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UNITED WOMEN OF EAST AFRICA: A LEGACY OF STRENGTH, HOPE AND UNITY

**A Case Study demonstrating of the effectiveness of
place-based practice**

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CONTEXT AND SETTING

The City Heights neighborhood of San Diego became a destination for refugees after the collapse of the South Vietnamese government in the mid to late 1970's. Thousands of refugees from that conflict were brought to Camp Pendleton and many of those families were resettled in City Heights. As these families were being resettled, a network of social service agencies with programs supporting these families was also built. Low rents and an existing network of services made the neighborhood a primary resettlement area at that time. The Somali government collapsed in 1991 leading to a flow of refugees coming to City Heights and by 2005 nearly 8,000 refugees had been resettled into this community of 70,000 people. As will be seen, these families were resettled in a neighborhood rife with crime, substandard housing, poorly performing schools and over-policing. After a long journey fraught with danger, these families, having finally gotten their children out of harm's way, found themselves facing a new set of challenges. The challenge was not how to simply survive, but how to thrive in this new environment. United Women of East Africa grew out of the community's efforts to face this new set of challenges.

The challenges faced by these families extend far beyond that of learning the language. After years, and sometimes decades,¹ in a refugee camp, a family is told where they are going and is resettled within two weeks. Most come speaking little to no English and have a limited understanding of US culture, a culture that is often vastly different from theirs. Additionally, many have had limited experience interacting with institutions such as County Health and Human Services, educational institutions, banks, etc. The family's transition is overseen by a resettlement agency that has the responsibility of getting the family settled in its new home. They find housing, arrange for the children to get registered for school, sign people up for public benefits, get people into English language classes, assist them in finding employment, etc. As important as these services are to the families' survival there is a significant gap between what is provided for survival and what is needed to thrive. United Women of East Africa fill that gap.

Understanding the importance of United Women of East Africa and the place they have created requires understanding the community landscape in which they were formed and now operate. If you think of the community as a garden, you can imagine layers. On top, the soil is soft and easy to work with. However, as you dig more deeply the soil changes and eventually you reach the Clay Line. The soil at that point is like cement and very difficult to work with. It is there that most people stop the digging. The layers in the community are:

- **Layer 1 (Top):** Large institutions that have investments in the community but are not part of the community - colleges, universities, hospitals, large foundations, some federal and state programs, etc.
- **Layer 2:** Local county and municipal government, some foundations, and some state and federal programs, etc.
- **Layer 3:** Nonprofit agencies that have programs in the community. These organizations are typically referred to as "community-based organizations".

¹ The most quoted figure is that a person spends an average of 17 years in a refugee camp. This number is often questioned, in part, because it is very difficult to actually know given the complexity and fluidity of the situations. According to numbers reported on the World Bank website, the Somali government collapsed in 1991 and in 2015 there were over 400,000 Somali refugees, yet not all have been there since that time and the actual average is difficult to assess.

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- **Layer 4 (Bottom):** Community-owned, community-run organizations as well as the unorganized members of the community. It is a broad band in that ranges from relatively large, stable organizations to small, unfunded community efforts and activities. This layer also includes those residents who live below the Clay Line.

The people living below the Clay Line are essentially those whose present situation and status in society present significant barriers to their access to resources and their engagement in the public dialogue, e.g., people living near or below the federal poverty line, people who are disabled, immigrants, people who are undocumented, refugees, victims of domestic violence, etc.

If you apply this metaphor to the refugee community you see that United Women of East Africa operates at Layer Four. The US Department of State is Layer One. They decide who will be admitted to the United States, where they will go and what agencies will be responsible for their resettlement. Once those decisions are made, the fate of the refugee is placed in the hands of the State and County Governments (Layer Two) and the Resettlement Agencies (Layer Three) that provide for the family's material needs with the services described above. It is groups like United Women of East Africa that operate below the Clay Line and reach out to new arrivals, welcoming them into the community and assisting them with their social and psychological needs. The Resettlement Agencies provide for basic material needs, but it is organizations such as the United Women of East Africa that build the environment where the community and its children can thrive

The story being told in this case study begins with a small group of courageous, creative and committed women who create a home for the East African Community – a village where the Community can thrive. From that home, they have had a significant impact on their community as well as on the broader community. It is the story of United Women of East Africa. While its official founding came in 2008, the seeds for the group's development began years earlier when Social Advocates for Youth (SAY-San Diego) and the City Heights Wellness Center operated by Scripps-Mercy and Rady Children's Hospitals each hired a part-time Family Support Worker/Cultural Liaison from the Somali community to engage and support these newly arriving refugees from Africa, Sahra Abdi. Her efforts began by creating a space for refugee women to come together, connect and begin to have conversations about their lives in the United States. These conversations served both to create a bond among the women who were having the conversations and to identify the issues of most concern to them and their families. Those conversations planted the seeds from which United Women of East Africa grew.

This case study attempts to capture the story of the formation of the United Women of East Africa from its inception through the eyes of the women who created it. It is an important story because it is an exemplar of a place-based effort that, in spite of many challenges, has flourished. Importantly, it has flourished largely because it *is* a place-based effort that is fully owned by the community that created it. The case study will examine what brought these women together, what challenges they faced and how they overcame them. It will examine the group's journey toward and success at creating a unique and powerful place with the goal of identifying what contributed to its success. It will also look at where it is now, where it hopes to go, what lessons have been learned, how those lessons can impact the future actions of the group, and what might be threats to its continued success.

The California Endowment's Building Healthy Communities Initiative (BHC) stands on the idea that it is by working on a local scale that change happens at a broader level and that it is by reshaping "the places that shape us – our neighborhoods"² that we create healthy communities that are

² The California Endowment (Spring 2016). A new power grid: Building healthy communities at year 5. www.calendow.org

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knowledgeable, organized and engaged in the public dialogue. It is when the diverse voices of the neighborhoods are brought into the public dialogue in an organized fashion that real change happens. The United Women of East Africa have created a way for the East African Community to be part of that public dialogue.

The Founders and What They Were Responding To

In 2012 United Women of East Africa played a leadership role in a Participatory Action Research project that had them develop a survey and talk with over 220 East African women about their access to healthcare.³ The participants in this study provide the best demographic picture of the community in which the founders of United Women of East Africa are embedded. It is not possible to say how representative the sample was of the East African community in general as a convenience sampling technique was used. However, because a convenience sampling method was used, it is likely that the participants in the study are representative of the network that the women of United Women of East Africa are part of. The women in their network come mostly from Somalia, but include women from Ethiopia, Eritrea and other African Countries. Nearly 80% of them speak little to no English, yet many (over 40%) speak two or more languages. Their mean age is between 36 and 40 years with two-thirds being between the ages of 30 and 60. Just over 40% of the participants arrived in the United States before 2000. Eighty-three percent of the women have children with the number ranging from one to ten. The mean and median family size includes four children.

The City Heights Neighborhood of San Diego (approximately 80,000 residents) is unique in its amazing diversity. Up until the 1960s it was a European-American, working class neighborhood of bungalow-type, single family, homes and a thriving commercial center. Today, it is the most densely populated neighborhood in the city where approximately two-thirds of the residents do not speak English in their homes and just over half were born in another county. Of those who do not speak English at home, about half are immigrants/refugees from Mexico, Central or South America. The other half are mostly refugees from Southeast Asia, Africa, Indochina, and the Middle East, representing twenty or more countries.

The nature of the community began to change in the late 1960s and 1970s. Mission Valley malls replaced the commercial center and a change in the City Plan brought multi-unit apartment complexes to the community, densifying the population. In the 1980s the state split the neighborhood with Interstate 15, taking the homes of approximately 4,000 residents.⁴ Changes in the economy and the built environment also brought change to the quality of life in City Heights. By the 1990s City Heights was considered the least desirable neighborhood in the City of San Diego. In 1993 the City Heights Business Improvement Association came within twenty-four of putting up billboards with the message, "*Welcome to City Heights. San Diego's Crime Capital. Won't Anybody Help Us?*"⁵ In 1998 a San Diego Police Captain referred to City Heights as the "rotting core of 'America's finest City,'" because, as reported by the Union Tribune, "Violent crime occurs at twice the citywide rate. One in three of the city's search warrants are served here. Gangs and drugs abound; street dealers come home to City Heights to sleep."⁶

³ Oswald, W. et al. (2012). Barriers to quality healthcare for East African families as identified by East African women. This study can be downloaded from www.theglobalarc.org.

⁴ Bliesner, Jim (2013). 1-15 in *City Heights: How a Freeway that Divided the Community Became an Urban Monument to Citizen Activism*. San Diego Free Press – August 22, 2013

⁵ Moran, Greg (1993). Crime-billboards plan is opposed in City Heights. *San Diego Union-Tribune* - Thursday, June 3, 1993

⁶ Morgan, Neal (1998). City Heights: Starting over to get a life, save a city. *San Diego Union-Tribune* - Sunday, May 24, 1998

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At the same time, these changes in the economy and built environment are occurring, the City Heights Neighborhood was also being transformed into a center for the resettlement of refugees. As stated earlier, the collapse of the South Vietnamese government brought as many as 20,000 refugees to Camp Pendleton with thousands of them being resettled in City Heights. With the influx of these refugees came a full array of social service agencies designed to meet the needs of the newly arrived. Once this infrastructure was developed, City Heights became the place where refugees were resettled. In fact, California is third in the nation for resettling refugees and over the past three decades nearly half (42%) of those refugees have been resettled in San Diego – more than any other county in the state. Over 35,000 refugees have been resettled in San Diego County since 1995. Of these, 21% (7,400) are from East African Countries – 69% of whom come from Somalia.⁷ San Diego is home to the second largest Somali community in the country.

This story begins with the influx of refugees from Somalia into City Heights. These families arrived into the neighborhood described above where it was unsafe, much of the housing stock, while inexpensive, was old, dilapidated and unhealthy. The streets had little to no lighting, the schools were the lowest performing in the district and their children reported needing to fight their way through Colina Park (a large City Park) each day going to and from the middle or high school. A series of tragic events involving youth shook the community deeply. A suicide by one youth, a drive-by shooting with a Somali youth injuring a Somali man, increased gang involvement by youth, etc. were the most blatant examples of their children's struggle to assimilate and succeed in the United States. In general, too many youth were not doing well in school and the number of youth getting caught in the Juvenile Justice system was on the rise. It was concern for their children as they faced the challenges of adapting to life in the United States that brought the founders of United Women of East Africa together with the single focus of making life better for their children.

What Has Been Accomplished

The small, and sometimes intimate, conversations that began around cooking classes and sewing circles in the early days were the seeds that gave birth to United Women of East Africa. In the years since those conversations began the group has flourished as seen by the fifteen programs created and the important policy successes such as a “women-girls only” time at the YMCA so that Muslim women and girls can comfortably use the pool, a commitment from the school district to provide quality and culturally appropriate food in the schools (halal meals everyday) and to provide interpretation and translation in the major East African languages within the community. While the above accomplishments are extremely important to the community's health and well-being, their greatest accomplishment, *in their eyes*, is the establishment of a home for the community at the East African Cultural and Community Center (EACCC). The women created something larger than their organization. They created a village, a place that became the center of the East African community. It is impossible to underestimate the power of place when telling this story. The EACCC has become the place where members of the East African community come to get their questions answered and help navigating the US system. It is the place people come together to provide mutual support, to celebrate a marriage, to mourn a death, to celebrate accomplishments, to take action on an issue, etc. To Fatima Ahmed it is an investment in their youth, a place that provides youth with the opportunity to improve life. There are tutors, mentoring and teaching concern for community.

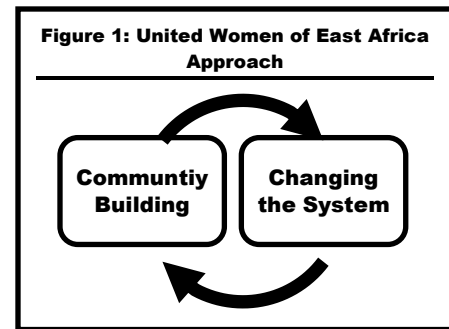
⁷ Numbers taken from: Total Arrivals to California Counties by Country of Origin October 1, 1994 through September 30, 2015 - Prepared by: California Department of Social Services-Refugee Programs Bureau

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A safe place for youth to grow up surrounded by their language, culture and religion.⁸ Layla Ali describes it as the place where kids get connected to their community. “They see people with the same dress and culture.” A place where they are “surrounded by role models,” who “reinforce the culture and strengthen the language.” For Asha Mohamed, the EACCC not only created a cohesiveness within the community, but it is also a safe place for women to be educated about their health.

