

ANNUAL REPORT 2015





First lady advisor visited from Medica Afghanistan group counseling session at women's garden | © Medica Afghanistan

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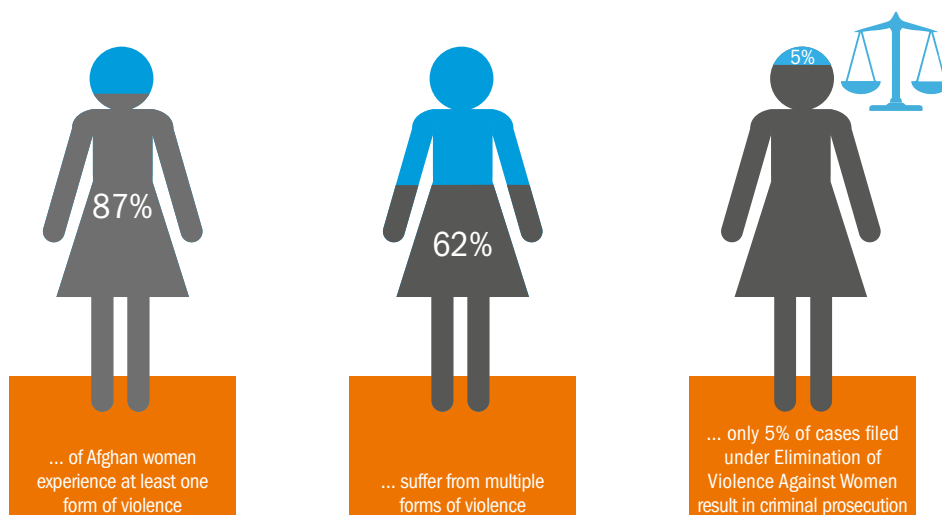
Humaira Ameer Rasuli, MA Executive Director © Medica Afghanistan

EXECUTIVE DIRECTOR'S MESSAGE

The four decades of prolonged armed conflict across the country has contributed to significant levels of instability, insecurity, violence, weakness of rule of law, poverty and underdevelopment. These factors have obstructed the effective realization and enjoyment of human rights for people of Afghanistan. Afghan people have not had the right to live, to access liberty or security, especially women and children suffered the most and they continue to face severe challenges in realization of their basic rights.

The dominant culture in our country considers violence against women as a family issue and thus it is mostly not accounted for as a prosecutable crime. Women face massive sexual and other forms of gender-based violence (SGBV) by family members as well as in society as a whole – which sometime results in femicides. Domestic violence is a silent tsunami that nobody is acknowledging, but it is killing women. It is something we do not want to see since it takes place within families. It is our responsibility to stand by the victims of these atrocities and to restore their dignity and to help survivors play an active role in the democratic society of Afghanistan.

2015 was filled with critical challenges for Afghanistan, mainly security, political and economic. Security has become a big challenge for Afghanistan. The number of Afghan civilians killed and wounded passed 11,000 in 2015 - the highest number recorded since the United States-led intervention 15 years ago. The peace process is not going well and the government is heavily depended on foreign aid and around 40 per cent of the population lives under the poverty line. Thousands of people left the country due to insecurity and escalation of violence and many lost their employments and job. The international community has not only started withdrawing troops but has also drastically reduced funding thus reducing the capacity of the Afghan CSOs' capacity to function efficiently. The lack of local support and an inadequate number of competent individuals with the CSO compounds the problem. As such, women's rights organizations are unable to significantly influence policy makers. While there are some established networks of women's rights advocacy and organizations in Afghanistan, they lack systematic cohesion.



The government affirmed its commitment in order to ensure the protection and participation of women, yet it has failed to take steps to enforce policies, laws and action plans, putting women and girls in highly vulnerable situations. 87% of Afghan women experience at least one form of violence and 62% suffer from multiple forms of violence. Reports reveal that only 5% of cases filed under Elimination of Violence Against Women (EVAW) result in criminal prosecution even though the violence incidence registration has shown an 28% increase from 2012 to 2013.

The legal system, which is required to provide protection and justice for women, is poorly equipped to do so. Judges and prosecutors are poorly trained. Advancing women's basic human rights is written on paper but ignored in practice. Cynicism against women is part of the general attitude, not an exception. There are frequent cases of re-traumatization caused by disrespectful and often aggressive behavior on the part of police officers, prosecutors and judges when dealing with the survivors of rape or other forms of extreme violence. These cases of re-traumatization often go unnoticed and unreported. Victims of SGBV are often blamed for what happened to them. Security and legal professionals explain to women that rape and corporal punishment are the rights of their husbands or that women's clothing, posture and behavior are the reasons for sexual assaults they experienced. Such views are usually justified with references to the Quran and Sharia, although they are against the laws and religion.

Despite all the challenges, our team continues its work with creativity, commitment and perseverance. Our colleagues – in Kabul, Herat and Mazar provinces – have managed to provide legal and psychosocial support to more than 2000 survivors of SGBV and trained hundreds of professionals in social, legal, education and health fields on multiple issues related to ramification of violence against women. Besides providing direct services to women, Medica Afghanistan also advocated for better protection of women's rights. We lobbied on a political level to make the laws more gender responsive, incorporated women-friendly articles into the Family Law, provided input for Criminal Code to make it gender responsive, modified marriage certificate and campaigned for registration of marriages in order to prevent child and forced marriages.

I am grateful of Medica Afghanistan staff members for their persistence and excellence in implementation of programs and activities. I am more grateful than ever to all our clients for their courage and unshakeable belief to bring positive change in their lives.

For the foreseeable future, survivors of violence and terror seeking help from our staff will have to rely on international goodwill and private donors. If you are interested in learning more about ways to get involved in this endeavor, we invite you to visit our website: www.medicaafghanistan.org.



One billion raise (OBR) gathering | © Medica Afghanistan

OUR MISSION

Medica Afghanistan is a non-profit, non-governmental Afghan women's organization working towards the elimination of violence against women through the provision of legal aid, psychosocial support, capacity building and advocacy. It seeks to improve the quality of women's lives through direct psychosocial and legal services, while also raising awareness and building capacity in the fields of health, education, and law. Medica Afghanistan is headquartered in Kabul with sub offices in Mazar e Sharif and Herat provinces.

OUR VALUES

- » We are women working for women
- » We believe in unconditional solidarity with women
- » We work inclusively with all women irrespective of ethnic, class, religious beliefs, age or other differences
- » We respect human rights
- » We take an active approach to women's rights
- » We work in a culturally sensitive manner
- » We believe women affected by a decision must be involved in the decision-making process
- » We strengthen women's self-esteem

In all our works we are guided by integrity, transparency, accountability, and a holistic approach.

We aim to end violence against women by:

- » Providing the highest quality, inter-disciplinary legal and psychosocial services for women
- » Increasing women's knowledge of their rights
- » Increasing women's confidence and self-esteem
- » Advocating for implementation of laws to improve women's lives
- » Changing the discriminatory attitudes towards women
- » Working with governmental and non-governmental agencies to address issues of violence against women

OUR HISTORY

Medica Afghanistan was established in 2002 by *medica mondiale*, a non-governmental organization (NGO) based in Germany providing holistic support to women victims of sexual violence in crisis zones around the world. Addressing many forms of violence against women. *medica mondiale* Afghanistan was the first women's organization in Afghanistan to offer psychosocial counseling to women survivors of violence and the first to provide it to women in prison. It was the first to offer legal assistance to women accused of crimes or involved in civil disputes.

