



Food Systems in Crisis

Introduction

As the world continues its trend of rising inequality, increasingly unjust and broken food systems – and the pressures of conflict and increasing climate change – have led to over 800 million hungry people.¹ This trend, if not addressed, will result in over 1.2 billion food insecure people by 2050, with the risk of hunger increasing by up to 20% due to climate change, unless adaptation efforts are significantly increased.²

Simultaneously, the necessity and magnitude of humanitarian assistance over the past 10 years has grown significantly.³ Traditionally, development programming has been perceived as implementation within the context of “stability”. Yet, in 2018, it could easily be said that are few, if any, remaining countries or regions in the world that can be defined as stable. Poverty and hunger are overlapping much more in fragile contexts, with more than 80% of the global poor expected to live in fragility in 2030.⁴ In this new world, wars, conflict, natural disasters and slower, but just as devastating, impacts of climate change are commonplace in countries where long-term efforts to reduce chronic hunger and malnutrition are playing an increasingly important role.

Now, impossible to ignore, this trend demands the prioritization of connecting humanitarian and development programming. Relevant stakeholders and actors at the global level have taken note—with ongoing United Nations reforms stressing “collective outcomes”; the European Union now supporting a Triple Nexus strategy; the World Bank increasing their involvement in fragile states and refugee crisis; and more governmental funding stressing an integrated approach.

Key donors for CARE’s Food and Nutrition Security (FNS) programming – most notably USAID – are recognizing the synergies between humanitarian and development programming. Most recently noted by the merger between the Office of Foreign Disaster Assistance (OFDA) that handles the majority of the USG’s emergency food security programming, and the Office of Food for Peace (FFP) that manages the majority of the USG’s development food security programming.

CARE’s [2020 Program Strategy](#) guides our work to increase food and nutrition security and resilience to climate change for 50 million people by 2020. CARE’s key approaches of gender equality and women’s voice, inclusive governance, and resilience are at the heart of our programs, including our advocacy and influencing efforts; and is guided by the She Feeds the World ([SFtW](#)) programmatic framework ensuring all of our Food and Nutrition Security (FNS) work, seeks to build [SuPER food systems](#): that are **S**ustainable, **P**roductive (& profitable and nutrition-sensitive), **E**quitable, and **R**esilient.

While SFtW is based on an integrated approach, in different contexts, some of the areas of change (women’s empowerment, productive resources, access to markets, nutrition, social protection, and multiplying impact) may be more important than others. Considering the humanitarian development nexus, reflected in this report are concrete examples of CARE’s work around resilience; cash and voucher assistance in transition contexts; markets in transition; nutrition in emergencies; and gender, FNS, and emergencies. All demonstrating CARE’s efforts to achieve the ambitious FNS target set forth in the 2020 Program Strategy.

¹ Food and Agriculture Organization of the United Nations, [State of Food and Agriculture \(SOFA\)](#), 2017.

² World Food Programme, [How Climate Drives Hunger: Food Security Climate Analyses, Methodologies and Lessons](#), 2010-2016.

³ United Nations Office for the Coordination of Humanitarian Affairs, [The New Way of Working](#), 2017.

⁴ Organisation for Economic Co-operation and Development (OECD), [States of Fragility](#), 2018.

With this report, CARE aims to further contribute to the ongoing global dialogue around the humanitarian development nexus and, more specifically, its impact on chronic hunger and malnutrition by sharing lessons learned, adaptive ways of working, and best practices for FNS programs and approaches.

Doing Nexus Differently

In cooperation with over 30 CARE thought leaders and practitioners, including the FNS team, and building on evidence coming from research and teams on the field, CARE's Regional Applied Economic Empowerment Hub in the Middle East and North Africa region has presented key insights and recommendations on the current Nexus developments (where donors and implementing actors are connecting humanitarian and development structures and programming together (into a Double Nexus) and sometimes adding peace considerations (into a Triple Nexus). Following these global and regional developments, the Hub has become an advocate for the need to implement this Nexus in a much more bottom-up, localized and contextualized way in order to protect and empower our impact groups. We want you to join our partnership in presenting, implementing, and advocating for the type of Nexus integration we want to see in the future – what we call **Doing Nexus Differently**. The nine key bottom-up guiding principles defining this approach are: Localization; Local ownership and participation; Evidence-based analysis informs our design, implementation, and evaluation; Politically Smart; Gender and Women's voices; Resilience; Adaptive Management; Piloting; and Reinvesting in Program Quality.

Methodology

In Fiscal Year 2018, CARE had 513 projects in its portfolio on food and nutrition security and climate change resilience. These projects reached 15.8 million (15,780,570) people directly and 131.7 million (131,743,227) people indirectly across 75 countries. Humanitarian response within CARE's FNS portfolio included 112 projects and initiatives in 34 countries; including 64 livelihood recovery activities reaching 2,521,366 people in 22 countries.

Since 2015, FNS overall has had impact for 21.9 million people. This includes 4.9 million people accessing adequate food in humanitarian settings, 1.1 million people participating in livelihood recovery, and 2.3 million improving hygiene practices. For development projects, we've helped 2.9 million people increase food security, 1.1 million reduce stunting, and 1.5 million increase their resilience capacity.

This report draws from CARE's FNS programs around the world to present best practices and lessons learned from our approaches in fragile contexts and their impact on food and nutrition security.



