

Annual report 2012



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Profile

medica mondiale is an internationally active, feminist women’s rights and aid organisation founded in 1993 which actively works for the rights of women and girls in regions of war and crisis. Our work is carried out in an uncompromising spirit of commitment and solidarity. We have made it our mission to combat sexualised wartime violence and other forms of gender-specific violence against women and girls on all levels.

By offering local medical, psychosocial, legal and economic support, *medica mondiale* helps affected women to process their traumatic experiences and empowers them in their efforts to provide for themselves. In addition, *medica mondiale* carries out public awareness and human rights work in its project countries, in Germany and internationally in order to bring about societal and political changes in favour of women.

medica mondiale operates its own projects and programmes and it also works together with local women’s organisations. Local expertise is strengthened through the provision of training and advice on topics such as trauma-sensitive psychosocial work, project management or organisational development. This is the only way to ensure lasting assistance and a supportive society for women and girls affected by violence.



Cover picture:
Young Ugandan women receive oxen to work their fields.



Transparent Civil Society Initiative

Transparent accountability and informative, convincing demonstrations of the success and effectiveness of our work are a matter of course at *medica mondiale*. In 2011 we joined the Initiative Transparente Zivilgesellschaft (Initiative for a Transparent Civil Society). We openly inform about the goals we want to achieve, where our monies come from, how they are used and who the decision makers are.

VENRO

medica mondiale is a member of VENRO, the Association of German Development NGOs and has pledged compliance with the VENRO Code of Conduct.

Foreword



Dr. Monika Hauser
Executive Member of
the Board



Christiane Overkamp
Managing Director

Dear reader,

Sexualised violence and discrimination against women were the subject of much international discussion in 2012. We consider this to be a positive development since we need an active consideration of these problems in order to find appropriate solutions and prevent violence against women for the long term.

The German federal government took a step in the right direction with its National Action Plan for the Implementation of the UN Resolution 1325 on "Women, Peace and Security". *medica mondiale* and other women's organisations worked together in autumn 2012 to make a decisive contribution to the drafting of this action plan. Also in 2012, the British Foreign Minister William Hague showed how governments can be powerful instruments for change if they have the political will when he launched an international initiative against sexualised violence.

However, in spite of these good initiatives, sexualised violence against women and girls is still a worldwide problem, especially in areas affected by war and crises. Whether the Democratic Republic of Congo, Afghanistan or Uganda: thousands of women suffer wartime rape and then receive no support. Their traumas affect them and the following generations, destroying their physical and social integrity and impacting negatively on the development and cohesion of their communities.

In 2012, *medica mondiale* continued its efforts to draw attention to these issues. As a recognised women's rights organisation with 20 years of experience, we assume the responsibility to demand more support for survivors of sexualised violence and to raise awareness on these issues within society.

This Annual Report is part of that work. Firstly, here we can declare our aims, explain our motivation and methods, and present specific activities from the reporting year. Secondly, the report serves our accountability, publicising our services and successes and the way we spend the funds available, more than 50% of which come from private donations. We want to express our thanks to all our donors and funders. It is your continued support which will make it possible for us to work for the benefit of women and girls affected by violence in the coming years.

Dr. Monika Hauser

Christiane Overkamp

Einige Ergebnisse unserer Arbeit:

18

production groups were formed as part of the activities of the *Medica Gjakova* women's cooperative in Kosovo.



537

affected women and girls in East Congo received psychosocial or medical advice.



322

women in the south-east of Liberia volunteer in villages and communities to prevent violence and act as contacts for affected women and girls, referring them on for appropriate assistance to *medica mondiale* Liberia, the police or health centres.



66,000

people in the Central African region of the Great Lakes attended awareness-raising measures on the causes and consequences of sexualised violence. These included school pupils, teachers and local authorities.



1,497

women sought legal assistance from *Medica Afghanistan*, in many cases because of domestic violence.





Monika Hauser, Karin Schüler and Diana Krüger (left to right)

Interviews with the Board

What comes to your mind when you think of *medica mondiale* in 2012?

Karin Schüler: “First of all I think of the courage of our colleagues and partners in our project countries. There are great dangers related to their activities. For example, in early spring 2012 our Congolese partners from PAIF were forced to flee from marauding rebel groups several times. And in Afghanistan over and over again brutal attacks took place against women’s rights activists who oppose misogynist traditions in the country – just as our Afghan colleagues do. Despite these threats they remain strong and determined, continuing to take action to end sexualised violence every new day.

Our activities in Germany are aiming at the same goal. Right from the foundation of *medica mondiale* twenty years ago, we found strength in a common vision to reveal misogynist structures – including those in our own country – in order to effectively fight violence against women. The fact that in November 2012 Monika Hauser was awarded the “Staatspreis NRW” (State Prize of North Rhine-Westphalia) shows that this is being recognised. The prize, totalling 25,000 euros, honoured her tireless commitment against sexualised violence and gives us all here at *medica mondiale* the power to continue.”

How does *medica mondiale* see the situation of women in Afghanistan?

Monika Hauser: “The situation is extremely alarming. Afghan women continue to be oppressed, forced into marriage, raped, and tortured. Unimaginable situations such as the public shooting of a 22-year-old woman in the province of Parwan, which one could even see on the internet in July 2012, are not an exception.

Although our partners at *Medica Afghanistan* were able to help a lot of women by providing legal assistance, family mediation

and psychosocial support, this often happened in the face of massive resistance from patriarchal forces in their society.

It is clear that the German Federal Government as part of the NATO mission ISAF is also responsible for the situation in the region. With press work, photo exhibitions, lectures and conferences, *medica mondiale* has continuously pointed out the excessive violence against women in Afghanistan and tried to influence relevant policies, most recently at our Afghanistan conference in December 2012. There, Afghan activists and women’s rights campaigners demonstrated once more that there can be no sustainable peace if half of society is not involved in political decision making processes.”

2012 was a good fundraising year for us. How is *medica mondiale* using this income?

Diana Krüger: “In 2012 *medica mondiale*’s income from donations increased by 5 per cent to 3,031,112.60 euros. We are very happy about this. The positive development shows that the donors are convinced of our work and trust *medica mondiale* in its use of financial resources. About 39 per cent of these supported us regularly by direct debit or standing order. This loyalty is very important for the success of our projects. It enables us to be more independent of state funding and makes long-term project support possible. *Medica Mondiale* Foundation Switzerland also contributes to consolidating the financial situation: in 2012 it transferred 162,371.55 euros to *medica mondiale*. The effective use of our monies for our projects is what helps women and girls the most. So we are happy that in 2012, compared to the previous year, we were able to decrease the expenses for advertising and administration from 133,718 euros to 989,797 euros. This meant that over 82.5 per cent of our monies were spent in the projects and for public awareness and public relations work abroad and in Germany in accordance with the purpose of the association.”

Ms Thiemann, you have been active in development cooperation for many years. What was special about *medica mondiale*'s international project work in 2012?

Heidi Thiemann: "Our new international strategy, which we finished drafting in summer 2012, emphasises the strengths of our project work worldwide. Achieving sustainability by creating independent support structures in the projects and high impacts by concentrating on thematic and regional priorities.

In 20 years, *medica mondiale* has guided four projects through to independence – in Bosnia, Albania, Kosovo and Afghanistan. Preparations are currently underway to hand over *medica mondiale* Liberia to the national staff. From village to district level, we have been able to train women in counselling and mediation skills to intervene in cases of sexualised and other forms of violence or to call up the support needed. In 2012 the project received a very positive assessment from an external assessor. In the participating communities the awareness of human rights violations affecting women and girls has been raised significantly. With our grant program in 2012 we have continued to intensify the cooperation with women's rights organisations in the Central African Great Lakes Region. At a workshop with partners in Burundi we were able to share experiences and deepen contacts. In these ways we create trust, solidarity and networks for mutual advice and assistance."

In autumn, *medica mondiale* restructured its communication work. What has changed?



Heidi Baumann

Heidi Baumann: "The more women speak with one voice, the louder and clearer it can be heard. For this reason *medica mondiale* has restructured the areas of fundraising, press and public relations work as well as political human rights work at the head office in Cologne. These have now been brought together under the same management. Our goal is to intensify the external

effects of our work. We can reach this goal by focussing on the creative energy and the know-how of our staff in the new "Communication" department. Whether we are talking about donor e-mails, press releases or political position statements, the quality of our activities now benefits from the multifaceted know-how and the good ideas of an extended expert team. So we can create synergies and cooperate even more effectively."

Mrs Czerwinski, you have been supporting *medica mondiale* for 20 years. In 2012 the General Assembly elected you to the Board. What are your impressions of the organisation's work?

Claudia Czerwinski: "Since its foundation in 1993, *medica mondiale* has turned the phenomenon of sexualised violence in war zones into a political debate. Its tireless engagement now makes it impossible to neglect that this form of violence with its massive consequences is and was a destructive element of nearly every war in this world.

One of the most important tasks of *medica mondiale* is to address the complex reasons and point out the common responsibility of the international community over and over again. I am fascinated to see how the organisation works in post-war areas, in a pro-feminist and context-oriented way.

At home we also need to take a look at our past: the crimes of German and allied soldiers against hundreds of thousands of women and girls during the Second World War, in concentration camps, while fleeing, and under occupation. These crimes are still waiting for an adequate consideration yet they continue to have a societal impact from one generation to the next. As a long-term supporter, and Board member since 2012, I want to make my contribution to *medica mondiale* and the further vibrant development of its creative potential."



Claudia Czerwinski



During a panel discussion, “Strong Women” talk about their work.

The year at a glance

February

Putting the “fun” in fundraising: At his appearance at the Comedia Theater in Cologne in February, the cabaret artist Hagen Rether appeals for donations for women and girls in war and crisis areas. Rether sets a good example himself and donates his fee for the evening: 3,600 euros.

