EXECUTIVE DIRECTOR’S LETTER (YEAR AT A GLANCE)

In spite of all the efforts made to promote women’s rights in Afghanistan and the gains made, it is too soon to say that Afghan women have won the battle for equal rights. In fact, the social and legal protection of women is deteriorating.

2014 was predicted to be a year of change in Afghanistan. Two major events were following during the course of the year, Presidential Elections and withdrawal of foreign troops. Amid rumors of signing the bilateral security agreement with USA and NATO, Afghanistan witnessed transitions from – the international military withdrawal and the Afghanistan National Security Forces’ inability to take lead of internal security and order, political change at the highest level, and economic problems as international aid was declining.

This situation had considerable effects on the work of independent NGOs throughout the country. Humanitarian workers were expose to violence increasingly, resulted in kidnappings, injuries, deaths, and consequent restrictions on operations. The International NGO Safety Organization (INSO) recorded 13,006 incidents over the first six months of 2014.

At the same time, the Ministry of Women’s Affairs (MOWA) registered more than 2,000 cases of violence and sexual abuse against women and girls. In addition, there was significant case increase in gender discrimination, violence against women, and child sexual abuse and the ineffective response of state authorities to the prevailing situation.

As per our experience, some women in cities are self-confident and aware of their rights. They are empowered to fight for change: they speak out, raise women’s concerns, advocate for new laws, and campaign for women’s political participation. However, the majority of women living in rural areas and even in the cities are not aware of their basic legal rights. In some circumstances, being unaware of their legal rights and inability to seek justice, women have either committed suicide or murdered their abusive husbands. Afghan Formal Justice System is un-reliable for many women because of the fear of escalating discrimination. A simple example of legal awareness on the part of women is that they can live a life free of violence by Law while due to lack of awareness many live their lives adapting to threats of exclusion and violence, quietly suffering unimaginable mental and physical abuse without hope for justice or a better life.

Insecurity, political instability and unpredicted future situation constantly disturbed our minds and well-being this year and affected our service delivery that we could not carry out some of our activities as planned; yet through tireless efforts, Medica Afghanistan carried out its programs. In Kabul, Balkh (Mazar-e-Sharif) and Herat offices, our lawyers, social workers, counselors and psychologists assisted clients professionally. Our core projects consisted of providing legal counseling, psychosocial counseling and mediation to those women surviving or at risk of severe violence. In addition, we provided literacy classes for women and girls attending our psychosocial counseling groups. We advocated and campaigned for Marriage Registration, and to prevent child and forced marriages. We proactively participated in networks, task forces, working groups, media interviews, and lobbying meetings to address gender-specific legal problems; and we thereby influenced the government and the judicial system to enforce laws and prosecute assailants and human rights violators. Medica Afghanistan staff also provided specialized awareness-raising sessions to sensitize other professionals from other organizations, police and lawyers etc, regardless of gender, who deal with women at risk.

Let me share some examples of admirable transformations: One of the biggest setbacks of 2014 that profoundly disappointed the women’s rights movement is that cases of violence against women have risen by 24.7% compared with the previous year. Medica Afghanistan focused on expanding its outreach through a community based approach: establishing peer support groups facilitated by our own former clients. Our purpose was to increase awareness of gender-based violence (GBV) and women’s rights, and at the same time to endorse greater autonomy for women, especially those in a position to multiply the effect of what they had learned about women’s rights.

Medica Afghanistan, together with its allies held meetings with government to seek justice for victims. Through a multi approach procedures we exposed human rights violations through analysis of cases, and presented these case studies to various women’s networks, relevant governmental agencies and civil society groups. These are just a few of the ways Medica Afghanistan works to mobilize society around issues of human rights, gender and violence against women (VAW) throughout the country. Elimination of Violence Against Women law (EVAW) which is highly contentious in Afghanistan but nevertheless constitutes a cornerstone for women’s rights. The defences mounted by Medica Afghanistan’s lawyers in court depend heavily on the EVAW law to claim justice for women. However, despite the existence of special EVAW
Judicial units throughout the country, many members of the judiciary are still unaware of EVAW law’s existence, while others openly refrain from applying it because they see it as being in conflict with Islam, a view supported by some Parliamentarians. Medica Afghanistan, therefore, prepared an analysis of the ten articles of the law said to be in conflict with Sharia. Through our analysis, we were able to present clear evidence to show that Sharia does not forbid protecting the rights of women.

Medica Afghanistan also organised a major advocacy event on women’s rights: “A Conference on the Practical Challenges of Implementing the EVAW law”. This conference drew together key role players of women’s rights and law to stimulate awareness of how the EVAW law can be used to help women access their rights. The practical applications discussed had a special focus on analysing the law from an Islamic legal perspective.

Over the past year, Medica Afghanistan participated in several technical working groups seeking to enhance the accessibility and quality of health care, legal and social services for women subjected to or at risk of violence, and we contributed significantly to the reform of some policies.

