



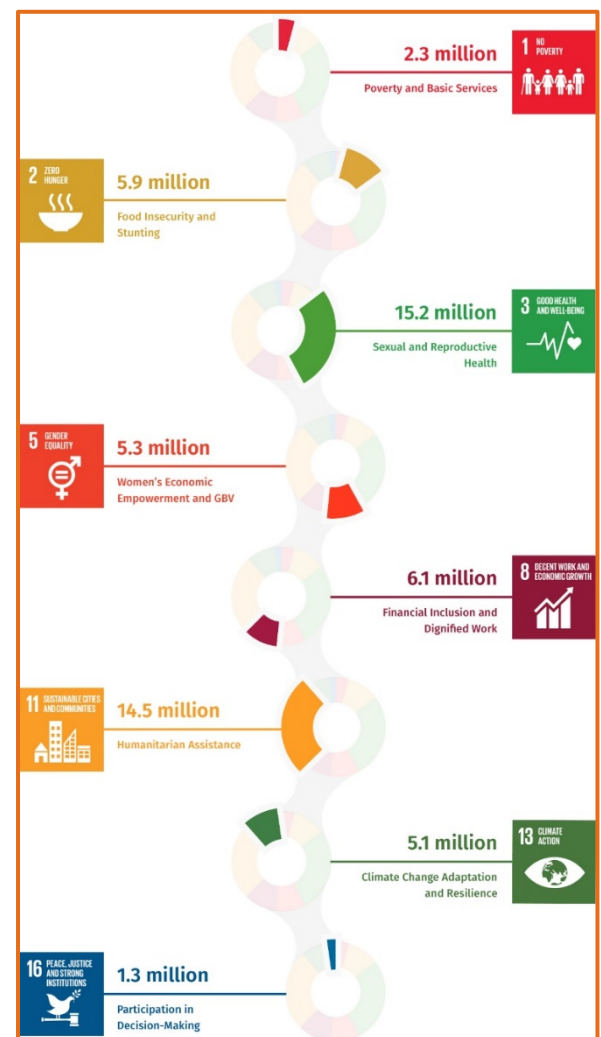
CARE's SDG Impact

CARE and Partners' Contributions to the Sustainable Development Goals

Introduction and methodology

CARE's [2020 program strategy](#) aims to help tackle the underlying causes of poverty and social injustice, as part of global efforts to meet the Sustainable Development Goals (SDGs), adopted in September 2015. Since then, CARE and partners have contributed to positive impacts for **45.8 million people** (70% of whom are women and girls). This represents data from 2015 to 2018, reported by 713 projects and programs in 74 countries.

The figures come from CARE's global Project and Program Information and Impact Reporting System (PIIRS). Data is drawn from external [evaluations](#) or project Monitoring, Evaluation and Learning (MEL) systems, reporting against 25 [global indicators](#) aligned with the SDGs. Our [approach](#) to MEL is based on the understanding that in addition to CARE and the partners we work with, there are always many other stakeholders (communities, governments, NGOs, private sector, etc.) contributing to change in the dynamic and complex contexts in which we work. In that sense, we prefer to talk about our **contribution** to change, rather than claiming CARE's work alone led to any given change (or "attribution").



Note: Some people experience positive impacts in more than one area, as CARE's programs often work to promote change towards multiple Sustainable Development Goals.



SDG 1: No Poverty

Much of CARE and our partners' work focuses on supporting marginalized and vulnerable people to escape from poverty and improve their access to basic services such as education, health, or water and sanitation¹. In line with SDG targets [1.1](#), [1.2](#) and [1.4](#), CARE projects have enabled over **2.3 million women and men, girls and boys**, in 16 countries, to get out of poverty or improve their access to basic services. This includes:



Helping close to 170,000 people escape poverty, as measured by the international poverty line (\$1.90 a day - SDG 1.1) and over 265,000 people escape poverty as measured by national poverty lines (SDG 1.2) in 9 countries. For example, the Social and Economic Transformation of the Ultra-Poor ([SETU II](#)) project in Bangladesh contributed to reducing poverty by 95% (100% to 5%), enabling 142,096 people to escape poverty. The [Shomoshti](#) project, also in Bangladesh, has contributed to reducing poverty by 16% (from 81% to 65%), enabling 128,142 people to escape poverty.