Successful organizing in a community facing the challenges that this community faces require both community building and advocating for system change. It is also important that the two are linked and mutually supportive (illustrated in Figure 1).

Community Building means helping people deal with immediate issues, bringing them into a mutual support network, gaining access to resources when they exist and creating new ones when they don't. What makes United Women of East Africa truly unique is not the services it provides as much as how the work is done and who does it. United Women of East Africa is a community of equals where every member is expected to contribute what they can. While there are few formal contracts, there is a general understanding that “we are all in this together, and only by working together can we improve our quality of life.” As Amina Sheik Mohamed pointed out, “you can't tell who is paid and who is a volunteer.”



Successful organizing also requires working within the natural rhythms of people's lives and creating the place and space for people to come together. As the community interacts within this space, issues arise out of their conversations. These issues are the community's highest priorities and any effort to advocate for system change starts with these priorities. The community building work creates the conditions under which people are willing and able to speak to the truth of their condition and begin to build the foundation for organizing efforts that provide the vehicle for mobilizing people for social change. As people become actors on the wider stage, the learning that takes place is brought back to the community where it strengthens the community and its members by developing a collective understanding of why these conditions exist and what must be done to change them. Khadija Mussa credits her involvement in United Women of East Africa as helping her find her voice. Asha Mohamed described being able to see their power develop “before our eyes” by not accepting “no” for an answer and continuing to push back until they broke through barriers. Khadra Aden speaks of how her confidence was built step-by-step as she could see her own contribution to the group's success. It was a place where she belonged and was no longer intimidated by those who stand in their way, saying clearly “we will continue to serve.”

What the United Women of East Africa has created is a “Free Space.” Free Spaces “are the environments in which people are able to learn a new self-respect, and values of cooperation and civic virtue. Put simply, free spaces are settings between private lives and large-scale institutions where ordinary citizens can act with dignity, independence, and vision. These are, in the main, voluntary forms of association with a relatively open and participatory character . . . grounded in fabric of community life.”⁹ Evans and Boyte's work examines how disenfranchised and marginalized communities are able to reconstruct images of themselves as powerful actors

⁸ Many of the statements attributed to the women are not in quotations because the interview was conducted through an interpreter. Some women were fluent in English and all women spoke some English and quotations mean their actual words were used.

⁹ Evans, S.M., and Boyte, H.C. (1986). Free Space: The Sources of Democratic Change in America. NY: Harper and Row, Publishers. (pp.17-18)

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in their environment and, from that reconstruction, begin to organize and take action. They conclude that the empowerment of the community and the sparking of social change movements begin in these free spaces. “Democratic action depends on these free spaces, where people experience a schooling in citizenship and learn a vision of common good in the course of struggling for change.” (p.18) The early union movement started with workers creating such spaces. The churches within the African-American community provided such spaces and were critical to the development of the Civil Rights movement and its leaders. The modern women’s movement was born out of such spaces where women could openly share their experience with the patriarchal limits placed on their lives.

United Women of East Africa created such a space for East African women refugees. They understood that for a “well-developed consciousness of broader community and generalized, active citizenship to emerge requires ways for people to build direct, face-to-face and egalitarian relationships, beyond their immediate circles of friends and smaller communities.” (p. 191). An interim report to the California Endowment by the City Heights Wellness Center highlights this issue by recognizing that a challenge to their organizing “is overcoming the cultural bias of convincing East African women of the vitality and importance of their voice. The process of sharing their voice with outside community members and decision-makers is new and foreign to them.”¹⁰

The power of the free space created is perhaps best described by Miriam Adam, who began coming to the EACCC when she was fourteen. Now in her third year at the University of San Diego, she describes it as “a place to see people like you. A place where displaced people can go where they are not other.” She went on to talk about how, if she went to Africa, she wouldn’t be seen as “African” and people here don’t see her as “American.” At the EACCC, she can be herself and take advantage of the opportunities offered. It is a place where she has role models that look like her and share her culture and values. Miriam was also clear that she could not have achieved what she has without the EACCC and the support of United Women of East Africa and its programs.

Since their founding in 2008, United Women of East Africa has moved from under Scripps-Mercy and Radys Children’s Hospital to become independent and widely recognized as a voice for East African women and families. As noted above, their work involves both community building and changing the system. Specific accomplishments include:

Community Building:

- Created a community – a place where people know they belong –where they are not “other.” A place that connects people and builds a mutual self-help network. A village.
- Created a safe place for their children where community members trust them to be cared for and for their values to be reinforced. A place where the children and youth are immersed in their culture – where the role models look like them and share their values – where they are provided with opportunities for growth and development.
- Provided education to healthcare providers on how to best respond to the overlooked needs of East African Women and Families.

¹⁰ Taken from City Heights Wellness Center Interim Grant Report (#200820090) – Fall 2009

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- Collaborated with City Heights Wellness Center by overseeing the Hooyo Health Program (Hooyo is “Mothers” in Somali)
- Collaborated with Voices of Women (VOW) to provide a wide array of training on topics requested by the community, e.g., interviewing skills, networking, leadership, public speaking, resume development, assertiveness, mentoring, cultural communication, etc.
- Partnered with Project Concern International’s (now Positive Community Impact) Family Health Navigator Resource Project by collaborating on training, monitoring and evaluation.
- As part of a three-year grant from the California Wellness Foundation, interviewed fifty East African refugee women regarding mental health issues and needs. These data are now being used to inform the development and implementation programs to address the issues raised in the research.
- Partnered with San Diego State University/University of San Diego Cancer Center to develop culturally relevant educational material for and do outreach to East African women and their families.
- Worked with Point Loma Nazarene University, developed a cultural guide to enhance the understanding of the struggles faced by refugees as they adjust to life in the US.
- Organized classes for parents on stress management, discipline and communication with their children.
- Organized youth peer groups focused on improved communication with parents, how to live within two cultures, anger management, etc.
- Developed and implemented a pilot summer youth program focused on strengthening the youth’s academic skills and the relationship between parents and children by teaching the youth about their culture, their home country, their religion, etc. The program was so successful that it has been expanded to a year-round afterschool program serving over seventy youth.

Changing the System:

- Conducted a Participatory Action Research study on access to healthcare for East African families involving over 220 families.
- Negotiated an arrangement with the local YMCA to have exclusive access to the facility for two hours a week so that Muslim women and girls can access the pool and other equipment.
- Play a leadership role in campaigns for increased access to healthcare and improved school meals. The school meal campaign has resulted in an increase in locally grown, organic fruits and vegetables and halal meals each day of the week.
- Organized a group of Middle and High school girls to advocate for greater access to organized sports and recreation for Muslim girls. This group designed a Participatory Action Research study to guide their campaign planning on the issue.

The following pages tell the story of these women through their eyes. It will show how these women took hold of the Drivers of Change and used them to become knowledgeable, organized and engaged. It will also show how, once organized, how they used that energy to formulate

their Authentic Demands, take action and have an impact on people's quality of life on both the individual and community level.

FRAMEWORK FOR ANALYSIS

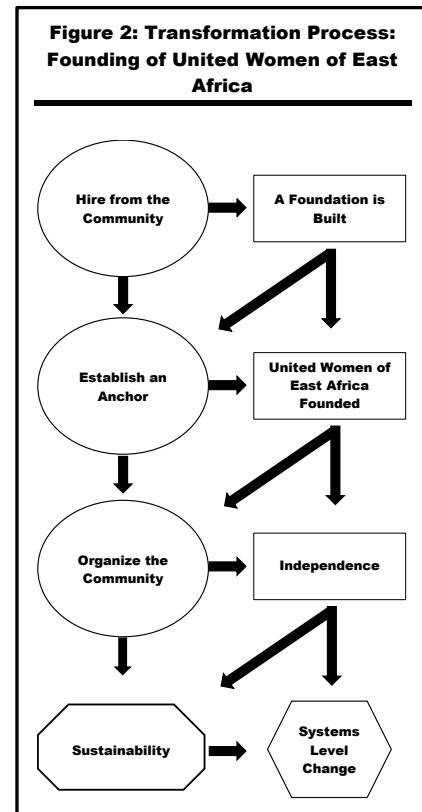
United Women of East Africa, as an exemplar of place-based practice, provides an opportunity to learn much about the process of building an organization from the bottom-up. The following analysis examines the organization's development from the preconditions that led to its formation to its establishment as a unique and respected 501(c)3, nonprofit organization serving the East African community in San Diego.

This analysis is rooted in the idea that the birth of an organization such as United Women of East Africa emerges out of a response to environmental conditions and evolves and adapts as it faces those conditions. As the Theory of Change that follows suggests, whether these preconditions lead to a sustained and sustainable effort depends on how it is nurtured in its early stages.

In order to examine this dynamic evolutionary process, the analysis begins by capturing the story of the group's founding as told by the women who founded it. From the narrative created, the analysis focuses on *critical incidents* identified in the narrative. A critical incident is operationally defined as a decision or incident (or a set of decisions and/or incidents) that alters the organization's forward motion, positively or negatively. The developmental process is a chain of change where each incident leads to the next. When a critical incident occurs that changes the organization's developmental path it also creates an opportunity for further evolution. The outcome of each critical incident creates the conditions for the next step in the organization's evolution as the outcome of each critical incident feeds the outcome of the next. Critical incidents can be planned or unexpected.

The analysis presented here (illustrated in Figure 2) focuses on three critical incidents and how the outcomes of those incidents moved the organization to its next stage of development. These critical incidents are:

1. Hiring a person from within the community. Hiring a respected member of the community to be the liaison with the social service system¹¹, allowed the women to come together in ways that were consistent with their culture and created a bond among them as East African women. It was the bonding that provided the foundation upon which United Women of East Africa would be built.
2. Establishing an anchor in the community. The decision to have a full-time staff in one location that would continue to build the bridge between the social service sector and the



¹¹ The term "social service sector" includes the healthcare system

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East African Community provided a place for the women to gather, to learn how the U.S. system works, to share their culture with the social service sector and, most importantly, deepen their bond with each other. It was within this space that the women gave birth to United Women of East Africa.

3. Organizing the community. As the women became clearer in articulating their needs to the social service system, limits in that system's ability to meet those needs became more evident. The women adapted to these limitations by creating their own programs and becoming actors/leaders in the community by bringing issues such as access to healthcare, improving the quality of school meals, closing the gap in educational outcomes, etc. into the public dialogue. The formation of United Women of East Africa as an organization gave them the confidence to become an independent organization that could stand on its own.

The last part of this chain is Sustainability which leads to the outcome of bringing about system level change. This link in the chain of change, though not a critical incident, relates to the future of United Women of East Africa. This analysis examines the opportunities and threats facing the organization in its effort to be sustainable and continue to push for system level change.

As stated above, United Women of East Africa is viewed as emerging in response to the environmental conditions these women faced. Knowing that not all such efforts are successful, the Theory of Change presented here attempts to show what factors nurtured the group, how the group was able to build on those factors and what the challenges to their sustainability are in the future.

Theory of Change: Building Healthy Communities from the Bottom-Up

The story of United Women of East Africa cannot be told without talking about the California Endowment's Building Healthy Communities Initiative (BHC). The women in this case study brought the intelligence, creativity, motivation and energy that created United Women of East Africa while the Endowment provided resources and trust, trust that these women could achieve ***their vision in their way*** if they had the resources. The Endowment's assessment at the half-way mark of its ten-year commitment to the BHC states, "Building Healthy Communities has a simple strategy: work on a local scale to create broad, statewide impact. Where we live, our race, and our income each play a big part in how well and how long we live. We need to reshape the places that shape us—our neighborhoods."¹² United Women of East Africa is an exemplar of this strategy.