For example, Medica Afghanistan and its allies in the technical Gender Working Group addressed the reform of the Afghan Penal Code. The Technical Gender Working Group is comprised of national and international experts committed to promoting the development of a national legal framework that reflects gender equality and inclusiveness for all citizens of Afghanistan within the context of Islam and international human rights standards. A criminal procedure code, ratified by the lower house of the Afghan Parliament in February 2014, included the controversial article 26 that prohibits relatives of the accused from testifying in criminal cases. The head of Medica Afghanistan’s advocacy department reviewed the code and listed several problematic articles, including Article 26 that deny equal protection of the human rights of individuals. The Working Group was further able to analyse those articles and provide the rationale for the Ministry of Justice (Moj) to amend the law accordingly. Most of the amendments made by the Ministry of Justice were based on the advocacy efforts of this group. It is a great success that the revised Criminal Penal Code was gazetted on May 5, 2014, and came into force on June 5, 2014. However, some problematic articles (Articles 6, 9, 63 and 68) remain unchanged and require further advocacy efforts.

Medica Afghanistan also continues to provide technical support to law-drafting committees led by the Ministry of Women’s Affairs. Regulations governing discrimination and sexual abuse were finalized by the committee in 2014 and sent to the legislative department of the Ministry of Justice.

Medica Afghanistan worked closely with the Ministry of Public Health (MoPH) to reform the Mental Health Act to include relevant international laws about women and ensure that human rights of women are not violated. We also pushed for the role of the Afghanistan Independent Human Rights Commission in protecting the rights of people with mental health disorders. More importantly, we stressed that mental health institutions must be gender-sensitive and bear in mind the multiple issues of gender-based violence. Our legal team is working with MoPH on the Mental Health Act to ensure that it is consistent with related national legislation. In addition, Medica Afghanistan worked with the MoPH gender unit on the gender-based violence treatment protocol, a protocol launched by MoPH and the World Health Organization (WHO) in November 2014.

In building our capacity within the Medica Afghanistan organization, we focused mainly on the further development of our financial procedures and systems so that we may operate efficiently and effectively. To this end, we implemented many different practices contributing to the new system. We developed many tools to ensure efficient results, including finance tracking systems, budget allocation sheets, finance flow charts, financial report formats, weekly task trackers, updated terms of reference, new forms, and finally a finance and procurement manual with guidelines for new procedures and policies. In addition, we successfully managed the portfolios of eleven donor funds representing an estimated fund portfolio of EUR 1.1M. We also filled a vacant position on our board of trustees, and now the Medica Afghanistan Board of Trustees has assumed full responsibility for governing the organization.

Let me conclude my statement by thanking all my colleagues whether working in Kabul, Mazar-e-Sharif or Herat for their tireless efforts, their excellent cooperation, their patient work and their great achievement of protecting the lives of hundreds of women – and for doing all of this at great personal risk to themselves, in defiance of security threats and conservative social norms. I am very grateful to our colleagues of our sister organization medica mondiale, our board of trustees and our volunteers for their support, time and efforts. Without them, none of our achievements this year would have been possible.

I am more grateful than ever to all those who share our vision and continue to support us with their time and money. We have much more to do and much more that we yet have to achieve. To all our supporters who help us to extend our services to thousands of women across Afghanistan, I offer my heartfelt thanks – and my assurance that we at Medica Afghanistan will welcome your future contributions, support and dedication to fostering true, sustainable peace in Afghanistan.
A MESSAGE FROM A MEMBER OF OUR BOARD OF TRUSTEES

Dear Medica Afghanistan supporters,

It is my great pleasure to present you Medica's annual report for 2014.

The year has been a difficult one. As security situation in Afghanistan deteriorated, the activities of many organizations, including Medica Afghanistan, were negatively impacted and we unfortunately saw women's rights in the country worsen and occurrences of gender based violence rise.

Despite the uncertainty and challenges, I was proud to observe how Medica Afghanistan remained strong and resilient, and continued to relentlessly provide legal, psychosocial, mediation and educational services to women and girls, as well as stand for the women rights in Afghanistan. Considerable efforts were made in the field of advocacy, and Medica was among organizations involved in supporting and encouraging the enforcement of the law on the Elimination of Violence Against Women, which is an essential legal instrument to combat gender-based violence.

Our Executive Director, Humaira Rasuli, continued to lead the organization with such admirable passion and dedication. On behalf of the Board of Trustees and my own, I would like to thank Humaira for her outstanding work and leadership skills that helped shaping this organization to what it is today.

Our deepest appreciation also goes to our colleagues in Kabul, Balkh (Mazar-e-Sharif) and Herat offices. Thank you for remaining strong, professional, and never stopping serving Afghan women.

As we move forward in 2015, I am confident that we will continue our joint efforts to eliminate gender base violence in Afghanistan.

Morana Smodiaka Krajnovic
Chairperson
Medica Afghanistan Board of Trustees
WHY MEDICA AFGHANISTAN EXISTS

OUR MISSION
Medica Afghanistan—Women Support Organization (MA-WSO) is a non-profit, non-governmental, non-sectarian women’s rights organization. We advocate for the elimination of violence against women, both adult and child, and the elevation of women’s social status through service provision, awareness raising, and capacity building in the fields of psychosocial health, education and legal aid.

OUR VISION: WHY WE DO OUR WORK
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.

