

Section B

WHO THE PROGRAM IS FOR



CARE’s programs are built around a specific poverty-affected and vulnerable impact group. CARE Rwanda has identified two impact groups it wants to work with: vulnerable women (VW) and orphans and vulnerable children (OVC), around which it has developed its two programs. This section describes the vulnerable women impact group.

The impact group

CARE International identifies impact group as follows: “The impact population group for a program is the specific population group (or groups) whose lives should show a measurable, enduring improvement as a result of the program. The impact group should be at least at national level (including work with partners, and policy advocacy – not just through massive community-based service delivery). It should also be larger than any subset group directly impacted by an individual project or initiative within the program.”¹⁰¹

In its Vulnerable Women Program, CARE Rwanda and its partners work with those women most likely to face challenges in demanding and securing their rights. The core impact group for this program includes **vulnerable women of reproductive age**. In saying this we do not seek to exclude girls or older women from participating in the program, and our experience suggests that spill-over benefits from program activities for both these groups are likely. However, we also recognize that girls under the age of 18 and women over reproductive age have particular needs that this program is not designed to address. The former group are the concern of CARE Rwanda’s OVC program, whilst other organizations active in Rwanda have the mandate and specialist expertise to support the latter.



Our current focus lies on women living in **rural areas**. Poverty is largely, though not exclusively, a rural phenomenon in Rwanda. Despite a recent acceleration, Rwanda still has one of the lowest urbanization rates of Africa, with 85% of people still dependent on subsistence agriculture as their main livelihood. In rural areas women find it hardest to access critical services and are most exposed to violence and abuse. Nevertheless, with increasing urbanization, levels of poverty and vulnerability in cities are expected to rise. Whilst focusing on rural poverty, CARE Rwanda remains alert to needs and opportunities to work in urban areas, which will then be based on additional needs analysis.

Drivers of vulnerability

Through its situational analysis CARE Rwanda has identified a number of drivers of vulnerability. Women meeting one or more of these criteria are considered vulnerable for the purposes of CARE’s program, although in reality these drivers are closely associated and most vulnerable women face more than one of these challenges. We recognize that this list is not complete and does thus not cover all vulnerable women. This is a conscious decision, based on the analysis of our and other’s strengths. For example, other organizations are much better placed than CARE to work with women with disabilities in Rwanda and as such they are not among CARE’s impact group.

The drivers of vulnerability include:

- **Poverty**
Poverty is the main factor limiting women’s ability to assert and exercise their rights. It limits their access to basic needs, socio-economic opportunities, services, and has a negative effect on their position in society, including their opportunities to participate in decision-making, access to information, etc. Development

¹⁰¹ CARE International, P-shift Glossary of Terms, <http://p-shift.care2share.wikispaces.net/Glossary+of+Terms>, cited 28 March 2013.

policy and actors in Rwanda refer to a system of community-defined ‘ubudehe’ poverty categories¹⁰², and CARE’s program focuses on women in the three poorest categories.

- Marginalization
This group includes women who are socially excluded, or pushed to the margin. Their economic, social and political participation in public life as well as their access to services are severely limited. Marginalized women include women who may face stigma and discrimination because of who they are, such as women from the Historically Marginalized or Batwa community, or what they do, such as commercial sex workers. It can also include women who for various reasons live their lives outside a ‘traditional’, culturally and legally sanctioned marriage relationship with a husband, including widows, women with husbands in prison, single mothers, and women in polygamous or informal marriages.
- Remoteness
Even in a small country with good infrastructure such as Rwanda, distance from urban centres or main transport routes can severely constrain access to basic services, economic opportunities, information and opportunities to engage with institutions or participate in decision-making etc., and thus limit the ability of women in remote areas to access and enjoy their rights.
- Women who experience GBV
These women have already experienced a severe violation of their rights and may face further rights violations as a result of marginalization (see above) or health problems.

It must be stressed that, of course, there is no formula to vulnerability. The above criteria provide a guide, but CARE and its partners’ beneficiary selection is based on participatory processes with communities, taking advantage of local knowledge to identify community members for whom these factors combine in ways that create vulnerability and limit women’s ability to access and enjoy their rights.

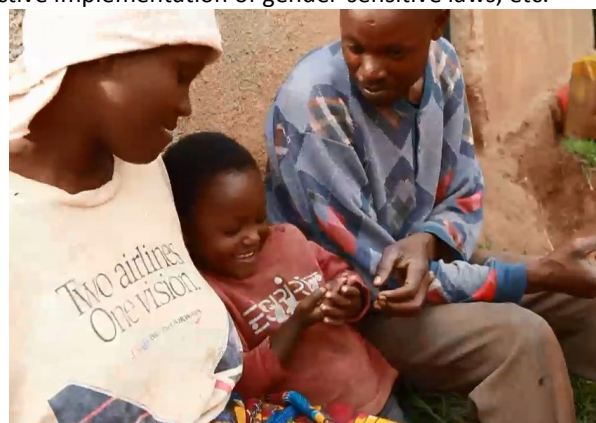
Target groups

In order to support vulnerable women to claim their rights, CARE and its partners do not work only or mainly with women. We recognize that the involvement of many others is needed in order to actually have an impact. CARE International defines target group as follows:

“The target population group is the group we directly work with or engage so that we can achieve our desired impact on the lives of the impact group. This group is targeted because its participation helps ensure that the impact group benefits. The target group may also benefit from the program, but is not the group whose lives we ultimately seek to change and against whose improvement we measure our success.”¹⁰³ For example, men who have participated in the ‘Journeys of Transformation’¹⁰⁴ to become engaged in women’s empowerment, stated to have also benefited themselves, for example through increased financial security and harmony in their household.