April

For his crimes during the civil war in Sierra Leone the Liberian rebel leader and former president Charles Taylor is found guilty by the Special Court for Sierra Leone in April. *medica mondiale* sees this judgement as an important sign for the prosecution of sexualised violence in war zones. In previous trials, rape had always been dealt with under the charge of genocide or “ethnic cleansing” but in the Taylor trial three of the eleven counts refer directly to gender-based violence.

May

The panel discussion “Women in charge – the (one) world needs strong women” at the “Forum” in the Cologne adult education centre in May is very well received. In addition to our programme manager for Liberia, Sybille Fezer, one of the other speakers is the Kenyan women’s rights

campaigner Rebecca Lolosoli, who reports on her women’s village “Umoja”. It is the first of its kind in East Africa and offers a new home to more than 50 women affected by violence.

July

In July, alarming news from the Democratic Republic of Congo reaches the staff at Cologne. Rebels from the “M23” militia are fighting to take control of the provincial capital Goma in North Kivu – home to several *medica mondiale* partner organisations. With financial and organisational support from Germany, the project partners were able to get to safety.

August

The end of the Peace Building project in August sees *medica mondiale* publish a practical manual in order to document the results from the three years of work. It contains proven training methods and guidelines for the active participation of women and girls in the peace process. It is designed to serve as an orientation for other organisations as well.

September

In Guatemala the first trial to deal with sexualised crimes during the civil war starts. The court case is a milestone

in the history of the country. Many Guatemalan women’s and human rights organisations, among them partners of *medica mondiale*, have been striving for this for years.

November

For her tireless commitment for women and girls in war zones and developing countries, Monika Hauser is awarded the State Prize of North Rhine-Westphalia on November 19, 2012. The “Staatspreis” is the highest honour which this German federal state awards. The prize money is 25,000 euros and will be used to help establish a shelter network in Liberia.

December

The newspaper editor Astrid Wirtz, Afghan psychologist Zarghona Ahmadzai and Monika Hauser participate in a discussion about “Women in Afghanistan – Between Fear and Hope” at the ‘studio dumont’ in Cologne in December. Their emphatic message is that despite many years of military action by NATO, women in Afghanistan continue to experience massive oppression. By organising this event, *medica mondiale* is appealing to the international public to assume more responsibility and demand determined action.

Goals and strategy

The organisation

medica mondiale is a feminist women's rights and aid organisation actively working for the rights of women and girls in regions of war and crisis. This work is carried out in an uncompromising spirit of commitment and solidarity with all women and girls, regardless of their political, ethnic or religious affiliations.

Goals

medica mondiale has taken on the mission of combating sexualised wartime violence and other forms of gender-specific violence against women on all levels. Programs of direct assistance ensure women are made aware of and assert their rights, benefit from opportunities to process their traumatic experiences, and gain independence and self-reliance. In addition, *medica mondiale* is also always looking to effect changes in society and government by means of public awareness and human rights work in Germany and the project countries.

The commitment

medica mondiale offers an integrated range of support to women in war and crisis regions who survived sexualised violence, running its own projects and also working together with partner organisations. Additionally, *medica mondiale* net-

works with regional and national actors and trains specialists in trauma-sensitive ways to deal with female clients who have suffered from violence.

International project work strategies

In 2012 we developed a new strategy to enhance the direction and goals of our international project activities in the next five years. In future, *medica mondiale* will continue its own projects but focus more on the promotion of local women's organisations. Two priority regions were decided: Western Africa and the African Great Lakes area. This strategy is designed to improve regional networking, create synergies and ensure the resources are more accurately deployed. Orienting our work towards the impacts it can achieve underlies how we plan, implement and monitor our international project work. Everything we do is guided by a trauma-sensitive approach, aiming to strengthen those affected in an optimal way while avoiding any risk of retraumatisation. The support offered by *medica mondiale* can be divided into six categories, as follows.

Trauma-sensitive psychosocial work

medica mondiale assists women and girls to talk about and cope with their experiences of violence. Local psychosocial counsellors help women survivors regain their self-esteem and develop new prospects for the future. Measures are also taken to raise awareness in their families and communities of the causes and consequences of sexualised violence, including them in the efforts to establish safety nets to protect women from violence.

Trauma-sensitive healthcare work

medica mondiale advises clients on healthcare issues and ensures that they receive the necessary medical support. The organisation also trains local medical specialists in trauma-sensitive ways to treat women who suffered violence.

Trauma-sensitive legal assistance

medica mondiale teaches women about their rights, supports them with legal



Bosnian networks to help women assert their rights

counselling and represents them in court. Police and justice staff also received training on the issues of sexualised violence to help them learn the appropriate way to deal with victims of violence during the course of their work. Additionally, *medica mondiale* documents human rights violations against women in order to break down taboos and the prevailing culture of impunity.

Economic support

medica mondiale enables survivors to take part in simple vocational training courses, learning trades such as tailoring or farming which enable them to secure their own livelihood.

Political commitment to women's rights

medica mondiale provides encouragement and training for local women's rights activists to improve their political and advocacy work. Examples include campaigns against the internationally prevalent culture of impunity for perpetrators of sexualised wartime violence or demands for an increased participation of women in peace negotiations.

Local capacity-building

medica mondiale makes its knowledge and experience available to female specialists in war and crisis regions, enabling them to work independently and organise their own projects. This is the only way to ensure lasting assistance and a supportive society for women and girls affected by violence.



Liberian health care worker talking to a client.



Young mothers in Liberia receive targeted support.

Liberia

Initial situation

Fourteen years of civil war over power and raw materials have left lasting scars in Liberia. Many regions are characterised by extreme poverty, which very often leads to discrimination and violence. Women and girls are the main victims: domestic violence, sexual exploitation and rape are everyday occurrences. Support programmes are lacking, as is any general awareness of women's rights or how to prevent violence. In 2012 the Liberian government did work on measures to improve the women's rights situation, but their impact is very slow. Particularly in south-east Liberia, far away from the

populated west coast, the infrastructure is weak and state institutions or aid organisations are rare. Tens of thousands of refugees from the Ivory Coast have also been staying in the border region since 2011 and these have to be supplied as well.

Goals and commitment

Since 2006 *medica mondiale* has been supporting women and girls affected and threatened by violence in the south-eastern provinces Grand Gedeh, River Gee and Sinoe. As the roots and consequences of violence are very complex, our work is interdisciplinary: counselling, training and awareness-raising

programmes address women affected by violence, political decision makers, institutions and other key actors in the healthcare, social, security and legal sectors. We focus on village communities. *medica mondiale* Liberia trains women in these communities to be contact persons and organises local protection networks. With success: An external evaluation by KfW (German development bank) in 2012 showed that increasing numbers of women are aware of their rights and starting to assert them consistently. 53 women reported cases of rape to the police – almost double as many as in the year before.

Knowledge is the best prevention

With awareness-raising events and training courses, *medica mondiale* contributes to the improvement of public healthcare in Liberia.

In post-war and developing countries, healthcare for the population is often insufficient. There is a lack of money, hospitals, professional competence and medicines. Transportation routes are also often in poor condition. In south-east Liberia many people have to do without medical care or travel long distances to reach the appropriate institutions in provincial towns. This means that women and girls will rarely receive timely help if they are raped. Their injuries cannot be treated and there is no possibility to prevent HIV infection or pregnancy. Furthermore, this healthcare situation leads to a general lack of knowledge about contraception, STDs and trauma-sensitive treatment methods. Therefore *medica mondiale* Liberia is committed to improving public healthcare and informing people about health risks. It also actively seeks to ensure the provision of appropriate support for women and girls affected by violence.

Teenage pregnancy is a particular problem: nearly one in five young women in Liberia has her first child at the age of 15 to 19. In "Girls Clubs" our Liberian health counsellors meet girls and young Liberian women two or three times a month and talk with them about their experiences, wishes and difficulties. At the same time they educate the participants about menstrual cycles, HIV, condom usage and, above all, a girl's right to say "no".

Another component of the support programme is medical counselling for women affected by violence who suffer gynaecological problems. These women are also referred to appropriate health services. The programme also trains health professionals in trauma-sensitive treatment of survivors of sexualised violence. In 2012, 52 women and men participated in these trainings, which were developed by *medica mondiale* Liberia in cooperation with the Liberian Ministry of Health. Part of the training dealt with "clinical management of sexualised and gender-based violence". The professionals learn how to document their examinations in a way that enables them to be accepted as evidence in court. Other training modules deal with appropriate ways to deal with women and girls affected by violence, the interpretation of trauma symptoms, and self-care.

For the *medica mondiale* health counsellors, these trainings involve enormous effort. After the regular teaching units they continue visiting the participants at their workplaces to support them in implementing their new knowledge. Most of the clinics are located deep in the rain forest, many hours by foot from the provincial towns. But their efforts are having an impact. The professionals feel more confident in dealing with their patients. They know which behavioural patterns indicate cases of rape and which networks to involve for long-term help. So they can provide the women with a kind of security and help them to regain trust in their own bodies.

STATISTICS AND FACTS::

Project region:
Monrovia and River Gee, Grand Gedeh and Sinoe provinces (Liberia)

Target group:
women and girls in south-eastern Liberia who are affected by gender-based violence, particularly sexualised violence; authority figures in communities and district government, as well as staff in the security, justice and healthcare sectors; village communities

Project activities:
trauma-sensitive legal, health and psychosocial counselling and training, mediation, peace work, awareness raising and education with decision-makers at local, regional and national levels, operation of a women's shelter, development of sustainable organisational structures, networking

Partner:
German Agro Action (Deutsche Welthungerhilfe)

Funding:
German Federal Ministry for Economic Cooperation and Development (BMZ) via KfW (the German development bank), private donations

Project expenses 2012:
1,544,534 euros



Regular training sessions develop confidence when treating survivors

A selection of results from our work:

85 communities in south-east Liberia benefit from support programmes operated by *medica mondiale* Liberia.