OUR VALUES: THE PRINCIPLES THAT GUIDE OUR WORK
» We are women working for women.
» We believe in unconditional solidarity with women.
» We work inclusively with all women, without ethnic, class, religious, age or any other kind of discrimination.
» We respect human rights.
» We take an active approach to women’s rights.
» We work in a culturally sensitive way.
» We believe women affected by a decision must be involved in the decision-making process.
» We strengthen women’s self-esteem.
In all our work we are guided by integrity, transparency, accountability, and a holistic approach.

OUR GOALS: WHAT WE HOPE TO ACHIEVE
The overarching goal of Medica Afghanistan is: To end violence against women in Afghanistan

The long term Strategic Goals of Medica Afghanistan are:
» To become a strong, sustainable and self-sufficient Afghan women’s organization.
» To insure that Afghan women who experience violence can access high quality services.
» To contribute to the development of a strong Afghan women’s movement that works for an end to violence against women
» To insist that the Afghan government and key social and cultural actors promote policies, laws and practices that advance women’s rights and end violence against women.

OUR MAIN FOCUS AND APPROACH
Medica Afghanistan focuses on improving the lives of women by providing the highest quality, inter-disciplinary legal and psychosocial services for women, family mediation services, informal educational services, and public advocacy for women and girls subjected to violence in the midst of war. We strive to change discriminatory attitudes towards women and work with governmental and non-governmental agencies to address issues of violence against women and ensure the enactment and enforcement of laws to improve women’s lives.

Medica Afghanistan began its service in Afghanistan in 2002 founded as a program of the International NGO Medica Mondiale, which is based in Germany. In 2010,
Medica Afghanistan became a self-contained Afghan national NGO, led by and for Afghan women. It is headquartered in Kabul with sub-offices in Mazar-e-Sharif and Herat. It was the first women’s organization in Afghanistan to offer psychosocial counseling to women survivors of violence and the first to provide services to women in prison. It was the first to offer legal aid to women accused of crimes or engaged in civil disputes. It was the first to train professional people, from doctors to defence lawyers, in the support of traumatized women and girls. It was the first to provide evidence of the link between child marriage and domestic violence—and to take action to end these practices.

Medica Afghanistan 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 takes a trauma-sensitive approach in both legal and medical settings, offering holistic support to women survivors of gender-based violence. Medica Afghanistan is specialized in supporting women and girls deeply affected by violence. All our staff members understand the relation between gender and violence, and they have extensive training in working with traumatized women and girls. In addition, we are all committed to women’s human rights.

Medica Afghanistan provides a range of different services for women and girls, including psychosocial counseling, legal representation, family mediation, social support, literacy classes, and referrals for health care, economic opportunities, and other appropriate services as needed. In addition, Medica Afghanistan also builds capacity in the fields of health, education and law and it seeks to raise awareness of women’s rights and sensitize all those who deal with women at risk, regardless of gender. For example, the organization offers advanced professional training to male and female lawyers, doctors, social workers, religious leaders, and police personnel on the multiple aspects and consequences of violence against women. In short, Medica Afghanistan addresses the traumatic impact of all forms of violence against women upon survivors, families, institutions, and society. Most importantly, Medica Afghanistan advocates publicly and lobbies politically for women's rights to bring long-term, sustainable change for women and girls within a peaceful Afghanistan.
OUR PROGRAMS

LEGAL AID:
Ten defence lawyers and six social workers served women and girls who came into conflict with the criminal law or sought a solution to their civil issue. Medica Afghanistan provided legal advice, legal representation and defence, and family mediation services. In addition, Medica Afghanistan provided self-reintegration services to women recently released from prison into their families and communities to ensure the woman’s safe return. In 2014, we provided 823 clients (women and girls) with 2408 services, included 700 legal advice, 534 legal awareness 214 criminal case process services, 316 civil cases process services, 193 mediations, and 74 cases involving other victim services. In addition, we provided social work support in 377 instances, including the criminal cases of 11 girls (female children) and 144 adult women in Kabul, Balkh (Mazar-e-Sharif) and Herat Provinces. We helped to release 9 girls from juvenile center and 70 women from prison. Further, the released clients benefited from our social services in achieving safe reintegration into their families and communities.

One of our clients was raped by her cousin’s husband, became pregnant, and was jailed for adultery when she ran away. We won an unprecedented pardon from then-President Karzai, and she was freed. Tradition overwhelmed the legal victory, however, and she sadly succumbed to intense pressure to marry her attacker. Despite this mixed result, this client’s case helped to decriminalize the act of a woman running away from her abuser. Nevertheless, women are still charged and punished for attempting to escape from abusive relationships, and such “crimes” account for over half of the women who are currently imprisoned in the country.

A typical case for Medica Afghanistan’s lawyers is that of a woman we will call M. She was 32-years-old when she came to us. She was a victim of forced marriage to a drug-addict who abused, tortured and physically punished her. She made three suicide attempts by drinking acid, but she was rescued in time. She was finally referred to Medica Afghanistan lawyers who intervened and investigated the case. The lawyers then gave legal advice to M and briefed her about women’s basic rights under Islamic law. In addition, the lawyers referred M to Medica Afghanistan’s psychosocial specialists for counseling sessions. M’s health improved, and her mental state is now good. She now lives in peace with her parents. Thanks to tailoring courses she took during her 52-day-stay in Medica Afghanistan’s women’s center, she is now able to support her parents financially by stitching clothes.