It was the first to train professionals, from hospital doctors to defense lawyers about trauma sensitive approach. It was the first to provide evidence of linkage between child marriage and domestic violence – and to take action to end these practices.

In December 2010, Medica Afghanistan registered with the Afghan Ministry of Economy and since then operates as a self-contained national organization, run by Afghan women for Afghan women. For the past fourteen years, our team of health professionals, lawyers and human rights advocates has been able to assist thousands of traumatized women and girls through a range of services including psychosocial counseling, legal representation, family mediation, social support, literacy education, and referrals for health care, economic opportunities, and other appropriate services as needed. Medica Afghanistan also builds capacity in the fields of health, education and law and seeks to raise awareness of women's rights and sensitize all those who deal with women at risk, regardless of gender. Medica Afghanistan offers advanced professional training to male and female lawyers, doctors, social workers, religious leaders, and police personnel on the multiple aspects and consequences of VAW (Violence Against Women). Medica Afghanistan advocates publicly and lobbies politically for women's rights with the aim of bringing long-term, sustainable change for women and girls within a peaceful Afghanistan.

OUR UNIQUE APPROACH

Medica Afghanistan is unique in important aspects. First of all, it is a women's organization led by women. All of our psychosocial counselors, lawyers, social workers, and advocacy staff are female. This is most important to the women and girls we serve who are reluctant to speak to male counselors, lawyers, or social workers about their problems. Secondly, Medica Afghanistan is providing the highest quality, inter-disciplinary legal and psychosocial services to women and girls survivors of SGBV.

We have specific expertise in provision of trauma sensitive psychosocial and legal services, which focuses on trauma and stress relief that is innovative in Afghanistan. In addition, Medica Afghanistan always combines direct services with advocacy on the societal and political level and has vast experience and expertise in the field of Legal Aid and psychosocial services. Medica Afghanistan has significantly contributed in development of many policies and strategies to better support survivors of SGBV in Afghanistan.

Medica Afghanistan's work adheres to quality standards established by international associations and is supervised by independent evaluators.



OUR CLIENTS

At the present we offer our direct legal, psychosocial, literacy education and mediation services to roughly over 2000 survivors of SGBV mainly from Kabul, Herat and Mazar, every year. Our clients of psychosocial and legal services are women and girls who suffer or have suffered from domestic violence including sexual, physical and psychological abuses, forced/child marriages, and harmful cultural practices. In addition, most of them have been denied access to health, education, employment, judicial support and other basic rights.

OUR TEAM

A motivated team of multilingual professionals carries out Medica Afghanistan's mission. Our team in Kabul, Herat and Mazar provinces consists of medical doctors, psychologists, lawyers and project managers. The psychosocial team has received intensive, highly specialized training in psychosocial counseling and trauma counseling. Medica Afghanistan's lawyers are registered with the Afghan Bar Association and are licensed. They're specialized and trained in women's human rights. They receive in-house and external training in Afghan Laws, Sharia Law, International Human Rights Law (including women's rights and children's rights), and legal defense.

Our social workers are recruited on the basis of experience in social work, especially with women and children. Working closely with our psychosocial counselors and legal aid lawyers, they receive advanced training in trauma work and human rights. In addition, our social workers

have received further training in government standards of social care from the Ministry of Labor and Social Affairs, Martyrs and Disabled (MOLSAMD). The ministry certified three of our staff members as master trainers, who received advanced training.

A MESSAGE FROM A NEW BOARD MEMBER:

It is my absolute pleasure to present to you Medica Afghanistan's 2015 Annual report.

As an organization I have always respected the work Medica was doing in Afghanistan, I have known people, amazing ladies who have worked with Medica for years, like Anne Jones and Belle Grau as well as Ms. Humaira Rasuli who has always impressed me with her knowledge and willingness to share information with Afghan Women whenever there was a need. Therefore when I was asked by her to join Medica's Board of Trustee I gladly accepted and now since a year I am a part of this great organization.

The other reason why I accepted to join this group as their Board member is the fact that Medica Mondale decided to make it an Afghan run and Afghan owned organization and changed to Medica Afghanistan, this is exactly the way to empower Afghan women by giving them responsibility and supporting them whenever they need help.

In the five years since Medica Afghanistan has taken the full responsibility, the year 2015 was in my mind the most challenging, with the number of Violence Against Women on the rise, Taliban attacking Afghanistan in a way which was unprecedented to previous years, a Unity Government which was divided, a year full of disappointments, by the government for not keeping their promise to Afghan People and a year full of insecurity. But despite all this Medica's team have been busy doing their work in the three provinces and taking care of the women who were (or are still) subjected to physical or psychological violence (including wartime violence)

Ms. Humaira Rasuli is the executive Director of Medica and together with her team of very competent ladies is taking Medica forward. The year 2016 will be another challenging year for everyone in Afghanistan, especially the Afghan women.

I also would like to extend my many thankful appreciation to Medica Team in the Provinces (Mazar-e-Sharif and Herat). Looking forward to year 2016 with all of its unforeseen challenges, I am confident Medica with its team shall overcome all the obstacles.

Mahbouba Seraj
Board Member, Medica Afghanistan.

WORKING FOR OUR CLIENTS

Psychosocial Counseling and Health Program: Ten psychologists and psychosocial counselors offer support to Afghan women affected by violence at easily accessible locations such as our counseling centers across the cities, women's shelters, governmental hospitals where we have counseling rooms, and prisons. Medica Afghanistan's psychologists also provide case supervision to psychosocial organizations and offer short-term counseling to bedridden patients during their hospitalization, especially those enrolled in the major surgical units and burn units in Kabul and Herat. We also offer crisis intervention to clients and medical professionals as needed.

Legal Aid Services: Focuses on addressing Afghan women's access to justice. We offer support with criminal defense, representation in civil proceedings, mediation, legal awareness, legal advice, social work, and safe family reintegration for to all women who are in need of legal services and are victims of violence.

Advocacy: Our advocacy work aims at pairing direct services with political lobbying with the Afghan Government and awareness raising within the society. Our advocacy program is designed to promote human rights and the rule of law through: a) exposure of human rights violations, b) community mobilization around human rights themes, and c) advocacy for law and policy reform at the national and regional levels in favor of women. Further, networking efforts are executed with multiple stakeholders including governmental, national and international civil society organizations.



One of MA literacy learners © Medica Afghanistan

Literacy and Learning: Medica Afghanistan provides literacy education classes for women and girls struggling to overcome trauma, violence or psychosocial challenges. Besides teaching reading and writing the classes contribute to women's empowerment by raising awareness about women's rights and basic healthcare. Literacy education improves women's quality of life and their families' lives in some of Afghanistan's most vulnerable, marginalized female-headed households. It enables women to practice better communication skills, reduce family conflicts, and exercise their right to take part in decision-making in a constructive manner.

