



# ANNUAL REPORT

2022



# “I’ve seen that you never left us.

*You cared for us in times of difficulty. I really like it here at Eleison because this is where I feel safe. If there’s a change in my feelings, if there’s a change in my life, I can openly share it here. Out of all the organizations that I have known, you were the first to help (after the typhoon). I am really thankful to Eleison. You are always there to give comfort, always checking in on us. It’s really different here at Eleison. When I found this organization, this is where I see that if I have a problem, you will listen. You always give me comfort.”*

—— Eleison Client

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# A Letter From Our Founder



Dear Friends:

Thank you for your ongoing support for Eleison Foundation. As we reflect on 2022, we are grateful for the many community members who have each, in their own way, contributed to the mission of Eleison. We would not be able to serve our clients without your partnership and support.

2022 has been a year of tremendous growth for Eleison following our decision in 2021 to broaden our operations in the Philippines to meet increasing community needs. Due to the widespread destruction caused by Super Typhoon Odette, we focused considerable effort in the beginning of 2022 on providing emergency relief to our clients, including essential food and water, psychosocial support, and cash transfers. This emergency response program provided critical assistance to survivors, many of whom lost their homes and access to basic food and water during the crisis.

Another significant achievement in 2022 was the launch of the Healing and Resilience after Trauma (HaRT) program, a group mental health intervention for human trafficking survivors. Consistent with our commitment to research evidence and high-quality care, we

simultaneously began a convergent mixed-methods study to evaluate the impact of this community-based mental health intervention on survivors' psychological and social well-being. This project addresses a critical gap in the anti-trafficking sector, contributing to the global evidence base on mental health services for survivors of human trafficking in low-resource contexts.

Since our inception, the priorities and voices of survivors have always been at the heart of our work and organization. As we continue to grow and expand our impact in 2023, survivor leadership, research evidence, and community partnership will remain at the center of everything we do.

Thank you for your sustained partnership with our team. We are grateful for the opportunity to continue to collaborate with you in combating human trafficking and gender-based violence in deeply-affected communities.

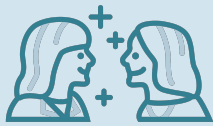
With sincere thanks and appreciation,

A handwritten signature in cursive script that reads "Laura".

**DR. LAURA CORDISCO TSAI**

# What We Do

Survivor leadership, research evidence, and community partnership are at the heart of everything we do.



## SURVIVOR SERVICES

We help survivors of human trafficking and gender-based violence recover from trauma, support their resilience and security, and reduce the risk of re-exploitation. We use evidence-based and trauma-informed approaches to meet survivors' real needs.



## RESEARCH

We work diligently to provide the highest quality programs in the sector. We integrate research into everything we do so that we continually strengthen our programs, building an evidence base for effective practice.



## CAPACITY BUILDING

We train and mentor other service providers in survivor-centered, evidence-based, and culturally relevant interventions. We share knowledge from our research and practice to strengthen the quality of care in the broader movement.



## GRANTMAKING

We provide small grants for innovative, client-centered, early-stage programs for survivors of human trafficking and gender-based violence. We supplement grant funding with technical assistance and research to prepare grantees to scale up effective practices.

# About Us

# Who We Are



## **We value research and evidence**

We are methodical in figuring out what works. Scientific research on human trafficking is scarce, limiting the effectiveness of anti-trafficking programs. We integrate rigorous research into everything we do, partnering with research scholars, survivors, and communities to make programs more effective. We share what we learn to help everyone in the sector.

## **We are survivor-centered**

The rights, perspectives, and priorities of survivors are at the heart of everything we do. We value survivor leadership, with survivors as key members of our team. We use participatory processes in which survivors continually give input on our programs, which we tangibly put into practice. We center survivors' voices and wholeheartedly commit to ethical storytelling.

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## **We're not afraid to do things differently**

We value innovative and cutting-edge approaches. We don't need to follow what everyone else is doing. Through our outside-the-box approach, we aim to help the anti-trafficking movement progress and implement more effective and survivor-centered approaches.

## **We are trauma-informed**

We recognize the pervasive impacts of trauma and use trauma-informed approaches in all our work. To support survivors in their recovery, we prioritize safety, choice, collaboration, empowerment, trustworthiness, relationships, and responsiveness to culture, gender, and historical trauma.

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## **We have deep roots in the community**

We don't conduct research or train service providers from a distance. We make long-term commitments to the communities in which we are working. We do the work ourselves too. We bring our own experiences providing survivor services to train staff in a supportive manner that is grounded in shared experiences and mutual understanding.

## **We are a bridge between systems**

Through integrating our research with our practice, we bring together stakeholders that often work separately. We bridge the gap between academia, survivors, and communities toward a common goal of more effective programs and services.

# Our Impact

## At a glance

# 125

### SURVIVORS SERVED

In 2022, a total of 125 survivors of human trafficking and gender-based violence (GBV) received services from Eleison, including community mental health, crisis intervention, emergency relief, and economic empowerment services.

