Multiple knowledges arise in any situation where the people involved bring different types of knowledge and differing perceptions to bear. They provide both conceptual and practical information-handling challenges to any type of cross-cutting, multi-sectoral, multi-disciplinary endeavour. They offer a particular challenge for the development sector, given the need to communicate – and often the desire to build consensus – across boundaries of culture, gender, space and status in an historical context of highly unequal power relationships.

Y pensamos, "Qué pasaría si...?"

And we thought, "what would happen if...?"

CARE Peru's Emergent Culture of Learning for Social Change

Summary:

Over the past decade, CARE International has become part of a larger movement pursuing a rightsbased approach to ending poverty and advancing social justice. At the vanguard of changes within the CARE system, CARE Perú has worked to align its learning systems and strategies in ways that transform its understanding of the underlying causes of poverty, and its approach to the relations of power and accountability which underpin the country's enduring inequities. Adopting a learning approach driven by both practical need and strategic insight, the Peru office has in many ways led the larger organization in its shift from limited projects to a larger programmatic approach involving coalitions with multiple knowledges in the identification and amplification of opportunities to advance social justice. In much of this work, the operative question has been "and what would happen if," collecting insights from one experience, and translating them to other arenas to see what happens. By exposing or even provoking obstacles and hierarchies of knowledge, this approach reveals important features of the social change dynamic, even as it addresses them. This paper captures stories of three very different pathways that learning and knowledge deployment models have taken within CARE Peru's overall efforts to embrace a program approach and improve their overall accountability to others. In so doing, it seeks too, to alert others of some emergine elements of success in building a culture of learning for social change, as well as some of the paradoxes and risks that mark that journey.

I. Introduction

Along with thousands of national and international organizations and social movements, CARE International began the new millennium by taking stock of the achievements, and confronting the inadequacies of the existing international development regime. Prevailing neoliberal economic models and state retrenchments had wrought contradictory effects on human well-being in all societies, polarizing social classes, and intensifying their effects through enduring hierarchies of geography, gender, religion, ethnicity and caste. With concentrations of wealth and power at a historic peak, the lives of the world's most vulnerable men, women and children stood out in stark and intolerable contrast. CARE pledged to anchor its work more deeply in a vision where working for a world without poverty, discrimination, and social injustice was not an act of charity, but a collective obligation to fulfill fundamental human rights.

When CARE formally embraced a rights-based approach to development, few of its staff knew what it would mean for an organization with a strong culture of operational and donor-dependent service provision, and little experience in systemic analysis or advocacy for institutional change. The years since 2000 have seen a rich collaboration between country offices, the various CARE International headquarters, and outside critics and allies, which fleshed out what it would mean, in practical terms, for CARE to adopt a rights-based approach. With flexible resources invested in experimentation and

learning by teams across the organization, practical experience soon generated important, practical knowledge products that were shared in face-to-face gatherings and through <u>online repositories</u>. The mile-markers in this journey reflect shared learning of hundreds of people across CARE, its partners, and the communities it serves:

- <u>programming principles</u> that provide clear but flexible guidelines for what CARE would concretely be doing to act in a rights-based manner,
- guidance for directing programmatic analysis and strategy at the <u>underlying causes of poverty</u> and social injustice,
- new <u>organizational performance frameworks</u> which elevate program quality and address an imbalanced focus on financial health in management processes and incentive systems,
- methods and findings of in-depth research on CARE's impact on women's empowerment,
- program characteristics that guide the shift from a project-based to a programmatic approach,
- and <u>operational models</u> emerging from a planned learning process that demonstrate how local achievements can be used to leverage larger scale change.

Over the past ten years, CARE Perú has been at the vanguard of these changes in CARE. One of CARE's largest offices, historically tied to conventional development projects, CARE Perú found itself at the turn of the century in a middle-income country, emerging from devastating conflict with a rapidly growing economy, and a shrinking base of traditional bilateral development support. Nonetheless, in keeping with global patterns, Perú was a country of contradictions, where 9% growth per annum masked widescale and entrenched failures on the part of the state to secure the well-being of the majority of Peruvian citizens, and in particular of indigenous and rural populations. In the context of a growing economy, a vibrant civil society, and yet persistent inequalities, the need for CARE Perú to shift its approach and increase its value-added was underscored by the relatively small dent that even the best of its projects have made in the larger systemic and structural drivers of social inequality. With important lessons to share in both technical domains and political/strategic ones, CARE Perú embarked upon a remarkable learning enterprise, to transform its understanding of the underlying causes of poverty, and its approach to the relations of power and accountability which underpin the country's enduring inequities.

Today, CARE Perú is a vibrant national entity, with a local governing board en route towards full membership in CARE International. It has a strong central knowledge management function spearheaded by the MEDARC team (Measurement, Evaluation, Performance, Learning and Accountability) and is consolidating seven major programs, clustered under three themes: Sustainable development and climate change, Gender equality, and Social rights. The journey towards a program approach has not been linear or smooth, but it has generated a wealth of learning that is still only partially systematized. This paper, based on intensive interviews with key CARE Perú staff in Lima and review of the office's program strategies, management frameworks, monitoring systems and public reports, is one attempt to expose a wider audience to some of the team's rich and varied lessons about what it takes to learn and demonstrate accountability effectively in pursuit of social change.

The paper focuses on three very different pathways that learning and knowledge management have taken within CARE Peru's overall efforts to strengthen state exercise of its responsibilities to all citizens: a top-down promotion of goals and models for reducing malnutrition that have been built on earlier district level work, bottom-up construction of coalitions for bilingual and intercultural education, and the non-linear growth of CARE Perú's own system for increasing its public accountability into a new engagement with the extractive industries sector in Perú. These varied stories emphasize the importance of tailoring models of program strategy and learning to the conditions given by context and organizational positioning, but also celebrate the plurality of effective pathways for social change, and the creative, relational, and humanistic approaches to learning and accountability in pursuit of systemic change.

The pages that follow will explore each of these mini-cases in turn, making use of common themes in order to draw out point of connection, commonality, and divergence in their paths. We begin with an overview of the national change process: its goals, its action and milestones, and the accidents and moments of insight that shaped its evolution. We then turn to each of the three mini-cases, laying out in turn their own processes of emergence, the structures and relationships that evolved, and the tools and frameworks most relevant to their progress. First-time readers will find the historical account of the process and decision points particularly useful, in order to place the more operational elements of structures, process, and tools into context, and inform adaptation to new contexts. We conclude with a review of key insights, and some of the hurdles that lie ahead for an organization pursuing this kind of programmatic model.

II. The Paradox of Risk and Responsibility

Success as a pathway to failure

CARE Perú's earned reputation for excellence in project management has been both a resource and a hindrance in its task of learning to trigger enduring social change at scales far larger than any one NGO, or even the development sector itself could deliver. On the one hand, the team is well-positioned to leverage years of implementation expertise and credibility in order to be influential among international donors and policy makers. On the other hand, in order to strive for deeper and broader systemic impact, the team must foster *dissatisfaction* with the levels of change attained through good project

management. This naturally challenges expectations held by staff and partners, and wider audiences of potential allies, regarding CARE's legitimate forms of action, roles, and relationships. Momentum for making difficult changes had to be generated through credible evidence of how social changes emerge or stagnate, and what roles (if any) CARE's interventions play in that process. CARE Perú had, in short, to learn how to rely less on its expertise, and more on its capacity to promote learning.

Defining Characteristics of a CARE Program
5. Ability to promote organizational
and social learning, to generate
knowledge and evidence of impact.
Evidence and knowledge will be used
for advocacy, risk analysis and
mitigation, adapting the theory of
change and leveraging resources.

