway: Changes in inclusive market-based approaches across the four countries

Summary of inclusive markets

Key systems change achievements in the inclusive markets pathway:

- Livelihoods were strengthened, particularly among women.
- Savings groups provided a platform for women's empowerment.
- Strengthened entrepreneurship through seed capital and loans.
- The range of banking services for women increased.
- Innovative health care funding techniques were employed.
- There was successful stimulation of the broader private sector.



Key strategies used for inclusive markets:

- Providing soft skills education and occupational training.
- Creating savings groups/voluntary savings and loans associations (VSLAs)
- Saving groups receiving business advice and financial services.
- Providing seed capital to migrants and refugees.
- Engaging microfinance institutions (MFIs) to increase the range of their products and services, and to reduce barriers to access among women.
- Mapping of areas where savings groups and financial institutions can collaborate.
- Holding meetings and exchange visits to build links between savings groups and the MFIs.
- Creating an electronic health card system to pay for private services.
- Undertaking a study on rural women's current financial inclusion to inform design of inclusive market interventions.

Main pathways supporting inclusive markets:

- Social norms.
- Systems strengthening.
- Social movements.

The evaluation found that the projects had **supported education and training to facilitate livelihoods**. In Ecuador, migrant and refugee women and youth received soft skills covering five modules (employment skills, life skills, community service, basic academic knowledge, and entrepreneurship), as well as financial education, and then accessed occupational training (through working in beauty salons, bakeries, restaurants, catering, carpentry, or hospital cleaning) and developed their own business plans. At the end of this training, participants received a certificate recognized by the National System of Professional Qualification (SETEC). **60% of the graduates of this training were women**, highlighting the connections between inclusive markets and opportunities for social norms change. These steps strengthened the employability and self-learning among these target groups. By bringing migrants and host communities together in these trainings, it also facilitated cohesion between those groups.

The evaluations also found a strong focus within CARE's actions on **supporting savings groups, which provided a platform for women's empowerment**. In Uganda, VSLA were established (where necessary), trained and supported, which installed an individual and collective cultural of savings. In Ecuador and Uganda, these groups were provided with business advice and support to access financial products (see below), and business fairs were held where VSLA members could promote their products and interact with suppliers and potential buyers. These savings groups led to an increase in access to loans and, in Ecuador, they further supported the economic and social integration of migrants and refugees into host communities. The evaluations found that the savings groups **changed many women's lives for the better**, as explored in section 6.7 below.

The projects also enabled **seed capital to be provided to strengthen the entrepreneurship of women and youth migrants**. In Ecuador, for example, USD30-150 was provided to Venezuelan migrant women survivors of GBV which enabled them to build networks, resume projects, undertake micro-enterprises to support their families and reduce their economic dependency on a violent partner. This cash also had a broader impact on stimulating the local economies.

Key finding: CARE also **engaged commercial banks and microfinance institutions (MFIs) to increase the range of banking services they provide to women and savings groups**, including digital wallets. In Uganda, CARE capacitated and supported MFIs to develop and roll-out products and services, such as digital wallets, and strengthened linkages between these microfinance institutions and grassroots women's savings groups. These MFIs were also provided information and trained on how to reach and mobilize these savings groups using community maps. These steps created a close

working relationship between the financial institutions and women groups, increasing trust by financial institutions in working with women even without collateral - an issue that hitherto caused a huge hindrance to women in accessing financial services. As a result of improved access to financial services, **women participating in these groups have transitioned from making savings to making investments**, supporting the development of small and medium sized enterprises and diversifying their income streams.

The evaluations found that the projects also explored **innovative health care funding techniques**. In the city of Manta in Ecuador, CARE and its partners offered an electronic health card similar to a debit card where migrants could purchase SRH products and services from participating private pharmacies such as radiological services, lab services, and medical supplies, including for menstrual hygiene. This increased the number of clients to these pharmacies and expanded their economic growth. Vouchers were also provided by CARE Ecuador to migrants and refugees to cover the cost of these services.

CARE's actions also **stimulated the broader private sector**, supporting more inclusive local markets. In Ecuador, selected local hotels and inns were paid to provide emergency accommodation for migrants. This contributed to local economic reactivation, particularly after the impact of COVID-19, making a significant difference to communities.

Unintended outcomes through inclusive markets

A number of unintended outcomes related to CARE's work on inclusive markets were identified across the countries, including:

- CARE and its partners had to adapt their programming to create creches for the children of young mothers' engaged in inclusive market activities. This provision had not been originally planned, but was necessary as otherwise these mothers would be unable to participate in project activities.
- In Ecuador, host community perceptions of Venezuelan refugees and migrants as contributing positively to the local economy increased, and entrepreneurship by these migrants also created economic opportunities for the Ecuadorian people.
- Savings groups were found to not only support income generation, but also build group awareness and solidarity.
- Broader private sector actors that benefited from CARE's actions, such as hostel owners in Ecuador, became ambassadors for CARE's work towards others private sector actors.
- Financial institutions, supported and engaged by the project in Uganda, began actively leveraging upon the VSLA community-based trainers (CBTs) and village agents (VAs) to reach savings groups and enroll them in services.

Key strategies under inclusive markets pathway

The evaluation review identified the following key strategies being used in CARE's inclusive markets work:

- Providing soft skills education and occupational training.
- Creating savings groups/VSLAs.
- Saving groups receiving business advice and financial services.
- Seed capital to migrants and refugees.
- Engaging microfinance institutions to increase the range of their products and services, and to reduce barriers to access among women.
- Mapping of areas where savings groups and financial institutions can collaborate.
- Holding meetings and exchange visits to build links between savings groups and the MFIs.
- Creating an electronic health card system to pay for private services.
- Undertaking a study on rural women's current financial inclusion to inform design of inclusive market interventions.

Pathways supporting inclusive markets

Several other systems-level pathways were key to CARE's inclusive markets successes, including:

- **Social norms:** Social norms change led to greater community support for women to utilize inclusive financial support available.
- **Systems strengthening:** By expanding the range of available psychological support, accommodation, legal services and SRH services, the projects enabled livelihoods activities to refer to these services when further support is required. In Nepal, the formalization of farmers groups not only improved access to government support, but motivated farmers to expand their products to a semi-commercial scale. Research studies undertaken by the projects have strengthened market-based approaches.
- **Social movements.** More formalized social movements were subsequently able to access greater financial support, strengthening their ability to support market-solutions.

Gaps identified: The review identified that savings groups/VSLAs were principally presented as a mechanism for saving, with limited focus on the opportunities for VSLAs as a platform for movement building or for addressing social and gender norms at the relational and community level. The review also identified a limited focus on climate justice and WEE, which is worthy of exploration given the impact of climate change. Finally, although the Nepal CO did not report their work as including this pathway, their activities did support semi-commercial agriculture. This may speak to the need for further clarity on the different components of this pathway.

vi. Scaling and adapting pathway: Scaling and Adapting Proven Models across the four countries

Summary of scaling



Key systems change achievements in the scaling and adapting pathway

- Models were successfully developed and scaled.
- Scaling took place through local government.
- Scaling tool place through local organizations.

Key strategies used for scaling and adapting:

- Strong coordination with government, and building on prior working relationships.
- Co-design and piloting models for scale.
- Developing memorandums of understanding.
- Enhancing collaboration.
- Commissioning new studies, and leveraging prior evidence, to inform scale-up and its benefits.

Main pathways supporting scaling:

- Social movements.
- Policy advocacy.
- Systems strengthening.

The evaluation found strong examples of coordination and trusting collaboration with local government to **develop and scale-up models which addressed the needs of the target groups.** CARE Nepal, together with local government, co-designed, piloted, and then scaled through

government workplans and programs a range of climate resilient land and agricultural models²⁶ addressing the needs of landless women and marginalized farmers. One such model, the Farmer ID cards (FID), adopted by the Nepal National Land Commission, was integrated into the work of 12 local governments, four of whom allocated USD\$27,000 for its implementation in 2020. The FID has since been institutionalized by additional local governments in Nepal. Building on the success of SAMARTHYA, The National Land Commission adopted the project IVR model and developed the Land Issues Resolving Information System (LIRIS) system to collect, verify and record landless and informal settlers (replacing the traditional paper-based system).²⁷ The IVR process was adopted by several local governments, supported by a Memorandum of Understanding (MoU) within the SAMARTHYA project. CARE also worked with local government in a number of locations to make funding available for the provision of localized agricultural insurance, another climate resilient model as part of SAMARTHYA. Once in place, this localized insurance motivated farmers to scale-up their farming, safe in the knowledge that they could cover any animal health losses and still meet their livelihoods needs.

The evaluations also found **successful scaling through national government**. In Uganda, scaling of savings groups was supported through the Uganda government adopting VSLA as a platform for its Parish Development Model (PDM). The PDM is a government approach for organizing and delivering public and private sector interventions, and integration of the savings group model will support wider use of this model across the country.

Scaling of CARE's work also took place within CSOs. Social movements NLRF and NFGF in Nepal were capacitated and supported by CARE to scale-up the climate resilient models (see above) across their members. These member farmers had previously reported challenges with crop loss and low production, and had never heard of climate smart approaches, and showed strong desire to use these models. These member farmers now report increased yield and reduced vulnerabilities. This form of scaling also supports connections to CARE's locally led pillar.

Unintended outcomes on scaling and adapting

The following unintended outcome related to CARE's work on scaling was identified across the countries:

- Scaling became an organic process in Nepal, with local governments owning these models and incorporating them into their own Agriculture and Land Acts. Due to the success of the climate resilient models, and sense of ownership across government, local governments in target areas beyond the geographical scope of the SAMARTHYA project began separately embedding the models within their work.

Key strategies under scaling and adapting pathway

The evaluation review identified the following key strategies being used in CARE's scaling and adapting work:

- Strong coordination with government, and building on prior working relationship.
- Co-design and piloting models for scale.
- Developing Memorandums of understanding.
- Enhanced collaboration.

²⁶ Models include: 1) Climate Resilient Household Farming Practices; 2) Farmers' Identity Card (FID); 3) Localized Agriculture Insurance; 4) Identification, verification and Recording (IVR) of Landless and Unplanned settlers; 5) Formulation of Participatory Land Use Plan at Municipality; 6) Community Based Land Management Practice; 7) Agr-Met advisory Services; and 8) Climate Resilient Local Seed Model System.

²⁷ The LIRIS system is based on an earlier electronic system developed by UN-Habitat and SAMARTHYA called the Social Tenure Domain Model (STDM)

- Prior evidence to inform scale-up. A study by CARE identified that public sector commitments in East Africa are the most promising path for scaling savings groups.²⁸
- Commissioning new studies, and leveraging prior evidence, to inform scale-up and its benefits. For example, CARE commissioned a study which informed government about the benefits of scaling savings groups.

Supportive pathways for scaling and adapting

Several other systems-level pathways were key to CARE's scaling and adapting successes, including:

- **Social movements:** Social movements directed supported the scale-up of models, such as the climate resilient models in Nepal, through supporting the embedding of these models within the work of their members.
- **Policy advocacy:** In Uganda, the project identified and strengthened key entry points in the policy and programming space where the government could build momentum around scaling. This supported broader scaling actions.
- **Systems strengthening:** CARE Uganda's support for the governments management information system (MIS) is a component that will be scaled up as part of the Ugandan government's new PDM model.
- **Social norms:** Models prioritized for scaling significantly focused on women's empowerment. Social norms mapping also supported gender and social norms within local climate resilience models.

6.3 Findings on systems-level change supporting Gender Equal Agenda

The review found advancing gender equality to be a key focus of the systems-level work in the four countries. As such, this work supports CARE USA's essential pillar on gender equality and "delivering on gender equal impact".²⁹ These projects/programs across the countries were found overall to be supporting gender equality in the following ways (please see the pathway overviews above for more in-depth details on these activities):

1. **Advancing an approach which addressed the root causes of gender inequality, not only the symptoms.** Strategies for policy advocacy and systems strengthening noted above included a focus on addressing power relations, gender roles and social norms, and on addressing the multi-dimensional intersecting structures of oppression. This moves beyond advancing women's individual self-improvement, to more transformative change.
2. **Working with men and challenging harmful masculinities as part of addressing the root causes and to advance relational approaches to gender justice.** Shifting harmful masculinities, through workshops and reflection spaces, as part of promoting gender transformation, was reflected in the strategies across several countries noted above (see social norms pathway).
3. **Addressing structural gender inequality not only among households and communities but among duty bearers.** For example, engaging duty bearers who work for the rights and opportunities of women, to internalize how gender norms affect their own lives and to work to improve the outcomes of their work as a government. In addition, shifting structures through social norms change to increase women's participation and leadership, which ensures greater focus on/prioritization of women's needs with these structures.
4. **Integrating a stronger focus on gender equality at all stages of advocacy, and changing policies to advance women's rights.** This included policy reviews in which CARE contributed

²⁸ Care; Assessing the Viability Savings Groups as a Vehicle for Women's Economic in Africa Findings from Kenya, Tanzania and Uganda and Ethiopia

²⁹ CARE USA FY22-25 Global Strategy – Presentation, March 10, 2022

that addressed the intersections between climate change, internally displaced persons and refugees, migration, human trafficking, conflict, violence and women's empowerment. Or CARE policies reviews specifically on women's rights which identified gaps that led to other policies (not originally intended), such as identified gaps around GBV as part of a broader review on women's rights leading to a new National Policy on GBV in Ethiopia. Through advocacy and lobbying, the projects in these four countries then successfully changed policies and programs around issues critical to advancing women's rights, such as on women's food security or economic empowerment (see advocacy pathway above).

5. **Deliberately engaging, supporting, and advanced women's rights organizations, women's movements and women's voice as part of this work.** The aforementioned policy advocacy supported and engaged with women's rights organizations, and facilitated their ongoing advocacy on women's rights issues. Women's voices were deliberately reflected in policy advocacy through leveraging on CARE's RGA studies or through primary data collection targeting women about their needs. The review also found that CARE's work strengthened women's participation, and increased respect for women's voices and role, within the governance and leadership of social movements. This, in turn, improved the focus on gender equality within the social movements' actions, such as through facilitating a focus specifically on empowering female members to claim their rights.
6. **Embedding gender equality focus within service systems strengthening.** Projects capacitated health providers to be more gender inclusive, through specific training and support so that the health systems provided rights-based, gender-sensitive, non-discriminatory care for women (see systems-strengthening pathway above).
7. **Embedded gender transformative programming within government.** In Ethiopia, CARE promoted a gender transformative approach across government programs and activities as part of its advocacy, social norms and systems strengthening (see advocacy, social norms and systems-strengthening pathways above).
8. **Advancing gender equality as part of inclusive-markets.** Improved systems helped with easier processing of grants to women's groups in Uganda. It also improved access to information on grants available and their status and how to access financial services. Increasing access to financial services to improve access among women – particularly poor and marginalized women - to affordable financial services (savings, credit and insurance) increased, enabling women to undertake financial transactions easier and faster. Seed capital was also provided to strengthen the entrepreneurship of women and youth migrants (see inclusive markets pathway). In Ecuador, the vast majority of vocational training graduates were women.
9. **Institutionalizing gender equality approach through scaling models within local government,** as outlined in the scaling pathway above. For example, climate and resilient land and agricultural models in Nepal, such as localized agricultural insurance, agricultural advisory services and agricultural inputs, were integrated into the plans and programs of local government with a specific focus on targeting women-headed households and female farmers (see scaling and adapting pathway above).