Specialized Training Services: We offer a wide range of advanced professional training programs on Gender and Violence, Gender and Trauma-Sensitive Approach, Communications and Case Management, Basic Psychosocial Counseling Skills, Mediation Techniques, Legal Rights, Women's Rights, Violence Against Women, Prisoner's Rights, Registration of Marriage, and Peace-building. Our trainees are diverse including lawyers, police, judges, doctors, nurses, midwives, social workers, religious leaders, teachers, community elders, students, and staff of women-led organizations.

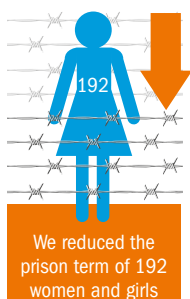
Public Information: In order to reflect our work and the impact we make in the lives of women in Afghanistan, we publish quarterly newsletters, annual reports, evaluation reports, and books. Our staff members attend media interviews to discuss our work and women's issues in Afghanistan. We have recently maintained an active social media presence as well.

Networking on National and International Level: Medica Afghanistan focuses on women, peace and security. We link our work domestically to international campaigns and advocacy efforts, helping to connect Afghanistan into global networks. From our grassroots work – serving our clients – we bring the voices of the vulnerable women to policy discussions and push for gender equity. Either as organizers or participants we attend forums, conferences, round tables and discussions around the rights of the survivors and addressing inequalities in the application of national laws in regards to women's legal rights. For instance, in 2015 we advocated for developing a law against torture and provided input for a national action plan on 1325 and another report, which was submitted to the UN Special Rapporteur on sexual violence against women in Afghanistan. In this sense, Medica Afghanistan has provided various concrete examples, as well as recommendations for improving the situation of survivors of sexual and other forms of gender based violence and the impact of war related issues.



Psychosocial group counselling-Medica Herat regional office | © Medica Afghanistan

MAIN ACHIEVEMENTS IN 2015



- » We reduced the prison term of 192 women and girls
- » We provided mediation to 362 families in domestic conflicts
- » We offered psychosocial counseling in group settings to 729 women who suffered from mental health problems
- » We provided on the bed counseling for 238 clients, who could not visit the counseling center due to disability and/or sickness or who were waiting for surgery and needed emergency counseling
- » We offered individual counseling for 672 women who suffered from mental health problems as a result of violence and trauma
- » We provided literacy education to 420 women and girls through our literacy education program
- » In cooperation with the World University Service of Canada (WUSC) we trained 144 teachers on reformed interpretation of women's rights in Islam
- » In cooperation with the Ministry of Religious Affairs we trained a total of 145 religious leaders on the registration of marriage as an important step towards elimination of child and forced marriages
- » In cooperation with German development Organization, GIZ we trained a total number of 110 police officers, lawyers and prosecutors on psychosocial related issues to respond adequately to violence against women and girls and strengthen coordination between judicial and police forces
- » We sensitized 69 police on women's rights, rights of the suspect, the accused, EVAW Law and the role of defense lawyers in the criminal justice system. The sensitization training was carried out to strengthen the referral system between police and Medica Afghanistan
- » We initiated 12 community based services to empower female activists and female survivors of violence
- » In cooperation with Danner Organization we trained 60 shelter staff
- » We trained 58 medical staff on the application of the trauma-sensitive approach while working with survivors of GBV
- » We provided training for 40 staff of legal and paralegal NGOs on the trauma sensitive approach, in a legal context, helping them identify the clients who suffer trauma and refer them to related agencies
- » We developed two training manuals on psychosocial and legally related issues and one manual on Islam and women's rights



OBR gathering | © Medica Afghanistan

PROJECTS OF MEDICA MONDIALE AFGHANISTAN

A) LOBBYING FOR EVAW LAW IMPLEMENTATION

Medica Afghanistan advocates for protection and implementation of EVAW (Elimination of Violence Against Women) Law. Our advocates organized and participated in all-day working group meetings, and released a position paper, posters and reports to inform about the importance of the law. In addition, our lawyers recorded the EVAW Law implementation by the justice system and kept track of the challenges and obstacles. We analyze the data and release the analysis on an annual basis.

We held a number of meetings with the United Nations Assistance Mission in Afghanistan (UN-AMA), UN, Ministry of Justice (MOJ), and the Ministry of Women's Affairs (MOWA) to report on our progress in regards to the implementation of EVAW Law. We recommended that a special EVAW court be established for managing violence against women cases. The Afghan Civil Society (ACS) role in this court would be to observe the performance of prosecutors and judges as per the EVAW Law. Likewise, there should be a new position created in this court for an adviser who would work independently, but in coordination with judges, to support the victims.

Fortunately, as a result of our advocacy, which began prior to our national conference on EVAW Law in November 2014, discussions at the government level have begun about establishment of EVAW courts as pilot project in four zones of Afghanistan is being considered before mainstreaming it into the formal court system in all provinces. Medica Afghanistan's advocacy activities contributed to establishment of EVAW special court in Kabul, Herat and Mazar.

Despite all our advocacy efforts the current status of EVAW law is at risk. On one hand the government integrated the punitive part of EVAW law in the new Criminal Code and on the other hand the Women Commission intends to bring EVAW Law on the agenda of the parliament. Parallel to this, civil society together with parliamentarians will continue to analyze the law on the basis of Sharia (collect arguments on how EVAW Law is not against Sharia).

So far women's rights activists have no clear and joint advocacy strategy to advocate for EVAW Law to remain as an independent law or to prevent integration of its punitive part under the Criminal Code. According to our observation below are the potential risks and opportunities if EVAW Law is integrated into the Criminal Code.

Opportunity: There are 22 ++ substantive EVAW provisions amongst hundreds of other provisions in relation to other areas of penal law. As such, there may be less room for opportunistic sensationalising of EVAW by Parliament and media.

(b) Specifics provisions committee / Parliament will have too much drafting and reviewing to do that their backlash might be less overwhelming.

(c) New penal law reform may provide opportunities to strengthen the phrasing of some EVAW provisions, like definition of rape.

Risk: ERAW Law articles might be changed – in order to reduce their effects – while being merged into the Criminal Code. The gender sensitive articles might not get the parliament's approval. As a result, these changes will jeopardize the existence of the ERAW Law or weaken it as it will be challenged by the conservative MPs, even as part of the Criminal Code. Secondly, the bifurcation of the law into preventive and punitive parts is not useful because of the lack of commitment and will in the concerned governmental bodies. It is doubtful that the members of the ERAW commission would respect the punitive part as a separate law and implement it. Given the persistent and high level of violence against women in Afghanistan the existence of ERAW Law as a separate and independent law is necessary. We are currently advocating to preserve the law as a separate one as it will become weak and lose its gender sensitivity after being integrated into the Criminal Code.

B) WHERE DO WE STAND IN REGARDS TO THE FAMILY LAW?

