

Program Principles Analysis PRNA Tool #3

Introduction

This is another way to look at how our programs are addressing gender and sexuality inequities. Some reproductive health or HIV programs actually reinforce gender and sexual stereotypes that are disempowering, while others empower individuals and systems to ensure that everyone has equal opportunities and rights. Like the gender continuum exercise, this exercise helps define a continuum of program approaches, using CARE International's Programming Principles to measure progress. This exercise puts CARE's principles into concrete terms, and helps staff visualize how project interventions would change if gender or sexuality inequities were addressed. One of the assumptions of this exercise is that we have the capacity to be self-critical, to acknowledge limitations of past strategies, and to see opportunities to move forward in the future.

Objectives

- To help staff understand the relevance of CARE International's Programming Principles to gender and sexuality.
- To help staff critically analyze their own reproductive health and HIV program approaches.

Timeframe: 3-4 hours

Materials needed: Photocopies of the Programming Principles handouts (all seven pages) and worksheet for each participant; flipchart paper, pens and markers.

Ideal workspace: All participants must be able to see the flip charts, and be able to move about the room freely.

Number of participants: 4-25. The exercise is carried out in smaller groups of up to 5 people each, and each small group is asked to analyze where their own programs fall on the CI Programming Principles scale.



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STEP 1

Introduce the exercise by explaining the objectives, and how much time you expect it will take.

Distribute copies of the CARE International Programming Principles document (all seven pages).

Read through the six CARE International Programming Principles. Ask questions to make sure that everyone understands them.

Distribute copies of the CI Programming Principles worksheet. Do one example as a large group to show people how to use the worksheet.

Instruct participants to discuss the extent to which their project or sector follows the CARE International Programming Principles. Give the groups 1-2 hours to discuss, and tell them that they will present their findings back to the larger group.

When they have finished, ask each small group to present their findings to the larger group, including why they chose to position their project on the levels that they did. the level on each scale.

Facilitate a group discussion about the exercise, asking:

- What do you think about the other groups' results?
- Do you have any comments on the process of the exercise? Did anything surprise you?
- How was this exercise useful in exploring possible range of programming approaches to social justice related to gender and sexuality?
- What could we do to improve our programming approaches? What would help us make these changes? What might stop us from making these changes?
- What are your concerns or thoughts about these potential changes?

Notes to the Facilitator

If the group is bigger than 5 people, form smaller groups of about 4-5 people each. If possible, form the groups so that everyone in a group has a similar level of familiarity with a particular project. It is preferable to form small groups to discuss one project in depth rather than try to analyze several different projects.

Gender & Sexuality scales have been developed for three of the six principles and are included in this toolkit. The remaining three principles are presented in their original form.

CARE International Programming Principles - overview

Principle 1: Promote Empowerment

We stand in solidarity with poor and marginalized people, and support their efforts to take control of their own lives and fulfill their rights, responsibilities and aspirations. We ensure that key participants and organizations representing affected people are partners in the design, implementation, monitoring and evaluation of our programs.

Principle 2: Work with Partners

We work with others to maximize the impact of our programs, building alliances and partnerships with those who offer complementary approaches, are able to adopt effective programming approaches on a larger scale, and/or who have responsibility to fulfill rights and reduce poverty through policy change and enforcement.

Principle 3: Ensure Accountability and Promote Responsibility

We seek ways to be held accountable to poor and marginalized people whose rights are denied. We identify individuals and institutions that have an obligation toward poor and marginalized people, and support and encourage their efforts to fulfill their responsibilities.

Principle 4: Address Discrimination

In our programs and offices we address discrimination and the denial of rights based on sex, race, nationality, ethnicity, class, religion, age, physical ability, caste, opinion or sexual orientation.

Principle 5: Promote the Non-Violent Resolution of Conflicts

We promote just and non-violent means for preventing and resolving conflicts at all levels, noting that such conflicts contribute to poverty and the denial of rights.