At the very root of the BHC's approach is the importance of place. Stripped to its most basic, the Theory of Change begins with the knowledge that people adapt to their environment and changes in the environment lead to changes in behavior. Healthy communities tend to produce healthy people while unhealthy communities tend to produce unhealthy people. Zip code is a better predictor of longevity than DNA. Starting from this simple fact, a place-based approach shifts the focus of interventions from the individual to his/her environment. Where an individual-based approach to reducing obesity might focus on educating people about the importance of exercise and how to exercise, a place-based approach focuses on creating access to the means to exercise, e.g., walkable streets, clean and safe parks, accessible recreational facilities, etc. Once the means are accessible, people naturally begin to take advantage of them.

¹² The California Endowment (Spring 2016). A new power grid: Building healthy communities at year 5. www.calendow.org

A key component to successful place-based work is resident leadership. Understanding that

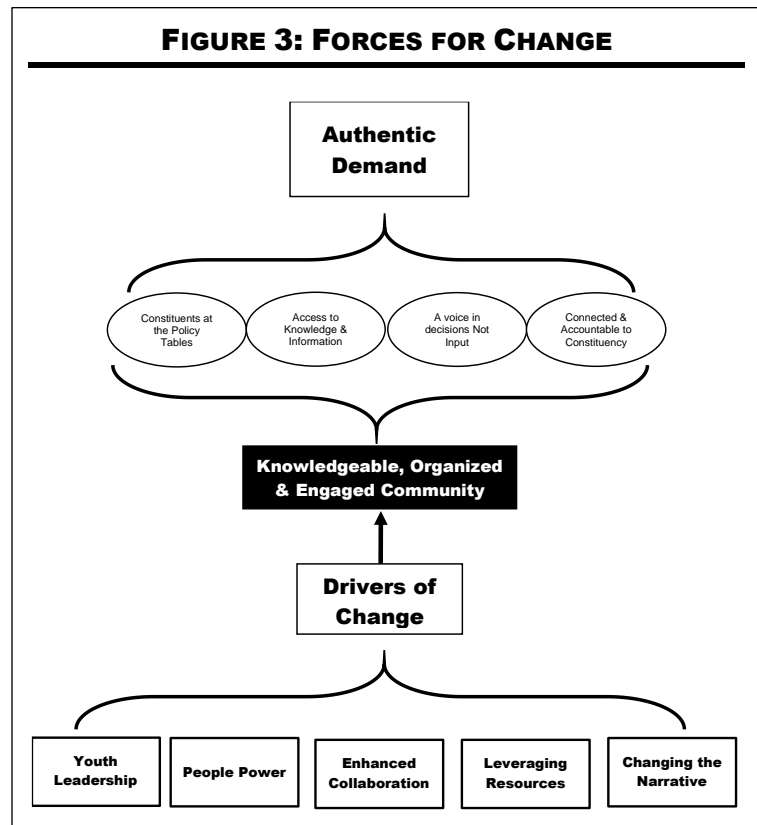
The specific factors that are most important and the strategic approaches for enabling healthy communities vary, but there are some time-tested truths . . . ***local residents have significant insight into what problems are most critical to address, what community strengths can be used to improve the health and community conditions, and what strategies and solutions will be most effective.***¹³

A review of several community initiatives concluded that, in most cases, success was the result of “people from the community taking action, rather than waiting for an expert solution or a top-down government or foundation program” (p. 49).

The Theory of Change operating here points to the Drivers of Change as necessary to create the conditions for a community to become knowledgeable, organized and engaged. Once a community has achieved that, it can bring Authentic Demands onto the system. It is through the process of harnessing the energy generated by the Drivers of Change and by bringing Authentic Demands that the community finds its voice and is able to articulate what it sees as highest in priority, the best way to achieve the desired outcomes and what community knowledge and expertise it can bring to the process through its organizations.

Through its efforts, the Endowment has identified five such drivers and has made them the focus of their investments through the BHC. “One of the hallmarks of Building Healthy Communities is our focus on how community transformation is achieved—what we call **Drivers of Change** — rather than a focus on narrowly determined outcomes and a range of pre-determined strategies for getting there.”¹⁴

These Drivers include: People Power, Youth Leadership Development, Enhanced Collaboration and Policy Innovation, Leveraging Partnerships and Resources, and Changing the Narrative. Together, these Drivers create the conditions that make bringing about change possible. As Figure 3 illustrates, the Drivers of Change create the conditions that make developing a knowledgeable, organized and engaged community possible. “Organized” being the key word here. It is being organized that allows the community to harness the energy generated by the Drivers of Change that gives the community its power. Knowledgeable residents acting as individuals, even when they are



¹³ Bell, J. Rubin, V. (2007). Why place matters: Building a movement for healthy communities. To download a pdf of this guide, please visit Policy Link: www.policylink.org

¹⁴ Taken from: Drivers of Change March 4, 2015 at <http://www.calendow.org/report/drivers-of-change/>

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engaged, are limited in the degree of change they can bring about. Knowledgeable individuals who are organized and engaged wield much more power and can bring enormous change to a community.

Once the Drivers of Change are operating there is potential for becoming organized. This potential must be enlivened by some catalyst that capitalizes on these Drivers and brings the community together so that collective action can be taken. The Drivers of Change are like gas flowing on a stove. While it creates the fuel for the fire, it takes a spark – a catalyst to create the fire, i.e., the formation of a group of organized and knowledgeable residents ready to become engaged in the public dialogue. Once the residents are knowledgeable, organized and engaged they have the capacity to bring **Authentic Demands** to the system. For the demands to be “authentic” the residents must be sitting at the policy-making tables, have access to the same knowledge and information as others at the table, have a real voice in the outcome – not just input, and these residents must be connected and accountable to an organized constituency.¹⁵

Authentic Demands define the community’s concerns and interests in specific and actionable terms. For example, the desire for their children to eat healthier becomes the basis of a campaign by organized parents to have the school district increase the amount of locally grown, organic fruits and vegetables served in school meals.

This case study follows the evolution of United Women of East Africa from their inception. It demonstrates how the Drivers of Change made the formation of this group possible. It also demonstrates how, once given control over their agenda, the organization blossomed. It was able to formulate its Authentic Demands and develop strategies for achieving their goals. Importantly, the Drivers of Change need to be ever-present. They are critical, not just to the formation of an organized community, but they are also critical to the maintenance and effectiveness of a community that is bringing its Authentic Demands to the policy-table.

An underlying belief in the BHC is that “Community organizing can build local leadership and create political power to leverage funds and other resources into the neighborhood” (p. 31). These “local leaders, connected with those at the regional and state levels, will create the power and momentum to pull the ultimate levers for sustainable change at the local, state, and national levels.” The women in this case study have harnessed the energy created by the Drivers of Change to create United Women of East Africa, i.e., the catalyst. Now, having become knowledgeable and organized, they focus that energy on their Authentic Demand to increase the health and well-being of their children and their community by both program development and by advocating for policy changes at the local, regional, and state levels.

The Chain of Change

The hiring of a respected member of the community to serve as the bridge between the community and social service sector is the first critical incident because it is the act that began the process that resulted in the founding of United Women of East Africa. The purpose for hiring a liaison with the community was to create a portal through which the community could begin to access the services available to them within the social service sector. Hiring someone from the community, however, resulted in more than a portal. It created a kind of double-gateway that allowed knowledge and information flow in both directions. The double-gateway not only educated the East African community about the services available to them, it also

¹⁵ The definition of Authentic Demand is taken from: Nilofer Ahsan (2008). Sustaining Neighborhood Change: The power of resident leadership; social networks, and community mobilization. To download a pdf of this guide, please visit www.aecf.org/mcguides.aspx. ©2008, The Annie E. Casey Foundation, Baltimore, Maryland

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provided an opportunity for the community to educate the social service sector about the East African community. As the analysis will show, it was the hiring of someone from the community that made the double-gateway possible and laid the ground upon which the foundation for United Women of East Africa was laid.

Making the position full-time and locating it within the Wellness Center is a critical incident because it established a stable anchor in the community where members could gather and support each other. It was this anchor that allowed them to create the free space where they built their bond, analyzed their situation, planned their actions and injected their voice into the public dialogue especially in the areas of access to healthcare, healthy food for their children and improved educational outcomes.

As the story will tell, the primary outcome of the second critical incident was the founding of United Women of East Africa. The story is a complex one that captures the challenges involved in attempting to blend two vastly different types of organizations with distinctly different rules of engagement and desired outcomes. It was the tensions that arose in the struggle to meet those challenges that led to the formation of United Women of East Africa. The third critical incident, the introduction of community organizing, was the proverbial “straw that breaks the camel’s back.” The tensions that led to the formation of United Women of East Africa were rooted in the social service sector’s inability or unwillingness to address many of the issues arising from the community. Community organizing brought a new set of challenges by building the women’s confidence and strengthening their voice. One of the first issues addressed by the women was access to healthcare and the extremely negative experiences the community was having with the interpretation system. Once organized, they chose the local clinics and hospitals as the target of their campaign. This decision, along with other organizational issues, was a major factor in United Women of East Africa separating from the Wellness Center (a program of Scripps-Mercy and Rady’s Children’s Hospital).

The separation of United Women of East Africa from the Hospitals, while successful in the end, was not simple. While both parties were ready for the separation when it finally came, there were multiple organizational and logistical issues that needed to be addressed that required creativity and flexibility on the part of the organizations and funders involved.

BUILDING A LEGACY OF STRENGTH, HOPE AND UNITY

Three very strong themes emerged from conversations with members of United Women of East Africa, i.e., the importance of having a place that was theirs, the sense of power they felt as they raised their voices and the inseparable nature of the two. It was the place that allowed the free space to form and it was out of the conversations held within that free space that they found their voices. Once they found their voice, they found a way to bring it into the public dialogue.

Since its founding in 2008, United Women of East Africa has established itself as an important voice within both the East African and the broader Community. They have, through their efforts, raised the visibility of the entire East African refugee community in San Diego and serve as a model for other communities that wish to have their voices heard.

The Beginning

United Women of East Africa evolved in stages. Its story begins with the hiring of Sahra Abdi in 1999. This hiring is important because of the role she plays within that community. Within most refugee communities there are individuals who have the experience, education and language skills to successfully navigate the US system and are trusted. Once identified, these individuals are called upon around the clock to assist members of the community in navigating the system whether it be the schools, Health and Human Services, the landlord, and so on. Additionally, the culture of these communities is such that these individuals do not really have the option of refusing to help someone. The person needing help generally expects this person to help them and it generally does not occur to the individual being asked to refuse to give the help. Sahra Abdi is one of those people. Hamda Haji, one of the group's founders, described Sahra as "the example for us to follow." She was someone "we could follow to get a positive outcome, she worked with the agencies." When asked why she has chosen this work, Sahra expressed both a passion for her community and a sense of obligation to serve her community. This sense of obligation, however, was not spoken of as a burden as it might be in US culture. Rather, it was spoken of as a natural and welcome part of community where there is a strong sense connectedness and mutual responsibility.

It is important to note that Sahra Abdi's hiring coincided with a rapidly increasing number of refugees from Somalia and the horn of Africa coming into City Heights. By 1999, there were approximately 4,000 Somali refugees living within the greater City Heights area with most coming after the collapse of the government in 1991. Another estimated 3,000 Somali refugees were resettled during the years she worked at SAY and the Wellness Center and approximately another 2,000 to 3,000 have been resettled in the area since then. Refugees from Somalia are presently the third largest ethnic group being resettled in San Diego County.¹⁶ Sahra Abdi's role was to build a bridge between the agencies and the East African community. She was to assess the community's needs, make the community aware of the programs available to them, be a liaison between parents and the schools, educate parents about available services, their rights as parents, etc. It was while doing this work that Sahra began to develop relationships with the women who founded United Women of East Africa. As the visibility of this community and its needs rose it attracted additional support and, with resources from the Wellness Foundation and Price Charities, Sahra moved from part-time to full-time and expanded her work in the community.¹⁷ The Wellness Center had a certified kitchen that allowed the women to come together over cooking. Not only were they learning how to use the new foods around them, but they were building a bond that would be the foundation upon which United Women of East Africa would be built.

The conversations held during the cooking classes, sewing circles and other programs continued to deepen the bond among the women as they shared their concerns. These conversations always included their children but also included topics ranging from breast feeding to female circumcision to domestic violence. As issues would arise out of these conversations, Sahra would bring them to the management of the Wellness Center whose response was most often that they were not issues the Wellness Center addressed. Due, in part, to the tensions building as a result of the Wellness Center's inability or unwillingness to address their issues, the women began to discuss the idea of forming their own organization.