Medica Afghanistan advocated for ratification of the new Family Law to protect women's rights in the family. The previous Family Law, which is merged with Civil Law, entails discriminatory provisions, and violates women's basic rights. Some instances are, marriage age (16 for girls and 18 for boys), uncertain stance on consent to marriage, right to end the marriage, and

compulsory obedience of wife to the husband. Because the Family Law was not in line with Afghan constitution, and the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), which Afghanistan is committed to, a committee to reform the law was formed in 2008. Its participants included civil society activists, members of Supreme Court, the Ministry of Justice, Family Court, and the Ministry of Women's Affairs. Since its establishment Medica Afghanistan has been an active member of the committee. The draft of Family Law was completed in 2009 and since then Medica Afghanistan, along with ACS (Afghan Civil Society), has been passionately lobbying for its ratification.



Protest on Farkhuda's case © Medica Afghanistan

We together with ACS conducted a series of high level lobbying meetings with acting Minister of Justice; Ashraf Rasuli, the head of Criminal Law Reform Working Group (CLRWG); and Sarwar Danish, the first vice president of Afghanistan. Furthermore, we prepared an action plan for lobbying meetings on Family Law and shared it with the Technical Gender Working Group (TGWG), Family Law Reform Committee, International Development Legal Organization (IDLO) and other CSOs, so their activities can be aligned. The organizations agreed on the action plan. In a meeting with the head of the legislative department of MOJ and Mr. Rasuli, we were informed that the following issues in Family Law are still in debate at MOJ and are yet to be finalized: polygamy, marriage age, marriage conditions and marital rape, child custody and mandatory registration of marriage. They need to be analyzed from the perspective of Islamic principles before being sent to the parliament.

Internally, we compared the new Family Law with civil law in order to prepare justification for approval of the law. We had ongoing meetings with stakeholders to keep the topic of Family Law on the agenda of policy makers. As a result, the position paper of ACS (Afghan Civil Society) for Senior Officials Conference on Afghanistan and the UN Special Report indicate the necessity of ratification of new Family Law. The main challenge was lack of government and MOJ's clear and coordinated stand on Family Law. On the part of Afghan Civil Society, there is lack of coordination and solidarity due to incompetency and lack of funding. We continue our struggle to advocate for ratification of the new Family Law, which is respectful of women's rights.

C) PROMOTION OF REGISTRATION OF MARRIAGE (ROM)

Medica Afghanistan focuses on enforcing mandatory ROM and legal marriage age as a means to reduce child and forced marriages. We work at different levels to prevent and eradicate child marriage in Afghanistan.

Recognizing the important role of Mullahs in the Afghan society, Medica Afghanistan has identified these religious leaders as a key group to influence, hoping for a greater impact on gender norms and practices than through governmental laws and policies. We have carefully devel-

oped a concept to conduct workshops for mullahs on topics such as EVAW law, child marriage and gender. In 2015, we trained 52 religious leaders from Hajj and Religious Affairs Department, scholar's council and local leaders in Mazar and Herat on ROM. The topics included marital rights of women from Islam's perspective; benefits of ROM, introduction to a national marriage certificate and the process of registration of marriage; harmful effects of child and forced marriages; the importance of Mullahs' role in ROM and reduction of violence against women. Our justification for raising of the marriage age was that it is nowhere in the Quran that girls should be married at a young age. This was acceptable to our participants. They agreed that it is up to the Mullahs (religious leaders) to inform people of the legal stance of Islam in such cases as compared to the traditional stance.

Despite the fact that we were able to raise awareness about ROM and promote it, our trainers faced some great challenges. Some Mullahs made comments to our trainers such as, 'women's voices are sexy; they should try to speak in a harsher accent with stranger men.' Some training participants said that women have low capability and must not train men. They also said that women must travel with a Mahram, meaning male relative, or they will be sinners. Another comment was that women's income is haram, especially ones who work with foreigners and NGOs. Our trainers tried to either politely respond to those comments or in some instances just had to bear the comments they heard. At the end of the three days training in each course, the Mullahs accepted their roles in the promotion and protection of women's rights, but it remains unclear as to what extent they practice it once they are back in their communities.

Apart from this, our other challenge has been with simplifying the ROM process. It was quite time consuming for couples to get their marriages registered in the courts. The cost of the marriage certificate was not affordable for many couples. Therefore, we advocated for a lower cost for the certificate and the courts lowered the cost. Currently, the required number of witnesses is five; we're advocating to lower this number. A lot of marriages aren't registered with the government due to the complexity of the process and cultural barriers.

D) INCREASING ACCESS TO JUSTICE THROUGH LEGAL SUPPORT SERVICES

Women and girls receive legal advice in Medica Afghanistan's mediation center in Kabul, located in the Governor House (Wolayat Custody) and in Herat and Mazar, in the Department of Justice. The center is open four days a week from Sunday to Wednesday. Our social workers and lawyers provide legal advice to women and girls who are mostly referred to us by national and international, governmental and non-governmental organizations.

During the reporting period, 148 women benefited from our legal advice in regards to their problems such as experiencing domestic violence over child custody, forced marriage, conflict with in-laws, and psychological violence. The majority of these women were not aware of their basic legal rights. For example, the right to ask for separation from their husband, the right to ask for alimony, the laws concerning inheritance, or the right to live separately from their in-laws' family. Our legal advice empowered these women to solve at least 40% of their family conflicts by themselves. As one client explained, *"We understand that we also have rights, the same as men have, and we shouldn't accept violence anymore."*

The procedural requirement in these cases involved legal awareness followed by mediation. In the first step our lawyers provided legal awareness to all clients and asked if mediation was a good option for them. Those who preferred to solve their cases through mediation were helped with it. Those who did not come to an agreement after mediation, or did not want one, their cases would go to civil procedure where our lawyers would represent them. In order to fulfill the client's wishes and to provide a strong defense and argument in the court, our lawyers interviewed witnesses and negotiated with opposite parties, relevant prosecutors and judges before the trial took place. According to our lawyers' assessments, in addition to having their civil cases resolved, the clients also became empowered by receiving regular legal advice. They were free of family tension and violence, boosted their self-esteem, and learned about their rights including their value as being equal to men. As a result, during the reporting period 440 civil cases were resolved in favor of the survivors of SGBV.

Women who had been in conflict with the law were accused of robbery, murder, smuggling, crimes against security, assault and battery, adultery, attempt to adultery, kidnapping and beating. The cases were taken from or referred to us by Women Detention Center, Juvenile Centers and prison. In order to defend the clients' legal rights, our lawyers were actively engaged during the police investigation, experts' examination, and court sessions. The lawyers visited the witnesses and gathered evidence. In order to keep their clients well informed about the progress of their cases, our lawyers maintained regular contact through visiting clients in prison, juvenile centers and detention centers, and in each visit regularly provided the client with legal advice and awareness and read their defense statements to them in order have their confirmation before the court hearing. As a result of our lawyers' hard work 63 clients were released from custody and prison.

In total 3705 direct legal aid services were extended to 1244 women and girls who experienced human rights violations, some of which are: 493 clients benefited from our legal aid services, another 1093 clients benefited from legal advice, 362 from mediation, 440 from representation in civil cases and 236 women benefitted from representation in criminal cases. Our social workers followed up with 42 clients who were released from prison.