Principle 6: Seek Sustainable Results

As we address underlying causes of poverty and discrimination, we develop and use approaches that ensure our programs result in lasting and fundamental improvements in the lives of the poor and marginalized with whom we work.

CI Programming Principles Scales: How are we doing?

Principle 1: Promote Empowerment: We stand in solidarity with poor and marginalized people, and support their efforts to take control of their own lives and fulfill their rights, responsibilities and aspirations. We ensure that key participants and organizations representing affected people are partners in the design, implementation, monitoring and evaluation of our programs.

Promoting Gender & Sexuality Empowerment Programming Scale:

Worry	Symbolic	Basic	Considerable	Strong
<p>We work for the poor and marginalized. We deliver professional help because they lack the skills and expertise.</p> <p>By helping them with our technical know how, their conditions will improve. Hopefully, this will help them to take control over their own lives later on. We are not yet thinking about how power imbalances related to gender and sexuality are affecting our program participants.</p> <p>We know that many of the people that CARE's programs serve are poor and marginalized but we have done no analysis of vulnerability specific to either gender or sexuality. But by delivering technically sound programs to them, we believe that our programs help them.</p> <p>We let project participants know about our activities if they need to know.</p>	<p>We work for the poor and marginalized, but try to involve them in our development programs by giving them tasks and responsibilities. When we make a diagnostic study, we listen to vulnerable women or people experiencing sexual vulnerability to know what they think the problem is. We work for them as professionally as we can, knowing that even an expert sometimes should listen to the one she helps, like a doctor to her patient.</p> <p>Besides delivering the quality services they need, we often speak in general terms on their behalf to other stakeholders.</p> <p>We inform our project participants – both men and women – in general terms about the program goals and objectives. On some operational issues, we occasionally ask their advice.</p>	<p>Empowerment is important, because if we don't involve people, the project won't be sustainable. We ask for their opinion about our project and take that into account, as long as no serious change is required.</p> <p>We consult them throughout the process, from the diagnosis, during the implementation, to the evaluation. To the extent possible they can share responsibilities with us, so that they can learn for when we won't be around anymore.</p> <p>As professionals, we help advocate on behalf of women and for sexual rights, when taking a position does not seem to have negative consequences for us.</p>	<p>Empowering the people with whom we work is a key objective. We equip them with competencies and the conviction that they can influence certain factors that affect their lives.</p> <p>The poor and marginalized are our partners. Their concerns are ours. The way they perceive their own situation in terms of condition, position, causes and solutions is key for us. We discuss these and our own views and try to develop a shared strategy to improve their conditions and position. The focus on delivery of services by CARE is only one element of our strategy. We defend their rights. In case their rights are threatened by supporters of ours, we try to find a compromise.</p> <p>Women, especially marginalized women and sexual minorities, are part of the decision-making from start to finish. To the extent their opinion sounds technically correct and stays in line with donor requirements, we go along with it. However, we are also accountable to donor requirements.</p>	<p>CARE's health programs actively promote sexual rights of all, but especially those who are marginalized in society, including the right of all persons to the highest attainable standard of sexual and reproductive health, including access to sexual and reproductive health care services, information and education.</p> <p>We build partnerships with organizations that are working to promote the rights of vulnerable groups, including women, sex workers, PLWHA, addicts, youth, sexual minorities, etc. to improve health service delivery for these groups. We build bridges and facilitate dialogue between health and social service sector groups and advocacy groups so that vulnerable groups are advocating for their own rights and health needs.</p> <p>CARE's programs actively address cultural and societal norms related to choice of sexual partner, consensual marriage, whether or not all members of society have the right to decide whether or not to have children and pursue a satisfying, safe and pleasureable sex life, (taking into account that the responsible exercise of these human rights requires that all people respect the rights of others).</p> <p>CARE's health programs work in partnership with advocacy groups to promote inclusive sexual and reproductive laws and policies, making sure that the voices of poor and marginalized are key stakeholders in shaping how laws and policies are written and enacted.</p>

CI Programming Principles Scales: How are we doing?