¹⁶ Data provided on refugee resettlement comes from the California Department of Social Services-Refugee Programs Bureau and San Diego County Health and Human Services Agency.

¹⁷ The City Heights Wellness Center was a joint project of Scripps-Mercy and Rady Children's Hospitals and was managed and operated by Scripps-Mercy Hospital.

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They saw a need for an organization that was not only more responsive to their needs as refugees but also to their needs as women and mothers.

As the conversations continued, the participants became clearer and more articulate about their issues, and, through this process, came to the decision that the organization had to focus on women and girls. While there were refugee service agencies in the community, they felt that these agencies were “run by men” who didn’t understand their issues as women and mothers. Fadumo Aidid was clear, “we are having a problem and it is the women who are responsible for the kids and the family. Women are the foundation of the family.” Hamda Haji’s assessment was that “something is really needed and if you look at the community, it is the mothers who are working with the youth.” Both Khadra Aden and Asha Mohamed expressed the need to project women as strong and put them into leadership positions. For Sahra Abdi it was clear that “if we want our own organization we will have to build it.” The decision to name the group “United Women of East Africa’s Support Team”¹⁸ was intentional. They wanted to the name of the organization to reflect who they were and what they were about. A name that reflected their ethnic pride in being East African and their strength as Women.

Critical Incidents, Outcomes and Learnings

This stage of the group’s evolution begins with the first critical incident, i.e., hiring someone from the community to be the bridge between the social service system and the East African community. This hiring is a critical incident because it was the catalyst the sparked the chain of change that resulted in the founding of United Women of East Africa. It ends with the second critical incident, i.e. making Sahra Abdi full-time at the Wellness Center, establishing an anchor in the community.

In the minds of the agencies and their funders, they were creating a position for a traditional outreach-community educator to work with the East African Community. As this narrative shows, establishing this anchor in the community resulted in much more, i.e., the founding of United Women of East Africa. The impact of hiring a respected member of the community shows in the way the women came together and how they related to each other. The connection between the provider (Sahra Abdi) and the women is far more bi-directional than client-provider relationships in traditional social services. Sahra’s relationship to the women she served was shaped more by her culture (and theirs) than the culture of the social service sector. This difference proved to be significant as the group evolved.

There were two key outcomes at this stage in the group’s evolution, i.e. the creation of a free space for them to come together *as East African women* and the creation of a vision of what they needed/wanted. Together, the free space and the vision provided the base for the second stage in the group’s evolution. The Drivers of Change nurturing this development were Leveraging Resources and Enhanced Collaboration as the Wellness Foundation, Price Charities, SAY-San Diego, Scripps-Mercy/Radys Children’s Hospitals and the California Endowment each contributed to the conditions that allowed the community to coalesce and create a vision. That vision fueled the next stage of development by providing the women with direction and the resources needed to find their collective voice.

The key learning emerging from this experience is the impact of having a respected member of the community be the liaison with the community. Without such a person it is unlikely the free

¹⁸ The name of the organization, while officially remaining the same, has evolved over time and is generally known in the community as UWEAST (pronounced U-West) or, as referred to in this publication, United Women of East Africa.

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space would have been created or that the women would have been brought together in a manner that built their relationships with each other. Community is a living organism that requires certain conditions to develop, grow and be sustained. Because Sahra Abdi was of the community she understood the women at a deeper level than would be possible for someone outside the community. In her role as liaison she infused her culture into all she did and, in doing so, made the Wellness Center a welcoming and comfortable place for the women to come. As the narrative will show, her success at bringing the women into the Wellness Center came with challenges as the cultures of the hospitals and the community operated by very different rules of engagement and looked for very different outcomes.

At the center of the Theory of Change is a “Knowledgeable, organized and engaged community.” It is at the center because it is a necessary pre-condition for the community to be able to harness the energy produced by the Drivers of Change. It is that energy that supports the community in developing and articulating its Authentic Demands. It is the outcomes of this stage that created the necessary pre-conditions for the women to become knowledgeable, organized and engaged.

Emerging Voice:

The first years at full-time at the Wellness Center saw United Women of East Africa increase its reach into the community as their access to resources expanded (e.g., a certified kitchen). It was, however, work funded by a grant from the California Endowment at the beginning of 2009 that firmly established the group. This grant brought community organizing into the picture and started a shift in the Wellness Center’s approach to the East African community by adding community organizing to their existing role of connecting people to and developing programs for the community. As noted above, the mismatch between the needs being raised by the community and the services offered by the Wellness Center had already created tension between United Women of East Africa and Wellness Center’s management at the hospital level. The addition of organizing served to increase this tension.

The staff at the Wellness Center had some understanding of how adding organizing to their work might impact them as an early draft of the proposal to fund the organizing identified a risk associated with this approach. “The autonomy of the group can become a challenge. How much leeway will the group have to pursue issues that participants raise given the structure of Scripps Hospital?”¹⁹ It is important to note that this grant came at the time that the California Endowment was launching its Building Healthy Community Initiative with its emphasis on community organizing – community development over service provision.

Three efforts were launched as a result of this grant that highlight the challenges faced when moving from an individual, service-based model to a community oriented, place-based model. These efforts were: 1) a PhotoVoice project on the food environment, 2) a Readiness Assessment; and, 3) the founding of City Heights Hope. Starting with the latter, City Heights Hope became the organizing arm of United Women of East Africa. While the later was focused on identifying community needs and service development, City Heights Hope focused on organizing the women, developing their leadership skills and working toward policy changes. It is here that the efforts at the Wellness Center connected most directly with the BHC as the women in City Heights Hope became the core members of efforts by the City Heights Hub for

¹⁹ Early draft of the proposal that was funded by the California Endowment dated 11/20/2008

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the BHC, Mid-City CAN, to address food justice and access to healthcare. These organizing efforts also fueled the increasing tension between the Wellness Center and the women.

The “PhotoVoice” project brought together a group of East African mothers and daughters, equipped them with cameras and charged each with “taking pictures of their food environment.” Their pictures then served as a basis for a conversation between the mothers and daughters about how each understood the food environment around them. The idea was to introduce healthy eating while building a bond between mother and daughter. A goal of the PhotoVoice program was to create a project involving both the women engaged in the project and the service agencies serving the community. This process involved the mothers meeting together to give meaning to the results of the PhotoVoice project and to identify ways to apply the results to their community. Additionally, the representatives from service agencies were to review the results and identify what issues they saw and what they, as agencies, could do to better address community needs. The mothers and agency representatives met a total of six times. The mothers by themselves twice, the agencies by themselves twice and the two groups together twice. A third meeting was scheduled where the two groups would develop a joint project based on what they learned from the PhotoVoice Project. A joint project, however, was never developed as only one agency representative attended that last meeting. The final report on the grant concluded:

The biggest lesson was how hard it is to develop a joint project between a resident group like City Heights Hope and an agency that serves that community. It was clear from the effort that the difficulty was not due to lack of desire. Agencies showed a great deal of interest in working with the community in this instance. However, because a joint project coming out of this process is not a deliverable for any of the agencies, they didn’t have the resources for a meaningful collaboration. Essentially, agencies could not afford to invest even a small amount of resources.

The Endowment grant, recognizing the challenge of shifting approaches, called for a Readiness Assessment to be conducted that examined the challenges of bringing together three types of organization in a single project, i.e., two hospitals, a community-based organization and a grassroots community-run organization. Examining the function, structure and process of each of the three levels of organization, the assessment pointed out potential points of conflict.²⁰ The more formal the organization the more it relies on structure, formal processes and predictability. Grassroots efforts, on the other hand, are flexible and organic and must be able to respond quickly to opportunities that arise. United Women of East Africa co-founder Amina Sheik Mohamed described how the group wasn’t following a plan as much as responding to needs as they were named through their organizing. What looked like the lack of planning to the Wellness Center management at the hospital level was seen by the women as being responsive to community needs and taking advantage of opportunities.

This period of time in the development of United Women of East Africa had both its high and low points. It was at this time that the group was forming its own identity and finding its voice. And, in their forming, the women increased their capacity to articulate their issues, became more organized and began to formulate and press their Authentic Demands. The response to the women’s issues by the social service system in general and the Wellness Center in particular

²⁰ Oswald, W.T. (2009). Assessing the Alignment of Organizational Partners in the Health Advocacy Project. Report to the City Heights Wellness Center.

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was disappointing – increasing the tension between United Women of East Africa and the management at the hospital level.

As the community became more engaged the Wellness Center saw an increase the number of East Africans coming in and out of the Wellness Center, both to see Sahra Abdi and for workshops, training, etc. The people coming and going were predominantly mothers and, wherever they went, they brought their children. The demographic data reported earlier indicated that the median family size in this community included four children, meaning half the families have more than four children.

The increased presence of the women and their children impacted the environment at the Wellness Center. While the changes were welcomed by some, others found them problematic. Given the family sizes, a gathering of six women could easily include a dozen or more children. While accommodating the mothers with their children made the community feel welcomed, the additional noise and commotion that comes with children was seen by some as disruptive and making the Wellness Center appear unprofessional. The later was an issue raised repeatedly as a concern by the hospital level management. A culture clash was emerging between the East African community and the Wellness Center. The tensions that were emerging had to do, in part, with the differences in each other's rules of engagement and the understanding Sahra Abdi's role. The hospital level management expected Sahra to "be in charge," that she could calm the noise by either telling the women not to bring their children or require them to "better control their children." Telling one of these mothers not to bring her children was the same as telling her not to come. In the Access to Healthcare study referred to above, over 60% of the respondents said they took their children with them to the doctor and 85% of those who did, did so because of lack of childcare. Additionally, these women were Sahra Abdi's elders and, as noted earlier, her culture dictated that she could not "require" anything from an elder.

An event with a Pharmacist who was invited to present to the women on medication highlights this culture clash. Because of the weakness in the interpretation services within the healthcare system, there is as a great deal of confusion in the community as to what medicines to use and how. Additionally, this is a devout Muslim community and there was a concern that medicines in capsule form contained pork.²¹ The event was scheduled for 6:00 in the evening. The Pharmacist arrived around 5:45 and the women began coming in around 6:00. Most of the women (twenty or more) arrived between 6:30 and 7:00. As the women came in those with children settled them and all took time to greet each other. During this time, the Pharmacist was sitting patiently, greeting the women and waiting for the room to settle. It was about 7:15 when the Pharmacist was introduced and began to make her presentation. As she presented, the women began asking questions almost immediately. It was not long before the presentation turned into a question-answer session with much discussion. The session was lively and had to be brought to a close around 8:30 as the women were highly engaged in the dialogue and seemed to have endless questions. The event ended around 9:00 PM.

From the perspective of the organizer, the women and the Pharmacist, the evening was a huge success. The women felt that they got their questions answered and better understood their medications. The Pharmacist felt she had made an authentic connection with the women and was able to answer their questions and, in the process, learned a great deal about the community and how it understands medicine. The Wellness Center management at the hospital level, on the other hand, were upset. To them the evening looked chaotic and disorganized. It started more than an hour and fifteen minutes late and ended an hour late. The Pharmacist,

²¹ Inedible parts of a pig are a common ingredient in gelatin – capsules are made of gelatin.

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after being made to wait an hour and fifteen minutes, was not allowed to finish her presentation and there were endless interruptions by children and too many side conversations.

The evening with the Pharmacist highlights a process that was constant, though not always as visible. It showed itself in repeated questions about the necessity of the children being there, were the meetings with Sahra related to the grant, who is responsible of things being broken (e.g., shades, chairs, toys), etc. Taken together, this constant questioning eroded the women's sense of being welcome at the Wellness Center. It also began to feel like a hostile workplace for Sahra.

Critical Incidents, Outcomes and Learnings

This stage in the group's development starts with the third critical incident, introducing community organizing. While this critical incident extended the chain of change, its impact was not felt right away. Community organizing and building power takes time and, while the women began organizing during this stage, it wasn't until the next stage that these efforts began to be felt. What is seen in this stage is how the first two critical incident shaped United Women of East Africa and their relationship with the hospitals, both of which created the pre-conditions for the group's independence.

What is important to note during this stage is the relationship between the women finding their voice and the emerging tensions between United Women of East Africa and the hospital level management. The group's growth in size in addition to it beginning to develop and assert its identity, raised questions as to where, how and if it fit into the structure of the hospitals and the Wellness Center.

