



## CARE 2020 Program Strategy: The 25 Global Indicators for Measuring Change towards the CARE 2020 Program Strategy (Update - July 2017)

### Our commitments by 2020

We have committed to the following impact: ***By 2020, CARE and our partners will support 150 million people from the most vulnerable and excluded communities to overcome poverty and social injustice.***

We have also committed to these specific outcomes by 2020:

- 20 million people affected by humanitarian crises receive quality, life-saving humanitarian assistance.
- 100 million women and girls exercise their rights to sexual, reproductive and maternal health and a life free from violence.
- 50 million poor and vulnerable people increase their food and nutrition security and their resilience to climate change.
- 30 million women have greater access to and control over economic resources.

The Program Strategy also indicates that CARE will use three main roles for achieving these outcomes (humanitarian action, promoting lasting change and innovative solutions and multiplying impact) and three elements of “the CARE Approach” (gender equality and women’s voice, inclusive governance and resilience), which aim at addressing what we consider to be the main underlying causes of poverty, namely gender inequality, poor governance and risk.

### Why we need the global indicators

Our ability to measure progress towards our commitments and to explain how CARE contributes to lasting change has led to the establishment of a global evidence system. The core of this system is a **common set of 25 guiding indicators** applicable to CARE projects and initiatives worldwide, allowing for the collection and consolidation of coherent and comparable outcome and impact data.

The 25 global indicators have been selected in the light of the **Sustainable Development Goals** (SDGs) as in consideration of other elements like feasibility and relevance of measurement. They were initially proposed and crafted by technical teams working on the outcomes, approaches and roles, revised by CI Program Team, approved by the National Directors’ Committee in March 2016 and launched in June 2016. However, given that measuring change is a dynamic process and a learning experience for all CARE, this document is updated in July 2017 with support of the CI Monitoring and Evaluation group<sup>1</sup>, in order to continuously improve the way we define and operationalize the indicators.

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<sup>1</sup> The CI MEL group acts as a reference team to further advance improve and expand an interdependent MEL agenda for all CARE, and to facilitate learning and capacity building for a broader MEL network, including MEL and programs staff around the world. The group is composed of CARE staff who lead or are highly involved in the development and management of sector or outcome specific MEL systems and can consolidate a global MEL capacity for monitoring, reporting and leaning around the outcomes and approach of the CARE 2020 Program Strategy.

The menu of global indicators includes:

- **Outcome or impact indicators (indicators 1 to 18):** Projects/initiatives are expected to select and use **at least one** of these indicators, based on the relevance to their objectives and goals. These indicators are critical for CARE to explain the WHAT of the outcomes and impacts our work contributes to.
- **Approach and Role indicators (indicators 19 to 25):** All projects/initiatives are expected to use **as many of these indicators** as relevant to their objectives and goals. Given that these indicators focus on what we consider to be the main underlying causes of poverty (gender inequality, poor governance and risk) as well as on the critical roles for achieving impact and outcomes (humanitarian action, promoting innovative solutions and multiplying impact), these indicators are critical for CARE to explain HOW the outcomes and impacts come about and HOW CARE contributes to the achievement of those changes.

Importantly, information for all of the proposed indicators should be disaggregated primarily by sex, as well as by age, income quintile, and urban/rural (wherever possible and disaggregated data is available or can be gathered). This is critical for showing impacts on target groups, particularly **women and girls**. While the list of indicators may seem long, the proposed menu is a **significant improvement** from the current 'state of affairs'. For example, in FY14, FNS projects across CARE used more than 350 different indicators. By using fewer indicators consistently, CARE will be able to share its impact story and contribution to tackling poverty and inequality world-wide.

## What is expected from CARE International Members and Country Offices?

It is expected that all CI Members and Country Offices commit to the following:

- Incorporate the global indicators in proposals/new contracts (as appropriate and relevant) from 1 July, 2016 onwards: At least one relevant outcome indicator (indicators 1 to 18) and as many as possible from the indicators for the CARE approach and roles (indicators 19 to 25).
- In existing projects/programs/contracts, assess where indicators can be integrated in monitoring and evaluation plans. Please revise these plans accordingly and integrate indicators where possible.
- Include the proposed indicators in upcoming evaluations (from now onwards, wherever possible).
- Report data to the Project/Program Information and Impact Reporting System (PIIRS), every time an evaluative process takes place and a project or initiatives has collected and analyzed data on the indicators selected.

Regarding **CARE's outcome targets and their measurement**, a few important points:

- We need to distinguish between **impact/outcomes and reach**. Over the past three years, we have collected reach data through PIIRS. Not all people reached will have experienced a deeper impact. The proposed indicators seek to obtain outcome and impact information which will provide us with a clear picture, beyond reach, of CARE's contribution to fighting poverty and inequality. It is also critical to gain a better understanding of the interplay between reach and impact.
- The data on impact/outcomes is **cumulative** (over a 6-year period, from 1<sup>st</sup> July 2014 until 30 June 2020). We expect to have had an impact on 150 million people by 2020 and, more specifically, reached specific outcomes on SRMH and the right to a life free from violence, women's economic empowerment, food and nutrition security and resilience to climate change, and humanitarian.
- The outcome targets include our work with and through **partners**. CARE never works in isolation and the outcomes we seek will be the result of actions with others.
- Yearly in-depth **impact reports** will provide us with a deeper analysis of impact/outcomes. This year, we will complete and publish the SRMH and WEE impact reports, while in 2018 we aim to complete an FNS and resilience to climate change impact report.
- PIIRS has been expanded since the FY16 data collection process, and will continue to collect and report data on impact/outcomes and generate input for learning.