Accountability unshackled – the imperative to broaden the lens

CARE Perú was no stranger to change and reinvention, and the current push to change was certainly influenced by the nascent national economic growth and political stabilization that was quickly leading donors to reduce their aid investment. However, it is significant that the deepest transformations in CARE Peru's history came with the aid industry's embrace, at the end of the 20th century, of a rightsbased approach to development. There is little precedent in the office's history for the kind of moral and political stance this represents, and hence for the directions that learning and change have taken. On the surface, it may seem self-evident that development is about human rights, but the industry is, in fact, traditionally rooted in less egalitarian notions of charity, market, colony, and the material and moral supremacy of Western modernity. In embracing rights-based programming principles, CARE opened the door to important challenges in the logic of development, for notions of rights and participation among southern "partners" in development would radically challenge the comfort of donor-funded, northern-driven, and tightly bounded aid projects. Embracing the full spectrum of human rights, the approach taken up by CARE and its peers meant that "civil and political rights" could no longer be played off against "economic and social rights," with the latter to be deferred until the achievement of the former. Nor could incremental improvements in the fundamental life status of some men, women and children be considered anything but a partial success - the concepts of minimum standards and most marginalized required a higher bar. For all that it can be subjected to a radical critique, the rights-based approach was a giant leap forward in an organization staffed primarily by professionals from the Global South, many of them connected to social movements in their private lives,

and yet beholden to the professionalized hierarchies of the international aid architecture for their social positions and livelihoods. The shift churned a great debate at many levels about precisely what it meant to hold rights- and duty-bearers (including CARE itself) accountable for achieving a defined minimum level of human wellbeing for all people, by promoting change in the underlying social, political and economic institutions that reproduce social inequality.

In Perú, where large and longstanding projects were the norm that had marked the office as one of CARE's mainstays, these conceptual shifts prompted a re-examination of willfully depoliticized collaboration with government ministries, and of models of "community engagement" that paid little heed to the diverse capacities, interests and organization of this extraordinary and diverse population. Given strong social movement roots in Latin America, and the evident dysfunctionality of the Peruvian state at the time of this shift to RBAs¹, many staff readily embraced the idea of "speaking truth to power," and of joining forces with other formal and popular organizations to reframe the terms of development program and policy work.

Two moves were central in sustaining this impulse, against the resistance and uncertainties it provoked. First, was the hard-fought decision to select a standard of program impact that would travel beyond CARE - one which locates the State as the primary responsible actor for delivering, and creating the conditions for, protection and promotion of human rights within its territory. CARE Perú was among those fighting hard for the LAC region to select the United Nations' Millennium Development Goals, linking interventions, information systems, and accountability strategies to official State and international commitments. The MDGs have provided the team and its allies with a common language of focus and accountability, and an avenue for convening diverse actors in promoting successful models in pursuit of systemic reforms. The second critical element of the staying power of CARE Perú's commitment to working in rights-based approaches with social networks beyond the official aid industry was, importantly, the result of a gamble some ten years prior to delink the office's most successful and popular donor-funded project (the EDYFICAR microfinance project) from its restricted donor funding base. The now-autonomous poverty-fighting financial institution, EDYFICAR, in which CARE Perú was a supporting shareholder, provided the organization with a strategically vital flow of unrestricted revenue with which it could experiment, free from the short-term, constrained, and "thing-oriented" realities of donor-funded project cycles. The unrestricted funding from EDYFICAR funded the country office's most vital experiments in rights-based learning - advocacy and democratic governance work, campaigning and coalition-building, gender and women's organizing, and the establishment of its milestone accountability system and culture.

Strategic Corollaries: Projects to Programs

With the shift in framework outlined above came significant reorientations: of resources and action, accountabilities and relationships. These have come to be encapsulated in CARE as the shift from a project-centered to a program-centered approach. It was no longer adequate or appropriate solely to deliver quality interventions on the ground, for which the time-bound, donor funded project model was ideally suited. Working at scale requires identification, validation, and promulgation at national level of successful models – yes, these might be the fruit of project work, but the project results now came to be seen as intermediary products, in a longer-term learning-and-influencing role that called upon a much more flexible, dynamic, knowledge-driven and networked CARE Perú. (Couple of sentences on the key features of the program approach, from current CARE documentation?)

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¹ When the implications of RBA were first examined in CARE, it was through the development of case studies in Sudan, Perú, Afghanistan and Sierra Leone. As CARE embraced its Characteristics of a Rights-Based Approach, later enshrined in policy as the CARE International Programming Principles, Perú saw its premier indicted and jailed on charges of corruption and human rights abuses, and its emerging narrative of success as deeply riddled with racist, sexist, and classist marginalization of indigenous and other minority populations.

Nor was it reasonable to expect to eradicate the symptoms of poverty and social marginalization through the work of any one organization, no matter its expertise. If thorny and intertwined social and political conflicts sustained these inequities, truly social and political processes were needed to shift the balance of power relations. The models to be promulgated in the programmatic approach are not necessarily in the "hard" arenas of technical innovation best suited to the classic measurement and verification approach to learning. As or more important in programmatic approaches are the "soft"

models of how to foster participation, transparency, accountability, cooperation and coalition-building — models much more difficult to capture and attribute through classic monitoring and evaluation methods, and much more difficult to translate in a mechanical form of "best practices" from one sociopolitical context to another. From altering "ways of doing," CARE Peru's development work increasingly focused on changing institutionalized "ways of being" in national development processes. Learning shifted to a more reflexive practice on the one hand, as exemplified in the series of questions illustrated to the right; on the other hand, learning had to become a more collective exercise of knowledgemaking and socialization, seriously engaging the questions driving other stakeholders, and investing in collective learning.

Programmatic Learning Asks...

- What has the project achieved?
- Is it enough? Does it fully respond to the demands of our principles?
- Have we adequately held ourselves accountable?
- Do we need to do more?
- If not us, who? Scanning 360°, which factors and actors play a role in moving this agenda?
- How can these be influenced?From where?

How Responsibility shapes responsible risk

Inherent in all of this change is the question of risk. Yes, the most salient and therefore most discussed risk is to CARE's organizational reputation and viability, and therefore to the communities supported for decades through the classic aid model. But at a more primordial level and perhaps more taboo level is the risk to the interests built up in CARE staff and counterparts in the established order of work - the privileged relationships it upheld, the social status and power it endowed, the comforting sense of technical expertise and efficacy it secured. On both of these levels CARE Perú's leadership is mightily sustained by the formal articulation of rights-based principles of action and accountability. The Defining Characteristic of Rights Based Programs served as a standard against which all programmatic decisions could be gauged and held accountable. The translation of these principles into operational implications has provided a framework and rationale for challenging processes of dialogue and difficult decisions that have shaped the organization's culture, human resource strategies, financial investments, and horizontal relationships within civil society. Should we accept the role of X? Not if it means we cannot guarantee citizen participation. Where will we find resources to spread a successful pilot if our project ends? Start early with the construction or joining of coalitions who can carry the model forward, and a strategy for policy advocacy to pursue its institutionalization by the government. What if the national government closes its ears to the voice of poor and marginalized groups? Find another level at which to work, consolidating ground support and supporting the democratic process that will eventually bring these models forward and upwards. What if we lack the staff capacities, orientations, and networks to deliver on these new ways of working? Build them, through the humbling but transformative struggle for internal change and external engagement.

What would happen if ...?: Learning as a search for unforeseen pathways

CARE's role in this scenario doesn't so much shift, as it multiplies: at times, CARE continues to work with others to produce technical models and knowledge at an operational level. But now this role is obligated to link to a new role, of facilitating and linking CARE's own operational knowledge with that of many

other actors, and fostering the recombination of knowledges into clear arguments for the feasibility of ambitious policy pledges, leaving room for diverse and appropriate models to suit varied needs within a unified framework of accountability. This has been the model most clearly driving work in the Health sector, where the end of a large and highly regarded nutrition security program suggested an opportunity to work heavily on the policy arena, pushing political actors and state bureaucracies to make commitments to reach targeted reductions in child malnutrition that, REDESA suggests, are eminently attainable with the application of political will.