# 286

### TYPHOON RESPONSE ENGAGEMENTS

Following Super Typhoon Odette, Eleison conducted 286 engagements with 77 survivors, providing relief goods, cash transfers, psychosocial support, and referrals.

# 211

### PROGRAM SESSIONS

Apart from our emergency relief services, we conducted an additional 211 group and individual sessions with clients for our Barug, Bansay, Community Mental Health, Crisis Intervention, and Survivor Leadership Council programs.



### HUMAN TRAFFICKING RESEARCH INITIATIVE (HTRI)

Eleison received a grant from HTRI, funded by the US Department of State, for a mixed-methods evaluation of a new and innovative mental health intervention.



# Our Impact

We integrate monitoring and evaluation in everything we do – bringing together research and practice.

# 100%

## SUICIDE RISK REDUCTION

100% of Eleison clients experiencing suicidal ideation and behavior demonstrated reduced risk for suicide, per standardized risk assessments. 93% sustained lower suicide risk levels over time.



## RESEARCH PRODUCTION

We published 4 research papers and advanced 4 research studies. We conducted 33 quantitative surveys, 10 in-depth interviews, 29 feedback forms, and 5 focus group discussions with 65 program participants.



## PARTNER ENGAGEMENT

Eleison joined the national Inter-Agency Council Against Trafficking. We signed MOUs with 6 partners and provided capacity building to 27 staff from other anti-trafficking organizations.



## CRISIS INTERVENTION

We conducted 79 crisis intervention sessions with survivors in acute crisis who experienced suicidal thoughts, behaviors, and suicide attempts, as well as sexual and physical violence.

# Typhoon Emergency Relief

77

## SURVIVORS SERVED

In total, 77 survivors of human trafficking and GBV received services from Eleison's emergency relief program.

286

## CLIENT ENGAGEMENTS

Throughout our typhoon response, we held 286 client engagements for distribution of relief goods, needs assessment, and psychosocial support.

## Forms of Assistance

68

### 1. EMERGENCY RELIEF GOODS

Immediately after the typhoon, we distributed 68 relief packs containing emergency food, water, and hygiene kits to clients devastated by the typhoon's destruction. These relief packs were also shared with clients' families.

114

### 2. EMERGENCY CASH TRANSFERS

We conducted a needs assessment of the most urgent needs. We provided 114 cash transfers to help clients rebuild their homes. Cash transfers also covered other critical needs for food, water, and medical care in the aftermath of the typhoon.

218

### 3. PSYCHOSOCIAL SUPPORT

We implemented 218 engagements of psychosocial support, crisis intervention, and psychological debriefs for clients experiencing adverse mental health impacts, along with referrals to community services.

# Survivor Services

# Typhoon

# Emergency

# Relief



In mid-December 2021, Super Typhoon Rai (known locally as Odette) devastated parts of the Philippines, causing \$500 million in damage. The typhoon disproportionately harmed vulnerable communities, including Eleison’s clients. From December 2021 through April 2022, **our team of five staff conducted a four-phase emergency response program** – named the Odette Emergency Response (OER) program.



## Phase 1: Emergency In-Kind Assistance

Eleison conducted outreach to all our active clients and provided emergency relief packs containing food and water. Eleison staff drove door-to-door in the aftermath of the typhoon, hand-delivering emergency relief goods to clients’ homes. This in-kind assistance addressed the emergency need for food and water.



## Phases 2 and 3: Cash Transfers, Psychosocial Support, and Referrals

Based upon a continual, structured assessment of client needs, Eleison sent cash transfers to clients for housing, food, water, medical, mental health, and crisis needs. Additionally, we provided psychosocial support and referrals to community services to address further needs.



## Phase 4: Mental Health Support

Mental health concerns became more apparent as time passed. In the closing phase, Eleison prioritized mental health support and referrals for other community services. We concluded with psychological debriefs and focus groups to gather input from clients on the OER program.

A young man with dark hair, wearing a red polo shirt and grey pants, is smiling and holding a white sign. The sign has the text "END GENDER-BASED VIOLENCE" written in bold, black, underlined capital letters. He is standing in front of a whiteboard.

**END**  
**GENDER-BASED**  
**VIOLENCE**



# Survivor Services Crisis Intervention



We provide immediate, short-term counseling and psychosocial support for survivors in crisis. We connect survivors with emergency services needed to help them stabilize, stay safe, build coping skills, and strengthen support systems.

Survivors of human trafficking and gender-based violence (GBV) commonly experience many forms of crisis in their recovery, including suicidality, interpersonal and community violence, homelessness, and acute mental health crises. Crisis support from trained and trusted persons is critical in helping survivors stay safe. **In 2022, Eleison conducted a total of 79 crisis intervention sessions and 66 referrals to other services.**

During crisis intervention sessions, survivors are assisted in strengthening their internal and social supports, an approach that is well-suited for settings with limited formal mental health services. Among the clients in our crisis intervention program, **suicide risk decreased for 100% of survivors** and **93% of these clients** sustained lower suicide risk levels over time.