Nelson Mandela's statement that "where you stand depends on where you sit," captures a major lesson that can be drawn from this this stage, i.e., perspective is everything. Two incidents occurred during this stage that highlight this lesson. The first was the inability of the PhotoVoice project to generate a joint project involving local service providers and the women. The second incident was the evening with the pharmacist. In the first case, the individuals involved, both community members and agency staff, were interested in developing a joint project but the structure of the social service sector proved to be too great a barrier to overcome. This experience is a clear demonstration of a major challenge in bringing formal agencies and community-owned and run organizations together. Again, the former require structure, a formal process and predictability while the latter must be flexible and organic to survive. There are also important differences in who each entity is accountable to. Fitting a project that is community-owned and run into a highly structured, hierarchical and formal agency is extremely difficult and requires more organizational flexibility than most agencies can tolerate.

The experience with the Pharmacist is a clear example of the importance attending to the rules of engagement. The hospital level management staff were not wrong. According to their rules of engagement, the meeting was a bit chaotic and disorganized. It did start 75 minutes late, the Pharmacist never did finish her PowerPoint and there were interruptions and side conversations. However, the seeming chaos did not prevent the evening from reaching its goal of educating the community on key issues related to medication. What fueled the tension was the difference in the rules of engagement used by the community and the rules of engagement expected by the hospital level management of the Wellness Center. Where the staff expected a traditional and professional presentation followed by questions and answers they saw no real structure and the topics seemed to pop up randomly. If there was an agenda, it was not obvious or was not being followed. There was no facilitation in the traditional sense as the

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women would raise their question, wait for a response – both going through an interpreter. The answer often generated side conversations as the women discussed the implication of the answers they received. The process was inadvertently controlled by the women and it was one that seemed comfortable and helpful to them. Few of these women were professionals and, for many, they were experiencing being involved in such formal sessions for the first time. The lesson here is that rules of engagement are important and should be clearly laid out ahead of time. Additionally, the rules used must be consistent with those of the community. Had this Pharmacist insisted on doing her presentation and answering questions at the end she would have found very few questions as her audience would have sat politely but been disconnected from the content. The goal is developing a balance between the establishment and expected rules of engagement and those of a community.

It is during this stage that two new Drivers of Change begin to feed the group's development, i.e., People Power and Changing the Narrative. The power of these Drivers is not fully felt until the next stage, but the capacity of the women to harness these Drivers began during this stage.

Tensions Intensify

The tension building between the City Heights Wellness Center and United Women of East Africa was not unique to them as it was being felt throughout the entire City Heights BHC. Entering its third year of the ten-year initiative in 2011, Mid-City CAN held a second round of planning. The initial round began with extensive outreach to the community that engaged over 2,000 residents in a dialogue and held three community congresses that each drew over 125 residents. However, when the planning began it was dominated by the agencies providing services in the community. The process began to change in 2011 as Mid-City CAN pushed for greater resident involvement in the Momentum Teams' planning. The Access to Healthcare Momentum Team (AHMT) was the first to experience the shift. Meeting at 4:30 in the afternoon, it was dominated by healthcare professionals with few residents attending. When the meeting time changed to 6:00, when parents in the community could attend, all but one or two professionals dropped off the Momentum Team that was now drawing up to twenty adults from the community, many of whom were members of City Heights Hope/United Women of East Africa. When Mid-City CAN announced that the second round of planning would not include agencies and would involve residents only there was a backlash from the agencies, e.g. some members of the Peace Promotion Momentum Team separated from Mid-City CAN and established an independent group and the Food Justice Momentum Team split into two groups, one dominated by residents and one dominated by service providers. Mid-City CAN shortly cut off support for the agency dominated group.

It was also during this time that the United Women of East Africa/City Heights Hope conducted a Participatory Action Research project aimed at assessing access to healthcare for East African Families. Seventeen women from United Women of East Africa/City Heights Hope along with six other East African women refugees developed a survey and spoke to 220 other African women about their access to healthcare for themselves and their families. The results showed how poorly the interpretation services were across the clinics and hospitals. While an earlier study²² showed two-thirds of the staff at the local clinics rating the interpretation services as "highly effective," the women in this study told a completely different story. Rather than "effective," the survey found that nearly 70% of the women had no idea what their healthcare provider was saying to them and nearly 70% said they doubted that the healthcare provider

²² Harder + Company (October 2007). Language access evaluation project. San Diego, CA: Council of Community Clinics

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understood anything they said. More than 70% said they signed papers that were in English and had no idea what they were signing. Less than 20% of the women reported being offered interpretation and only 6% were given material translated into Somali or Swahili.

The results of this survey were shared with the AHMT during its second round of planning and the group decided to make improving interpretation/translation at the clinics and hospitals the focus of its efforts. The first plan to emerge was to do a second Participatory Action Research project focused on interpretation/translation services and grade the local clinics and hospitals on those services. The grades would be used to negotiate for improved services. The management of the Wellness Center at the hospital level, already unhappy with the focus of the United Women of East Africa/City Heights Hope, found the launching of a campaign that might target Scripps-Mercy and/or Rady Children's hospitals untenable. While the campaign to grade the clinics and hospitals was shelved by the AHMT because of their objection (as well as objections from the Hospitals Association), the split between United Women of East Africa and the City Heights Wellness Center had reached a point where reconciliation was no longer possible. It was also at that time that an incident best described as an act of cultural insensitivity by a hospital level manager toward Sahra Abdi occurred that resulted in her resignation and the final break between the United Women of East Africa and the Wellness Center.²³

It is important to highlight that the incident between the Wellness Center Management and Sahra Abdi was the proverbial "last straw," not the reason for the resignation. One of the ways the tension described above between product v. process (programs v. organizing) played out was in how Sahra Abdi's work was understood, valued and evaluated by hospital level management. For Sahra Abdi, her responsibilities included identifying needs in the community, connecting the community to the services offered and to "Build capacity of local leaders of the East African/Somali community to advocate for a healthier community."²⁴ Understanding her role in the community as one who has the skills and language to negotiate the US system, she knew that to be successful at her assigned responsibilities she had to help community members with any issue they brought to her whether it related to a deliverable in the grant or not. As pointed out earlier, culturally, Sahra had no choice but to help the women who came to her. Politically, she also knew that if she did not help the women with the array things brought to her, they would not return to the Wellness Center and she could not meet the grant deliverables. The Wellness Center management at the hospital level saw the assistance Sahra gave to these women as a distraction that took from meeting the grant deliverables. For several months prior to the cultural incident referred to above, Sahra Abdi's work had been under scrutiny by hospital management with repeated requests to have her job described to them. Responses to these requests by the local Wellness Center Manager, attempting to put Sahra's work in context, never seemed to address the hospital level management's issue as each response brought a new request. For Sahra Abdi, the workplace, even with the support of the local Wellness Center Manager, was becoming hostile and the cultural incident pushed her to make the decision to leave and her resignation resulted in the United Women of East Africa separating from the Wellness Center, moving into the EACCC and eventually becoming an independent nonprofit 501(c)3.

This period of time was perhaps the most important in the formation of United Women of East Africa. Tensions continued to build at the Wellness Center as the challenge to incorporating organizing into a service organization was coming into fruition. The women wanted more

²³ An email-blast announcement to staff giving the details of an upcoming all-day retreat that included lunch included specific instructions to Sahra Abdi that she should bring her own food.

²⁴ Objective #4 in early version of the Endowment Grant (file #20082009)

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“leeway” at the Wellness Center than the hospital level management wanted to give them. The Readiness Assessment predicted that the differences in the rules of engagement would lead to tensions between the local grassroots group and the hospitals. What was revealed in the implementation of the grant was a deeper divide than just that of how organizations conducted their business. This deeper divide was related to the value each entity placed on the work being done. As pointed out, the hospitals were service providing institutions and saw value in the development of programs with specific, deliverable outcomes, e.g., twenty women and their daughters participated in a cooking class and the pre-test—post-test showed the women and girls increased their knowledge of nutrition. While United Women of East Africa was also invested in program development, its organizing arm, City Heights Hope, was focused on process and developing the women’s leadership skills and sense of power. These outcomes are not measurable in the traditional sense and therefore seen as not important by the hospital level management.

The tension between service provision and organizing is not a new phenomenon nor is it limited to Mid-City CAN or the BHC. The Aspen Institute has tracked the impact of Comprehensive Community Initiatives such as the BHC over the long-term and found that service provision consistently pushes out organizing strategies. The consequence is that these initiatives have created multiple programs but have not changed the distribution of power and resources within a community. This recurring issue is related to what is evaluated. It is generally known by evaluators that organizations do what they measure and existing evaluation techniques are able to measure concrete deliverables such changes in test scores, body weight, food consumption, etc. but not able to measure the impact of process and a community’s sense of competence, connectedness and power. This division was apparent in a meeting between the California Endowment and the hospital level management at the Wellness Center over the implementation of this second grant. The point of discussion was the strategy being proposed by the AHMT that would target local clinics and hospitals on the issue of interpretation services. As described earlier, the hospital level management was concerned about a strategy that made them a target and asked the Endowment’s Program Manager, “is this what the Endowment wants?” The Program Manager’s response was telling about the future of Endowment funding and, to a large degree, contributed to the hospital level management staff’s decision not to apply for continued funding for the project. The response was that the Endowment wanted the residents to select the issues and choose the strategy and that this project seemed to be designed to do that.

The separation of United Women of East Africa did not happen overnight. There were some unsuccessful attempts at resolving the issue, but Sahra Abdi’s resignation was final. By this time the co-founders of United Women of East Africa owned the organization. They made it clear that, regardless of the issues at the management level, they were going to stay together and Sahra Abdi was going to continue to lead them. The move to the EACCC strengthened their sense of ownership and once there, they began to take action and build on what they had started.

This split, while painful, demonstrated both the community’s commitment to Sahra Abdi and its ability to build their own organization rooted in their community and designed to serve and strengthen their community. Their actions are a clear demonstration that, as stated earlier, **“local residents have significant insight into what problems are most critical to address, what community strengths can be used to improve the health and community conditions, and what strategies and solutions will be most effective.”**²⁵

²⁵ Bell, J. Rubin, V. (2007). Why place matters: Building a movement for healthy communities. To download a pdf of this guide, please visit Policy Link: www.policylink.org

Critical Incidents, Outcomes and Learning

It was during this stage that the third critical incident, the introduction of organizing into the project, began to have its impact. This incident is considered critical because it was the women's organizing efforts on access to healthcare that ultimately led to United Women of East Africa's independence. In fact, this stage ends with United Women of East Africa becoming independent and Scripps-Mercy Hospital deciding not to pursue continued funding from the Endowment for this project. An important outcome of this incident was the formation of City Heights Hope, the organizing arm of United Women of East Africa. This work increased the group's reach into the community and was the vehicle for leadership development and capacity building. As noted above, it was the vehicle for bringing the voice of East African women into dialogue being generated by the BHC. It was with City Heights Hope that the Participatory Action Research project on access to healthcare was done. These women also joined Mid-City CAN's Access to Healthcare and Food Justice Momentum Teams. The members of City Heights Hope also engaged the School District, participating in parent organizing efforts related to students classified as English Language Learners and SIFE, Students with Interrupted Formal Education. Most of the youth in the refugee community fit the latter category. As time went on and United Women of East Africa became more established, the use of the name "City Heights Hope" faded. However, its impact on the group was enormous as it was, in many ways, the training ground for the core members/leaders. It was through their advocacy work that the women gained their skills and confidence.

The women engaged in United Women of East Africa understood the importance of organizing and the decision to do so was thoughtful and intentional. Shortly into the implementation of the grant, a facilitator took the women through a process that had them identify and prioritize their concerns. As expected, their children were first on the list followed by issues like education, employment, transportation, etc. Issues related to health and food were fourth on the list. While considered important, their immediate concern was their children. Food being fourth in priority presented a bit of a dilemma as the grant from the Endowment was to address "the food environment." After reviewing and discussing the issues and their priorities, the facilitator presented the women with a proposition. Was there value in them taking advantage of the grant by organizing around the food environment and, by doing so, build their skills and their organization? Once they were organized they could use their base and skills to take on any issue. The women accepted the proposition and shortly afterwards named the group and began organizing around food. This decision led the women to become core members of Mid-City CAN's Food Justice Momentum Team.