1,593 community members and village elders took part in awareness raising events on the topics of sexualised violence, health or women's rights.



322 women in the south-east of Liberia volunteer in villages and communities to prevent violence and act as contacts for affected women and girls, referring them on for appropriate assistance to *medica mondiale* Liberia, the police or health centres.



5,286 women and men received education on health, contraception and hygiene during "Health Talks" held in hospitals and village clinics.



843 new clients received psychosocial, health or legal counselling and benefitted from protection networks.



Legal counsellor from *Medica Afghanistan* at the entrance to the Kabul office

Afghanistan

Initial situation

Violence against women is still widespread in Afghanistan. Although Afghan women's rights activists have been able to raise awareness of women's rights in their society, neither the national government nor local authorities are enacting measures which would support this positive development. The progress which was hard won after the fall of the Taliban is now threatened by the increasing influence of conservative forces in society. For instance, the EAW Law (Elimination of Violence Against Women) was enacted

by President Karzai in 2009 as a presidential decree and made punishable offences out of various forms of violence against women for the first time, but it has yet to be ratified by parliament.

Goals and commitment

medica mondiale has been working in Afghanistan since 2002. Together with our local partner organisation *Medica Afghanistan - Women Support Organisation*, we offer support in the form of psychosocial, health and legal counselling to women affected by or threatened with violence in Kabul, Herat and Mazar-i-Sharif. In 2012,

more than 2,300 women and girls took advantage of this. Additionally, *Medica Afghanistan* trains healthcare specialists on the topic of trauma-sensitive treatment procedures. It also lobbies at the political and societal levels to achieve equality for women. Awareness-raising events were held for government employees in the legal and security sectors and also for religious leaders, increasing their sensibility for the specifics of women's situations. In November 2012, our partner's staff trained religious opinion leaders in Bamyán on the topic of preventing forced and child marriages.

For the right to live in dignity

As part of its legal assistance programme, *Medica Afghanistan* supports Afghan women in their attempts to settle family conflicts out of court.

Decades of war, disunity and international military interventions have left the Afghan society severely traumatised. It is the women who particularly suffer from the consequences. Rape, physical maltreatment, forced marriage and honour killings all occur every day without the perpetrators being brought to justice. Afghan legislation is embedded in the religious law of Islam, Sharia; this makes it difficult to take judicial action against violence and misogyny. Additionally, many traditions and religious provisions can be interpreted in a way which justifies the use of violence against women.

The legal assistance programme operated at *Medica Afghanistan* is its reaction to the need of many female Afghan citizens for justice. It fills a critical gap in the system: legal representation for women during civil and criminal justice procedures. In total, there are twelve female lawyers active in Kabul, Herat and Mazar-i-Sharif accepting these cases, some of whom have already been imprisoned. They represent their cli-

A selection of results from our work:

3 advice centres have now been established by *Medica Afghanistan* to provide legal and psychosocial assistance in Kabul, Herat and Mazar-i-Sharif.



898 psychosocial group sessions helped a total of 485 women and girls to process their traumatic experiences and regain some optimism regarding their future perspectives.



58 accused women were released from prison after *Medica Afghanistan* was able to prove their innocence.



1,497 women sought legal assistance from *Medica Afghanistan*, in many cases because of domestic violence.



106 Afghan women learnt to read and write in literacy courses



STATISTICS AND FACTS::

Project region:

Kabul, Herat, Mazar-i-Sharif (Afghanistan)

Target group:

Women and girls affected by or threatened with domestic violence, forced marriage or rape; imprisoned women and girls accused of moral crimes

Project activities:

psychosocial counselling, trauma-sensitive training for health-care staff, legal assistance, awareness raising for police, security and legal staff as well as government officials and religious leaders on the topics of women's rights and violence, public awareness work, literacy courses

Local partner:

Medica Afghanistan – Women Support Organisation

Funding:

German Federal Foreign Office, European Commission, private donations

Project expenses 2012:

1,275,654 euros

ents in court pro bono and advise them on all relevant legal issues. In addition, they also support extra-judicial efforts to resolve disputes, trying to avoid forced marriages or reduce domestic violence. In very many cases, the violence which women experience comes from their husbands or in-laws.

In 2012 *Medica Afghanistan* was able to mediate between clients and their families in more than 270 such cases. These mediation activities are designed to assist women to come to mutually agreeable solutions with their families before the case goes to court. In Afghanistan there is no tradition of resolving family issues publicly in courts, so if it does come to a court case, the woman involved and her family often suffer serious consequences because of this “disgrace”. Many are subsequently cast out of their social networks and even their biological families, which puts them in an almost impossible situation, since the lack of social security and the patriarchal social structures make it extremely difficult for a woman to live outside the community of her family.

At *Medica Afghanistan*, lawyers and social workers work side-by-side to ensure a meaningful connection between legal counselling and efforts to bring families together. Firstly, the client and her family receive separate explanations of their legal rights. This knowledge can be reassuring for the woman affected because it helps her to assess her situation better and strengthens her case. Then the actual process of mediation can begin with both parties attending. To come to an agreement that is acceptable to all involved, extraordinary negotiation skills are needed on the part of the lawyers and social workers in order to keep the interests of their client in sight but avoid pressuring the family, which could lead to them withdrawing their cooperation. It is best if the parties involved then draw up a signed written agreement detailing their commitments. After this, the clients are accompanied for a while by the social workers to monitor whether agreements are upheld. In 2012, *Medica Afghanistan* was able to help 87 women come to an agreement out of court regarding problems within their family.



Many Afghan women are imprisoned unjustly.



Self-care training courses help staff to recognise and respect their own limits.

Democratic Republic of Congo

Initial situation

Although the war in the Democratic Republic of Congo was officially ended long ago, the prevailing situation is anything other than peaceful. Even in 2012, the eastern part of the country saw brutal battles between armed militia and soldiers from the government army and in June, members of the rebel group “M23” laid siege to the eastern Congolese town Goma. Current estimates suggest there are more than two million internally displaced people and refugees. A large proportion of them are women and girls,

who have frequently been subject to rape and sexual exploitation. The long years of life continuing to be an emergency situation have led to a significant increase in the levels of violence in the region’s population. Effective prosecution of the perpetrators rarely takes place.

Goals and commitment

Since 2004, *medica mondiale* collaborates with the local Congolese women’s rights organisation PAIF (Promotion et Appui aux Initiatives Féminines), who works in eastern Congo to benefit women who have been raped. As part of the current

grant program, in 2012 survivors received psychosocial, medical and legal counselling as well as access to training courses and simple possibilities to earn their own living. The aim is to give affected women an economic and social ‘safety net’ which will enable them to build up their self-confidence again. In order to prevent sexualised violence in the long term, PAIF uses mediation and educational events to make families and communities aware of the problems. Internal training is provided to teach PAIF staff how to successfully cope with the often difficult counselling situations they are faced with.

Capacity building to make assistance possible

Training PAIF staff in ‘psychosocial counselling’ and ‘self-care’ help them to further develop their skills as they support women and girls affected by violence.

Brutality, poverty and displacement still characterise daily life in the Kivu provinces. Almost half of all women and girls there have suffered from or are threatened with sexualised violence. This is committed by soldiers marauding between the fronts and also by men at home within families, or at school. Only a few of the women are able to speak out. In spite of extensive public awareness work, which PAIF helps to organise, rape is still generally a taboo subject in Congolese society.

PAIF staff have been working to change the situation faced by women and girls there for many years. They try to help those affected by violence to overcome their traumatic experiences and support them as they build a new life for themselves. They accept the lengths they have to go to in order to do this. Only a few of them are trained psychologists or professional social workers with thorough knowledge of appropriate methods to improve the counselling they provide. Furthermore, many of them

also suffered from rape or another form of gender-specific violence, which means there is a significant danger of retraumatisation while dealing with the experiences of their clients.

In order to provide its workers with the specialist skills they need, PAIF works together with *medica mondiale* to offer them regular trainings in trauma-sensitive approaches. One aim of these seminars is to teach them basic psychosocial skills and practical counselling techniques suitable for the everyday conditions they work in. Another is for them to learn self-care, including a clear idea of what their role is as counsellors and how to be more aware of their own limits and improve their resilience.



Women in East Congo find empowerment and support at PAIF.

In May and June 2012, eleven staff members from PAIF took part in a seven-day training course, taking a direct look at the key opportunities and threats resulting from their work offering psychosocial counselling for women affected by violence: What are the precise connections between experiences and trauma? What counselling methods are available? How can women in crisis-torn surroundings be protected in the long term from renewed violence and retraumatisation? Group work, one-to-one sessions and role play were all used to take a look at cases from the participants' real working lives. Simple, effective methods were presented to help them recognise trauma and find the right approach to providing the most appropriate assistance in each case.

All of the participants described the training course as being immensely valuable for them and their work. They feel empowered, with improved specialist skills and knowledge to help them cope with even the most difficult counselling situations in a better way. Additionally, dealing with their own experiences helps them to better recognise and control their personal feelings of anger, despair, fear or shame which arise as a result. So PAIF's training courses have two main consequences. Firstly, they promote relevant skills and contribute to the propagation of knowledge about trauma-sensitive approaches. Secondly, the self-care sessions preserve the sanity of the counsellors themselves and ensure the continuity of support on offer for local women affected by violence.

STATISTICS AND FACTS::

Project region:
North and South Kivu
(Democratic Republic of Congo)

Target group:
women affected or threatened
by sexualised violence, in
particular girls and young
women in the 15-25 age group.

Project goals:
public awareness work, direct
assistance, capacity develop-
ment

Local partners:
PAIF (Promotion et Appui aux
Initiatives Féminines)

Funding:
donations, German Federal
Ministry for Economic Coopera-
tion and Development (BMZ)

Project expenses 2012:
251,356 Euro

A selection of results from our work:





FOWAC teaches young women agricultural skills

Project grant program

Initial situation

Unstable state infrastructure and government, inadequate prevention and protection mechanisms, patriarchal behaviour and a society characterised by poverty: these factors often lead to high levels of sexualised violence in crisis-torn areas. Local women's rights organisations have very few resources but nonetheless provide essential assistance for survivors and their families. To strengthen their work and promote local approaches to providing aid, *medica mondiale* estab-

lished its Grant Program, providing carefully chosen local partners with finances and expert advice.