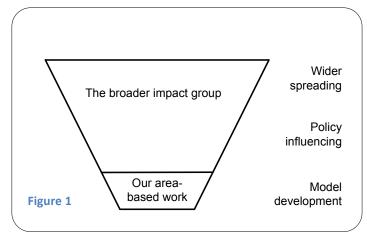
The facilitating and linking role, has also, however, brought operations and policy together "from the bottom, up." The team advancing rights to equitable education in Peru has long worked at the frontlines of educational disadvantage, sponsoring localities to develop agendas for bilingual and intercultural education suited to the multiple cultural identities that constitute Peruvian society. As opposed to the top-down strategy of targeting national politicians and securing commitment from the national government to implement a proven set of solutions, the Education program focuses on building grassroots commitment and creativity in developing solutions themselves, convening multiple stakeholders at each stage to build a strong and resilient coalition for change that cannot easily be swept away by the vagaries of national politics, and stands a good chance of pushing a difficult reform agenda long past the period of CARE's project-level interventions.

Increasingly, CARE is also delinking the facilitating role from that of operational expert – or, better said, supporting other social actors in developing and scaling up effective models for delivering on rights, based on a reputation for having "put its own house in order." CARE's success as a "bridge" or "whisperer" is thus a function of its own internal legitimacy, and aided by its openness to creative/unconventional pathways for building coalitions for change.

In all these roles, promoting useful knowledge and accountability in appropriate ways becomes a core competency. It requires multiple pathways, not a one-size-fits-all knowledge-management strategy. Social positioning, relationships, forms and sources of credibility and influence all vary depending on the history of CARE's work in a given area, the configuration of actors and interests, and the vagaries of timing and opportunity. This reality underpins the organization's constant striving to balance the strengths of a clear organizational identity (traditionally centered around areas of recognized technical expertise) with the ability to shift gears with flexibility and alacrity, as the evolving situation commands. Rather than simply capitalizing on market position or branded knowledge, CARE staff today constantly ask "and what would happen if..." – as illustrated in the cases that follow.

II. CARE Peru case studies on learning for social transformation: One approach, Three pathways

The three cases that follow illustrate the varying knowledge processes that animate CARE Peru's twist on what is emerging as a generalized framework for impactoriented programs (See Fig. 1). This framework builds on the policy focus of Oxfam's memorable rallying cry, "no more development behind the bushes," but leverages CARE's historical strength in field-based project implementation and, increasingly, innovative models.



Though the image of the inverted pyramid

suggests a linear progression "up" from a *CARE-branded* model of innovation, CARE Peru's innovation has been to disrupt this implied linearity by building relationships and learning processes that allow the

organization to intervene effectively at *any* level, in order to support a *societal* process of change agency. In other words, CARE might work directly with 800 members of the national syndicate of domestic workers (SNDH) to develop gender-progressive models of organizational strengthening, while at another level play a supporting role in the syndicate's advocacy for a national law recognizing domestic work in the national accounts. Intervention at each level is necessarily different, because the context, the organization's positioning, the dynamics of relationships and influence, and the capabilities and resources in play, are different.

Balancing a strategic focus on the impact population of interest with the operational capacity to work in multiple modes with this kind of dynamism is no small feat. It has required the cultivation of a strong internal cultural and structural coherence around the program's goals and theories of change, financial and human resource innovations that sustain multi-pronged strategies across project boundaries, and the timely development and cultivated deployment of tools and processes that harvest and redeploy key program knowledge as it evolves, maintaining a center of gravity in the dance of change. The following pages sketch three moments of this complex dance, through three very different, and very successful, programmatic approaches to learning and accountability.

From the mountaintops: Combating child malnutrition²

With estimates of stunting rates varying between 31% (DHS 2000) and 25.4% (NCHS 2000), there was little doubt that the immediate and long-term impacts of childhood malnutrition weighed most heavily in the country's majority rural and indigenous populations - where social, economic and political marginalization were already high, and were both cause and consequence of this highly skewed morbidity distribution. In 2006, these populations had shown no significant movement in their capacity to secure adequate childhood nutrition over the preceding ten years, stalling progress at an astronomical rate of 40% chronic malnutrition. However, between 2005 and 2010, national stunting rates registered a reduction of 5%, driven completely by a nearly 9% drop in the rural rate. One important contribution to this remarkable turnaround has been shown to lie in the learning and knowledge-management that CARE Perú harnessed to shape a top-down policy commitment and governance alignment around proven strategies in the fight against malnutrition.

It is against this backdrop that we must understand how CARE's USAID-funded REDESA project (2001-2006) succeeded against all predictions in registering a 9% reduction in malnutrition in its intervention zones, particularly targeting the most severely affected populations in the country. During the ten-year period from 1996 – 2006, CARE Perú was one of the leading non-governmental agencies in the national fight against infant and child malnutrition. In 2001, the country office had embraced the power of rights-based programming, and a view of malnutrition that positioned it as a manifestation of social, political and economic injustices. This moved the program away from such politically popular but nutritionally ineffective food distribution programs as *Vaso de Leche* and *Comedores Populares*. REDESA was designed under a more holistic national poverty reduction agenda, framed by the Peruvian Social Charter, the Millennium Development Goals. CARE Perú's greatest contributions to reducing child malnutrition arose *at the close of* this long period of USAID-funded nutritional programming, when REDESA's end offered an opportunity to push its lessons, together with those of other agencies registering localized successes, into a national strategy for the reduction of poverty and child malnutrition (CRECER, established by Executive Decree in 2007).

How did this leap from project to policy happen? By raising the bar of knowledge and accountability from the artificial world of the project, to the real world. The 2006 Presidential campaign came at a time

² This section features reflections from Walter X and Paul Y, CARE's staff leadership in the nutrition program. It also draws heavily on Andrés Mejía Acosta's May 2011 case study, "Analyzing Success in the Fight against Malnutrition in Peru."

of widespread disaffectation and frustration with government's apparent disregard for the wellbeing of its citizens. Candidates were looking for reliable solutions, and to make promises that they could keep. Seeing an opportunity, CARE joined forces with the other agencies who had led successful nutrition projects to form a Child Malnutrition Initiative. The CMI aim was to push, not for continued funding of their work, but for a pledge on behalf of the incoming government to achieve a 5% reduction in malnutrition among children under five years of age, within five years. The "5x5x5" campaign focus was not plucked from thin air – it was derived from the network's review of the impacts wrought (and those not achieved) by their disparate intervention models, and a conservative analysis of what could be achieved if these collective strengths were integrated through a coherent government program, one that harnessed all the key agencies whose work affected nutritional outcomes, and held them accountable for working in flexible and context-relevant collaborations across ministries and levels of government.

"Learning had to take place over the long-term, in order to have findings ready at the key moment, when we could place the lessons at the very top," says CARE Peru's nutrition program director Walter Sánchez? Careful, conventional evaluation design had assured that REDESA would have information on its contributions to larger impact when the time came. But the key to success for the Child Malnutrition Initiative was in knowing how and when to *use* this knowledge. The García campaign seized on the 5x5x5 goal as a centerpiece of its poverty-reduction plan, and with steadfast networking the CMI team secured pledges from *all* candidates to achieve its goals if elected (and, later, from all regional government leaders and key international donors). On inaugural day, President García raised the ante, pledging his administration to a 9% reduction in child malnutrition, and locating the CRECER strategy in the President's office, where it would be assured the necessary interministerial and national-regional government collaboration. Since then, supported by strategic program investment funds not tied to specific donor contracts, CMI has been an ally and watchdog for CRECER, working towards supportive policy and regulations to align accountability and incentives at all levels of government for its implementation.