Supporting over 2,050,000 people to access basic services (54% women and girls), an increase of nearly 19 percentage points, in 12 countries. For example, the [Chagua Maisha](#) Project in Kenya helped increase access to HIV testing or treatment services for 774,370 people, while the [ZPCT II](#) project in Zambia did so for 472,881 people (58% women and girls).

Donors and Supporters

The changes reported in these pages are thanks to the generosity of many different public and private donors and supporters:

- Governments, including the United States, United Kingdom, Canada, Germany, Australia and Norway (16.3m people with positive impacts or outcomes)
- Foundations, such as the Bill and Melinda Gates Foundation and the Sall Family Foundation (13.7m)
- Multilateral donors, including United Nations, the European Commission and the World Bank (7.1m)
- Corporations, including Mastercard, Glaxo Smith Kline (GSK), Barclays, Proctor & Gamble or Cargill (1.9m)
- Other donors, such as anonymous or private donors and CARE's own unrestricted funds (7.1m)

They also are due to the invaluable collaboration and partnership with communities, Governments, and local and international civil society and private sector actors in over 70 countries.

¹ These also contribute to SDGs 3 (Good Health and Well-Being), 4 (Quality Education), 6 (Clean Water and Sanitation), SDG 10 (Reduced Inequalities) and SDG 17 (Partnerships for the Goals). While we report on SDG 3 below, in future reports, we also aim to report in further detail on SDGs 4, 6 and 10 in future.



SDG 2: Zero Hunger

Rising food and nutrition insecurity is a defining challenge of the 21st century, fuelled by poverty, conflict and increasingly climate change. For this reason, CARE has made food and nutrition security and resilience to climate change a priority area for our work. Since 2014 CARE has helped nearly **5.9m people** to increase their food and nutrition security, across 23 countries, contributing to SDG targets [2.1](#), [2.2](#), [2.3](#) and [2.4](#) including:



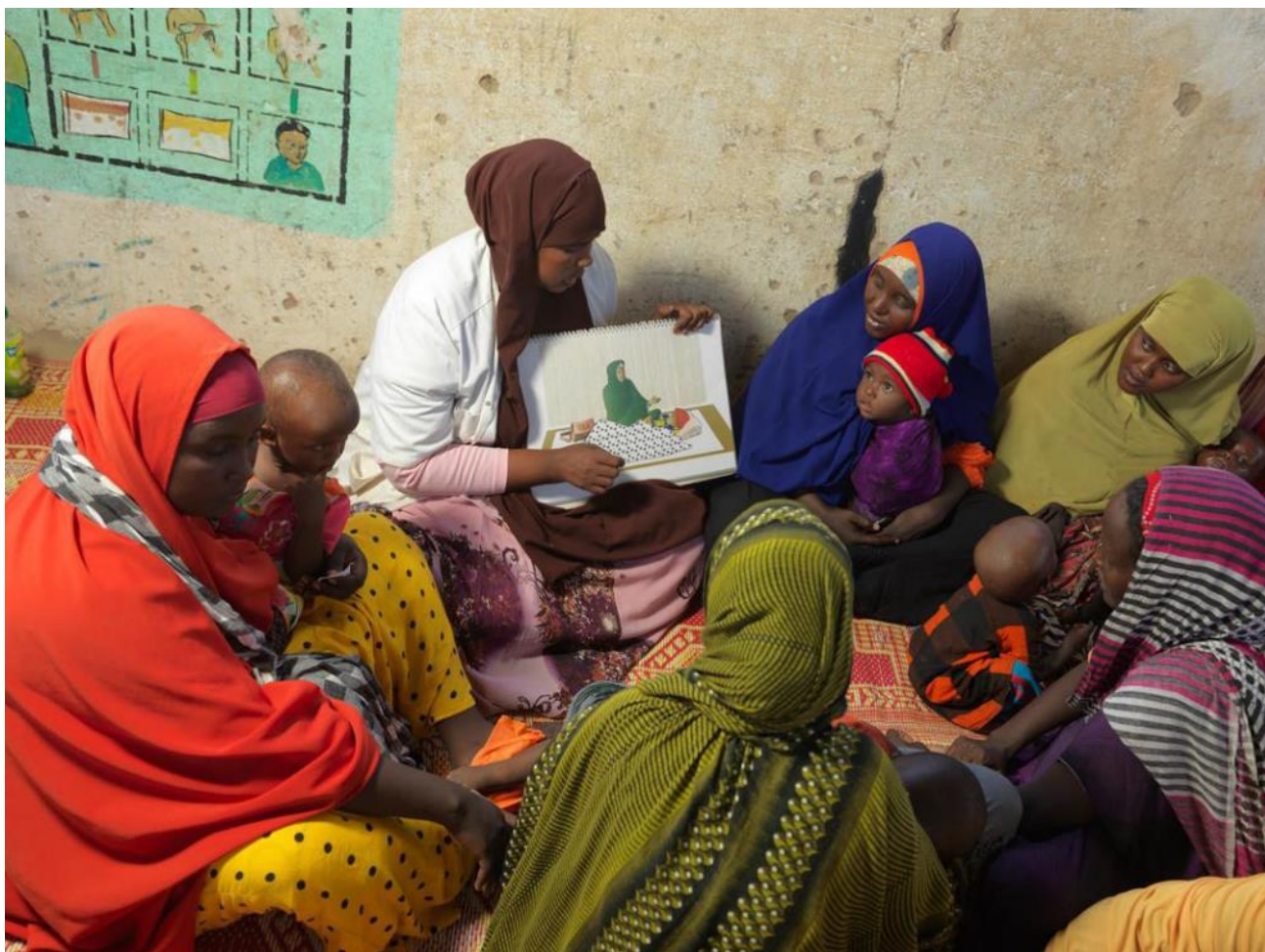
Contributing to reducing food insecurity for close to 2,905,000 people, in 20 countries. This includes the USAID Agricultural Extension Support Activity project in [Bangladesh](#), that contributed to reducing food insecurity by 49% (from 70% to 21%), increasing food security for 181,041 people.



