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# Women, War Traumas, Mental Health and Breadwinning

An evaluation of the Dandelion project  
in Mogadishu, Somalia 2005-2009



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**Abstract:** This report is an evaluation of the Dandelion project run by the PMV centre in Mogadishu, Somalia. The focus is to evaluate if the methods and the activities in the project succeed to promote the women users capability to overcome psycho-social traumas and be in a better position to tackle their daily life. The evaluation confirms that the project works, despite the difficult conditions with violence and civil war..

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# Preface

This evaluation is commissioned by Primærmedisinsk verksted, the Primary Health Workshop, Church City mission Oslo. The aim is to evaluate to what extent and how the Dandelion project at the PMV Centre in Mogadishu contributed to the empowerment of women exposed to gender and war related violations.

The evaluation took place during spring 2009. The evaluation is based on information gathered from before the outbreak of fighting in Mogadishu in May and June 2009.

We would like to thank all those who have contributed to the evaluation. This include women beneficiaries, counsellors, staff and the founder of the PMV Centre in Mogadishu, as well as key persons from other NGOs and local institutions in Mogadishu who have shared their experiences and opinions on the project. In Oslo, the founders of the PMV Workshop and the Somali project leader for the Dandelion project, have shared their views and experiences.

The commission for the evaluation included two months of work and was carried out by a team of three researchers. Professor Ibrahim collected and assembled information from the PMV Centre and other NGOs and local institutions in Mogadishu. Senior researcher Hansen conducted interviews at the PMV centre in Mogadishu. He is the main author for chapter 3. Senior researcher Søholt was team leader. She carried out interviews in Oslo and was responsible for writing and editing the report.

Oslo, August 2009

Berit Nordahl  
Research Director

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# Sammendrag

*Susanne Sobolt, Yahya A.H. Ibrahim og Stig Jarle Hansen*

## **Kvinner, krigstraumer, mental helse og familieforsørging**

En evaluering av Løvetannprosjektet i Mogadishu,

Somalia 2005-2009

NIBR-rapport: 2009:23

Dandelion eller Løvetann prosjektet i Mogadishu startet i 2005 med penger fra TV-aksjonen 2004. Initiativtakere til prosjektet var grunnleggeren av Primærmedisinsk verksted i Oslo og en sentral kvinnelig menneskerettighetsjurist i Mogadishu. Løvetann prosjektet gjennomføres ved PMV Centre for Health, Dialogue and Development i Mogadishu. Tanken bak var at metodene som er utviklet ved Primærmedisinsk verksted kunne bidra til å styrke kvinners og barns situasjon i Mogadishu. Målgruppen var kvinner og i noen grad barn som har vært utsatt for grov kjønns – og krigsrelatert vold.

Det er to hovedproblemstillinger for evalueringen. For det første; om arbeidet som er utført ved Løvetann prosjektet har bidratt til å styrke kvinnenenes situasjon. Har kvinnene gjennom sin deltakelse i prosjektet fått verktøy og metoder til å forbedre sin mentale helse og bli bedre i stand til å håndtere dagliglivet. I det siste ligger forventninger om styrkede muligheter til å skaffe seg inntekt. Muligheter til å skaffe familien mat og husly blir vurdert som sentralt i forhold til å få en bedre mental helse.

For det andre skulle evalueringen identifisere og sammenligne metodeutviklingen ved Primærmedisinsk verksted i Oslo og ved Løvetann prosjektet i Mogadishu. Hensikten er å få frem hva som er likt og har generell verdi, hva som må tilpasses lokalt og hva som kan ha overføringsverdi.

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Svaret på disse to problemstillingene danner grunnlag for anbefalinger for videre drift av prosjektet i Mogadishu og for utvidelse av prosjektet.

### **Evalueringsmetode**

For å kunne svare på problemstillingene har det vært foretatt en analyse av foreliggende prosjektbeskrivelser og rapporter, samt dokumentasjon om hver enkelt deltaker i prosjektet.

Nøkkelpersoner i Mogadishu og Oslo er intervjuet, inkludert alle rådgivere og en frivillig / naturlig hjelper ved Løvetann prosjektet. Synspunkter fra brukerne er innhentet gjennom gruppeintervju og individuelle intervjuer.

### **Løvetann prosjektet**

Et pilotprosjekt i 2003 la grunnlaget for Løvetann prosjektet. Ti voldsutsatte kvinner ble engasjert for å prøve ut om det å dele erfaringer kunne endre og styrke deres selvoppfatninger. Kvinnene oppsummerte pilotprosjektet i to hovedpunkter som gjensidig forutsatte hverandre.

Gjennom å dele erfaringer hadde de fått mulighet til å sove og fungere mer normalt. Måten erfaringsdelingen skjedde på ble trukket frem. Den ble ledet av personer som var tillitsvekkende og pålitelige og som hadde tilnærminger som hjalp kvinnene til å snakke om sine negative erfaringer på en konstruktiv måte. Koplek til erfaringsdelingen var muligheten til å lære ferdigheter som kunne gi dem jobb og inntekt. Til sammen ga dette måter å skaffe mat og aksept i samfunnet. Prosjektet hjalp til reintegrering.

Metodeutviklingen i Løvetann prosjektet har bygget videre på dette. Prosjektet tilbyr et kurs over 6 måneder som består av erfaringsdeling og veiledning i forhold til traumer, i grupper og individuelt. Dernest opplæring i å lese, skrive og regne samt praktiske håndverksferdigheter. Dette inkluderer opplæring i å sy, strikke, veving, farging, kurvfletting m.m. Til sammen er dette kunnskap som gjør det mulig for kvinnene å drive næringsvirksomhet. I tillegg har de kvinnene som har gjennomført opplegget fått mulighet til å få mikro-kreditt lån eller de har fått råvarer som er betalt tilbake etter at varene er solgt. Under hele kurset er det blitt lagt vekt på å bygge støttegrupper blant kvinnene og de har dannet kooperativer for næringsvirksomheten. Etter

gjennomført kurs kan alle tidligere deltakere komme tilbake til senteret for veiledning.

Det er gjennomført 5 kurs med rundt 20 kvinner og noen barn i hver gruppe. Deltakerne kommer hovedsakelig fra forskjellige minoritetsklaner, da disse er mest utsatt. Fire av kursene ble gjennomført ved senteret i Mogadishu, mens et femte ble gjennomført i et annet distrikt.

### **Hovederfaringer**

Hovederfaringen er at prosjektet er vellykket sett fra kvinnenes ståsted. Prosjektet har hatt flere positive virkninger for deltakerne.

Kvinnene har fått tilgang til et senter hvor de føler seg trygge og aksepterte og hvor de får omsorg. De har lært hvordan de kan forholde seg til hverandre på en konstruktiv måte og har bygget opp støttegrupper, som alternativ til oppløste tradisjonelle sosiale nettverk. I støttegruppene har kvinnene utviklet omsorg for hverandre og hjelper med praktiske ting.

All dokumentasjonen viser at kvinnene har tilegnet seg nye kvalifikasjoner i en slik grad at det har gitt dem en mestringsfølelse. Til forskjell fra tidligere kan de lese, skrive og regne og de tjener penger. En bi-effekt av næringsvirksomheten var at de lærte hvordan de kunne få til ting, hvordan de kunne analysere problemer og finne løsninger selv. Dette ga selvtillit og grunnlag for å utvikle drømmer og håp for fremtiden, noe som fremmer egeninitiert endring. Denne type selvtillit, som bygget på tilegnelse av nye kvalifikasjoner og egen innsats for å skaffe familien et levebrød bidro også til at kvinnene endret posisjon fra å være usynlige til å bli synlige i samfunnet og familien. Det ble sagt at de nå følte at de hadde fått verdi som enkelt personer.

Prosjektet lyktes ikke overfor det mindretallet av kvinnene som hadde svært alvorlige traumer og psykologiske problemer. For denne gruppen var ikke veiledningen og kvalifiseringen tilstrekkelig. De hadde behov for psykologisk / psykiatrisk hjelp, noe som for tiden ikke finnes i Mogadishu. Sett i relasjon til norske forhold hadde imidlertid kvinnene som hadde glede og nytte av prosjektet opplevd svært grove overgrep og befant seg i svært sårbare situasjoner.



Løvetann prosjektet samarbeider med andre lokale organisasjoner som jobber med lignende problemstillinger. Organisasjonene supplerer hverandre og ansatte ved Løvetann prosjektet har fått gratis opplæring i andre organisasjoner. Prosjektet har også et godt rykte blant etablerte institusjoner som klan- og religiøse ledere.

Metodetilnærmingen er det sentrale både i Løvetann prosjektet i Mogadishu og ved Primærmedisinsk verksted i Oslo. Felles er vektleggingen på kjernen i metoden som er å fremme erfaringsdeling koplet opp mot løsningsorienterte og kultursensitive tilnærminger. Et beslektet element er vektlegging av menneske- og kvinnerettigheter som har kommet opp etter lokale initiativ begge steder.

De viktigste forskjellene er knyttet til hvilke kontekster prosjektene befinner seg i. Det har betydning for ressursituasjonen for prosjektene og kvinnene. Krigssituasjonen i Mogadishu har ført til at kvinnene er svært fattige og at deres tradisjonelle sosiale nettverk er oppløst. Inntektskvalifisering i prosjektet er derfor helt nødvendig for styrke mulighetene til å ha kontroll med egen situasjon. De somaliske kvinnene i Oslo er også fattige, men de er del av velferdsstaten og får dekket de nødvendige behov. Barna har gratis skole og alle har formelt tilgang til helsetjenester og andre tiltak for å bidra til integrering. En annen viktig forskjell er at Primærmedisinsk verksted har tilgang til profesjonelle fagfolk. De kan inviteres etter behov. Slike fagfolk er ikke tilgjengelig i Mogadishu og prosjektet er derfor helt avhengig av sine halvprofesjonelle rådgivere og samarbeid med andre lokale organisasjoner.

### **Anbefalinger**

Det anbefales at det gis økonomisk støtte til videre drift og oppfølging av prosjektet ved PMV Centre for Health, Dialogue and Development i Mogadishu. Det bør legges vekt på videre opplæring av ansatte og den frivillige siden senteret er helt avhengige av disse personenes engasjement og innsats. Den økonomiske modellen for å bistå til næringsutvikling blant kvinnene bør vurderes. Målet må være at denne type ordninger er så robuste at de er mest mulig holdbare også i vedvarende krigssituasjoner. Det bør satses på å styrke tilbudet til barn.

Behovet for bistand er stort i Somalia. PMV sentret får til mye med begrensede midler. Det gir grunnlag for utvidet kapasitet og utvidelse til flere sentre, i Mogadishu og andre steder i Somalia. Flere mindre sentre gjør det dessuten sannsynlig at den opparbeidete, lokale kompetansen om denne måten å styrke marginaliserte og voldsutsatte kvinner på, fortsatt kan videreutvikles i Somalia. Flere sentre i nettverk gjør kompetanseoppbyggingen mindre sårbar. Kompetansen består selv om et senter må stenge på grunn av krigshandlinger eller annen uro.

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# 1 Introduction

The aim of this report is to give an evaluation of the Dandelion Project in Mogadishu which is run by the local PMV Centre for Health, Dialogue and Development. The evaluation shall include recommendations for strengthening the project itself, as well as recommendations for a possible expansion of the project to other districts in Somalia.

The Dandelion Project was jointly established in 2005 by The Primary Health Workshop (PMV) in Oslo and the Coalition for Grassroots Women Organisation (COGWO) in Mogadishu.<sup>1 2</sup> The Dandelion project has been financed by the Church City Mission (CCM) in Oslo, the organisation which has the responsibility for the PMV Workshop in Oslo. The funding came from the 2004 TV-action in Norway.

## 1.1 Background for the evaluation

The Dandelion Project has been running for three years and is approaching the end of its funding term (through 2008). A final summary of the project is requested by the funder, the Norwegian TV-action 2004. Meanwhile, the Norwegian Church Aid (NCA), which is active in Eastern Africa, has expressed interest in securing the project's continued operation by incorporating it amongst its ongoing aid and development efforts in Somalia, on the condition that the Dandelion Project be evaluated by an external agency.

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<sup>1</sup> See Appendix for a description of COGWO.

<sup>2</sup> The Primary Health Workshop in Oslo is a centre with the aim to develop primary health care in a multiethnic city.

The main objective of the evaluation is to obtain knowledge on whether the project has achieved its goals. The two main questions for the evaluation are:<sup>3</sup>

- To determine as much as possible whether the programme is accomplishing what it has set out to achieve. That is, that the women users through the project are empowered to improve their mental health and to tackle/improve their daily practical life.
- To identify, through comparisons with the original PMV model and methods in Oslo, similarities and points of departure and to describe the rationale involved in modifications made to the PMV model in Mogadishu.

## 1.2 Evaluation methodology

The evaluation is a limited piece of work carried out in spring 2009. The approach is an adapted goal evaluation after the project's first three years. The structure of the report is inspired by the Norwegian Foreign Ministry's recommendations for evaluations of development assistance (1993). The evaluation will focus on summarising results and to some degree evaluate the achievements of the project. However, one of the goals of the project and in the evaluation is to consider the development of the methods in the project. This part of the evaluation will therefore highlight methodological developments in the project, as it is understood by the key stakeholders.

The main sources of data for the evaluation are:

- Existing documents and reports from the project<sup>4</sup>
- Documentation about the women users at the PMV Centre in Mogadishu
- Interviews with key stakeholders in Oslo and in Mogadishu
- Interviews with five women users of the project in Mogadishu

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<sup>3</sup> From the work description for the evaluation of the Dandelion Project. See Appendix 2.

