

COMMUNITY MEMBER RECOMMENDATIONS FOR THE

CONGOLESE INTEGRATION NETWORK

WELCOMING REFUGEE COMMUNITY AND HEALING CENTER

NOVEMBER 2023

With gratitude to the Congolese Integration Network (CIN) staff and community members who shared their recommendations for creating a center that celebrates the African culture and welcomes warmly all who come to seek resources and build a community.



“

I was a mechanic in my home country. I am willing and wanting to learn to be one here. I have not seen my lawyer yet and don't know what will happen. I want to work.

Faather of two living in tent

”

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1 BACKGROUND

Today the Congolese Integration Network (CIN) is on a journey to plan and ultimately open the Washington State Refugee Welcoming and Healing Center (WA RWHC). CIN is building on its past work to advocate for resources to support the refugee community in the construction of a Refugee Healing Center where those suffering from trauma can feel safe and recover from their mental, physical, and spiritual wounds.

This report presents information that CIN gathered in a series of Listening Sessions where community members of different ages and backgrounds shared their ideas and priorities for the center. When thanking attendees at the listening sessions Floribert says, “This is your and our project. We want to hear your voice. We are doing, with your help, what we said CIN would do when we began our work six years ago. With your ideas we will create a Refugee Healing Center that features and celebrates our African culture, and is the first organization of this type in the State of Washington.”

The need for this center is great.

The Democratic Republic of Congo has been embroiled in a civil war since 1996 resulting in untold trauma and human rights abuses. Over 4,000,000 have lost their lives since 1998 and more than 2,000,000 Congolese people have been displaced from their homes. Many have experienced brutal violence and forced displacement. The economic and social toll has been devastating.

Washington state has welcomed and become the home to many who have experienced such trauma. Members of the Congolese community are one of the top five resettled populations. An estimated 8,000 Congolese refugees now call Washington state home. The Congolese Integration Network (CIN) was founded in 2017 to facilitate the social, economic, cultural, and spiritual integration of Congolese immigrants and refugees into American society by providing access to critical resources to empower this community.

CIN envisions a brighter, more inclusive future for Congolese immigrants and refugees, as well as immigrants and refugees from other nations. As part of their recently launched capital development project, they aim to open a vibrant hub for transformative services, housing, and community-building activities where newcomers can get access to stable housing, and services that support their successful integration to the community.

“

I have been raped and tortured. I came here after living in a detention center, to save my life, and to have one free of fear.

*Temporarily housed
Congolese woman*

”



The words and wisdom of CIN Founder and CEO Floribert Mubalama underscore the intent and aims of this center, and the strategies which CIN is taking to ensure that many voices guide this important work. When Floribert shares CIN’s vision to create a Healing Center where everybody can progress and prosper he describes a welcoming place where people who have experienced traumas, or may speak languages other than English, and need more support to seek resources can receive needed help.

As Floribert says “The life of a refugee is a life of struggle, with so many heartbreaking events. To understand the reasons for a Healing Center it is essential to know this in order to create a place where all people can be received whether they come as a refugee or asylum seeker. We want to be of help to all those who come to America. Some come by plane to visit and stay. Others come to study or work and stay. Yet others arrive as refugees and stay, and some as asylees seeking safety.” He added that, “The distance between the Congo and this country is long. So many who make this trek come with wounds, and traumas and stigmas which are internalized and externalized. If ignored, the effect on their integration suffers, and so does the community beyond. That is why the place we are envisioning is a Healing Center because it addresses the unmentioned concerns or struggles that so many people have in their hearts. When they enter our welcoming center, they will be greeted and helped by people who have shared their experiences, and who truly understand and have the expertise to help them overcome.”

“

Housing is just the beginning. I am lucky to have it, but it is expensive, and I need to keep earning more money. I also want to find ways to buy African goods and keep my children connected to other African children. A center would help that and be a place for people in my community to come together.