Contributing to over 1,180,000 children under 5 escaping chronic malnutrition (stunting), an average reduction of 1.3 percentage points per year, in 13 countries. The Child Malnutrition Initiative in [Peru](#) contributed to reducing stunting by 11% (from 23.2% to 12.2%), enabling 1,130,469 children under 5 to escape stunting. [SHOUHARDO II](#) in Bangladesh contributed to reducing stunting by 12.9% (from 62% to 49% - a reduction of 2.6 percentage points a year), enabling 25,249 children under 5 to escape stunting.



Contributing to nearly 720,000 people improving other measures of nutrition or food security, in 11 countries. The Integrated Family Health Initiative in [India](#) helped increase exclusive breastfeeding for 488,549 children, while the Scaling Up Nutrition ([SUN](#)) Fund project in Zambia contributed to improved access to nutrition services for 60,015 people.



SDG 3: Good Health and Well-Being

CARE's programs seek to create the conditions – personal, social and structural - that enable all individuals to realize their Sexual and Reproductive Health (SRH) rights, based on principles of equality, non-discrimination and accountability. CARE supported close to **15.2 million women** to exercise their rights to sexual, reproductive and maternal health, across 27 countries, contributing towards SDG targets [3.1](#) and [3.7](#), and [5.6](#). This includes:



Contributing to over 8,410,000 women accessing modern contraceptives, and close to 8,235,000 births attended by a skilled attendant, in 17 countries. In our Technical Support to the Government of [Bihar](#) project, in India, CARE helped increase use of modern contraceptives by 3.9% (from 33.9% to 37.8%) and the proportion of births attended by skilled health personnel by 5% (from 68.4% to 73.4%), enabling a total of 10,456,623 women to exercise their SRH rights.



Contributing to over 400,000 women (aged 15-49) making their own informed decisions regarding sexual relations, contraceptive use and reproductive health care, an increase in levels of sexual and reproductive health decision-making of 26 percentage points in 18 projects, across 14 countries. CARE's [SAFPAC 3](#) project in the Democratic Republic of Congo contributed to increasing women's own informed SRH decisions by 47% (from 40% to 87%), enabling an additional 107,346 women to make informed decisions.