Eleison provides ongoing support to clients who have exited the crisis intervention program by monitoring for future signs of distress, assisting with referral needs, and being available to reopen crisis cases if safety concerns re-escalate.

## Why it matters

- Research has found high rates of suicidal ideation and attempts among human trafficking survivors. For example, recent research studies have shown that over 50% of survivors report suicidal ideation and over 40% report ever attempting suicide.
- Since survivors often experience familial rejection, community stigmatization, and a deep lack of social support, crisis intervention services from trained and trusted staff are critical in supporting survivor safety and enhancing healthy coping skills.



# Survivor Services Survivor Leadership Council



The Survivor Leadership Council (SLC) is an advisory board of human trafficking and gender-based violence survivors who have graduated from at least one of Eleison's programs. SLC members partner with our staff to ensure Eleison's programs and research are survivor-centered.

## Key Activities and Accomplishments:

- **Shoe Drive:** In collaboration with the Department of Social Welfare and Development, the SLC planned, coordinated, and conducted a successful shoe drive as a community outreach activity. SLC members screened beneficiaries, packed, and distributed all donations to community members in need.
- **Healing and Resilience after Trauma (HaRT):** SLC members provided feedback regarding the new HaRT program prior to its launch. The SLC joined a pilot of the HaRT orientation, gave input on the orientation content, and shared testimonials for prospective clients.
- **Monitoring and Evaluation (M&E):** The SLC participated in a focus group discussion (FGD) about their experiences as SLC members and suggestions for improving the SLC. In other Eleison FGDs, they shared suggestions for expanding and strengthening Eleison's services.
- **Community Mental Health:** SLC members joined Eleison's community mental health education centered on managing emotions. SLC members shared their thoughts on the topic and provided feedback on delivering the content to other survivors.
- **18-Day Campaign against Violence Against Women (VAW):** SLC attended a campaign event where they learned about the current local VAW situation and gained insight on how to continue supporting the campaign alongside other organizations in Cebu, Philippines.
- **Additional Activities:** SLC members supported Eleison in numerous other ways, including sharing a testimonial to co-clients in Barug, participating in a partner organization's research interview, and joining practice interviews for survey instrument validation, among others.

*"As a member of the Survivor Leadership Council (SLC), we are heard and are able to make suggestions that are helpful for other clients. It's a way of giving back to Eleison for all of the help I've received. I feel like I am trusted and my voice is respected, and I really appreciate that. I want to repay that trust and care by doing my best and hoping that I can do something good for the SLC and other clients." - SLC Member*

# Survivor Leadership Council



## Why it matters

- In the anti-trafficking movement, survivors' voices are often not centered or included, reducing the effectiveness of anti-trafficking policy and programming.
- The exclusion of survivors from decision-making processes reproduces harmful patterns from survivors' trauma histories, such as a lack of power, choice, and control.
- The centering of survivors' perspectives, priorities, needs, and recommendations is critical in ensuring that all activities are conducted in a trauma-informed manner. Survivor leadership is essential in making this happen.







# Survivor Services Healing and Resilience after Trauma



Healing and Resilience after Trauma (HaRT) is a 12-week group mental health intervention that integrates breathing exercises, guided visualizations, yoga poses, and supportive group discussions. HaRT focuses on three key themes: 1) safety in the body, 2) radical self-love, and 3) healthy relationships.

Stigma and extremely limited and inaccessible mental health services in the Philippines result in unmet mental health needs for survivors, who commonly suffer from depression, anxiety, stress, self-harm, suicidal ideation and behavior, and post-traumatic stress disorder (PTSD). An urgent need exists for evidence-based mental health interventions for survivors that can be implemented in community-based settings. The HaRT program addresses this gap, providing accessible mental health care to survivors.

In 2022, we launched the first two HaRT cohorts with 11 survivors and a total of 24 weekly sessions. Survivor participants expressed feeling physically relaxed, socially accepted, and emotionally supported. They report that after and outside the sessions, they feel less stressed, more restful, and are noticeably kinder to themselves. They also expressed learning to establish personal boundaries and develop healthier relationships with other people.

In partnership with HaRT and the University of Alabama, Eleison is simultaneously conducting research to evaluate the impact of the program on survivors' mental health and social well-being. The current HaRT research study will culminate after a mixed-methods evaluation of the intervention with three cohorts of HaRT participants.