**2.9 MILLION INCREASE FOOD SECURITY
IN DEVELOPMENT PROJECTS**

**513 PROJECTS FOOD AND
NUTRITION SECURITY &
CLIMATE CHANGE
RESILIENCE**

**REACHED 15.8 MILLION IN
75 COUNTRIES**



**4.9 MILLION ACCESSING ADEQUATE
FOOD IN HUMANITARIAN SETTINGS**

Humanitarian-Development Nexus Terminology Defined

Regional Applied Economic Empowerment Hub, 2019

Overcoming the gaps in management and implementation between humanitarian assistance and development aid and building towards a much more effective and sustainable aid system, while keeping their distinct objectives, has been the discussion for ages in the sector. Renewed momentum was gained however after the World Humanitarian Summit in 2016 and the announcement of UN reforms that called for a New Way of Working and key themes such as more effective reduction and prevention of needs and working towards collective outcomes across the whole humanitarian, development, and peace-building spectrum. Now donors, implementing actors and multilateral organizations (incl. UN, EU, World Bank) are restructuring their funding streams and implementation mechanisms according to a Nexus approach. The evolvement of this discussion is captured below, describing the different views on or approaches towards humanitarian assistance and development.

Separation	<ul style="list-style-type: none"> • Humanitarian assistance and development function as distinct systems, with different funding/ implementation/ methodologies. On the field they are often disconnected.
Linking Relief, Rehabilitation and Development	<ul style="list-style-type: none"> • Relief, Rehabilitation and Development Phases are more timely connected or linkages are made where seemed relevant; but these phases are seen as following each other linear and clearly distinguished.
Contiguum	<ul style="list-style-type: none"> • Hum and Dev are NON-linear phases in strategies or frameworks; their high interconnectedness is recognized and collaboration is sought after. • Little or no impact on organization structure or business/operational model.
Double Nexus	<ul style="list-style-type: none"> • Hum and Dev are treated as non-linear and complementary; they do not follow after each other but are closely linked, reversed or needed at the same time. • AND this understanding impacts business model (funding, human resources, partnerships, MEAL, etc.).
Triple Nexus	<ul style="list-style-type: none"> • Peace and security considerations are added to Double Nexus, giving a wide range of possible applications among donors and implementors, from increased conflict sensitivity, to social cohesion and peace-building or connections with national interests.

Resilience and the Nexus

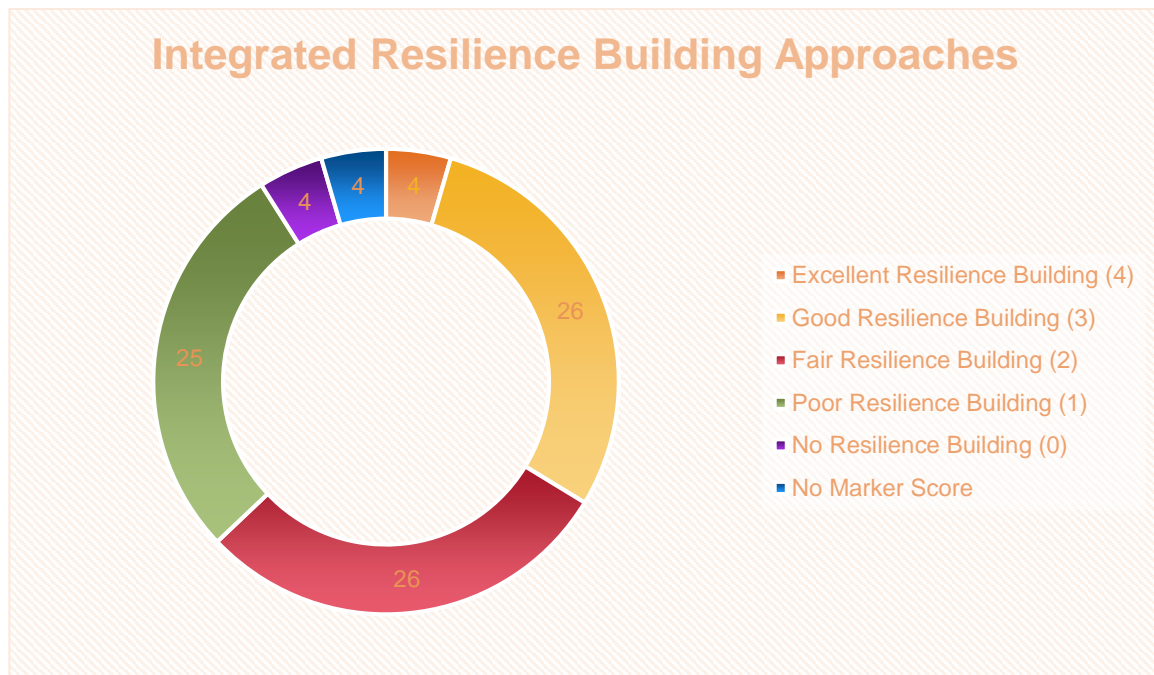
In a context of increased unpredictability from climate change, disasters and conflict, CARE strengthens poor peoples' capacity to absorb and adapt to shocks, manage growing risks, address underlying causes of vulnerability and transform their lives in response to new hazards and opportunities. A focus on strengthening resilience enables CARE to better integrate humanitarian, disaster risk reduction, social protection, climate change adaptation, natural resources management and other development actions. When communities are resilient, the chances of moving out of poverty in the face of worsening shocks and uncertain future climate are greatly enhanced. However, building

resilience goes beyond the ability to recover from shocks and includes addressing the context that makes people vulnerable.

Enhancing the resilience of agriculture and global food systems requires new approaches to building the adaptive capacity of farmers to ensure that long-term stresses and discrete shocks do not lead to downturns in socio-economic progress. Characteristics of a resilient system include: a high level of diversity; connectivity between institutions and organizations at different scales; the blending of different forms of knowledge; redundancy within the system; equality and inclusiveness; and high social cohesion and capital.

CARE's [approach](#) to increasing resilience can be summarized as follows: *If the capacities and assets to deal with various shocks, stresses and uncertainty are built and supported and if drivers of risk are reduced and if these actions are supported by an enabling environment, then resilience is increased.* Change needs to take place and be sustained in all three areas to achieve this impact. The aim of the [increasing resilience](#) approach is to harness the relationship between capacities, drivers of risk, and the enabling environment. Underpinning the resilience approach are risk analysis, flexibility, and innovation.