Contributing to over 300,000 disaster/crisis-affected people, and over 265,000 women and girls, to access at least one SRH service, across 11 countries. CARE's UNFPA II project in Syria enabled at least one SRH service for 72,316 people. The [SRMH and GBV Emergency Response](#) in Bangladesh helped 20,000 people access SRH services, 4.2% of those requiring assistance.



SDG 5: Gender Equality

CARE puts women and girls in the centre because we know that we cannot overcome poverty until all people have equal rights and opportunities. All of CARE's programs seek to strengthen Gender Equality and Women's Voice, while Women's Economic Empowerment is a vital dimension of CARE's work, addressing the factors that undermine women's equality. CARE's programs measure changes in women's access to and control over economic resources, such as access to financial services and women's household decision making, as well as attitudes towards and levels of Gender Based Violence (GBV). Since 2014 CARE has helped nearly **5.3m women and girls** to increase their levels of empowerment or equality, or to exercise their right to a life free from violence, across 57 countries, contributing to SDG targets [5.1](#), [5.2](#), [5.5](#), [5.6](#) and [5.A](#). This includes:



Contributing to close to 325,000 additional people rejecting intimate partner violence (IPV) and reducing by nearly 130,000 the number of ever-partnered women and girls subjected to physical, sexual or psychological violence, in 13 countries. [SHOUHARDO II](#) in Bangladesh contributed to increasing the proportion of people who reject IPV by 39% (from 25% to 64%), enabling an additional 238,684 people to reject violence.



Supporting close to 4,655,000 women to access informal financial services and over 520,000 women to access formal financial services, in 55 countries. CARE's Village Savings and Loans Association ([VSLA](#)) model, has expanded from one country in 1991 (Niger) to 78 countries around the world in 2018, through CARE and other organizations. CARE and partners alone have helped over 5.7 million people join VSLAs, 82% of them women. The [LINK UP](#) project in Kenya, for example, supported 109,485 women to access formal financial services.



Contributing to an increase of close to 375,000 women reporting being able to participate equally in household financial decision-making. As part of our project with [Hand in Hand](#), in Rwanda CARE contributed to increasing women participating equally in household financial decisions from 23% to 80%, enabling an additional 32,303 women to have control over economic resources.



SDG 8: Decent Work and Economic Growth

Much of CARE's economic empowerment and food and nutrition security work focuses also on contributing to improving conditions in the workplace ("decent work") and on increasing economic opportunities and capacities. Since 2014 CARE has helped nearly **6.1m people** to increase their economic empowerment, across 55 countries, contributing to SDG targets [8.3](#) and [8.5](#), including:



Helping over 5,730,000 men and women and youth to access community savings groups, in 47 countries.



Contributing to an increase of over 95,000 women with membership of a union, women's group, or cooperative through which they can voice their labour rights, an increase of 45 percentage points in 13 countries. CARE's [Equal Value, Equal Rights](#) program in Latin America, for example, has so far helped 33,449 domestic workers increase their awareness of their rights, across 5 countries.



Contributed to improved economic empowerment of over 180,000 women, in 19 countries. Promoting Opportunities for Women's economic Empowerment In Rural Africa ([POWER Africa](#)) contributed to increased employment for 61,274 women in Cote d'Ivoire and 48,059 women in [Burundi](#). The USAID Agricultural Extension Support Activity Project in [Bangladesh](#) contributed to increased capabilities to perform economic activities for 32,663 women.



SDG 11: Sustainable Cities and Communities

SDG target 11.5 aims to reduce the number of deaths and the number of people affected by disasters, with a focus on protecting the poor and people in vulnerable situations. When emergencies strike, CARE and our partners work to meet people's basic needs: shelter and protection, food, safe water, access to health services and livelihoods. In line with SDG targets [11.5](#) and [1.5](#), CARE projects have since 2014 reported quality humanitarian assistance for nearly **14.5 million women and men, girls and boys**, in 41 countries. This includes:



Supporting over 987,000 disaster and crisis affected people to obtain adequate emergency shelter and/ or recover adequate housing, in 23 countries. For example, our [RESPONSE](#) Project for food and cyclone affected populations in South-East Bangladesh provided shelter for 108,127 people (51% of whom were women and girls).