6.4 Findings on systems-level change supporting Locally Led Agenda

The review found that being locally led also underpinned all the systems-level work being evaluated, though this may not have been a deliberate explicitly focus. Nevertheless, this work directly supports CARE USA's essential pillar on locally led. Across the four countries, the projects/programs were found to be supporting locally led in the following ways (please see the pathway overviews above for more in-depth details on the activities):

1. **Supporting localization through policy advocacy.** The evaluations found that a range of local stakeholders and organizations were collectively involved in defining the strategic direction of new policies and plans, as part of CARE's policy advocacy efforts (see advocacy pathway above).
2. **Locally-based social movements as central to successful systems change.** A key finding of the evaluations was the central importance of social movements, and grassroots activism, as mechanisms through which CARE undertook policy advocacy and enabled successful policy change (see advocacy pathway above). Furthermore, working through women's economic collectives, which provides a strong basis for grassroots WEE, enabled bottom-up and community-led solutions. CARE also supported existing social movements and women's groups, helping them to be more viable professionally and economically, rather than creating new community structures (that may duplicate what already exists). CARE's actions also supported collaborations and capacity strengthening among these social movements, helping these locally-based structures to be more viable and sustainable.
3. **Engagement with key partners/local implementers as an important mechanisms for implementing CARE's systems-change work.** Local partners implement components of CARE's systems-level work across all four countries, and the success of the systems-level change and impact documented in this report is equally attributable to these partners. The review found that the focus of CARE's work under social movements also includes broader partners with whom CARE works and implements, aligning with CARE's locally led agenda (see social movements pathway).
4. **Supporting localization through systems strengthening.** Systems strengthening actions led to greater appreciation among government of the critical role that local organizations play - grassroots women's rights organizations especially - in the development context, particularly the role of savings groups in promoting women's economic enhancement (see systems strengthening pathway).
5. **Supporting localization through inclusive markets.** CARE's actions were found to facilitate local grassroots organizations connections to finance providers as part of innovative inclusive financing mechanisms.
6. **Supporting localization through scaling and adapting.** This review found examples of successful scaling through local organizations and social movements, not only institutional (see scaling pathway).
7. **Bottom-up solutions reflecting local realities were key to systems success:** The review found that local climate resilient farmer friendly models and technologies in Nepal, which were developed at the community level based on the specific challenges and realities communities were facing, were highly effective at addressing climate risks.

6.5 Findings on systems pathway integration

The integration of systems-level pathways (using more than one pathway concurrently) can reinforce and support each other, strengthening systems-change and impact. **The review found systems-level pathway integration to be highly effective in influencing systems change across the four countries.** This was, however, not deliberate nor a specific in-depth focus of the evaluations, and these findings on integration are therefore based on additional analysis of the data.

Main types of pathway integration used

Table 6 below highlights the main types of integration used across the four country projects. It also highlights the direction of that integration - whether it is unidirectional (one pathway supporting another) or bidirectional (where the pathways integration is mutually reinforcing). This table also highlights which countries employed this integrated approach.

Table 6: Main types of systems integration identified and direction of integration

| | Country and direction of change (uni-directional or bi-directional) | | | |
|---|---|----------|---------|---------|
| Types of integration | Ecuador | Ethiopia | Nepal | Uganda |
| Social movements and Advocacy | -----> | | -----> | <-----> |
| Systems strengthening/accountability and Advocacy | <-----> | <-----> | | <-----> |
| Social movements and systems strengthening | | | | -----> |
| Social norms and advocacy | -----> | <-----> | | -----> |
| Social norms and systems strengthening | -----> | -----> | | |
| Social norms and social movements | -----> | | -----> | <-----> |
| Social norms and inclusive markets | <-----> | | | <-----> |
| Social norms and scaling | | | -----> | -----> |
| Policy advocacy and inclusive markets | | | -----> | -----> |
| Social movements and inclusive markets | | | -----> | -----> |
| Systems strengthening and inclusive markets | | | -----> | -----> |
| Scale-up and policy advocacy | | | <-----> | <-----> |

The strength/depth of the pathway integration across the four projects

As discussed in section 6.2 above, each pathway was found to have one or more supportive pathways. Table 7 below provides the findings of the analysis on the key supporting pathways for each of the six pathways, based on the degree of integration. Where there is strong integration, this pathway is found in the first box. If there is a weaker integration, the relevant pathway is found in the second or third box. Not all remaining pathways are listed under each pathway heading, which reflects the fact that certain pathways were not found to be supporting that pathway.

Table 7: Main supporting pathways for each pathway across the four countries

| Advocacy | Social norms | Social movements | Systems strengthening/accountability | Inclusive markets | Scaling |
|-----------------------|-------------------|-----------------------|--------------------------------------|-----------------------|-----------------------|
| Social movements | Inclusive markets | Advocacy | Advocacy | Social norms | Policy advocacy |
| Systems strengthening | Social movements | Systems strengthening | Social norms | Systems strengthening | Systems strengthening |
| Social norms | Advocacy | Social norms | Social movements | Social movements | Social movements |
| Scaling | | | | | |

How does this compare to the global picture?

An analysis³⁰ of systems pathway integration across CARE's programming using PIIRS can be found in Annex B. The advocacy and social norms and social movements pathway results in Table 7 are similar to this global analysis. A difference with the systems strengthening pathway in this analysis is that advocacy and social norms change features more prominently in driving change in that pathway than is the case in the global analysis. This may be reflective of the particular types of projects evaluated. Within the inclusive markets pathway, scaling features less prominently in these findings compared to the global analysis, but otherwise the results on Table 7 reflects the global picture. Finally, with the scaling pathway, the results here are quite different to the global analysis, finding policy advocacy to be critical, which does not feature in the global analysis. **This perhaps**

³⁰ Analysis by Caitlin Shannon, Research and Inquiry Lead, CARE USA

speaks to the need for greater focus on how institutionalization of approaches within government is a critical part of the work these CARE countries are doing as part of their scaling.

Details of most common pathway intersections found in the evaluation

The **most frequent** form of successful integration found was the **intersection between social movements and advocacy**. Capacitated social movements and organizations in Ecuador and Nepal and Uganda, with stronger advocacy skills, became advocates and took collective action for policy change, influencing policies, programs and budgets. Moreover, through these movements being empowered, government had to take greater notice of them, further driving changes in laws and policies. This linkage was principally social movements supporting advocacy (unidirectional), with the exception of Uganda where it was bidirectional, with advocacy changing the legal context in which these movements operated and thus their ability to advocate.

Systems strengthening/accountability and advocacy was also a key linkage across the countries.

Governments across Ecuador, Ethiopia and Uganda were supported through strengthening of their systems, knowledge, evidence and skills to enable them to introduce the policy changes as a result of CARE's actions. They were also held to account for doing so. This systems strengthening/capacity building also created a more enabling environment in Ministries for policy change, both in terms of supportive attitudes and the creation of committees to further support the initiated policy change. This pathway intersection allows CARE to go beyond commitments to ensuring these lead to changes in practice. This was a much clearer area of bidirectional support. In Ecuador, the committees set up by capacitated governments to support policy change also help to drive systems strengthening. In Ethiopia, the policy and advocacy commitments to adopt a gender transformative approach provided the mandate on which CARE was able to engage government in systems strengthening, including adopting new tools, training staff and reviewing its internal culture, human resources and procedures. In Uganda, policy advocacy led to a new mechanism within government to support the implementation of new frameworks and guidelines driving stronger systems and responses.

Social movements were also found to drive changes in systems strengthening. In Uganda, the government more progressive attitudes towards women's role and access to finance led to strengthened systems that better responded to the needs and challenges of women's movements/groups and women's economic collectives.

Social norms change strengthened policy advocacy, informing policy reviews in Ethiopia and Uganda (to focus more on gender norms and power) and directing the focus of policy advocacy across all countries (such as informing the targeting on the rights of women and GBV survivors in Ecuador).

Social norms also informed systems strengthening, such as supporting an improved focus on the needs of women and children in Ecuador within services, or as part of supporting a more gender inclusive government internal culture, tools and existing program approaches in Ethiopia (strengthening their focus on gender norms).

Social norms also supported social movements. In Ecuador, social norms change strengthened the targeting of trans migrant rights organization and better representation of these groups in broader social movements. Equally, in Nepal a social norms approach with social movements increased women's inclusion and participation within these movements and ensured the work taken forward challenged social norms and increased gender equality. In Uganda, this was a symbiotic relationship, where more gendered critical consciousness among social movement member themselves further supported their social norms change efforts in society.

Social norms and inclusive markets. Norms change drove shifts in attitudes informing more inclusive markets focused on specific livelihoods and occupational opportunities for women in Ecuador. Shifting norms also helped reduce the requirement for women to have sufficient financial collateral to access credit in Uganda. This was also a symbiotic relationship, even if not deliberately intended, as seeing women playing a stronger role in these markets in turn continued to drive social norms change.

Social norms and scaling. Norm change informed the focus on scaling gender inclusive models, and that women and girls should be the primary beneficiaries of scaling. In Nepal, scaled up models also engaged with men, recognizing the importance of relational approaches while scaling systems change approaches.

Policy advocacy, social movements and systems strengthening also underpinned inclusive markets. In Nepal, a more supportive policy ecosystem not only allowed the target group to address their immediate needs, but also to expand their livelihoods through commercialization of their yield (previously not possible). In Uganda, policies provided the regulatory context that supported the private sector to expand the range of financial products and services available to savings groups. Movement building in Nepal and Uganda also supported inclusive markets, where more formalized movements could then access greater financial support. Systems strengthening also drove change in inclusive markets, where greater government registration and enhanced government services improved livelihoods and led to increased demand and then access to financial services for the target groups

Finally, **scale-up and policy advocacy** had a symbiotic relationship, where increased scale-up by government of SAMARTHYA models in Nepal to new sites necessitated amendments to the local Agricultural and Land Acts (and vice-versa). Equally, scaling up of women's economic collectives in Uganda will continue to drive policy change (and vice-versa).

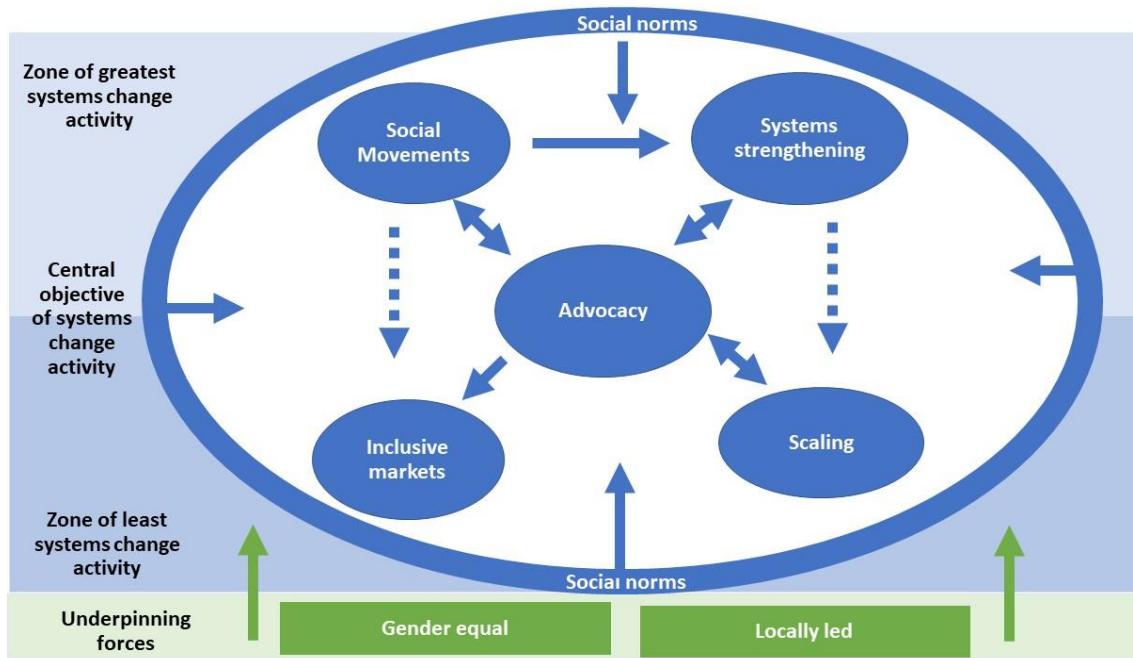
Key finding: The review also found integration to be key for sustainability across all the countries. For example, strengthened social movements then continued to support advocacy and monitor policy change beyond the end of the project. The grassroots advocacy approach employed by the projects became self-sustaining, with members of social movements outside the target project areas collaborating with government to achieve similar policy changes. By combining systems strengthening and advocacy, it allowed CARE and its partners to not only effect policy change but to support the government systems and processes to put these policies changes into practice.

Key finding: Gender equality was a key glue that ran through the pathways, supporting their integration. This is reflected in the many references to gender equality in the discussion above. For example, the successful focus on embedding a gender transformative approach within the work of the Ministry of Women, Children and Youth in Ethiopia required three pathways - advocacy to influence policy and programs, promoting social norms change, and system strengthening – to become mutually reinforcing.

6.6. Visualizing relationships across pathways

The following diagram (Figure 3) seeks to represent the above findings in terms of the relationships between systems pathways and project focus for the four evaluated programs/projects. It is important to note that this diagram is unique to the four evaluated projects: each systems-level project/program has its own particular focus and priorities. This is explained below.

Figure 3: Relationship between pathways across the four countries



Central objective of systems change activities: Advocacy (and policy advocacy specifically) was the predominant objective of these four evaluated programs/projects, and therefore sits in the middle of the diagram.

Zone of greatest systems change activity: Social movements and systems strengthening supported and informed advocacy in a symbiotic relationship, as noted. While these pathways also had their own stand-alone systems change aims, their support for advocacy remained an essential (generally principle) objective of their actions. In other words, while work with social movements included strengthening these movements themselves, their primary focus in these projects was impactful advocacy. Social movements also informed systems strengthening (in one direction), as noted. This zone represented the greatest area of activities within the evaluated projects, and is thus represented in a slightly lighter blue.

Zone of least systems change activity: Inclusive markets and scaling were then supported by advocacy. While this was bidirectional in the case of scaling, the primary focus here was how advocacy supported improved and inclusive markets and made scaling possible (rather than vice-versa). In other words, more inclusive markets and scaled models was the end point. Again, these pathways also had their own stand-alone specific systems change aims (separate to the influence of advocacy, such as establishing VSLA groups), but advocacy influenced all the larger scale systems change through the inclusive markets and scaling pathways. This zone represented fewer activities within the evaluated projects (compared to the zone above).

Social movements and systems strengthening also supported inclusive markets and scaling (in one direction), but this was a less frequent focus of the systems change projects, and as such is represented in a dotted arrow.

Key finding: Social norms change was the pathway that informed the greatest number of other pathways. It supported every other pathway. While this pathway had its own specific systems change aims, in effect it was a key supporting tactic for broader systems change. As such, it is represented around all the other pathways. It is important to note that for the most part the social

norms pathway was unidirectional – supporting the other pathways, but not being directly supported by them. The exception was the relationship between social norms and inclusive markets (and in a more limited way social norms and advocacy). Exploring ways that this relationship can be more bidirectional may represent an area of further exploration and learning.

Underpinning forces: Reflecting the importance of gender equality and localization to all work along the systems pathways evaluated, the underpinning forces of gender equal and locally led are represented above as foundations to everything which the pathways seek to achieve.

6.7. Findings on impact of systems change on people's lives across four countries

Acknowledging the differences across the four countries in data collection methods (see section 4.3), this section provides an outline of some of the key findings across population-level/individual impact – the impact of systems change on the lives of people. Table 8 below provides a summary of the key common individual impacts across the four countries, and in which countries these were found by the evaluations. Each of these types of impact are then explored further.

Key finding: CARE's systems-level work successfully impacted on people's individual lives in a broad range of ways, supporting CARE's agenda for poverty reduction and social justice.

Table 8: Types of individual impact (due to systems change)

| Types of impact | Ecuador | Ethiopia ³¹ | Nepal | Uganda |
|--|---------|------------------------|-------|--------|
| Individual empowerment (agency, self-esteem, self-confidence and skills) | ✓ | | ✓ | ✓ |
| Awareness and assertion of personal human rights | ✓ | | ✓ | |
| Greater employability and economic and business opportunities | ✓ | | ✓ | ✓ |
| Women's financial autonomy and economic empowerment | ✓ | | ✓ | ✓ |
| Enhanced leadership and participation | | ? | ✓ | ✓ |
| Greater equality in the household | ✓ | ? | | ✓ |
| Stronger networks and solidarity | ✓ | | | ✓ |
| Improved health/SRH knowledge | ✓ | | | |
| Better access to resources and funding | | | ✓ | ✓ |
| Livelihoods and economic development | ✓ | | ✓ | |
| Increased climate resilience | | | ✓ | |
| Improved protection outcomes | ✓ | | | |
| Reductions in intimate partner violence | ✓ | | | |
| Food and nutrition security outcomes | | | ✓ | |
| Health outcomes | ✓ | | ✓ | |

Individual empowerment (agency, self-esteem, self confidence and skills):

- In Ecuador, increases were reported in the agency and capacity of female migrants and female survivors of GBV and LGBTIQ+ peoples. There was also an increase in self-confidence

³¹ The evaluation did not include a detailed focus on individual impact (as a result of systems-level change), as much of MoWCY/MoWSA's work is at the national level with minimal direct contact with individuals. However, the policies and decisions made at the national level do impact the lives of individuals. The assumption can be made that the review of the National Policy on Ethiopian Women and adoption of a new Gender Policy will impact the lives of millions.

and technical capacities among young people in vulnerable situations to achieve educational, labor and family reintegration.