Integrating CARE's Resilience Approach



As indicated in the graph above, 30% of the FNS projects and initiatives in FY18 had integrated excellent to good (excellent 4% + good 26%) resilience building approaches, which means, they addressed drivers of risk, build the capacities and assets of individuals and communities and worked towards transforming the social and natural environment surrounding them.

CARE's FNS programs integrate a resilience building component as part of the SFtW Framework. As per CARE's approach for increasing resilience, all FNS programs focus attention on reducing vulnerability and increasing capacity. For example, Participatory Scenario Planning (PSP) developed as part of the **Adaptation Learning Project (ALP)**⁵ is used to enhance all these capacities. In PSP,

⁵ The Adaptation Learning Programme (ALP) for Africa is implemented by CARE International with financial support between 2010 and 2017 from UK Aid from the Department for International Development, the Ministry of Foreign Affairs of Denmark, the Ministry of Foreign Affairs of Finland, the Austrian Development

people identify shocks and stresses impacting their communities, who is impacted and how. Relevant scientists and specialists also take part and explain the drivers of these changes and what people should expect. Local government officials also gain a better understanding of these shocks, how they affect communities and what they can do to support them in coping more effectively. Participants learn how to better predict on-coming shocks (anticipatory capacity), how to better prepare for them (adaptive and absorptive capacity) and government officials develop better responses (transformative capacity). PSP was adapted and taken up by all 47 County Departments of Agriculture; and has also been used in Niger as part of the **Building Resilience and Adaptation to Climate Extremes and Disasters program (BRACED)**⁶ – which saw a \$4 return for every \$1 invested in getting governments and communities to plan for climate emergencies.

Adaptive Management: A Case Study

CARE Bangladesh's **SHOUHARDO III** program implements interventions to improve livelihoods, nutrition, disaster preparedness, gender equality and women's empowerment, and improved governance among the poor and extreme poor. During 2017-2018, the program partnered with TANGO to conduct recurrent surveys to assess the extent to which the resilience of different beneficiaries was improving. As of the third round of surveys this year, it became clear that the least resilient group was pregnant and lactating women, especially those who were youngest (i.e. adolescents). They had the least access to education and training for livelihood improvement and mobility restrictions also curtailed their ability to take advantage of these. Factors causing these vulnerabilities include early and forced marriage and childbirth and gendered norms limiting mobility of married women. In response to these results, SHOUHARDO III is now developing tailored opportunities to improve this specific group's resilience.

This same adaptability allowed the program to donate 50 MT of Vitamin A Vegetable Oil to the World Food Programme to distribute to the highly vulnerable households when hundreds of thousands of Rohingya refugees suddenly began to spill across the border from Myanmar's Rakhine State into Cox's Bazaar, Bangladesh. The food was received by households in dire need and helped them in the first few months of their displacement. A successful contribution that is indicative of the importance for development programs, as they are designed, to consider key risks; and not just based on the past, but also on potential scenarios for the future. Instead of designing around the prevalence of previous shocks and stresses, it is essential to incorporate components in their Theories of Change that anticipate new shocks, creating the potential for more effective responses.

A critical contributor to success of programming across the humanitarian development nexus is the engagement with existing (formal or informal, governmental or non-governmental) support mechanisms to ensure effective, locally owned responses that strengthen local capacities as opposed to ignoring them. The CARE Haiti **Kore Lavi**⁷ program developed a safety-net system that had the potential to expand quickly in the case of shocks. In recent years, this type of expanded capacity was evident in El Niño and Hurricane Matthew responses in which the program made use of the existing voucher system to target households. Moreover, safety-net systems can also be designed to make it easier for beneficiaries to graduate from them through assistance with livelihood activities that build

Cooperation and the Danish CISU Climate and Environment Fund. It was implemented in Ghana, Kenya, Mozambique and Niger.

⁶ The BRACED project has been funded by the UK Department for International Development (DFID). A total of 15 projects have been funded in 11 countries in Africa and two in Asia. CARE's BRACED project in Niger, from 2015-2017 enabled over 200,000 people to improve their ability to cope with climate extremes.

⁷Funded by the USAID Office of Food for Peace, Kore Lavi supports social protection in Haiti. Beneficiaries access fresh fruits and vegetables, participate in formal markets, and exercise their sense of dignity by making their own food choices. Farmers receive fair prices for products, participate in a stronger market, and community needs.

resilience. The **Livelihoods for Resilience Activity** (L4R)⁸ in Ethiopia does just that, enabling more and more households to climb out of poverty in a way that is sustainable and increases households' ability to cope with recurrent shocks and stresses. The platforms and activities used by L4R (and GRAD⁹) have been so effective that they have been adopted by the Ethiopian government as the favored methodologies to promote graduation from safety-nets and overall resilience.

Cash and Voucher Assistance in Transition Contexts

Addressing the global problem of hunger and children suffering permanent damage from not having enough of the right kinds of food requires a comprehensive, flexible approach that responds to acute, seasonal, and chronic hunger and malnutrition while engaging in longer term development efforts to strengthen the resilience and risk management strategies of poor, vulnerable populations.

The food aid landscape has also experienced reforms over the last few years. Specifically, the U.S. Government has undergone a gradual reform of its food aid policy, marked significantly by the introduction of more flexible approaches besides in-kind food aid to the provision of cash transfers, vouchers and local and regional purchase (LRP) of food aid commodities.¹⁰ For CARE, this means having the option to use the best tool in a specific context, e.g. cash transfers, vouchers, LRP, and shipment of U.S. commodities, which ultimately results to a more efficient funding source for long-term development and emergencies.