Our biggest challenge dealing with criminal cases of our clients was the insecurity. It slowed down our work and made the follow ups considerably difficult. Another hurdle was that the Supreme Court did not allow our defense lawyers to access their clients' files at the court. Defense lawyers weren't allowed to participate at the court session of their clients; they could only inquire about it from the receptionist at the Supreme Court by providing the case number. Even then they would be only verbally informed about the court's decision.

Economic dependability forces women to accept the abusive behavior, because the abuser is often the provider. In the absence of social security schemes in Afghanistan, and due to women's low employment rates, they are generally financially dependent on male family members. Filing complaints against such perpetrators often means being cut off from their support, with serious consequences for the entire family. When perpetrators are imprisoned, their economic dependents are faced with the tough reality of losing the financial support provided by the perpetrator. Therefore, clients who have concerns about this factor withdraw their cases. Likewise, in some cases, prosecutors encourage women to reconcile, pointing out the future consequences such as loss of financial support, future threats after the perpetrator's release and loss of family support.

According to our social workers' assessments from follow up sessions, our clients were able to access their rights such as the right to education, health care and social freedom, which they were previously denied. Based on our database report, 97% of our clients reported that Medica Afghanistan's legal assistance team had responded promptly to their call and they were extremely happy about the quality of our legal services.

Case Story

M is 18 years old. She left school after grade seven to take care of her younger siblings. A marriage proposal came to her family, but was rejected, because the boy refused to pay one million AFs bride price. M still wanted to marry that boy, so she contacted him. They decided to run away and marry, and they did. M's family filed a complaint with the police against both, so M was subsequently arrested for elopement and adultery. Medica Afghanistan's defense lawyer heard her story, provided her with legal advice and awareness and reviewed the case documents at the investigation department. The lawyer collected evidence and presented the defense statement at the court. M was presumed innocent and released. In a follow up session, M expressed satisfaction for our services. She said that our lawyer not only solved her legal case but also saved her life by reconnecting her with her family.

Case Story

One of our lawyers provided legal advice to P whose husband had pedophilia disorder (sexual attraction towards children). P noticed her husband's disorder since the time they were married. The lawyer advised P to share the matter with her mother-in-law who would further share it with her father-in-law. P followed the advice. The father-in-law is knowledgeable on law and Sharia. He spoke to his son and helped him out of it. After a few weeks she visited the mediation center and thanked our lawyer because the legal advice helped her. Her father-in-law advised P's husband and explained to him the legal repercussions of being pedophile. The husband realized his mistake and respected P for not going to court to ask for divorce.

Some women realize that if they go to court they will not be listened to. They understand that the existing civil law cannot help them secure a divorce settlement. Therefore, they prefer to seek other solutions. Those whose problems could not be solved through legal advice preferred to solve them through mediation rather than going to court.

E) ENHANCING THE QUALITY AND ACCESSIBILITY OF SOCIAL SERVICES FOR WOMEN AFFECTED BY VIOLENCE AND WOMEN AT RISK

Last year 493 clients received social support by our social workers. The social support established a link between women and their families, created safe re-integration, resolved the problems of family noncompliance, and won the release on bail of the clients who were in prison, detention centers or juvenile centers. In order to ensure the effectiveness of re-integration, the social workers made follow-up visits to clients' homes or made phone calls. During the follow up we observed remarkable progress in the lives of clients such as improvement of negotiation skills within the family, abated family tension and access to their rights to education, work and social freedoms that they were previously denied. Our clients found the follow-up sessions to be a good protective mechanism while they were re-integrating with their families. The client's family, particularly the husband, felt responsible to act according to the conditions of the reintegration agreement.

Case Story

E is a 30-year-old woman who was married eight years ago. Her husband married a second wife. The situation at home became tense, and he started physically abusing her. Domestic violence finally led to divorce. E's case was referred from family court to Medica Afghanistan. After a lengthy follow-up by our legal team at the court a settlement was agreed between the two. Her husband paid 30,000 AFs as the marriage portion after divorce. He also agreed to pay her 5,000 AFs per month as alimony and 1,500 AFs for E's child support as she took custody of the child.

F) EMPOWERING WOMEN AND GIRLS THROUGH PSYCHOSOCIAL COUNSELLING AND SUPPORT

In Afghanistan, violence against women – in both private and social life – is endemic and different groups of people, be it rulers or family members, inside or outside of the family sphere have used violence against weaker members. The causes are economic difficulties, social pressure, unawareness, lack of education, false understanding about religion or in some cases, they simply exercise their power in a war stricken environment. Inequality between men and women exist at all levels. Women and children are the ones who have suffered the most and have been the targets of various types of violence. They continue to suffer from mental health problems as a result of violence and trauma they are undergoing.

The Psychosocial and Health Program of Medica Afghanistan (PSHP) provides supportive psychosocial counseling in individual and group sessions once per week for a period of four to eight months for each client in order to empower and mobilize the women. For the convenience of clients, PSHP counselors work at key locations throughout Kabul, Herat and Mazar, such as women's shelters and prisons, the juvenile center, and the Bagh-e-Zanana (Women's Garden).

PSHP also maintains a counseling center in the main government hospitals in Kabul and Herat and has set up counseling rooms in 10 districts of three mentioned provinces, which provides a safe environment and low threshold access to quality counseling services for all women living in these districts who seek psychosocial support. In addition, for women and girls who participate in group counseling, PSHP also provides literacy classes to increase their reading and writing skills.

During the counseling sessions conducted by Medica Afghanistan, we observed that the majority of our clients who have experienced violence such as family conflicts, domestic violence, child marriage, rape, forced engagement or forced marriage are experiencing psychosocial problems. Besides the aggression of male relatives, women are often exposed to the violence of their female relatives like mothers and sister-in-laws, who have experienced violence themselves. At this stage, women often lack the ability to deal with conflicts inside or outside their home. In fact many of them attempt to end their lives due to pervasive violence causing depression and sense of hopelessness. 2300 women attempting suicide – as recorded by the Ministry of Public Health in 2014 – is a sobering reminder of how women are disproportionately affected by stress, psychosocial problems, and mental health disorders in Afghanistan. In addition, their families often deny them access to basic rights.

In 2015, Medica Afghanistan psychosocial counselors and psychologists met with 1639 clients in individual and group settings in all three provinces; Kabul, Herat and Mazar. From the above number, 1010 clients were released after their symptoms improved. Counseling continues for the rest of the clients.

In the outcome of counseling we observed visible improvement in our clients' situation, such as enhanced physical health, social and family relations, and improved communication skills, increased resilience and coping capacity to deal with past and ongoing trauma, as well as an improved ability to develop more constructive means of addressing interpersonal conflicts. In addition to learning new methods and life skills during the psychosocial counseling, they became aware of their basic rights in Sharia and national laws. They gradually began practicing those rights in their households.

Based on our database report a great number of our clients expressed satisfaction with our psychosocial services, especially the counseling and referral system. Referrals worked extremely well between Medica Afghanistan and other institutions, mainly with the Rabia e Balkhi, Malalai and Cure hospitals. Medica Afghanistan counselors followed the quality assurance standard criteria for successful counseling and monitoring.