As the women became more organized they also became better able to harness the energy of the Drivers of Change. The building of People Power that started in the last stage increased significantly over this time. Shifts in the Narrative, both the public's view of the East African community and the women's own internal narratives, began to occur.

The key learning emerging from this stage is how one's approach to building a healthy community (i.e., individually-focused v. place-based) shapes the value one puts on the outcomes. This stage clearly revealed a huge difference in the value given to the outcomes by both parties. Rooted in a service model, the hospital level management wanted to see programs with specific deliverables while the women were focused on process and how they can better articulate their issues and take action. A workshop on healthy eating was seen as valuable to the hospital level management while organizing a campaign for healthier foods in school meals was valued by the community but not by hospital level management. This difference in perspective fed the growing tension between the Wellness Center Management at

the hospital level and the United Women of East Africa.²⁶ It was the tension between these two approaches that pushed United Women of East Africa to its next stage.

Independence

Sahra Abdi's resignation from the Wellness Center placed a decision before the women engaged in the project. The grant belonged to Scripps-Mercy Hospital and Sahra Abdi was no longer an employee of theirs. The choices were to stay at the Wellness Center and be part of a new organizing effort, joining with the Swahili-speaking community or to go with Sahra. Expressed in many ways and many times over this period, the women were clear. "We go where Sahra goes." At this point, the Endowment stepped in and negotiated a separation that allowed the group to continue with Sahra Abdi's leadership. Some of the grant would fund Sahra Abdi as Executive Director of United Women of East Africa with SAY-San Diego as her fiscal agent and the remainder of the grant would stay with Scripps-Mercy to continue the work with the Swahili speaking community. The consultant assisting in the development of United Women of East Africa/City Heights Hope would continue to work with the women. The location of the group moved from the Wellness Center to the East African Cultural and Community Center (EACCC). Scripps-Mercy Hospital did not apply to have the grant renewed and the project was transferred to another organization, the Global Action Research Center, that continued the organizing work within the Swahili-speaking community while United Women of East Africa received their own funding from the Endowment.

With the move came an enormous burst of creative energy. The women finally had their own place and could create whatever they could envision. It was during this time that the organization led Mid-City's campaign to increase the amount of locally grown, organic fruits and vegetables in school meals and got the School District to commit to providing their children halal food choices everyday. While still struggling to impact the interpretation services at the clinics, these women played an important role in developing principles, standards and protocol for providing client centered interpretation services. Perhaps the most important development at this time was the development of their afterschool program. This project was part of the vision the women had when they decided to organize around food. With the move, they now felt ready to bring that vision to life. This was their first program of many developed at the EACCC. It was followed by the development of a leadership program for girls, a Girl Scouts troop, a variety of trips and activities focused on providing them with a wide array of opportunities.

Nothing Stops the Work

While the separation of United Women of East Africa from the Wellness Center was time consuming and emotionally draining for those involved, it did not slow the work and the move resulted in a burst of creative energy. In addition to the accomplishments listed earlier, some examples of this burst of energy include:

- **Collaboration and Advocacy:** United Women of East Africa play a leading role in the efforts to improve access to healthcare and increase the quality of food in school meals.

²⁶ It should be noted that the term "Management of the Wellness Center" refers to the staff connected to the hospital and not the local manager of the Wellness Center. The local manager was highly supportive of United Women of East Africa and valued their use of the Wellness Center. The Center Manager was often caught between her supervisors at Scripps-Mercy and Rady Children's Hospitals and United Women of East Africa.

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- AHMT: The participation of United Women of East Africa has been constant in this Momentum Team. The latest campaign involved the women developing a set of standards for interpretation from the perspective of the client. This document includes Guiding Principles, Standards of Practice and Protocol.
- FJMT: United Women of East Africa have been leaders in Mid-City CAN's successful campaign to improve the quality of food served to students in the San Diego Unified School District. As a result of their work over a two-year period the school district has increased the percentage of locally grown, organic fruits and vegetables it serves at lunch and has created a halal menu for its Muslim students. More importantly, United Women of East Africa has been instrumental in developing an ongoing relationship with the food services department of the district. The strength of this relationship was demonstrated when the head of food services requested a meeting with the FJMT right after President Trump issued his Travel Ban Executive Order so he could communicate his and the school district's continued support for the Muslim community.
- Youth Implemented Advocacy: Muslim girls face unique challenges when it comes to organized physical activities. To address this issue, United Women of East Africa brought together a group of twenty middle and high school girls to discuss the issue. Together, these girls developed the criteria for a program that would serve Muslim girls, developed a tool for assessing recreation centers/programs based on that criteria, piloted the tool and graded a local Recreation Center. Leadership development was embedded in this process as the girls discussed the issues of rights v. privileges, public v. private services, how to do outreach and organize your peers, etc.
- Cultural and Academic Support for Youth: Starting with a pilot summer school program, United Women of East Africa created an afterschool program that serves more than seventy elementary and middle school students. The summer program was designed by older youth identified by the group. These youth, using their own experience in school, designed and implemented a four-week summer program. This program was so successful that it was expanded to an ongoing, afterschool program. The program has three objectives: 1) building youth resiliency by strengthening their connection to their culture; 2) build youth's connection to their community; and 3) strengthening their academic skills. The program engages participants in academic activities, physical activities and cultural activities that are led by the youth coordinators and volunteers from the community.

In addition to these projects, United Women of East Africa has also launched the following:

- Self-defense courses for boys group
- Somali and Ethiopian language course for youth
- Girls Scouts Program
- Hayat bi-weekly Health and Social for Mothers
- Intergenerational Cooking for Mothers and Daughters
- Mental Health for Boys and Men of Color
- Dialogue with the doctor for community
- AJA young girls
- Tutoring for youth
- Yoga for Mothers
- Cultural competency Forums
- Women Empowered for Mothers

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Critical Incidents, Outcomes and Learning

It is at this stage in United Women of East Africa's development that the full impact of the third critical incident, introduction of organizing was felt. As noted earlier, the outcome of this incident was the independence of United Women of East Africa, a move that unleashed the power of the women and their organization. A dream that began to form in the first stage was now coming to fruition before their eyes. Sahra Abdi noted in one interview that, "when you live where there is no government, you learn to do things for yourselves." These women, supported by the California Endowment and nurtured by the Drivers of Change, became knowledgeable, organized and engaged, formulated their Authentic Demands and effectively brought them into the public dialogue and shaped public policy.

The independence of United Women of East Africa coincided with the women beginning to feel their power. The interviews revealed important changes in the women's internal narrative coming out of this incident. Each of the women interviewed spoke to sense of their power growing incrementally as they began to articulate their concerns and to take action to address them. The narrative change was coming from the actions they were taking, not the system's response to them. It was building, in many ways, in spite of the system's response to them. Understanding this process is important. Traditionally, organizing strategies are built on the idea that victories are critical to building power. And, while this outcome doesn't contradict that idea, it does suggest a more complicated picture, i.e., that change begins with the power people feel as they articulate their issues. It was this sense of personal power that motivated these women to become more active and, as they became more active they became more confident and stronger in pressing their demands.

The lessons that emerged from this stage in the group's development are:

- Place-based practice works. Given the resources and the freedom to respond to issues identified by the community as they saw them, these women were able to harness the Drivers of Change, coalesce into a knowledgeable, organized and engaged community with the capacity to articulate and push a set of Authentic Demands. Their success reinforces a basic tenet of place-based practice, i.e., that "local residents have significant insight into what problems are most critical to address, what community strengths can be used. . ." The trust in the community's capacity to organize and advocate for itself by the California Endowment paid off with the emergence of United Women of East Africa. The importance of this trust cannot be understated. The Endowment's steady support for United Women of East Africa through its break with Scripps-Mercy hospital and the City Heights Wellness Center was an institutional show of faith in the women and the process. The organization was extremely fragile at that point and without the Endowment's support throughout the process, it is likely the group would have struggled to survive and would not be having the impact it is presently having.
- The importance of the agenda coming up from the bottom rather than down from the top. United Women of East Africa began with conversations that not only identified the issues, but built trust among the women engaged. It was that trust, nurtured in the free space, that gave them the freedom and confidence to create their own agenda. United Women of East Africa was born largely because their agenda, coming up from the bottom, did not fit well into the agenda coming down from the top. Funding to address the food environment when their number one concern was supporting their children as they struggled to adjust is a good example of the mismatch. The community participated in activities and events related to

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food but they took ownership of the organization when it began to address the children and youth directly. For many, the moment of birth was the launching of the summer school and afterschool programs. For the co-founders, these programs addressed their core issue and they were committed to making it happen. And, as reported earlier, the program drew more families and more volunteers to the EACCC. What these women knew was that it indeed did take a village to raise their children and what they did was create the village.

As the center of community activity in City Heights, the creation of this village is perhaps the most impactful of all outcomes. The EACC was built as an VFW Hall (Veterans of Foreign Wars) and consists of a large room with a very high ceiling, a stage, a bar, and built in seating along the side walls. It has a certified kitchen and office and meeting space at the front of the building. The large hall is used as a gathering place for the community as well as a place for weddings, memorials, community celebrations, etc. Several community organizations and groups use the available meeting space. Much of Mid-City CAN's Access to Healthcare and Food Justice Momentum Teams activities took place at the EACC, City Heights Youth for Change meets there weekly, PANA (Partnership for the Advancement of New Americans), the Somali Bantu Community Organization, the South Sudanese Community Center, Niles Sisters, etc. hold events, meetings, etc. in the space. It is where the community came to learn about the changes in immigration and refugee resettlement laws and how to protect themselves in the early days of the Trump administration.

What is important to note here is that it is this Village Center that draws people. The Village, while administered and maintained by United Women of East Africa, isn't owned by them. It is owned by the community. This ownership is demonstrated in how the community uses the space and that each group takes responsibility for leaving it as they found it or better. It's a place where people bring ideas for strengthening the community, a place where you can leave your children if you have an appointment and know that they will be well cared for. It is where new arrivals come when they don't know where else to go – or need help understanding some official correspondence. While there are more than a dozen African languages in the community, it is likely that anyone who comes in for help will find someone who speaks their language. It is the hub of a network of organizations similar to United Women of East Africa that are serving other ethnic communities, i.e., working at Layer Four and below the Clay Line. The village is a clear example of the whole being greater than the sum of its parts. It exists because of the interactions that occur in its space. The EACCC existed before United Women of East Africa, but it came to life when they moved there.

Referring back to the metaphor of the community as a garden with different layers of soil and a hard Clay Line, United Women of East Africa was identified as working at Layer Four and, in fact, their constituency, refugees, largely exist below the Clay Line. Acknowledging efforts within this layer is important because resources generally flow from the top and can be scarce by the time the flow reaches the bottom layer. As pointed out, organizations such as United Women of East Africa fill a gap. The resettlement agencies address the physical and material aspects of resettlement but it is up to these small organizations working at the grassroots that address the social and psychological needs and they do this with minimal resources. United Women of East Africa is able to offer what it does because the community supports the programs with their time and energy and they do that because they own it. What brought the community in was that, as noted above, they created a village. A village was what this community needed for their families to thrive and villages cannot be created from the top. They must grow out of the community.

- The strength of the organization is rooted in its base. The power of the group came with building a base in the community. The reach, size and strength of United Women of East Africa grew significantly with the organizing of City Heights Hope as it provided a way for women to engage in issues proactively, not as clients but as constituents. The engagement in policy issues also gave them confidence and a sense of power. It gave United Women of East Africa a Knowledge-Action Network where they could share information widely within the community and call people to action when it was necessary. Most importantly, having this base gave United Women of East Africa a way of staying “in touch” with the community, ensuring that the things they pursued were things the community was calling for. United Women of East Africa developed this powerful self-supporting process where, through their Knowledge-Action Network, they could be close to the community, hear their issues and create programs and activities that addressed those issues. Seeing those programs and activities, in turn, makes the community feel heard and draws them in as activists and contributors to the activities and programs. And, as pointed out above, it is the community engagement that allows United Women of East Africa to do more than the level of resources they have would predict. It is also how they created a village.