<sup>4</sup> See list of documentation from the project in the reference list.

- 
- Group interview with 10 women users at the PMV Centre in Mogadishu
  - Questions by e-mail to the interviewees to fill out documents and former interviews.

### **Documents**

The questions for the evaluation will be answered by an analysis of existing documents, project proposals (2), periodic project reports (9), minutes from meetings with the Norwegian partners (1), assessment report from 2008 and an overview of the budget for 2009. The project's reports are written by the founder or the acting director. The development of the project, as it is documented in the periodic reports, shows a consistent and confident development. Descriptions, as well as successes and difficulties, are reported. Other data are documentation about the women users in the Dandelion Project. This will help to highlight the characteristics of the target group and users involved in the project.

### **Interviews**

Key persons related to the PMV Centre in Mogadishu and the PMV Workshop in Oslo have been interviewed. In Mogadishu/Nairobi, the following persons have been interviewed at the PMV centre:

- The founder of the PMV Centre and the Dandelion Project
- The acting director of the PMV Centre
- Three consultants at the PMV Centre (counselling, training and credit officer)
- Five women users
- Group interview with 10 women from different cohorts

The PMV Centre in Mogadishu is visited several times.

### **Interviews with other local institutions in Mogadishu**

- Three clan elders
- Two religious leaders

These leaders were from five different clans.

In addition, there are interviews and information from local NGOs. The most important are COGWO, SAACID, INXA (Ismail Jumcale Centre for human rights), PHRN (Peace and Human Rights Network) and ENHA.<sup>5</sup>

### **Interviews in Oslo**

- The founder of the PMV Workshop in Oslo
- The Somali/Norwegian project leader of the Dandelion Project in Mogadishu

### **Semi structured interviews**

All the planned interviews in Oslo and Mogadishu were following a semi structured question guide. The interview guides were focused on the special position of the interviewee to get broad knowledge and potentially different views of the projects practises and successes.

The interviews in Oslo were conducted one by one. In Mogadishu there were also individual interviews, but the respondent was not alone with the evaluators, except for the founder. Either the Acting Director or a colleague was present.

### **Individual interviews and group discussions with the women users**

The acting director in Mogadishu proposed that the evaluators should meet and talk with the women users actually at the centre when the evaluation took place. The principle for selection of respondents was in that way the only possible, availability. Any other approach would have been highly problematic given the special circumstances in Mogadishu, where some areas at the time were no-go zones. Several of the previous participants had been dislocated, other participants are working and thus too busy.

The present participants got information about the evaluation and its purpose. They were informed that they were free to take part in group discussions and interviews and that their views would be made anonymous in the evaluation report. All the present women wanted to take part in either individual interviews or in a group discussion.

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<sup>5</sup> See Appendix for descriptions of COGWO and SAACID.

The women present at the PMV Centre on the day of the evaluation represented various cohorts. In that way the group discussion allowed for potential diverse experiences from different women from various cohorts of the Dandelion project. An open-ended approach allowed the women increased opportunity to share their experiences, comment and explain. The interviewer, Professor Yahya Ibrahim, took a more passive role in the process. The idea was that the process of sharing and learning should include all participants.

The individual interviews conducted by Dr. Hansen was improvised, but based on Dr. Sølholts interview guide. Dr. Hansen used his training in crisis psychology from the Norwegian army to change the questions to avoid upsetting the respondents and creating problems. Dr. Hansen could also draw upon his previous experiences in doing research in war zones, and the expertise of Professor Yahya.

The willingness of the participants to share their experiences with the evaluators helped to otherwise reduce the lack of user information in the evaluation.

The triangulation between group interviews, individual interviews with participants, counselors and stakeholders and secondary sources enabled the researchers to depict a wider picture of the successes of the project.

### **Limitations associated with approach and methodology**

The visits to the centre were not scheduled because of the security situation in Mogadishu. Fortunately, the acting director and counsellors were available for interviews when the evaluation team appeared. It was of course an inconvenience to the evaluation that the security situation made it difficult to visit Mogadishu and the centre. However, the visits that were possible, together with the extensive documentation from the project, made this evaluation feasible.

It has to be underlined that the evaluation report is an outsider's assessment of the Dandelion project. It is not a substitute for the project reports. They are recommended for the interested reader.

### 1.2.1 Profile of the evaluation team

The evaluation was carried out by a team of three social scientists. One is located in Oslo, one in Mogadishu and one in Oslo/Nairobi and Mogadishu. The main force of the team is not that it is multidisciplinary (economist, political scientist and historian). It has been more important and useful for the evaluation that the team has existing knowledge which is relevant for the evaluation. Two of the evaluators have extensive knowledge about the current situation in Somalia and have access to other NGOs in Mogadishu.

Dr. Stig Jarle Hansen (political science and history) is an expert in Somali studies and has published extensively in referred journals on related topics. He is also one of the few European researchers that frequently conduct research in Mogadishu.

Local knowledge was secured by the participation of Professor Yahya Amir H. Ibrahim, Dean of Economics and Management Sciences at the Mogadishu University. He has done several evaluations for international NGOs and is a human rights activist. Fortunately he is living in the same city district as the PMV Centre.

The third evaluator, Dr. Susanne Søholt (political science), has knowledge about the Somali women refugees' situation in Oslo, the PMV Workshop in Oslo and the methods developed here. She has previously evaluated methods and groups with natural helpers at the PMV Workshop in Oslo (Søholt 1996; Bakke and Søholt 1996; Søholt 1997).

Given the difficult security situation in Somalia and Mogadishu, it is of benefit to the evaluation that two of the evaluators have in-depth knowledge of Mogadishu and the actual situation there. The personal networks of the evaluation team made it possible to get in contact with local stakeholders even though visits there were difficult.



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## 2 The PMV methods – suited for export?

The methods for health promotion developed at the PMV Workshop in Oslo are the core and background of the Dandelion Project in Mogadishu.

Since the PMV Workshop in Oslo was established in 1994, the workshop has been devoted to developing methods for health promotion among ethnic minorities. The idea was that people, regardless of ethnic background, could experience the methods as meaningful and engaging. The framework of the approach has been what is called solution oriented conversations. These conversations have developed in collaboration between users and different categories of professional helpers. The basic idea was to give equal status to and build a bridge between the users' knowledge developed through traditions, practises and experience and professional knowledge. The users' health problems as they experienced it were guiding the solution toward a focused conversational cooperation between professionals and users. The focus on possible directions for practical and possible solutions or changes was also linked to the users. The professionals should not propose solutions, but guide and motivate the users through new questions. The purpose of these questions was to inspire the users to formulate solutions or changes for themselves that were within their grasp. In this way the solution oriented conversations were indirectly a method to make the users, step by step, take more control of their life situation.<sup>6</sup> The focus on solutions comes from the assumption that there is no clear relationship between patterns

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<sup>6</sup> The solution oriented conversations are building on ideas and experiences from solution focused family therapy. These ideas have been transferred and transformed to preventive and practical health work among immigrants in one of the city districts in Oslo. See Arild Aambø (1997): "Tasteful solutions".

of problems and solution focused activities. Moreover, it is more useful to know the solution than the problem, and change is created by strengthening what has been proven to work (Bakke and Søholt 1996).

The lack of a necessary relationship between the problem and solution is highlighted in the methodology of “miracle” questions.<sup>7</sup> The purpose of such questions is to help people to envisage improvements in their life situation. The question could be something like this: “Imagine that a miracle happens when you are asleep. When you wake up, your problems have disappeared. How can you discover this new situation when you wake up?” This question does not demand an explanation and the person can envision solutions that are free from her original problem. It helps the person to search for possibilities even though the situation is difficult. Further questions could be: “In what situations and when, do you feel that some bits of what you imagine to be a miracle could happen?” “What did you do?” “What can you do to make this (the positive situation/miracle) happen more often?” These types of questions help the person to understand that she can influence her own situation by taking smaller or larger steps (Bakke and Søholt 1996).

Another basic idea was the belief that some of the users, through the solution oriented group conversations, could become natural helpers. Through participation in this process, they learn how to behave and ask questions to support others to be able to make changes in their daily life that can help improve their overall life situation. Since the natural helpers shall not give professional advice, this role is an important supplement for professionals. This is especially true in multicultural contexts in which the answers and relevant solutions are neither obvious to the professionals nor to the people who have the problem. Natural helpers are lay people who engage in helping others who are facing problems similar to their own. The natural helpers have developed their expertise as *laypersons* in relation to culturally sensitive health promotion.

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<sup>7</sup> The methodology related to “miracle” questions are discussed in *LOS Løsningsorienterte samtaler (Solutionoriented conversations)* by Arild Aambø (2004).

In Oslo, this method has been tested and developed in a multiethnic city district.<sup>8</sup> The main target group has been women with immigrant backgrounds, refugees and others. Somali refugee women have made up a considerable portion of this group. The Somali women were facing traumas caused by experiences from war, family dispersion, diaspora and difficulties in finding a meaningful situation as a refugee in Norway. In the PMV Workshop, the women became involved in self-help groups and gradually engaged in human rights work – especially in regard to women’s and children’s rights. In Norway, they have worked to end unwanted traditional practises related to Somali culture such as female genital mutilation (FGM), child and forced marriages. Because the working philosophy builds on women and their understanding and not on predefined solutions, the method has developed in an individual and culturally sensitive way. How to end and change these unwanted practices builds on arguments that are developed and supported by the women themselves.

Somali women are refugees from a country involved in civil war, which implies that there are potential conflicts among the women. This fact has been included in the philosophy of the methodological approach of the PMV Workshop in Oslo. It means that there are developed “rules” and “practises” that the women shall not talk about in addition to things and phenomena that underpin and create conflicts. Therefore, in the workshop it is taboo to talk about clan affiliation, politicians or political parties. With this in mind, there has been some serious work undertaken to develop methods of dialogue to assist in handling differences in meanings and world views. The aim has been to promote communication and an exchange of views without increasing the level of conflict. The core of the talks and conversations should be *how* the women themselves can expand their capacity for learning, how to raise their children in the Norwegian society, how to relate productively to the schools and day care institutions, etc. So far, this experience is a prerequisite for succeeding in keeping conflict themes outside the workshop, as well as for creating an atmosphere for learning so that the women feel safe with and among each other.

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<sup>8</sup> The PMV Centre in Oslo was established in 1994. It developed as a health care project being part of the municipal health services in the city district of Old Oslo. In 1998 the City Mission of Oslo got the responsibility for the workshop.

It seems as if marginalised groups and societies are attracted to methods which focus on sharing experiences, finding solutions and building up self-help groups to promote health care. This is obviously a way to foster capacity building and competence among the people themselves. This is relevant not only among marginalised groups in welfare societies, but also among people in unstable and poor societies. This can help to explain the popularity of the methodology and results of the PMV Workshop in Oslo.

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## 3 Point of departure in Mogadishu

### 3.1 Political context in Mogadishu

A short history of the development of the war and safety situation in Mogadishu since the conception of the PMV Centre, can contribute to the understanding of the need for and the context of the PMV Centre.

The history of Mogadishu can roughly be divided into four periods with relative differences: the *Era of the Warlords (2005-2006)*, the *Era of the Sharia courts (2006)*, the *Era of Ethiopian Intervention (2006-2009)*, and *The Present Era (2009-)*.

During the *Era of the Warlords*, the city was divided into small fiefdoms dominated by warlords who were nominally loyal to a sub clan. These warlords seldom paid their men, and became weaker and weaker as unpaid sub lieutenants defected to the highest bidder, often a businessman, or founded their own groups. With the notable exception of the so-called four months war at the start of this period, clashes were small and relatively few. However, the local population suffered as they were plundered by unpaid warlord militia.<sup>9</sup> The general lawlessness led to popular support for the Sharia courts.

The *Era of the Sharia courts* rose to power in 2006. The Sharia courts created a unified court structure in Mogadishu. This era was almost as peaceful as before the war. However, by the end of 2006

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<sup>9</sup> It is important to underline that Mogadishu had seen many large scale battles, the most devastating period of which were the so called “four months war” in 1991 which was probably the worst, as well as during the period from 1994-1997. These events took place before the founding of the PMV centre and are thus outside the scope of this evaluation.

Ethiopia and the Transitional Federal Government of Somalia (TFG) intervened, partly out of a fear of radicalism.

*The Era of Ethiopian Intervention* started at the end of 2006 as a response to the fear of Islamic radicalism, and was a period of increased suffering for the local population. The six month period from January to June 2007 saw some of the heaviest fighting in Mogadishu's history. The Ethiopians were deploying heavy artillery using so-called Katytsas (rocket launchers) while insurgent groups used mortars and suicide bombers. The economy collapsed and as many as 400,000 refugees fled the city. By the autumn of 2007, the situation had stabilised somewhat. However, the Western backed Transitional Federal Government failed to pay their police and military forces. This led to widespread abuse, plundering and the targeting of the civilian population. In 2008, the Ethiopians were scaling down their engagement. A new government was created in the autumn of 2008 after a peace agreement between the Transitional Federal Government and the so-called Alliance for the Re-Liberation of Somalia, Djibouti group (ARS-D). The group was dominated by elements of the moderate wing of the Sharia courts. This agreement led to Ethiopian withdrawal, and a new government with considerable local popularity was started.