Principle 2: Work with partners: We work with others to maximize the impact of our programs, building alliances and partnerships with those who offer complementary approaches, are able to adopt effective programming approaches on a larger scale, and/or who have responsibility to fulfill rights and reduce poverty through policy change and enforcement.

Worry	Symbolic	Basic	Considerable	Strong
<p>The others are our colleagues but are also competitors. Obviously we won't do anything to make their work more difficult, but working together makes sense in special occasions.</p> <p>If everybody does a good job, all are served.</p>	<p>Partnership is a principle for us. It is referred to in our mission.</p> <p>We need to know what others do to be complementary; duplicating work makes no sense.</p>	<p>We want to work with others to achieve things we cannot achieve on our own.</p> <p>Partnerships may not mean that others determine what we do. We need to decide fully about our parts and get credit for what we do. Others can win as well, but it can't be that another partner gets the prestige or funding instead of us. At least we need to see a break even: the other may score now if we can score tomorrow.</p>	<p>We believe in long lasting relationships with other organizations with whom we share information and plans. Besides that, we develop a common agenda with our partners that relates to issues of interest to all. We dedicate significant resources to these partnerships.</p> <p>We are a loyal partner and aren't really concerned about the relative benefit different partners get from the partnerships we are involved in. What counts is to move forward the common agenda we adhere to.</p>	<p>We share and plan major issues with others, even if they won't be involved in the implementation. We also contribute to other's processes if we are invited. We are convinced we have to elaborate with partners on our common strategic goals that would contribute to the social change we envision.</p> <p>We want to be considered a partner of choice as we actively search to let the sun shine on all. The achievement of the strategic goal is most important. In the long term, the others know that they can count on us.</p> <p>We oblige ourselves to be creative in our search for shared strategies to achieve the important results we cannot reach alone. For example, we can plan an advocacy strategy with another organization in which one of the two takes a hard stance and the other a softer one; both parties may consider the softer stance achievable and relevant, but it never could be considered as an acceptable compromise if the radical position did not exist.</p>

CI Programming Principles Scales: How are we doing?

Principle 3: Ensure Accountability and Promote Responsibility: We seek ways to be held accountable to poor and marginalized people whose rights are denied. We identify individuals and institutions that have an obligation toward poor and marginalized people, and support and encourage their efforts to fulfill their responsibilities.

Worry	Symbolic	Basic	Considerable	Strong
<p>We do what we can to alleviate the suffering of the poor and marginalized with the resources we can get. What others do is their business.</p> <p>Who are we or who are the poor to hold others accountable?</p>	<p>We are convinced development would go much faster if other stakeholders would contribute more.</p> <p>We speak in general terms about the need for more generosity from the North and more goodwill from the South.</p> <p>We formulate a general demand, but don't talk in terms of responsibilities, because we aren't a political organization.</p>	<p>Sometimes, situations can be so hard and responsibilities so clear that we speak out and claim certain actors to take up responsibilities and improve the condition of the poor in certain aspects or by taking certain decisions.</p> <p>We make a stand, when the time is ripe for it and nobody will deny we're right. In the meantime we join coalitions that strive for a smooth change in benefit of the poor.</p>	<p>We try to be as principled as we can, by defining actors and responsibilities. To the extent we have reason to believe we can influence them somehow and the risks involved for us aren't too big, we make claims.</p> <p>We are principled diplomats for pro-rights policies. We try to get our message across even to actors who prefer not to hear the message. However we do so smoothly in order not to burn any bridges.</p>	<p>We have principles and we abide by them, even if others might not be convinced of what we say or oppose it because what we claim is against their interest. We develop a broader vision than just an issue-by-issue one.</p> <p>It's a role for NGOs like CARE to make things possible that don't seem possible yet. We make the time ripe if needed. We are not afraid of losing a mayor donor's support because of that. Our principles don't allow us to shut up and nod to someone just because we want his money to do something that does not affect the root of the problem.</p>

CI Programming Principles Scales: How are we doing?