A Case Story

T is 18-year-old single girl who visited the maternity hospital to deliver her baby. After the medical intervention, the doctors referred her for psychosocial counseling as she suffered from mental illness. When she was pregnant, her mother would repeatedly ask her about the father of the child. T would say that it was her father who raped and impregnated her, but her mother wouldn't accept it.

After the police investigation it was clear that T's father was the rapist. Police arrested him. After the imprisonment of her father, T's mother and uncle planned to kill T for revealing the truth. When she learned about it she escaped from home to our counseling center at one of the hospitals. We referred her to a safe house, because she was at risk. Currently, she receives psychosocial counseling from us. Due to the efforts of our counselor and her own resilience, T's psychological condition is improving and she is gradually leading a hopeful life.

G) EMPOWERING WOMEN THROUGH EDUCATIONAL SERVICES

We believe that education is one of the most significant means of empowering women and girls. We consider education necessary because it is an entry point to other opportunities. Education is one of the most effective ways of increasing women's self-confidence and helps them understand their rights. The purpose of the establishment of literacy classes is to increase the level of basic education for the target group to help them secure future employment opportunities. In addition, women who have suffered from mental health problems need to stay busy

with a meaningful activity and have a tool to build their self-esteem.

In 2015, 240 students graduated after two years of study at our literacy classes in Kabul, Herat, and Mazar. They acquired skills in literacy, basic accounting, health, legal rights and communication. They also had the opportunity to network and build their social capital throughout the program.

In order to help women become acquainted with book reading, learn self-study and self-help we established 3 large and 5 small libraries at the locations of literacy classes. Some students would take the books home and read with their families. After completion of the project we handed over 500 of those books to a school in District 10 of Kabul, called Speen Aday. The other 700 books from four libraries in Kabul were transferred to four schools in Bagrami District. In Mazar, and Herat the books were transferred to public school libraries in the area.

Client Testimony

"My daughter is in the first grade of school. She faces problems in her studies. Before joining the literacy class, I didn't know how to help her. I also had problems with my husband that resulted in his violent reaction towards me. This course was not a mere study course rather a guiding tool to help me in my happy living and become a caring mother for my kids. I hope Medica Afghanistan continues to facilitate such opportunities for women to help them become empowered and initiate vocational training classes for us. Thank you very much."

H) COMMUNITY AWARENESS, MOBILIZATION, AND PARTICIPATION:

The most promising primary prevention interventions to address GBV include awareness raising training for men and women, mass media campaigns, awareness-raising activities to reach a larger percentage of the population and the creation of role models for families. In this respect we achieved the following results:

- » Medica Afghanistan lawyers provided legal awareness to 192 clients from prison, the Juvenile Rehabilitation Center (JRC), peer support group of PSHP and literacy program students. The sessions included topics such as right to education, types of separation, right to select life partner, child custody, right to health, divorce, breaking of engagement, heritage and EAW Law. When women know their rights, they can make informed decisions. Legal awareness prevents women from committing illegal acts. It boosts their self-esteem and self-confidence, which is key before proceeding with their cases. Our goal is that based on the information the clients receive they should be able to handle their life issues by themselves. According to our lawyers' evaluation, in the beginning most of the women and girls weren't aware of EAW Law, or their legal and Islamic rights. They thought if they spoke up it was a shame. They had lots of questions about women's rights in Sharia. An assessment by Medica Afghanistan lawyers showed that the majority of the participants of legal awareness sessions were able to:
 - » Recognize that they have legal rights and responsibilities. (For example one client said, "Now I understand my rights; that enables me to make better decisions.")
 - » Recognize when a problem or conflict is a legal conflict and when a legal solution is available
 - » Know how to take the necessary action to avoid problems and where this is not possible, how to help themselves appropriately
 - » Know how and where to find information about the law and be able to find information that is accessible to them
 - » Know when and how to obtain suitable legal assistance
 - » Understand the process clearly enough to perceive that justice has been served
- » Our legal aid team conducted monthly legal awareness sessions for police officers in each district on EAW Law and the rights of the suspect. In total we trained 110 policemen. Informing police about EAW Law helps them recognize victimized women and refer them to related organizations. Moreover, once a week our lawyers provided awareness sessions to clients at prison about the rights of the suspect and the accused, and the importance of marriage registration. Most of the clients who have

civil cases at the court face violation of rights because they haven't registered their marriages and don't have the official marriage certificate.

- » We trained 360 facilitators and supervisors of Peer Support Groups in Kabul, Herat and Mazar. The training focused on women's rights according to Sharia and Afghan laws.
- » We trained 8 literacy program instructors and 200 students on women's rights in Sharia and Afghan laws. Furthermore, we provided the same training to 143 women in prison.
- » Medica Afghanistan is trying to build knowledge and sensitize key players in regards to the linkage of human rights with Islamic principles to show that they align with each other. To do so, we partnered with a project by World University Service of Canada (WUSC) in Afghanistan and conducted five sessions – two days each – for the lecturers of Said Jamaludin Afghan Teacher Training College in Kabul. The topics included were gender-based violence, theory of agency and Islamic rights of women. A strong human rights curriculum in schools and universities is the best way to change harmful social norms and principles.



Women's Garden Kabul | © Ann Jones

Peer Support Group (PSG) Implementation (a community based service approach)

Medica Afghanistan established 10 peer support groups facilitated by our former clients with the purpose of extending our outreach of psychosocial services and awareness of women's rights and gender-based violence (GBV). By doing so, we hope to endorse more autonomy for women instead of creating client dependency on our counselors. As one facilitator put it, *"Women should experience that they themselves can do something for change."*

We observed that some of our clients who were able to use the counseling groups to solve their problems or improve their family situation also developed leadership skills and an interest in women's rights. To make use of their potential, we

felt that these women could be guided and supported in organizing and running their own groups. We trained them and provided the means for them to facilitate some sessions. One of our counselors visits the groups on a monthly basis to assess if any of the participants need psychosocial or legal counseling support or referrals to any other support agency.

In 2015, 120 women participated in 10 peer groups and 37 were referred for medical support or psychotherapy.

I) 16 DAYS OF ACTIVISM CAMPAIGN TO ELIMINATE VIOLENCE AGAINST WOMEN

On the occasion of the 25th November (the Elimination of Violence Against Women Day which also marks the first of 16 days of the activism campaign) Medica Afghanistan published a case [report](#), In Memory of Our Sisters on SGBV against women in Afghanistan. The case report included 80 stories of Afghan women and girls who were maimed, raped and murdered, mostly between 2010 and 2015. The report ended with expert opinion on the legal aspect, causes and psychological effects of SGBV on victims. It also proposed solutions on how EVAW Law – backed by the judicial body – can become more effective in preventing SGBV and helping the survivors attain justice. We widely shared the case report with individuals and organizations concerned with Afghan women, inside and outside Afghanistan.

December 10th 2015 marked the Human Rights Day and the end of the 16 days of activism campaign. On this day we published a [pamphlet](#) to reflect the views of prominent Afghan men and civil society activists about violence against women in Afghanistan. We shared the pamphlet with concerned citizens and Afghan women's rights defenders.