- In Nepal, increased life skills and leadership skills were reported among landless and smallholder farmers. These farmers also gained dignity through land certificates and ID cards.
- In Uganda, reports included individual agency, confidence and skills and women's empowerment due to the savings groups.

Awareness and assertion of personal human rights

- In Ecuador, migrants and refugees were aware of their protection and health rights and asserted themselves economically and in society.
- In Nepal, landless and smallholder farmers understood and claimed their rights to regularization, services and support.

Greater employability and economic and business opportunities

- In Ecuador, female migrants (adult and young) obtained certificates in arts and crafts, expanding their employability knowledge and skills to support their entry into the workforce. Vulnerable young people experienced greater opportunities for employability and entrepreneurship.
- In Nepal, women recognized as farmers and entrepreneurs due to their new land entitlement and ID Card, enjoyed greater access to trade opportunities and local markets.
- In Uganda, communities showed greater appreciation of women's financial role. Due to changes in the practices of financial institutions, women can access loans and products independently, use household assets as collateral to access credit, and undertake financial transactions easier and faster than before.

Women's financial autonomy and economic empowerment

- In Ecuador, women's access to employment opportunities increased their financial autonomy. Women have less economic dependence on their partners.
- In Nepal, changes in women farmers access to finance and trade, supported their economic empowerment.
- In Uganda, a more enabling environment has enabled women to save, access financial services and markets, move from subsistence to business, increase productivity, and work and advocate as collectives.³² This has supported an improved standard of living for women.

Enhanced leadership and participation

- In Nepal, women were empowered as leaders and change agents though having access to greater leadership roles. In Nepal, women now play a greater role in decision-making structures, and benefit from more inclusive social movements. Women show leadership in model development and scaling. Landless and smallholder farmers increased participation in the municipal decisions which affect their lives.
- In Uganda, women enjoy greater positions of political leadership, as councillors, chairpersons and members of parliament, which is critical for ensuring prioritization of women's needs and a focus on economic decisions which affect them.

Greater equality in the household

- In Ecuador, women reported greater sharing of household tasks between men and women and greater support towards their entry into paid employment.
- In Ethiopia, changes reported in gender norms due to work with individuals on Social Norms and Male Engagement

³² CARE Uganda; 2021 Process Evaluation Of The Uganda Women Entrepreneurship Programme (UWEP)

- In Uganda, women have increased their influence on household decision-making around financial issues.

Stronger networks and solidarity

- In Ecuador, migrant women expanded their support networks and increased their sense of belonging and place in the community, and accompany and support other female survivors of violence.
- In Uganda, women's increased collective action has increased the power of solidarity and support among them, and in turn their ability to advocate collectively to advance WEE concerns.
- Increased integration: In Ecuador, host communities developed greater recognition of the individual and collective efforts by migrants to generate income, develop micro-enterprises, and engage in the workforce. Host communities include migrant women and survivors of GBV within their networks, transforming relations between these groups.

Improved health/SRH knowledge:

- In Ecuador, women, young people and LGBTIQ+ communities have greater knowledge and self-care of their bodies and SRH.
- In Ecuador, capacitated communities can now identify cases of women at obstetric risk, women survivors of GBV, pregnant women and infants who do not attend medical check-ups, and refer these cases to the health care units. As such, communities are playing an expanded role in epidemiological surveillance practices.

Better access to resources and funding

- In Nepal, greater access to direct resources from local government support climate smart farming production, including subsidies (benefiting 1069 households).
- In Uganda, the development of a digital management information system (MIS) has improved data management related to accessing grants and financial services. Credit application files no longer get lost, it now takes less time for an application to be processed, and the number of women applicants being worked on has increased.

Livelihoods and economic development/investment

- In Nepal, the target group generates income through selling their extra production in local markets. They are transitioning from subsistence farming to semi-commercial activities.
- In Nepal, there is greater understanding and skills on climate agricultural farming practices among target group, increasing their production and reducing crop loss
- In Ecuador, female migrants and female survivors of GBV are more economically integrated into host communities. More young people and migrants developed the culture of saving, enabling them to invest in productive projects and meet their needs.
- In Ecuador, young people leave gangs, stop criminal behavior and drug use, turning their lives around to strengthen their capacity, become more responsible, and reintegrate into education and work settings.

Increased climate resilience

- In Nepal, strengthened climate resilience among these groups supports responses to climatic shocks and stresses.

Improved protection outcomes

- Refugees and migrants in Ecuador enjoy better access to, and use of, Protection and GBV survivor services, and better respect for their human rights by governments and services.

Reductions in intimate partner violence

- In Ecuador, changes at household level in gender relations, with women having greater mobility, financial decision-making, improved reproductive autonomy, and reductions in violence against women. Women reduced their economic dependence on their partners, reinforcing their ability to leave violent relationships.

Food and nutrition security outcomes

- In Nepal, landless people, marginalized farmers and women increased their food intake.

Health outcomes

- In Nepal, significant improvement in health of women and children were reported due to consumption of diversified food and reduced incidents of low birth weight of a newborn children.
- In Ecuador, increased health service utilization among migrants, women and LGBTI+ persons. Community members also encourage these groups to seek medical attention, particularly in cases of obstetric emergency, child malnutrition, and women survivors of GBV.

6.8 Findings on sustainability

The findings across the evaluations point to several areas of sustained impact due to systems-change. These are explored below. This analysis acknowledges that only one country collected primary data directly on sustainability, with the remaining country findings based on analysis of their data which more indirectly explored sustainability (see section 4.3).

The following areas were identified as themes on sustained system level effects due to CARE's work:

Policy changes will sustain a lasting impact:

- In Nepal, the successful formulation of new acts, policies and guidance, and amendments to existing acts, at local, provincial and national levels created a new political, legislative and programmatic environment that is sustaining. These changes have institutionalized the land certification process, the Famer ID card and several climate resilient models, which will further support their ongoing use.
- In Ecuador, changes to local and national policies are having a lasting impact on improving the lives of refugees and migrants.
- In Ethiopia, the adoption of the new National Gender Policy is set for 2022, and is on the schedule to be presented to the Council of Ministers in 2023. The technical committee is continuing to meet to advise government and to engage a variety of stakeholders, and a budget has been secured to develop the new policy. The National Policy for the Prevention and Protection against GBV is now drafted.
- In Uganda, a bimonthly technical working group (TWG) with membership from NRPSPS implementing partners has been established with a clear terms of reference to use project outputs to continue advancing the policy commitments made by government.

Social movements continue to flourish and expand and are more sustainable

- In Ecuador, PAH's direct contribution to enhancing the organizational capacity of project partners, such as Transgender Project and Alas de Colibri, has strengthened their ongoing ability to implement approaches to meet the needs of the target groups within their humanitarian assistance work. This approach built on these organizations' existing experiences, and has also strengthened their effectiveness and operations.
- In Nepal, the institutional, operational, financial and technical capacity building of NLRF and NFGF has supported the ongoing work of these movements, not only around future impactful systems-level programs, but their ability to raise resources, support staff, manage grants and function effectively; all central to their sustainability.

- In Nepal, the increased legitimacy, credibility and reach of NLRF and NFGF is enabling these movements to continue facilitating collective action among target communities and to expand their advocacy to other locations.
- In Uganda, working through women's economic collectives, which provide a strong basis for grassroots WEE, supports sustainability through enabling bottom-up and community-led solutions. In addition, through working with established community groups instead of creating new ones, the program has supported the continuation and strengthening of the existing self-help groups (SHGs) and VSLAs.
- In Uganda, the improved regulatory environment for savings groups, with increased government recognition and support, and greater financing and guidance to women-run groups, is a key aspect of supporting the long-term sustainability of these groups.
- The database of SHGs and VSLAs supported by NPRPS will be a key tool used by government in informing future government initiatives, enabling departments to draw from the database and know the location, composition and functions of these groups; thus continuing to support those registered within the database.
- Formalizing social movements has improved their cohesion and joint working, optimizing their resources.

Systems strengthening continues to maintain impact:

- In Ecuador, the capacity building of public officials, including the Secretariat for Human Rights, judicial units and political lieutenants, supports ongoing adequate, non-discriminatory, inclusive and timely rights-based protection services to migrants, refugees and host communities long after the work of PAH ends.
- In Ecuador, the strengthening of, and improved access to, high quality health services, and improvements in equipment, will continue to bring benefits to migrants and refugees, particularly for obstetric emergencies and adolescent obstetric emergencies. This is critical given the impacts of COVID-19 on the health system.
- The Levelling Tool is close to completion: In Ethiopia, the Ministry of Women and Social Affairs (MoWSA) held several consultations to gain additional inputs on the draft completed by CARE, and has piloted the tool with the Ministry of Agriculture. The Ministry now plans to disseminate the final tool in the coming months to allow transparency and objectivity while also making sure line ministries are aware of what they are going to be graded against ahead of time.
- The transfer of knowledge and sharing of resources has been crucial to creating Ministry ownership for sustainability. In Ethiopia, the project engaged the Ministry's technical experts in every step, co-developing, reviewing and finalizing outputs in collaboration with government staff. The SAA ToT cascade approach intentionally transferred knowledge so that activities could continue without CARE's direct implementation.
- In Uganda, NPRPS supported a training manual to sustain the capacity building provided to NRPRS actors, including Ministry of Gender and district local government staff.

Social norms change continues to bear fruit in communities

- The ongoing focus of social norms within the community-level work of the Ministry in Ethiopia continues. CARE's persistence around the adoption of the SAA methodology into the Ministry's social norms manuals will continue to have a lasting impact on the focus of the Ministry's work and how it seeks to promote gender transformation in communities.
- The impact on inclusive governance within the Ministry in Ethiopia continues to inform its culture and work. The context analysis and HR assessment is informing the restructuring of the Ministry today, and continues to support a more inclusive and gender equitable culture, processes and procedures.
- In Nepal, while challenges remain, changes in social norms, women's participation and household gender norms are creating an environment more conducive to gender equality

and women's greater say in decision-making.

Continued scaling

- In Nepal, the climate resilient models and farming practices which have been scaled are now widely embedded within local government systems and accepted by duty bearers, which will sustain their continued use and effect. Members of NLRF and NFGF are also scaling-up these models in the communities on their own initiative.
- In Uganda, women's groups developed under NPRPS will be scaled up through the anticipated USD217 million World Bank GROW project over five years. CARE Uganda is in advanced negotiations with the World Bank and Ministry of Gender to design and implement approaches to entrench NPRPS systems changes regarding WEE.
- CARE Uganda has built and strengthened relationships with government departments through NPRPS which will continue to support its ability to influence policy. For example, CARE Uganda has been appointed as a lead international non-governmental organization (INGO) supporting some components of the Parish Development Model (PDM).

Ongoing project actions and impacts

- In Ecuador, the joint advocacy work undertaken to achieve the abovementioned changes in local and national policies has further strengthened and empowered the capacities of partner organizations, civil society actors and community leaders and members to continue the advocacy efforts of PAH and support their future advocacy efforts.
- In Uganda, NPRPS has provided a framework that has been used by CARE to attract funding to replicate and scale up the program.
- In Uganda, CARE's partnership with academic institutions, such as Makerere University Business School (MUBs), during implementation of NPRPS provides a framework to integrate the learnings and evidence of the program within teaching curriculum and methods.
- In Nepal, NLRF and NFGF have continued to facilitate land registration certificates from the government since project phase out, with increased registration among the landless not reached by the project. This is crucial to sustaining the improved livelihoods opportunities (as these farmers can then leverage their land for income).
- In Nepal, the project has created a foundation for climate adaptive farming technologies across the project communities, which will continue to be used given the advantages it brings to farmers' production.

A number of challenges were also identified with respect to ensuring ongoing sustainability, which included:

- In Ethiopia, the subsequent government restructuring of The Ministry of Women, Children and Youth (MoWCY) to become the Ministry of Women and Social Affairs (MoWSA) has affected the progress of the HR strategy, as staff are hesitant to further roll it out until the realignment is complete. The HR assessment is no longer accurate, and will require being redone, because the Ministry has added additional staff from the Social Affairs department due to the merger, and is now in a new location with several new leaders. The restricting has also brought challenges to the tools CARE supported to developed, which are seen as not including other vulnerable groups, such as people with disabilities. Finally, the new Ministry faces challenges holding other ministries accountable after grading them using the Levelling tool, with best practice needing to be developed to support this. The pilot project was also designed with the intention that a follow-on project would help ensure sustainability, but funding was not forthcoming for that follow-on.
- In Nepal, there is now high demand for the models like Farmer ID (FID) Cards, localized agricultural insurance, and climate resilient leasehold farming in other contexts. Moreover, NLRF and NFGF face increasing demands to further expand their work and scale the models

developed through SAMARTHYA, but have limited resources to meet this demand. There is also a need for ongoing local technical human resources to support the sustainability of climate resilient leasehold farming, nutrition gardens and vegetable production. Meeting all these demands could be a challenge for CARE Nepal within its existing resources. The retention of the localized insurance, which itself was limited to urban cities and more accessible places, may also be a further challenge without a robust renewal mechanism for the scheme among participants.

7. Limitations and constraints

This section provides a review of the key limitations and constraints faced by the evaluations, and the mitigating steps taken to address these challenges.³³

Timeframe and timing of the evaluation

The principal limitation was the short time period across all countries for completing the evaluation (1-2 months to complete the OH), given the need to spend funds by the end of CARE's fiscal year. This included time for inception, data collection, analysis, and reporting. This reduced the amount of time available for interviews and data collection, and meant that it was challenging to validate and report on some of the longer-term outcomes identified in one country. As a result, the evaluation teams made significant efforts to ensure data could be collected, and successfully collected extensive data and results, reflected above. They were provided in-depth and ongoing support to make sure data collection could take place. The evaluation teams reverted to phone calls and one-to-one office visits when pre-planned meetings were not possible.

In Nepal, the outcome harvesting took place during the rainy season and a national election, which restricted access to certain locations for field visits. To address this the research team adapted their approach, switching locations where necessary, and undertaking interviews remotely instead. In Uganda, the OH was also conducted at a time when government officers were busy with the closure of their 2021/2022 financial year, making it difficult to reach some targeted respondents. While the use of virtual meetings partially mitigated this challenge, it may have influenced the quality of data relied upon for analysis and conclusions drawn.

Methodological challenges

As the OH participatory methodology relies on direct program stakeholders and existing documentation for the identification of outcomes, this may have resulted in a potential bias towards outcomes which stakeholders are aware of or which have been previously reported. To address this, the evaluation teams collected a breadth of data to be able to triangulate the results, and also used rigorous substantiation processes (see section 4.3 above).

In Ethiopia, the OH methodology also raised expectations that another project was likely forthcoming. While the intention of the OH workshop in Ethiopia was made clear, it still led to participants suggesting upcoming activities and expectation for a full project, particularly since STM was a pilot.

Measurement was not a specific focus of the evaluation. To address this, further discussions took place to gather additional information in this area.

Understanding of systems change concept

The concept of systems change and the different systems-level pathways was new to the country office staff involved, and that led to initial misunderstanding about the focus of the evaluation. This was addressed through in-depth discussions and training on the concept and the pathways, and how the work of each project/program fitted within those. Exploring the differences between the overall research questions and the useful questions which inform those overall questions also took time, reinforcing the importance of sufficient time available and clarity around systems change from the outset.

Projects/programs selected for evaluation

³³ The evaluations also identified some specific challenges relating to project/program level implementation, which can be found in the individual country briefs.

None of these projects were specifically conceived as a systems-level project (they were doing systems components, but not calling it that) and as such none intentionally designed their activities to be structured around CARE's six systems-level pathways. Therefore the projects/program could not be evaluated against their original ToCs. As a result, the preparatory step was followed (see section 4.4) in which the COs were supported to document linkages between their activities and each of the pathways. This was part of the iterative learning process.