Principle 4: Address Discrimination: In our programs and offices we address discrimination and the denial of rights based on sex, race, nationality, ethnicity, class, religion, age, physical ability, caste, opinion or sexual orientation.

Addressing Gender & Sexuality Discrimination Programming Scale:

Worry	Symbolic	Basic	Considerable	Strong
<p>CARE's health programs provide support for high quality technical health interventions for the target population. The interventions are designed for a target population that is assumed to have the same experience of good or bad health as the average adult heterosexual male of the dominant ethnic or caste group. The health programs are expected to improve the knowledge, attitudes and behaviors of the target population.</p> <p>We know that CARE has an interest in gender issues, and that gender issues can be related to poverty or discrimination. Sexuality is considered to be an issue that is unrelated to development.</p> <p>We fulfill legal obligations as health programmers, making sure that CARE's programs don't violate national policy related to sexuality or gender.</p>	<p>We try to keep the needs of special target populations in mind as we develop our health service delivery models, including youth, disabled people, and some ethnic or caste minorities. We do literature reviews on these subjects so that we are better informed of their needs.</p> <p>We try to keep gender or sexual minority discrimination in mind as we enact our program's activities because it's our program principle. We develop a poster that states that CARE does not discriminate against women or sexual minorities. We appoint a gender "point person" but give them so many other responsibilities that they don't have time to work on gender discrimination issues in the workplace or in the programs.</p> <p>On an ad-hoc basis, we discover various laws and policies that restrict health service providers' capacity to provide high quality services and programs to minority groups (for example, to provide contraception to unmarried youth).</p>	<p>We train service providers in how to provide appropriate sexual and reproductive health services for people outside the "mainstream" of society, including unmarried youth, sex workers, PLWHA, drug users, sexual minorities, and the elderly.</p> <p>In order to develop high-quality curricula for training the health care providers, we work with a social scientist researcher to investigate the needs of these groups.</p> <p>By hiring and consulting special consultants who are experts, we explore the experience of women and sexual minorities in CARE's work and workplace, and develop general guidelines that help us question our own discriminatory practices.</p> <p>We build "policy analysis" activities into our health programs, so that we are aware of the limitations of our current laws and policies for minority groups as we enact our programs.</p>	<p>We work with local groups advocating for improved sexual and reproductive rights of unmarried youth, sex workers, PLWHA, drug users, sexual minorities, and the elderly, so that the dialogue informs our work to provide high quality services. We work to improve the number of unmarried youth, sex workers, PLWHA, drug users, sexual minorities, or the elderly who provide health services to their peers.</p> <p>Both our programs and workplace policies pay special attention to achieving equity for women and sexual minorities.</p> <p>When we design and evaluate programs and workplace policies, we make specific and precise analysis in terms of discrimination, through social science research or with advice from local members of groups advocating for the rights of women or sexual minorities.</p> <p>Our programs address empowerment for women and sexual minorities as far as our programs have the flexibility to do so.</p> <p>We train law-makers on the needs of minority populations with regard to sexual and reproductive health.</p>	<p>CARE facilitates health service delivery for "minority groups" by members of their own group, in a way that the group decides is most appropriate.</p> <p>Those facing gender or sexual discrimination are hired as CARE staff, and are not just represented throughout CARE's programs, but are leading CARE's efforts to mobilize societal change.</p> <p>Because their struggle is our struggle, our programs work to ensure equal access, support and equal rights for both women and men, and for all minority groups experiencing discrimination. CARE's programs actively challenge societal stereotypes and discrimination through non-violent methods of collective action.</p> <p>We are full partners with local groups that represent women's or sexual minorities' concerns, and advocate for equal rights in local, district or national laws and policies.</p>

CI Programming Principles Scales: How are we doing?

Principle 5: Promote the non-violent resolution of conflicts: We promote just and non-violent means for preventing and resolving conflicts at all levels, noting that such conflicts contribute to poverty and the denial of rights.