*"I noticed physical changes in my body. I did stretching and the poses at home. When I came home after the HaRT sessions, I could sleep better. I'm no longer emotional. For example, if I feel like crying, I would no longer dwell on it so much. I listen to the negative things about me, but I no longer dwell on them. I no longer give time for that. I feel happiness because I feel I have value. In the HaRT discussions, I heard 'you're important.' When I shared during the HaRT sessions, I can say that I was accepted." – HaRT Participant*





# Survivor Services Community Mental Health



Survivors are provided with accessible and culturally-sensitive mental health services in safe and trusted community-based settings through our clinical case management and community mental health (CMH) education services.

In 2022, we have conducted and funded a total of **30 sessions consisting of clinical case management, counseling, and psychosocial support**. In addition to sessions, we provided referrals to community resources and supported clients in navigating mental health treatment. Throughout these sessions, we helped survivors achieve treatment goals, develop coping skills, and strengthen support networks.

This year, we also led **CMH education activities for 31 survivors and 18 service providers**. These sessions were provided in direct response to requests from survivor leaders and community partners in the anti-trafficking movement. The interactive learning sessions raised mental health awareness while also providing practical applications for managing emotions and promoting mental health and wellness.

*"It's my first time hearing Eleison's presentation, but I think this is the best activity I've ever heard because it's all about wellness and the dimensions of health. I'm proud and thankful because I have learned something new."* – **CMH Education Participant**

## Why it matters

- Significant barriers exist to mainstreaming high-quality mental health services in the Philippines. Most interventions are costly, overemphasize clinical mental health, and rely on the availability of specialists, who are extremely limited in number and often not accessible to marginalized communities.
- Recovery from human trafficking and gender-based violence is a long journey. Survivors benefit from safe and supportive relationships and communities where they can heal in their own time.

# Survivor Services Bansay Program



## Bansay – (Cebuano) to practice



Bansay is a two-day financial literacy training course for survivors, followed by individualized support sessions.

Human trafficking survivors identify financial security as one of their highest priorities. They are, however, met with economic barriers as they exit human trafficking and re-enter the community. Survivors experience pressure not only to ensure their own financial stability but also that of their family members. Eleison helps survivors achieve greater financial security through our economic empowerment programs, including the Bansay and Barug programs.

The Bansay financial literacy training covers savings, budgeting, debt management, financial negotiation with family members and peers, and emotional wellness and self-care. Bansay serves as a stepping stone to our 2-year matched savings program, Barug. After Bansay, Eleison offers counseling sessions to help each survivor achieve his or her goals.

In 2022, we conducted **8 Bansay batches with 33 survivors, including a total of 22 group sessions.**

*"Bansay has had a great impact on me. I am inspired to implement the strategies. The information is also shareable. I was happy to join Bansay because I know people from Barug, so when I joined Bansay, I felt like I'm with a family.*

*I felt that Eleison has a heart for us. I don't have to be intimidated or feel scared. The program has impact not just because of financial literacy, but also the feeling of family.*

*I know some who talk about mental health and they would think about Eleison immediately. It is not just about the Bansay program but also about how they [Eleison staff] make you feel, especially when they keep on checking in on us."*

**- Bansay Participant**



## Survivor Services

# Barug Savings Program

### Barug – (Cebuano) to strongly stand up

Survivors commonly experience significant financial vulnerability, deepening their risk of experiencing further violence and exploitation. Barug is a two-year matched savings program for survivors and their family members. Barug directly responds to the need for survivor-centered and trauma-informed economic empowerment interventions that help survivors strengthen their safety nets. The program utilizes a three-pronged approach:



**Matched savings program:** During the first year of Barug, participants' savings are matched at a 1:1 ratio. Matched savings can be utilized for pre-approved purposes, including education, medical care, family and personal emergencies, housing repair, and employment expenses.



**Financial literacy training (FLT) course:** This is a 3-month FLT course that focuses on skill-building in budgeting, savings, debt management, financial communication, and emotional wellness through group-based peer learning activities and individualized sessions with Eleison staff.



**Individual and peer support sessions:** These sessions are offered after the FLT. They support survivors in making progress toward individualized goals, putting into practice skills learned in the FLT, problem-solving, and building a supportive peer community.

Prior research has shown that the Barug program is effective in enhancing both the financial and psychological well-being of survivors. In 2022, Eleison conducted **2 cohorts of Barug with 11 survivors, including a total of 31 sessions.**

*"When I joined Barug, my savings became really organized... With Barug, you should have goals in your life, like, what is this [savings] for? What's your goal for it? For example, this savings is for emergencies. This one is for the education of my son. This one is for myself. You should focus on your goal and be absorbed in your long-term goal." – Barug Participant*

# Research Barug Program Assessment



Upon escaping human trafficking, survivors often experience significant financial hardships, which can increase their risk of re-trafficking. Few economic empowerment models for survivors exist, and research regarding the effectiveness of such programs is lacking. We conducted a study to explore the impact of the Barug program, our 2-year matched savings program for survivors in the Philippines. A community partner collected data from 10 survivors who had graduated from Barug, including 10 interviews, 3 focus group discussions (FGDs), and 10 pre-post surveys. Our qualitative research revealed the following themes:

**Escaping a Cycle of Debt:** Many survivors were able to escape debt and gained skills to avoid future debt. In addition to enhancing financial security, escaping debt also had emotional benefits, such as a reduction in anxiety and a heightened sense of control.