Like an ocean swell³While the nutrition team works from the top to safeguard national commitments to delivering on child survival, a notable innovation by CARE's education program has been its return to the base, where it supports and amplifies the efforts of innovators who are challenging national orthodoxies about the learning interests and abilities of marginalized social groups. Recent studies confirm that despite policy and legal commitments to equal educational rights for all of Perú's children, the economically and culturally marginalized communities whose primary language is not Spanish but an indigenous tongue are systematically disadvantaged: they are disproportionately represented in all indicators of material poverty, as well as educational attainment. Though Perú has had rural development strategies and a governmental directorate for bilingual and intercultural education since 1972, these administrative divisions ignore the cultural challenges of education for children in the Amazon and Andean regions where indigenous languages are spoken in the home, says CARE's education program director, Ana María Robles. The CARE program's current focus is to work with indigenous communities in today's most educationally marginalized communities (primarily, rural Andean Quechua and Aymara speakers, and Amazonian Awajún and Shipibo), to develop a clearer understanding of the obstacles to bilingual and intercultural education, and of the operational models that work for this deeply marginalized group.

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³ This section features reflections from Ana María Robles, CARE Perú's Education director. It also draws on CARE Perú's 2010 policy brief, *Por el Derecho de los Pueblos Indígenas a una Educación de Calidad."* That brief, in turn, summaries the findings and recommendations of a 2008 situational analysis commissioned jointly by the agency members of the Contact Group on Rural Education, in which CARE is a key member: Enrique Vásquez, Ana Chumpitaz and Cesar Jara (2008). *Niñez indígena y educación intercultural bilingüe en el Perú: estadísticas recientes, preguntas resueltas, y tareas pendientes*.

Doing so, the Ana María emphasizes, is anything but a retreat to the days of "small is beautiful" pilots that flicker and disappear at the end of external funding – this is a strategic return, injected after a decade of bottom-up advocacy to secure a national legal framework for the right to educational equity for girls that embraced bilingual and multicultural education. That 2001 law was an early triumph of the FLORECER network, which secured its passage by connecting indigenous and ethnic minority rural students, their educators, civil society organizations, media outlets, and regional government change agents in a national advocacy campaign. CARE Perú played a key role in convening the FLORECER network, and has remained vigilant to the blocks and slippages in implementation, and of the need to continually renew national commitments by bringing effective models to the policy table as they prove their merits on the ground. CARE's current focus on operations research, then, is a strategic shift in program learning focus, an example of the need for agility and endurance in building accountability for actual, and not simply promised, social change.

For example, in response to a policy discourse that suggested that teacher reluctance to teach in Quechua was an important obstacle, CARE Perú worked with the regional administration of Puno to test that hypothesis. Field-level analysis in this area of 70% indigenous Quechua speakers revealed that, in fact, both teachers and parents supported a regionally-appropriate bilingual education, but were unable to integrate it into a state curriculum and performance framework that clearly subordinated BIE to the national Spanish-language norm. Together with the provincial government, CARE secured a 5-year European Community grant for EDUBIMA – a project to work with fifty Puno schools to build up curricular innovations from the community level. Committing to do this work with all the involved stakeholders – and not only parents and local educators as had been the norm of past community-based projects – paid off handsomely in 2009 when the Regional Director for Education in Puno (a former schoolteacher in the program area) approved the official, regional BIE curriculum and committed to sustain the capacity-building interventions that had been launched through the EDUBIMA project. EDUBIMA established a website that contains the curriculum materials, and which focuses heavily on the process for introducing these. This new curricula has raised the motivation and performance of the children from these indigenous groups.

Though EDUBIMA ended in May and was duly evaluated, CARE's strategic M&E task in this program is not primarily that of measuring individual educational attainment but of assessing the quality of educational reform. Since May, the changes recommended from EDUBIMA are being institutionalized in the government's educational policies and systems in Puno and Ancash, the two regions where this experimentation has been carried out. By scaling towards success at this regional level, the coalition fighting for full implementation of the national law's commitment to educational equity will be better positioned to hold the government accountable for its progress. The FLORECER network has been pushing the national government to take responsibility for producing an annual report on its progress in implementing this law, including reporting on the budget allocations made and how they have been used – both to increase the budget allocated to the implementation of the law, as well as to ensure its transparent use. Meanwhile, the network continues to return to the base, conducting additional research (for example, on the existence of a gender gap in secondary school achievement in rural areas) in order to challenge other orthodoxies and assumptions used to justify failures of comprehensive implementation.

Whispering through the forest⁴

Through the MEDARC team's efforts to track implementation of CARE's program quality standards, a

CI Programme Principle 3: Ensure

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⁴ This section features reflections by Claudia Sánchez Manríque, head affeatability and partificial features and Accountability), and with Jose Luís López, seek din store of the CARE-supported frupo Diálogo, which convenes a multistakeholder network around the extractive industries sector.

glaring gap appeared in the organization's pursuit (and enactment) of accountability to its full range of stakeholders. CARE International's <u>programme principles</u> call upon the organization to actively promote accountability to its most marginalized stakeholders. Yet there were few safe channels for participants to communicate their concerns, questions or complaints to the organization. In responding to the 2007 earthquake in southern Perú, the country office created several avenues for feedback – including a toll-free telephone hotline in Spanish and Quechua, the language of the indigenous peoples. Bolstered by this experience, and before redoubling calls for state and private actors to increase accountability for their own levels of transparency and participatory engagement with poor communities, CARE Perú decided it needed first to put its own house in order.

To guide development of a national system of accountability (RdC, for Rendición de Cuentas/Rendering of Accounts), the country office recruited Eliana Cano, a psychologist and recognized leader in social processes from the national women's movement. Her task was to undertake a two-year process of experimentation to make CARE's work truly open to the scrutiny and feedback of those it claimed as partners and beneficiaries. She began by working with the regional teams in Ancash and Huancavelica, two of the poorest regions in the country, where various of CARE Perú's programs were present. During the first year, the teams focused on building understanding of the value and critical pathways of accountability, through pilot experiments, consultation and reflection. Based on the lessons of that year, Eliana and team drafted a methodological guide for any agency seeking to develop relevant accountability mechanisms, and proposed an RdC system suited to CARE Perú's vision, values, and positioning. This system ensures four key elements of an accountability system to be monitored by the Country Office's existing organizational performance system, and to which staff and leadership would be held accountable. These elements are:

- Transparent provision of information about program goals, operations, and achievements, in accessible formats and public forums
- Assurance of participation in decisionmaking to all stakeholders
- Management of complaints and suggestions
- Quality management systems, including policies, processes, and organizational structures designed to support accountability and responsiveness.

To operationalize this system, in 2009 the Country Office established an Accountability policy within its organizational Code of Ethics, and undertook to train staff in each office to manage the RdC system effectively, striving to attend to any feedback received within 21 days. Five regions and 40% of the programming came online in that first year of operationalization of the system, generating 300 complaints and suggestions that have served to validate the utility of the system, and introduce important adjustments to field operations. After Eliana's departure in 2011, the work of institutionalizing the system has been taken up by Nelly X, who had led the Huancavelica team's RdC learning. Nelly has worked to develop a handbook, website, and video on RdC, and brought a useful field perspective to questions of accountability, participation, and program quality. Alongside the new community feedback mechanisms, programs teams now provide overviews of their work and plans to communities in public forums, and encourage their active participation in shaping the work. The 300 calls to the toll-free hotline that this system generated in the first year enumerated unfulfilled pledges by local government, partners and CARE's own frontline staff, and allowed the office to identify a systemic weakness in the induction of short-term staff to organizational standards of work. The RdC now serves as an important mechanism for bringing staff plans and self-assessment of organizational performance into contact with the unfiltered views of participants and partners, and for ensuring that action is taken and conveyed to stakeholders in order to improve performance. It also, however, has made it clear to local government and partners that they, too, can be well-served by implementation of systems for greater transparency and accountability.