PAH in Ecuador is also a program, and not a specific project, and while this brought benefits in terms of comprehensiveness, it was not always easy to define the parameters of the evaluation given the breadth of PAH work. Humanitarian work is also often predominately direct support, rather than systems-level interventions, and as such time was needed to explore in more detail the systems-level components of this work with the CO prior to the evaluation.

In Nepal, there was an initial desire to evaluate the original objectives of the SAMARTHYA project. As the SAMARTHYA project was not designed specifically as a systems-change approach, it was necessary to work with the CO to explore the systems linkages and look at ways to broaden the evaluation. A further limitation here was also that the evaluation took place five months after the end of the project, limiting recall among some respondents. However, this was compensated by a broad use of data collection sources, enabling triangulation of data to avoid any recall bias.

In Ethiopia, the pilot nature of the project also posed a limitation on measuring impacts. Due to its short duration, and the fact that it was intended to be later extended through further donor funding (which was not forthcoming), the project was conceived as only delivering outputs, though the evaluation surfaced many outcomes. The aforementioned restructuring of Ministry of Women, Children and Youth (MoWCY) also created challenges for the evaluation, given that participants were being asked about results related to the past when the Ministry was called MoWCY while being engaged (and asked to report those results) at a time when this Ministry was now under a different name and structure.

In Uganda, the fact that the NPRPS project was still ongoing during the evaluation created some challenges. In addition, the evaluation focus was agreed as broader than the target project, to include the interventions by CARE Uganda which informed NPRPS. This however meant that many of the relevant initiatives shared as examples of NPRPS results by respondents began several years ago, and many respondents mixed up prior CARE interventions with the NPRPS initiative. As a result, the identified outcomes cannot be entirely attributed to the NPRPS program. This has been addressed by being specific to those outcomes which are historical. The broader focus also brings strengths in terms of the breadth of learning from the evaluation.

Quality of project/program data and results focus

As noted, the project in Ethiopia only conceptualized output results due to its limited timeframe, and therefore only had existing data at that level. In Uganda, the secondary data analysis as part of the OH was also limited by the prevalence of activity/output-based rather than outcome-focused written reports.

Lack of standardization of program approaches

There are some limitations in making generalizations or statements across projects which are all different in focus and approach. Also systems-level interventions are very context specific (for example, the legacy of advocacy being restricted in Ethiopia due to legal prohibitions). The outcomes were therefore different in focus, and reflect different targets and thematic areas. Nevertheless, the four countries still provide a huge richness in data, trends and learning which can inform future work. The standardization of the evaluation approach across these countries assisted in enabling broader analysis and lessons.

Impacts were not always clear and not separated by pathways

The evaluation review found that the project impacts were overall not always well articulated, and were not included in some countries. The pathways used within each project also all applied to the impacts in general, as opposed to using different pathways for different impacts. As such, separating out which pathways may apply to which impacts was not possible.

Staff availability

The fact that some of the projects had been completed and no longer had dedicated resources, or resources had not been secured for a follow-up project, created challenges in some locations for CARE staff to dedicate sufficient time to the evaluation (and to get management permission to do so). Staff also had many other demands on their time, which at points limited their engagement with the evaluators in some countries. This was mitigated by ongoing direct support for the country by the CARE USA team and an international consultant, liaising directly with in-country consultants and researchers together with the Country Office.

8. Lessons learned

The collective evaluation finding and process, including analysis of trends, similarities and areas of divergence across the countries, generates a significant amount of rich learning, which can support CARE's ongoing and future systems-level work. This section outlines this learning, looking at overall lessons, integration, gender equality and locally led lessons, programming lessons, lessons specific to each of the pathways, conceptual lessons, evaluation lessons, measurement and reporting lessons and sustainability lessons.

Overall systems-change lessons

- **CARE's work is having a significant effect on systems change and impact:** The evaluation found significant system-level changes across the pathways and impacts on behaviors, relationships and practices. These reflect impacts at all levels, covering individuals, households, communities, and institutions.
- **The systems-level change work already happening within CARE is often not described at such, and needs to be repackaged and promoted:** The evaluation review found dedicated time was needed to explore how the existing work of the four projects linked to the systems pathways, but once this was done the significant impact of this work was clear. In effect, CARE COs are already doing successful systems-level work, but are just not calling it that.
- **The COs were often not deliberately employing the systems change pathways, and this work was therefore more organic than deliberate.** The evaluation found many projects were not conceived originally as systems-level projects, though organically used a number of strategies that speak to each of the pathways. As such, project theories of change did not explicitly call out systems change. This did not prevent this work having an important effective, but including a more deliberate integration of using the pathways as part of design can lead to more effective programming and greater impacts.
- **Some of the most meaningful systems-change are intangibles.** COs noted that trusting relationships with governments and stakeholders, collaborations with external partners which grew exponentially, or decisions taken by others to scale up organically often led to some of the greatest systems-level changes.
- **Building understanding on how to employ the systems-level approaches is key to successful systems-level programming:** The COs involved in the evaluation noted that they would have done things differently (such as linked more deliberately to using the systems pathways), had they had the understanding they have now.
- **Systems change does not require working on every pathway to be successful, but reflection on the pathways not being employed is valuable:** The Ecuador CO's work evaluated didn't include model replication, the Ethiopia CO didn't include social movements, inclusive markets and model adaptation, and the Nepal CO didn't include inclusive markets. These COs achieved significant systems change focusing only on the areas that best linked to their strengths. At the same time, there is value in considering where there are gaps in the pathways that COs are using, particularly iMBA and scaling (see section 6.1).
- **The primary system objective and tactic being used across all the projects was advocacy.** As noted, this was a central theme underpinning many of the actions taken by the COs, and the focus of other pathways (beyond advocacy). This also speaks to CARE's strengths.
- **Successful systems-level change approaches are not necessarily being connected to a specific individual impact:** COs were not always specific (or had a clear sense from the outset) about the intended impact on people's lives as a result of systems-change. This was sometimes not defined at the outset of programs, and was also challenged by the fact that COs were not deliberately doing systems-change. As COs currently find employing the pathways an area requiring support, exploring individual impact can add an additional layer

that some may not be ready for. But this does not deter from the critical impact many of these projects/programs had at an individual level.

- **Systems change alone (without clarity on the individual impacts) is still powerful and worthy of being celebrated:** Given the complexity of systems change (see below), these achievements along the pathways alone should not be underestimated. The evaluations found considerable systems change success even where the impact level was not fully articulated. COs may also not have the capacity to clearly articulate the impact. Sharing results of systems-level changes alone also helps develop understanding on what works and supports improved program quality.
- **Successful systems-change work can take some time and is often highly complex:** All these countries identified that systems change requires tenacity and dedication, and brings many challenges. The fruits of systems-change actions may not be realized for several years. Successes can also be easily undone, such as where a change of government or shift in political will leads to immediate changes in priorities. This requires long-term commitments by CARE.
- **A dedicated and flexible staff focus on systems-change is often essential:** Engaging in systems change requires an ability to develop deep and strong relationships, and CO leadership support to focus sufficient time on groundwork that leads to success. It also required being flexible and adaptive, recognizing that processes may take longer and cost more than anticipated. A dedicated focus also increases CARE's reputation in the six systems focus areas, leading to COs then being seen by government and partners as bringing that specific value-add expertise to the table.

Lessons on systems-level integration

- **Integrating systems pathways is central to the success of CARE's systems-level work and should be deliberately expanded:** The evaluation found that all projects/programs were integrating pathways (even if not deliberate), and that this was a central component to success in systems change, strengthening and amplifying the work. A key example is how social movements were essential to the successful policy change achieved by many of the projects. Supporting ongoing and expanded focus on systems integration is an important part of longer-term successful systems programming.
- **Countries are often not explicitly integrating the pathways, but this is often happening organically:** Reflecting the broader approach to systems-change, COs were integrating pathways but were not deliberately choosing to do so but following prior experience and practice. Encouraging the more deliberate concurrent use of pathways could support even more impactful programming.
- **Systems integration was often more unidirectional than bidirectional:** This evaluation found that pathways often supported each other in one direction (such as policy advocacy supporting inclusive markets) than set up to be mutually reinforcing. Exploring ways that systems integration can become more sophisticated to operate bidirectionally rather than principally unidirectionally, where appropriate, will support more impactful programming.
- **Social norms were found to support the greatest number of other pathways, and this was principally unidirectional (not bidirectional).** Social norms was the most common pathway supporting other pathways. This reinforces the centrality of social norms change to this work and the broader focus on gender equality within these systems change projects.

Lessons on gender equality and systems change³⁴

- **Gender equality was the single biggest focus within systems-level programming:** The evaluations found that gender equality was a key strength which CARE brought to systems-level programming, whether it was this focus within policy reviews and advocacy, engaging

³⁴ One of the other two “impact drivers” alongside globally scaled in the CUSA FY22-FY25 strategic plan

WROs, supporting better systems for women and girls, male engagement, women's entrepreneurship, among others. Continuing to explore how systems-change supports CARE's gender equal agenda will be important.

- **These approaches included gender transformative actions:** The programming did not only focus on women and girls, but shifted the policy and program environment, shifting harmful masculinities and other norms in communities, household gender relations and structures underpinning gender inequality.
- **Systems-level work had considerable success in advancing gender equality:** As noted in 5.2, the projects succeeded in individual impacts which greatly improved the lives of women and girls, in particular, including related to women's empowerment, financial autonomy, economic empowerment, participation, and decision-making.
- **An important part of the systems-level approach was the focus on the root cause of gender inequality:** This included a focus on not only responding to the specific challenges women and vulnerable groups face (the symptoms), but addressing the underlying causes of gender inequality, particularly power relations, gender roles and social norms. These norm changes also had ripple effects in terms of changing structures and women's voices and roles in households, communities, organizations, and as decision-makers and leaders.
- **Intersectionality was not a key feature of all gender equality work.** Intersectionality was included in some systems-approaches (such as working on LGBTI+ persons and for migrants and refugees), but not for others. Some approaches exploring women's empowerment were not specific about the most vulnerable women and girls. Continuing to explore the intersectionality and gender equality in systems work will be important.
- **Working through grassroots women's rights organizations is key:** Engaging with and working through grass-roots women's rights organizations – not just national or large CSOs and NGOs - is critical to supporting bottom-up approaches, empowering these organizations to raise their voices, and creating movements that can continue to support broader institutional and policy changes to drive gender equality.

Lessons on locally led and systems change³⁵

- **Locally led approaches were a central strategy used by COs in their systems-level work.** Localization was embedded within the approaches and strategies used by countries, whether it was work with grassroots organizations, and social movements, or seeking to scale-up locally. The evaluation found clear connections between the strategies used and CARE's desire for locally led approaches.
- **A focus on engaging local partners and CSOs as part of the social movements pathway was a key intersection with the locally-led agenda:** The position of implementing partners/CSOs within the systems-level framework can be unclear. The inclusion by countries of CSOs, in addition to social movements, within their work on this pathway was a way in which COs helped to link systems-work and being locally led.
- **Systems-level work was successful in advancing localization.** As noted in 6.4, the projects achieved a range of changes which supported improved localization and empowered local groups. For example, training and funding for social movements, advocacy and systems change that benefited these groups. Continuing to explore how systems-change supports CARE's locally led agenda will be important.

General program lessons to maximize the impact of systems change

- **Systems change works well when grounded in a needs-based approach:** To be effective at changing systems, project interventions and approaches must be informed by and respond to target impact groups needs at the current time. In the case of SMARTHYA in Nepal, the climate resilient local models were directly relevant to the needs of landless and

³⁵ One of the other two “impact drivers” alongside globally scaled in the CUSA FY22-FY25 strategic plan

marginalized farmers and were therefore more accepted by the target communities. In Ethiopia, two of the most impactful project activities (a new national Gender Policy and Levelling Tool), were proposed by the government during design workshops. This also created fertile ground for strong partnerships between CARE and the Ministry to maximize success.

- **Effective government collaboration, including at a senior level, is central to success when engaging the public sector across the pathways:** Building rapport and acceptability with government, including high level officials and decision-makers, was critical for COs, and intangible, particularly where they did not already have those relationships. A culture of co-creation and partnership between programs/projects and government was essential in successful policy change, and planning, development, implementation and scale-up of different approaches. This includes working with CSO partners being supported by CARE to strengthen their linkages to government, both at local and national levels.
- **Co-ordination and collaboration is key to systems-level success:** Investing time to build effective coordination and partnerships among multiple different CSO partners and networks, including government, private financial, and the communities, is critical to ensuring the success of systems-level change and impact. This includes ensuring their inputs were included early on, regularly and flexibly in what is often a changing context.
- **Systems-change is an equally important part of humanitarian responses:** Humanitarian responses are often seen as principally about responding to immediate emergency needs than longer-term systemic change. Ecuador's work has shown the benefits and importance of focusing on systems change within humanitarian contexts (as well as direct support), and thus positioning this work within the nexus of humanitarian and development.

Lessons learned specific to advocacy pathway

- **CARE's policy change was not only national, but also local and cross-border.** The evaluation found significant policy and program change was achieved at local level, and across borders. Given the significant influence of local governments in many countries, being able to engage directly at that level is essential.
- **Policy advocacy supports women's rights not only in the policy content area, but in empowering women's ongoing activism.** Supporting women's rights groups to undertake advocacy led to ongoing actions by these groups and emboldened women to speak out further for their rights.
- **Government partnership was key to successful advocacy:** Engaging government as a partner, where possible, is key to success and to expanding impact, such as taking policy wins from one location to another.
- **Advocacy targeted the private sector, as well as government:** Advocacy can often be seen as solely about targeting only the public sector. CARE successfully shifted the policies and approaches of the private sector, supporting improved access to products and services. This, in turn, helped to reinforce policy change within the public sector.
- **CARE successfully used both insider and outside advocacy tactics:** The projects/programs both engaged and collaborated with government as a partner (insider approach) as well as undertook public advocacy and lobbying (outside approach) to reinforce the policy changes it was seeking to achieve.
- **Multisectoral coordination was key to successful policy advocacy:** CARE's ability to bring together different organizations across a common advocacy cause was critical to building momentum and success for its actions.
- **Generating and sharing evidence drove policy change:** The evaluations revealed the generation and sharing of evidence with government ministries and agencies directly supported advocacy that achieved the development of policies, guidelines and regulations.
- **Policy advocacy was a dynamic process in which momentum can build.** The reviews of one policy in Ethiopia leading organically to reviews and advocacy for another policy (a National

GBV Policy), which in turn led to the drafting of this new separate policy, highlights the iterative and dynamic nature of this work.

Lessons learned on social norms pathway

- **Taking a relational approach is important to social norms change:** The evaluations found that using a relational approach, including engaging men and not only women, was important to systems-level approaches. It created a more enabling environment that supported gender transformation in Ethiopia, Nepal and Uganda. Relational aspects often do not feature in higher level discussions within CARE about systems-change. Reflecting these CO experiences can support a broader focus on this within CARE's conceptualization of systems-change.
- **Social norms approaches are working not only at household and community level, but also with decision-makers in government:** The evaluation found an important contribution of CARE's work was not only engaging communities, but working with government structures and staff to change their own norms and behaviors. This, in turn, led to improved programming.
- **The relational focus of systems projects is both a tactic and an outcome.** The evaluations found that changes in relations were a focus of activities within the social norms pathway (interventions at the household, etc), but were also an impact of systems change (women's greater decision-making in the home). This is worthy of greater focus to better understand the positioning and use of the relational focus within CARE's systems-change framework.
- **The community focus of systems projects is both a tactic and an outcome.** The evaluations found that changes in community norms and attitudes were a focus of activities within the social norms pathway, but were equally also an impact of systems change. This is worthy of greater focus to better understand the positioning and use of community change within CARE's systems-change framework.
- **Engaging communities to shift social norms not only impacted on the target groups, but led to communities themselves driving further change:** While interventions in communities were found to have shifted norms and practices, such as reducing discrimination towards women, communities in Ecuador also initiated their own actions leading to further outcomes, such as organically expanding community epidemiological surveillance practices.
- **Importance of SAA facilitators (when using a ToT approach) being well-vetted and trained.** The nature of Social Analysis and Action (SAA) brings forth sensitive topics that could bring backlash if not kept confidential or facilitated properly. It is therefore important that government ensure SAA facilitators - those in government training others through a ToT approach - are well trained and appropriately vetted.