**Prioritizing Asset Development:** Survivors learned regular savings practices that enabled them to build a safety net. Many articulated how building savings helped to strengthen their future orientation.

**Psychosocial Impact:** Pre-Barug, financial instability caused survivors to experience fear, anxiety, and stress. After Barug, survivors reported lower stress levels and less anxiety.

**Enhanced Budget Skills:** Participants developed budgeting skills to track their expenses, which helped in building savings and managing debt.

**Improved Family Relationships:** Survivors gained skills to address family financial expectations, such as setting boundaries and openly communicating.

Our quantitative data demonstrates that **30% of survivors had savings before Barug, whereas 70% of survivors had savings after participation.** Qualitative and quantitative findings support one another and demonstrate that Barug's three intervention components (matched savings, financial literacy training, and support sessions) help survivors improve their financial stability, as well as enhance their psychosocial well-being.

*"Because of Barug, I was able to save money for emergencies. I thought before that I couldn't save because I had a lot of debts. Because when you have a lot of debts, it will cause you headaches and emotional distress. Now, it's better. If you know how to budget and negotiate, the stress will be minimized."* – Barug Participant





# Research

# Psychosocial impact of photovoice

We conducted research regarding the impact of photovoice participation on survivors of human trafficking and GBV. Photovoice is a community-based participatory research method (CBPR) grounded in feminist theory, documentary photography, and empowerment education.

This photovoice study explored the meaning of economic empowerment to survivors. The study occurred in the following stages:

- 1) Participants took photographs and wrote narratives about their experiences.
- 2) Participants shared their photographs and experiences with peers.
- 3) Survivors conducted a qualitative data analysis of the study transcripts.
- 4) A member check was conducted with all study participants to finalize themes.
- 5) In the fifth and sixth meetings, survivors planned a final community forum to present their research findings.
- 6) Participants presented their photographs and study findings at the closing community event.

At the end of the study, we conducted a focus group discussion (FGD) with 12 participants to understand the psychosocial impact of photovoice participation. We completed thematic analysis of the closing FGD, along with notes written by survivors at the closing community event.

The analysis revealed these findings:

**Overcoming Shame:** Survivors felt a reduced sense of shame upon sharing their stories and felt solidarity through shared experiences.

**Sense of Belonging:** Survivors built community with other participants and staff.

**Enhanced Self-Efficacy:** Participants felt accomplished in gaining new skills and more aware of their own abilities.

**Inspiration:** Participants felt inspired, empowered to support their community, and more hopeful about the future.

**Bravery:** The emotionally supportive environment helped survivors face their fears by sharing their stories with a wider audience.

Research informing survivor services is often undertaken in ways that diminish survivor agency. In contrast, photovoice is a trauma-informed and survivor-centered research method that also shows promise as a psychosocial intervention for survivors, especially in low-resource contexts.

*"I learned that when you have a problem, you should share it to others so you lighten what you feel. You don't have to be ashamed so that when you share, they would also help you. And I was able to say to myself that I am not the only one with the biggest problem, there are still others. Through photovoice, that is what I learned. Before I would just keep everything to myself."*

– Photovoice Participant





# Research Survivor-defined framework for economic empowerment



We conducted a photovoice study to explore what economic empowerment means to survivors of human trafficking and GBV, resulting in the generation of a survivor-defined framework for economic empowerment. This study is the first in which survivors defined economic empowerment for themselves, a critical step in ensuring that services address the true needs and priorities of survivors.

**The framework includes seven key dimensions that are interconnected and all essential:**

**1. Meeting basic needs for self and family:**

Meeting one's own and family members' needs, with economic empowerment defined as a collective experience

**2. Financial management:** Skill development in financial management, support in escaping cycles of debt, and opportunities to build assets

**3. Safe employment with benefits:**

Employment with comprehensive benefits, worker protection, and a pathway for growth

**4. Psychosocial well-being:** Building emotional strength, self-care mechanisms, self-regulation skills, and self-confidence