*The Present Era* (2009- ) started after the Ethiopian withdrawal. Two groups, the Haraka Al Shebab and HIZB al Islamia, are still fighting the government in addition to the African Union troops in the city. In May, the fighting between these groups, the government and the African Union forces increased. According to the founder of the PMV Centre and the UN refugee agency, more than 100,000 people had to flee because of the bombing of civilians and their homes.<sup>10</sup> More than 300 people were reported killed and 700 people hospitalised,<sup>11</sup> while food had become scarce and water costly. There were reports of rape and sexual exploitation of women in places of refuge and as they fled. Such risks were exacerbated because of the limited availability of humanitarian assistance. Of the three parties, only the Al Shebab and the government have structures that aim to reassemble the police forces. The Al Shebab will punish rape severely according to the Sharia based verdicts.

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<sup>10</sup> Information via e-mail on June 26<sup>th</sup> 2009.

<sup>11</sup> NTB, June 22nd 2009.

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The Somali government has asked for intervention from the international community. The African Union and the Intergovernmental Authority on Development were looking for options to protect the Somalia Government from militia attacks.

### 3.1.1 The city districts – vast differences in safety

Mogadishu is most commonly divided into 16 districts which is a division pre-dating the war.<sup>12</sup> However, the security situation in these districts varies. The PMV Centre is located in Abdiaziz, which used to be Mogadishu's safest district up until the current fighting. Until the current situation, this district had no direct fighting since the end of the era of the warlords in 2006.

Abdiaziz is close to the sea and surrounded by sheltering hills. It is one of the oldest districts in the city, and used to be the home of wealthy people before the war. Abdiaziz is surrounded by other relatively peaceful districts such as Karaan, Shangani and Shibis, thus adding to the relative safety of the area. According to the local evaluator, explanations for the relative peace that used to characterise this area is that most of the fighting used to take place in the business and markets areas of Mogadishu city and that the area is not too overcrowded. Many internally displaced persons are however living in refugee camps in the area.

Other districts (Hodan, Hurriwa, Yakshid and Daynile) have not enjoyed the relative peace of Abdiaziz up to the present moment. Some districts were outright war zones with prolonged violence, as well as the use of suicide bombers, heavy artillery and battles. The Hodan area became home to 44 registered refugee camps.

Between these two extreme types of districts lie areas that see sporadic clashes such as the Medina, Darkeynley, Hamar Weyene, Haluwadag, Karaan Wadajir and Hamar Jajab. Unfortunately, women going from the high risk areas to the PMV Centre have to pass through some of these mid-level areas. In these areas, mortar attacks, car bombs and hit and run attacks on VIP targets are common, which are the types of attacks that put travellers at risk.

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<sup>12</sup> The districts are Abdul Aziz, Bondhere, Deynile, Dharkeynley, Hamar Jabjab, Hamar Weyne, Hawl Wadag, Huriwa, Hodan, Karaan, Shibis, Shangani, Wadajir, Warberi, Wardhigley and Yaqshid.

### 3.1.2 Local institutions of justice

There are several authorities in Mogadishu that are relevant to victims of war and crime. Today, the most important are the traditional clan leaders. The clan system is the Somali way of dividing their society into patrilineal social groups, and is highly important in Mogadishu. The clan is a source of support and safety. Therefore, it is important whether one belongs to a majority or minority clan. For internally displaced persons and women in particular, it is of importance in terms of safety as to whether one's clan has power or influence in the area where one is living. Normally, elders and clan leaders are engaged in negotiations to avoid conflicts. If the victim is from a minority clan, the clan leaders will have less power to intervene, and at times they will be completely ignored.

A second source of authority is the sheiks, who are the religious leaders. The sheiks often intervene when they see crimes even though they have few resources to enforce verdicts.

The state institutions are weak though the police of the Transitional Government, now often referred to as the Government of national Unity (GNU), are being built-up. Because of a lack of pay, the police remain a dangerous force for the average citizen. However, in some districts there are Madanis, who are neighbourhood vigilantes that might be of some help for vulnerable women and children. Some of the markets have business militias who have been known to intervene against rapists caught "in flagrante delicto". Such actions seem to be rather random, and there have been incidents when the business militia has refrained from acting.

### 3.1.3 The security situation of the PMV Centre and its users

The users of the PMV Centre are mostly categorised as belonging to minority groups that are not engaged in the war. Many are internally displaced in Mogadishu, having no shelter as well as a lack of education opportunities, health care facilities and job opportunities. They might encounter any type of abuse and harassment while they are in the camps for internally displaced people. Travelling to the centre is not easy when fighting is going



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on. Up to the present time, the PMV Centre has been one of the safest places to travel to because of its location.

The PMV Centre is located in an area occupied by many international organisations operating in Mogadishu. It borders on the north with the World Food Programme's warehouse, on the east with the ICRC warehouse, on the west with COGWO and on the south with the street. Its proximity to these diverse international and local organisations is believed to have increased the security situation of the area. The street passing the southern side of the PMV Centre links with two other main streets near the Hotel Global and the Forlanini Hospital.

There are plans for building a new palace for the president in the Abdiiaziz district. This might change the safety situation for the PMV Centre and the district in the future.

#### 3.1.4 May 2009 – situation changed

Until May 2009, the Abdiiaziz district has been relatively safe from fighting. However, during this month, Al Shebab and HIZB al Islamia together attacked the area. For the time being, it is uncertain as to whether they will stay and take control of the area.

The PMV Centre in Mogadishu, which benefitted from a relatively calm and quiet environment since its inception, endured the fighting until mid-June 2009. Heavy fighting near the centre forced the PMV staff to flee the PMV office as of June 18<sup>th</sup>, and the centre has been closed ever since.

According to the local evaluator, COGWO, which is a close neighbour to the PMV Centre, has also had to move from their compound. The organisation took all their important documents and computers to the airport area near the Amison forces (The African Union's troops).

## 4 The Dandelion Project

The overall aim of the project is to empower women and children exposed to gender or war related injuries to help themselves within the context of family and community.

More specifically, the objects of the project are:

1. To establish a workshop for primary health care in Mogadishu modelled on PMV Oslo, thus contributing to the development of culturally sensitive methods for helping and supporting traumatised women and their children by integrating natural helpers, local knowledge and evidence based expert knowledge. The centre will focus special attention towards suffering and traumas caused by violence and war.
2. To establish a sustainable bridge between Somalis in Norway and their native country.
3. The Dandelion Project should be a place to learn.

These objectives are the guidelines for the work of the PMV Centre in Mogadishu. As noted in Chapter 1.1, the objective for the evaluation is to examine how the project succeeds in empowering women to become self-reliant. Since the methodology used in the project is vital to its success, the evaluation shall also describe and compare the development of the methods in both Mogadishu and Oslo.

### 4.1 The target groups

The Dandelion Project is targeted at assisting women and children who have faced gender based or war-related violence, including sexual abuse with rape and domestic violence being the main offences. Other and additional violations are war-related injuries,

burning, intentional injury with the accompanying handicaps, sodomy, stealing of properties, etc. When raped by gunmen, the incident could take place in front of husband and children. In some cases the men are killed, while in others they die shortly after because of traumas, heart attack, etc. Other people, especially children and young girls, are raped by neighbours, guests in the house, etc. Girls as young as 2-years-old have been raped and thrown on the garbage dump. The women being injured or in other ways handicapped, often become divorced from their husbands because they have become a burden. As a result, a considerable portion of the women in the project are single parents who bear the responsibility for their children. Some of the children are a result of rape, giving their mothers extra psychological challenges. All these damages and violations have inflicted traumas and psychological stress on the women and children.

The founder of the project claims that oppression and discrimination are a part of everyday life for the vast majority of Somali women. For example, in traditional Somali culture, a woman eats only after her husband and children have finished their meal. Families make sacrifices so that boys can attend school, while the girls are kept at home to work. According to reports from the project Somali women produce about 85% of the country's food and make enormous economic contributions through unpaid work. Most important is caring for the children and the elderly, providing basic health care, cooking, fetching water and cleaning (Report 1).

During preparations for the project in 2003 the founder of the project, who is a lawyer in human rights herself, underlined women's low position concerning the judicial system. She said that there is low awareness and a lack of training in women issues, particularly women's human rights, amongst the law enforcement agencies in Somalia. She argued that the situation for women was further complicated by Somali social practises that tend to discriminate against women and promote patriarchal customs in a male dominated society. These social traditions, conventions and behaviours against women frame their daily life. Traditions such as these are not suited to safeguard or hinder additional violence to women when social systems are torn apart in combination with war.

Most of the women in the PMV Centre are from minority groups and clans, and many are internal refugees. About 95% of all the documented victims at the COGWO Documentation centre are from ethnic minority groups. This implies that belonging to an ethnic minority group, in regard to the current situation of civil war, does not safeguard one against rape and other assaults. The women and children have lost the ordinary safety network connected to clan and family, meaning that they have very few if anyone to rely on. The geographical disintegration of groups and clans also contributes to the falling apart of the traditional social systems of social control. As long as new legitimate systems for social control are not put in place, the safety situation for the minority women and children is vulnerable.

Most of the women who are raped live in small huts without doors. The huts are easy to break into and they give little protection. They live in refugee camps in or close to Mogadishu.

Some of the participants in the project are not themselves victims. They participate in order to be able to take care of others who are too weak to participate themselves. One of these caretakers developed into being a leader/natural helper for counselling groups.

#### 4.1.1 Selection of participants

The need for support and help to women suffering from gender- and war related violence is immense and only a few get the opportunity to participate in the project. The women are selected from and by COGWO's Documentation Centre.

The PMV Centre has a close relationship to COGWO which is documenting violence towards women and children occurring in Mogadishu and three surrounding regions (Middle Shabeelle, Lower Shabeelle and Hiran). Since 1998, COGWO has registered 480 cases of rape. Eighty-five percent of the rapes were because of the civil war. According to COGWO, this is only 40% of the actual rapes.

The participants at the PMV Centre are selected from among the women and child victims who are documented at COGWO's Documentation Centre. There are two different criteria for selection. The first is based on seniority, and women recorded in

1998-1999 have the first priority. The second selection criterion is based on discretion. If the staff at the Documentation Centre observes women victims that are more resilient and active, and willing to change their life for the better, they are prioritised. The selection of participants is only handled by COGWO. At the start of each course, the PMV Centre asks for a list with 20 female victims. The PMV Centre gets a list with biographical data of 20 women and children, which is the capacity for the PMV Centre. The biographical data of the victims includes name, age, type of violence, place of origin, internal displacement, living in camps. This type of information is the point of departure for each course. Clan affiliation, marital status and the number of children are not documented.

According to the documentation, 98 women and children have been part of the Dandelion Project run by the PMV Centre. Nineteen percent were child victims between the age of 2 and 16. The oldest woman was 60-years-old. These victims took part in five groups, running one at a time. The first one started in 2005 and the last one had their course in the spring of 2009. Clan affiliation is not part of the individual documentation of the victims. However, the 10 women that met with the evaluation team belonged to seven different clans, one of the women was 72 years old and they all had between two to six children.<sup>13</sup>

Four of the groups took place at the PMV Centre in Mogadishu, while the fifth took place in the Afgoye district outside Mogadishu. The training centre was situated in a farm owned by the founder's family, and the female participants were mainly victims of severe domestic violence.

## 4.2 The working out of a Somalian methodology

The project started in 2005 and is continuously ongoing. Before the formal start, there was a pilot project in 2003 run by COGWO. The idea was born out of accidental meetings at international conferences between the founder of the PMV Centre in Mogadishu, a Somali woman participating at the PMV Workshop

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<sup>13</sup> The women belonged to the following clans; Digil, Hawiye, Jareer, Bantu, Yahar, Jeejele and Shidle.

in Oslo, and the founder of the PMV Workshop in Oslo. The objective of the pilot project was to test whether sharing experiences and solution oriented conversations was an effective methodology to improve the overall life situation of Somali women who had been raped (Report 1).

Ten women took part in the pilot project which lasted for four months. They were paid 10 Euros each by the Norwegian co-founder. The purpose was to make the women recognize that their participation was valuable and useful for others if passed on.

When the women started in the project, they exhibited a variety of reactions to their rape experiences. The reactions can be summed up in three main points:

*Fear:* There was an acute reaction to the fear of being killed while being raped. They revealed a fear of death, physical injury or mutilation. They also feared being alone, especially if the rape occurred in their home.

*Loss:* The women experienced the loss of autonomy, self-worth, trust in others and control over their own life.

*Guilt and shame:* Some of the women blamed themselves for the rape. They felt that they should have resisted more, or should have known better than to be in the particular situation where the rape occurred.

These reactions disturbed their sleep. Some became more dependent of friends or parents, while others moved away, thus losing their social network.

The objective of this conversational project was to find out if sharing experiences and conversations could change and improve the women's self apprehension and daily life.

They received two main questions to answer in group dialogues:

1. How can we work with ourselves so that we can leave the past and look ahead?
  - How come the situation is not worse, considering what you have been through?
  - How do you manage your day to day life?
  - What has been helpful so far?

- How is it helpful?
- 2. What has to happen so that we again can be accepted into society?
  - How can we know that we are accepted?
  - What are the signs of acceptance?
  - Who will be more likely to accept us?

The last questions are similar to some of the follow-up questions related to the “miracle” question methodology presented in Chapter 2. In this pilot project tested in Mogadishu, there was not a direct connection between cause and solution. And most importantly, the focus was on how the women managed their daily lives and how they envisaged social acceptance from their surroundings. There was no digging into the cause of their individual sufferings. The suffering was acknowledged and recognised. The female participants summed up their conversations and considerations from four months of organised dialogues. They each had two main and interlinked experiences related to sharing experiences and developing skills.