PSYCHOSOCIAL COUNSELING:
Ten psychologists and psychosocial counselors at three project locations offered their support to Afghan women affected by violence, mostly at decentralized locations easily accessible to many women: for example, in consultation rooms, women’s shelters, hospitals and prisons throughout the cities. In 2014, Medica Afghanistan expanded its psychosocial services in Kabul to the Ministry of Women Affairs and the Cure International Hospital where it offers “in ward” counseling services to patients.

During a follow-up session by her lawyers, M stated: “I am so lucky to be introduced and referred to MA social workers and lawyers. I got to know about my rights through kind and committed women. Life had no meaning for me before. Violence and torture used to be a big part of my life, and I thought it would never end, especially when I realized that my own family was not willing to support me. I am feeling empowered now. I know my rights. I am willing to fight against all difficulties and barriers to make a better life for my children. I appreciate all the support and kindness the MA team has offered me.”
who suffer from psychiatric syndromes, including fear, anxiety, depression and stigma due to health problems such as obstetric fistula.

Experience proves that most women referred for psychosocial services had experienced various forms of gender-based violence, including domestic violence, forced marriage and rape. These experiences typically caused insomnia, depression, anxiety and feelings of loneliness that required psychosocial intervention and long-term care. Depending on the severity of their specific problems, patients received counseling services for a fixed term, usually three months or more. During 2014 Medica Afghanistan provided counseling services in three provinces (Kabul, Balkh and Herat) to 192 individual clients, 738 clients in group sessions, and 29 “in ward” clients.

EXAMPLE OF A CASE
Before Karima came to the counseling center in Kabul, she was full of hate—against herself, her family, and her child, who had been born after she was raped during the Mujahidin time: “I hate the whole world and there was nobody who wanted to help me with my problems.” Until a friend recommended that she take part in one of the Medica Afghanistan counseling centers. This was the first time that she learned about her rights as a woman. She was trained how to deal with her emotions and helped to feel her dignity despite her terrible experiences. “Individual and group sessions gave us the chance to share our pains and discuss our relationship with our children. Together we found strategies to live a positive life.” In the meantime, she has learnt to accept and love her child, even if memories of her trauma re-surface repeatedly. The counselor healed me inside. Today I live a different life. I have learnt to accept myself.”
LITERACY AND LEARNING:
Most of the problems experienced in Afghan society today are because of lack of education. Specifically, women in Afghanistan are mostly not aware of their basic rights. Recognizing this deficiency, Medica Afghanistan began to conduct literacy classes to enlighten the minds of women and girls deprived of education, since last eight years. In 2014, working closely with the Literacy Department of the Education Ministry, we established five new literacy classes, enrolling 190 new students. Eight part-time teachers in different districts of Kabul, Balkh and Herat provinces offered literacy classes four times a week to 193 participants: 116 in Kabul, 40 in Balkh (Mazar-e-Sharif) and 37 in Herat. In addition to acquiring reading and writing skills, students learned about women’s basic rights, legal issues, and health and life skills.

The high enrollment of students in Medica Afghanistan’s literacy classes is the result of the advocacy efforts on the part of our responsible teachers in the districts who went door to door and assessed girls to participate in these classes, and convinced their families to let them join the classes. Families tend to be enthusiastic about the education of girls/women, but obstacles such as poverty (families are not able to pay for uniforms or stationary) and security (schools are in long distances from homes, and families are worried about harassment of girls on the way to school) prevent women and girls from attending an educational institution. By removing these obstacles through locally based literacy classes, Medica Afghanistan makes it possible for women and girls begin to learn.

TRAININGS AND SUPERVISION FOR PROFESSIONALS
HELPING TRAUMATIZED WOMEN:
In addition to direct services and advocacy, Medica Afghanistan (MA) offered case supervision for psychosocial service-providers and training for government and non-government agencies on basic counseling skills, communication skills, trauma-sensitive approach, family mediation, gender and violence, and additional topics. people directly benefited from capacity building training of Medica Afghanistan in the year of 2014.

» 20 male and female (10 male and 10 female) medical professionals of Herat hospital received training (2nd group) in basics of psychological trauma and Violence against Women.
» 18 medical staff of Mazar hospital received training on TSA (Trauma Sensitive Approach)
» 14 legal and para legal staff of Tawanmandi partners received 4 days of training on trauma and multiple consequences of VAW
» 30 social workers from National Skill Development Program (NSDP) of MOLSAMD, were trained on family mediation and case management
» 10 hotline operators of Afghan Women Network were trained in basic counseling and communication skills.

“I learned reading and writing. I use the books from the library and these helped me a lot in practicing my reading skills. Because of my efforts and my teacher’s encouragement, my reading is improving considerably. I feel stronger and more independent. My husband now shows respect for me. I feel happy that when I am not at home, and my husband needs to tell me something very urgent he leaves me a written note and I can read and understand it. I do the same. I also learned how to calculate the money when I go shopping.” (a Literacy student)
Through these capacity-building programs, the awareness of the medical staff and social workers increased in the area of psychosocial problems. They now understand the difference between physical and psychological trauma and how to identify patients with psychosomatic problem so that they can be referred to MA counselors. In addition, they learnt how deeply the multiple consequences of violence impact the life of survivors. Apart from psychosocial and medical consequences, it was important for trainees to learn the effects of people’s behavior.