Goals and commitment

Grants from 5,000 to 30,000 euros allow *medica mondiale* to help secure local aid and promote the establishment and development of local support structures and networks. These provide measures ranging from psychosocial counselling and healthcare through public awareness-raising and training courses to microcredits. In 2012 we continued

to concentrate on our cooperation with women's rights organisations in the Central African Great Lakes Region, in order to make effective use of our regional knowledge. In total, *medica mondiale* supported 19 partner organisations in this reporting year: in Rwanda, Uganda, Burundi and the Democratic Republic of Congo, as well as in Southeast Europe, Afghanistan and Cambodia. In this way, tens of thousands of women affected by violence and their families could benefit from support that is essential to their survival and gives them a new will to live.

Income creates security

In agricultural and savings groups, young Ugandan women learn how to look after themselves.

The story of 16-year-old Aline Musowini* from northern Uganda serves as an example for the fate of innumerable women and girls suffering from the effects of wars and conflicts all over the world. Decades of terror have seriously weakened the previously strong social cohesion in many Ugandan families and communities, reducing the feeling of being responsible for each other. "When my parents could no longer afford to send me to school, they wanted to marry me off quickly so I would cease to be a burden to them," says Aline. Many young women in northern Uganda have survived terrible ordeals. As child soldiers they were forced to kill and in the rebels' jungle camps they were sexually exploited. Some have children from their rapists.

Since 2007, the Ugandan women's organisation FOWAC (Foundation of Women Affected by Conflict) has been offering medical, psychological and socio-economic assistance. The programmes are targeted directly at those affected and also at society in general, since the women's environment needs to be made more aware of their problems and encouraged to seek conciliation.

* Name changed

Beispielhafte Ergebnisse unserer Arbeit:

15 local women's rights organisations in Central Africa received funding and specialist advice from *medica mondiale* in 2012.



240 former child soldiers and young mothers from Uganda were supported to reintegrate themselves in their families.



5 women's forums were established in Rwanda, offering 125 women who had been raped during the genocide a space to deal with their traumatic experiences.



66,000

people in the Central African region of the Great Lakes attended awareness-raising measures on the causes and consequences of sexualised violence. These included school pupils, teachers and local authorities.



30 women in Burundi were trained to become legal counsellors.



Owning seed gives women financial independence.

With support from *medica mondiale*, FOWAC has established a project where women learn to provide for themselves in agriculture and savings groups. How can I grow cereals? Which products sell best at market? How do I use an ox-plough? In the Ayuu Alali district, 68 young Ugandan women looked at the answers to these questions together, led by their FOWAC trainers. Subsequently, equipped with seeds and the necessary tools, they were already able to plant their first fields in 2012. In other districts, participants in similar courses were set up with the expertise and basic equipment to run a small seamstress service or eatery.

Working together in groups enables the women to motivate each other and share experiences. That creates a feeling of security. In order to increase their competitiveness and long-term stability, FOWAC also teaches each team simple marketing and book-keeping. Members learn how they can save and reinvest part of their profit into the further development of their enterprise. The training courses also offer advice on acquiring state grants, new clients or business partners. Self-care is also on the curriculum.

In Northern Uganda many women are dependent on the assistance from FOWAC, but it is not always easy to help them. In many villages, traditional customs forbid women to own property. So participating in schemes to earn their own livelihood would carry an additional risk: that of stigmatisation in their surroundings. In these cases, FOWAC tries to mediate. Its staff strengthen the women in their independence and raise awareness among local authorities, village elders and family members about the particular situation of these women and the benefits of the programme.

In 2012, FOWAC's project activities enabled a total of 122 women to establish a largely independent livelihood. Some young women such as Aline Musowini are even returning to school, since they can pay the school fees themselves, now. In 2012, *medica mondiale* provided 31,000 euros in grants to FOWAC.

STATISTICS AND FACTS:

Project regions:
Rwanda, Uganda, Burundi, DR Congo, Cambodia, Afghanistan, Albania, Bosnia-Herzegovina

Target group:
local women's rights organisations working to support survivors of sexualised violence

Project goals:
public awareness work, direct assistance, capacity development, supporting partners, networking

Local partners:
Medica Tirana (Tirana, Albania); *Medica Zenica* (Una Sana, Republika Srpska, Central Bosnia); HSOA (Mazar-i-Sharif, District 10, Afghanistan); CDP (Phnom Penh and provinces, Cambodia); SOS-FED (provinces Bujumbura and Bubanza; Burundi); ADDF (North Kivu, Butembo, DR Congo); AFPDE (South Kivu, Kaniola, DR Congo); Centre Tolonde, DFF, EPF-EC Peace Network, FACIV, FOSOF, GFM/CEPAF (South Kivu, Fizi, DR Congo); COFEDF Comité féminin, FESA (South Kivu, Uvira and Fizi, DR Congo); REMAK (South Kivu, Mwenga, DR Congo); SOFEPADI (North Kivu, Ituri, DR Congo); SEVOTA & Kanyarwanda (Kigali and districts, Rwanda); FOWAC (Kitgum and Lamwo districts, Uganda)

Funding:
private donations

Project expenses 2012:
357,073 euros



Kosovan woman farmers at the opening of their new shop

South-East Europe

Initial situation

During the Yugoslavian wars in the 1990s, tens of thousands of women and girls were raped, tortured and sexually exploited. Although Bosnia-Herzegovina and Kosovo are beginning to take a conscious look at their own history, gender-based violence remains a widespread problem. The public recognition of war crimes is insufficient and governmental support for the survivors is rare. In Albania, poverty and prevailing patriarchal structures also lead to wom-

en being oppressed. Rape happens very often. Affected women are then led to believe this is “adultery” or a “disgrace” and the fear of stigmatisation means they remain silent and therefore cannot seek help.

Goals and commitment

In Bosnia, Albania and Kosovo our partner organisations support women affected by violence and discrimination, offering psychosocial, health and legal counselling as well as measures to secure the livelihood of the women.

medica mondiale supports these initiatives financially and with professional skills. This is bearing fruit: In autumn 2012, Kosovan clients, with support of *Medica Gjakova*, founded a women’s farming cooperative in order to become economically independent. Other projects also address society and politics. Together with the partner organisation *Medica Zenica*, in 2012 we appealed for survivors of sexualised wartime violence to be awarded the status of war victims and granted an invalidity pension.

Protection networks give women courage

In 2012 *Medica Zenica* established protection networks in Bosnia. These support women raped during the war in their attempts to achieve the status of disabled persons.

Memories of wartime terror, internment, abuse and brutal rape still shape the lives of tens of thousands of Bosnian women. During the Bosnian war (1992-1995), soldiers and paramilitaries raped approximately 20,000 to 50,000 women and girls, many of them a number of times and over many weeks and months. Most of them remain heavily traumatised since then, suffering from chronic diseases or anxiety disorders which have strong impacts on their daily life and make it impossible for them to work. Without outside support they are affected by extreme poverty.

Since 2006 a Bosnian law grants a monthly invalidity pension to women raped during the war. This act of compensation with its corresponding social and public recognition of survivors of sexualised wartime violence is so far unique in the world. Many years of committed action by women’s rights groups contributed to this result. Despite the

A selection of results from our work:

90 Kosovan women sell their home-made products in a retail outlet funded by Medica Gjakova, generating their own income.



387 women and girls from Gjakova in Kosovo and the surrounding villages received psychosocial or health-related counselling in one-to-one or group sessions.



160 police officers, teachers, nursing staff and social workers in Albania attended awareness-raising sessions run by *Medica Tirana* on the topic of sexualised violence within families.



18 production groups were formed as part of the activities of the *Medica Gjakova* women's cooperative.



24 counselling sessions from *Medica Zenica* helped 30 Bosnian women to cope with their traumatic experiences of violence.



relatively small amounts of money involved, the monthly payments of 70-200 euros are indispensable for war-traumatised women.

However, by the end of 2011, only 900 Bosnian women had claimed their pension because very few people across the country are familiar with the law. Even if survivors do know about it, a rigorous application procedure puts many of them off applying since it requires clear evidence of rape during the war. Justifiably, the affected women are fearful of their memories of these traumatic experiences and also often afraid of insensitive treatment by the authorities. To deal with these problems, *Medica Zenica* and *medica mondiale* jointly started to establish protection networks in 2012. The goal is to prevent survivors and witnesses from retraumatisation during or after giving statements as part of the application procedure. The networks also serve to help them take some control over their own lives.

For this, *Medica Zenica* offers direct help such as self-help groups or psychosocial counselling. At the same time other actors are included – public institutions, ministries and civil society organisations. In working groups and awareness-raising trainings, their representatives learn about the consequences of a traumatic experience for the psychological and physical health of a human being and how to avoid retraumatisation during a court or application procedure. About 20 institutions have already taken part in this programme. Further trainings on the issues of 'network organisation' and 'impact monitoring' are intended.

Positive effects could be seen immediately following the establishment of the first networks. Firstly, the non-governmental organisations in the networks could position themselves more strongly when dealing with governmental authorities and make their voices better heard for the protection of war-traumatised women. And secondly, many women felt strengthened by the support in the networks and have applied for disability status.