Lessons learned on social movements pathway

- **CARE's work engaging and supporting social movements is critical to systems change and impact of people's lives:** The evaluation found meaningful work with, integration of, and support to, social movements successfully supported systems change and improved the lives of many, whether it was around food and nutrition security, women's economic empowerment, or the rights of refugees and migrants. This was a critical area of work across the countries evaluated and is worthy of expansion.
- **Positioning CSO/partnering strengthening (in addition to work with social movements) within the social movements pathway:** Several of the COs engaged with other CSOs and partners (implementing partners), building their capacity, as part of their work within the social movements pathway. This was in addition to the direct work with social movements. Distinguishing between, and working with both social movements and CSOs was an important part of their approach to achieve social change. The inclusion here of CSOs is also a way in which systems-work and locally led intersect.

- **Working with social movements requires not only supporting technical capacity but also internal systems:** Supporting social movements' internal financial, operational and management systems, as well as building their advocacy skills, is key to building strong foundations. Enhanced credibility of these movements among their communities and the government not only improved their ability to influence change, and strengthened project outcomes, but led to these CSOs jointly sharing resources for the project intervention, thus supporting sustainability.
- **CARE can play an important role in creating the enabling environment for social movements to flourish:** In Uganda and Nepal, CARE played an important role not only in capacitating social movements but in enabling their official registration, providing a context in which they can expand and have greater impact now and in the future. This also increased their legitimacy and ability to have bargaining power with government and private sector.
- **Social movements can play an essential role in advocating for policy change:** Capacitating and mobilizing social movements to enable changes in policies, programs and budgets is an effective approach, and can lead to organic changes where new parts of the movement decide to seek such changes in their own communities.

Lessons learned on systems strengthening pathway

- **Systems strengthening in these projects is beyond only service strengthening:** Several of the projects/programs evaluated included building the capacity of staff and operations within the health and protection systems, building government capacity and skills around programs, supporting government to implement agreed policies, and improving their internal systems and procedures. This goes beyond traditional service strengthening. These steps were important to creating strong systems that supported other pathways, such as policy change.
- **A political economy analysis (PEA) or context analysis should take place at the onset of any project [Ethiopia].** The context analysis and HR assessment undertaken in Ethiopia were important not only for building an in-depth understanding of the structural and cultural constraints for accountability around gender equality, but enabled conversations with government which might not otherwise have taken place. Thus, such analysis should take place at the onset of any project and continually be aware of relationships, power dynamics, and functions that would affect the project activities.
- **Limited focus on social accountability within project's evaluated:** The systems strengthening approaches focuses less on traditional accountability mechanisms, and more on supporting government as a partner. While many projects included strong policy advocacy towards government, strengthening a focus on accountability mechanisms, such as using the Community Score Card, could be valuable.

Lessons learned on inclusive markets pathway

- **Savings groups provide a key forum for reflection beyond monetary value:** Both Ecuador and Uganda found savings groups not only focusing on income generation but that they were an important opportunity for community reflection and sisterhood, and that there was a need to expand this later focus within these groups (which was said to often be minimal).
- **Engaging financial institutions in innovative ways to address both their and women's needs:** CARE's key role in educating financial institutions about how to reach and mobilize savings groups, and supporting them to do so, responded to a key need among these institutions and tapped into their motivations to expand products and services, while simultaneously enabling the expansion of more inclusive finance to women.

Lessons learned on scaling pathway

- **Scaling is local and not only institutional:** Scaling and replication took place successfully in Nepal not only through government, but through local CSOs. These CSOs have continued to expand use of the project models.
- **Institutionalization is important for systems-level change:** Institutionalization of approaches within government – such as the integration of climate resilient models through local level acts and policies in Nepal - is a critical part of the work these CARE countries are doing as part of their scaling. This is often not explicit within the scaling pathway. Given the potential and reach government has, this can be very impactful. In Nepal, the CO found that the areas where the SAMARTHYA project models had not been endorsed and institutionalized within Local Acts, their ongoing use and sustainability was challenging.

Lessons on conceptual clarity around systems change

- **Systems changes were often reported in the incorrect pathway, or was unclear exactly which pathway it related to.** The review of the evaluations found that systems changes relating to one pathway were often reported in other pathways, for example policy changes being under systems strengthening in Uganda and Nepal. This reflected the complexity of the systems level approach, and that it was not always clear exactly which pathway was best suited. It also highlights the importance of capacity building.
- **There is not conceptual clarify around whether the community-system is part of CARE's systems-change approach:** While CARE's systems-change approach includes a focus on change at the levels of interpersonal and community-level systems, the evaluation found some staff of the view that systems-change does not relate to those levels, and only organizational, institutional, corporate and other macro-level systems.
- **There is not conceptual clarify on actions which may be more regarded as agency-related than systems-level, particularly in the context of social norms change.** One CO discussed psychological assistance, self-esteem capacity building and therapeutic support groups as social-norms change. These activities would typically be regarded as individual/agency-level strategies than changing social norms (or systems change).

Lessons on evaluating systems change – internal considerations

- **Investing time in understanding how projects/programs link to systems-change before the evaluation is critical:** The time spent in exploring the linkages between projects/programs to the systems-level concept and pathways was found to be useful in guiding the evaluations, and is a useful future first step in a systems-change outcome harvest.
- **Ensuring selection of most appropriate project for evaluation:** It may be necessary to spend further time exploring the projects to be evaluated. For example, CARE Ethiopia said they would have selected a different project now that they understand the process better. As noted, the Ethiopia evaluation was also constrained by the restructuring of government after the project. The NPRPS program in Uganda was ongoing, and thus not a completed project that could be evaluated. Combining this with capacity building also helps.
- **It was not always easy to get COs to align their project with CARE's systems-change framework, highlighting the importance of capacity building.** Initial discussions on identifying how projects linked to systems change and impact, and the pathways, found that this often generated different opinions within the COs and back-and-forth to clarify those linkages. This reflected the fact that the projects had not conceived these approaches in design. It reinforces the importance of ongoing capacity building

Lessons on evaluation systems change – outcome harvesting methodology

- **Outcome harvesting requires sufficient time:** Adequate time is required to gather the information, process, analyze and contrast it, in order to deepen and interrogate the

answers to the evaluation questions. This includes time to undertake preparatory mapping (alignment to the systems-change framework) prior to step 1 for relevant projects not originally designed as systems-change approaches.

- **The time constraints meant there was not detailed time for sharing the results (step 6 of the OH).** COs were unable to spend detailed time on this. It will be helpful for sufficient time to now be spent on how to share and use evaluation results.
- **Sustainability was hard to measure:** Given the level of data required to be collected on systems change and impact, it was challenging for evaluators to also collect data on sustainability. The nature of systems-change, which often involved multiple partners, and time periods which go on beyond the project, also made collection of sustainability data hard to measure. The evaluations also found recall challenges among participants.
- **Not all countries included unexpected, unintended or negative outcomes and these often surfaced through report revisions than deliberately:** Not all evaluations were able to cover unexpected or negative outcomes, which may be an area worthy of further focus and capacity building.
- **Several systems change successes from the projects were not covered by outcome statements:** The evaluation review found greater levels of change than were articulated as part of outcome statements. This was due partly to outcome statements trying to include several outcomes, rather than separating them out. It was also linked to countries not having full confidence in the systems-change concept and reticence to call out some achievements. For example, one CO had internal disagreements on whether they achieved policy change, an area the evaluation points to this being a clear outcome of their work.
- **Substantiation (OH step 4) may benefit from a combination of qualitative and quantitative approaches.** COs that used qualitative approaches to substantiation found it of benefit. COs that used quantitative approaches reported that while this was useful for quantifying the rate/level of agreement with the outcome statements, there was limited space for comments or suggested changes to the statements. As such, a mixed methods approach may yield more information for substantiation.
- **The evaluation surfaced outcomes not previously anticipated (foreseen) in the project at design stage.** COs remarked that the evaluation found changes beyond those original anticipated outcomes. This was the case even several years after the projects had ended. This speaks to the power of the OH methodology. This was particularly the case with Ethiopia, where they originally only had output level results.
- **Outcome harvest had advantages in measuring systems change.** This method was found to be excellent when needing to harvest where the systems connections had not previously been clear and were not part of original project ToCs. COs all welcomed this approach, and have expressed a willingness to replicate it.
- **Outcome harvest had disadvantages in measuring systems change.** This is a complex and time consuming method, reliant on sufficient funds to bring in external evaluators. It is also reliant on engaging with often busy stakeholders. The development of outcome statements was challenging in a context where the pathways and related components were not always well understood. OH was also less able to explore measurement. A method embedded from the outset (rather than at end/after project) may help to clarify the intended systems change outcomes and impacts to be evaluated.
- **Relationship between projects and programs can create challenges for systems-level evaluations.** In Ecuador, the evaluation of a whole program (rather than a project) brought opportunities of breadth, but also made it harder to differentiate the specific systems components. In Uganda, the evaluation identified the challenge of demonstrating systems-level change, and the related contribution and significance, where one project is part of a broader portfolio of work.
- **A mix of internal staff and external evaluators was the preferable approach for future such evaluations.** COs that used external consultants expressed the benefits of doing so. Equally,

the active engagement of CO staff was very important to evaluation success. CARE Ethiopia, who undertook the data collection themselves, reflected that in future using a quality consultant would benefit their evaluations through bringing in an external eye.

Lessons on measurement and reporting of systems change

- **CARE's internal measurement systems are not designed to capture systems-level changes and the impact that results from those changes.** This includes insufficient project-level indicators that link to the systems-pathways. And reported challenges among COs in linking systems-change and impact in measurement. While PIIRS is tied to project cycles, systems-level change spans projects and programs which can be a further challenge.
- **Intangible systems changes are often challenging to measure:** For example, groundwork to create policy change, relationship building, or collaboration, are central to successful systems change, but not easily quantifiable in measurement.
- **Impacts of systems change often felt later:** It is challenging to measure systems change when the impacts of its actions may come after a project or program ends. This is further challenged by MEAL staff turnover due to contracts being tied to specific projects, meaning there is less staff capacity to support systems-level measurement at that later stage.
- **One size fits all may challenging:** It can be difficult to have a one-size fits all approach to measuring systems-level changes, especially in the case where projects were not designed as systems approaches from the outset
- **Consider expanding PIIRS indicator #16 and #17 to more fully capture the six systems-level pathways and breadth of this work:** Taken together, these indicators largely only cover change via the social movements pathway (indicator #16) and advocacy pathway (#17). The influence of the systems-strengthening, inclusive markets and scaling pathways, as well as social norms change, is less clear. In terms of breadth, for example, indicator #16 only has social movements involved in driving informal change, whereas the evaluations found these movements to be central to driving policy (formal) change.

Lesson on sustainability

- **A focus and plan for follow-up to systems-level programs and projects is important, particularly to ensure continued change and impact from CARE's actions.** The evaluations found that systems change results can be easily undone, and that many of the achievements would benefit from ongoing follow-up support, presence by CARE and relationship building. Commitments to follow-up and integration of that work into new programs and approaches may be valuable.

9. Recommendations

This section provides a comprehensive set of recommendations based on the findings and learnings to strengthen CARE's systems-level work. It begins with the top 6 recommendations (see Table 9 below).

It then provides recommendations relating to the following: 9.1) systems-change programming and project quality; 9.2) conceptual clarity; 9.3) strengthening and expanding the current systems-level pathways; 9.4) strengthening the integration of the pathways; 9.5 & 9.6) Supporting linkages between systems-level change and CARE's gender equal and locally led agenda; 9.7) building systems-level capacities; 9.8 & 9.9) measuring, reporting and indicators for systems-level change; 9.10) documentation and learning and sharing; 9.11) knowledge and research gaps; and 9.12) strengthening future evaluations on systems-level change.

Table 9: Top 5 recommendations/key next steps for CARE

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| 1) Support a more deliberate and strategic focus on systems-level change across the work of CARE COs, supported by systems-level capacity building to facilitate concept internalization, tools and guidance, best practice hubs and greater internal spaces for learning and sharing. This will unlock huge potential for strengthening this programming and for evaluating future systems change and impact across the confederation. |
| 2) Clarify areas of conceptual misunderstanding within CARE as it relates to systems-level change. This includes the fact that individual/agency-level change is not part of systems-level change, and clarifying the approach towards the community system given it is both a mechanism for achieving systems change across certain pathways and an area of impact due to systems change. Greater conceptual clarity will support more impactful and focused future evaluations. |
| 3) Elevate the critical role and effect of CARE's social norms and social movements work in achieving systems-level change and impact. Social norms and social movements can receive less focus within the broader work of CARE USA, while this evaluation review found them to be central to the success of CARE's sustainable impact at scale. |
| 4) Expand and deepen the linkages between systems-change and CARE USA's gender equal and locally led pillars. This evaluation review found that the four systems projects/program significantly impacted on gender equality and supported localization. As CARE expands its work on those pillars (in addition to the globally scaled pillar), promoting those linkages and the role of systems-level approaches in advancing all three areas will be important. |
| 5) Prioritize and deepen focus on measurement and reporting of systems-level change and impact within COs and CARE. Before undertaking further evaluations of systems-change, support COs to more deliberately measure and report on systems change and impact within their project MEAL frameworks and their broader MEAL systems. Provide example indicators and tools to support COs to do so. Support changes to broader CARE measurement systems and PIIRS indicators to support this pivot and strengthen alignment between global and project reporting. |
| 6) Undertake future systems-level evaluations, including the use of the outcome harvest methodology, with other COs. In particular, these evaluations should seek to build further knowledge and understanding around the benefits of the integration of systems-level pathways. |

9.1 Strengthening systems-change program approaches and Program Quality (PQ)

| Recommendation | Details |
|---|--|
| Support CARE COs to more deliberately employ systems level approaches in their project design and work. This is in line with CARE's | Program design and ToCs should more explicitly include systems-level approaches, use of the pathways and pathway integration. This will help drive more effective, impactful and sustainable programs. This will also require ongoing capacity building support. COs |

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| Program Quality driver #7 'Sustainable Impact at scale' ³⁶ | should use CARE's Program Quality checklist , which provides guidance and resources, to support the design of systems-level approaches. |
| Continue to invest in and expand these four successful systems-level projects/programs, and prevent any backsliding of results ³⁷ | CARE Ethiopia, Ecuador, Nepal and Uganda should continue to expand these systems change efforts and successes, supporting full implementation of commitments and achievements, and maintain focus to support even greater outcomes and impact. This may require raising additional resources to support this work. |
| Invest and strengthen systems-level work across the CO, build on the results and lessons from these systems level evaluations and take to other projects and locations | CARE CO management and leadership should leverage the significant results of these projects to broaden their systems-level work across other programs and initiatives, and in current CO operational strategies, and also strengthen internal learning and sharing and promotion on systems-change and impact. |
| More clearly integrate systems level changes within CO strategies and plans | Systems-level change and the pathways should be more clearly integrated into the strategies and business plans of COs. This should also be more clearly included within donor engagement, to raise additional resources to support this ongoing systems-work. |
| Consider creating strategic CARE Best Practice hubs for systems change, such as a humanitarian systems change hub in Ecuador, and a WEE systems change hub in Uganda | CARE Ecuador should highlight its expertise in systems-change within humanitarian approaches, and CARE Uganda in systems change in WEE. Best Practice Hubs will strategically position the organization, provide a further niche for CARE that will support increased partner and donor interest in its work. |
| Shift from a project-based to institutionalized approach to systems change | Successful systems change requires ongoing partnership and relationship building, as well as maintaining an ongoing constant presence in spaces and forums. CARE COs should prioritize a focus on supporting its systems change efforts beyond individual projects, enabling transfer of lessons, ongoing focus on driving results, and preventing CARE having to start at the beginning with new projects |
| Embed strong CSO-government partnerships within projects | Build robust institutional linkages with local level government during project design, building ownership and accountability from them and facilitating policy change or adoption |

³⁶ CARE has 10 drivers of Program Quality (PQ), which supports a standardized approach across the confederation. Further details on each PQ driver, including #7 on sustainable impact at scale, can be found [here](#).