Sharing experiences helped them to sleep and function normally. One of the most important things was that they had met *reliable* people to *help them talk* and *narrate* their negative experiences. The coming together and the structured talking helped the women to share their trauma in addition to simultaneously helping to heal their psychological wounds (Report 2).

The opportunity to develop skills, get a job to earn an honest living was the one option that would definitely make the women feel accepted in society (Report 1).

The Dandelion Project has developed with these experiences in mind.

### 4.3 Organising the project – 4 stages to meet the women’s needs

The PMV Centre and the Dandelion Project have developed in a slightly different way than their sister organisation in Oslo. Due to the overall difficult life situation for the women users and children

in Mogadishu, trauma counselling is only one part of the solution. Building on the experiences from the pilot project, there are activities for capacity building and empowerment in order to help make the users more economically self-reliable. The poverty situation is part of and connected to the user's traumas. The lack of sufficient food, medical care and shelter intensified the traumas caused by the war situation. The Dandelion Project had to meet this entire package of interconnected problems, not only the psycho-social stress situation, to appear relevant to the women and children who were involved. The project offers six-month courses to the women and child victims. If necessary, they get additional counselling. In addition to the courses, the women and children received "survival" services such as transportation fees, multi-vitamins, anti-pain medicines, etc.

The six-month course has a planned progression and is organised in four stages. First, there is a phase in which the women share experiences and receive counselling. Second, there is training and literacy as well as numerical and vocational training. Next, there are opportunities to receive economical support, micro-credit loans and support for raw materials to start small businesses and organise co-ops. And last, there is the consolidation process where businesswomen are followed up on, and all former participants can get additional counselling if needed. This implies that the women's connections with the centre continue after the six-month course.

Throughout the entire process, there are efforts to build support groups among the women participating within the same group. There is an overwhelming belief in the benefit of working together that is read from all of the project reports. This focus on groups and cooperation in the project builds on long traditions in Somali society. In order to share some of the burdens of their daily lives, women have long been organising themselves into informal groups. This has been a way to help the community during illness, death, marriages, delivery, etc. This tradition came under pressure because of ongoing civil war (Report 4), but the tradition is revitalised through the project by way of building support groups, saving groups like "shalongo" and cooperatives.<sup>14</sup>

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<sup>14</sup> Shalongo is a traditional savings system. A limited number of persons form a savings system. The group decides on the amount of money that shall be saved by each individual during each period, e.g. every month. One person gets the



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The Dandelion Project offers these activities to its women users. The women are organised in groups of approximately 15 – 20 persons at a time. The PMV Centre has the capacity for one group per year. So far there have been five groups or cohorts from 2005 - 2009.

Below follows a more in-depth description of the various stages in each course. For more details, see the reports from the project (Reports 1-8 and 10).

#### 4.3.1 Stage 1: Psycho-social counselling

War related violence, rape or other traumatic incidents are dramatic for the victims. Their life situation and self-esteem is attacked. To acknowledge and narrate these vulnerable situations has proved to be a valuable contribution in helping to heal the wounds. The first step in the training in the Dandelion Project is therefore the sharing of experiences and counselling. It is a belief and experience that opening up and sharing the experiences that caused the traumas, among women with similar stories, is a way to acceptance, relief and reorientation. The experiences are shared among the participants *and* the counsellors themselves. The aim of the counselling is to prepare for such sharing of experiences. Psycho-social support to the women users focuses on resolving emotional stress through talking in a supportive and confidential environment. There are however alternative methods to support and strengthen the women's self-esteem. According to the counsellors, some women who come to the centre do not have good clothes. During the counselling sessions, they get material help such as good clothes, perfume and food. The purpose of this is to rebuild the woman's appearance and self-esteem. She looks at herself in the mirror and sees a respectable person. The counsellors' experience was that the new appearance made the women feel better and behave differently towards others. This method is similar to disaster psychiatry in the armed forces.<sup>15</sup>

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savings for each month until everybody has gotten her share. The system relies on social control, and is also found among Somali refugees in Norway.

<sup>15</sup> One of the evaluators, Dr. Stig Jarle Hansen was trained by the Norwegian Army in crisis psychology. He has been training soldiers in facing extreme situations before he became an academic.

As part of the counselling process, there is an objective to build trusting relationships between the women users and the counsellors at PMV. Without mutual trust it would be difficult to get the users to open themselves up and share their difficult experiences. This is especially so because rape is a taboo topic in Somali culture. The raped women feel anguished, fearful and ashamed to admit it. To acknowledge to oneself that one is raped may cause so much pain that it becomes the most difficult trauma to admit (Report 1). Mutual trust is a prerequisite for sharing such painful experiences, and by sharing, the women learn that they are not alone with such gruesome experiences and that they are not responsible for what happened to them (Report 6).

First and foremost, the counselling takes place in the group, and individual counselling is an additional offer. According to the interviews, about 4-5 women in each group get individual counselling.

The methodology from the PMV Workshop in Oslo serves as a guideline in the counselling practise. The counselling sessions includes the following elements:

- Information and explanation of what participation in the group /the projects implies;
- Different strategies to make the participants feel comfortable;
- Creating an atmosphere of warmth, openness and trust;
- Group rules to help keep confidentiality inside the group and maintain mutual respect;
- Exchange of backgrounds between counsellors and users. This is a way to open up, share experiences and recognise that one is not guilty and not alone, but rather one among many with similar experiences;
- Beginning where the participants want to start and following their pace;
- Attentive listening;
- Other strategies included in the counselling are: role play, singing songs like “alu sunna whal Jama songs” and telling jokes to make people laugh *together* and not *at* each other.

The counsellors have developed different guidelines for *how to* create trust, implement attentive listening and provide support and comfort.<sup>16</sup> These are practical methods and considerations which can be transferred to new natural helpers or group leaders at the PMV Centre.

The counsellors at the PMV Centre are paraprofessionals according to project reports (Report 10). They provide counselling as described above, as well as crisis intervention, problem solving and supportive counselling.

#### 4.3.2 Stage 2: Training

The purpose of the training is to offer approaches and activities that make the women envision new possibilities for action within their scope. With useful and relevant training, the women get the means and tools to *reorganise* their disrupted lives. The first group in 2005 was asked what type of training this could be, and the response was to help them to overcome illiteracy and prioritise the learning, reading and writing of Somali script and basic mathematics (Report 2). Since then, this teaching has become standard in the project. The women are well aware that such competences are helping them to become more self-reliant.

##### **Learning to read, write and count**

Some of the participants at the centre have some education such as secondary school, although most of the women and children were illiterate when they came to the centre. The centre provides lessons in reading, writing and counting. This is important knowledge to possess when engaging in small business. For example, to avoid being cheated they need to know some reading and writing, numbers and how to count. When they know the numbers, they can control what they pay or be sure to be paid the correct sum of money, and when they borrow money, they can control the sum of the loan agreement, etc.

The literacy and numerical training lasts for three months.

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<sup>16</sup> These are documented in reports from the project, for example, the yearly report from 2007.

### **Vocational training**

The participants also receive skill training in areas like:

- Handicrafts
- Knitting
- Tailoring
- Tye and dye
- Cooking
- Weaving

The vocational training followed the same pattern in the different courses. In the first report, it is stated how the women had to learn from the very beginning. They had to learn how to use and care for the sewing machine, and how to measure, cut, design and sew clothes for women and children.

The women learned different handicrafts and techniques to produce different items. Examples of this are small girls' clothes, ladies' scarves, knitted threads to cover chairs in sitting rooms, baby beds and baskets woven by palm fibre and more. Learning to produce such products was the basis for their future small businesses. In addition, some sold detergents, food, vegetables, etc. In times of instability and chaos, people had to prioritise necessary products such as food, and in these times it was more difficult to sell the other products.

#### **4.3.3 Stage 3: Micro-credit, co-ops and small businesses**

This stage concerns helping to promote the women to reintegrate themselves into society on the basis of the understandings and skills they have attained during the course.

According to the reports from the project, women who have participated regularly at the courses and who have demonstrated good coping mechanisms are entitled to receive a loan to be able to start a small business. In addition to skill training, they have learned simple bookkeeping and marketing techniques to help succeed with their small businesses.

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Loans are given to both groups and individuals. The cohort/group of about 20 women is divided into subgroups of approximately five persons who work together as a cooperative and receive a credit loan.

The credit officer claims that the loans are handed out in portions with schedules and sums varying from person to person. For example, first the women get USD 50. If they repay that amount, they get an additional USD 25 after four months and again after four months and so on. As long as the women pay back their loans, there is no limit for additional lending.

There is no easily accessible documentation of the structure and volume of the credits and repayments. Some have gotten additional loans. The information in the different reports pertaining to volume and repayment does not seem to be consistent. One reason for this is that repayment is based on individual needs and war situations.

The loans are without fees and interest to be in line with the Islamic financing system, which implies that the fund will decrease in times of inflation.

Repayment plans are worked out. But, if the women are in a difficult situation, they are allowed to postpone the repayment. According to the acting director, all the loans from the 2006 group have been paid back. There were more problems though with the group in the Afgoye district, as these women had difficulties in repaying because of fighting and hyperinflation. Some needed extra loans that have not been paid back. Seven of the women have fled, have not repaid and have no more contact with the centre.

There are different reasons for why these women had difficulties with repayment. Those who specialised in cooked food and milk had problems in times of war. The food had to be fresh and could not be stored for another day or transported too far. Those who were living in IDP camps were vulnerable to looting, which happened several times.

The PMV Centre has experiences that are positive to cooperation among the businesswomen. According to the centre, group-based loans are simpler to keep and repay consistent with the plan. The

centre also argues that cooperative saving targets are easier to meet (Report 5). Cooperative saving systems are followed by some kind of social control that encourages the women to save their share. Such collective savings, for example, as organised in “shalongo” groups, would be a stepping stone towards business cooperatives.

An alternative economic model was carried out for the first and fifth group who did not get any loans. Instead, the women worked in the centre. The centre bought the materials and the women produced items to be sold. They repaid the raw materials and received the profit themselves.

The women sell their items in front of their houses or at markets. The women used to sell their products at the biggest market, the Bakara. Because of insecurity there, they have changed to two smaller markets, the Suuq Bad and the Karaan market. The latter is close to the PMV Centre.

#### 4.3.4 Stage 4: Consolidation – follow up

The courses that the women follow at the centre normally last for six months. However, this is not the entire story. The women are welcome to visit the centre for counselling whenever they need. When the evaluation team visited the centre, there were six women from the former groups and four from the ongoing fifth group. These women had access to additional loans as they repaid the former loans. The credit officer continues to follow up and visits all women with loans once a week to see how their businesses are progressing.

Women are also welcome for additional psycho-social counselling. This is an important offer as violations towards the women may happen again after they take part in the course. Others need continuous counselling to cope with their situation.

The evaluators have not gotten any documentation of the volume of women and children continuing to visit the centre after the course.

#### 4.4 The PMV Centre - organisation

The description of the project builds on information from July 2008 and from visits by the evaluators.<sup>17</sup>

The PMV Centre in Mogadishu has seven employees in addition to the founder, as well as one person working as a volunteer. Because the founder of the project is on sick leave, there has been a change of acting director. In addition, there were two counsellors in the Afgoye district when the fourth group was active in this area.

The working hours of the centre start at 8 am and continue up to 4 pm. The centre is open six days a week. However, the current beneficiaries registered with the centre come only three days a week, i.e. Saturday, Monday and Wednesday. Former beneficiaries who finished their training and capacity building visit the centre for further advice any time they want. According to the evaluator, the first insight reveals that the activities undertaken are limited and below their capacity.

Once a week on Mondays, there are staff meetings. In these meetings, progress and activities are discussed. The director takes part in these meetings and writes summaries. In this way, all the people involved have the possibility to be well informed about the activities and the running of the centre. This allows the employees and volunteers to work comprehensively with the centre's tasks. According to the impressions from meetings between PMV Oslo and PMV Mogadishu, the small organisation and the open communication makes it possible for the staff members to step into each other's duties.<sup>18</sup>

The PMV Centre has no fixed sign at its entrance that could reveal its activities and address for visitors and other interested people who are coming, which would have assisted the centre in attracting more people. On the other hand, it could have a negative side by attracting more people in need than the centre can afford to handle. As it stands today, the participants are selected by COGWO, and cannot enrol at the centre themselves.

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<sup>17</sup> Minutes from a meeting in Nairobi on July 7th-11th 2008 between PMV Mogadishu and PMV Oslo.

<sup>18</sup> Based on an interview with Arild Aambø, March 3rd 2009.

#### 4.4.1 Overview of the different positions at the PMV Centre

A description of the different positions and persons' tasks at the centre helps to highlight how the centre fulfils its objective. The employees have various primary roles, but they are working on one common project together.

The organisational map of the Dandelion Project in Mogadishu:

Founder, Director. Lawyer, Human Rights		
Acting director		
Accountant and counsellor	Assistant coordinator and counsellor	Credit officer
Volunteer vocational trainer		
Guard	Guard	Cleaner

##### **Founder**

The founder is a human rights lawyer. She has been working with COGWO from 1996 to 2005. She has had different leading positions within the organisation. At the PMV Centre, she assumes overall responsibility and advises the centre even when she is abroad.