**ADVOCACY:**

Medica Afghanistan’s advocacy work complements direct services with direct political lobbying with the Afghan Government and awareness-raising activities for the society. All of our advocacy efforts serve to inform our clients and women of their fundamental rights.

Our advocacy programs have been designed to promote human rights and the rule of law in three ways:

- Exposure of human rights violations
- Community mobilization around human rights themes
- Advocacy for law and policy reform at the national and regional levels to benefit women

One focus of Medica Afghanistan is a campaign for the mandatory legal registration of marriages in order to prevent child and forced marriages which are unlawful in Afghanistan and result in severe violence against women and girls. We give training to mullahs and judges about the consequences of illegal marriages and the correct procedures for lawful marriage registration. In addition, Medica Afghanistan advocates for implementation of the EVAW law by prosecutors and judges. We are active within the Family Law Drafting Working Group in pushing for the enactment of a new family law respectful of women’s rights. We provide networking opportunities on these issues with multiple stakeholders including governmental and civil society organizations, both national and international.
STATUS OF THE ELIMINATION OF VIOLENCE AGAINST WOMEN LAW

Medica Afghanistan’s strategy to focus on the enforcement and awareness-raising aspects of the law in 2013 was continued in 2014 too, however 2014 had following considerations for EVAW law:

Ministry of Justice (MoJ) wrote a letter to president (Karzai) for his approval of the penal code that consolidate all laws that comes under definition of this code, including EVAW Law and president Karzai approved this proposal. Pertaining to the proposal two concerns were raised by the civil society group. Positive concern was that if EVAW LAW was incorporated into the penal code it will be not changeable and not removable for long, while the other concerns were that EVAW law articles might be changed in a negative way when included in the penal code and omission of some of the debated articles is also possible by the parliament and this movement may put at risk the existence of the EVAW law if challenged by the conservative MPs, even as part of the penal code.

Women rights activists so far have no clear and joint advocacy strategy as all directions bear risks and opportunities. While on the contrary Medica Afghanistan attorneys think that it would give weight if the EVAW provisions will fully be considered as part of the criminal law of Afghanistan. In response to challenges meetings and lobbying is ongoing among the Civil Society and government stakeholders.

At the same time, it says that EVAW LAW (as it is) is still on the agenda of the parliament. Civil society organisations agree that it is necessary to continue advocacy to postpone it as the risks are high for the law that might not be passed by the parliament.

At the moment another decision has been taken to advocate to preserve the EVAW LAW as it is and try to get the extension of the presidential decree.
WHERE WE STAND ON THE FAMILY LAW?

Medica Afghanistan has been active within the Family Law Drafting Committee in pushing for the enactment of a new family law respectful of women’s rights since 2007. During 2014, Medica Afghanistan together with its allies held several meetings with Acting Minister of Justice and legal advisor to former minister, on Family Law. As a result, the legal advisor of former minister assigned a group of experts to work on this law for two purposes, first to translate the legal terminologies second, to review and compare family law with civil law. According to their findings only 12-13 new issues are newly added in family law and there are three articles that need to be amended in the law (Child custody, polygamy marriage and marriage age).

To do a follow up on this issue the family law advocacy group held a meeting with acting minister of MOJ, where he supported family law and had no objection to send it to parliament but being an acting minister he can’t make any decision and requested the group to wait until the new minister is assigned.

Now Medica Afghanistan has two plans:

The developed action plan by MA on family law would be shared with technical gender working group (TGWG), IDLO (International Development Legal Organization) and other CSOs to finalize it and develop a unanimous position in this regard.

MA lawyers would compare the family law with civil law article by article internally for the purpose to share with other stakeholders for having strong bases for our advocacy meeting with parliament.
OUR ADVOCACY CAMPAIGNS

EMPOWERING WOMEN: WOMEN’S ROLE IN THE ELECTORAL PROCESS

Medica Afghanistan was active throughout the complicated 2014 electoral process. As a member of the Afghan Women’s Network (AWN), it joined in reminding the representatives of the international community and the SRSG of the significant contribution of Afghan women to the electoral process. Women comprised 36 and 38 per cent of voters in the first round and run-off respectively, a participation achieved at great personal risk and in defiance of security threats and conservative social norms. The stakeholders reassured AWN of their commitment to our goals and their intention to promote inclusivity in the post-electoral political process. We appreciated the presidential candidates’ effort to include women during ongoing discussions and negotiations to shape a unity government. Medica Afghanistan maintained the position that any agreement between the candidates had to be grounded in the domestic legal framework, namely the Constitution and electoral law, so that hard-won gains for women would not be reversed for political convenience.

EMPOWERING WOMEN: ONE BILLION RISING

In order to mobilize women and girls to take part in the OBR (One Billion Rising) march, Medica Afghanistan participated in the preparatory meetings and was responsible for holding the One Billion Rising ceremony in Mazar-e-Sharif. Representatives of 50 governmental and non-governmental organizations took part in the ceremony, including those that had been assisted by Medica Afghanistan’s regional office in Mazar-e-Sharif. The event captured national media coverage. The status of women in Afghanistan has long been dismal, especially in rural areas where few are educated, forced marriages are common, and those who flee abusive husbands are sometimes thrown in jail. The Medica Afghanistan team in Mazar-e-Sharif used this opportunity to sensitize the participants about sexual and gender-based violence, inhumane treatment of women and girls, and other issues related to women’s human rights.