Promoting Gender and Sexuality Nonviolence Programming Scale:

Worry	Symbolic	Basic	Considerable	Strong
<p>We apply technical solutions to sexual and reproductive health programs. We assume that most people in society do not experience sexual or gender-based violence, so we focus on health problems unrelated to violence.</p> <p>We don't have adequate support systems in place to prevent violence or manage support to those who are experiencing violence, so our programs don't directly address these problems.</p> <p>We operate in the dark when it comes to policies related to rights of body integrity and its violation by violence.</p> <p>For programs operating in the context of civil war, our sexual and reproductive health programs remain "neutral" and we don't get involved in the political discourse of the war or the reasons for it.</p>	<p>We conduct literature reviews on prevalence and nature of sexual and gender-based violence in our program area, and use this information to inform our program designs for service interventions. We deal with cases of survivors of domestic or other gender-based violence on an ad-hoc basis, scrambling to find adequate places to refer for social, legal, judicial or protective services as the individual appears to need it.</p> <p>Key program staff are trained in the basics of preventing and managing issues related to domestic or other forms of gender and sexual violence.</p> <p>Staff are aware of policy issues related to domestic or other forms of gender and sexual-based violence, such as who has rights to services and protection, and who does not, under the current laws, as they relate to service provision.</p> <p>In situations where civil conflict may erupt, we train key staff in the principles of "Do No Harm" to make sure that our programs are not contributing to the anger over exclusion issues related to services, programs or benefits and thus contributing to the escalation of violence between armed groups.</p>	<p>We provide or facilitate basic health and social services for survivors of violence.</p> <p>We facilitate research on the nature or levels of domestic, structural, or systemic violence based on gender or sexuality. We share the results with stakeholders. We do a scan of available capacity for services and supports for survivors of violence by talking with any NGO or government service or local governance structures that help to manage the results of violence, and to prevent it, if at all possible.</p> <p>We undertake a "policy scan" with regard to legal supports in place (or not) for survivors of violence. We share this with partners and other stakeholders.</p> <p>In situations where civil conflict may erupt, all staff are trained and skilled in "Do No Harm" principles."</p>	<p>We explore how our program participants are experiencing sexual violence or gender-based violence as an unintended outcome of our interventions, through focused qualitative interviews and other routine monitoring.</p> <p>We facilitate training to health staff to recognize signs of inter-personal violence, how to ask respectful questions, and how to intervene appropriately.</p> <p>We have developed close professional relationships with local people or groups who are interested in diminishing the levels of domestic and gender-based violence and the social norms that perpetuate it.</p> <p>We develop coalitions of groups and agencies that aim to address societal change with regard to acceptance of violence as a norm.</p> <p>Our local partner agencies work with us to strengthen or change national laws related to domestic, systemic or structural gender-based violence.</p> <p>In situations where civil conflict may erupt, our programs actively analyze the political situation in relation to representation of and access to health programs for armed groups claiming to represent minorities.</p>	<p>Our health program staff and partners feel confident in their skills to address and prevent inter-personal violence that is sexual or based on gender. Our health programs address and refer survivors of violence to appropriate medical, legal, social service and judicial services and support.</p> <p>Our programs routinely address, prevent and monitor for levels of personal or structural violence based on gender or sexuality.</p> <p>In partnership with local non-violent activists, we seek creative, non-violent methods of achieving social justice solutions.</p> <p>We partner with local advocacy groups that also work to prevent and address sexual and gender-based violence in the home, community and society, working for long-term societal change.</p> <p>We advocate for inclusion, representation and voice in policy documents and actions.</p>

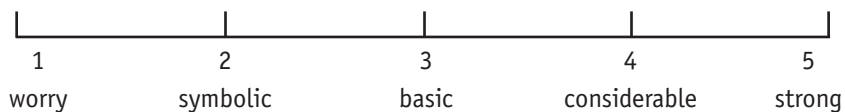
CI Programming Principles Scales: How are we doing?