STATISTICS AND FACTS::

Project region:

Zenica-Doboj and Central Bosnia cantons (Bosnia-Herzegovina), Dukajini (Kosovo), Tirana (Albania)

Target group:

female survivors of sexualised and gender-based violence perpetrated during or after the war, women and girls from ethnic minorities, widows

Project goals:

poverty reduction, establishment of self-help structures for women and girls, building up community-based support structures, psychosocial and health stability, improvement of local healthcare provision, public awareness work, encouraging networking

Local partners:

Medica Zenica (Bosnia-Herzegovina), *Medica Gjakova*, *Medica Kosova* (Kosovo), *Medica Tirana* (Albania)

Funding:

German Federal Ministry for Economic Cooperation and Development (BMZ), private donations

Project expenses 2012:

Kosovo: 232,997 Euro
Medica Zenica: 40,000 Euro

Members of a *Medica Zenica* psychosocial counselling group





Afghan colleagues during their visit to Bonn

Inform, discuss, raise awareness: Communication at *medica mondiale*

Sexualised violence and traumatising during war have far-reaching consequences for every affected woman, for their families and for society as a whole. Estimates suggest that one in three women worldwide has suffered violence at least once in their life. In some regions and age groups, violence is a more frequent cause of invalidity and death than cancer, malaria, traffic accidents and war all put together. This endangers more than just the individual women involved: it is a threat to peace and security throughout the world.

Only a tiny minority are aware of these facts but to intervene actively and reduce violence against women we need information and conviction. For this reason, *medica mondiale* has taken on the role of making sure the public and political decision-makers know about the facts, contexts and consequences relating to sexualised violence in war and crisis areas. At the same time we want to raise a greater awareness of gender-based injustice in the population. We also encourage both men and women to assume responsibility for increasing justice in the world.

In order to ensure that donors, the press, politicians and society in general are all targeted appropriately, in 2012 we established our “Communication” department, bringing together the previously independent departments: Press and Public Relations, Fundraising and Advocacy and Human Rights. This helps us to bundle our resources effectively and strengthen our organisation’s external impact.

Advocacy and human rights

medica mondiale's active commitment to women's rights

Governments, expert committees, human rights organisations and development aid bodies are all important contacts for *medica mondiale*. They exercise influence on the development of policies, laws and conventions and help to determine whether general conditions are fa-

vourable towards women's rights or not. In order to ensure that our aims come onto the political agenda, *medica mondiale* continually works to improve its networking and cooperation with relevant actors. At specialist events, in dialogue with politicians, in position papers and

via open letters, we make our position clear regarding the topics we are working with, suggest tangible strategies to prevent sexualised violence, and appeal to decision makers to take appropriate action.



With numerous publications we inform about our work.



Monika Hauser as guest speaker during a radio broadcast at the WDR in Cologne

A National Plan of Action for women, peace and security

medica mondiale considers itself to be an advocate for survivors of sexualised violence, representing their interests and asserting their rights. In this role, in autumn 2012 we joined forces with other civil society organisations and contributed to the drafting of a 'National Action Plan for the Implementation of UN Resolution 1325' for Germany. This resolution, passed by the UN Security Council in 2000, aims to increase the role of women in crisis prevention, conflict resolution and post-conflict peace building, as well as protecting them against sexualised violence. National action plans should be drawn up, containing practical measures to achieve these aims.

A draft plan was first published by the German government in mid-November. During a very tight, two-week consultation period, *medica mondiale* worked very closely together with other women's rights organisations to develop an opinion on this draft. We demanded more transparency, accountability and measurability during the implementation of the Action Plan, as well as a trauma-sensitive approach and the establishment of witness protection programmes. Our efforts led to some of these points being included in the Action Plan before it was passed by the Cabinet on December 19.

More responsibility for women in Afghanistan

With our international conference "Hope for peace and fear for women's rights in Afghanistan" organised jointly with the Evangelische Akademie im Rheinland (Protestant Academy) at the end of November 2012, *medica mondiale* drew attention to the precarious situation regarding women's rights in Afghanistan.

In spite of years of military intervention and billions of dollars of aid, Afghan women and girls are still being oppressed. At the conference, more than 70 participants took part in the debates, including the peace policy expert Dr. Ute Scheub, the Director of the Afghanistan Analyst Network, Thomas Ruttig, and Dr. Monika Hauser. Their exchange of views strengthened the insight that a strong civil society is more effective at preventing conflicts and violence than military strength.

Our guests from Afghanistan made particularly insightful contributions to the discussions: the psychologist Zarghona Ahmadzai, the lawyer Sajia Behgam and the director of the psychosocial department at *Medica Afghanistan*, Vida Faizi. Other participants could clearly see the strength of character needed to maintain this active commitment to overcome all obstacles to women's equality in Afghanistan. The generally positive reactions from all the participants and press representatives showed that the conference achieved its aim: to attract attention and make specific problems visible.

Fundraising

Means lead to ways – Donations are the basis of our success

Survivors of sexual violence need solidarity, trauma-sensitive support and a society which stands up for them. We are working on that together with our partners in the project countries and in Germany. However, change takes time and trust. We depend on the loyalty of our donors to enable our measures to become efficient and sustainable. 50 per cent of our income consists of private donations – this forms a basis for our

success, helping us to act in the spirit of our commitment and independently of external funding stipulations.

In 2012 many thousands of donors again supported us in many different ways: financially, with volunteer work, or with creative fundraising activities. We want to express our gratitude to every one of them.

The work of our fundraising team is indispensable for ensuring that both new and existing donors are enthusiastic about

the goals of *medica mondiale* and to keep them informed about our projects. With fundraising letters, information events, the donors' magazine "memo" or the maintenance of the website, they create transparency and offer access to current information. They bring our strengths together with yours to support our further activities – for women's rights and against violence.



Fundraising officer Sanne Kaperlat at an 'Aktion Weitblick' benefit event

Presenting clear information – *medica mondiale* online

The world today is unimaginable without the internet as an information medium. Over 53,000 interested people accessed our website in 2012 – to find information about "sexualised violence" or "traumatised women", to donate online, or to contact us. We want to encourage this development so in 2012 we intensely discussed the structure and the handling of our website. What kinds of information should be presented? Does the site have a clear structure and is easy to use? How often does it need to be updated?

A website analysis in summer 2012 gave answers to these questions. Numerous factors were considered: visitor numbers, page requests, quit rates, design and structure, user-friendliness and more. The results, confirmed by external experts, will now be integrated into the setup of a new website presenting our work even more clearly.

Creative and committed: Supporters' actions for *medica mondiale*

Every year we are fascinated by the amount of creativity our supporters invest in their efforts to benefit *medica mondiale*. From a sponsored run to a cultural event – all in all, 2012 saw 121 benefit events raise more than 15,404 euros.



The phone rarely stops ringing at our donor service.

Music against violence: World Doctors Orchestra playing for *medica mondiale*

Health is a human right. The members of the World Doctors Orchestra (WDO) are convinced of that. Every year they exchange their white coats for evening dress and stethoscopes or scalpels for violins and oboes to perform a benefit concert for a selected charity. In October 2012 they played at the Philharmonie Essen and donated the proceeds of 3,000 euros to *medica mondiale*.

In addition the evening offered a chance for exchange and information. Even before the concert began, Dr. Claudia Czerwinski, *medica mondiale* board member and a doctor herself, thanked them for their generous support and described the current challenges in fighting sexualised wartime violence. An information point served to make available publications, flyers and professional articles about the main priorities of our work abroad and in Germany to the concert attendees.

The idea to play for *medica mondiale* came from a long-term supporter of our work, Dr. Wibke Voigt, who is also a member of the World Doctors Orchestra, which was formed in 2007. "Health means physical, psychological and social wellbeing," she said. This should also include the non-violent and respectful treatment of women.

Loyal support from 'Aktion Weitblick'

"This is our contribution to active peace work and practical solidarity with women in war and crisis zones." That is how the women of 'Aktion Weitblick' from Gelsenkirchen describe their motivation for supporting *medica mondiale*. Since the group was founded eleven years ago, the initiative has organised 19 'book markets', generating 30,400 euros which they passed on to us.

They also donated the proceeds from their anniversary celebration on September 20, 2012. Several prominent guests read selected texts related to the title "The Joy of Reading and Human Rights". As a representative of *medica mondiale*, Sanne Kaperlat talked about the successes and obstacles we face in our work.

'Aktion Weitblick' goes back to the idea of several women's organisations and engaged individuals in Gelsenkirchen to support women in Afghanistan who had been traumatised by war and violence. In 2002 this common intent led to their cooperation with *medica mondiale*, which has continued to the present day.



The orchestral doctors in the WDO play benefit concerts for charities.



Ten years of lively solidarity:
'Aktion Weitblick' from Gelsenkirchen

HOW CAN I GET INVOLVED?

Do you have questions or suggestions? Do you need informational material? Would you like to place some donation boxes for us? Or do you need a few tips on how to organise a benefit event? We will gladly assist and advise you. Just call us on **+49 221 93 18 98-42 (Contact: Ute Fischer)** or write us an e-mail: **service@medicamondiale.org**.

We are grateful for your ideas and practical support!

Press and public relations work

Conveying values, gaining trust

Over the last 20 years, *medica mondiale* has gained thousands of supporters and advocates, earning a solid reputation in its role as a political women's rights organisation. One of the reasons for this positive response is our successful press and public relations work, which communicates our experience, values and convictions to the out-

side world. It lends our organisation an image standing for quality, courage and willingness to take action.

To achieve this goal we use a range of media. Brochures and flyers inform politicians, journalists, human rights activists and private individuals about the background of our work. We maintain good contact with the press and pass

on our expertise for articles. Journalistic contributions of our own also point out current developments and problems in our working areas.

In 2012 *medica mondiale* issued seven press releases and published two specialist articles. Our staff gave 43 interviews. Monika Hauser presented our work at 15 events.



The photo exhibition "Strong Voices" documents the daily life of Afghan women.

Glimpses behind the scenes

Photos broaden our view of the world. They inform, open up new perspectives, create impressions and inspire us to reflect. With three photo exhibitions, *medica mondiale* documents the daily life of women affected by violence in Afghanistan and in the Democratic Republic of Congo, bringing the realities of their lives into the focus of the German-speaking public. How do women live in a society characterised by ongoing violence? How do they maintain their dignity? What support do they need? Some of the photos show the work of our partner organisations abroad. In 2012 the exhibitions were presented in five cities.