*Community member living
in an apartment*

”

2 CIN APPROACH TO GATHERING COMMUNITY FEEDBACK

A team comprised of CIN executive leadership team members, staff, architectural and community engagement consultants worked together to plan a series of four Listening Sessions.

CIN led the Listening Session planning and implementation, and twelve different CIN staff and volunteers assisted in program outreach, meeting set up, translation, facilitation, and food preparation. Angela Ngiangi Dansasila, Fund Developer and Data Manager at CIN, managed this work. In addition, several representatives of the architectural firm, Schemata, contributed their time and expertise to help CIN plan for the Listening Sessions, and to research possible locations for the Refugee Healing Center. Other team members include Business Government Community Connections (BGCC), the firm hired to document the Listening Sessions, and community engagement facilitator, Judith de Barros Consulting. Listening Sessions were also recorded. CIN staff and Executive Team members and Judith de Barros Consulting participated in post meeting discussions with BGCC to share additional thoughts about what they had heard and learned at the Listening Sessions.

The recommendations of the most vulnerable unhoused members of the community were gathered.

BGCC and CIN conducted individual interviews with Congolese asylees and refugees who are currently experiencing homelessness and living in tents outdoors on the Riverton Park United Methodist Church grounds, and with a handful of women who CIN relocated to temporary housing.

Community members who spoke many different languages shared their ideas and recommendations.

The Listening Sessions were designed to gather input from a linguistically diverse group of community members, including many people who were fluent in languages other than English. Listening Session 1 with CIN staff was conducted in English. At Listening Session 2 (with Congolese adults) and Listening Session 3 (with Youth and Young Adults) facilitators who spoke French, Swahili, Lingala, and English assisted in documenting the comments of community members. Listening Session 4 (with business owners) was conducted in French and English.

“

My children are living outside in a tent with me. We want a home. We are on a wait list for services. We have hopes but they are fading. We are grateful for the church help but there are not enough resources to go around.

Mother of three living in a tent

”



Incentives were given to Listening Session participants.

Community members received gift cards to honor their input and contributions. These incentives were greatly appreciated as most of the attendees were experiencing homelessness, had little or no income, and took public transportation to attend the listening sessions. Community meals were also provided at each session to all family members.

Each Listening Session followed a similar three-part approach to identify the service priorities and site design features that community members hoped to see in a future Refugee Healing Center.

At the beginning of the Listening Session, members of the CIN Executive Leadership team provided a brief description of the CIN vision for a Refugee Healing Center. Community members heard CIN's vision to have a Refugee Healing Center which includes vital resources such as housing, early learning, and computer labs, has space for collaboration, and strategies which reflect the aims of CIN to promote equity, unity, learning, and collaboration.

Following the introduction community members broke into small groups to discuss their service area priorities for the center. All saw a slide presentation that showed seven pictures that depicted different types of service areas that a Refugee Healing Center might offer. These seven areas included the following: food bank and pantry, childcare and learning center, community room, housing and wraparound services, mental health and health care, recreation, and education and workforce development. Community members were told that these areas were chosen because they were the main service needs that CIN staff had been asked by their clients to support since they first opened their doors in 2017. Listening Session attendees were invited to select which of the seven services were most important to focus on first in the Refugee Healing Center. All were informed that while people might consider that each of the areas are important a rating of them would help guide CIN

planning and fund development priorities. A numerical rating of 1 to 7 (with one being most important) was reached in the small groups and people raised their hands to determine the priorities. The conversations were animated with community members sharing their different ideas and perspectives.