The use of cash and voucher assistance ([CVA](#)) within CARE has gradually gained momentum with research and evidence documenting the efficiency and effectiveness of cash transfer programs. In FY18, CARE and partners reached 2.6 million people in over 50% of its country programs with CVA in humanitarian, recovery, and development contexts. CARE implements CVAs in all of its regions, with 102 projects utilizing CVA in FY18; of which 17% was in development and recovery settings almost exclusively supporting food security and livelihoods outcomes. Using CVA can increase both the supply of and access to food on markets, as well as contribute to diversifying diets. They inject much-needed cash into market systems, creating markets for food products that would not exist otherwise and protecting the livelihoods and businesses of producers and vendors so that they do not themselves need to depend on safety-nets.

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CARE's approach to CVA is driven by gender analysis and women's empowerment. Where households have adequate access to markets, and markets have adequate food supplies throughout

⁸Funded by USAID, the Feed the Future Ethiopia-Livelihoods for Resilience Activity is part of the U.S. Government's global hunger and food security initiative. The project is designed to help up to 97,900 chronically food insecure households to graduate with resilience from the government of Ethiopia's Productive Safety Net Program.

⁹ GRAD was a five-year USAID-funded project designed to help the Government of Ethiopia find sustainable solutions to chronic food insecurity.

¹⁰ CARE USA, [White Paper on Food Aid Policy](#), May 2014.

the year, CARE prefers to provide cash or vouchers to individuals, households, or communities in lieu of in-kind food. This approach is defined in and led by CARE's strategic "Playbook" that was designed through a collaborative process where 20 CARE staff, representing member-partners, country offices, and regional offices, with expertise spanning the 'nexus' and defined the ambition and necessary steps to achieve the ambition. In FY19, eight country offices are rolling out their national "Playbooks" including ones using CVA in development contexts such as Ethiopia and Malawi. CARE's leadership envisions cash programming as a springboard the organization needs to realize its vision of an organization that is more focused, nimbler, more horizontal, competitive and truly putting women and girls at the center.

CARE recognizes that when well-managed, using CVA allows aid dollars to go further, strengthens local markets, bolsters local economies, provide a choice to women to purchase food of their choice and reinforces long-term sustainable food security efforts. Over the longer term, this can help improve farmers' incomes and productivity and increase investment in food processing industries. Thus, using CVA strengthens the resilience, risk management strategies, and self-sufficiency of smallholder producers, poor communities, and countries. For these reasons, SFTW incorporates CVA into its platform to more effectively and efficiently reach women around the world. CVA works as economic assistance to enable households or individuals to meet identified needs (e.g., food and non-food items, shelter, services, or assets). CVA is a modality that can support outcomes in any sector. It is a means to an end and it can be used in humanitarian, early recovery or development responses. A primary difference between CVA and in-kind programming is that the beneficiaries are able to obtain goods and/or services directly from the local market and service providers.

The use of CVA has experienced steady and continuous growth, spanning both the development and the humanitarian spheres. Evidence on these programs consistently supports that CVA can be more effective, efficient, and flexible than other modalities—traits easily adapted to resilience and development assistance. CVA refers to all programs where *cash transfers* or *vouchers* for goods or services are directly provided to recipients. These transfers can be conditional, with prerequisite activities or obligations that a recipient must fulfil in order to receive assistance (such as school attendance or immunization against communicable diseases) or services performed (such as [Cash for Work](#)), or unconditional, with no fixed contingency. They can also be restricted, with limitations on what, where, or how the transfer can be spent, or they can be unrestricted, where the recipient can decide on the use of the transfer. Vouchers, by design are always restricted transfers. [Delivery mechanisms](#) depend on contexts and can range from mobile money, banks, or credits cards.



In 2015-17, Zimbabwe faced severe drought driven by one of the strongest El Niño events of the last three decades. It severely affected agricultural production, reducing both subsistence production and income. In 2016, a state of national disaster was declared, with 4.1 household projected to be impacted. In response to this, with \$40.9 million from DFID, CARE ran the [Cash First Humanitarian Response](#) to reach 73,718 households representing 400,279 people in rural Zimbabwe to help them cope first with the 2015 drought, and then with the 2016 drought and cash crisis. This was the largest ever multi-purpose unconditional cash transfer program in Zimbabwe. As with all humanitarian programs, financial resources were finite, requiring a prioritization process to take place to channel resources to the most vulnerable. The project utilized mobile money transfers, which were well suited to address the impacts of the drought and enable people to meet their immediate needs. It achieved efficiency and accountability, while injecting money into the rural Zimbabwean economy. The money went primarily to food (mainly to maize/mealie meal and vegetable oil). In November 2015, 46% of people were reducing food consumption, however, with the implementation of cash transfers, this number was decreased to just 15% by January 2017.



With the support of USAID Food for Peace, [Kore Lavi](#) is transforming markets with cash transfers of \$25 a month going to the poorest people. Kore Lavi creates access to locally produced and nutritious foods for over 18,000 households and aims to strengthen the institutional capacity of the Haitian government and civil society to implement, manage, and coordinate gender responsive social safety nets. Kore Lavi uses a system of [paper and electronic vouchers](#) to buy locally produced grains and vegetables. This means money is going to local farmers and businesses to grow the local economy. In the first year of implementation, 109,790 people benefited from social assistance and 9,720 households were building assets for self-reliance and risk management. This innovative approach is setting the ground for sustainable programming that can be country-led and country-run to provide local systems to address long- standing issues of chronic food insecurity.