CARE Rwanda’s target groups include (but not necessarily be limited to) the following groups:

- Duty bearers from the national to the local level
CARE works in close collaboration with the government. Our objectives include to coordinate our work with the government’s policies and programming, to build capacity of policy implementers and service providers on gender and related topics, to advocate for the effective implementation of gender-sensitive laws, etc.
- Community members, especially men and boys
Men are a culturally influential group in society, and define for a large part the social position of women and girls. As such, improving women’s social position (an integral part of the program’s theory of change, see section C1 in ‘What the Program does’) cannot be done in a sustainable way without engaging men and boys. CARE’s programming with men and boys focuses on challenging negative social norms and behavior. Although the primary objective is to develop a social environment that supports women’s empowerment, the approach of



¹⁰² All Rwandans are classified into six poverty categories, using criteria based on people’s perceptions of what poverty in their community looks like.

¹⁰³ CARE International, P-shift Glossary of Terms, <http://p-shift.care2share.wikispaces.net/Glossary+of+Terms>, cited 28 March 2013.

¹⁰⁴ See section C2 for more information on ‘Journeys of Transformation’

engaging men also aims at improving men's situation and reducing those vulnerabilities based rigid masculinities and gender roles.

- Opinion leaders, such as religious leaders

Those whose opinion is highly regarded in society have large influence on what is accepted and what not. These people are therefore specific part of any programming that aims at raising awareness and/or challenging negative norms and behavior. For example, experience has shown that it is instrumental to include religious leaders in any programming around family planning. Getting them on board by discussing the link between religious and health-based FP messages allows them to contribute positive changes, while not involving them creates the risk of contradictory messages, which would hinder progress.

- Civil society organizations and movements, including the media

CARE Rwanda sees the capacity building of Rwanda's civil society as one of its objectives to ensure sustainability of its programming. This includes but is not limited to our partners organizations, and focuses on those civil society organizations with whom we (partly) share the same impact group.

- Financial institutions and private sector actors

Women's economic opportunities can be strongly improved by linking them to financial institutions and private sector actors. At the same time, such cooperation can be advantageous to the FIs and private sector actors as well. CARE Rwanda works with these groups to help them identify and make use of the opportunities to work with vulnerable women, while ensuring that this is done on the basis of positive rules of engagement, safeguarding the interests of the impact group.

CARE's VW program focuses on the whole of rural Rwanda. This section explains the rationale behind this nation-wide focus.

CARE Rwanda wants to be ambitious and have an impact on the lives of vulnerable women in rural areas nation-wide.

There are several reasons for this nationwide focus:

- Above all, Rwanda is a small, homogenous country. Vulnerable women's challenges in one province do not considerably differ from another province, neither in type nor in scope, making CARE's programming relevant and necessary in the entire country.
- In its the program approach, CARE is committed to increasingly work together with partners and allies. This means that working at national scale does not imply a heavy logistical footprint of sub-offices etc., as in many cases our partners already have this infrastructure. In other cases, other NGOs work with the same impact group. Even if we do not implement our activities together or in formal partnership, these NGOs become our allies who help us achieve the change we foresee in our theory of change.
Working together with partners and allies also means that our models and other knowledge can be used by many different actors, while we at the same time benefit from their knowledge. This contributes to our efficiency, which allows us to have impact at a large scale.
- Over the last five years through the ISARO program, CARE and its key partners have gained valuable experience in scaling up its approaches across the Southern Province, and are now ready for a further scale-up.
- An increasing focus on advocacy enables us to impact large numbers of women without any direct community contact, by influencing for example the design and delivery of government programs or services. Notwithstanding the recent program of decentralisation, Rwanda remains relatively centralised, particularly in terms of the mechanisms of accountability. Each District Mayor, for example, has a personal performance contract with the President, which means that successful advocacy at the national level can have an immediate and powerful effect at local level.
- Poverty is largely, though not exclusively, a rural phenomenon in Rwanda. Despite a recent acceleration, Rwanda still has one of the lowest urbanization rates of Africa, with 85% of people still dependent on subsistence agriculture as their main livelihood. Rural areas are where women find it hardest to access critical services and are most exposed to violence and abuse. This is why the VW program focuses on rural Rwanda. Nevertheless, with increasing urbanization, levels of poverty and vulnerability in cities are expected to rise. CARE Rwanda therefore remains alert to needs and opportunities to work in urban areas. To this end, a situation analysis for urban areas is foreseen for 2016.

Having a national focus does not mean that we allow ourselves to be superficial in our work. The Vulnerable Women Program entails a commitment over a long time period, and CARE Rwanda remains dedicated to achieving real and sustainable change there where it works.