In the third and last part of the Listening Session, community members reunited as a whole group to review three different Site Options. The architectural firm, Schemata, shared this information in a PowerPoint that described the characters that each of these three different types of sites featured. Site Option A was titled Residential Character; Site Option B was titled Park Character; and Site Option C was titled Arterial Character. The Site Option pictures showed the site's proximity to community space, apartments, childcare, services/stores, parks, or religious institutions. The related PowerPoint discussion was facilitated by both Schemata and members of the Listening Session Planning Team. Discussions shed light on the factors which community members regarded as important to consider when locating a center. Community members were told that an actual site or location had not been identified, and that their feedback would inform this effort moving forward. The whole group was encouraged to think about whether Site Features A, B or C more closely reflected their priorities. The main purpose of this exercise was to give community members an opportunity to explore their different perspectives about where the center should be located. For example, community members were encouraged to consider whether it is more or less important to locate a center close to a park or open spaces? Close to I-5? Close to childcare, grocery, retail, or frequent bus service? These and many other questions of this type were explored in the group discussions.

Each Listening Session focused on different segments of the CIN community.

In order to garner a broader range of community input the participants invited to engage in each session differed in age, primary languages spoken, and constituency, but all were members of the African community.



LISTENING SESSION 1 FOR CIN STAFF: Twelve (12) CIN staff, all of whom have lived experience, and experience as a provider to asylees and refugees were engaged in this Listening Session which was held at the CIN office in Tukwila. CIN early learning, housing, and health-related staff attended this session, which was facilitated in English by members of the CIN Executive Leadership Team.

LISTENING SESSION 2 FOR CONGOLESE ADULTS: Forty three (43) adults from the community, many of whom attended the listening session with their children shared their hopes and dreams for the center. This listening session was held at Midway Covenant church in Des Moines. Most attendees were experiencing homelessness and were living in tents, or were temporarily being housed in shelters. A subgroup group of 14 attendees were currently housed but still regarded the center as a vital community building resource. CIN staff and volunteers led and assisted in program outreach, meeting set up, translation, facilitation, and food preparation.

LISTENING SESSION 3 FOR CONGOLESE YOUTH AND YOUNG ADULTS: Fifty-eight youth, and young adults ages 12-24 attended this session which was held at the City of Faith Church in Burien. The attendees were divided into three different age groups (12-15; 16-18; and 19-24). The youngest group, ages 12-15, did not review the Site Options. Instead, they answered a question about what they want to do in the future. The 16 to 18 year old group was conducted in English, and the 19-24 year old group was conducted in French. Listening Session 3 also included a mixed age group comprised of youth ages 12-24. This diverse group included youth and young adults who spoke French, Lingala, Swahili, English, Spanish and Portuguese.

LISTENING SESSION 4 FOR CONGOLESE BUSINESSES: Eight African owned business owners participated in this session which was held at the CIN office in Tukwila. All shared their experiences and challenges as a business owner, interest in promoting their offerings to the Congolese and refugee community, and priorities for the Refugee Healing Center.

Community member comments were entered into a qualitative database to identify community member priorities for the center services.

Community member feedback was documented, quantified, and coded to identify service priorities, as well as to capture the main advice that community members had in each of the seven priority areas.

In addition, the comments of people residing in tents and the CIN rental house that is sheltering a handful of women are woven throughout this report to draw attention to the great need for a center that can house people and help them recover from the trauma and abuses they have endured, and continue to experience when they remain unhoused, and on wait lists to get legal assistance, and other services in the United States.



The overall aims of the above efforts were to get suggestions from people who offer and would likely engage in services at the Refugee Healing Center, and from business owners and community leaders who could potentially partner with CIN, and be future mentors or supporters to the community CIN serves.

3 COMMUNITY MEMBER RECOMMENDATIONS

A total of sixty three adults, and 58 youth and young adults, ages 12-24, participated in the four listening sessions.