##### **Acting director and coordinator**

The coordinator of the centre monitors and evaluates the Dandelion Project and activities at the centre. He is responsible for all networking and checks the project reports. He affirms the action plans for the project, and finally, he submits project reports on a quarterly basis to the donors. The acting director started as a volunteer in 2005 and attained the position as feedback receiver in 2008.

##### **Assistant coordinator and counsellor**

The assistant coordinator and counsellor manage the day to day activities of the project. She also teaches reading, writing and basic



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mathematics to the participants. In addition, she provides vocational training and sometimes counselling. And finally, she offers monthly reports which are submitted to the acting director.

#### **Accountant and counsellor**

The accountant and counsellor of the centre keep the project accounts regularly and competently in accordance with sound accounting principles and practices. She also ensures that budget lines are not exceeded. In addition, she makes sure there is prompt delivery of funds for the various project activities.

The accountant is also responsible for all the office administrative work and maintains a good system of accounts. She is in charge of all expenses, purchases, payments, etc., and also provides counselling services to the groups.

Both the counsellors have a background in health and are trained by COGWO. One of them has secondary school education, while the other has a university degree. They have been at the centre since its inception in 2005.

#### **Two counsellors in Afgoye**

The fourth group took place in Afgoye, a district outside the Mogadishu area. Two local women were hired as counsellors who had a high school education. In addition, one had a diploma from a nursing school, and the other had training in organisation and management. The last one also had training in agriculture from CARE.

#### **Credit officer**

The credit officer of the centre is responsible for monitoring all the credits offered to the participants at the centre. She is in charge of visiting the houses and businesses of the participating women. The purpose of this is to know more about their condition and how their businesses are running after they have obtained loans from the centre.

#### **The volunteer**

The one volunteer was herself a participant in the second group. She fulfilled all the training and ran a small business before she became a vocational trainer. According to the coordinator, her motivation for volunteering is that she might get a paid position

later at the centre, which was the case for the current credit officer and the acting director.

### **Cleaner**

The PMV Centre employs one cleaner. She cleans, takes care of the office and prepares refreshments and snacks for the groups during breaks.

### **Guards**

There are two guards. They take care of the security of the office every day. They are also responsible for the security of the office during the night on a shift basis.

The descriptions show that all the employees and volunteers have comprehensive knowledge in regard to the work they are performing. They are all working directly with and have duties concerning the participants at the centre. In this way, they all get their own though different experiences with the participants. The director is involved whenever there is a need for something special or extra such as conflict handling in groups, etc. As they are part of a small organisation in localities where they are physically close to each other, they have developed a transparent and informal organisation. The motivation of the staff is high and they express a sense of performing meaningful work. The overall impression is that the staff of the PMV Centre is hard working and provides professional services to their clients. However, according to interviews of the staff and the evaluator's observations, the centre has more capacity and could enrol even more participants if they had additional economical support.

The staff is from different Somali clans such as Hawiye, Darod, Dir and Bantu. Five of the employees, including the founder are females, while the acting director and guards are men. The different clan affiliation of the staff underlines the objective that clan affiliation should not make a difference for the female victims. All are welcomed and treated equally. The presence of men in the centre likewise serves as a possibility for the women and children victims to develop a sense of safety with men in their surroundings and to normalise their relationship with men. Present and responsible men might also help to avoid possible stigmatisation attached to a women's centre.

#### 4.4.2 Budget – Utilisation of resources

The budget has been between USD 40,000-50,000 for six months, which is the period for one course or cohort of women and children. When the project started in 2005, the budget was USD 48,000.

The budget for the three-month course in spring 2009 amounts to USD 21,420.<sup>19</sup>

The main expense is for the salaries which accounts for 40% of the budget.

Direct costs covering the women's participation add up to another 40 % which is the same level as the salaries. The costs related to activities cover, among other things, transportation, refreshments and materials. The transportation costs cover more than 40 % of these direct costs. The transportation costs have increased over the years and are approaching almost one-fifth of the entire budget.

The transportation costs are on the same level as the entire budget for the administration. The hyperinflation and recession of 2007-2008 doubled the costs of ordinary goods and food.

Transportation costs and refreshments are necessary costs in order to make it possible for women to come to the centre. As they are extremely poor, transportation fees and free refreshments are necessary. While they are at the centre, they do not have the possibility to provide food for themselves in other ways.

In addition to the costs for running the centre, there is the budget for the micro-credit loans. So far, approximately USD 8000 has been lent out to the four first groups for the period from 2005-2008.<sup>20</sup>

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<sup>19</sup> The budget for February to April 2009 is attached. The evaluators have only gotten this budget.

<sup>20</sup> The information about the volume of the micro-credit loans is not consistent.

## 4.5 The PMV Centre – physical conditions

The centre radiates the impression of a calm and peaceful place at first sight compared to other overcrowded and noisy areas the evaluator had the opportunity to visit earlier.

The PMV Centre lies on a plot of land 30 x 30 m<sup>2</sup>. The centre is composed of five rooms used as offices with a long lighted and ventilated corridor, an open air sitting garden, one classroom for the training and one room for the sewing machines. Furthermore, the centre has a mini playground, three bathrooms and kitchen. The centre's building seems quite old, but it has been rehabilitated and the centre looks nice and clean.

The centre is well equipped and has a good-looking office with sufficient furniture, and the office equipment remains in good condition. The centre has the following equipment:

- Three desktop computers
- Two laptop computers
- Three printers
- Two fax machines
- Seven cardboards/bookshelves
- Sixty chairs
- Twenty-five tables
- One water machine
- Air conditioning
- Two generators (as the city has no permanent electricity, the centre should have its own electricity supply)

## 4.6 Guidance from Norway

The relationship developed between the founders of the PMV projects in Oslo and Mogadishu has resulted in an ongoing cooperation. The Oslo team contributes to the PMV Centre in Mogadishu with capacity building through guidance of its staff members.

This guidance has taken place in Nairobi or Djibouti once or twice a year. The person responsible for the guidance, the founder of the PMV Workshop in Oslo, admits that it has been difficult to guide a project that is so far away. Because of the security situation, he has neither visited the project or Mogadishu. This implies that his impressions and starting points for guidance rely on reports, conversations, pictures and videos. The guidance includes the following aspects: Exchange of experiences in the Somali women's groups in Oslo and Mogadishu. As part of this, there are descriptions and explanations of how to go forward with women who have experienced severe traumas. The discussions are focused on the counsellors' attitudes, roles and practises. In addition, there are lectures on proposed themes like psychiatric training.

### **The guidance as seen from the Norwegian perspective:**

So far, different people from the project in Mogadishu have participated each time. Fortunately from a guidance perspective, they have all known each other and been well informed about the progress of the project. However, shifting persons taking part in the guidance makes it more difficult to develop a continuing learning relationship.

Since some of the women users in the project have had serious psychiatric problems, the project has asked for psychiatric training. There has been teaching of mental techniques at the guidance meetings, but it is uncertain how this is received and understood among the participants from PMV Mogadishu.

### **The guidance as seen from the Somalian perspective**

It seems as if the guidance has been directed to the persons who are responsible for the project.<sup>21</sup> The counsellors' knowledge of the guidance sessions are therefore dependant on what they are told by the staff.

The acting director reported that they discussed and developed the project in the guidance meetings, though he did not think that the "Norwegian methods" were important for the counselling. Yet, what they do in much of the counselling is very similar to the counselling practises done in Oslo. According to the counsellors, it seems like they do not know the origin of the methods they use.

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<sup>21</sup> It was said that the counsellors had problems to get visas.

Besides, one of the counsellors wonders how the “Norwegian methods” can be relevant since the situations are so very different. Moreover, it seems as if similar methods are used in the training sessions at COGWO and SAACID.

In addition to the guidance meetings, there are sporadic contacts between the Somali/Norwegian project leader in Oslo and the person in charge in Mogadishu. Most of this communication is about formalities and takes place via phone or e-mail. Even though contact is limited, the Somali/Norwegian project leader has the impression that it is of great importance for the Mogadishu team to know that somebody outside Somalia cares, is attentive to the project and wants to support with ideas, experience and methodology. This view is supported by the acting director of the Dandelion Project. He claims that they have a good cooperation with Somali women in Norway. They have similar problems, even though the situations are very different. The contact is informal and not institutionalised.

That the staff in Mogadishu did not recognise the value of the “Norwegian methods” can be understood in different ways. One explanation is that the methods are self-evident and have been developed and learned locally. Traditions for sharing and helping each others, as demonstrated in the project reports, are supporting this alternative. Another explanation is that the “Norwegian methods” is transferred to the counsellors through the local staff who has participated in the guidance meetings with the Norwegians. The core in this guidance is consciousness-raising about what and how to focus to change the way of thinking, from despair and sorrow to more future oriented productive thinking. If the process of transfer has been successful, the counsellors could internalise this way of thinking, this can happen consciously or unconsciously.

### **Learning from Mogadishu**

Guidance is not a one-way relationship. Through the project report and annual meetings, the Norwegian partners have become more concerned about the importance of social networks in preference to individual therapy. An important prerequisite in relying more on social networks than individual therapy is however that the networks acknowledge the individuals.

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The understanding of the importance of social networks for the individuals' psycho-social well-being comes back to the work with refugee Somali women in Norway. As refugees, they have often lost their networks, and new networks in diaspora can seldom follow the same social patterns as in their country of origin. New social networks are not natural, but instead have to be constructed. This parallels the situation in Mogadishu in which women, often internal refugees, build new social support networks through their participation in the Dandelion Project.

## 4.7 Outputs

To sum up, the project has succeeded in reaching five groups of offended women and children from 2005 until 2009. Each group except for the last one has gone through a counselling and training period of six months. The training period for the last group was only three months, the reason being that the rest of the budget is used for evaluation purposes.

Altogether, 79 women and 19 children have gotten training and follow up from the centre according to the files. Children are categorised as being 16 years or younger, and the youngest child was only two years of age. These children did not only follow their mothers to the centre, but were victims themselves. According to the three-year report from the centre itself, there were six more children altogether taking part in the project.

Four of the groups got their training in the PMV Centre in Mogadishu. One of the groups, the fourth cohort, took place in Beledul Amiin, a village in the Afgoye district in the Lower Shabelle region. The participants were invited from six villages from within the district.

### **The first group<sup>22</sup>**

The group divided into four subgroups which formed four business cooperatives. They did not get loans, but instead received raw materials to be paid back. They got the raw materials in July 2006 and started repayment that September. After six months, all was repaid. After this start, 13 of the women were able to manage

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<sup>22</sup> The reference for the summarising of the groups is in Report 10.

for themselves economically. Five of the women got a loan in June 2007 and an additional loan in June 2008.

#### **The second group**

The women received loans in December 2006. Their repayment cycle started well, but was disturbed by new fighting and they all fled Mogadishu. They returned after the cease-fire, in May 2007. They had lost their businesses due to high inflation and loss of demand, in addition to the fact that some of the women's houses with the items for sale were destroyed in the war. The women got new loans and repayment, including the old loans, has been rescheduled on a long-term basis.

#### **The third group**

This group completed the course in June 2007. Thirteen out of 20 women have gotten a loan, while the others left Mogadishu for their region of origin. The thirteen who received loans are under the supervision of the credit officer.

#### **The fourth group**

The fourth group took place in Beledul Amiin in the Afgoye district where most people are dependent on farming to survive. The group started in July 2007 and is divided into two subgroups. There was one sewing cooperative and one based on handicrafts, and the groups were quite successful and got loans. However, drought caused limited or no crops and inflation caused them to lose their money. Because they no longer had the means to manage their daily life, they all moved to a refugee camp.

The PMV Centre recommends that these women are given additional loans to restart their businesses.

#### **The fifth group**

Because of the deteriorating security situation in Mogadishu, this group did not obtain loans but instead received raw materials. They work at the centre, sell their items in the markets and pay back the raw materials.



### **Follow-up**

All the women and children in the cohorts have the possibility to visit the centre whenever they are in need for psycho-social or business counselling or support thereafter.

### **Postscript**

The local evaluator suggested that the women with loans were in a more favourable situation when the fighting entered the Abdiaziz city district in May 2009. With the loans, they had money to travel to a safer place. Those without money had to remain with the bullets.

## **4.8 PMV's relationship to and cooperation with civil society**

Since its inception, the PMV Centre has worked to mobilise and cooperate with the city district and other civil organisations and institutions. In the beginning, there were meetings with the authorities of the 16 districts in Mogadishu city, including seven traditional elders, four religious leaders and twelve leaders of women's groups to try and obtain support and recognition for the project.

The PMV centre has working relationships with COGWO and SAACID. The centre is networking with other local NGOs involved in human rights issues such as the Peace and Human Rights Network (INXA), the Ismail Jumcale Centre for human rights, ENHA (Muslim brotherhood) and Soriden.<sup>23</sup>

There is an agreement between COGWO and the PMV Centre. COGWO provides the victims and PMV the training. SAACID is a non-profit organisation that focuses on practical measures to enhance life options for women, children and the poor. The organisation has many activities and is experienced in giving credits to women. SAACID has been advising the PMV Centre on this topic and has trained their credit officer. The systems are basically the same in the two organisations.

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<sup>23</sup> The local evaluator visited all these organisations except for Soriden. Soriden was not visited because of safety risks.

When it concerns ENHA, people from the PMV Centre take part in their seminars and workshops on human rights and reconciliation. Through this cooperation, the staff at the PMV Centre is enabled to do some reconciliation work. According to the acting director, the centre has invited people (victims) from all over Mogadishu to hear lectures on this topic.