**5. Goal achievement:** Overcoming personal challenges and achieving goals

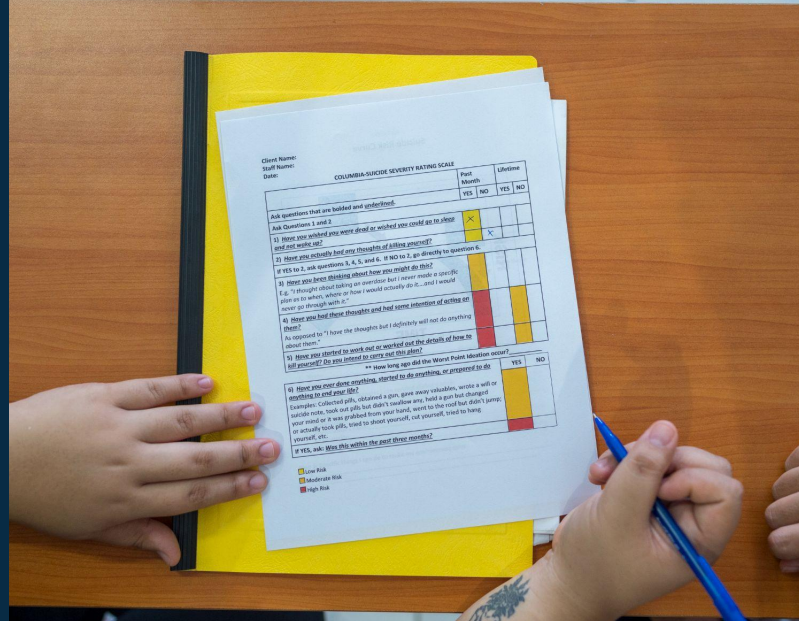
**6. Support systems:** Having an emotionally safe environment and safe, accepting support

**7. Holistic education:** Access to formal education as well as ongoing, holistic life skills development

This survivor-defined framework provides actionable direction to organizations providing economic empowerment services. The framework underscores the importance of culturally-responsive and trauma-informed economic empowerment programs and services that address psychological well-being in the context of financial security. Findings caution against programs that lead to greater indebtedness, highlight the need for safe employment with comprehensive benefits and pathways for growth, and reinforce the importance of savings and financial literacy programming.

*"This wallet represents a lot about my economic empowerment... We feel bad whenever we see our wallet empty. We feel happy whenever we see our wallet full. We feel safe whenever we see our wallet has something for savings... This represents economic empowerment for me because whenever I see that there is something in my wallet, I feel that I am safe." – Photovoice Participant*

# Research Suicide Prevention



Human trafficking survivors report high rates of suicidal ideation and behavior. Many staff have never received training in suicide prevention and response. Although prior research has identified capacity building in suicide prevention as a critical priority in the anti-trafficking sector, little research has been conducted regarding the effectiveness of training programs. This study evaluated a suicide prevention training program for anti-trafficking service providers. Findings revealed the following impacts of being trained in suicide prevention and intervention:

1. **Decreasing Stigma and Misconceptions:** Staff trained in suicide prevention showed a reduction in misunderstanding about suicide, an increased willingness to provide services to people who are suicidal, and lower levels of professional stigma.
2. **Practical Skill Development:** The suicide training was effective not only in improving staff knowledge about suicide, but also in equipping staff with concrete clinical skills.
3. **Grounding and Structure:** The existence of a structured suicide protocol provided greater clarity for staff and helped them become more focused and calm in their client engagement.
4. **Benefits of Multi-Modal Training:** The asynchronous, multi-modal training program involved didactic videos, discussion groups, role plays, and case consultations, which the staff found very productive in their learning processes.
5. **Reduced Fear and Dread:** Training decreased practitioners' fear of speaking with suicidal clients, increasing their willingness to treat.
6. **Lessening Emotional Burdens:** Staff reported strengthening emotional self-regulation skills and reductions in self-blame, anxiety, and psychological distress.

Findings reinforce the importance of training, clinical supervision, and organizational systems to support staff when working with suicidal clients. This study shows the promise of suicide prevention training in enhancing staff skills and psychosocial well-being.

*"Thank you very much for these learning sessions because it really allowed me to stay calm and more focused when talking to clients going through crisis. It was overwhelming getting disclosures [of suicidal ideation and behavior] one after another when the pandemic started, and I felt my anxiety level increased. These training sessions really helped me in managing my thoughts and emotions. And I feel that I am now better able at providing support to our clients and conducting crisis intervention in general. I am grateful." – Research Participant*



# Research Healing and Resilience after Trauma



*"I am happy because at least once a week, I can release my feelings and open up. The pressure will be lifted from my chest. It's really heavy if you face the problem on your own. I can share to my co-participants and they won't judge me for what I feel."*

**- HaRT Research Participant**

Although the anti-trafficking sector has increasingly recognized the need to address survivors' mental health, most survivors do not have access to evidence-based mental health interventions. We received funding from the Human Trafficking Research Initiative (HTRI) at Innovations for Poverty Action (IPA) to assess the Healing and Resilience after Trauma (HaRT) program, a group mental health intervention incorporating mind-body practices. In collaboration with the University of Alabama, we are conducting a pilot study to determine the feasibility, acceptability, and preliminary outcomes of HaRT. The study tests HaRT with three cohorts of human trafficking survivors, assessing for changes over time in depression, post-traumatic stress, and anxiety. The study's qualitative data explore acceptability, feasibility, and changes in mental well-being. This study addresses the gap in evidence-based mental health interventions for survivors in community-based, low-resource settings.