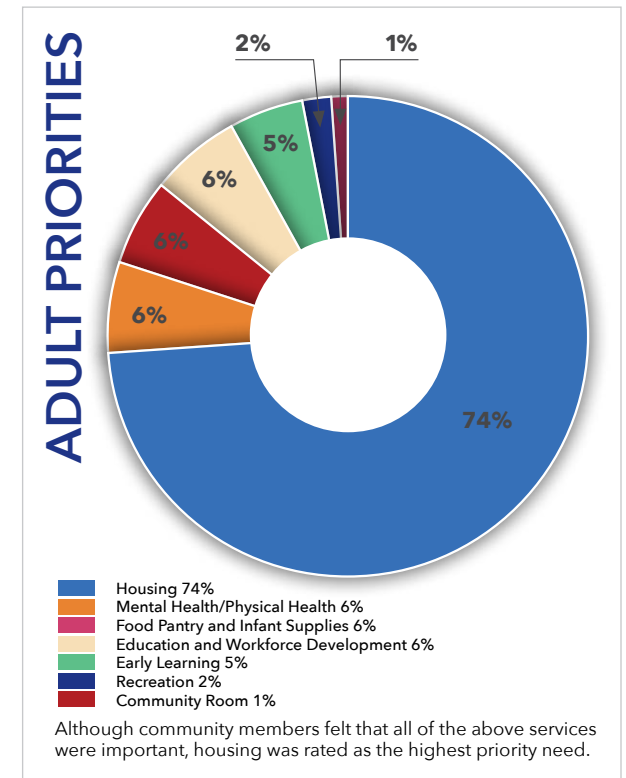
Each of the four Listening Sessions were well-attended; 121 community members enthusiastically shared their ideas and recommendations. In addition, many of the youth who participated in Session 3 were accompanied by their parents and siblings. An additional 32 parents, and 38 younger siblings were present at this session.

Community Members supported CIN's vision to open the Washington Refugee Welcoming and Healing Center. The overwhelming majority identified housing as the number one service priority.

Housing was clearly the number one priority identified by adult community members. While many community members said that all services were important, most reported that the most urgent need was finding housing for asylees and newcomers. The comments shared by young people also shed light on the traumas many were experiencing. One young girl said, "When you live outside in a tent it is cold and scary. You can't do your homework as well, or bring friends from school to your home. I don't want for people to know that this is my home."

Across listening sessions, adult priorities in order of highest to lowest were housing, food, mental health, education, early learning, recreation, and community room.

The other services listed on the chart were prioritized highly by community members, including adults who participated in listening sessions that were living in apartments or houses. Many people who were housed were encountering challenges in meeting their housing costs and in finding affordable childcare, or employment that was sufficient to cover their expenses.



“

All members of the African community want a center where we can build our community and greet new members to it. Where we can get things like vaccines, and information about schools.

Housed community member

”

LISTENING SESSION 1

CIN STAFF RECOMMENDATIONS

SEPTEMBER 7, 2023



CIN staff were passionate about what they wanted the Refugee Healing Center to offer, look, and feel like. There was a strong recognition that asylees need housing until their legal documents are ready. Their vision was that the Center be well-maintained, have a cafeteria, food, and clothes pantry. Several staff envisioned having a gathering space on the first floor of the Refugee Healing Center, and private areas for mental health, counseling, and workforce services on a different floor. They also wanted to be able to provide Congolese food, and have a commercial kitchen, which would be used primarily for cultural cooking.

When thinking about services to children one person said, “I know education is important for children, but their families may first need to address other needs, or we might set up children for failure. If they are not ready to learn they will skip school.” Another staff member suggested that “We need games and fun things for kids - especially for young kids to do. We should have separate areas for early learning on one floor and older kids on another floor.” One person said, “We want kids to move and be occupied. They need safe space where they can play inside and outside the center.”

Two staff members recommended that the Refugee Healing Center include a gym. One person suggested that the community rooms could be rented out from time to time to generate revenue. Three CIN staff suggested that the community room could be designed to accommodate cultural gatherings, workshops, cooking classes, and prayer. All emphasized that the Refugee Healing Center needed to be a clean, welcoming, and warm space that reflected and celebrated the African culture.