In addition to the human rights organisations, the opinions and views of clan elders and religious leaders regarding the centre are important for its appreciation in the neighbourhood. The clan elders were better informed than the religious leaders. The clan elders knew about the centre and cooperated with it from time to time. For example, they would contribute with conflict resolution in case of any dispute between the centre and any member of the clan elders respective clans. They also assisted the centre in solving any general problem that needed the wisdom of the elders. Moreover, a relative of one the elders had been assisted by the centre. The religious leaders had less contact with the centre, though one had heard about the centre, but did not know where it was.<sup>24</sup>

The documentation from the centre, as well as the interviews, underline that the PMV Centre cooperates with other NGOs on human rights. They cooperate about the participants and methodology as it pertains to micro-credit. Most importantly, the staff and counsellors receive free training in the other organisations. It seems as if these various organisations are supplementing and supporting each other. The support from the traditional leaders as well is important in order to uphold a positive reputation for the centre and its users. In a society with so few additional resources, the development of human support networks is vital.

According to one of the participants at the centre, it has a good reputation. As she said: *“Everyone runs to PMV, especially after they were on the radio! It must be enlarged!”*

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<sup>24</sup> The quranic (religious) teacher had never heard about the centre either. However, when he was informed he was impressed, and wanted to pray for those who organised this activity.

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## 5 Actual achievements of the objectives at time of evaluation

The evaluation has two main objectives. The first objective is to consider whether the female participants in the PMV Centre become empowered to improve their mental health and daily practical life through their participation in the project. The overall question is if all the activities of the centre benefit the participants in a healthy way. Secondly, to identify and describe the method developed in the PMV Centre in Mogadishu compared to the original model and methods in Oslo.

The target groups, the courses, the different activities in the centre and the actual cohorts who have participated are described in Chapter 4. The Oslo model is described in Chapter 2, while the Mogadishu model is described in Chapter 4.

The focus in this chapter will be to discuss whether all of the project's activities seem to promote the participants' mental health and encourage their income generating activities.

The paragraphs build on all the material in the evaluation. However, the interviews and viewpoints of the staff, employees, volunteers and women users at the PMV Centre in April 2009 are central to the understanding of, and supplement to, the project reports.

### 5.1 The Women

The benefits for the women are manifold. Together, the counselling, skill training and micro-credit system have all benefitted the women. These three girders in the project were

linked together and boosted the women's self-esteem. In the very first pilot group the women affirmed: "If we can share experiences and get decent work, the symptoms of our trauma will disappear!" (Report 1). According to the following reports, this type of experience continued to characterise the following groups.

The individual documentation about the women and children document to some degree the participants' situation before and after their participation in the project. Expressions like "She was in trauma when she came to the centre, but after treatment and long days of calming she is now in good ambience and in a position to learn" can be found in many of the case files. For example, one of the women said to the evaluators "My heart is not like it used to be, my heart is better now."

During the field visits in the evaluation, there were meetings with 10 women from all the cohorts, except for the fourth group which took place in the Abdoye district. The 10 women were an example of the consolidation process. Those who were not in the ongoing cohort continued to have contact with the centre. They had had access to three consecutive loans and were in the repayment cycle. The women said that before they joined the centre they did not know how to face their problems. According to their stories, it was their participation in the courses, the learning of skills and working together at the centre that changed their ideas and ways of tackling their daily life, including getting some income-generating work.

### **Care, concern and support**

Many of the women lost their close network because of the war and their displacement. They were left by their husbands when they became a burden because of rape, incidents, etc. In this situation, the PMV Centre appeared as a place for comfort and support. The centre helped the women both to hospital and after hospital, and tried to provide medicines.

During the courses, the women developed mutual care and respect for each other. Through the involvement and participating methodology in the project, the women have experienced new arenas for trust and cooperation. They experienced that their voice, experiences and meanings were respected and received among their fellow participants in the courses. The experience with dialogue and respect for each other's stories, views and meanings

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are tiny, but important steps when building new democratic institutions from the bottom, in a society that has fallen apart.

### **Support groups**

Through the project, the women build alternative informal, social networks to replace or supplement the traditional networks that were often broken up. The support from these networks was demonstrated through different actions. For example, if somebody was sick, they prayed and visited in the hospital, and helped out with food, sugar, etc. Through training and the process of developing and running small businesses, they learnt how to support each other.

According to PMV, the core of the support groups is methods that promote people experiencing similar problems to help each other. The groups also do business together through a loan they receive from the centre. Through this association, they share feelings and experiences. Most of these groups do not come to the centre regularly, although they do attend periodic sessions depending on their accessibility and closeness to the centre.

### **New qualifications, micro-credit and income-generating work**

It is obvious from all the documentation that the women learned to read, write and count through partaking in the courses. These courses lasted for three months and then there were two months of both literacy and skill training. Although these months were not much concerning literacy and mathematics, all the documentation and interviews prove that the women learned enough to get a feeling of mastering these techniques for use in their daily life. It is indeed a comprehensive change for adults to change their position from being illiterate to being capable of reading texts, writing their name and controlling their income and expenses, and some even continued their education. With this basic education, together with new skills acquired to produce items for sale *and* the possibility of obtaining micro-credit loans, the women had changed their abilities to feed their children and pay the rent. By developing their small businesses, they simultaneously increased their ability to make plans and carry them out. “We learned how to get along, how to analyse problems and find solutions ourselves” (Report 4). Since the project is following up the former groups with loans and

consolidation, they have learned that the project has contributed to easing poverty among the women by enhancing their economic activities (Report 5).

Due to the women's new position as the earner and breadwinner in the household, they attained a new understanding of their position and situation in daily life. As a result, they have a stronger say in the management of their families. In one case, the husband took care of the children while she was busy with her business. In another, the woman earned enough to even send money to help support her son in Egypt. These kinds of effects are most important in a patriarchal and broken society.

### **Developing dreams and hopes**

An important part in the women's empowerment process is the understanding that change is possible. As stated in one of the project reports, the women have experienced that poverty is a changeable status and not a lifelong sentence (Report 2). Some have formulated dreams and hopes for another individual future. Understandings are developed where they envisage that a different future is possible, underlying the fact that they understand that they are not doomed to continue having a miserable life. For example, one of the women users expressed the dream of working in an office after she has done some trading.

### **From nobody to somebody**

As stated in the project reports, women have little value in Somali society as the participants in the project can attest. Most are there because of abuses suffered from men such as husbands, as well as family and gunmen or as a result of other war-related injuries. Through the project, they have learned how to read, write and count in addition to practical skills. Knowing these skills creates joy and satisfaction. It is an understatement to say it is no small wonder they have gotten the chance to finally learn to read and write. They learned to appreciate education, and as one said, "I became civilised." Through this learning they became someone who produces goods for sale, and who are the breadwinners in the family. Just as importantly, they have achieved self-esteem as individuals and women, as well as recognition from society.

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We did not know that we had the qualities that we have discovered in ourselves. That is why we feel so happy now. We feel we have value as a person.  
(Report 4)

Engaging in this kind of process has made the women change their position from being a victim and a nobody to being somebody.

### **Women with severe psychiatric problems**

Some of the women have such severe traumas that the psycho-social counselling was not sufficient. These women did not improve their mental health through participating in the project. According to the project, these women need psychotherapy, but for the time being, this type of expertise is not available in Somalia (Report 10).

### **Impact on the gender relationships in the family**

Since Somali society is a patriarchal society, one could expect that the husbands of the women would dislike the fact that their wives became empowered through the project, though according to the acting director this is not a big issue. One reason is that Somali women are now the money earners in the family. When the women participants in the project became economically active, the profits helped the family survive, and the director had not heard of any misuse of the funds within the families. The women are traditionally the vendors in the families, so they are continuing an established practise. However, one argument for not giving loans to the first group was to help them control their income so as not to tempt the husbands to use the income for their private necessities (Report 5). At the same time it was a way to develop the women's competence in terms of accounting.

### **The children**

Some children are victims and others follow their mothers, so the children's situation is of vital importance to the mothers. To date, it seems as if the centre does not have the capacity to properly deal with the children. However, they receive care, get something to play with and have the counsellors sing to them, so they are attended to until the counsellors are finished with the women. When the children reach school age, they start to be educated at the centre.

Although children are not the main responsibility at the centre, the centre has succeeded in sending a six-year-old girl to the US for treatment. The centre cooperated with COGWO and the Diaspora in the US on this specific case, and the entire family received counselling.

So far, the centre does not have the competence and capacity to counsel and follow up the children. If there was some type of day care for the women's children, it would be easier for them to participate in the classes.

The Somali project leader in Oslo says that the PMV Centre in Mogadishu should develop a special program for the children. According to her, the children's negative experiences and outlook may be strengthened if they spend too much time with women with traumatic stories.

### **Difficult to attract volunteers**

Seven of the women from the first cohort became group leaders for the second cohort. Consequently, only one woman was left as volunteer by the spring of 2009, although another got a job in the PMV Centre as a credit officer. The five others left since they needed to earn some income, and according to the director it is difficult to motivate the women to work as volunteers. The reason for this is that they are poor and cannot afford to work voluntarily since their standard of living is below the minimum for sustainability. As a result of this situation, they are busy trying to manage their daily life.

It is obvious that the women's primary concern is to feed their family. However, because it is difficult to engage volunteers, the project is dependent on paid counsellors. In times when financing is not available, it can be difficult to run the project with only paid counsellors. Moreover, using only paid staff requires an increase in the budget to continue this type of endeavour.

### **Positive achievements despite the civil war situation**

One possible way to understand the project's ability to contribute to the empowerment of the women might be their difficult situation in war torn Mogadishu. Since the women knew they had few alternatives for help, this knowledge could imply that those



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who had the chance to join the project knew that they had to invest their mental effort in order to succeed.

## 5.2 Development of the methods

The methods applied in the PMV Workshop in Oslo and the PMV Centre in Mogadishu are developed locally in cooperation with key people and the women users, and is then adapted to the actual contexts in the two cities. The main features of the Oslo model are described in Chapter 2 and the development of the methodology in Mogadishu is described in Chapter 4. In this section, we shall discuss some of the main similarities and differences between the methods developed in Oslo and Mogadishu.

### **Similarities**

The main similarity between the projects in Oslo and Mogadishu is the focus on trauma counselling in the groups. In both places, the target group is women suffering from the torment of war in Somalia. The women in Somalia have to learn to live with these conditions, while the ones in Oslo have to deal with being refugees. In both cases traditional networks and support groups are destroyed and have to be reconstructed along new social lines. Former “world views” are no longer valid, and in both situations the main aim is to empower the women to get (re) integrated in the actual society they are living in, in a way that strengthens their position. The central methodology in the counselling groups is the sharing of experiences and solution focused conversations, so the focus is on the future and not the past.

Another similarity which is essential is that the methodology is culture sensitive. The point of departure is the women’s own experiences and interpretations of their situation in addition to local knowledge. It is their interpretation of their situation that is the guideline for counselling and for steps to take more control over their own life situation.

To promote togetherness and support among the women, there are some common rules that have been developed for the women’s groups in both Oslo and Mogadishu. As the women are part of a country at war, conflict themes such as clan affiliation, politicians and parties should not be discussed in the centres. In

both places, the support groups and centres have developed into “places of belonging”, as mental and practical alternatives to traditional support networks in Somali culture.

Yet another similarity is the development of the awareness of human and women’s rights. The point of departure here is the patriarchal Somali culture in which women has little value. Related to this fact are the practises with FMG, child and forced marriages and more. In Somalia, the founder is a lawyer specialising in human rights, and therefore the human and women rights perspective has been central in the project. In Oslo, this perspective has been brought up and developed within the counselling groups.

A last but extremely important similarity is worth mentioning. Both of the centres in Mogadishu and Oslo have devoted and motivated resource persons who by their engagement promote the development of the centres. Their engagement leads to new questions that are vital for the development of the centres.

### **Differences**

There are also key differences in the centres with one being the context. The women in Somalia are more or less living in war situations where the traditional systems for social safety and income generating work are destroyed or changed. Most are from minority clans and are extremely poor. Poverty is part of their difficult situation. The majority of Somali women at the PMV Workshop in Oslo are poor compared to Norwegians. However, they are part of the Norwegian welfare state and as such receive economical support. Their children attend school at no cost and have the possibility for further education. There are many and varied public and private initiatives for the integration of adults and children who also have access to the health care system. These differences in context explain some of the differences in the two projects.

In Mogadishu, the women do not have any additional economic support system. This is why this project has to include training and income generating activities. Psycho-social counselling alone would not be enough to secure and change these women’s difficult life situations. On the contrary, in many ways the PMV Workshop in Oslo tries to provide what is not available in the ordinary

integration efforts and initiatives. The PMV Workshop is tailor made to catch up to vulnerable women with minority backgrounds who are not yet capable of handling their life situation in a constructive way in a new society. Moreover, the centre offers culturally sensitive possibilities for reflection and activities that have to be developed inside the ethnic minority communities.

Another difference that pertains to the overall resource situation is the availability of professionals. In Oslo, professionals of different varieties are invited to cooperate with the women users for a shorter or longer period of time. In Mogadishu, the counsellors at the PMV Centre are responsible for all the counselling and training. There is a shortage of professionals and the centre has little to offer women and children with severe psychiatric problems. However, the PMV centre has close ties with other NGOs where the counsellors get additional training. Unfortunately, the need for sufficient competence and capacity is not met.

To sum up, the main similarities are linked to the core of the methodology such as sharing experiences, and using solution focused and culturally sensitive approaches. The other core similarity is the devoted and engaged resource people driving the centres forward. The main differences are in the contexts; war and poverty compared to peace and welfare state. Another difference is linked to the resource situation available to the women and in relation to the centres access to professionals.