## HaRT Mixed Methods Pilot Research

- Pre-HaRT baseline survey
- Endline survey upon completing HaRT
- In-depth interview after completing HaRT
- 2-month follow-up survey

**Study Design:** Convergent mixed-methods research design employing the Stage Model of Behavioral Therapies



# Capacity Building Motivational Interviewing Training



**Motivational Interviewing (MI)** is a person-centered, evidence-based counseling approach to strengthening a person's motivation to change within an atmosphere of partnership, acceptance, compassion, and evocation. At Eleison, we integrate MI into all our services. MI affirms client autonomy, enhances program retention, and strengthens commitment to achieving personal goals.

Eleison conducts capacity-building for agencies serving survivors of human trafficking and GBV. Many staff in anti-trafficking organizations in low-resource contexts have not received training pertaining to trauma, mental health, or evidence-based interventions. We train and mentor service providers in survivor-centered and evidence-based interventions with the ultimate goals of strengthening the quality of care for survivors and enhancing staff well-being.

In 2022, Eleison Foundation trained 12 service providers from 5 agencies in MI. MI training participants included representatives from the Philippines Department of Social Welfare and Development (DSWD), agencies providing shelter-based services, a social enterprise business, as well as clinicians and behavioral specialists working with sexually exploited children and their families in the Philippines.

Prior research has demonstrated that cultural adaptation of MI increases its effectiveness. However, the majority of research focusing on the cultural adaptation of MI has centered on Latinx and Native American populations. Very little attention has been given to the cultural adaptation of MI in Asia. Given this gap, Eleison has undergone a rigorous process to culturally adapt MI for survivors in the Philippines, including attention to linguistic nuances, cultural norms regarding authority patterns, social and cultural contexts that influence survivors' change goals and behaviors, and attention to social structures impacting marginalized communities. Through our MI training, we focus on culturally-adapted MI that is appropriate for trainees' practice contexts.

*"I like everything in the Introduction to Motivational Interviewing training. My favorite part was the application part of the theories discussed. Ms. Laura made sure we will be retaining all of the information shared in our training. I would like to give my appreciation to Ms. Laura for giving us this training. It really helped us a lot. Thank you!" - MI Training Participant*

# Grantmaking Move with HaRT



Eleison provides grants and technical assistance to early-stage, client-centered programs for survivors of human trafficking and GBV. In addition to funding, Eleison gives technical support to encourage programmatic growth and quality. Eleison awarded a grant to Healing and Resilience after Trauma (HaRT) for the development of their trauma-informed yoga intervention curriculum, *Move with HaRT*. Eleison's grant covered technical and financial support to revise and formalize the *Move with HaRT* curriculum, including graphic design, artwork, packaging, and the production of a manual accessible to diverse facilitators. *Move with HaRT* is a 12-week, low-tech, and trauma-informed mental health program involving mind-body practices. As the program can be implemented by non-mental health professionals, it is a cost-effective strategy for promoting survivors' psychological well-being in low-resource contexts.

## Key Contributions of Eleison's Grant:

- Eleison's grant enabled HaRT to formalize the *Move with HaRT* curriculum, including the graphic design, artwork, packaging, and production of a manual accessible to facilitators. The visual manual enables the curriculum to become accessible as a facilitator guide, which can be used for training.
- The creation of this curriculum allows HaRT to expand its global reach and heighten the accessibility of the program for a more diverse set of facilitators.
- Eleison's technical review of the curriculum strengthened the focus on consideration of clients' overlapping traumas and sensitivity to survivors of human trafficking specifically. Through this input, the curriculum shifted to become more trauma-informed, emotionally safe, and deliverable in diverse contexts.

*"The grant was tremendously helpful to us as an organization. With the funding support, we expanded our network to include artists, designers, trauma clinicians, and other trauma-informed yoga teachers. Having a designed and illustrated curriculum makes the content easier to understand, engage with, and facilitate. This is important as we want to ensure the programming is accessible to facilitators with different educational and cultural backgrounds and levels of experience with body-based practices."* – **Sophie Namy, HaRT Founder**

# Our Team



Back (L to R): Fe Dayeen A. Tuddud, Carmina Charmaine G. Domingo, Chilou L. Benitez, Ryco Sheen C. Mirafuentes, Beau Marie P. Tinio  
Front (L to R): Dr. Laura Cordisco Tsai, Cherry Lynn O. Bonachita

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*“As a young professional in the field of mental health, Eleison provides me with extensive training and mentoring to expand my knowledge and skills. The supportive work environment at Eleison also ensures that our well-being as employees is equally valued as we provide quality care to our clients.”* – **Beau Marie P. Tinio, Clinical Program Associate**



# Staff Spotlight

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**Carmina Charmaine G. Domingo**  
Clinical Program Manager



As a Clinical Program Manager, Ms. Domingo manages Eleison’s community mental health programming, the Survivor Leadership Council (SLC), and offers crisis intervention services. She previously facilitated the Barug and Bansay programs at Eleison. When asked about her experiences at Eleison, she responded:

**Why did you decide to work at Eleison?**

“I was struck when I heard about Eleison since I’ve always wanted to work in the anti-trafficking and gender-based violence sectors. The integration of the research findings into the programs and services gives me confidence in knowing that the approaches and interventions are proven to be effective and beneficial. I appreciate how we are allowed and encouraged to use our individual strengths in our different tasks and that we can discuss, collaborate, and work together to bring our programs forward.”