One example was the presentation at the end of the reporting year in the city hall in Wiesbaden. The city's Commissioner of Women's Affairs and the working committee "Prevention, protection and help in domestic violence situations" exhibited our photo series "Strong Voices – Women in Afghanistan". 15 portraits of Afghan women together with their personal statements illustrated the difficulties faced by women in Afghanistan as well as their visions of peace and the future for their country. At the exhibition opening, Bele Grau, country officer for Afghanistan, reported on the extreme violence against women in Afghanistan and on our work there.



A Congolese girl in a refugee camp in the Democratic Republic of Congo.

State Prize rouses strong press interest

In the second half of the year, one event in particular marked our press work: on November 19, 2012 Monika Hauser was awarded the State Prize of North Rhine-Westphalia, the highest honour which the federal state awards. The recognition of “her outstanding humanitarian work in war regions and other crisis areas”, as Minister-President Hannelore Kraft expressed in her congratulatory speech, attracted a great deal of attention from the media and general public.

Our press office coped masterfully with the challenge of dealing with a huge number of enquiries in a short time. Within a few days we coordinated numerous interviews, provided journalists with information, and organised public events with our staff members. The TV also reported on our work and the broadcaster WDR2’s presenter Christine Westermann invited Monika Hauser onto the popular radio programme “MonTalk”.

Monika Hauser and *medica mondiale* had already been honoured several times. The public interest in the State Prize offered another great opportunity to reach out to many people and draw their attention to the fate of women and girls traumatised by wartime violence worldwide.



Hannelore Kraft presents the NRW State Prize to Monika Hauser.

New media for more visibility

Streaming media, online videos, podcasts: “animated” media reports on the internet continue to increase in popularity. *medica mondiale* is also making use of this trend towards multimedia to promote its projects and successes. In 2012 the Communication department produced four online videos on our engagement in Liberia, the situation of women in Afghanistan and methods of trauma work.

In December the staff of the head office in Cologne stood in front of a camera together for the first time to describe their involvement and the support needed by survivors of sexualised violence. In addition they looked back to the successes already achieved and addressed the reasons why it is worth continuing this work with every new day.

Published shortly before *medica mondiale*’s 20th anniversary in 2013, this online video was an excellent way to show the many faces of the organisation. *medica mondiale*’s entire staff is highly motivated as they contribute in their own ways to the support of women and girls in war and crisis zones. More than 500 viewers have already assured themselves of that since the video appeared.



Online videos offer a vivid impression of our work.



We continuously evaluate the impact of our work on the women involved

Trauma-sensitive psychosocial work

With a trauma-sensitive approach to our work, *medica mondiale* enables both clients and staff members to cope with the consequences of sexualised violence.

As well as physical injuries, psychological trauma is one of the most common consequences of sexualised wartime violence. Trauma destroys the affected person's feeling of security, attacks their basic sense of trust, and creates

an overwhelming feeling of helplessness. Untreated trauma can also affect family members and the following generations, continue to have further effects within wider society. For women to cope with their traumatic wartime violence

experience it is important that project staff and other professionals treat them in a trauma-sensitive way. Their focus always has to be on strengthening and stabilising the women and girls involved.

Disseminating trauma-sensitive knowledge, establishing standards

In the last 20 years, *medica mondiale* has gained important experience in dealing with wartime rapes and their consequences for the affected women, leading to the development of trauma-sensitive approaches for various working fields. In 2012 one of the key issues in our work was to disseminate these approaches in war and crisis zones, as well as in Germany. The intention is for our partner organisations, female specialists and local project teams, as well as other organisations, to benefit from our findings and professional expertise in a long-term, sustainable way.

For example in Liberia: During 14 years of civil war hundreds of thousands of women experienced sexualised violence. Traumatization is therefore widespread in the population there. During her project visit in July 2012, the head of our Trauma Work department, Karin Griese, held two workshops to teach trauma-sensitive working methods to project leaders in Liberia. They can now pass this on to their staff.

Training in Germany

In Germany *medica mondiale* also offered three training courses in 2012 on ways to deal with the consequences of violence and traumatization. Discussions, group work and role play introduced relevant methods to the participants, showing them how to support women affected by violence to process their traumatic experiences even without professional therapeutic skills. Examples of exercises for stress reduction and prevention of retraumatization were deemed to be particularly helpful – for the work with affected women as well as for the participants' own self-care. A detailed evaluation of a training course in October showed that more than half of the participants were professionals in field of development cooperation, using the seminar as preparation for an upcoming assignment abroad.



medica mondiale training participants in Cologne



Evaluator Michaela Raab at the Congolese organisation PAIF

Project evaluation: Learning from experience

Why does *medica mondiale* evaluate the effectiveness of its projects?

Are we doing the right thing and are we doing it in the right way? *medica mondiale* constantly asks itself this question since many factors have to be brought together meaningfully in order to provide effective support for women and girls affected by violence in war and crisis

zones. So *medica mondiale* conducts regular impact monitoring and evaluation. Independent consultants and our own staff visit the project countries and check the results of our work by means of interviews, expert discussions or workshops. The same is true for our work in

Germany. In 2012 three projects abroad were externally evaluated. An evaluation of our trainings in Germany on wartime violence and trauma is still ongoing.

Impact monitoring across borders

The evaluation of the three-year Peace Building project to strengthen the political participation of women in the peace process was a special challenge in 2012. With women participating from Liberia, Afghanistan and the Democratic Republic of Congo, the project covered the contexts of three completely different countries. As a consequence, the evaluation had to be designed for three heterogeneous groups. In Liberia only a few participants were able to read and write, so the evaluation team worked with role play, pictures and conversations to gain useful information. In the DR Congo, this reflection worked better using posters and letters.

This made clear that many participating women had been able to improve their self-confidence as well as their political skills and knowledge, directly improving their efforts to bring about change in their countries. Some women in the DR Congo have now even gained positions in ministries, communities and provincial councils. In 2011, the Afghan participants successfully insisted that President Karzai enable their participation in the Afghanistan Conference in Bonn. Women also reported that the know-how they gained in the project has earned them more respect in their communities and enabled them to assert their rights in their local authorities.

Assuring quality

Whether abroad or in Germany: The evaluation of our projects serves to discover possible weaknesses and to develop alternative approaches where necessary. We want to learn from our experiences and thus improve the quality of our work. Our evaluations are based on the standards of the German Association for Evaluation (DeGeVal) and our own fundamental principles and quality standards. These include dialogue and close cooperation with our project partners abroad. Findings are then integrated into the management of operational work processes and are considered when drawing up concepts for new projects.

Association, governing bodies and duties

medica mondiale e.V. is a registered non-profit association domiciled in Cologne, Germany. Our governing bodies are the General Assembly and the Board of Directors. The General Assembly is the highest supervisory body in our organisation. It elects the Board of Directors from among

its ranks. The General Assembly meets once a year to receive and approve the Annual Report from the Board of Directors. The accuracy of the Annual Financial Statements is checked by an independent financial auditor. The Board runs the association. It decides on the priorities and strategies in

accordance with the purpose of the association. It also appoints and supervises the Management. With the exception of one full-time employee, all members of the Board perform their duties voluntarily. They are not paid remuneration. Instead they receive a minor fixed-sum compensation decided by the General Assembly.

Board of Directors 2012:

Heidi Thiemann (since October 2012)
 Dr. Claudia Cerwinski (since October 2012)
 Dr. Monika Hauser (Executive Member of the Board)
 Diana Krüger
 Karin Schüler
 Heidi Thiemann

Salaries

Managing Directors: 5,200 euros*
 Heads of Department: 3,900 euros*
 Officers: 3,050 euros*
 Assistants: 2,300 euros*

Additionally, our Executive Member of the Board Monika Hauser is also a member of the International Board of the BICC (Bonn International Center for Conversion), the Board of Trustees of the Bremen Solidarity Prize, and the Board of Trustees of the Medica Mondiale Foundation Switzerland.

Main office in Cologne:

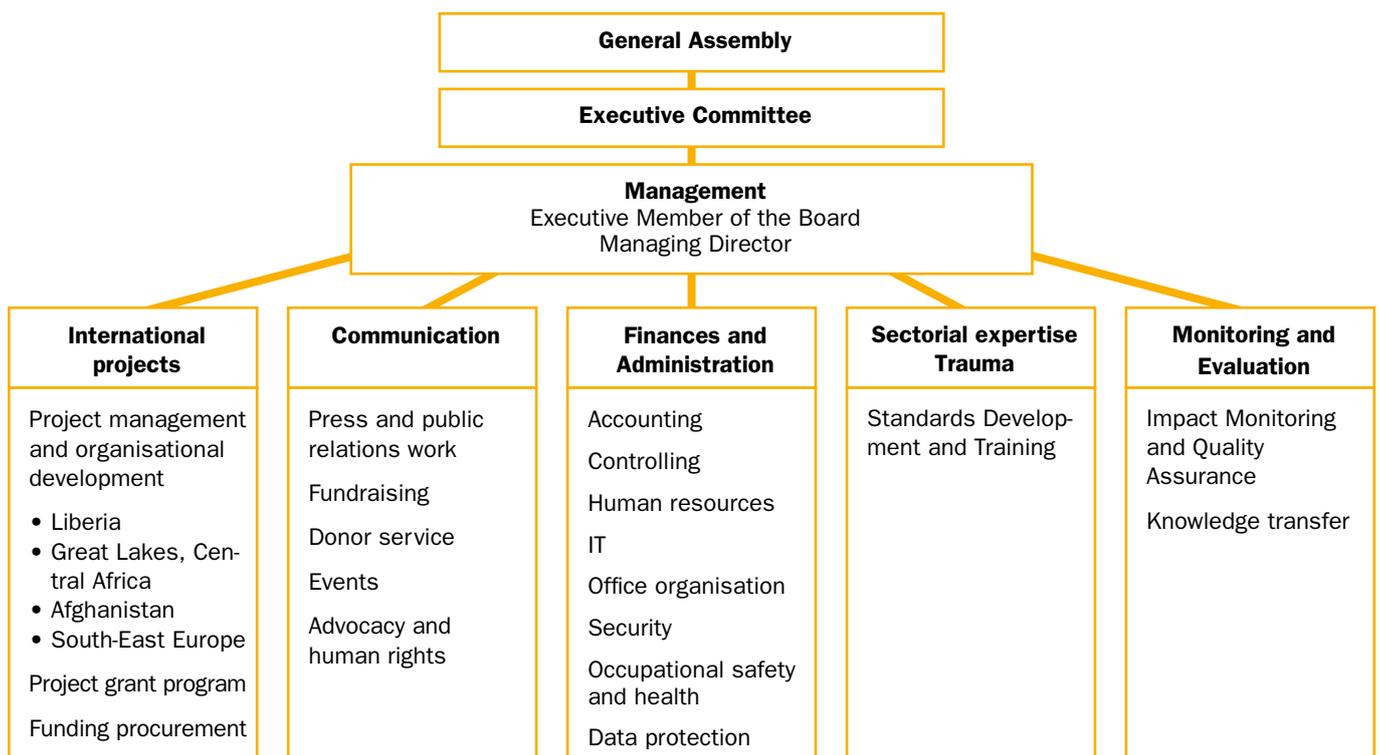
2 managing directors;
 41 salaried employees (year average), of which 25 are full-time positions, 16 part-time, 1 trainee
 5 temporary support posts
 1 placement student
 10 interns
 3 voluntary staff members

Memberships held by *medica mondiale*

VENRO (Association of German Development NGOs), Forum Menschenrechte (Human Rights Forum - a network working to improve protection of human rights), People In Aid (worldwide association of agencies in the humanitarian and development sector), Arbeitskreis Frauen und Gesundheit (women's health network), Crisis Action (international, non-profit organisation working to avert conflicts through advocacy and campaign work).

For the bylaws of the association, please refer to the "About us" section of our website: www.medicamondiale.org.

*The average monthly salaries indicated were calculated on the basis of a full-time position. These amounts do not include the statutory employer contributions to social security. They include 12 monthly payments. Any extra Christmas bonuses are decided on from year to year by the Board.



Financial Report 2012

Income

Compared to the previous year, in 2012 our total income decreased slightly. Income from donations increased by 5 per cent, grants decreased slightly by 1.2 per cent, and other operational income was 60 per cent lower. This means that other operational income returned to its normal level in the reporting year after the previous year's strong increase due to extraordinary income not directly related to the accounting period.

The grants and benefits for projects of public and private sponsors mainly came from the EU, the KfW (Reconstruction Loan Corporation) via German Agro Action, the German Federal Ministry for Economic Cooperation and Development, the German Federal Foreign Office, the Sigrid Rausing Trust, the Louis Leitz Foundation and other sponsors.

Expenses

Total expenses in 2012 rose 9.2 per cent in comparison with the previous year to 5,665,641.69 euros. The main reason for this is the commencement of a project in Liberia for refugees from the Ivory Coast.

At 4,675,844 euros, approx. 82.5 per cent of the total expenditure were for project expenses in Germany and abroad. The share of these made up by spending on projects abroad was 88 per cent: 4,128,709 euros. A share of 4 per cent was spent on domestic project work – human rights and trauma work – and 6 per cent of the expenses were for awareness raising, information and advocacy work carried out to fulfil the aims and objects of *medica mondiale*.

The project expenditure includes direct project costs and the spending on project support, including the management of the projects from the main office in

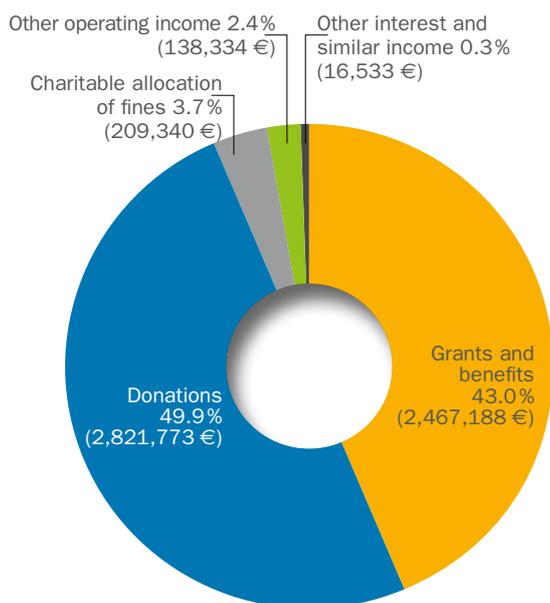
Cologne.

Fundraising, advertising and administrative expenses – totalling 989,797 euros – amounted to 17.47 per cent. This is less than the figure for 2011 and in real terms this expenditure decreased by 133,718 euros. The apparent decrease in many expense items is actually coupled with a corresponding increase in the item 'Grants, benefits to third parties'. This reflects the transfer of responsibility for operations in Afghanistan, with expenses formerly (until 2011) borne in Cologne by *medica mondiale* e.V. now flowing in the form of grants to *Medica Afghanistan*, operating as an independent organisation.

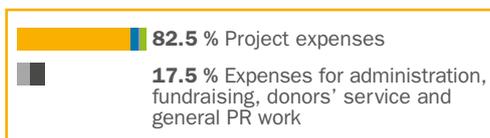
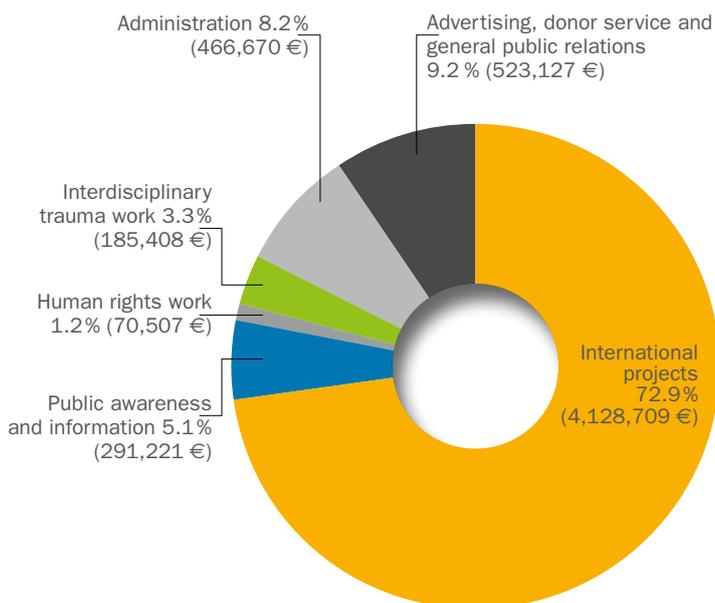
Result

Income in 2012 amounted to 12,473.72 euros. The shortfall was covered by reserves.