It has not taken long for news of the RdC innovation to spread. CARE's Latin America regional office sent Nelly to Haiti, to help establish a relevant system in the wake of that country's devastating earthquake and prolonged disaster response. CARE's Central America office will be next. Meanwhile, in Ancash, CARE is engaging with the regional government to support their development of stronger systems of public accountability.

And here is where the non-linearity of programmatic approaches becomes starkly clear. In the early years of the new millennium, Peruvian civil society was already mobilized in confrontation with the multinational corporations seeking to exploit the country's rich mineral wealth. LABOR, an environmental organization, was engaged in direct and violent confrontation with local agents of these extractive industries, and José Luís López was one of their frontline activists. Disillusioned by the inability of all social groups to participate in this form of confrontational strategy, José Luís left LABOR in 2005? joining CARE in constituting Grupo de Diálogo Minero – a multistakeholder network for nonviolent action on conflicts, opportunities and accountability in the extractive industries sector. José Luís describes the spirit of Grupo de Diálogo: "CARE served as a bridge, seeking meeting points, where the barriers to joint problemsolving could be overcome." The lessons of LABOR's social change strategy fed directly into this new social form, providing space for relationship- and trust-building which are the essential engines of positive action at the moment of accepting accountability. In this way, Grupo de Diálogo is a vital ingredient in translating the power of CARE's Rendimiento de Cuentas system to a more entrenched level of social conflict. Two years ago, having noted the effectiveness of a local association's work to rank the transparency of government entities, CARE Perú approached Grupo Propuesta Ciudadana with the idea of their also undertaking such a ranking of companies in the extractive industries sector. With the small sum of \$25,000 supported by a CARE UK innovations fund, Grupo Propuesta has produced three years worth of semi-annual reports on industry performance, which have commanded attention in the public and in government circles, and among the ranked enterprises themselves. Combining carrot (Grupo de Diálogo and its positive networks) and stick (Grupo Propuesta and its critical truth-telling reports) the RdC principles are moving out of the CARE laboratory, and into the real world.

CARE Perú has been approached by several of the country's most profitable extractive industry companies who seek to improve their relations with communities in mine areas. In contexts of extreme poverty, the operations and profits extracted by mining and other extractive industries elicits deep mistrust and resentment, and, as in the Bagua massacre of anti-extraction protestors in 2009, runs the risk of exploding into deadly conflict. CARE Perú's gamble, aided by its growing reputation for transparency and accountability, is that they can build robust systems whereby community interests and concerns can be adequately developed and effectively communicated to the company agents. Local representatives of the industry conglomerates, in turn, have demonstrated over time their interest in becoming a more transparent and accountable player in local development. To address a deep mistrust between communities and mining agents, CARE Perú is now negotiating a one-year agreement with Anglo-American to build a "linking leadership" capacity (liderazgo articulador) among the key players in the mining sector (state, civil society, community leadership, and extractive industry), based on relationships, capabilities, and agendas that have emerged from the Grupo de Diálogo. CARE staff are moving carefully in this next stage of engagement with the deep tensions surrounding exploited lands and resources - relying on the principles that have underlain the organization's transparency and accountability efforts: recognition of the independence of all stakeholders, commitments to vibrant and sustained dialogue aimed at learning and accountability, investment in robust and equitably accessible mechanisms for monitoring, reporting, and resolving issues of potential harm and conflict, and the right of any party to dissolve and denounce the agreement.

III. Building Information Systems for Learning and Accountability

When considering the kinds of information systems and knowledge management practices needed to support diverse stages and objectives of program learning, it is instructive to recognize the multiple uses of program information. In CARE Perú's nutrition intervention, a very structured learning system helped to show how different interventions linked together could bring about a broader based reduction of malnutrition in the poorer rural regions of the country. The education team's hypothesistesting form of research design addressed particular political obstacles to policy change—by disproving "common knowledge" about the resistance of rural teachers to using Quechua as a medium of instruction, the team denaturalized ethnocentric assumptions, and radically altered the nature of the work that followed. In the internal accountability work CARE Peru seeks information in a much more inductive, intuitive way to pick up clues as to what is going on as program relations develop over time. Very different information and learning systems have to be built to facilitate each of these strategic uses, and social processes within the organization and with its stakeholders serve to knit the streams of knowledge together.

CARE Perú's program learning systems today encompass at least three functions of information, and manage the tensions between them. These reflect three ways the development industry values information:

- 1. as currency the traditional use of monitoring and evaluation data, to legitimize an organization's efforts by showing the value obtained in terms of numbers of people affected in various ways. Two forms of information have traditionally weighed heavily in the use of information as currency numbers of lives improved, and proof that the improvements are attributable to the organization's interventions. Traditionally oriented towards retaining and gaining funding, this now expands to legitimate the organization as a worthy partner, subcontractor, advocate or mediator. In this process it becomes less and then unimportant as to what change can be directly attributed to CARE's work. Of much more consequence is the contribution CARE is making with others to broader processes of social change that address deep seated inequalities and injustices. (For instance, in the nutrition work, CARE's role is as a convenor, and this role is recognized as such by network partners, government and donors).
 - Thinking of knowledge/information as currency, a key question for rights-based social change narratives is the question of whose information is accorded value, in producing an account of interventions and effects. If knowledge s currency, how can alternative knowledges be accepted as "legitimate coin," and what incentives do dominant actors in development have to hear, let alone fund, the production of counter-narratives of development?
- 2. **as course-corrector** the alleged value of monitoring information, tied closely to planning and goal achievement by showing where targets are on track to be met, and where efforts are flagging or derailing. While monitoring budget burn rates and activity logs can indeed keep a project on task, monitoring of predetermined logframe indicators seldom leads to adaptation and innovation in programming for the very reason that it constitutes a form of contract to deliver fixed results. For both the first and second uses of information (as currency and course-corrector), the starting underlying assumption is attribution of change to the organization's efforts. To this end, information is structured along lines of scientific inquiry, using quasi-experimental design, built on linear views of cause, effect and control. Both remain important in the responsible NGO's learning agendas, because there is much terrain that has already been mapped, and lessons we should already have learned.

• We must also recognize an inescapable truth: much of what we should have learned through the demonstrated failures of development is willfully overlooked as models of limited value (or tremendous harm) are replicated. Are these primarily failures of information design (tracking the wrong story, ignoring undervalued information)? Are they political lapses (reflecting the development organization's ability to sweep away lessons that challenge its role and expertise)? Are they institutional design questions (gaps and lapses in the handoff of information between the multiple layers and worldviews through which it must pass in order to influence implementation)?

These first two forms of information relate to accountability for pre-identified goals and milestones – a form of accountability that grows more complicated in rights-based programming for several reasons. First, because the range of factors (direct and indirect) that can shape the sustainable attainment of human rights is much broader and more interlinked than those reflected in traditional project design and measurement – pre-implementation analysis now regularly identifies multiple hierarchies of *cause* to be addressed, and multiple intended and unintended *consequences* to be monitored. Second, because the range of *stakeholders* is understood to be broader and far more diverse than the traditional range of stakeholders for development monitoring and evaluation; beyond satisfying funding agents, program success now rests at least partially on reflecting *and* shaping the knowledge of actors ranging from state actors to social movement activists, working from community to international levels.

The volume and diversity of information that must be tracked in order to fulfill just these two uses of information can be overwhelming for traditional, centrally driven database models of organizational learning and knowledge management — they often result in information warehousing, where data is collected, but not mined for meaning on an ongoing basis. In most organizations, when attempts are made to build such systems, the efforts commonly collapse because of the sheer unmanageability of this weight. Within CARE, the Perú team's tremendous strength has been in developing excellent systems for harvesting the first two forms of monitoring information on a regular bases, and for managing it in one information system so that it is readily accessible and able to be analyzed at the levels of projects and programs, regions and nation, and by sector or cross-cutting priority theme.