³⁷ The individual evaluation briefs also contain recommendations specific to areas of each program in each country where the CO could continue to support follow-up actions

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| | of models. This will strengthen sustainability of systems-change and impact. |
| Highlight the importance of systems change for humanitarian contexts as much as development contexts, and this expand this work within CARE's humanitarian response. | Systems-change approaches can be perceived as more suited to development/nexus contexts (than humanitarian). The evaluation review showed the impact this work can have in Ecuador's humanitarian context. CARE can build on this to promote the importance of systems-change in humanitarian and emergency settings (in tandem with CARE's work to address immediate lifesaving needs). |

9.2 Conceptual clarifications to support CARE's systems-change programming

| Recommendation | Details |
|---|---|
| Clarify conceptual focus around individual/agency-level within systems-change approach, and that the individual level is not part of systems-change | Clarify that agency/individual-level actions, such as psychological assistance, self-esteem capacity building workshops, therapeutic support groups, while important actions, are not strategies of systems change but for individual/agency-level change. |
| Support clearer alignment between CARE's Agenda 2030 ToC and its systems-level work | Reflecting the above, highlight that systems change is mainly targeted as influencing the 'relations' and 'structures' domains of change within CARE's ToC. CARE may wish to use or refine the systems-change and ToC figure in section 2 to support this clarification. |
| Explore how interpersonal and community change is positioned within the systems-level pathways and CARE's understanding of system's change and impact | Clarify that the interpersonal and community-level are part of CARE's systems-change framework, as reflected in the findings above. Clarify the differing focus on communities as both a medium of systems change itself (through social norms tactics and social movements, or as a platform for further action, for examples) as well as communities changing themselves as a result of systems-change actions. |
| Clarity to COs that CARE's Program Quality driver #7 'Sustainable Impact at scale' is the same as this work being undertaken here to promote the six systems-level pathways | COs involved in the evaluations were unaware that the PQ guidance reference to 'sustainable impact@scale' related directly to the work of the pathways. Clarifying this will help to support use of the PQ guidance and expansion of systems-level work. |
| Expand explanation of social movements or service systems strengthening pathway to include capacitating local CSOs, and clarify in which pathway these types of activities fit best | Many CARE offices work with and support local implementing partners and CSOs, which are different to social movements. Explanations of this pathway should include capacitating local CSOs and clarify the differences between those and social movements. This will also support CARE's locally led agenda. |

9.3 Strengthening and expanding the current systems-level pathways

| Recommendation | Details |
|--|--|
| Advocacy | |
| Continue to expand on the policy advocacy successes from these projects, building on the lessons learned. ³⁸ | CARE should continue to focus on supporting and expanding the policy changes required to address the needs migrants, refugees, GBV survivors, LGBTIQ+ communities, landless and smallholder farmers, women and girls, and under-banked women. |
| Deepen policy advocacy within broader CO programming | CARE CO should strengthen the integration of policy advocacy into its programming, building on the lessons learned from this work. As part of this, it is recommended to continue to expand insider and outsider approaches to policy advocacy |
| Expand policy advocacy to local levels, and beyond the public to the private sector | Given federalized structures of many countries, cascade policy wins and advocacy to decentralized local levels, which often make autonomous decisions on priorities and funding, where impact can be significant. Broaden policy advocacy to include private sectors, such as the regulatory environment for microfinance institutions. |
| Social norms | |
| Promote relational approaches as part of CARE's systems-level work | Learning from the experience of NPRPS and STM, CARE should more directly highlight the importance of the relational (interpersonal) component within the social norms pathway as part of its portfolio of systems-change tactics across the confederation. |
| Expand the focus on social norm change to include normative change among duty bearers in government, building on the successful experiences of CARE Ethiopia | As social norms change actions often remain at the community level, it is important to give greater profile to the innovative work CARE is undertaking to shift norms at the institutional level. The learning from CARE Ethiopia's work undertaking SAA with Ministry staff and embedding a gender transformative approach within government, and the results of this work on shifting personal attitudes and practices among these decision-makers and duty bearers, can be expanded to other CARE offices and contexts. |
| Lift up the work on shifting social norms within CARE USA's work | Social norms may receive insufficient focus within CARE USA's work due to being seen as more nebulous (as opposed to women's economic empowerment, for example). Given the significance focus on social norms as a |

³⁸ Recommendations specific to areas of each program in each country where the CO could continue to support follow-up policy advocacy are also included in the individual evaluation briefs

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| | scaling pathway found in this analysis, it may benefit from greater promotion. |
| Social movements | |
| Strengthen CARE's work on social movements and supporting their sustainability | Expand CARE's work engaging with social movements for policy change and as a sustainable approach to addressing the needs of the marginalized communities. Support internal systems as well as capacity building among these groups. |
| Expand a focus on working through social movements for policy change | Promote and leverage the learnings from this analysis on engaging social movements and CSOs to achieve successful policy change. |
| Lift up the work on social movements | Given the significant focus and importance of social movements within the work of these COs, it is recommended to amplify these actions within CARE USA's appropriate literature. |
| Systems strengthening | |
| Expand focus of service systems strengthening beyond service strengthening, to include building capacity and systems of government | The Ethiopia and Uganda projects highlighted the impact of systems strengthening activities focused on capacitating and supporting government – through training, technical advice, tools, and assessments, and improving internal and external systems. This broader focus of the systems strengthening pathway beyond only service strengthening should be explored within CARE's wider work. |
| Support context analysis and human resources reviews. | Undertake political economic analysis and human resources/context analysis as part of systems-strengthening work. |
| Strengthen social accountability focus | Given this evaluation review findings of little focus among COs on social accountability, continue to support COs to include a focus on social accountability as part of their work. |
| Inclusive markets | |
| Continue to support and leverage upon innovative health financing arrangements | CARE Ecuador should expand and strengthen the electronic health money system and innovative health financing arrangements with pharmacies developed under PAH. |
| Innovative models to engage financial services to expand access for women | CARE should promote the learning of NPRPS in Uganda on responding to the specific needs and motivations of the corporate sector, as a way to expand financial inclusion and improve availability and access for women to a greater range of financial products and services. |
| Scaling and adapting | |
| Further embed/lift up institutionalization in CARE's understanding of and work on scaling and adapting | Further strengthen the focus on institutionalization through government within CARE's pathway on adapting and scaling models, for incorporation into workplans and programs. Institutionalization of approaches within government was found by this review to |

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| | be a critical part of the work these CARE countries are doing as part of their scaling. |
| Support broader scale-up and institutionalization of climate resilient models within local government, building on the SAMARTHYA approach | Explore the opportunities to scale-up the climate resilience models from CARE Nepal to other contexts, leveraging on the significant success of this work. |
| Develop knowledge products to facilitate government support for scale-up | Projects should generate evidence-based knowledge products/policy briefs to stimulate government to be active in co-creation and to support scale-up and institutionalization of models developed by CARE. |

9.4 Strengthening the integration of systems pathways in program design

| Recommendation | Details |
|--|--|
| More intentional integration of the pathways to support more effective programming | This integration is already happening, but is not deliberate. CARE COs should more deliberately focus on systems-change integration within the design of their project ToCs and activities. |
| Support projects which focus on and test particular integrated approaches, particularly those less common. | Explore gaps identified in this review within the integration of systems pathways. This could consider, for examples, ways in which other pathways could better support social norms as part of a more bidirectional relationship. |

9.5 Strengthening the gender equal focus within systems-level program approaches

| Recommendation | Details |
|--|--|
| Build on this review to deepen the focus on gender equality and gender transformative approaches as part of systems-level work | Explore ways to build on the reviewing findings, and create a platform to discuss the centrality of gender equality for CARE's systems-level work. Explore ways to advance gender transformative work, that addresses root causes, not just empowerment, as part of future systems-level change. |
| Build on NPRPS successes to achieve systems change for women's economic empowerment (WEE) in other locations. | CARE Uganda's NPRPS project successfully strengthened government and social movements around WEE, and improved the policy environment for VSLAs. CARE should consider expanding this model to other locations to deepen systems change for WEE. |
| Stronger focus on intersectionality | Explore the opportunities to deepen the focus on intersectionality as part of the gender equality focus within systems-level change. |

9.6 Strengthening the focus on localization within systems-level program approaches

| Recommendation | Details |
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| Strengthening CARE's focus on working through grassroots women's rights organizations and enabling them to flourish | CARE's work with partners often remains at the level of national CSOs or larger organizations, rather than with smaller more grassroots organizations. Promote greater work across the confederation engaging with grassroots |

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| | women's rights organizations, enabling them to flourish and addressing the funding challenges many such small organizations are facing. |
| Build on this review to deepen the focus and articulation on the linkages between locally led and systems-level work | Explore ways to build on the review findings, and create a platform to discuss the important impacts that CARE's systems-level work has on localization and the locally led agenda. |
| Encourage use of existing community structures, rather than creating new structures | The evaluation found that some new community structures were being formed where there are already established functional groups. CARE COs should encourage its programs to use existing structures, which will support effective implementation, cost effectiveness and sustainability of the groups. |

9.7 Building capacities for systems-level implementation and evaluation

Please note that the area of systems-level capacities is explored in greater depth in CARE's systems Global Capacity Sharing Impact report [here](#). This focuses more specifically on capacities for systems-level evaluation.

| Recommendation | Details |
|--|---|
| Build knowledge and skills across the CARE confederation on CARE's systems-change work, framework and pathways, supporting more deliberate design of systems-level projects. | Staff at CARE should be made more aware of systems change tactics and their importance and how to operationalize them, in order to adapt and adjust their strategies to expand a focus on this work. |
| Employ a hand-on approach to capacity strengthening, helping COs to internalize their learning on systems-level approaches | Capacity building should go beyond the dissemination of documents/guidance and group presentations, to specific CO discussions and examples on how this concept relates to the CO's specific work and strategy. Ideally this process should walk COs through the systems approach step-by-step and explore the application of existing guidance to their work. There will help with improved understanding of the systems-level approach. |
| Undertake CO capacity on systems change before selecting CO projects to be evaluated in the future | It is important to build understanding on what systems change is and the different pathways before COs select their programs and projects to be evaluated. COs in this initiative noted they may have chosen different projects to be evaluated now that they better understood systems-level work. Building this understanding helps to ensure that the most useful projects are evaluated. |
| Provide sufficient capacity building on the OH methodology to support future evaluations | Meaningful OH requires the identification of good quality outcomes. It is important to ensure the OH process is well understood by all program implementers and that the need to provide strong evidence is emphasized. There is a need to provide in-depth capacity building including training, mentoring and regular |

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| | review of harvested outcomes. |
| Strengthening knowledge and skills among partners/local implementers on doing systems-change work | Staff at partner organizations should be made more aware of systems change tactics and their importance and how to operationalize them, in order to adapt and adjust their strategies to expand a focus on this work. |

9.8 Measurement and reporting recommendations for systems-level change³⁹

| Recommendation | Details |
|--|--|
| Support a more deliberate focus on systems-change within project MEAL systems and processes | To support a more deliberate design of systems-level projects, MEAL systems will also need to be adapted to support the monitoring and measurement of systems change and impact within those projects. This will necessitate greater support to COs for measurement and monitoring of systems change within their work. |
| Adapt existing CARE measurement systems to capture systems-level impact, especially when it spans programs and projects. | Undertake a review of CARE measurement systems, and develop a plan of action for improving alignment with systems-level change and impact. This includes exploring ways to measure systems change when the impacts of its actions may come after a project or program ends. |
| Support COs with guidance/a toolkit on how to measure for systems change and impact in their projects | Many COs specifically asked for guidance about project/program metrics on systems change. This would provide suggested indicators to include within project MEAL to measure systems-level change and impact. |
| Ensure both systems-level change and systems-level impact are being captured and reported | Both systems change and impact are important measurements. Where impact is not possible, systems change can still be significant and can drive understanding and program improvement. |
| Highlight to COs ways that early wins which are on the path to systems change and impact can be documented and reported. | As noted, there may be policy advocacy wins which have not yet achieved direct changes in laws or policies but that supported a more enabling policy environment. Under advocacy, for example, Teams can document an early advocacy/influencing win in PIIRS even if the change hasn't yet happened (if the policy itself has not yet passed). ⁴⁰ |
| Explore ways to capture intangibles to successful systems-level change, such as collaboration and relationships | It is important to explore ways to deepen collection of these intangible areas. This could include, for example, a revised version of the AIIR tool that captures qualitative wins. |

³⁹ As noted in limitations, measurement was not a specific focus of these interventions. Nevertheless, several recommendations are proposed based on the analysis of findings across all countries and subsequent discussions with the COs.

⁴⁰ Operationally, the means filling out all other parts of the AIIR Tool and noting in the impact estimation sections that it's too early to tell/not relevant yet

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| Revise indicators #16 and #17 to reflect the breadth of the six systems-level pathways and the depth of change within those pathways. | Revise #16 and #17 to include all systems-level pathways. In addition, revise indicator #16 to cover the fact that social movements are also driving policy change (not only informal change). Revise indicator #17 to include the word 'regulations' as a form of policy change CARE is advancing in its work. Consider whether #17 should also be revised to ensure it covers a breadth of topics as part of policy advocacy. |
| Revise social norms indicator #13 to allow for norm change at other levels beyond the community | As explored, social norms change can be changes at the relational and structural level. Explore ways that the indicator can include household level and relational activities, as well as cover social norms work with duty bearers. |

9.9 Improving Program Indicators on systems-level change

The following recommended indicators are provided to inform development of standardized metrics for measuring and reporting systems changes across projects/programs.

| Recommendations for program indicators |
|--|
| # of policies progressed towards implementation <i>The evaluations found several examples of critical groundwork undertaken by CARE, for policies which will come into effect in the coming years.</i> |
| # of new, amended or better implemented policies at national, provincial or local level <i>This indicator reflects the fact that successful policy change was influenced at all levels by the projects.</i> |
| # of policy wins which support a more supportive policy environment <i>This seeks to speak to the ways in which advocacy outcomes may not just be the final changes in policy, but everything that comes beforehand. For example, the constitutional court declaring a policy unconstitutional. This has not created a new policy per se, but has significantly influenced the context.</i> |
| # of social movements engaged in supporting new, amended or better implemented policies |

9.10 Documentation and Learning/Sharing on systems-level change

| Recommendation | Details |
|--|---|
| Take sufficient time to disseminate and share the results of the individual CO project evaluation reports and summaries, and this global evaluation report | The CO evaluation reports and summaries, as well as this global report, provide a significant amount of findings and learning that can inform CARE's work. COs should disseminate these outputs across their organization, and CARE USA should support dissemination to appropriate parts of the confederation. |
| Support programs to improve their documentation of outcomes and not only outputs | Several project reports documented activities/outputs rather than outcomes. As part of supporting future monitoring and evaluations, CARE should encourage existing programs and projects across the confederation to expand their documentation of successes (as part of their standard M&E) to |

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| | include outcomes, not only activities implemented/outputs. |
| Strengthen systems-level sharing and learning within COs | Support COs to expanding internal learning and sharing spaces and forums for systems-level change work and lessons learned. |
| Create regional and global spaces for learning and sharing on systems-level change and impact | Create a global COP on systems-level change, or similar forum, to support the sharing of lessons, challenges and impacts across COs. |

9.11 Knowledge and research gaps on systems-level change

| Recommendation |
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| Knowledge gaps to strengthen CARE's model for and implementation of systems change |
| 1. Operational study on how COs are currently measuring systems-level effects in their programs, and what their needs are, and how best to embed indicators, and design measurement systems, for systems-level change into future projects/programs |
| 2. How relational level best fits within systems-change approaches? <i>This is given the fact that relational focus of systems change can be both a change in itself (social norms pathway) and an impact of systems change (see above).</i> |
| 3. How community level best fits within systems-change approaches? <i>Community is impacted by pathways. It can also be seen as an outcome, as noted above.</i> |
| Knowledge gaps on to inform systems-change programming |
| 4. How to successfully undertake norm changing interventions at a higher level - with policy makers, politicians and other duty bearers/decision-makers? |
| 5. What is the current state-of-the-art for work with social movements? |
| 6. Limited focus on savings groups as a mechanism for enhancing gender transformation at relational and community level? |
| 7. Systems change and climate change, particularly in the context of the iMBA pathway? |