Supporting nearly 4,780,000 disaster/crisis-affected people to have access to safe drinking water, in 25 countries. CARE's Emergency WASH response to drought-affected communities in Borena in Ethiopia enabled access to safe drinking water for 500,000 people (53% women and girls).



Supporting over 4,860,000 disaster/crisis-affected people to obtain adequate food, in 19 countries. For example, our [Emergency Cash First Response](#) to Drought-affected communities in the Southern provinces of Zimbabwe enabled the provision of adequate food for 400,279 people.



Providing cash or voucher assistance to over 1,370,000 people, in 18 countries.

SDG 13: Climate Action

Given the increasing impacts of climate change that are already being felt around the world, CARE and our partners work to build people's resilience and their ability to take actions to reduce their vulnerability to risk. Increasing resilience is part of CARE's core approach, applied across all our programs. Additionally, CARE advocates on climate action in global (e.g. UNFCCC) and national policy spaces to multiply our impact. In line with SDG targets [13.1](#), [13.2](#), [13.3](#) and [1.5](#), CARE projects have helped increased resilience for nearly **5.1 million women and men, girls and boys**, in 32 countries. This includes:



Helping increase ability to build resilience for close to 1,500,000 people, in 22 countries. The Adaptation Learning Programme for Africa ([ALP](#)) in Ghana, for example, contributed to increasing ability to build resilience for 333,466 people, while the [GRAD](#) project in Ethiopia helped increase the ability to build resilience for 82% of participants (266,500 people).



CARE helped nearly 4,100,000 people actively engage in reducing their vulnerabilities to the drivers of shocks and stresses that affect them. Strengthening Livelihoods through Community Adaptation and Learning ([SLCAL](#)) in West Bank & Gaza contributed to increasing by 25% (from 20% to 45%) the proportion of people actively engaged in reducing their vulnerabilities, increasing resilience for 469,281 people. The Southern Madagascar Drought Relief and Risk Reduction Program contributed to 455,916 people being actively engaged in reducing their vulnerabilities.

SDG 16: Peace, Justice and Strong Institutions

Along with strengthening Gender Equality and Women's Voice and increasing Resilience, the third element of CARE's approach, applied across all our programs, is promoting Inclusive Governance. We systematically apply markers, for [gender](#), [governance](#) and [resilience](#), to track the integration of these approaches, and encourage program teams to share best practice and see where they can adjust their plans to better integrate the CARE approach. In addition to our [global impact indicators](#), aligned with the SDGs, CARE has also worked to embed indicators which track the impact of this approach, to help us understand the change we have contributed to on critical factors like women's leadership, and resilience to risk. Methods like the Advocacy and Influencing Impact Reporting ([AIIR](#)) tool are allowing us to more effectively understand and quantify the impact of our advocacy work. In line with SDG target [16.6](#), CARE projects have since 2014 reported increased participation or positive influencing on policies, programs and budgets for nearly **1.3 million women and men, girls and boys**, in 35 countries. This includes:



CARE contributed to an increase of over 460,000 people participating in formal or informal decision-making spaces, in 34 countries. Ghana's Strengthening Accountability Mechanisms ([GSAM](#)) project enabled 671,880 people to participate in formal or informal decision-making spaces (42% women), an increase of 93,440 people. The Implementation of Social Accountability Framework ([ISAF](#)) project in Cambodia enabled 22,392 people to participate in formal or informal decision-making spaces (58% women), with 294 people in new leadership positions (53% women).



CARE and partners successfully influenced policies, laws, budgets and programs, from local to international levels, in 125 projects, in 43 countries. [CARE Madagascar](#) influenced the Disaster Risk Reduction policies and programs of Government and others, enabling over 750,000 people to take action to reduce their vulnerabilities. In [Egypt](#), CARE and partners influenced policy and practice to criminalize denial of inheritance rights for women. Working with the Egyptian government and partner organizations, we have helped more than 1,000 women to claim over \$4.4 million that is rightfully theirs.