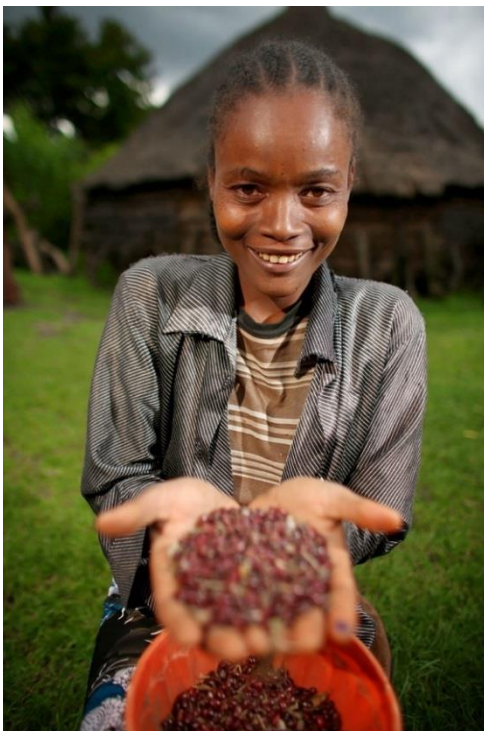
Markets in Transition

Through SFtW, CARE's FNS programming aims to improve women's access to markets to unlock greater production, expand profits on small-scale agriculture, and increase food security. It also promotes women small-scale producers' ability to participate in collectives to negotiate better market outcomes and make decisions in market systems. In collaboration with partners, CARE applies a market systems and value-chain lens to our agricultural programming, with the explicit aim of enhancing food and nutrition security.

In our agricultural development work, CARE ensures that thorough market systems analysis is at the forefront of selection and engagement in selected value chains. In the face of a shock – whether anticipated or not – markets and market-based interventions play a critical role in stimulating recovery, increasing resilience, and enabling communities to thrive and prosper. CARE's emergency market programming aims to use the **situation and response analysis framework** (*below*) to design interventions and responses since the importance of early market assessment is essential in supporting a strong program design and implementation for a successful response.

Situation and Response Analysis Framework:

Emphasizing interventions that aim to respond to emergencies by working through markets to provide relief can ensure survival by providing essential items, tools, or services that meet basic needs, agricultural inputs and services of replacing other livelihood assets; providing jobs and opportunities for wage laborers and/or linking to buyers for their produce. This is primarily through cash-based programming, in-kind delivery with local procurement, and includes rehabilitating and strengthening part of the market system to supply relief and supporting market actors to supply products and services. Additionally, while ensuring a focus on market strengthening as a mechanism of ensuring the market serves communities even in case of crisis by increasing the ability of communities and producers to understand market function and interact better with different market actors.



CARE has used a [push-pull graduation model](#), which links interventions directly targeting the very poor/chronically food insecure with interventions to change the broader set of factors that influence their wellbeing. The push-pull graduation model was [first used](#) by CARE in Ethiopia, initially implemented through the Productive Safety Nets Plus (PSNP) project and then further developed through CARE's USAID-funded [GRAD](#). It was used to not only build skills, and marketing capacities within communities, but also to connect the communities to market opportunities. The combined efforts have led to an 80% drop in families who were able to graduate out of the government-sponsored social safety net program, an 84% increase in income, as well as an increased ability to deal with crisis. As a result of this success this model is currently being utilized in [L4R](#), the follow-on to CARE's USAID-funded GRAD in Ethiopia, as well as six additional countries: Tanzania, Ghana, Mali, Malawi, India, and Bangladesh.

Since 2012, CARE West Bank and Gaza has moved from an approach dominated by delivery of handouts and tolls to a partnership approach that is taking a localized, participatory, and sustainable road to empowerment for our target groups as demonstrated in CARE's **Strengthening Livestock Holders' Livelihoods in Area C (Rawasi)**¹¹. From the start, this approach has used a complementary view of both emergency and development, with the aim to always use tools during crisis that will build local social and economic structures including farming/food cooperatives and private sector; infrastructure, especially for water and land; and utilizes local partners (private sector, NGOs, ministries, etc.) as much as possible. This has changed the way CARE has responded to crisis in both the Gaza Strip and the West Bank, where now (food) market development approaches are combined with inputs/food distributions through local partners following the Resilient (Food) Market Systems (RFMS) approach. In addition, in the West Bank, CARE has developed social economic hubs who are serving community needs and responding to farmers' vulnerabilities during droughts or floods, building partner NGO's capacities and sustainably strengthening smallholders' position in value chains. The benefits from the RFMS approach,

Market Assessments in Crisis Settings: A Case Study

CARE Syria has recognized the need to move to more sustainable action for the broken livelihoods of the affected populations of the protracted crisis inside Syria. Even though the situation is still very fragile, CARE Syria has been making a significant effort to improve the lives of Syrians impacted by the on-going conflict, which has seen more than half of the population displaced, by working on connecting emergency assistance with Resilient (food) Market Systems approaches under a 39-months DFID-funded program. Trying to reach the whole of Syria, the program takes a multi-sectoral and multi-layered (working on individual, household and community level) approach applying a value chain/market-oriented lens building on market assessments, supporting entrepreneurship through cooperatives and individuals in selected high-potential value chains and working on the recovery and rehabilitation of social and economic structures (e.g. roads, markets, etc.).

This is possible in such a highly fragile situation by applying different vulnerability scales and addressing the needs of households according to their socio-economic status. Most vulnerable farmers and livestock holders receive a more extensive package of inputs and support, while more capable farmers are engaged in rehabilitation and capacity building activities that will connect all of them more sustainably to the growing markets. Specific target groups were provided with additional support through emergency cash, winterization kits or cash for work programs, all in complementarity to the value chain activities. This is to ensure that Syrians do not only meet their immediate needs but also to enable them to secure their long-term needs and reduce their negative coping mechanisms (e.g. recover their livelihoods and improve food availability for food items such as dairy and vegetables).

While it can be extremely challenging to undertake market assessments in crisis settings, the team has been able to look at six different value chains in four regions reaching between 900,000 and one million people in 2017 and 2018. Following in the design of the interventions, CARE ensures to reach at least 50% women and girls with activities that mostly focus on emergency assistance but also include the FNS sector by building on existing strengths and opportunities within the market systems taking into consideration the inclusiveness approach related to the specific needs and involvement of women, people with disabilities, and youth as a way to not create parallel systems but contribute to the rehabilitation and reconstruction of local capacities. For this, they are also collaborating with the local private sector and local governance while allowing for a very contextualized decision in each setting; as regions in the conflict-affected country show stark differences.