9.12 Strengthening future evaluations on systems-level change

| Recommendation | Details |
|---|---|
| Prioritize a deeper dive into measurement before replicating any systems-level evaluations | Given the needs identified by COs through the evaluation process, priority should now be given to measurement before further systems-level evaluations are undertaken. |
| Ensure clarity on how the projects being evaluated in the future included systems-level activities before beginning those future evaluations. This is particularly important given that those projects may not have been deliberately designed as system change approach. | CO projects/programs will have their own ToC and goals which may not be specific to systems-level approaches. It is important to spend time exploring how these goals, and related activities, relate to the systems-level pathways before the evaluation. A clear analytical framework covering the six pathways will ensure data is collected in the right way to facilitate future analysis. |
| Support COs to expand their focus and measurement on the impact of systems-level change on individual lives | Support COs to explore and understand what types of population wide/ individual-level impact may be possible due to their systems approaches and to then measure those. |
| Provide ample time for completing an outcome harvest (ideally beyond 2-3 months) | Outcome harvesting can be a lengthy process. It requires sufficient time to undertake rigorous data collection (where appropriate) and to process and analyze the results, |

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| | substantiation and reporting. This should be considered as part of planning for future evaluations to ensure sufficient time is available to enable better collection of data and verification of outcomes and impacts. |
| Consider the timing of the evaluation in relation to the project timeline, including that this project has already finished implementing its activities before the evaluation begins | Outcome harvesting may need to be conducted immediately after the project ends, or after a period of time, depending on the questions you are trying to answer, and how the results will be used. To have the best chance of establishing plausible influence of the intervention on outcomes, it is recommended to conduct OH only once the project implementation has been completed. Give due consideration to external considerations, such as timing of national elections. |
| Ensure clarity on what is being evaluated, particularly where a project/program builds upon previous initiatives | Many respondents to the evaluation in Uganda mixed up prior CARE interventions and the NPRPS initiative. Providing clarity on exactly what is being evaluated also helps to ensure identified outcomes can confidently be attributed to the project/program in question. |
| Undertake further evaluations to explore the systems-level change and impact across other CO projects/programs, building on the lessons here | CARE COs should apply the learning from these evaluations to undertake further evaluations of systems change and impact across other CO projects and focus areas. This will deepen an understanding on the wider systems change and impact that the organization has achieved across its portfolio of work. |
| Continue to replicate the OH methodology, while exploring other methodologies for evaluating systems-level change with CARE | The OH methodology was found to be appropriate for evaluation of systems-level change, and should be replicated in other locations. CARE should also explore potentially less expensive and more rapid evaluation techniques. This should include embedding evaluations within projects from the outset, so that there is clarity throughout on the systems change being measured. |

10. Conclusion

The four evaluations in these countries, and this analysis, shows the significant ways in which CARE's work is already achieving systems-level change and that this change is having a real and positive impact on people's lives. This system-level work is often not deliberate or strategically focused and can lack conceptual clarity, however, and significant opportunities now exist to strengthen and deepen this work across the confederation. There are a range of lessons and recommendations herein that can be applied to improve CARE's systems-level programming, research, evaluation, measurement and reporting, capacities, sharing and learning and future program design and funding proposals, and to further enhance the already significant impact that CARE's work is having to improve systems around the globe. Doing so is central to advancing CARE's work on being globally scaled, gender equal and locally led, and in tipping the scales towards greater impact on savings lives, defeating poverty and achieving social justice.

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Annexes

Annex A: Table on steps used by countries and differences

| Country/OH step | Ecuador | Ethiopia | Nepal | Uganda |
|---|--|---|---|--|
| Preparatory step | CARE Ecuador and the evaluation firm were trained on CARE's systems-level approach and the OH methodology. A matrix was developed to map how different components and actions of PAH related to each of the systems-level pathways (April-May 2022) | CARE Ethiopia was trained on both CARE's systems-level approach and the OH methodology. As STM was not conceived as a systems-level project, a short write-up was developed mapping project achievements to each of the relevant CARE systems-level pathways (May 2022). | Training was provided for CARE Nepal staff and the appointed consultants on both CARE's systems-level approach and the OH methodology. A matrix was developed to map different components of the SAMARTHYA project to each of CARE's systems level pathways. An outcome description formulation meeting was held to explore draft outcome descriptions under each relevant system level pathway. (March-May 2022) | CARE Uganda and the evaluation consultant were trained on CARE's systems-level approach and the OH methodology. Based on a series of discussions, a document was developed to capture some of the NPRPS actions under each of the systems-level pathways (May 2022): |
| Step 1. Design the outcome harvest | Existing data sources and actors, organizations, institutions and agents of change to be interviewed across the six systems-level pathways were identified. Specific questions were developed to capture observable or measurable changes during data collection to answer the evaluation questions, taking into account the time and resources available. (May 2022): | Actors, organizations, institutions and change agents to be interviewed were identified. Semi-structured interviews were undertaken with project implementers and Ministry of Women, Children and Youth (MoWCY) focal persons to agree on the information to be collected, the potential outcome description and MoWCY and CARE Ethiopia's role in this change. Specific useful questions were developed to capture | An outcome harvesting design workshop was held with the harvesters (3D), change agents and social actors (CARE Nepal, CSRC, NLRF, NFGF and local government, among others) and the Harvest Users (CARE Nepal) and independent facilitators who were familiar with the project activities. The first half of the workshop finalized the design, identified useful questions to guide the | Interviews with NPRPS implementers identified the intended use of the harvest, the stakeholders to contact, secondary data sources to be reviewed, and potential outcome descriptions and expected changes. Useful actionable questions were developed to guide the harvesting (June-July 2022). |

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| | | <p>observable or measurable changes during data collection to answer the evaluation questions, taking into account the time and resources available. (May 2022):</p> | <p>harvest, and agreed on the stakeholders to be consulted and sources of data collection. The study questionnaire/survey went through several rounds of revisions and were separated for relevant stakeholders. The survey on individual HHs level change was digitalized using KOBO for data collection. (May 2022)</p> | |
| Step 2. Gathering data and drafting outcome descriptions | <p>Step 2.: Primary data collection was undertaken, including individual interviews, group interviews, focus group discussions (FGDs), and workshops with those with first-hand knowledge of PAH. Secondary data analysis was undertaken on existing data of changes due to PAH actions. The findings were used to develop preliminary SMART⁴¹ outcome descriptions for each relevant pathway, which were guided by the following: Whose behavior has changed? What is the observable and verifiable change that can be seen in the individual, group, community, organization, institution or system? How did the change agent contribute to this change?⁴² (May 2022)</p> | <p>Secondary data analysis was undertaken of various project documents, which was complemented by primary data collection, including interviews with project staff and focal persons at MoWCY. The evaluation team wrote preliminary outcome descriptions, with questions for review and clarification. The outcomes described the changes, their significance and CARE's contribution to this change. (June 2022):</p> | <p>The second half of the workshop provided inputs to draft outcome descriptions. Harvested outcomes include a description of who changed what, when and where it took place, significance and how the change agent contributed to that outcome.⁴³ A desk review of SAMARTHYA project reports, publications and related documents was also undertaken. (May 2022):</p> | <p>Secondary data from program documents, reports and evaluations were reviewed to gain information about changes that have occurred in WECs and how NPRPS contributed to these changes. The evaluator constructed preliminary outcome descriptions, which described the change (in individuals, groups, communities, organizations and/or institutions) and when and where this change took place, its significance and NPRPS's contribution to that change. (June 2022):</p> |

⁴¹ Specific, measurable, achieved, relevant and timely, adapted to the harvest of results. [Outcome harvesting](#)

⁴² Ricardo Willian-Grau and Heather Britt (2013)

⁴³ Wilson-Grau, R and Britt, H (2013). Outcome Harvesting. Ford Foundation, November 2013.

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| Step 3. Engagement with change agents, social actors and informants on outcome descriptions | <p>The evaluation team held meetings to present the preliminary outcome descriptions for each pathway to CARE Ecuador and civil society organization (CSO) partners implementing CARE's PAH projects. Feedback was provided and the outcomes adjusted. (June 2022):</p> | <p>Draft outcome descriptions were shared in a workshop with the STM implementing team and MoWCY staff. Through a participatory process, all participants provided input into the three elements of the outcome description (change, significance, contribution), which were then updated. The evaluation team also conducted interviews with participants following the workshop to clarify outcome descriptions and seek additional information. (June 2022):</p> | <p>Field visits were undertaken to specific project sites⁴⁴ and local language in-depth consultation was held with stakeholders at all levels (community to federal) to review and complete the outcome descriptions or collect additional outcomes. A participatory mixed methods approach was used, comprising 82 key informant interviews (KII), 23 Focus Group Discussion (FGDs) and 23 field observations, along with 105 household surveys. (June 2022):</p> | <p>The evaluator undertook key informant interviews (KII) with eight actors with a close relationship to the program, including CARE Uganda, to review the outcome descriptions, respond to questions for clarification, and also identify and formulate additional outcomes and explore any unexpected changes. Outcomes were checked to ensure they were based on observable facts, provided sufficient detail, followed SMART criteria (specific, measurable, achievable, relevant and timely), and that the contribution of NPRPS to each outcome was plausible and verifiable. These KIIs were also used to explore the sustainability research question. (June 2022):</p> |
| Step 4. Substantiation ⁴⁵ | <p>The results were presented to other CARE's partners for external validation of results, resulting in further adaptation and additional outcomes (June 2022):</p> | <p>The views were sought of individuals knowledgeable about the outcome(s), but independent of the project - the Minister's advisor, UN Women, UNICEF, ActionAid, and CARE</p> | <p>The harvested outcomes were substantiated in meetings with individuals, community leaders and agencies with an understanding of the project (but independent from</p> | <p>The final outcomes were verified using KII (via in-person or phone calls) in order to increase the accuracy and credibility of the findings.</p> |

⁴⁴ Molung and Sunkoshi of Okhaldhunga district, Belaka and Chaudhandigadhi of Udayapur district and Bhagawanpur and Dhangadhimai of Siraha district along with their respective agencies at province level and national level.

⁴⁵ Confirmation of the substance of an outcome by an informant knowledgeable about the outcome but independent of the program

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| | | <p>WE-GO project staff - in order to substantiate the outcome descriptions. Using a questionnaire, participants rated their level of agreement with the three aspects of the outcome description (change, significance, contribution) and provided additional comments and insights (June 2022):</p> | <p>it). Substantiators were asked to score relevant outcome descriptions using a five point Likert Scale, and to provide justification for this scoring. (June 2022):</p> | <p>Support was also obtained from an expert in OH validation. (July 2022):</p> |
| Step 5. Analyze and interpret | The results were analyzed and interpreted, providing evidence-based answers to the evaluation questions . (June-July 2022): | The evaluators organized outcome descriptions to make sense of them, analysed and interpreted the data, and provided evidence-based answers to the useful harvesting questions. The evaluation team further aligned the findings with the relevant pathways to make them verifiable and show credible contribution of the project to the identified outcomes. (July 2022) | The outcome descriptions were finalised, reorganized, analyzed and interpreted. The findings were aligned with the five systems-level pathways to show verifiable and credible contribution of the project to the evaluation questions above. (June 2022) | The outcome descriptions were classified, analyzed and interpreted, to provide evidence-based answers to the evaluation questions. The analysis aligned the findings with each systems-level pathway. (July 2022) |
| Step 6. Support use of findings | Results were shared with CARE Ecuador's technical team, to strengthen the knowledge, design and fundraising for future systems-level change work. CARE USA hosted a meeting to share the results across the four countries within the initiative (July 2022): | The findings were shared with CARE Ethiopia's Program Quality and Learning (PQL) Team, and program management team, for learning and to support further engagement in systems-level work. Results were also shared with MOWCY to inform its work. (July-August 2022) | Unclear | Discussions took place in Uganda and at a global level on the use of the findings to support ongoing and future programming and research (July-August 2022). |

Annex B: Global Pathway integration

| | Scaling | Advocacy | Systems Strengthening | Social Movements | Social norms | Markets |
|--|-----------------------|-----------------------|------------------------------|-------------------------|-----------------------|-----------------------|
| Most likely to be integrated  | Markets | Social movements | Social movements | Advocacy | Social movements | Scaling |
| | Social movements | Social norms | Scaling | Social norms | Markets | Social norms |
| | Social norms | Systems strengthening | Social norms | Systems strengthening | Advocacy | Systems strengthening |
| | Systems strengthening | Scaling | Advocacy | Scaling | Systems strengthening | Social movements |
| | Advocacy | Markets | Markets | Markets | Scaling | Advocacy |
| Least likely to be integrated | | | | | | |

Annex C: Table of all outcomes (in summarized form)⁴⁶

| Country | Outcomes | Norms | SS-SA | iMBA | Advocacy | Movements | Scaling |
|---------|--|-------|-------|------|----------|-----------|---------|
| ECUADOR | Increasing the self-esteem and self-confidence of migrant and refugee women survivors of gender-based violence through psychological assistance and cash transfers has enabled them to resume projects, undertake micro-enterprises to support their families and increase their capacity for agency. | X | | | | | |
| ECUADOR | Improved social norms about masculinity within communities where CARE has been operating, shifting away from the dominant hetero-normative paradigm, as a result of reflection spaces and training on masculinities. | X | | | | | |
| ECUADOR | Greater acceptance of sexual diversity at the family and community level where CARE has been operating. | X | | | | | |
| ECUADOR | Networking of women's groups has been strengthened, such as the establishment of the Cross-Border Agenda to promote networks of women survivors of gender-based violence, reinforcing their empowerment, rights, and monitoring of proposals. | X | | | | | |
| ECUADOR | Soft skills and occupational training of youth refugees and host communities aged 16-22 has reinforced changes in behaviors regarding education, self-employment and employability. | X | | | | | |
| ECUADOR | The increase in self-confidence and technical capacities of refugees through fairs, business advice and cash transfers has improved their economic and social integration into host communities by increasing host community perceptions of refugees and migrants as contributing positively to the local economy. | X | | | | | |
| ECUADOR | A culture of saving has been instilled through the creation of savings banks and access to microcredit for migrants and host communities | X | | | | | |
| UGANDA | Communities' appreciate women's role and involvement in financing enterprises. | X | | | | | |

⁴⁶ Please note the complete and more detailed outcomes can be found in the individual Country evaluation reports

| | | | | | | | |
|----------|--|---|---|--|---|--|--|
| UGANDA | Women now occupied political leadership positions as councilors, Chairpersons , MPs. | X | | | | | |
| ETHIOPIA | The Ministry of Women and Social Affairs staff are more aware of social and gender norms and taking practical steps to challenge harmful norms after a series of (SAA) discussions by CARE Ethiopia where TOTs were provided and cascaded. As ministry staff who work for the rights and opportunities of women, understanding how gender norms affect their lives and their work improves the outcome of their work as a ministry. | X | | | | | |
| NEPAL | The women and marginalized group of people associated in NFGF and NLRF ward level group and network have better stake in HHs and community level planning and decision making forum; play meaningful role in the decision making process due to change in power relation. The proven models like Farmers ID Cards, Leasehold Farming, IVR, Agro-met Advisory Services and Community Based Land Management has initiated to transform existing GESI norms and practices in land and agriculture sectors. They also have better access to government services and resources. | X | | | | | |
| UGANDA | In July 2021, the Ministry of Finance involved SHGs and VSLAs actors in the drafting of the new draft savings group policy framework (at draft stage). This has created a more enabling legal and regulatory environment for the savings ecosystems in Uganda. Specifically, the program used the evidence it generated for policy engagement, particularly to develop the Saving groups policy framework that is at the draft stage under the Ministry of Finance and the Self-help group operational guidelines at the issuance stage the Microfinance regulatory authority (UMRA). CARE also improved coordination and cooperation among stakeholders in the Ugandan savings groups industry, supporting policy dialogues | | x | | x | | |
| ECUADOR | The capacity of public officials who work with migrant and refugee populations has been built to increase their understanding of protection, which has resulted in an increase in the prevention and treatment of cases of violation of the rights of migrants and refugees, and coordinated strategies to support this. | | x | | | | |
| ECUADOR | Health centers are willing and able to provide services to migrants. | | x | | | | |