EMPOWERING WOMEN: WOMEN IN DECISION-MAKING ROLES

Medica Afghanistan representatives participated in Afghan Women’s Network (AWN) meetings designed to help increase the number of women taking an active role in decision-making processes at civil society and state levels. The focus of this work was women’s access to human security and their engagement in political processes. As part of its advocacy efforts, Medica Afghanistan participated in meetings in August 2014 with the ambassadors of the EU and the USA and with Jan Kubis, Special Representative of UN Secretary General Ban Ki-moon (SRSG) and head of UNAMA. The main aims of these meetings were to express our concern over the prolonged political stalemate following the presidential election; the negative impact on the country’s economy, security and public confidence in Afghan institutions; and the urgent need of women’s participation in ongoing discussions and negotiations to shape a unity government.
CRIMES AGAINST WOMEN: RALLYING TO SUPPORT WOMEN
The rate of crimes against women in various parts of Afghanistan dramatically increased during 2014. For instance, the gang rape of 3 women and 1 girl in a single family in Paghman district of Kabul province was shocking news for everyone. The response of the people was unprecedented: they expressed their outrage and condemnation of these crimes through media and social media. Police arrested at least six people in connection to this case. On September 7, Medica Afghanistan together with other civil society organizations organized a rally to demand justice for the four women victims. More than a thousand men and women’s rights activists attended to show their support. Interestingly, women and men equally participated in this protest without regard to ethnicity, gender, age, language, or any other form of discrimination. Participation of men in such gatherings was rare in the past, but men are sensitized to the cultural tradition of protecting women and now seem ready to help combat such crimes against them. Though Medica Afghanistan condemns rape, we do not support the practice of accelerated trial of the accused or the death penalty. Accelerated trial violates the right of the accused to a fair trial and thus discredits the rule of law.

Among many other heinous acts of violence that occurred during this period were the rape and beheading of a young girl in Dasht-e-Barchi area of Kabul; the murder of a woman by her brother-in-law in Herat province; and the sale and marriage of an 8-year-old girl in Sholdara district of Balkh province. The case of 12-year-old Sahar Gul also shocked the world. She was tortured and imprisoned in the basement of her in-laws’ house for refusing to prostitute herself. After her uncle rescued her, she was brought to a hospital crumpled in a wheelbarrow, bruised, burned, bloodied and starved, with her fingernails ripped out. Eventually, as a client of Medica Afghanistan, Sahar Gul received a measure of justice: The Supreme Court sentenced her abusers to five years in prison. But for each case like Sahar’s, there are countless other women in Afghanistan who suffer in silence.

CRIMES AGAINST WOMEN: EVAW LAW TRAINING
In May 2013, the Parliamentary Commission on Women’s Affairs, Civil Society and Human Rights brought the EVAW Law to the Parliament with the objective of confirming the decree as a law. This move led to violent reactions against the law and an inflamed debate concerning the amendment of sections of the law some considered anti-Islamic. The law was submitted to 18 parliamentary committees to check its conformity with Sharia Law. The Afghan Women’s Network (AWN) also formed a technical committee of men and women experts in civil law and Sharia to analyze the problematic articles of the EVAW law. Medica Afghanistan had the lead role in this committee, analyzing the law to safeguard women and children’s rights. The analyses found that none of the problematic articles contradict Islam. Then Medica Afghanistan, in cooperation with AWN, on June 5, 2014, trained 80 representatives from civil society organizations and Parliament on the EVAW law seen from an Islamic perspective. Medica Afghanistan’s training particularly focused on the issue of polygamy practices.

CRIMES AGAINST WOMEN: A NATIONAL CONFERENCE ON THE EVAW LAW
Medica Afghanistan, with funding provided by the US Embassy and in cooperation with the Ministry of Women’s Affairs (MoWA), the Afghan Women’s Network
(AWN) and the Afghan Independent Human Rights Commission (AIHRC), hosted a national conference in November 2014 focusing on enforcement of the Elimination of Violence against Women (EVAW) Law. The overall aim of the conference was twofold: to broaden the knowledge base in order to improve understanding of the Afghan government’s implementation of the EVAW law, and to increase awareness and networking among the key groups who address the impact and root causes of Gender Based Violence. Medica Afghanistan presented the results of its annual survey on implementation of the EVAW law, addressing challenges and successes of the legislation from the perspective of legal practitioners. Medica Afghanistan consistently records the way the law is used (and not used), and we keep track of challenges and obstacles preventing its full implementation. Medica Afghanistan lawyers painstakingly advocate for application of the law and record the details of court sessions, court verdicts and indictments; they compile this evidence to provide a comprehensive picture of how the law is implemented and what challenges lie ahead for women who seek justice based on that law. The result of this work is the analytic report on implementation of the EVAW law. This report discusses the legal and political aspects of the law’s implementation in the past year, and it provides helpful insights about the way this law is used or misused throughout the country. Medica Afghanistan also took this opportunity to increase awareness about the challenges full implementation of the law will encounter. At the end of the conference, we presented a position paper highlighting some specific recommendations to the Afghan government, civil society and the international community. For further details regarding the EVAW report and conference report, please refer to the Medica Afghanistan web page.