Listening Session 1 CIN Staff Service Priorities (in order of highest to lowest)

- 1. Housing**
- 2. Food Pantry and Infant Supplies**
- 3. Mental Health/Health Care**
- 4. Early Learning**
- 5. Education/Workforce Development**
- 6. Recreation**
- 7. Community Room**

Staff members said that the characteristics that many wanted to see in a center included walkability; frequent bus service; open space/parks; a highway within a couple miles; housing and apartments nearby; access to an elementary school education; gardening space for a community pea patch; and an environment that is not overly noisy.



LISTENING SESSION 2

ADULT CONGOLESE COMMUNITY RECOMMENDATIONS

SEPTEMBER 9, 2023

At Session 2 community members were assigned to French, Swahili, English, and Lingala tables, which were staffed by interpreters and facilitators. The feedback from this session was reviewed to identify the most frequent recommendations that all groups shared in common. These are listed in order of frequency, from highest to lowest.

- **Provide housing for asylees and refugees until they have the documentation and resources needed to move.**
- **Ensure that asylees have access to food and clothing and also basic goods, like infant supplies.**
- **Welcome asylees, refugees, community members and community providers into a safe place which has caring staff, who have lived experience and the knowledge to connect them to resources.**
- **Showcase the Congo and its culture, and be a place where visitors are greeted by the Congolese flag and pictures.**
- **Open a center which is well-cared for, and ensures the safety of all who enter.**
- **Include space for English language classes, computer, and kindergarten readiness services,**
- **Set aside private space for people who need to receive counseling and other services.**
- **Offer space for community gatherings, and cultural, and spiritual events.**
- **Have a commercial kitchen/cooking area where people can cook African food, gather, and connect with other community members.**
- **Designate an area where young children can safely play while parents engage in other activities.**

In addition, the Lingala group advocated for transportation resources, workforce training for women, and assistance getting driver's licenses and health insurance. The French group advocated for sports activities, dance, music, and martial arts. One woman said, "People won't come to the center if it is only focused on problems. It needs to also be about celebrations and joy-filled ceremonies." The Swahili group identified the need for culturally appropriate homecare for elders, and daycare that is culturally appropriate for people to use when their parents are at work.



LISTENING SESSION 3

YOUTH AND YOUNG ADULT RECOMMENDATIONS

SEPTEMBER 16, 2023

12-15 year old group

The 12-15 year old youth voiced a need to:

- **Provide jobs for homeless people living in shelters.**
- **Create jobs for people.**
- **Feed homeless people.**
- **Support the career dreams of children which varied greatly and included an interest in becoming a chef, surgeon, travel nurse, solar power business owner, immigration worker, model, athlete, skin care business owner and solar power entrepreneur).**
- **Make shelters so that all people have houses.**

The comments of the youth in this group underscore their awareness of the enormous struggles which families face in their efforts to afford food and shelter, and find jobs. Many of these children were currently experiencing homelessness and living in tents. When asked what he would like the center to do, one twelve year old boy said, "I want it to be fun, and something that is positive and known as helping people who move to America to get a better life." A thirteen year old girl who said she prioritized recreation in last place said, "I think this is important, but maybe we can make sure that the center is close to places where kids and adults can exercise. I think the center, though, should at least have a playground for little kids."

The children in the 12-15 year old age group prioritized the following services, from highest to lowest.

- 1. Education**
- 2. Mental Health**
- 3. Food and Infant Pantry**
- 4. Housing**
- 5. Early Learning**
- 6. Community Room**
- 7. Recreation**

16-18 year old group

Youth in this age group had a different set of priorities than the 12-15 year olds. Some expressed a need to help children get prepared for school, and for tutoring. Others identified problems caused when people cannot get documentation, or afford a place to stay. One seventeen year old boy said, "People don't feel happy or trust others, but they are not sure that there is anyone who wants to listen to these problems." A fifteen year old boy said, "When you first get here from another country you have no friends, and need a way to connect to others who understand how you feel and can teach you about how things work in the United States."