Together with the LAC regional team, the Country Office has identified strategic subsets of knowledge that must be harvested to serve each end, and created tools, timetables, and social processes adequate to each end. These are integrated by technology where possible. For example, faced with the inability of CARE USA's basic management software to integrate information on programmatic quality of proposals and evaluations, as well as projects, CARE Perú developed the SGP, a simple, excel-based program with modules to track proposals, projects, organizational performance and learning information (OPL), and project-level monitoring and impact indicators. Another of the team's efficiency-seeking moves has been to use and improve the government's own information systems, as in the case of the national nutritional interventions – which provides important traction when engaging in policy advocacy.

Although CARE Perú has been tremendously innovative in seeking efficiencies, staff still do face huge pressure to fulfill the information requirements for the multiple forms of accountability that they have developed. In the medium term they will need to rationalize further in order to develop a system that is able to meet these different learning and accountability requirements, but remains manageable within the resources that they and their partners (including government where relevant) can muster. In the longer term, it may behoove the organization to question the knowledge politics that underlie its

multiple, and ordered, accountabilities – ultimately honing in on learning relations with the greatest potential for accelerating society-wide change.

It may be that the greatest leverage of knowledge in CARE Perú comes from a range of commitments to *using* and *making transparent* the information coming in – through regular processes of strategic review at project, region, program, and national levels, and through reporting (internal and external, in face and via web 2.0 and printed media) in order that the information become part of an open dialogue of sharing, feedback, and improvement of performance. The country office's current frontier, and perhaps its most strategic one, is its current effort to use information in a third important way:

- **3.** as compass and clues increasingly we hear calls to treat interventions as learning experiments, and to scan unfolding processes actively for evidence that "something interesting" is happening in order to examine it for lessons about how it can inform new pathways of social change. In this view social change work, information is valued, less for its ability to confirm what we already expect, but to reveal relationships we do *not* expect acknowledging that we do *not* have an accurate "map" of pathways of rights-based social change, we move from the image of map and course-correction to one of compass and clues. CARE Perú's accountability system (RdC) is a perfect example of an effort to generate clues and suggest directions in which the organization must innovate knowledge which it was unable or unwilling to incorporate in planning at the outset, but which becomes central to progress as learning and stakeholder relationships become solidified through implementation.
 - Empowering and equipping those at the frontline to value creativity as much as consistency, and to identify and unpack "most significant changes" is but one of the ways that CARE Perú is trying to foster real-time learning and transference of key lessons within the organization and across coalitions. In this effort, time, resources, and the flexibility to modify strategies and even measures of success are key resources that, while hard to come by in a given project, become more accessible in a program approach where timeframes are longer, interventions interweave, and multiple actors carry the learning forward across the diversity of channels available to them.

IV. Boundary questions for the flexible: Learning agendas to watch and ask, "What happens if..."

CARE Perú has clearly made dramatic shifts in its ways of being, and in its understanding of its role in the achievement of a more just social, political, and economic order. These shifts have, indeed, been managed with caution, leveraging the credibility it enjoyed as the fruit of the organization's most valuable resources: a track record of service, innovation, and self-criticism; staff deeply rooted in their nation's culture and politics and outraged by its injustices; and networks of allies nurtured across diverse cultural and institutional spaces. In the examples above, several insights are already clear, and worth recording here as strategic resources to be cultivated and extended:

- Principles that travel these three diverse examples all leverage bedrock principles of a rights-based approach, to guide work on diverse and nonlinear frontiers. For example, once the mechanisms for internal accountability were in place internally, CARE Perú realized that they had something that could travel to others, eg, public authorities, mining companies, as a programmatic strategy.
- Collective intelligence each case shows to meet the imperative to learn beyond one's means. Reversing the pattern of control laid by such influential knowledge-brokers as the World Bank, a pattern emerges of learning alliances, where CARE is not leader, but engages with others and inserts ideas/energies/resources into currents that reach far beyond its own capacities, even as it also takes away insights and lessons from others.

Messages, messengers, and the audiences that shape them – If persuasion is the central force in social change, then relationships matter, and persuasiveness is as much a function of social positioning and identity as it is of budget or technical expertise. The multiplicity of audiences that must be engaged to achieve system-wide change means that effective advocacy may have to give up a measure of control, in order to leverage the diversity of a network/movement. In the end, for society in all of its diversity to embrace sweeping changes, it is unrealistic to expect one message, and one messenger, to be the way forward.

These lessons are valuable, and their extension already represent enormous challenges to the existing norms and power relations built into traditional, funded development. However, in order for Perú's national future to transcend the limitations of standard prescriptions for development, organizations like CARE will have to step ever farther away from the failed, but reassuringly consistent, strategies of the past. Current political pledges to embrace bold new pathways for change notwithstanding, the basic architecture of donor-funded aid offers development elites few incentives to support organizations in challenging its basic assumptions and relations of control. As it moves forward with its most trusted allies, along untested pathways of change, CARE will be making gambles on a day-to-day basis, some with very high-stakes, and with little certainty of the odds. It will be critical, in this context, to sustain effective spaces and processes for learning in real-time "what works" (and for whom, and with what consequences). Some of the key horizons of strategic learning to watch, and with which to guide the pace and direction of strategy evolution, include:

- Identity politics: Given its historical identity, what range of roles can the organization play effectively – and what is the process and pace of persuading others of a changing identity? How does an agile and multifaceted player maintain its institutional coherence? How does it span constitutencies when confronting injustice requires taking sides?
- Resource politics: What role do resources play in sustaining transformative social change efforts? Where are the surprises resources not imaginable in our current mindframe of budgets and bureaucracies? If resources for social change flow around, rather than through CARE, what does it mean to be an NGO? Can a selfless organization survive in a market model?
- Knowledge politics: Which stories shall be told, and why? Who decides what the narratives of development and social change will be which effects get recorded/shared, and which get obscured? Who are the important audiences? Who is the legitimate storyteller, and what is CARE's place in the emergence of narratives that counter the silencing of marginal voices?

Conclusion

As the consultancy that launched this report began, Perú had just elected the government of Ollanta Humala, a populist cipher of a politician with roots in both the country's military institutions and its indigenous communities. One of the first agenda items the CARE Perú core team had marked out for the upcoming meeting of the Expanded Leadership Team was an exploration of what the new political terrain promised for Perú's poor, and for the initiatives that CARE had undertaken to support them. Given how carefully the CARE Perú program has sought to build relations across the web of diverse, and often contending social actors shaping the country's development, such moments of rising above the fray, and repeatedly questioning assumptions are essential to the organization's ability to effectively read and respond in strategic ways. However, pushed a bit deeper, perhaps to the edge of professional and institutional comfort zones, they can also be a chance to more deeply rethink personal and organizational assumptions about how change happens, and what the role of an INGO can be.

Today, as the report is finally laid to rest, CARE Perú has even more reasons to quickly, and deeply, question those assumptions. Donors in North America and Europe are mired in political crises that expose the true costs of neoliberal corporate capitalism. The moderate reformism of "good governance" and "corporate social responsibility" programs are challenged by a logic of outrage from the Cairo's Tahrir Square to New York's Zuccotti Park. At a minimum, donor pullbacks from their financial resource commitments means that operational viability is at risk for client NGOs. More deeply, NGOs will have to examine their ideological resources, recognizing where they have tuned out important critiques in their search for accommodation and compromise, and confronting the cultural and structural forces that can distort their ability to learn without distortion, and to act upon what they learn.