PRISON REFORM: POLICY-MAKING FOR WOMEN’S PRISONS
AND JUVENILE REHABILITATION CENTERS IN AFGHANISTAN

Medica Afghanistan continued to provide technical support to committees led by the Paywand Afghanan to reform prison regulations in accordance with international conventions and national laws, and to consider the needs of prisoners. These reforms revised policies covering Juvenile Rehabilitation Centers (JRC). They also developed regulations concerning the role of service providers, women’s access to psychosocial and social services, and the “remission and reduction of punishment,” all of which will improve the position of women prisoners. The draft of these new policies was completed by the committee on December 30, 2014, and submitted to the Ministry of Women’s Affairs. The draft was to be reviewed by a legal committee in the Ministry of Women’s Affairs before being sent forward to the Ministry of Justice.
SOCIAL WORK: ENHANCING SOCIAL SERVICES FOR WOMEN

In 2008, Medica Afghanistan introduced a social work program under its legal framework in order to provide support for vulnerable women, at risk of or subject to violence; however, the social work content was not recognized at that time as a field of study in Afghanistan. To meet this setback, Medica Afghanistan contributed significantly during the past three years to the development of the Social Care Work Training Framework coordinated by a Technical Working Group and funded by the EU. A bachelor’s degree program for Social Work is currently being developed at university level, and the first course was offered in April 2014. Our social workers received further advanced training in government standards of social care from the Ministry of Labor and social affairs. The Ministry certified three Medica Afghanistan staff members as master trainers. During 2014, Medica Afghanistan, in cooperation with the National Skill Development Program (NSDP) of MOLSA MD, trained 40 social workers serving in residential and community settings to treat women at risk and women affected by violence.

INTERNATIONAL CONFERENCE: OUR ENGAGEMENT WITH THE NATO SUMMIT

The NATO Summit took place on September 4-5, 2014, in Wales, UK. One focus of the gathering was Afghanistan beyond 2014, after the end of NATO’s ISAF mission in Afghanistan and the withdrawal of international troops. As a member of AWN, Medica Afghanistan participated in preparations for the Summit. AWN consulted more than 500 women by holding one day consultation conferences in eight zones on August 17, 2014, and a national conference in Kabul on August 27, 2014. Based on these discussions, AWN recommended measures to ensure women’s political participation, increase women’s role in decision making, and ensure their safe mobility through security and protective measures. The Medica Afghanistan Executive Director, as a senior member of AWN, facilitated a group of 20 people to finalize the Afghan Women’s Recommendations to the NATO Summit. The Head of NATO for the Asian region who attended our national conference, then shared the AWN position paper with NATO members.

INTERNATIONAL CONFERENCE: EUROPEAN UNION WORKSHOP ON PROTECTION OF HUMAN RIGHTS DEFENDERS

On October 1-2, 2014, the Medica Afghanistan Executive Director participated in a European Union (EU) workshop regarding protection of human rights defenders (HRD). The first day, local Afghan HRDs reported on the situation of HRDs in Afghanistan, including the threats they have received and their suggestions for protection measures. The following day, members of the international community took part in discussing the findings of the Afghan HRDs. As a result of the workshop, a European Union strategy for human rights defenders in Afghanistan was drafted and sent to all participants for comments before its publication late in 2014. This important EU initiative is crucial to ensuring a safe and enabling environment for the work of human rights defenders.

INTERNATIONAL CONFERENCES: OUR ENGAGEMENT IN THE LONDON CONFERENCE

A high level conference on the TMAF (Tokyo Mutual Accountability Process) for Afghanistan took place in London on November 24-25, 2014. Forty representatives of the Afghan government attended the conference to discuss the country’s progress in implementing the TMAF process. The Conference included discussions
on refinement of the current indicators and hard deliverables in various priority areas. In anticipation of the London Conference, Medica Afghanistan participated in Advocacy meetings convened by the Agency Coordinating Body for Afghan Relief (ACBAR) to develop four papers focusing on governance, women’s rights, humanitarian action, and service delivery. Medica Afghanistan was a member of the women’s rights working group. Medica Afghanistan also participated in a consultation hosted by the Canadian and German Ambassadors on August 12, 2014, to discuss with civil society organizations the major challenges facing human rights and women’s empowerment in the future. In this meeting, civil society representatives proposed some revisions to the hard deliverables under TMAF Area 2 relating to human rights, gender, and rule of law. The draft of those proposed revisions was accepted by the respective embassies to be shared with government and donor stakeholders.