Several 16-18 year old youth had concerns about bus safety, and questions about whether the Refugee Healing Center would be in close proximity to parks, bus stops, and the highway. They also voiced a need for the center to have spaces where people could hang out safely with each other, and access resources like backpacks and athletic supplies that allow them to engage in school sports. Children in this age group also noted that finding a job is hard for people who speak different languages. They said that many people might need to participate in English-as-a-Second Language classes.

The 16-18 year old group prioritized the following services, from highest to lowest.

1. Early Learning
2. Health Care
3. Food and Infant Pantry
4. Housing
5. Education/
Workforce Development
6. Open Space/Recreation
7. Community Rooms

19-24 year old group

The discussion in this group did not result in the prioritization of services. Rather, young adult community members focused largely on three issues, workforce development, mental health, and safety.

Workforce Development

Group members spent much of the time discussing the importance of workforce programs, and of young adults having opportunities to earn certificates in areas such as technology, health care, and manufacturing. There was a general consensus that young people do not know about existing workforce programs, or of ways to apply for these opportunities. One young woman asked, "Would I be eligible if I don't have a work permit to go to college and study to be a nurse - would I be able to get tuition assistance?" Two people in this group suggested that driving lessons be offered at the Refugee Healing Center and one identified the need for an onsite computer lab, and training that would help community members earn advanced technology certificates and apply for online jobs.

Mental Health

Young people in this group identified the importance of having youth mentors and counselors available at the center. A young man said, "It is not usual in our culture to talk about mental health problems. These are not topics we are encouraged to talk about - even with our own family, but many of us are stressed." One young adult said, "Some of the people I know are in crisis. Maybe a youth mentor, or youth counselor, could be on call or have weekly visits to the center."

Safety

The young adults were very interested in having the center located in a neighborhood that was regarded as safe. One young woman said, "I want the center to be located in a safe area, and I want the center to be safe inside too." Group members were most supportive of the idea of locating the center in an area which is near parks and family homes.

“

I cannot return to the Congo if I want to live. I cannot live if I do not begin to work. I am willing and trying to be patient. Many of us lost our documents and papers on our travel to America. You cannot imagine such a feeling when you lose proof of being a person, and lose hope of being treated like you are someone who is ready to reclaim and rebuild her life.

*Temporarily housed
Congolese woman*

”

12-24 year old group

The youth session had an overflow crowd of youth that met in a large group supported by multiple CIN staff who provided translation assistance. In this group young people identified the need for housing; warm clothes for children; places to play; cultural food; health insurance for older youth; African food; American football; and increased bus safety.





LISTENING SESSION 4

BUSINESS LISTENING SESSION

RECOMMENDATIONS

OCTOBER 27, 2023

The fourth listening session was with a group of eight business owners. All had a strong interest in learning more about CIN and the plans they had to open a Healing Center. The meeting was held at the CIN office. The business owners had different specialties, including catering; cooking; event planning; importing of African goods such as cosmetics, clothing, spices, and other goods; clothing retail and alterations; African sewing and embroidery; and real estate. In addition, one person focused her work on community engagement and on being a touchpoint for involving Congolese people in events and activities, and another was a conduit and advisor to international students. Most had business licenses, and a couple were in the process of launching a business.

The discussion was informative underscoring the vital role that businesses currently play or could play in mentoring refugees, as well as the obstacles they face. One of the business owners was also a leader in her church. All had strong ties to the Congolese community, and most depended on members of the African community as their primary customer base. The conversation focused largely on the four areas presented below.

What business owners need in general to grow and maintain their businesses.

Business owners need information about:

- **how to get a business license and develop a business start-up and sustainability plans.**
- **business start-up loans.**
- **organizations such as the Department of Commerce and their Small Business Initiative, Employment Security, and small business entrepreneurship classes such as those offered at Highline College.**
- **available resources and support to help people retain their businesses.**
- **state and federal taxes and other regulatory information.**

Particular challenges faced by African owned businesses in their work.