## The 25 Global Indicators for Measuring Change

*All indicators to be disaggregated by sex, age, type of organization (for gender equality, others), & marginalized group, where possible<sup>2</sup>.*

<b>Poverty and social injustice</b>	
<ol style="list-style-type: none"> <li>1. % of the population below the international poverty line (SDG indicator 1.1.1)</li> <li>2. % of the population living below the national poverty line (SDG indicator 1.2.1)</li> <li>3. % of the population living in households with access to basic services (SDG indicator 1.4.1)</li> </ol>	
<p style="text-align: center;"><b>Humanitarian Assistance (HUM)</b></p> <ol style="list-style-type: none"> <li>4. # and % of disaster/crisis-affected people supported through/by CARE who obtained humanitarian assistance that is fully in line with CARE's and other global standards: <ul style="list-style-type: none"> <li>(4a) obtained adequate emergency shelter or</li> <li>(4b) obtained or recovered adequate housing;</li> <li>(4c) accessed safe drinking water and</li> <li>(4d) accessed adequate sanitation facilities and</li> <li>(4e) used adequate hygiene practices;</li> <li>(4f) obtained adequate food quantities and quality or</li> <li>(4g) adopted adequate nutritional practices;</li> <li>(4h) accessed at least one SRH service;</li> <li>(4i) recovered household goods, assets, and/or income opportunities</li> </ul> </li> <li>5. % of disaster/crisis affected people in areas of CARE responses who report satisfaction with regards to relevance, timeliness and accountability of humanitarian interventions</li> </ol>	<p style="text-align: center;"><b>Sexual, Reproductive &amp; Maternal Health and Rights (SRMH)</b></p> <ol style="list-style-type: none"> <li>6. Demand satisfied for modern contraceptives among women aged 15-49 (SDG indicator 3.7.1)</li> <li>7. Proportion of births attended by skilled health personnel (SDG indicator 3.1.2)</li> <li>8. Adolescent birth rate (disaggregated by 10-14; 15-19 years) per 1,000 women in each age group (SDG indicator 3.7.2). Proxy indicator: Age at first delivery.</li> <li>9. Proportion of women aged 15-49 who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care (SDG indicator 5.6.1)</li> </ol> <p style="text-align: center;"><b>The Right to a Life Free From Violence (LFFV)</b></p> <ol style="list-style-type: none"> <li>10. % of people who reject intimate partner violence</li> <li>11. % of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner, in the last 12 months (SDG indicator 5.2.1)</li> <li>12. % of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner, in the last 12 months (SDG indicator 5.2.2)</li> </ol>
<p style="text-align: center;"><b>Food &amp; Nutrition Security and Climate Change Resilience (FNS&amp;CCR)</b></p> <ol style="list-style-type: none"> <li>13. Prevalence of population with moderate or severe food insecurity, based on the Food Insecurity Experience Scale (FIES) (SDG indicator 2.1.2)</li> <li>14. Prevalence of stunting among girls and boys under the age of five (SDG indicator 2.2.1)</li> <li>15. % of people better able to build resilience to the effects of climate change and variability</li> </ol>	<p style="text-align: center;"><b>Women's Economic Empowerment (WEE)</b></p> <ol style="list-style-type: none"> <li>16. # and % of women who are active users of financial services (disaggregated by informal and formal services) (related to SDG indicator 8.10.2)</li> <li>17. % of women who report they are able to equally participate in household financial decision-making</li> <li>18. # and % of women with union, women's group or cooperative membership through which they can voice their labor rights</li> </ol>
<p style="text-align: center;"><b>The CARE Approach (Gender Equality and Women's Voice, Inclusive Governance, Resilience)</b></p> <ol style="list-style-type: none"> <li>19. # and % of people of all genders who have meaningfully participated in formal (government-led) and informal (civil society-led, private sector-led) decision-making spaces</li> <li>20. # of new or amended policies, legislation, public programs, and/or budgets responsive to the rights, needs and demands of people of all genders</li> <li>21. % of people that have actively engaged in reducing their vulnerabilities to the shocks that affect them</li> </ol>	<p style="text-align: center;"><b>CARE Roles</b></p> <p><b>Humanitarian action</b></p> <ol style="list-style-type: none"> <li>22. # and % of CARE's humanitarian projects and initiatives complying with gender marker requirements</li> </ol> <p><b>Promoting lasting change and innovative solutions</b></p> <ol style="list-style-type: none"> <li>23. # and % of projects/initiatives that developed innovations for fighting poverty and inequality</li> </ol> <p><b>Multiplying impact</b></p> <ol style="list-style-type: none"> <li>24. # and % of projects/initiatives that influenced policy change</li> <li>25. # and % of projects/initiatives that linked or worked with strategic alliances and partners to take tested and effective solutions to scale</li> </ol>

<sup>2</sup> Within the SDGs, there is [not yet a universal framework for disaggregation](#). You can use the framework that's most appropriate for your project/initiative, in line with already existing references (e.g. "[Sex and Age Matter for disaggregation in humanitarian work](#)")

## For more detailed information and guidance on the global indicators

Please visit the CARE International wiki for Monitoring, Evaluation and Learning

<http://careglobalmel.care2share.wikispaces.net/CARE+2020+Strategy+-+Global+Indicators+and+Markers#Global%20and%20Supplementary%20Indicators%20for%20Measuring%20Change>

## Questions and comments

For questions and comments, please contact the following colleagues:

- For general questions regarding the indicators and their measurement: Sofia Sprechmann [sprechmann@careinternational.org](mailto:sprechmann@careinternational.org), Jay Goulden [goulden@careinternational.org](mailto:goulden@careinternational.org) and Ximena Echeverria [echeverria@careinternational.org](mailto:echeverria@careinternational.org)
- For specific questions on indicators of the different outcomes or elements of the approach, please contact:
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