UNITED WOMEN OF EAST AFRICA AND THEIR FUTURE

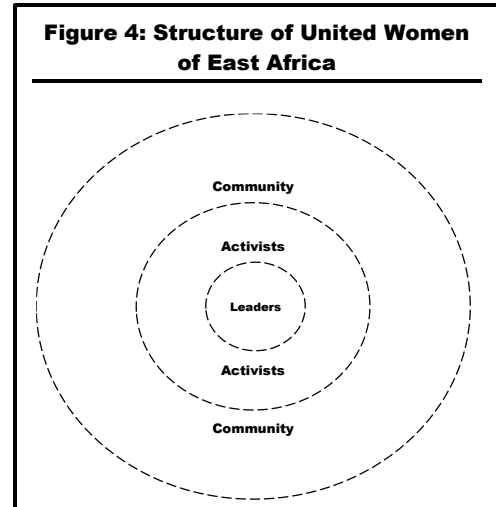
The above analysis moves through United Women of East Africa’s development from the creation of the preconditions in 1999 to their independence in 2012. The following pages give a picture of who and what the organization is.

The United Women of East Africa

As the narrative above shows, United Women of East Africa is a unique organization in many ways. Because it is a community-owned, community-run organization it’s rules of engagement reflect that of their constituency, i.e., East African women and girls, which is very different from that of traditional nonprofits. To get a full sense of this story it is important to understand what it means to operate by their “rules of engagement,” because they are outside that of the more traditional nonprofit organization. While the organization has a board and staff, it operates more like a collective than a formal organization. It is, to a large degree, the organization’s uniqueness that accounts for its success. As pointed out earlier, the seeds of the organization were planted during conversations within a free space. The free space could only exist in an environment where the rules of engagement within that space were consistent with the ways of the women who came into the space.

While the organization’s means of operating is a strength when it comes to building a community space and a community network, it does provide some challenges. Funding sources typically like organizations with clear lines of authority and a strategic plan. While United Women of East Africa is organized and effective, their model has not always been easily understood by those with a more traditional organizational mindset. In most organizations, the person with the title of Executive Director is in-charge of the organization and, in most cases, has the final word on decisions. This is not true, however, for the United Women of East Africa. While Sahra Abdi is at the center of the organization, where it goes, what it does, and how it does it is greatly shaped by the active members of the organization. Figure 4 shows the structure of the organization. At its center is Sahra Abdi and a group of highly committed people who oversee, manage and coordinate projects and programs, i.e., the Leaders. Surrounding

those women are a larger group of women, i.e., the activists, who come to the EACCC consistently and contribute to the programs and actions at the EACCC. These are the women who volunteer in the various programs, are part of Mid-City CAN's Food Justice and Access to Healthcare Momentum Teams as well as support other efforts in the community related to health, education, etc. Lastly, is the community-at-large. These are the folks who turn out to events, respond to surveys and interviews in Participatory Action Research projects, etc. The Leadership level consists of as many as twenty women while there are as many forty to fifty activists and a community network that reaches up to 500 families or more.



A description of an exercise in a strategic planning process presents a vivid picture of the organization and how it works. In this exercise, the women (a group of 20) were to define the criteria for membership in United Women of East Africa. After going through a facilitated session, the women developed criteria for membership and a more formal organizational structure. Following the process, the facilitator wrote up the session and presented it to the women two weeks later to affirm the decisions they made at the prior meeting. The women universally rejected the membership criteria and structure presented to them. While they did not deny the presentation accurately reflected what they said, seeing it presented back surprised them. They were very uncomfortable with what seemed to be rigid and did not capture the fluidity and flexibility of the organization. The women then spent approximately 15 minutes in discussion in Somali with the facilitator getting intermittent reports on what was being said. At the end of that time, the group fell silent as one woman spoke for about one or two minutes as the others listened. When she was done, the woman to her right spoke for one or two minutes while all listened. This process continued until each woman spoke and was listened to without interruption. After the last woman spoke, Sahra turned to the facilitator and said, "these are the rules the women have decided upon." In short, the organization was open to any East African woman or girl. That members were the women and girls who participated in the activities and they remained members as long as they participated. The leaders were those who were putting in the time to keep the programs running as well as making decisions about what the organization can and should do. A woman became a leader by stepping up and making that level of contribution to the organization. She remained a leader as long as she did the work. All decisions were made by consensus. Sahra was the most consistent member of the leadership and someone the women looked-up to and respected. While some women's level of involvement ebbed and flowed over the time as the demands on their life changed, other women's involvement, Sahra's most notably, remained constant. The collective nature of the leadership was such that even though Sahra Abdi is the "Executive Director," she is only one voice among the leadership. And while she is a leader within that group, she is expected to follow the will of the group. Additionally, most of the members of the leadership circle are Sahra's elders to whom she, as dictated by the community's culture, is expected to defer.

The structure and process works well for the organization but presents some challenges in its interactions with other organizations. One of the constant issues in the tension between Sahra Abdi and the hospital level management of the Wellness Center was their expectation that she could direct the women's activities. Ultimately the consultant facilitating the United Women of East Africa's strategic plan described the group as structured similar to a spider web. In this

web, Sahra Abdi sits at the center. Her role is not to control the web, however, but to insure there is a free flow of information so that all who are connected have the opportunity to engage and have their voices heard. The decision on what can and should be done by the group is ultimately decided by the current leadership, the first ring of the web out from Sahra.

The Moment of Birth

Each of the founders interviewed for this case study was asked what they saw as the “moment of birth” for United Women of East Africa. They were asked to think of the group and how, at some point in time, they went from being a group of women concerned about their community to United Women of East Africa, an organization. What was that moment? While the answers varied, they all reflected the importance the women gave to having their place and establishing their voice in the community. For Sahra Abdi, it was the launching of the summer program that served more than 70 elementary and middle school youth. She identifies it as when the women took over. She knew if the move to the EACCC was going to succeed the organization would “need to rely on the membership and shift from me running things to the women taking charge.” The women showed their ownership of the organization one day when Sahra was sick and was told by the women to “stay home, we’ll take care of it.” Similarly, for Kafisa Mohamed the moment of birth was leaving the Wellness Center and beginning to really serve the youth. Khadra Aden named the move from the Wellness Center, describing the experience there as limited with many prohibitions. With the move to the EACCC much of the barriers to serving the community “disappeared.” Khadija Mussa also named the move to the EACCC and the sense that they were now free to respond to the community’s needs. There was no longer someone “telling them what they could and couldn’t do.”

Hamda Haji identified the day the women named the group, giving them an identity and a purpose where Layla Ali spoke to the sense of power and identified the day of health in the park where the organization turned out a large number of people to the event. Fadumo Aidid pointed to the day the group decided to become organized. With the forming of City Heights Hope she had hope that things were beginning to change. Asha Mohamed identified the first meeting with officials to discuss the quality of food in the children’s lunches.

Taken in their totality, when the women spoke to the forming of United Women of East Africa they spoke of a home, a welcoming place, a place they control and a place where they can find their voice and bring it into the public dialogue. It was a place to feed their culture and keep it alive in the new world and insure that the values most important to them are passed on to their children. The overwhelming sense was, with their own place, there was no end to what they were capable of. Referring to the experience of the women as refugees, Sahra pointed out that “when government isn’t there, you need to figure it out.” United Women of East Africa is a group of women who did just that.

Sustainability

Sustainability is the challenge United Women of East Africa now faces. As Figure 2 illustrates, the outcome of achieving sustainability is systems level change. It takes persistence over the long-term to bring about meaningful change at a systems level. The seeds for United Women of East Africa were planted back in 1999 and it took until 2008 before the seeds sprouted and the organization was formed. The organization came into full bloom with its independence that came in 2012-2013 and is flourishing. However, as with any organization, it faces opportunities and threats.

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The village created by United Women of East Africa is a creative place that is ripe with opportunities and has an energy that draws people. Creating a Girl Scout troop for Muslim girls at the EACCC is a prime example. This was an idea brought to United Women of East Africa by a young woman who was drawn to the Village²⁷ by its energy, demonstrating what it means to be a village. When Bethlehem Degu brought the idea to United Women of East Africa she didn't need to make a formal presentation to the Executive Director and the Board. Rather, she had conversations with the mothers about what the Girl Scouts were and what it offered to their daughters. The troop exists because the women saw how it could be shaped in ways that offered their daughters opportunities and supported and reinforced their values. Programs and activities offered by United Women of East Africa all go through a similar process. It is ultimately the women engaged at the leadership and activist levels described earlier who decide if a program and/or activity should proceed.

There are two challenges that threaten the future of United Women of East Africa. The first is the struggle to find the resources to maintain the organization. Small, grassroots organizations operating within Layer Four in the garden metaphor typically struggle to find the resources and much of their energy is spent on survival often limiting their potential to have a larger impact. As noted earlier, there is a substantial gap between the support provided to refugees by the resettlement agencies and what is fully needed for a family to successfully adjust to their new home. It is small and flexible organizations such as United Women of East Africa that fill that gap. Unfortunately, their size and flexibility often work against them. While it is this flexibility that makes United Women of East Africa successful, major funders are more likely to fund an established nonprofit over a struggling grassroots organization. Additionally, the resources it takes to compile a successful federal grant, for example, is often beyond the reach of these organizations and many have budgets too small to even be considered by the larger funders.

A second and, in many ways a much larger threat, is the possibility of losing of their space. As noted, the EACCC is not just home to United Women of East Africa, it is the center of the Village they created. At the time of writing, the EACCC is scheduled to be demolished at the end of 2019 and replaced by a 73-unit apartment complex and small park. While the women are in conversation with the developer, Price Charities, over the possibility of them providing the community with a new space, it is too early in the process to predict the outcome of those discussions. The fear is that, while Price Charities understands the need for office and meeting space for the groups being displaced by their development, the community is not confident that it understands the importance of the "village" aspect of the EACCC. The loss of the Village is a threat to the future of United Women of East Africa. It is the Village that makes them unique and feeds that sense of ownership of and commitment to the space and to United of East Africa shown by community. In turn, it is this sense of ownership and commitment by the community that allows United Women of East Africa to flourish. When the material resources fall short, it is the members of the Village that step up and give of their time, energy and intelligence to make programs and activities work. The afterschool program is an example of a program that provides far more than the resources it receives would dictate. The gap is filled by the members of the community demonstrating their commitment to their children and their community. The Village inspires people and supports them in making a contribution to the community. Losing the Village center would weaken and possibly destroy this process.

²⁷ See <http://www.speakcityheights.org/2015/09/east-african-girl-scouts-learn-heritage-female-leadership/> for KPBS coverage of the Girl Scout troop

Looking to the future

In response to a question about the future of United Women of East Africa, the women all gave similar responses. Their vision was of them continuing to do what they are presently doing with an expansion in programs, especially for boys. Each one began describing their vision by talking about the importance of having a home such as EACCC. To them it was clear, they have been successful because they have created a home for the community. Their vision is a secure home for United Women of East Africa where they can continue to serve the community in their way. Each participant also spoke to their fear of losing the community space and with it, the community. They understood the power of place and how, if you want to create a healthy community, people need a space where they can respond to community needs, find their voice and become knowledgeable, organized and engaged.

As noted, the fear of losing their home is real. United Women of East Africa, along with other groups that use the EACCC, have begun negotiations with Price Charities on the relocation of the groups being displaced by the project. While the community hopes for a Community Benefits Agreement that will include space for maintaining the community's home, the future at the time of writing is still largely unknown.

The community's concern was highlighted at a presentation of the case study to United Women of East Africa. Once the interviews were completed and the group's story was documented, it was presented to the group to affirm that their story was being told accurately. At the end of the presentation and discussion, Kafisa Mohamed insisted that the story emphasize the importance of place.

Update on Building Status: Price Charities has amended its plans to include 5,000 square feet of community space. The City Heights Area Planning Committee, at its meeting in January 2018, showed strong support for the East African community by voting to make their approval of the project contingent upon an agreement between residents and Price Charities on how the community space would be managed.

THE FINDINGS

Building Healthy Communities has a simple strategy: work on a local scale to create broad, statewide impact. Where we live, our race, and our income each play a big part in how well and how long we live. We need to reshape the places that shape us—our neighborhoods.²⁸

The "simple strategy" described here as the core of the BHC is a place-based strategy and place-based strategies, by their nature, require the communities affected to lead the change process. If changing the system starts with changing the neighborhood, then the people who live in those neighborhoods must lead the change process. As this case study shows and what other research affirms, moving from an individual-based to a placed-based approach that brings with it community leadership is not a simple or short-term process.