Principle 6: Seek Sustainable Results: As we address underlying causes of poverty and discrimination, we develop and use approaches that ensure our programs result in lasting and fundamental improvements in the lives of the poor and marginalized with whom we work.

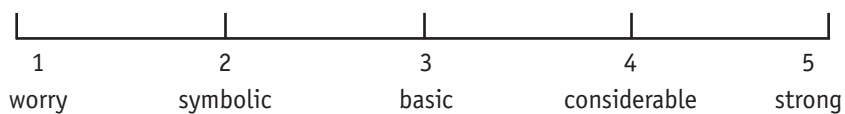
Worry	Symbolic	Basic	Considerable	Strong
<p>At most we can consider structural injustices as contextual factors. Being realistic, we assume they will continue to be part of the context in which we work. Therefore we can put them in the assumption column of our logical frameworks.</p> <p>We work for the poor and marginalized. They lack skills and expertise. By helping them with our technical knowledge, their conditions will improve and we will see immediate results.</p>	<p>We certainly need to know what's behind the problems we try to solve, but we focus on what we can do and what we are good at, and that's a technical issue. As far as the analysis helps us in directing our technical solution, we take that information into account. We are well-informed of deeper contextual issues at meetings, because we have read the textbooks and recent articles.</p> <p>We work for them as professionally as we can. But somehow we know that even an expert sometimes should listen to the one she helps, like a doctor to her patient.</p>	<p>In cases where the root of the problem is clear to almost everyone and there is support to go beyond the troubleshooting approach, we address the deeper causes particularly if these are located at micro level.</p> <p>We want to understand the world in which we work, we also want to change it as long as working on the causes does not imply a funding or security risk.</p> <p>We are working for the benefit of the poor, so we consult them throughout the process, from the diagnosis, to the implementation to the evaluation. To the extent possible, we share responsibilities with them, so that they can learn.</p>	<p>In some cases we dig deeper and make a strong technical case to address a root cause. We promote strategies that address root causes of interest to all stakeholders involved.</p> <p>The poor and marginalized we work with are part in the decision-making from start to finish. To the extent their opinion sounds technically correct and stays in line with donor-requirements we go along with it. We try to hand over different types of responsibilities gradually. We build capacity of marginalized groups with the conviction that they can influence factors that affect their lives.</p>	<p>It's our job to stand in solidarity with those who speak out about social, structural, and human condition injustice, even if some don't want to see or hear it. We make a technically strong case, but aren't afraid of making a principle stand.</p> <p>Along the principle that we don't back off just because of intimidation, we define strategies to resist intimidation and imminent danger by raising security or alternative strategies. If that is needed, CARE as a whole shares the cost.</p> <p>Leadership and decision-making is made at the local level by networks of marginalized groups working in solidarity. CARE is a partner.</p>

CI Programming Principles Worksheet

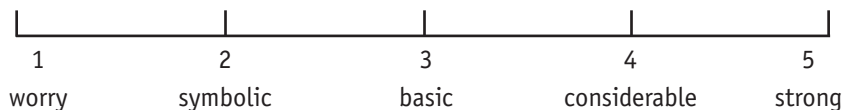
Principle 1: Promote Empowerment



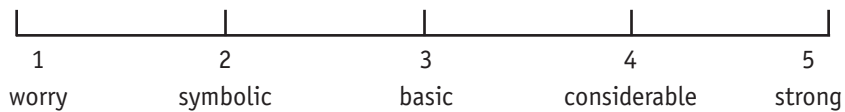
Principle 2: Work with Partners



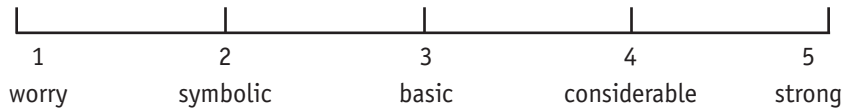
Principle 3: Ensure Accountability and Promote Responsibility



Principle 4: Address Discrimination



Principle 5: Promote the Non-Violent Resolution of Conflicts



Principle 6: Seek Sustainable Results