African owned businesses face numerous challenges. These include:

- **the high cost of space to import, rent, show, or store their goods.**
- **the need to market their goods more effectively and affordably.**

Business owners know that there is a demand for the products and services they offer but the above challenges make it difficult for them to secure, promote, showcase, and provide services. Start-up resources would help, as would guidance in how to cut costs. One business owner who was an event planner said, “Event spaces are expensive, and it is hard to breakeven.” A person who ran a restaurant and shared kitchen space with another local business owner said that the arrangement was impractical, but necessary to cut costs.

Ways in which CIN could support and work with other businesses.

Business owners suggested that CIN could play a role in elevating community interest in their businesses by:

- **promoting businesses on their webpage, potentially charging business owners for this service as a way of earning money.**
- **setting aside space in their future center where businesses could periodically showcase their goods.**
- **holding workshops on cooking or sewing, or sponsoring community events, as a way of bringing the community together, and potentially as an income earning arm of the center.**

The above activities would help businesses gain more visibility. They would also pave the way for CIN to develop a new line of business by charging rent to people who want to use the space for celebrations or other events.



Challenges faced by international students.

Many international students face financial challenges, but want to support local businesses and members of their community. They need more information about:

- **how much they can earn.**
- **where they can work as volunteers, interns, or employees.**
- **where they can find affordable housing, and develop financial plans for responsibly using the money which their families send them.**

“To date,” one business owner said, “Students are vital resources that are largely untapped.” Some could use their connections and knowledge to support newcomer asylees and other Congolese and African families. A stronger system needs to be in place to ensure that international students have multiple opportunities to build and share their skills.

“

It is complicated when you are new here. Lots of buses. Trips to get assistance and papers - all sorts of papers to complete. Wait lists to get help. Time to see a lawyer. But at least I am in a house now and can talk to people here about it and get their help. When there is a center for newcomers there will be a place that will be another home. And when there is shelter for people - safe shelter where women are safe then good things will start to happen.

*Temporarily housed
Congolese woman*

”

Business Owner Priorities for the Center

Business owners shared their individual suggestions for prioritizing services at the Healing Center. Similar to other Listening Session groups they agreed that all services were important, but that housing was their highest priority. Business owner priorities, highest to lowest were:

1. Housing
2. Education and Workforce Development
3. Food and Infant Pantry
4. Recreation
5. Mental Health/Health Care
6. Early Learning
7. Community Room

One business owner said, “Unless people are housed they cannot be good customers or workers. Housing comes first.” When talking about the importance of education another person said, “People need an orientation to the United States economy and educational system, and on basics like going to the store, or to a bank. Also, many need to learn about their rights as a worker in this county. Some business owners were also concerned that new arrivals have access to African food, and places to buy and cook African food. They also suggested that the Healing Center be in a venue where new arrivals could live, eat, and become part of a caring community.

“

I am ready to and want to work but cannot get a work permit. I am waiting and waiting.

*Man living
in a tent*

”

4 NEXT STEPS

The need for a center where people could live, gather, and get help was mentioned frequently by CIN staff, community members, and business owners. When organizing the Listening Sessions this need surfaced again, when it became evident that CIN's office could not accommodate the growing numbers of community members who wanted to share their suggestions and ideas, and could not readily afford the cost to rent space. To address these needs, CIN has officially launched their capital development campaign to introduce the 1st Washington Refugee Welcoming and Healing Center (WA RWHC) on the CIN website. The Listening Sessions are one of the strategies which CIN is using to plan for their future Refugee Healing Center. CIN is also in the process of visiting other local community facilities that integrate housing and wraparound services to garner useful planning and capital fund development guidance from others who have engaged in such efforts. Executive Leadership staff are also meeting with local providers, including those which offer early learning, housing, workforce development, and health related services to see what kinds of culturally accessible and appropriate resources they can bring to the future center, or provide in collaboration with CIN at nearby locations.

“

My husband was taken from me and killed. I have seen violence, and felt afraid living in tents, and now that CIN has found a bed for me in a house, I am starting to regain my health, my strength and hope.

*Temporarily housed
Congolese woman*

”

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