²⁸ The California Endowment (Spring 2016). A new power grid: Building healthy communities at year 5. www.calendow.org

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The evolution of United Women of East Africa, analyzed here as an exemplar of place-based practice, illustrates the process involved in successfully taking a place-based approach.

Lessons

In summary, the lessons learned through this analysis are:

1. To be successful connecting with a refugee/immigrant community it is critical to have trusted person or persons from that community who have the education, experience and language skills to navigate the system. Being trusted is particularly important in a traumatized community where building trust can be difficult to do. This person or persons becomes an important link between the new community and the social service system. The newly arriving families are unlikely to know how the system works and the social service system is likely to know very little about the newly arriving families. Having a link, a trusted member of the community who can educate the social service system about the community and educate the community about the network of services available is critical. It is the first step in developing the community's voice.
2. Perspective is everything. The social service system and the community do not see things the same way as evident in the different expectations, rules of engagement and value given to the role of the community. These differences have to be recognized and respected so that a means of effectively communicating across these differences can be developed.
3. Need for the agenda to come up from the bottom. The women took ownership of the organization when the group separated from the City Heights Wellness Center and began creating their own programs and activities. Many named the development of the summer/afterschool program as the organization's moment of birth or the point at which the women took ownership of the organization. Developing programs and activities for their children was what motivated these women to become engaged and when they were able to do it they made the organization their own.
4. Need to support grassroots organizations working in the neighborhoods. It is the grassroots groups that are touching the people in the community. The larger agencies provide for material needs, but it is these small, community-owned organizations that lift people up. It is these small, community-owned organizations that reach, educate and activate the people within these communities. Change begins in the neighborhoods and it is these small groups that are changing the neighborhoods. In the present structure of the social service system, these grassroots organizations are grossly under resourced and often overlooked by policy-makers.
5. Changing the internal narrative. As the women held their conversations and began to articulate their issues and concerns, they began to see themselves differently. Articulating their issues and taking action is what gave them confidence and a sense of power. The internal narrative change came from the actions they were taking, not the system's response to them. The lesson here being that constituent designed and led action is the key to changing the internal narrative, especially for people who don't see themselves as actors with power in their world.
6. Strength and power come from having a community base. United Women of East Africa's success is, to a large degree, rooted in the reach they have within their community. Their

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capacity to spread information, educate and mobilize their constituency has played a large role in increasing community's visibility and voice. It is also being accountable to this base that ensures that their work is connected to the community and its issues and concerns.

7. Place-based practice works. While this lesson is perhaps the most obvious, it is worth stating. United Women of East Africa and the Village they created within the East African community is a clear demonstration, i.e., an exemplar, of place-based practice. Acting as a catalyst, they formed a knowledgeable, organized, and engaged community, creatively harnessed the Drivers of Change, and successfully articulated and pushed their Authentic Demands. The resources and the trust of the California Endowment was critical to the group's successful transition from an agency program to an independent organization.

Conclusions

From these lessons, five broad conclusions are drawn, i.e.:

1. There is a disconnect between the healthcare-social service system and the communities they are funded to serve. The two live in separate worlds, have different cultures, speak different languages and even see time differently. This disconnect may be a bit exacerbated here because it is a refugee community with a culture that is different than the mainstream. However, the disconnect described here exists in most communities. Communities are fluid, dynamic and tend to have their own rhythm and rules of engagement. Formal organizations are highly structured, have a set process and operate at a consistent, machine-like pace. Families operate twenty-four hours a day, seven days a week while organizations tend to be 9:00 to 5:00, five days a week. The community sees the system as a single entity while it operates in silos that make little sense to the community. Institutions such as schools talk of three, five or ten-year plans while the community is facing more immediate challenges. Children spend four years in high school and telling a parent that their child's school will be high performing two years after their child graduates is not comforting.
2. There is a natural tension between the healthcare-social service sector and the community. Research shows that when asked what residents need, agencies respond by identifying services and residents identify the need for access to resources. The very structure of social service agencies makes it nearly impossible for them to take their lead from residents.²⁹ This challenge was demonstrated in the failed effort to build a joint project between the women at the City Heights Wellness Center and the agencies serving their community. In addition, it is known that when resources for services compete or conflict with resources for organizing, services win.

A core tension in this case study is rooted in the different value given to the different outcomes. Traditional service provision calls for bringing in experts to develop programs that respond to needs in a community identified through a Needs Assessment. The outputs and outcomes are easily measured. How many people did you see and was there a change in their behavior in a specific area of their life, e.g., more exercise, read to child more, lose weight, etc.? Community organizing, on the other hand, is focused on process not product,

²⁹ See: Silver, D, Weitzman, B, & Brecher, C. (2002). Setting an agenda for local action: The limits of expert opinion and community voice. *Policy Studies Journal*, 30(3), 362-378. Smith, S. R. (2001). Nonprofit organizations in urban politics and policy. *Policy Studies Review*, 18(4)7-26. Poole, DL. & Colby, I.C. (2002). Do public neighborhood centers have the capacity to be instruments of change in human services. *Social Work*, 47(2), 142-153. Hannah, G. (2006). Maintaining product-Processing balance in community antipoverty initiatives. *Social Work*, 51(1), 9-17.

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making it difficult to evaluate. In this case study, the women responded to the tension by creating United Women of East Africa. When organizing was introduced and the women gained their independence, what they created is far larger than their organization. They created a Village. Villages cannot be created by agencies nor can what happens within them be tightly controlled. This last point about control is important. The tension between organizations and community often revolve around issues of power and control. Formal organizations, especially large ones, must have systems of control in place to ensure that they are functioning appropriately. These are reflected in such things as long-range plans, systems of reporting, evaluation and monitoring systems, etc. Small, community efforts, as noted above, are more focused on addressing needs as they arise out of community, making planning in the traditional sense nearly impossible. In addition to addressing issues arising out of the community, United Women of East Africa and similar organizations are engaging their community in defining the problem, developing and implementing the solution. As was true in this case study, community-identified needs often do not get fully addressed by the programs created by the nonprofit agencies operating in the community. The programs offered by these agencies were generally designed to meet the deliverables called for by major funders and not to address community need. While the two overlap and are often similar, they are rarely the same. This dynamic was reflected in what appeared to be the City Heights Wellness Center's inability or unwillingness to address the issues being brought forward by the women.

3. There is a need for more investment in the groups/organizations working at the neighborhood level (Layer Four). If "broad, statewide impact" results from "work on the local scale," then there must be strong, resident-led groups/organizations working at the community level. Referring to the metaphor of the community as a garden, the healthcare-social service system is dominated by the large institutions and governmental bodies that inhabit Layers One, Two and Three. Innovation and actual impact on neighborhoods, i.e., "the places that shape us," on the other hand, is happening because of the efforts of groups like United Women of East Africa that are working within Layer Four and beneath the Clay Line. There is a bias in funding toward larger, more established organizations, i.e., those that provide services in the community but are not of the community- Layer Three. Even when resident engagement is a requirement for funding the resources more often than not end up going exclusively to Layer Three agencies. A study of federal of programs requiring community engagement showed that, while there was often community involvement in the beginning, eventually it dissipated due to lack of continued support and "neighborhood-based efforts" were "derailed by local politics that consolidated influence among the political elite."³⁰ As noted above, United Women of East Africa created more than their organization, they created a Village that is a generator of innovation. It is with the creation of the Village that these women achieved their dream of a community where their children would thrive and not just survive. With all their success, they continue to struggle to get the attention of major funders.
4. The strength of the community's voice comes from the base they have in their community. Tracing the evolution of the United Women of East Africa from a group of concerned women to a program within an agency to an organization with a voice in the public dialogue, shows that the strength of their voice increased significantly when they introduced organizing through the formation of City Heights Hope. This group's involvement in the access to healthcare study and Mid-City CAN's Access to Healthcare and Food Justice Momentum

³⁰ Price, H. (2011). A seat at the table: Place-based urban policy and community Engagement. Harvard Journal of African American Policy. 2011 Edition.

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Teams increased their visibility both within the East African community and within the broader community. As the group continued to grow in size, it demonstrated its capacity to turnout large numbers of community members to a School Board meeting, public hearings, etc. as well as present well-articulated concerns and solutions to policy makers. The programs/activities created and the policy impacts achieved by United Women of East Africa attest to this conclusion.

5. Having a physical space that is community-controlled, reflects the community's core values and is accessible to the community was key to the group's success. The move to the EACCC was the beginning of the Village. The power of the space is evident in how it gave the women confidence as they worked toward their dream and became a magnet for creative ideas. The EACCC is, indeed, the East African Cultural and Community Center. Since the relocation of United Women of East Africa to that space, it has become the heart of the East African Community. While the space is generally overseen and maintained by United Women of East Africa, it is owned by the whole community as evidenced by the number of groups that use the space, the level of activity in the space and the fact that people generally take care of the space. It is the place where people go if they have questions, concerns and, in the present political climate, fear.

A theme runs through these lessons and conclusions. There is a need to bring the community voice into the public dialogue in a different way. The community needs to be brought in as constituents not clients. The latter has no power in the relationship while the former is a full partner. There needs to be a way for the community, through its organizations, to be respected and accepted as a full partner with other actors in the healthcare-social service networks. One of the cornerstones of the War on Poverty was the principle of "Maximum Feasible Participation." While there was no formal policy or definition, the principle was that program development and implementation should have "maximum feasible participation" from those the program is designed to serve.³¹ In a special message to Congress, President Johnson endorsed this idea, saying "local citizens best understand their own problems, and know best how to deal with those problems." Authentic Demands are a means for establishing "maximum feasible participation." The ultimate conclusion of this case study is a full endorsement of place-based approaches as the most effective way to build healthy communities. Place-based theory predicts that "local residents have significant insight into what problems are most critical to address" and the Theory of Change operating here states that there must be a knowledgeable, organized and engaged community that can harness the Drivers and Change in order to articulate and push the community's Authentic Demands. United Women of East Africa is that knowledgeable, organized and engaged community that has harnessed the Drivers of Change, articulated Authentic Demands and has successfully pressed them forward.

Recommendations

Based on the analysis here, this case study leads to two recommendations. These are:

1. Bring the community into the conversation earlier and keep them in the conversation. The community should be defining the problem and, in consultation with experts, developing and implementing the solution. Carrying out this recommendation requires the following investments:

³¹ Melish, T.J. (2010). Maximum Feasible Participation of the Poor: New Governance, New Accountability, and a 21st Century War on the Sources of Poverty. Yale Human Rights & Development Law Journal, Vol. 13.

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- a. Strengthening the community's voice by re-establishing the principle of Maximum Feasible Participation and developing the means for ensuring the community has the resources to develop their Authentic Demands.
 - b. Invest in community-owned organizations. Innovation and neighborhood change happens within Layer Four. The organizations working within that layer need to be strengthened. Under present conditions these organizations spend an enormous amount of their bandwidth trying to find the resources to keep the organization going. These efforts take from the organization's ability to harness the creative energy within their community that can be used to address the community's issues. With stable funding, these groups could increase their reach and effectiveness significantly.
 - c. Invest in the education and training of community leaders and their organizations. An Authentic Demand requires that the community members have access to the same knowledge and information as all others at the policy table. For this to happen an investment must be made to provide community residents with the education, training and analysis necessary to be effective in policy discussions. These trainings need to be organized and regularized to be effective over the long term.
2. Funders need to include support for the development of physical-communal space that goes beyond providing offices and common meeting space in future planning and resource allocation. The analysis here is clear. What makes United Women of East Africa a stellar example of place-based practice is how it responded to the opportunities presented to it at the EACCC. The power of having this space is evident in the fact that it is what the women consider their greatest achievement and its potential loss of as the greatest threat to United Women of East Africa.

The concept of "Village" described here demonstrates the principle that the whole is greater than the sum of its parts. Its development was not on anyone's agenda, but it came to life as United Women of East Africa pushed forward on their dream of a place where their children could thrive. The Village came to be because of the energy of the women who created it and the availability of the physical space. If the space is taken out of this formula, it becomes questionable if the Village would have ever materialized.

Creation of such villages or facsimiles within a community can be a highly effective strategy in shaping our neighborhoods and building healthy communities.