¹¹ CARE Österreich / CARE West Bank and Gaza (WBG) implemented the Strengthening Livestock Holders' Livelihoods in Area C (Rawasi Project) from 2013-2016 in partnership with the International Center for Agricultural Research in the Dry Areas (ICARDA) and Palestinian Agriculture Relief Committee (PARC) in Palestine.

especially in markets in transition, enable the complementary addressing of both short- and long-term needs.

The role of markets in transition cannot be underestimated. There will always be forces of supply and demand; even in the bleakest of circumstances. Increased collaboration across humanitarian and development sectors by using market-based approaches to analyze and map existing market systems, identifying the most critical market systems before crisis, and designing interventions that increase resilience of market systems has increased CARE's ability to drive impact.

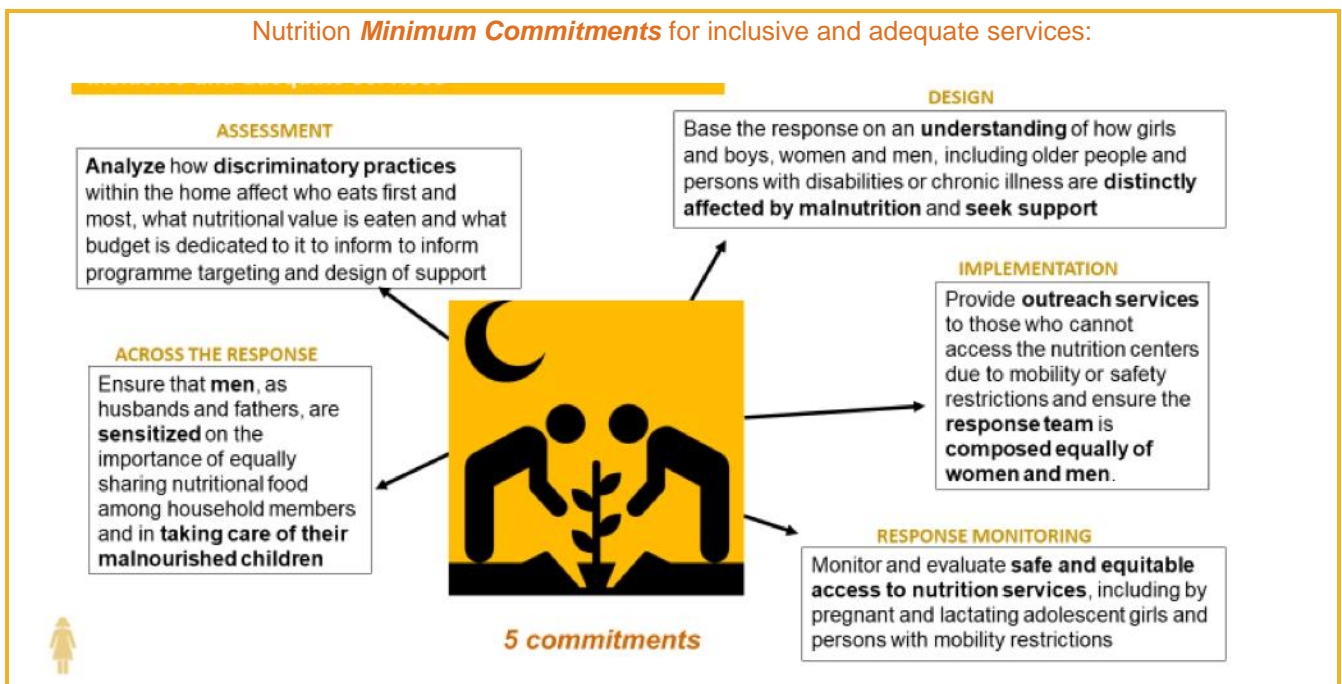


Nutrition in Emergencies

Reduced chronic malnutrition (also referred to as “stunting”) is one of CARE's main measures of success for our work in food and nutrition security. As a proxy for many aspects of well-being, freedom from stunting reflects success on many fronts: food systems; health systems; education; water, sanitation, and hygiene (WASH) infrastructure; and safety nets, to name a few. Since it arises during the first 1,000 days — from conception through the child's second birthday — and essentially cannot be reversed thereafter, prevention by ensuring adequate growth and nutritional status is critical for the fulfilment of rights across people's whole lifetime. CARE's programming thus promotes the integration of [nutrition-sensitive approaches](#) into our work in WASH, economic development, food security, education and health, to provide the foundations for good nutrition. We also focus on maternal and adolescent nutrition, as important outcomes in their own right, and for the nutritional status of their children in the future, should they choose to have any.

In humanitarian contexts, CARE's programs have helped 1.1 million people change nutritional practices since 2015 by promoting screening of children and women for acute malnutrition, treatment of severe and moderate acute malnutrition, targeted supplementary feeding, provision of micronutrient supplementation, counselling and support for infant and young child feeding in emergencies (IYCF-E), and nutrition surveillance activities.

A set of five gender equality practice minimum commitments for inclusive and efficient humanitarian nutrition services have recently been developed and are currently being piloted. These CARE Minimum Commitments (MCs) make gender sensitive and inclusive programming tangible, simple, and practical. The MCs help address the unique and multiple assistance and protection needs of girls, women, boys, and men in a nutrition crisis. They are a learning tool that places affected people at the center of humanitarian interventions, and monitor the inclusivity, adequateness, and efficiency of our response. They constitute a minimum set of core actions and approaches to be observed by the humanitarian country teams at the different phases of the project cycle. The MCs framework is being piloted in the Idai cyclone response in Mozambique, Malawi, and Zimbabwe. Discussions with Yemen and DRC are under way for further pilot of the framework. The framework is designed to be a living tool and lessons learned from the pilots will shape further updates that will be followed by mass roll out.