Supported by an organizational leadership that increasingly embraces this perspective on learning and accountability for social change, CARE Peru's central monitoring, evaluation, design and accountability team plays a key role in introducing multiple models for achieving 360 accountability, and then creating a testing and learning system around the experiments. Built into the MEDARC team's operating philosophy is the credo never to be satisfied with where they are now, but also seek to improve the way that achievements can be demonstrated and forms of internal and external accountability can be strengthened. Still more unique is the team and entire organization's track record of stepping back from the details of one experiment, to ask what relevance it might have for the larger organization and, indeed, for the larger development process.

Peru's experience emphasizes the fact that no organization can thrive by following one cookie cutter approach to strategy, learning or accountability. In responding to world that is constantly generating new possibilities and obstacles, models must be imagined, tested and modified in real time. Organizations capable of doing this are those that maintain a clear understanding of the principles guiding their direction, use that clarity to navigate and nurture transparent relationships among diverse and often contending actors and interests, and use a range of information streams in ways that are guided by the directions required by these orienting principles and relationships.

Annex 1: CARE Perú Organizational Performance Monitoring/Evaluation System

	Learning Mechanism	Learning Focus	Audience/Goal
Institutional	National Strategic Impact Framework (2009-2015)	Context analysis, underlying causes of poverty, theory of change, program strategies, cross- cutting themes.	CARE and partners
	Organizational Performance Campaign (Campaña OPL) (Proposals, projects, evaluations, Project management, governance, human resources, strategic alliances, and finance) Since 2007	Human Resources/ Finance/ Technology Program Quality (program principles in proposals, projects and evaluations) Resource Mobilization "How do they See us?" survey.	All data enters the SGP (national project/proposal information management system) – for internal use to improve management, and to the public via: Web 2.0, the Impact Report, the Annual Report, program brochures, and public forums.
	Organizational Annual Operating Plan Expanded Leadership Team Directive Quarterly	What else? Agendas for the future.	
	Annual Report / Annual Impact Report	Progress and achievements, organized by Millennium Development Goal.	
Programmatic	5-10 Year Program Strategy (Roadmap) (As of 2011, seven are complete – pending are HIV/AIDS, Emergency/risk management, and Extractive industries)	Context of analysis, problem/gap analysis, underlying cause analysis, external consultations, theory of change, change vision/goal with milestones and indicators, SWOT analysis, identification of responsible actors, review of organizational experience and lessons learned, mapping of partners/alliances, resource mobilization, talent management, capacity-building, monitoring, evaluation and learning	
	Annual performance review by program (Since 2007)	Synthesize information from OPL by Project, and rating progress using the Program Quality Assessment Tool (PQAT)	
	Annual identification of	Qualitative search for	With SGP/OPL data, this

	Most Significant Change	strategic or unexpected	informs internal discussions
	(since 2009, collected	changes upon which	to modify the program
	mid-April- mid-May)	programs can innovate. At	strategy, and provides
		times, these are identified	cases for reports (ie,
		as underlying causes of	Annual Report) and
		monitoring data, at times	external advocacy.
		these lie outside the	
		existing monitoring frame.	
	Thematic studies and	Documentation and	For CARE and partners to
	strategic evaluations of	analysis of unexpected	better understand the
	program intervention	dynamics in the program	dynamics driving desired
	models.	environment, and/or	changes, and/or validation
	(as needed)	promising models. Often	of models/methods that
		carried out by/with	promise high contribution
		external partners and key	to achievement of the
		accountable public/private	MDGs, for scaling up or
		entities	institutionalization.
	Semi-annual review of		
	Program Annual		
	Operating Plan		
Projects	Annual analysis of CARE's	Quantitative data tracking	Rolled-up through SGP, for
	Project Information	progress against project	project, program, and
	System indicators	hypotheses and cross-	national-level analyses.
		cutting themes.	
	Annual analysis of OPL /	Each project completes	Project team reviews to
	program quality	Schedule A (Proposals) and	identify promising practices
	information	Schedule B (Projects), on	and areas for improvement
	(Since 2005)	incorporation of the CI	in coming fiscal year.
		program principles.	
Accountability	Continuous collection of	Evaluation of RdC system	RdC Web 2.0 portal, field
	feedback on CARE's	implementation:	comment cards, field
	management practices,	information, transparency,	feedback registers.
	and their alignment with	participation and dialogue.	
	CARE's core values and	Complaints	
	program principles.	Quality management	

- **Program Strategies** (participatory processes of defining a program strategy, with a well-defined theory of change and a common methodology for program design in CARE Peru by 2015 and 2020: 7 programs.
- Program Annual Operating Plans and annual review workshops with the program team (progress
 monitoring matrix, program team meetings to analyze program strategy achievements: context,
 processes promoted, innovations and lessons generated by models, processes of scaling up and
 advocacy, strategic alliances, resource mobilization, program quality results)
- Project-based progress measurement matrix, by program (Impacts, results, activities. Results consolidated annually for annual report 2007-2008 and 2009
- **Program Quality:** OPL tools (A,B,C) through measurement of program principles (anual reports by Project and analysis by the Expanded Leadership Team and program team).RBA Facilitators' network to lead integration of these themes in each program.

- **Program Quality and Management and alignment with the 8 characteristics:** Program Quality Assessment Tool from UBORA (design and implementation) annual (December or June)
- Qualitative impact: Most Significant Change (annual). Mapping of change processes with high potential for promoting learning. Developing more targeted monitoring and evaluation processes to investigate and evaluate these changes in greater detail (2009-2010)
- Model impacts (or projects en route to becoming models): Evaluation of results and impacts (combination of qualitative and quantitative methods to measure results and impacts of strategies, lessons, costs and recommendations for future processes)
- Scaling up models: Expandnet methodology and accompaniment of scaling processes with partners and allies
- Annual progress reports by Project in the SGP (Achievements during the period, lessons learned, main results obtained, others. This information feeds into organizational reports (Annual Report, Web, brochures, etc). MEP model.
- **Resource Mobilization** through SGP and entry of proposals to the system and monitoring of funds, donors, trends and others. Analysis in Expanded Leadership Team.
- **Program evaluation criteria matrix** (implementation, financial viability, value-added for the organization in the country, the region, the world)

Annex 2: Process of developing CARE Perú's program focus

2007: Adapt and implement the LACRMU system for Organizational Performance and Learning (OPL). Claudia went to Ecuador to learn how they had implemented the OPL. On her return to Perú, held a series of presentations on the logic of OPL, to establish a sense of its positioning in the organization, at a systemic level. Tools are the original ones developed by LACRMU, which analyze various cross-cutting themes and quality indicators at project levels, and by administrative department.

2008 – 2010: facilitate processes of developing theories of change. Followed the same basic steps with each team.

Propose strategy roadmap for each program. This is an important change in terminology, leaving behind the less-dynamic concept of "project strategy." A roadmap suggests that there will always be strategic options to be weighed, which can be explored beforehand, but that only in the moment, by taking informed risks, will we know if they are pathways suited to the moment and the context.

Meeting where the program team reviews the roadmap – collecting the reactions and suggestions from field, headquarters, and partners/allies.

Develop a series of tools for applying the OPL system at the program level, which did not yet exist. In April/May/June we launched an "OPL Campaign," applying the tools as a learning exercise with each team. In June we presented the results of this campaign, and collected feedback (for example, the need to reincorporate the project level, in order to disaggregate strengths and weaknesses in each one and thereby refine efforts to improve or disseminate its results).