Income 2012



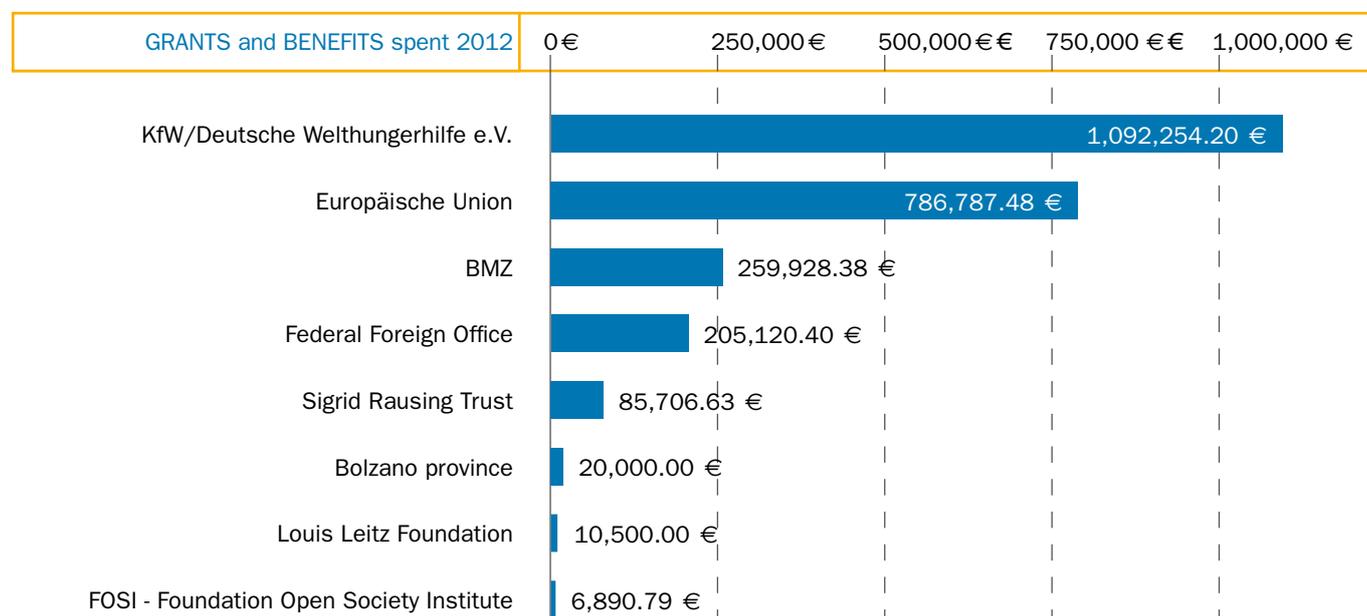
Expenses 2012



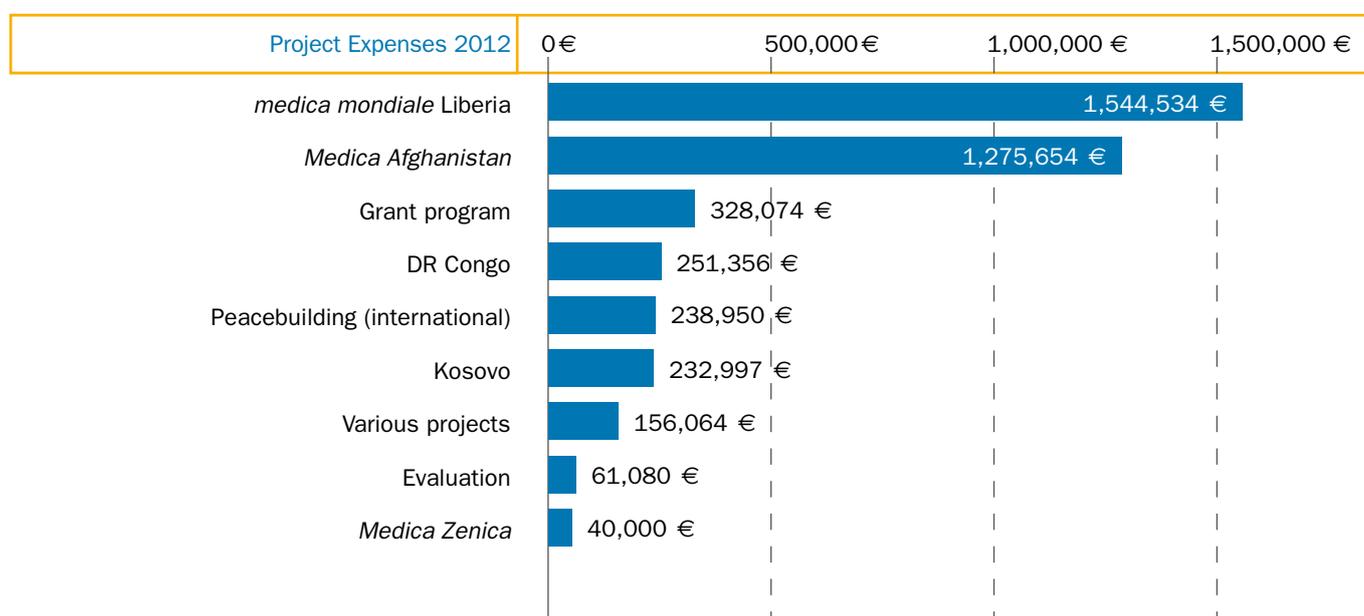
Balance sheet

for the period January 1 to December 31, 2012, *medica mondiale e.V.*, Cologne

Assets	2012		Previous year	
	EUR	EUR	TEUR	TEUR
A. Capital assets				
I. Intangible assets				
Concessions, industrial property rights and similar rights and assets as well as licenses in such rights and assets	39,241.10		3	
II. Tangible fixed assets				
1. Land, land rights and buildings including buildings on third-party land	0.00		11	
2. Other fixtures and fittings, tools and equipment	<u>127,368.79</u>		<u>154</u>	
Total capital assets		166,609.89		169
B. Current assets				
I. Receivables and other assets		810,847.71		308
II. Securities		0,00		250
III. Cash-in-hand, bank balances		2,525,528.89	3,359	3,359
C. Accruals and deferred income		<u>9,180.91</u>		<u>10</u>
		<u><u>3,512,167.40</u></u>		<u><u>4,096</u></u>



Liabilities				
	2012		Previous year	
	EUR	EUR	TEUR	TEUR
A. Equity capital				
as of 1.1.2013	3,039,315.93		2,487	
Annual surplus	<u>- 12,473.72</u>	3,026,842.21	<u>+ 552</u>	3,039
B. Special items from investment subsidies				
		24,146.03		41
C. Reserves				
Other reserves		171,876.40		194
D. Payables				
1. Trade accounts payable	98,496.67		34	
2. Other payables	<u>69,698.37</u>	168,195.04	<u>55</u>	89
E. Accruals and deferred income				
		<u>121,107.72</u>		<u>733</u>
		<u><u>3,512,167.40</u></u>		<u><u>4,096</u></u>



Profit and loss account

for the period January 1 to December 31, 2012

	2012		Previous year	
	EUR	EUR	TEUR	TEUR
1. Income from grants and benefits	2,467,187.88		2,498	
2. Donations and similar income	3,031,112.60		2,881	
3. Other operating income	138,334.28	5,636,634.76	349	5,728
4. Personnel expenses				
a) Wages and salaries	1,602,824.10		1,492	
b) Social security, pensions	288,759.43	1,891,583.53	281	1,773
5. Depreciation of intangible assets and tangible fixed assets		58,097.32		66
6. Other operating expenses				
a) Fees	672,214.70		553	
b) Travel and vehicle expenses	269,026.11		352	
c) Rent and other premises expenses	188,519.07		139	
d) Medical costs	1,393.84		1	
e) Insurances, contributions and advice	79,058.90		77	
f) Office supplies	26,218.11		34	
g) Other administrative costs	56,195.79		55	
h) Incidental costs of monetary transactions	30,206.41		26	
i) Advertising and representation expenses	324,810.27		293	
j) Other expenses	336,628.31		127	
k) Training, further training	40,642.46		63	
l) Grants and benefits to third parties	1,690,997.08	3,715,911.05	1,627	3,347
Interim result		- 28,957.14		+ 538
7. Other interest and similar income		16,533.21		14
8. Interest and similar expenses		49.79		0
9. Results from ordinary business activities/ Annual surplus		- 12,473.72		+ 552

Excerpt from the report on the audit of the Annual Financial Statements as of 31st December 2012 by the audit and tax consulting company Solidaris Revisions-GmbH Wirtschaftsprüfungsgesellschaft-Steuerberatungsgesellschaft, Cologne of 05st July 2013:

Certificate: We have audited the Annual Financial Statements – comprising Balance Sheet and Profit and Loss Account – including the bookkeeping records of the association *medica mondiale* e.V., Cologne, for the accounting year January 1 to December 31, 2012.

The legal representatives of the society are responsible for the bookkeeping and preparation of the Annual Financial Statements. For this, it was voluntarily decided to ensure substantial compliance with the provisions of German commercial law.

It is our responsibility to furnish an evaluation of the Annual Financial Statements including the bookkeeping records on the basis of the audit performed by us. The scope of the examinations carried out by us was determined by the actions required to investigate the probative value of the bookkeeping and to examine presentation, evidence, and adequacy of the values assigned to balance sheet items.

Essentially, our audit activities encompass analytic audit activities and individual case examinations.

We determined the scope of our individual case examinations on the basis of the method of purposive sampling.

We are of the opinion that our audit has furnished a sufficiently reliable basis for our evaluation under the terms of the audit assignment accorded.

Our audit has not led to any significant reservations.

According to our judgment based on the insights gained from the audit, the Annual Financial Statements are in substantial compliance with the provisions of German commercial law, whereby for this society compliance with these provisions is voluntary.

Our mission would be truly impossible without you!

With your help we work to benefit women and girls in war and crisis areas. There are many ways you can help support our work:

Donations instead of gifts

Birthdays, baptisms, weddings or anniversaries – these are all special occasions where you could ask for a donation to *medica mondiale* instead of a gift. As a company you could donate a specific amount to *medica mondiale* and then tell your clients what you did and why.

Benefit events

A concert, a reading or a murder mystery evening – all of these are great opportunities to present the work of *medica mondiale* and collect donations. Company parties or annual sports competitions could also be organised in a way that benefits *medica mondiale*.

Memorial donations

Asking for donations to support *medica mondiale* can be a persuasive alternative to flowers and wreaths. It is frequently something that the deceased would have wanted.

Fines paid to *medica mondiale*

In Germany, a court can decide to allocate the money from fines paid as a punishment for offences to charitable associations such as *medica mondiale*. Tell judges, state attorneys, and jury members about *medica mondiale*; we will help you out. We can send book-marks for legal files and other information materials which you can forward to your contacts in the justice system.

Donation boxes

Every cent counts! Donation boxes on the counter at the bakers, the pharmacy or in doctor's surgeries are a great way to collect support. We will gladly provide you with sealed donation boxes.

Help at work

Raise awareness of our work at your workplace by posting a notice on the bulletin board or writing for your company newsletter. Or start a "Donate the cents" campaign: With this form of payroll giving, everyone donates the decimal fraction of their monthly paychecks (a maximum of 99 cents per person per month) to *medica mondiale*.

Tell others

Spread the word about our goals. We will gladly provide current materials for events, information stands and for you to forward on to your friends and acquaintances. Please also ask us for our postcard or bookmark sets. If these small contributions are made by many people the total soon adds up!

Donations account:

Sparkasse KölnBonn

BIC: COLSDE33

IBAN: DE92 3705 0198 0045 0001 63

Or you can donate online at:

www.medicamondiale.org

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p 5: Beate Kriechel/*medica mondiale*

p 6: Beate Kriechel/*medica mondiale*

p 7: above: *Medica Zenica*

below: Karin Griese/*medica mondiale*

p 8: Karin Griese/*medica mondiale*

p 9: Rendel Freude/*medica mondiale*

p 10: Lizette Potgieter/*medica mondiale*

p 11: Lizette Potgieter/*medica mondiale*

p 12: PAIF

p 13: Sybille Fezer/*medica mondiale*

p 14: Stefanie Keienburg/*medica mondiale*

p 15: Stefanie Keienburg/*medica mondiale*

p 16: *Medica Gjakova*

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p 18: Beate Kriechel/*medica mondiale*

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below: Nuria Schäfer/*medica mondiale*

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Our vision:

“Women and girls are living in a world free of violence.
They live in dignity and justice.”

medica mondiale e.V.

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