On-going conflicts in Mali has been exacerbated by drought and poor harvests. CARE Mali's **Harande** program converted more than half of program resources and beneficiaries to disaster mitigation. CARE's Humanitarian team helped to quickly design an electronic-voucher response that reached over 6,000 extremely vulnerable households experiencing acute malnutrition and food insecurity. Targeting the most vulnerable was facilitated by a census conducted at the start of the program, ranking households based on vulnerability and poverty. This cloud-based system was referenced to develop beneficiary lists. In addition, Harande trained Lead Mothers as part of the program. These community-based nutrition volunteers were trained to measure nutritional status of young children using middle upper arm circumference (MUAC) tapes and refer cases of acute malnutrition to health services. While the troops have left the area and the initial disaster mitigation response is completed, on-going safety-nets and Lead Mother activities will continue in 2019. In the coming year, these women will support community efforts to provide nutritious foods to women and young children.



Improved Emergency Nutrition for Rohingya Refugees

The sudden influx of about 900,000 Rohingya refugees from Myanmar to Bangladesh from August 2017 onwards created a major humanitarian crisis. Women and children are the most vulnerable in terms of nutrition, and safety & security. Surveys indicate that one in five children between 6 and 59 months suffered from acute malnutrition (20.3%), well above the 15% WHO emergency threshold level. CARE's role has been as a resource or Technical Support organization for the Community-based Management of Acute Malnutrition Model (CMAM) implementing partners. This includes promoting harmonization of the nutrition response, enhancing service quality to meet minimum standards set by the nutrition sector, strengthening planning and monitoring capacity of NGO staff, and supporting quality reporting of NGOs, including evidence-based planning. To date, CARE has provided training to 360 staff members from different NGOs, adapted/developed 26 Job Aids and Monitoring & Supervision Tools. CARE also plays an important role in the emergency nutrition cluster, by sharing field evidence about best practices, coverage, quality and capacity, to multiply our impact through influencing the decisions related to the whole emergency nutrition program in the Rohingya response.

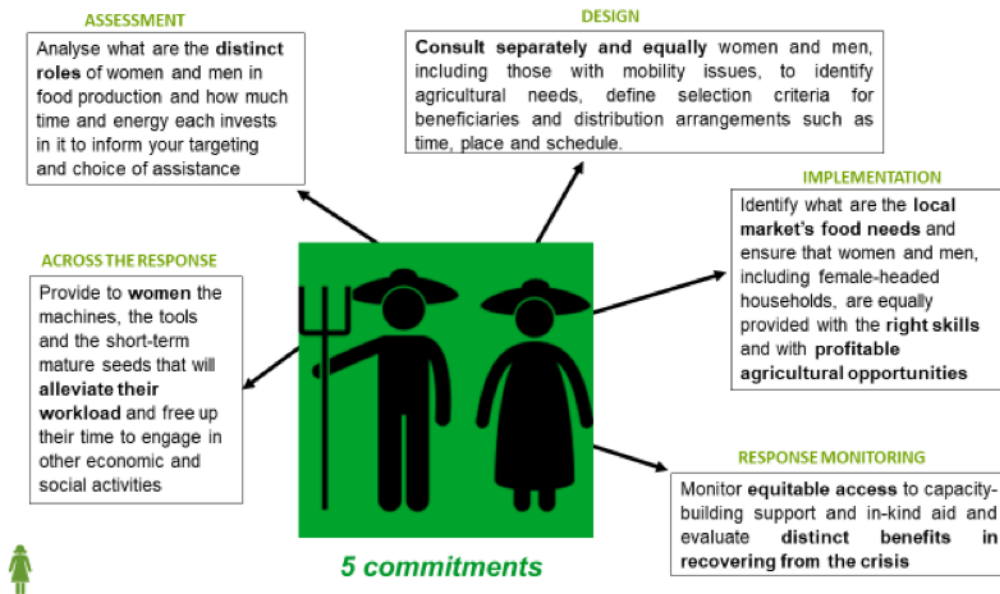
This systems-strengthening role is enabling CARE to contribute to impact at a much larger scale than a traditional service-provision response. By improving the quality and coverage of the whole nutrition sector, CARE is contributing to improved emergency nutrition screening and response services for the total estimated 165,000 Rohingya refugee children between 6 and 59 months, of whom around 33,000 are estimated to be suffering acute malnutrition. As of May 2018, the nutrition sector had enrolled nearly 28,000 Severe Acute Malnutrition cases in the 58 Outpatient Therapeutic Feedings Programs, but each individual NGO is reaching a relatively small number: Concern Worldwide, for example, has directly provided CMAM services to approximately 1,500 children, less than 5% of total needs. By focusing, therefore, on a strategy of multiplying impact, CARE Bangladesh has increased its contribution to impact in the nutrition sector from a likely 1,500 to 28,000, a nearly 20-fold increase.

Gender, FNS and Emergencies

In both development and humanitarian settings, CARE's FNS interventions start with exploring, understanding, and addressing how men and women of different ages are differentially affected by poverty and/or crises. CARE's [Gender Equality Framework](#) (2018) is based on CARE's evidence that achieving gender equality and women's voice requires change in three connected areas: *building agency* of people of all genders and life stages; *changing relations* between them; and *transforming structures*, in order that they realize full potential in their public and private lives and are able to contribute equally to, and benefit equally from, social, political and economic development.