INTERNATIONAL CONFERENCE:
OUR ENGAGEMENT WITH AMNESTY INTERNATIONAL AND THE SITUATION OF WOMEN’S HUMAN RIGHTS DEFENDERS

Medica Afghanistan’s Executive Director participated in an AWN meeting with the Director of Amnesty International for South Asia to speak about women’s human rights defenders (WHRD) and their situation, challenges and lessons learned, focusing especially on how to overcome obstacles in Afghanistan. Speaking for Medica Afghanistan, she raised her concern that in Afghanistan there are no effective mechanisms in place to ensure protection of WHRD. The few measures that exist lack gender sensitivity, or the means to implement them, or the political will to do so. Therefore, we welcomed the newly adopted General Assembly resolution on protecting WHRD. This resolution recognizes the contribution of these individuals and groups to the protection and promotion of human rights, democracy, the rule of law, economic development, peace and security; and it highlights some specific protection mechanisms and measures that states must implement to allow women’s human rights defenders to carry out their work in a safe environment and without fear of reprisal.
PROGRAM SETBACKS AND CHALLENGES

Despite the tremendous progress Afghan civil society made in the past decade, at the end of 2014 a number of challenges remained: there is a lack of support from the Afghan government for civil society, a lack of awareness in the general population of the work done by civil society, a lack of consensus and cooperation among Afghan civil society organizations, and a lack of funds and long-term financial support for Afghan civil society coupled with a strong dependency on donors. Civil society faced these challenges in the midst of widespread corruption in government, a historic political transition, and an unpredicted security situation.

In this context, the staff of Medica Afghanistan faced daily challenges, large and small:

» Medica Afghanistan counselors in Mazar-e-Sharif had no safe and private place for counseling sessions with clients in the women’s prison. We discussed the problem with the warden who promised for a separate room for the counselors.
» Security problems during the presidential election forced the closing of Medica Afghanistan’s office and counseling centres for three days, June 15-17, 2014.
» Security limitations constrained our ability to follow up with clients who live in remote districts and villages. As an alternative, Medica Afghanistan contacted relevant clients by phone, when possible, and invited them to come to mediation center for further consultation.
» Judges displayed prejudice and discrimination against women. That was often the case when moral crimes were the issue, and sometimes a judge would play the role of public prosecutor rather than listening to the woman’s story. Medica Afghanistan lawyers worked with the staff in the judicial system; we planned to offer training programs as a way to lessen the discrimination against women within the judicial system.
» Due to intense pressure from family and community, some women withdrew their legal cases before time. Medica Afghanistan lawyers worked hard to defend women clients, but there was little they could do when a woman had been persuaded or coerced to drop her complaint.
» In the Burn Unit of Herat Hospital, women hospitalized for self-immolation came under family pressure to flee from the hospital because the family members feared they would be arrested by police. Every morning, the staff of the burn unit of the hospital had to count the patients to check on the escaped.
» Some women, especially in Mazar-e-Sharif, but also in other provinces, suffered from serious mental health problems after they were released from prison. Their families and Shelters would not accept them because the facilities were not equipped to keep cases of mental illness. These women suffered from psychosocial problems as a result of trauma and could have been treated through long-term counseling, but they remained untreated because of the lack of professional psychologists in the country and the general lack of awareness of the importance of such problems.
CLIENT DATABASE

In a competitive procurement process, MA recruited a database-developing firm to modify its entire client database structure and change it from static (offline) to cloud (online) system. 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 i.e. the data entry officer and the respective project manager merely to ensure data are entered accurately and they are supported by hard evidence.

We generate regular reports and submit to our stakeholders to provide update 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 2014.
In addition to being a learning year, 2014 was a challenging year in terms of our financial operations. We have implemented different practices, which contributed to the overall new system development process. A lot of tools were developed to ensure they produce efficient results. Financial tracking system, budget allocation sheet, finance flow chart, quarterly financial reports to the board, weekly task tracker, updated ToRs, new forms, and finally finance and procurement manual, which introduced new procedures and policies, are some examples of the tools/practices created in 2014.

The new finance system significantly improved the workflow efficiency and reduced human errors. More verification layers were added before every transaction was entered onto the system. The team received numerous on-the-job trainings, which were later extended to the regional offices, to improve productivity. It was not easy for the team to embrace the change and it ultimately caused a lot of frustration. As obvious as sounds, change leads to demotivation and frustration in the short-run, while it may have fruitful outcome in the long-run. MA finance leadership understood the impact of change and took measures to manage the change.

Looking at the external factors, 2014 has been a year full of policy modifications in grants criteria, location and the type of program to be funded by donor agencies. We had to undergo a lot of budget negotiations and modify project budgets to meet the criteria set by donors. This took us months to finalize some project agreements. Being an NGO, we had to ensure that our operational/fixed costs are covered, while donors’ funding criteria always hinder with the operational/fixed costs and it takes numerous negotiations and submission of documented evidence to convince the donors on covering some fixed costs and contributing in our sustainability plan. In addition, operational budget shortage in 2014 posed another challenge that we had to work on our annual budget a number of times to get it finalized.
CUMULATIVE INCOME IN 2014

- USAID 45%
- German Foreign Office 17%
- BMZ 1%
- Bridge Fund by medica mondiale e.V. 3%
- Canadian Woman for Afghan Woman 4%
- Core Fund by medica mondiale e.V. 7%
- BZFO 10%
- Tawanmanadi 10%
- Private Donation 1%
- US Embassy 1%
- ASDHA Kabul 1%

ANNUAL EXPENSE CHART

- Training & development 1%
- Publications & printing 1%
- Other expenses 1%
- Counseling services 2%
- Meetings & special events 2%
- Legal & professional fee 4%
- Travel & transportation 10%
- Fixed operational cost 14%
- Human resources 65%
Our vision:

“We envision a peaceful and independent Afghanistan where women are free of violence and any form of discrimination, have equal access to economic and social justice, political decision making, health services and education.”