Furthermore, we represented the civil society of Afghanistan in the 16 days of activism campaign inauguration organized by the Afghan Women's Network, in Kabul, on the 25th of November 2015. Towards the end of the conference Afghan Women's Network released a press statement calling on the National Unity Government and related bodies to take firm action on the protection and empowerment of Afghan women.

J) TRAINING AND WORKSHOPS TO RAISE AWARENESS ABOUT VAW AND TO BUILD CAPACITY



Trauma sensitive approach in legal setting training © Medica Afghanistan

Training for medical professionals on Stress and Trauma Sensitive Approach

In order to strengthen the provision of quality and accessible psychosocial support for women and girls who have experienced violence, we provided Stress and Trauma Sensitive training to 98 medical professionals from Herat and Mazar regional hospitals. The training covered five modules to improve attitude, knowledge and practical skills to identify, examine and provide trauma-sensitive care for women survivors of GBV. The training was embedded in five peer group meetings in order to deepen new knowledge and discuss casework for practicing the trauma and GBV sensitive approach. In total 15 peer group meetings were conducted.

An overview of the training showed the following results:

The trainees were sensitized on violence against women. They gained a clear understanding about SGBV and how it links to trauma. They also learned how to implement trauma-sensitive principles in their work. Some of the participants were able to express their newly gained self-confidence in the workplace. The participants found our training methodology unique as it focused on self-reflection, gender reflection, and the incorporation of different methods and tools such as role-plays in order to shift attitudes.

Training on peace building

The first four-day peace building training took place in Herat from the 10th to 13th of July. It drew 30 male and female participants from various civil society organizations. The purpose of the training was to help the trainees learn about common definitions of peace, conflict, violence, and basic conflict resolution mechanisms. The training put a special focus on the role of women within conflict resolution and peace processes. The training helped the participants to analyze their current role as well as future entry points. An important objective of the training was to help the participants understand the interrelationship between peace-building processes and SGBV and to receive hands-on advice on further activities. The training was eye opening to the participants as it taught them that peace building starts in one's own community and personal networks. Some participants went on to talk to persons with whom they had conflicts in order to proactively solve their own personal conflicts.

Training for shelter staff

We trained 60 staff from 14 shelters women across Afghanistan including Kabul, Herat and Mazar. We delivered the training in three groups for 20 days; each group consisted of 20 participants. The topics were GBV, consequences of violence, mediation techniques, dealing with stress, secondary trauma and self-care. The training provided the participants with knowledge on the methodology of shelter work and increased their information on gender-based violence and related concepts.

Training program for female police and female lawyers on psychosocial issues

A major problem that Afghan women face in the workplace and in society is a lack of credibility and respect. Women are less empowered than men and the government rarely supports them. Examples of this include a negative cultural attitude towards working women, especially wom-

en who serve in the security sector such as police; a non-existent role in decision-making and a feeling of insecurity in the work place. To confront this problem Medica Afghanistan – with the financial support of GIZ – provided training for 150 female lawyers, prosecutors and police in Balkh, Samangan for 31 days (August - December 2015). Through this training the participants were able to identify specific challenges in their personal and professional lives. They learned the difference between non-violent and violent communication, soft and transparent communication skills, the importance of having a role in decision-making and how to build resilience against difficulties in their personal life and professional workspace.

One of the participants said that now she has become more enthusiastic about her job with Afghan National Police; that this learning opportunity brought positive changes in both her self-perception and her work.

"I learned many positive things during the training and I am so happy to serve in the police force. I would encourage other women to join the police force and to serve our country."

K) EVALUATION OF PSYCHOSOCIAL AND HEALTH PRORGAM (PSHP) IN KABUL AND MAZAR PROVINCES (2012-2015)

To help us make informed judgements about the performance of our projects, we hire independent evaluators, document lessons learned and gain a better understanding of the impact of our work. In turn, this enables us to inform the future overall strategic programming of Medica Afghanistan. In 2015, Medica Afghanistan assigned an independent consultation company named Thousand Plateaus to evaluate our three years work of PSHP, including phase one and two of projects entitled Empowerment of Afghan Women through *Psychosocial Counselling and Capacity Building* (2012 and 2013) and the *Community-Based Trauma Sensitive Support for Afghan Women in Kabul and Mazar-e Sharif* (2014).



Our activities under these projects were concluded to have had a far-reaching impact on clients, their families, communities, and the society as a whole. The evaluation found that clients who had received individual and group counseling services demonstrated considerably better behavioral control and positive changes, and several who were interviewed expressed that participation in our psychosocial counseling sessions was a turning point in their life. The evaluation found that those who had received PSHP services, despite undergoing considerable ongoing stress and trauma, demonstrated a number of qualities that could contribute to increased coping capacities, including increased

self-esteem, high self-efficacy, and an average level of resilience.

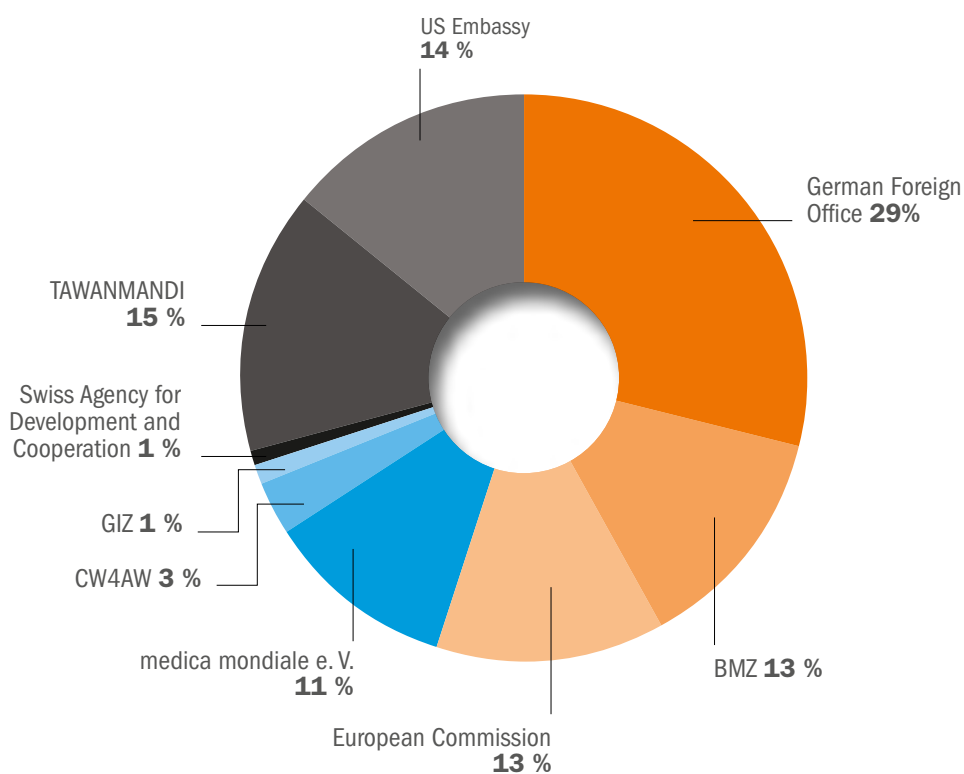
The evaluation pointed to a number of challenges in the program as well, including a general lack of awareness about mental health issues in Afghanistan. Family issues are considered to be extremely private and intervention in cases of domestic violence is perceived as breach of privacy. There is also a lack of mental health regulations and standards.