Gender and resilience is a connecting concept across our FNS programming, including communities' capacities to anticipate, absorb, adapt and *transform* in the face of emergencies or conflict. Our work to increase women's voice helps ensure inclusive governance for development, improved resilience and peace building. Influencing formal and informal institutions is facilitated through community-based approaches as Gender Sensitive Climate Vulnerability and Capacity Analysis ([GCVCA](#)) to analyze differential vulnerability of men's and women's livelihoods and resources to climate change and variability; Community Action Planning ([CAP](#)) to enable participatory planning and decision-making, with a strong focus on ensuring women's participation; Social Analysis and Action ([SAA](#)) for FNS to address gender and social norm barriers to promote gender transformative changes; Village Saving and Loan Associations ([VSLAs](#)) to give women a space to experiment with peers, develop literacy and numeracy, and use approaches such as the Farmers Field and Business School ([FFBS](#)), to help women increase their productivity, improve nutrition, and increase access to and control over income and other productive resources; and Community Score Card ([CSC](#)) to enable women to hold service providers to account for quality services. These approaches are complemented by evidence-based local and global level advocacy initiatives.

*Agriculture **Minimum Commitments** for an equal and adequate support to female and male farmers:*



CARE's FNS Humanitarian team has developed gender Minimum Commitments (MCs) for agricultural livelihoods interventions to improve the quality and efficiency of responses in gender equality. The commitments are grounded in (1) an analysis of the needs and barriers faced by target groups based on gender, age and diversity; (2) an understanding of gender dynamics that may lead to vulnerabilities; and (3) a recognition of what can be improved in order to provide adequate services.

Our humanitarian work is guided by the [CARE International Humanitarian and Emergency Strategy](#), that strongly reinforces the focus on gender equality in humanitarian preparedness and response. The goal of the Humanitarian Strategy is to be a leading humanitarian agency known for our particular expertise to consistently reach and empower women and girls affected by humanitarian crises. The [Gender Equality and Women's Voice Guidance Note](#) further guides the practical application of the gender goals of the Program Strategy; while the [CARE Emergency Toolkit](#) provides comprehensive guidance and links to all of the relevant tools and information to taking a gender in emergencies approach. The key steps to guide gender integration into CARE's humanitarian work (outlined in detail in the Emergency Toolkit) are:

1. Rapid gender analysis;
2. Gender mainstreaming and gender specific programming;
3. Women's participation and leadership;
4. Gender and monitoring, evaluation, accountability, and learning (MEAL);
5. Gender and emergency preparedness planning; and
6. Gender and human resources.

CARE and partners have a strong focus on capacity strengthening at the community level to help women increase their confidence and competencies, and cope with the challenges they face, including in farming, marketing, and negotiation skills. In the Yemen Joint Response¹² with Save the Children, IRC, Oxfam, and ZOA, the Dutch Ministry of Foreign Affairs/Dutch Relief Alliance funded trainings in gender mainstreaming for all staff and used [CARE's Gender Marker](#) as a way to measure progress towards quality gender programming. With 89-100% of project participants reporting

¹² The Dutch Ministry of Foreign Affairs/Dutch Relief Alliance funded the Yemen Joint Response for \$8.2 million from 2015-2017. Other implementers include Save the Children, IRC, Oxfam, and ZOA.

satisfaction with the trainings they received, the Response was able to successfully provide services to 435,315 people directly and helped build lasting systems for communities.

Looking Forward

As development programs are designed, key risks must be considered, not just based on the past, but also on potential scenarios for the future. Instead of designing around the prevalence of previous shocks and stresses, development programs need to incorporate components in their Theories of Change that anticipate new shocks, higher or lower frequency and/or severity of shocks. Such components need to increase individual, household, community and systems resilience by building capacity to anticipate, adapt to, absorb and transform shock and stress conditions. Similarly, humanitarian and recovery programs must increase the resilience and effectiveness of market systems. In many cases, this means adjusting to “new normal” conditions driven largely by climate change and conflict that were less important or prevalent in the past.

CARE’s broader research agenda under SFtW is focused on generating evidence grounded in specific programs with identified sources of funding to support ongoing research. Two of the priority thematic areas of research that will directly contribute to the continued collaboration with partners, peer NGOs, and the development community at large for the prioritization of the humanitarian development nexus in food and nutrition security and beyond are as follows:

- **Gender and resilience:** The overarching focus of most of CARE’s FNS programs is the role gender equity and women’s empowerment (GEWE) plays in building individual, household and community resilience. Specific research unpacks the individual and collective elements of GEWE that contribute to resilience outcomes, with a deliberate focus on policy level change, tied to CARE’s advocacy priorities.
- **GEWE in resilient market systems:** SFtW is based on the premise that promoting women’s access to the resources, training and knowledge needed to increase productivity and incomes also affects the resilience of the systems in which they operate. This research theme focuses on how women’s access to productive resources, and the policies that govern their lives, facilitates their integration into market systems.

Additional Tools and Resources

- [Doing Nexus Differently](#); a research paper identifying how humanitarian and development actors can link and integrate humanitarian action, development, and peace.
- [CARE USA’s White Paper on Food Aid Policy](#); ensures that CARE continues to make the most efficient and effective use of food resources in its efforts to serve the needs of people who are food and nutrition insecure and clarifies CARE’s position and approaches to food aid.
- [CARE Emergency Toolkit](#); an encyclopedia for emergencies aiming to improve the quality of CARE’s response to emergencies by outlining common standards and technical guidelines; providing useful tools to avoid reinventing the wheel; and making CARE’s policies for emergency response easily accessible.
- [USAID’s Modality Decision Tool](#); provides a standardized and logical process for building consensus around modality choice (cash, vouchers, US in-kind, local, regional and/or international procurement).
- [CASH Learning Partnership \(CaLP\)](#); a global partnership of humanitarian actors engaged in policy, practice and research within cash transfer programming.
- [Emergency Market Mapping and Analysis \(EMMA\)](#); an approach to assessing market systems in post-emergency contexts that aims to improve emergency responses by encouraging and assisting relief agencies to better understand, support and make use of local market-systems in disaster zones.



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Food and Water Systems

CARE USA

151 Ellis Street NE
Atlanta, GA 30303
1.800.521.CARE (2273)
info@care.org