Monitor the roadmap – at project, program, and Country Office strategy levels. For this systemic overview:

- 1. Core management team (every two weeks) convening 8 people: Assistant Country Director/Programs, Director Human Resources, Director Finance, Director Administration, +??.
- 2. Expanded Leadership Team (every quarter), convening 38 people: core management team plus one representative of each program, one representative elected by each regional office, one representative from the social equity team, the RdC officer, and the head of the MEDARC unit (planning/learning/evaluation). These are 3-day meetings:
 - Day 1: dedicated to discussion of a strategic theme of importance, with outside expert participation (eg, electoral prospects in the country and their significance for programs);
 - Day 2: dedicated to capacity-building in the team, preferably through a day spent in collective field-based review of one program, to build a collective sense of how the programme principles are being put into practice;
 - Day 3: review of key OPL areas, such as the state of resource mobilization by program, financial management, organizational evolution.

Annex 3: Framework of themes to build a program strategy (roadmap)⁵

To develop each chapter, which together constitute the program strategy, we have worked 5 stages:

- Initial stage of preparing input for the workshop
- Workshop with experts to define the situation and workshop with the program team for joint analysis and definition of the strategy components (theory of change, SWOT analysis, organizational experience)
- Follow-up workshops with core team and program coordinator to adjust and identify a set of inputs for each team.
- Dissemination of the strategy for feedback and inputs in the program coordination team
- Final adjustments to the document

The methodology for building the program strategy has drawn on various methods of reflection and analysis, as well as the use of various instruments/formats, developed with the program coordinator and the program team. The duration of this process has varied based on the team's time availability.

Guide to Program Strategy Document contents

I. Context Analysis

Key questions for this chapter: Where are we, what is the current situation and what opportunities exist to bring about changes? What is the context facing the strategy? What goal do we seek to reach?

- 1. Organizational contexts for CARE International, CARE USA, and CARE Perú Strategic framework for CARE Perú and underlying causes of poverty analysis, and links to strategic priorities in CARE LAC, CARE USA, CARE International
- 2. External context (International, national, sectoral) for the strategy theme -
- Presentation of the current situation (status of problema, statistics that signal gaps in the theme that the strategy proposes to address).
- Summary of comments and feedback by experts on the strategy themes and the gaps to be addressed (summary of presentations from invited representatives of government, civil society, and private sector)
- 3. **Strategy SWOT analysis:** Identification of opportunities and threats in the strategy context, identification of strengths and weaknesses in the team and the implementing organization.
- 4. **MDG and national targets/indicators that define strategic impact:** Identify national and global indicators to which we aim to contribute, as well as goals the strategy seeks to reach.

II. Design of program strategy and mechanisms for linking with other program strategies in CARE Perú

Key questions for this chapter: Why are we (still) this way? What is the problem and the change we seek? What should actors do to achieve change? How do we contribute to the actors' efforts to achieve change? How do we work and link with others?:

- 1. Analysis to identify the underlying causes of poverty that block the strategy's goals, from the perspective of the strategy
- 2. Identify and construct the strategy's theory of change, based on the identified underlying causes:
- Identification of the main problema (linked to the identified UCPs)

⁵ Based on CARE Perú experience in this process, and the construction of program strategies from FY2008-2009

- Identification of the desired change
- Identification of WHAT social actors should do to achieve the change
- Identification of CARE's role and the strategies CARE should follow with each actor to contribute to achieving the change goal.
- Establishment of strategic objectives related to the three lines of strategic intervention (pilots/models, scaling processes, advocacy)
- 3. Establishment of hypotheses that underpin the theory of change
- 4. **Prioritization of actions and work with social actors for advocacy processes** (defining who we focus our attention on and why, in order to achieve the desired change, based on the matrix of priority actions by actor)
- 5. Identification of areas of synergy/intersection with other CARE Perú program strategies

III. Review and analysis of our organizational experience

Key questions for this chapter: What is our organizational experience? What have we learned to date?:

- 1. Historical reconstruction of organizational experience related to the strategy theme
- 2. Lessons learned
- 3. Identification of strategies and models that have been validated by projects what we have and what we need: Matrix of achievements/progress regarding the development of pilots/models with impact, processes of scaling up, processes of advocacy and ways of addressing underlying causes of poverty in light of the proposed strategy themes.

IV. Defining strategy management

Key questions for this chapter: How shall we organize ourselves? What goals do we want to reach? With whom should we work? What capacities do we need to improve as a team? How many resources do we need to raise/generate in order to manage the strategy? What do we want to learn from this process that we could contribute to others in the organization? How do we contribute so that others learn?:

- 1. Institutional relations (Identification of partners, allies and networks current and potential that would contribute to achieving the desired change, identifying the level of relationship we have with each (positioning)
- **2. Financing and resource mobilization strategy** (identification of funders, goals and lines of work to be integrated in proposals, in line with strategic goals)
- 3. **Identification of talent and competencies** (Defintion of the human resource profile needed to implement the strategy) and identification of capacities to be strengthened within the team
- 4. **Definition of the strategy's management systems/processes** (organization and workstyle for the program team, establishment of spaces of reflection and analysis regarding the program team's progress on strategy goals)
- 5. Planning, Monitoring, evaluation, learning and accountability:

- i. Defining indicators for effects and program strategy AOP, and alignment with projects underway
- ii. Definition of the program strategy's monitoring and evaluation plan, aligned with the use of instruments and findings of the Organizational Performance and Learning system (OPL)
- iii. Identification of lines for strategic organizational learning and social learning and knowledge management
- iv. Rendering accounts: Identification of processes to exercise accountability towards program participants.

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Definition of a Program

A program is a coherent set of initiatives by CARE and our allies that involves a long term commitment to specific marginalized and vulnerable groups to achieve lasting impact at broad scale on underlying causes of poverty and social injustice. This goes beyond the scope of projects to achieve positive changes in human conditions, in social positions and in the enabling environment.

Defining Characteristics of a CARE Program

CARE believes that in order to achieve significant and lasting impact on poverty and social injustice, especially on women and girls, all of our programs should include the following characteristics:

- 1. A clearly defined **goal** for impact on the lives of a specific group, realized at broad scale.
 - The program must define what "broad scale" means, but, in general, we mean at least at national scale or for a whole marginalized population group.
 - Impact should occur across three areas of unifying framework (human conditions, social position, enabling environment).
 - Impact should be seen and evaluated over an extended period of time.
- 2. A thorough analysis of underlying causes of poverty, gender inequality and social injustice at multiple levels with multiple stakeholders.
 - "Multiple levels" means community through global.
 - Analysis includes scenarios based on potential risk (including disaster risks).
 - Analysis identifies and prioritizes the causes that MUST be addressed in order to achieve the goal.
 - This analysis is updated regularly to incorporate changes in context.
- 3. An explicit theory of change that is rigorously tested and adapted to reflect ongoing learning.
 - A theory of change outlines the key assumptions and hypotheses that underpin the program design.
 - The theory should be robust enough to be applicable in various scenarios of risk.
- 4. A **coherent set of initiatives** that enable CARE and our allies to contribute significantly to the transformation articulated in the theory of change.
 - At a minimum these initiatives will challenge power relations, achieve systemic changes in institutions, work at multiple levels, contribute to policy change.
- 5. Ability to promote **organizational and social learning**, to generate **knowledge and evidence** of impact.
 - Evidence and knowledge will be used for advocacy, risk analysis and mitigation, adapting the theory of change and leveraging resources.
- 6. Contribution to **broad movements for social change** through our work with and strengthening of partners, networks and alliances.
 - This means clearly understanding and strengthening our organizational credibility, legitimacy, identity and positioning.
- 7. A strategy to leverage and influence the use and allocation of **financial and other resources** within society for maximizing change at a broader scale.
 - This requires protecting and developing our knowledge and talent base, demonstrating impact and cost-effectiveness of strategies, and building new types of donor relationships.

- 8. **Accountability systems** to internal and external stakeholders that are transparent.
 - To the marginalized groups whose rights we seek to see fulfilled.
 - To allies and partners, including donors and governments.
 - All staff are accountable for their contribution to the program.
 - Stakeholders have the information they need.