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| | Strengthening access to health services of better quality has made it possible to service significant numbers of migrants and refugees. | | | | | | |
| ECUADOR | Medical personnel have strengthened capacities to ensure a rights-based approach to care, including for pregnant women, infants, people with sexually transmitted diseases, including migrants and LGBTI people. | | X | | | | |
| ECUADOR | Health centers and laboratories have tests for adolescents and migrants for HIV and antigens. | | X | | | | |
| ECUADOR | COOPI technical staff have been trained on protection of the rights of migrant children and gender-based violence (GBV). Services have been strengthened to facilitate migrant children to acquire identity cards; COOPI has also provided its users with information on routes of prevention, care and reparation of gender-based violence. | | X | | | | |
| ETHIOPIA | The revised Levelling tool is actively utilized and used as a key tool to grade other line ministries on their work in gender. The tool allows MOWSA to exercise its mandate of holding other line ministries accountable on gender transformative outcomes. Originally created in collaboration with UN Women, CARE Ethiopia conducted the revision of the tool which is in use today. | | X | | | | |
| ETHIOPIA | The human resources functions and information system of the Ministry of Women and Social Affairs has improved to better suit the needs of employees and to collect and store data more efficiently. The ministry is now aware of its staffing and procedural needs and has tested the HRIS system. The HR review and trainings for the human resources unit by CARE Ethiopia informed the development of a draft HR strategy and initiation of the HRIS system. | | X | | | | |
| ETHIOPIA | Gender Responsive Budgeting (GRB) is now an indicator in the Levelling tool and has potential to influence the Ministry of Finance's GRB guide. This ensures that line ministries' budgets plan expenditure allocation in a way that the budget reflects the gender differentiated needs. The GRB study by CARE Ethiopia and its integration in the Levelling tool review has contributed to this initiative. | | X | | | | |
| NEPAL | Local government delivers quality services related to land, agriculture, climate change and food security incorporating NFGF, NLRF, CSRC and other | | X | | | | |

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| | CSO partners and citizens demands in their local plan, policy formulation and implementation process. | | | | | | |
| UGANDA | Improved understanding of how women savings and loan practices respond to pandemics like COVID will inform policy and government future planning. | | X | | | | |
| UGANDA | COVID recovery fund under the PSF now exists and the UWEP was extended. | | X | | | | |
| UGANDA | Between 2020 and 2021 Microfinance regulatory authority (UMRA) self-help group (SHG) operational guidelines (at issuance stage). This has created a more enabling legal and regulatory environment for the savings ecosystems in Uganda, increased recognition of VSLAs and SHGs meaning that they are able to attract funding. | | X | | | | |
| UGANDA | The Uganda Women Entrepreneurship Programme (UWEP) has improved research, monitoring, and implementation capacities--among both participating CDOs and for government staff. | | X | | | | |
| UGANDA | A new digital one-stop information center and grants management information system (MIS) has been developed and implemented for UWEP. With the roll-out of the Parish Development Model (PDM), this automated system implemented right from the parish level will ease data collection and provide the government with accurate information as well as the methodology for cataloguing the PDM data. | | X | | | | |
| ECUADOR | Local markets have been stimulated through monetary transfers to qualified hotels and inns to provide a maximum of four days' bed and board for referred clients, contributing to the economic reactivation of the accommodation and food sector, particularly after the impact of COVID-19. | | | X | | | |
| ECUDAOR | Pharmacists have been sensitized through information and inductions to deliver medicine to migrants following a case management analysis and assessing medical treatment needs. | | | X | | | |
| UGANDA | There is increased appreciation by government on the use of savings groups as an entry point in the communities. | | | X | | | |
| UGANDA | Financial institutions, including the, commercial banks and micro-finance institution (MFIs), have increased the range of banking services they provide to women, including digital wallets. There is increased trust by financial institutions in working with women even without collateral, increasing their access to financial services. In addition, the initiative has facilitated women | | x | | | | |

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| | transition from participating in VSLAs to making savings and making investments, supporting the development of small and medium sized enterprises. | | | | | |
| ETHIOPIA | Since 2021, the Ministry of Women and Social Affairs is in the process of drafting a National Gender Policy, thirty years after the first National Policy on Ethiopian Women's (NPEW) in 1993. This revised policy will address the gaps on the existing policy to ensure it answers to the issues of women today. | | | X | | |
| ETHIOPIA | The Women's Directorate of the Ministry of Women and Social Affairs has started to adopt the gender transformative approach as a shift from the previous approaches of 'women in development' and being clearer about what is meant by these words and more ambitious about its remit. The gender transformative approach aims to address the root causes of gender inequality rather than the symptoms. | | | X | | |
| ECUADOR | Social movements and organizations have been strengthened and connected to advocate for local and national policies and regulations that improve the rights of migrants. | | | | X | |
| ECUADOR | The Transgender Project, a project partner, has advanced legislative reform proposals aimed at strengthening the 2016 law recognizing diverse gender for Ecuadorians to include recognition of identity rights for trans migrants and other people identifying as non-binary. Also, new articles have been proposed to include the rights of trans migrants in the Human Mobility Law, in order to recognize their gender identity. | | | | X | |
| ECUADOR | CARE, together with its partner Fundación Alas de Colibrí, has successfully transferred approaches, methodologies and advocacy experiences in public policies to strengthen prevention of gender-based violence, human trafficking, and improve sexual and reproductive health and child protection for migrant and refugee populations. These themes are included in the Cross-Border Agenda that includes the territories of the province of Carchi in Ecuador and the Department of Nariño in Colombia. | | | | X | |
| ECUADOR | The "women's therapeutic circles" approach increased the capacity of migrant and refugee women to process their suffering caused by various types of violence and migration. The "leaders in emergency" methodology | | | | x | |

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| | trained community leaders who are survivors of GBV to participate in the formulation of the Cross-Border Agenda. | | | | | |
| ECUADOR | The capacities of Plataforma Latinoamericana de Personas que ejercito el Trabajo Sexual, PLAPTERS, were strengthened to analyze the needs of sex workers and advocate for local policies for the prevention of gender-based violence. The organizational strengthening used a Rapid Gender Analysis (ARG) to measure specific problems of the migrant population and sex workers (2018), and migrant women and the LGBTI population (2022). Another study on sex workers is planned. | | | | X | |
| ExCUADOR | The organizational and intervention capacity of the Mujer & Mujer Foundation, a lesbian feminist organization, has been strengthened to increase access for LBQ+ women who have experience GBV to health services, emergency accommodation, and livelihoods. | | | | X | |
| ECUADOR | RODDNA conducted a 2020 consultation of 20,000 children and adolescents which supported their advocacy and inclusion in the reforms to the Organic Code for the Integral Protection of Children and Adolescents (COPINNA), including demands to improve health, education, sex education, and protection for young people. | | | | X | |
| ECUADOR | The Alianza Migrante (Migrant Alliance) was established in 2021, an alliance of 35 organizations that work with Venezuelan, Colombian, Ecuadorian migrants. The Alliance has reviewed limitations and unconstitutionalities of the Regulations of the Human Mobility Law; produced a gap analysis and proposals on the Regularization Decree recently established by the government; prepared reports on the refugee and migrant situation in Ecuador (2019) for the IACHR and the United Nations Human Rights Rapporteurship; and participated in the UN Global Migration Review Forum, 2022 to review progress and compliance with 23 established objectives. | | | | X | |
| NEPAL | The NFGF was strengthened to expand its outreach from 48 to 63 districts and the NLRF from 53 to 60 districts, aligning with new federal structure. This has support to increase their constituency for advancing their movement on land and agriculture. This has also facilitated promoting their legacy, recognition, participation among allies and policy makers. | | | | X | |

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| NEPAL | Land-less people are organized in the groups and its network, mobilize to claim their land rights, and succeed to receive land certificates from the government | | | | X | |
| NEPAL | Farmers' groups and their networks have better institutional capacity and are mobilized to claim their constitutional rights on food and its sovereignty and were successful to receive subsidized production input, access to production land and water and agriculture insurance product. | | | | X | |
| NEPAL | A4. NLRF and NFGF have improved management, institutional governance, legitimacy and accountability systems to ensure inclusive and diverse/meaningful representation at their all-level structure and are accountable to their constituencies and related stakeholders. | | | | X | |
| NEPAL | A5: NLRF and NFGF have increased capacities in programmatic area (strategic planning, policy analysis, model policy formulations and advocacy and influence, gender, social inclusion and diversity, Campaign management) and technical area (agriculture, livelihoods, climate change adaption measures, KM & MEL proceedings). | | | | X | |
| UGANDA | Women's Economic Collectives (WECs) have become better understood, more empowered, better networked, and better able to take collective action on women's economic empowerment. This has supported movement building and group solidarity and has guided government investment and national planning. In addition, over the course of five months this synergy has grown to a level that all members share respective activity work plans to harmonize implementation plans and avoid duplication, they also share best practice and lessons learnt and cross cutting support on WEE coordination events. | | | | X | |
| NEPAL | NLRF, CSRC and NFGF strengthened policies and budgets, in three tiers of the government including local levels, related to land, agriculture, climate change and food security in Nepal through developing clear advocacy agendas (Policy brief, model act) and pursuing collective actions by their structure of different level by applying Insider and outsider advocacy approach to incorporate the priorities landless and marginalized communities (alliance and coalition building, campaign, mass gathering, lobby, dialogue meeting with parliamentary members, women | | | | X | |

| | | | | | | |
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| | empowerment in agriculture (contribution in decision making process at family and community, dignity at family level). | | | | | |
| NEPAL | Local government jointly with CSOs partners co-create (joint planning, piloting and proof of concept) and scale up climate resilient land and agriculture practices and plans taking into account in-building in their periodic plan, policy and program. | | | | | X |
| NEPAL | Small land holder farmers are adopting climate resilient land and agriculture models and Climate Smart Agricultural (CSA) practices in subsistence, nutritional gardening, lease-hold and semi-commercial farming. in subsistence, nutritional gardening lease hold and semi-commercial farming. | | | | | X |
| NEPAL | Four targeted local governments (Belaka, Siddicharan, Sakhuwnankar katti, Bhagawanpur) have adopted the categorization-based ID cards model piloted/demonstrated by National Farmers Groups Federation (NFGF) and CARE Nepal. Farmers have received categorization-based ID cards, and production inputs based on the FID card category. | | | | | X |
| UGANDA | In 2021, Government of Uganda (GoU) adopted WECs in the country to serve as a platform for the Parish Development Model. | | | | | X |

Annex D: Terms of Reference for systems-level evaluation

Evaluating Systems and Structural Change and Impact for the [add PROGRAM/PROJECT NAME]

Terms of Reference (ToR) for Evaluation consultant

Background

In 2020, CARE announced a new, ten-year organizational [Vision 2030](#), and in 2021, CARE USA launched a new four-year strategy. Central to this strategy is to increase CARE's systems-level impact. Working at the systems-level goes beyond the individual level, to influence catalytic change through societal, civil society, policy and private sector levers. CARE conceptualizes systems-level impact as the changes people experience in their lives because of systems and structures that work better with and for them. We achieve systems-level impact through the following CARE "pathways to scale": 1) supporting and advancing social norms change; 2) system strengthening; 3) social accountability; 4) social movements; 5) inclusive market-based approaches; and 6) advocacy for policy change.

The above approaches or pathways change systems and structures and in turn this improves the lives of individuals and communities. Across its work, CARE focuses on directly impacting the lives of people across six different domains (or 'impact areas') – 1) gender equality, 2) right to health, 3) right to food, water, and nutrition, 4) climate justice, 5) women's economic justice and 6) humanitarian response.

In Year 1 of its new strategic initiative, CARE USA is working to develop a deeper understanding of whether and how CARE's programming influenced or changed systems and structures, based on the pathways above. CARE also seeks to explore the influence of this systems change on people's lives in at least one of CARE's impact areas. This will help us to understand how we are doing as an organization on delivering systems-level change and impact.

To achieve this, CARE is conducting a multi-country evaluation of programs designed to effect systems or structural level change in Ecuador, Ethiopia, Nepal, and Uganda. This initiative is grounded in a participatory approach with the CARE Country Office and will also increase capacity across the CARE confederation to design, fund, and implement strategies for high-quality programs to influence and advance systems change.

This ToR/scope of work is for a consultant to support CARE [add Country] in finalizing the design and implementation of an evaluation of the systems-level change within [add program/project name]. The evaluation will focus on assessing the systems and structural changes of this program/project and how those changes result in individual- and/or community-level impact. The evaluation will commence immediately and will complete data collection and analysis by June 30, 2022.

Description of program being evaluated

Add program description here. Include:

- Overview of program – donor; years implemented; where; partners, participant groups, and other stakeholders
- Description of the program theory of change, if applicable
- Description of what systems pathways (see above) were part of the program and what systems or structural changes were envisioned or planned. Please clarify if the

program/project only used one pathway or implemented multiple systems-level pathways concurrently

- *Description of the impact groups and the intended impact at the individual or community level as a result of the planned or envisioned structural and systems changes*

Evaluation scope

The evaluation aim is to determine the systems and structural changes achieved by the selected program/project. The evaluation will systematically measure the effect of this program on systems and structures and the impact that effect has on people's lives. In addition, it is important to have insight into the sustainability of that effect and impact.

The evaluation will ideally focus on one project or program. While CARE offices may choose to embed this evaluation within a larger project/project evaluation, if relevant, the focus of this evaluation will be specifically on the systems-level components and their impact.

Evaluation questions

The primary questions of this system-level evaluation are:

| QUESTION | METHOD |
|--|---|
| Process: <ul style="list-style-type: none"> • What did the program do and how were the systems-level pathways integrated? • What were the implementation successes and challenges? • What adaptations were made? Why? | Desk review Key informant interviews with implementers |
| Systems and structural change: <ul style="list-style-type: none"> • What systems and structural changes were achieved or not achieved, including unexpected changes? • How were those changes achieved? | Outcome harvest * may include conducting focus group discussion or key informant interviews |
| Impact: <ul style="list-style-type: none"> • How did or will those systems-level changes result in individual- and/or community-level impact? | Review of secondary data Key informant interviews and/or Focus group discussion with program stakeholders and participants |
| Sustainability, if possible <ul style="list-style-type: none"> • How sustainable was the systems-level effect? • How sustainable was the community- or individual-level impact? | Key informant interviews with implementers with implementers, program stakeholders and participants |

Systems and structural change will be assessed using the outcome harvesting method with program implementers, partners, participants, and stakeholders. Program data and documentation will be the primary source of data for this evaluation. Program data and documentation will be complemented with available secondary data relevant to understanding individual- and community-level impact (e.g., DHS, MCIS, government data, etc.) and with primary qualitative data collected through focus group discussions or key informant interview. Additional qualitative data collection will be used to understand the dynamics of systems and structural change and how they lead to individual- and community-level change. A sequenced process will be used during the outcome harvesting so the systems and structural level change are explored first, and then the individual-and community-level change. This data will also be used to explain and substantiate harvested outcomes.

This activity will be undertaken closely with CARE Offices, who will be active participants throughout the process, and who will also provide the evaluators with initial inputs on the program implementers' perceptions of the systems-level changes as a result of this project/program, suggested stakeholders to interview and secondary data sources for exploring individual impact.

Timeline

| Activity | Timeline |
|--|-----------------|
| Kick-off meeting | By May 13 |
| Inception report | May 16 9am EST |
| Outcome Harvest Step 1 – design workshop | May 20 |
| Finalize data collection tools for qualitative data collection | June 1 |
| Collect qualitative data <i>*might be in two phases after Step 1 & after Step 3/4 – to substantiate</i> | Ongoing |
| Collate program data and documentation and secondary data | Ongoing |
| Data analysis | Ongoing |
| Outcome Harvest Step 3 – outcome formulation workshop | June 8-10 |
| Outcome Harvest Step 4 – outcome substantiation <i>*can be in a workshop format or through individual / group interviews</i> | June 13-24 |
| Validation workshop with key stakeholders | June 20 |
| Finalize analysis and prepare draft report | June 27 |

Deliverables

1. Inception report—no more than 15 pages
2. Desk review—no more than 20 pages
3. Workshop reports for outcome harvest (Step 1, Step 3, Step 4)—no more than 10 pages
4. Data collection tools and protocol, as relevant
5. Presentation for validation workshop
6. Draft study report—no more than 30 pages

Timeline and LOE

We estimate that the assignment will take [xx] days to complete. The assignment will commence immediately and be completed by June 30, 2022. Please note that all expenditure related to this assignment must be spent by this completion date.

Expressions of interest

[add details]