### 5.3 The methods and the philosophy – relevance in different kinds of societies

The Dandelion project and its methods have humanitarian relevance. Through the project, the women are introduced to the human rights and their rights as women according to Sharia legislation. Moreover, the methods aspire to be culturally sensitive in that the content of the counselling and the addition of other contributions such as different types of training are adjusted to the women's and children's needs and life situations. This implies that the objective with the methodological approach is to be sensitive to the target groups' actual situation and possibilities for capacity building in their local context. Implementing and adjusting the

methods in a new and much more difficult situation than in Oslo, but with the same target group – war traumatized Somali women, help to strengthen the method and make it more effective in different situations. By implementing, reflecting and sharing experiences on the use and benefits of the development of the methods in Mogadishu, the transfer value of the methods are explored and made explicit. This is a prerequisite for the further successful export of these working methods.

This kind of project is also relevant because of the gender perspective in a dominant male society. Through the project marginalised women, in regard to clan affiliation, poverty and the trauma caused by war, have got possibilities for empowerment. The power structures in the women's daily life are challenged when they improve their understanding of human and women's rights in addition to becoming the breadwinners in the family.

#### 5.4 The project's measuring of success

The Dandelion project has worked out some indicators for the projects' success. The most important element is whether the women, after their participation in the courses at the centre, have become empowered to improve their life situation. To get information about the women's situation, the credit officer visits the women in the field. She examines the shops, if the woman can pay the rent, and in what ways her life has changed. For example, if the woman is able to send her children to school, how many meals the family has each day, etc.

Big success: When the woman is working, sending some of her children to school and repaying her loan.

Some success: The woman is working and sending some of her children to school, but not repaying the loan.

To these points can be added:

Improvement: The woman has learned to read, write and count and improved her mental health situation, but does not have any income. She is visiting the centre for further counselling. She knows that there is a place where she can get support and help.

Not successful: Women with severe traumas who did not benefit from the counselling. They do not continue to visit the centre.

So far, the centre does not have statistics to present an overview of how many of the women have succeeded at the various levels. However, they follow all the participants closely and claim to document the situation of each woman as to when she starts and when she finishes the course. The documentation is in individual files for each cohort.

## 6 Strengths and weaknesses

An analysis of the strengths and weaknesses of the project related to methods and civil society integration, as well as to the management and financial arrangement, can help the further development of the PMV Centre in Mogadishu.

### 6.1 Methods

#### **Strengths**

The methods developed in The PMV Workshop in Oslo are adapted to the local situation in Mogadishu. The local PMV Centre has succeeded in developing and adjusting the methods in a way that works well in the context of Mogadishu. The awareness of the connection between traumas experienced and poverty has motivated the centre to include this aspect in their methodology. The centre has limited resources and has built courses with the different stages building on top of each other. The course progression has successfully integrated trauma counselling with training and income generating activities. It is impressive that after a six month course the women participants have been able to get a new understanding of their situation in such a way that they envisage how they can, and already have become, self-reliant.

#### **Weaknesses**

Thus far the PMV Centre does not have sufficient competence to counsel women with severe traumas, nor is such competence available among the centre's networking organisations.

The last step in the progression for self-reliance is micro-credit. This system is very vulnerable to the conflict situation in Mogadishu. It should be reconsidered as to whether there are other, more sustainable economic methods that can be applied within the project.

## 6.2 Civil society integration

### **Strengths**

From the beginning, the centre has worked to have good relations with other NGOs, local authorities and local institutions such as the clan elders and sheiks. These relationships have paid off.

The PMV Centre also has working relationships with COGWO and a strong network affiliation with SAACID and ENHA. Among other NGOs networking with the PMV Centre are INXA, the peace and human rights network, the Ismail Jumicale Centre and Soriden.

The women and children participating in the PMV Centre are selected by and from the COGWO Documentation Centre.

The counsellors get free training from other NGOs, which is an excellent way to maintain their motivation and competence in counselling and micro-credit. Through such free courses, they have received some additional education in human and women's rights. Such additional free training is a valuable aid in the development of competence at the PMV Centre since the PMV Centre has a limited budget.

The PMV Centre has a good reputation among other local institutions like the clan elders. If needed, they can contribute in resolving conflicts as well.

The centre also has a good reputation among other women in need, and more women than just the actual participants want to become beneficiaries as well.

### **Weaknesses**

The centre seems to be less known among religious leaders, though they appreciate what they know about the centre. The acting director hopes to receive more support from the local communities in regard to the workshops. There was also a wish to get more support from the Diaspora community, both financial and help for practical facilities.

As we know, the centre has no contact with the main female trading organisations in Mogadishu. Networking with such organisations can strengthen the business aspect of the PMV

Centre. Cooperation with female trading organisations could allow the PMV Centre to draw upon the knowledge of the former for business training purposes. Mogadishu trading organisations might also be of help with regard to security and practicalities for the participants from the PMV Centre, that become business women.

### 6.3 Management and financial arrangements

#### **Strengths**

The PMV Centre has seven employees in addition to the founder and volunteer. It is a small transparent organisation in which everyone has knowledge about the participants and what is transpiring there. It seems as if the centre has succeeded in organising its employees with both special and overlapping competences, which opens up the opportunities for a flexible organisation where the employees can supplement and complement each other.

The motivation of the staff is high and they express a sense of performing meaningful work. The individual's motivation is probably important to the success of the project. The impression is that the staff of the PMV Centre is hard working and provides professional services to their clients.

Even though the guidance from the Norwegian partners seldom occurs, it seems important for the encouragement and development of the centre in Mogadishu.

The staff belongs to various Somali clans which demonstrate the objective of including everybody, independent of their clan affiliation.

#### **Weaknesses**

It seems as though the staff has the capacity for enrolling more women and children groups into the centre. The limitation is the lack of money for dealing with the direct costs which accompanies the activities of the groups.

The counsellors are the backbone of the project. It is a weakness of the project that so far, they have not been able to participate in the guidance of the centre. The guidance and the possibility for



talking about what they are doing and accomplishing in a structured way, are important aspects for the development of the centre's philosophy and to expedite the changes necessary to the project.

According to the counsellors, they do not have sufficient competence and capacity to counsel, train and teach the children.

There seems to be a lack of documentation as it pertains to the economic support of the female participants. There is a need for documentation in terms of the volume and progress of the micro-credit systems, as well as for the system paying for the raw materials.

In the current situation in Mogadishu and Somalia, it is questionable as to whether the micro-credit system is having an effect towards the goal of self-reliance. Systems with grants or raw materials seem to be more appropriate.

## 7 Lessons learned

### 7.1 Factors affecting sustainability of the model

According to the founder of the centre in Oslo, the PMV model is sustainable *because* it takes as a point of departure the women's own experiences and interpretations of their situation as well as local knowledge. These are the clue ingredients in the work to finding solutions. The main methodological approaches are imported and adjusted to the local situation, while the content is developed in the centre.

The sustainability of the model depends on a focus on the successes of the centre. The PMV Centre in Mogadishu has developed despite a lack of psychiatric and medical expertise and the necessary medicines. Instead of losing hope because of these shortages, they have, according to the founder of the PMV Workshop in Oslo, managed to focus on the most important aspect – the human resources within the centre. By involving people in each other's activities, they have discovered new possibilities for action.

The local founders and driving force behind the project believe that the project and the expansion of more PMV Centres in Mogadishu and Somalia would be more sustainable if the micro-credit system could be changed. As the situation is in Somalia for the time being, it is claimed that the loans should be exchanged for small grants. The combination of continued and unpredicted outbreaks of civil war, hyperinflation and increased food prices make it difficult to run ordinary businesses and earn enough to both feed the family and repay the loans. Moreover, micro-credits are most often given to groups. When war breaks out, some women may flee which results in the group breaking up. The

responsibility and possibilities to repay are thus changed, and the repayment cycles disturbed. The micro-credit system functions when there is peace, but proved to be more vulnerable in times of war.

From an economic point of view, the system with raw materials that the women repaid seemed to work better than the micro-credits. In this case, the women were able to repay when they sold their items and received the profit for themselves. This system tied the women up until they sold their products. In the first group, two-thirds of the women became self-reliant with this system.

Since basic survival is an important objective for the activities at the PMV Centre in Mogadishu, it has to be taken into consideration as to what type of economical models are the most suitable: micro-credits, grants or raw-materials? The context in relation to the civil war also has to be taken into account.

## 7.2 Expansion of the model

There is obviously a need for more centres like the PMV Centre. This evaluation confirms that the project has made a positive difference and impact both on and for the participants. Through the sharing of experiences, basic learning and working together, most of the women became more competent in handling their difficult life situation and finding solutions within their reach. They became the breadwinners in the family, or had started the first steps to becoming the breadwinners. The project has a positive reputation which is attractive according to the women users.

The local stakeholders are convinced that the model is good for expansion. The model has already been tried out in a farmers' district with good results as it affects the women. External conditions such as drought prevented the desired development, although the women are eager to be able to continue their economical development.

Through the project, the counsellors have learned *how to* help traumatised women to help themselves. Moreover, the counsellors have experienced that it is possible for this group of women to become more self-reliant despite the difficult situation in Mogadishu and Somalia. This is the most important lesson for the

expansion of the model to more centres in Mogadishu and Somalia.

### 7.3 Operational lessons

The intention of including natural helpers or lay persons as volunteers to contribute to the running of the project was difficult to obtain. The expressed explanation was the women participant's poor situation. The women did not have the possibility to work for free, and needed all their time to try to provide for their families' basic needs. This implies that one has to take into consideration that the counsellors and vocational trainers have to be paid.

The counsellors are paraprofessionals and one is recruited from the first group. Since most of the middle class has fled Somalia and the education system is not stable, it is not evident that the counsellors have a satisfying education. It is therefore important that the centre continue to provide additional education and guidance to the counsellors and volunteers. One way is to maintain the good relationship and possibilities for free training and workshops in other NGOs.

According to the acting director, the security situation is the most compelling aspect for the project. This involves the possibility of women coming to the centre, as well as their business opportunities in the markets. Heavy fighting in June forced the staff to flee and the centre to close. The security situation is out of the control of the centre.

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## 8 Conclusions and recommendations

### 8.1 Conclusions

The overall aim of the Dandelion Project is to empower women and children exposed to gender and war related injuries, to help themselves within the context of family and community.

This evaluation confirms that the Dandelion Project as run by the PMV Centre in Mogadishu is successful on the whole. The activities in the project with interlinking psycho-social group counselling, literacy, numerical and vocational training as well as support to establish micro-credit based coops has enabled the women to become more self-reliant. The difficult context in relation to the outbreak of war and fighting has however complicated the women's possibilities of building up stable businesses over time. It has proven that micro-credits are difficult to run in a war torn society.

A main objective in the counselling of women was to improve their ability to concentrate on solution focused thinking. This ability, together with the possibility for further counselling at the centre after the six-month course, seems to be helpful when the women need to reorganise their life and business situation.

The PMV Centre is cooperating and networking with other human and women's rights organisations. These organisations are supplementing and supporting each other's activities. For example, the counsellors at the PMV centre obtain free training at some of the other NGOs. The PMV Centre has worked at having good relations with civil authorities and institutions such as clan elders and chiefs, and this work has paid dividends as the centre has a good reputation.

The Dandelion Project can be regarded as a pilot project, and the capacity has been limited. As the project and methods have proven to be successful, it is imperative that the PMV Centre continue its work. Within this continuation, there is room for improvement and expansion. There is a need for a better economy to enable the securing of more capacity, new activities and the training of the counsellors. There is also a need for considering more effective economic support systems for the women's business activities.

## 8.2 Recommendations

There are two main recommendations. First, the PMV Centre in Mogadishu must obtain sufficient economical support to continue and develop its activities.

Second, more centres should be established in Mogadishu and other districts in Somalia. The centres should build on the experiences of the existing PMV Centre in Mogadishu.

### 8.2.1 Recommendations for the improvement of the Dandelion Project – The PMV Centre in Mogadishu

The ongoing fighting in Mogadishu with thousands of internal refugees, underlines the importance of centres like the PMV. Because of the many war victims, there is a need to increase the capacity of this project.

The recommendations to improve the PMV Centre are divided in two parts. First are listed recommendations from local stakeholders and participants. Second are listed additional recommendations from the evaluation team.

#### **Recommendations from local stakeholders and women users**

The following recommendations are based on the interviews with the *women users*, *the counsellors* and *the project reports*.

There is a need for additional shelter where women victims can live for as long as necessary.

There is a need to improve the project by a follow up of the counsellors and vocational trainers. The counsellors should have

continuous training to improve and develop their teaching ability and skills. There is also a need for training in trauma counselling as long as this expertise does not exist in Somalia. The counsellors also asked for training to treat and teach children, who have been raped, in a proper way.

First aid and health training should be included in the programme in order to enable the women beneficiaries to handle more health related situations themselves. This is by necessity a virtue of living in a society with limited access to medicines, doctors and hospitals.

As part of the consolidation process, there was additionally expressed a need for follow-up courses in cooking, nursing and midwifery.

Most of the women have responsibilities for children and many are single parents. To make it easier for them to participate at the centre, activities for their children were also asked for.