Overall, the impact of the training and capacity building support of Medica Afghanistan was evident in the evaluation. The skills and knowledge of PSHP counselors regarding trauma sensitivity showed an improvement, and both staff and clients noted the trauma-sensitivity of services. Medica Afghanistan also made an important impact on civil society. A full report can be made available on request.

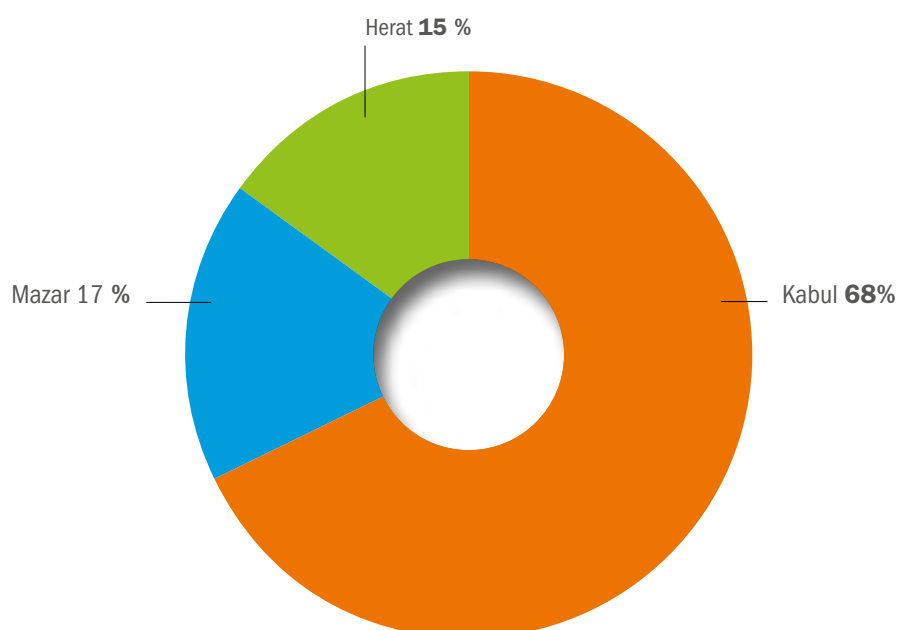
FINANCIAL REPORT

For the year 2015 Medica Afghanistan received a total of 1,048,702.21 EUR as donor contributions and private donation. Total expenses for the year were 845,419.84 EUR. We are grateful to all of our donors and private contributors for their generous financial contributions. You make it possible for us to continue to extend much needed support to Afghan women and girls.

CUMULATIVE INCOME IN 2015



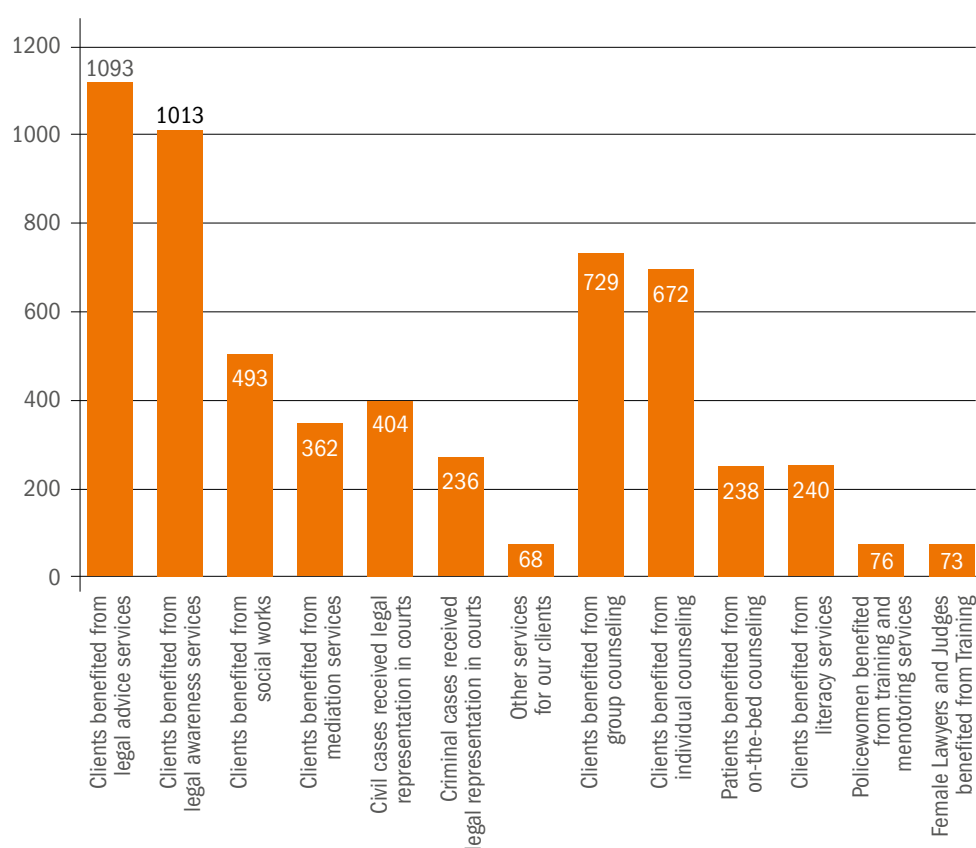
PROVINCIAL FUNDS DISBURSEMENT



CLIENT DATABASE

In a competitive procurement process, Medica Afghanistan recruited a database-developing firm to modify its entire client database structure and change it from static (offline) to cloud (online) system in 2011. The features were customized to authentically address the needs of donors and Afghan Government. Some of those new features were incorporating automated data-entry procedures in order to reduce chances of human-error and to ease data-entry process; adding extra layers of cyber security to prevent it from possible cyber attacks and applying user authentication protocols to prevent unauthorized entry and data modification.

The new database can be accessed from anywhere in the world using Internet and the data will be stored in a virtual cloud that allows simultaneous data entry in all provinces. All data entries are supported by hard documents, which are stored in safe closet. The process of data entry encompasses two layers of verification – by the data entry officer and the respective project manager – in order to ensure data are entered accurately and they are supported by hard evidence. We generate regular reports and submit to our stakeholders to provide updated information on the project progress and beneficiaries. The following chart provides information on the number of beneficiaries in different areas benefited from our services in 2015.



OUR VISION

MEDICA AFGHANISTAN ENVISIONS A PEACEFUL AFGHANISTAN WHERE WOMEN ARE FREE OF VIOLENCE AND ALL FORMS OF DISCRIMINATION, AND ENJOY EQUAL ACCESS TO ECONOMIC AND SOCIAL JUSTICE, POLITICAL DECISION-MAKING, HEALTH SERVICES AND EDUCATION.

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