### **Recommendations from the evaluation team**

The PMV Centre should develop its documentation systems. This includes overviews and the volume of the micro-credit systems or alternative economic systems. Furthermore, there is a need for a more systematic and standardised documentation of the participants in addition to the descriptions. To understand the full capacity of the centre, it would be helpful to acquire documentation for the type and volume of women seeking additional counselling after the six-month course. This type of documentation would be valuable for internal ongoing evaluations of the work, for the donor and external evaluators.

All organisations need internal learning to develop. To increase the internal learning at the Centre one could reserve periodic meetings for this purpose. In such meetings the staff could discuss what they do, how they are working, why they are succeeding or failing according to their goals. Other topics could be how to get constructive feed back from the participants and incorporate the useful elements in the training.

The *guidance* meetings with the Norwegian partners should include all the counsellors and any volunteers. Guidance, including training and the possibility for thinking and talking about what they are doing, are most important for the development of the philosophy

and practice as well as necessary changes for the project. Guidance can also help to strengthen the organisation and motivate its employees.

When it comes to the economic concerns, there should be an increase in the budget to be able to include more women and children at the centre. There is capacity, but there is also a need to cover extra direct costs to allow for more participants.

Possibilities should be explored for exchanging the micro-credit system for a grant system and/or a system with raw materials.

### 8.2.2 Recommendation for expansion

The project reports, as well as the assessment of the project from May 2008, recommend the establishment of more centres, and we heartily support this recommendation. As far as we have learned through this evaluation, the methods work in improving the women's situation in a constructive way. Moreover, the methods are meaningful and build on local knowledge and traditions. This implies that local people can be engaged in the new centres and that external experts are not a prerequisite. Besides, the PMV Centre has developed a model for course progression that can be copied and adapted for new PMV Centres in Somalia.

New centres should be organised in a network together with the existing PMV Centre. They should meet on a regular basis to share experiences and further develop their philosophy, counselling and other activities.



# Abbreviations

CCM – Church City Mission (Oslo)

COGWO – Coalition for Grassroots Women Organisations  
(Somalia)

NCA - Norwegian Church Aid

PMV – Primary Health Workshop (Oslo and Mogadishu)

TFG – Transitional Federal Government

## Documents from the project

- (11) Minutes from meeting in Nairobi from July 7th-11th 2008 between PMV Mogadishu and PMV Oslo.
  - (10) Three-year project report (June 2005 – December 2008)
  - (9) Assessment report for psycho-social support project in Mogadishu, Somalia (May 2008)
  - (8) Yearly report (January – December 2007)
  - (7) Report covering the period from January 2007 – July 2007. The fourth cohort.
  - (6) Narrative report of the Dandelion Project covering the period from September 1<sup>st</sup> to December 31<sup>st</sup>.
  - (5) PMV Centre for health, dialogue and development. Report from May to August 2006.
  - (4) Narrative report of the Dandelion Project from January to April 2006.
  - (3) COGWO – Dandelion Project. Progress of activities for the period from June 1<sup>st</sup> 2005 – January 31<sup>st</sup> 2006.
  - (2) PMV Centre for health, dialogue and development. Narrative report from June 1<sup>st</sup> 2005 to January 1<sup>st</sup> 2006.
  - (1) “Life Seeking Help” (April 4 2004).
- Files with documentation of all the participants in the five cohorts.

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## Appendix 1

# Descriptions of the local NGOs cooperating with the PMV Centre

### **COGWO**

The Coalition for Grassroots Women Organizations (COGWO) was founded in January 1996 by a group of Somali women.

At its birth, the coalition started with a membership of 20 organizations and 10 highly reputable individual women activists.

It is composed of 30 non-governmental organisations. The overall goal of the coalition is to economically, socially and politically empower Somali women in order to ensure that women obtain access to their internationally and nationally recognised rights.

COGWO has a vision to unite the various women's efforts in the fields of peace building, conflict resolution, human rights, education, capacity building, experiences, information sharing, networking, HIV/AIDS awareness and the elimination of FGM.

Utilising the wealth, knowledge and experience it obtained during its existence in its field of competence, the network set up a documentation centre in 1998 whose main activity is investigation, the documentation of recordings, monitorisation and advocacy in relation to the cases of violence occurring in Mogadishu and the other three surrounding regions (Middle Shabeelle, Lower Shabeelle and the Hiran region)

After visiting the documentation centre and interviewing some of its personnel including Mrs. Nadia Sufi, the head of the

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department on COGWO activities, and seeing how these activities are interrelated with the PMV Centre, the findings can be summarised as follows:

COGWO previously trained data collectors coming from member organisations in order to collect information in relation to the cases of violence against women that they came across during the work of their respective organisations in the 16 districts of the Banadir region (Mogadishu) and the other three regions. The data collectors reported the cases of violence to the documentation centre.

Once a case is reported to the documentation centre, it is recorded by the data collection unit which then starts an investigation on the case collecting all the necessary data so that it is able to open a file on the victim. Afterwards, the victims of violence are provided with basic medical, nutritional support and counselling.

During the treatment, the victims' condition is monitored on a weekly basis to discover what kind of psycho-social support needs to be given to the victims. I interviewed some war related victims including three rape victims and four domestic violence victims, and all the victims stated that COGWO had investigated and documented their cases and provided them with medical and financial support, in addition to counselling sessions in order to enable them to be reintegrated back into society.

According to the head of the department, the coalition advocated that some victims, whose condition was very critical and could not be treated internally, seek medical treatment abroad. So COGWO achieved success in sending a number of victims to other countries such as the United States of America, Kenya and Uganda.

She further stated that we should go to the hospitals immediately after the fighting to mostly assist the victims of women and children from the minority clans. The medical staff showed us the victims without relatives in the city who needed assistance, as the centre cannot assist all victims and must select the most serious cases and request that the hospital pay 50% of the medical service, while the remaining 50% is paid by COGWO. All hospitals are private and have to be paid except for SOS which is sponsored by international organisations and Amison's "African Contingency Hospital".

## SAACID

SAACID is reputedly a non-governmental organization involved in a wide range of activities including women's development, humanitarian aid and health services for vulnerable people in addition to education and human rights.

Ten years ago, SAACID undertook a credit initiative by giving loans to women to start small-scale business.

When the PMV Centre started to lend money to victims of violence, it requested SAACID's advice on how to deal with this new credit programme. After having various meetings with some of the SAACID staff, the PMV Centre benefitted from SAACID's experience on the best way to proceed with their credit scheme.

The advice that SAACID gave to the PMV Centre is the following:

1. Those eligible to receive a loan to start a small-scale business are:
  - a) Female victims of violence;
  - b) Women who took part and completed the PMV Centre's six-month training course; and
  - c) Women who coped with the trauma caused by the violence and want to change their life for the better.
2. Every group forms a cell composed of five persons.
3. Each group will select its own leader.
4. The group leader is responsible for collecting the money to be repaid from amongst the women forming the cell.
5. The project will coordinate, monitor and understand how they are sharing the profit in order to avoid meeting with any type of failure.
6. Set up a register for all participants and issue a card for each woman to write the name of the producer, the quantity of the items produced, and the amount of money sold per item without interest.
7. The amount saved will be loaned to the second group after their learning process is complete with borrowing rights being passed to each person in turn. The cycle continues so long as repayments are maintained at the agreed rate or better and when the second group is still in the learning

process, the first trainees will normally employ their borrowing system.

8. The project staff will then conduct a daily inspection concerning the impact of the beneficiaries' attitude at their workplace, examining the wide network of their relationships and looking deeply into the sort of items they are selling.
9. Failure to meet the repayment schedule is penalised by a denial of access to the next round of loan entitlements.
10. The average repayment period per loan is one year.

## Appendix 2

### Work description

#### **Evaluation of the Dandelion Project, Mogadishu, Somalia**

*Commissioning body:* Primærmedisinsk Verksted, Church City Mission Oslo (PMV, SKBO)

*Implementing partner:* Norwegian Institute of Urban and Regional Research

#### **Background**

The Dandelion Project was jointly established by the PMV Centre in Oslo and the COGWO Centre (Coalition for Grassroots Women Organization) in Mogadishu in September 2005. The project has been funded by the Church City Mission (SKBO), the parent organization of PMV Oslo, with funds from the 2004 *TV-aksjonen* and in a technical cooperative arrangement with the Norwegian Church Aid (NCA), who has channelled funds to Mogadishu and served as an administrative management partner.

Since the Dandelion Project is approaching the end of its funding term (through 2008), a project report is requested by the 2004 *TV-aksjonen*. Meanwhile, the NCA has expressed an interest/willingness to secure the project's continued operation by incorporating it amongst its ongoing aid and development efforts in Somalia. Prior to a transfer of the project, however, the NCA has requested that the Dandelion Project be evaluated by an external agency. The NCA requires the evaluation to be concluded in the first half of 2009, i.e. by the end of June 2009. PMV/SKBO requested the assistance of the Norwegian Institute of Urban and Regional Research (NIBR) in conducting a systematic evaluation



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of the Dandelion project. This report may be useful as a final summary of the project for *TV-aksjonen*, the Church City Mission and for the NCA.

### **Main objectives**

The main objectives of the evaluation are to:

- Determine as much as possible whether the programme is accomplishing what it has set out to achieve. That is, that the women users throughout the project are empowered to improve their mental health and to tackle/improve their daily practical life.
- Give a broad overview of the participants'/users' age, socioeconomic status, geographic/clan affiliation (or indicators thereof), number of children, and marital status (married, widowed, separated, divorced) so far as the data are available from the centre or from COGWO in an anonymous form.
- Identify, through comparison with the original PMV model and methods, similarities and points of departure and to describe the rationale involved in modifications made to the PMV model. Interview the original stakeholders in Oslo and in Mogadishu such as Arild Aambø, Ayan Yasiin(Oslo), Mariam Yusuf, Mohammed A Saleh and other consultants at the centre in Mogadishu about their methods, activities and results and counselling; Counselling from the Norwegian partners to the project leaders in Mogadishu; Counselling locally in Mogadishu; Analysis of documents.
- Describe and assess the Dandelion Project's relationship to, and integration with, other relevant civil society organisations locally and regionally. Interviews with project leaders of COGWO and SAACID and other local NGOs if feasible through Stig Jarle Hansen's encounters in Nairobi and Mogadishu.
- Assess the Dandelion Projects' strengths and weaknesses with a particular emphasis on the review of the project's methods, civil society integration, management and financial arrangements, as well as the sustainability of these arrangements (see above). Financial arrangements: NIBR has to get an overview of the financing of the project itself and

the micro-credit activities. Yearly budget plans and rough accounts. NIBR will not conduct a financial audit of the project.

- Make recommendations for strengthening the Dandelion Project. This will be based on an analysis of the above points.
- Consider the Dandelion Project in Mogadishu as a model for expansion to other districts in Somalia. These considerations have to rely on the character of the “success” of the project so far, and on recommendations emphasised by the local stakeholders who have knowledge of the actual situation in the country.
- Assess, if possible, project participants’ perspectives on the operations and impact of enrolment in project activities. This will be highlighted through interviews with the project leaders or other consultants at the centre, or by knowledge from other NGOs.

### **Methods and material**

In the main, the evaluation will then have to rely on the following materials and methods:

1. Review of available reports, including an assessment of the reliability of these reports and their scope relative to evaluation objectives. PMV Oslo has to provide the necessary reports, if possible via e-mail.
2. Identification and analysis of available data recorded by the project, including data on participants’ background and trajectories, recruitment records, activities, content, descriptions, and course participation records. If available, video recordings and narrative descriptions of the programme contents and processes should be included in this material. This method is limited to the material provided by the PMV in Mogadishu for the evaluation team.
3. Interviews with project leaders, stakeholders and representatives of other, adjacent NGOs.

As much as possible, the analysis of available records should include the identification of possible, *indirect quality indicators*. Interviews with project leaders and stakeholders, including COGWO staff and staff from PMV in Oslo, may provide valuable input to the identification of such indicators.



PMV Centre for Health Dialogue and Development

Project Name : Dandelion Project

Three-month budget from February to April 2009

Description	Unit	Unit Cost	Total	
<b>A) Administration</b>				
a- Rent	3 months	\$500	\$1,500	
b- Electricity	"	\$200	\$600	
c- Tel., Post, E-mail	"	\$200	\$600	
d- Running water	"	\$100	\$300	
e- Cleaning materials	"	\$50	\$150	
f- First aid	"	\$200	\$600	
<b>Sub-Total</b>		<b>\$1,250</b>	<b>\$3,750</b>	
<b>B) Expenses</b>				
<b>Salaries</b>				
Project Coordinator	3 months	\$700	\$2,100	
Project Manager	"	\$600	\$1,800	
Project Accountant	"	\$600	\$1,800	
Credit Person	"	\$400	\$1,200	
2 guards	"	\$500	\$1,500	
Cleaner	"	\$150	\$450	
<b>Sub-Total</b>		<b>\$2,950</b>	<b>\$8,850</b>	
<b>Activities</b>				
Transportation	3 months			
20p X USD 4 X 12 days	"	\$960	\$2,880	
Refreshments				
20p X USD 3 X 12 days	"	\$720	\$2,160	
Stationery		\$100	\$300	
<b>Vocational training</b>	3 months			
3p X USD100 X 12 days	"	\$600	\$1,200	
Materials	"	\$300	\$600	
<b>Monthly workshop</b>	3 months			
Transportation	"			
40p X USD 4 X 2days		\$320	\$960	
Refreshments	"			
40p X USD3 X 2days		\$240	\$720	
<b>Sub-Total</b>		<b>\$3,240</b>	<b>\$8,820</b>	
<b>Grand Total</b>			<b>\$21,420</b>	