**What is your favorite part of working at Eleison?**

“I value Eleison’s transparency, integrity, and focus on quality work, which highlighted the importance of the voices of survivors of human trafficking and gender-based violence. Working in this sector has its challenges, but doing so for an organization that shares my values and with individuals who have excellent skills and are passionate about their work makes it easier and worthwhile.”

**What inspires you or keeps you going in your work?**

“The clients’ daily progress and recovery from the effects of trauma continually motivate me. Through Eleison’s trauma-informed approach, I am able to observe clients start to open up, learn to trust, and create healthy relationships with both themselves and other people. I see them evolve from victims to survivor leaders who have become role models for other clients. Eleison’s collaborations with survivor leadership groups, researchers, government, non-profits, and private organizations as they fight trafficking and violence are incredibly inspiring. Protecting and assisting survivors requires a community, and I’m pleased to see that teamwork among Eleison and its partners.”

# Advisory Board



**TERRIANN NICHOLSON, MD, MA**

Dr. Nicholson is a psychiatrist at Columbia University/New York Presbyterian and the New York State Psychiatric Institute. She holds experience as a trainer and technical advisor on the adaptation and implementation of Suicide Safety Planning Intervention (SPI) in cross-cultural contexts, including with trafficking survivors in the Philippines. She holds an MA in International Affairs from Johns Hopkins and an MD from Howard University College of Medicine.



**CATHERINE CARLSON, PhD, MSW**

Dr. Carlson is an Assistant Professor of Social Work at the University of Alabama and Co-Director of Healing and Resilience after Trauma (HaRT). Her research focuses on the intersection of violence and mental health and the implementation of evidence-based interventions in low-resource settings. Her social work practice experience pertains to GBV, psychosocial programming, and child protection. She holds a BA in Sociology from Emory University, an MSW from the University of Georgia, and a PhD in Social Work from Columbia University.



**PRISCILLA GONZALES FERNANDO, MA, RPsy**

Ms. Priscilla Gonzalez Fernando is a clinical psychologist, play therapist, and art therapist at Rainbow Playroom Psychological Services. She uses creative arts, journaling, sandplay, and other expressive modalities. Her speciality pertains to young people experiencing life transitions with trauma histories who experience depression, anxiety, and grief. She holds a BA in Psychology from the University of the Philippines and an MA in Counseling Psychology from Ateneo de Manila University.



**GINGER RAMIREZ, MD, MMSc**

Dr. Ginger Ramirez is a physician and public health professional. Her recent work centers on suicide research, trauma, and mental health systems strengthening. She holds experience in policy development, program implementation, and research with the Philippine Department of Health (DOH). She is a graduate of the Ateneo School of Medicine and Public Health (ASMPH) and holds her Master of Medical Sciences in Global Health Delivery (MMSc-GHD) from Harvard Medical School.



**TINA JIWATRAM-NEGRÓN, PhD, MSW**

Dr. Jiwatram-Negrón is an Assistant Professor of Social Work at Arizona State University (ASU) and core faculty of the ASU Office of Gender-Based Violence. Her research centers on GBV, mental health disparities, and intervention development. Her practice experience pertains to community mental health and domestic violence services. She holds an MSW from the University of Pennsylvania and a PhD in Social Work from Columbia University.

# Advisory Board



**MALABIKA DAS, PhD, MSSW, RYT-200**

Dr. Das is an Adjunct Assistant Professor at National Taiwan University and a facilitator of clinical social work, psychosocial, integrative wellness, yoga, and trauma-informed care trainings. Her social work practice experience pertains to community mental health, crisis intervention, and domestic violence. She holds an MSSW from Columbia University, a certificate in global mental health from Harvard University, and a PhD in Social Work from the University of Hong Kong.



**VANESSA LI, PhD, MA, RYT-200**

Dr. Li is a Clinical Psychologist and Director of Clinical Services at The Pond. She utilizes evidence-based theories including dialectical behavioral (DBT), cognitive behavioral (CBT), psychodynamic, and mindfulness-based modalities, among others. Outside of her clinical practice, her research and advocacy center on dispelling mental health stigma. She holds a BA in Environmental Studies and an MA in Sociology from Brown University, an MA in Psychology from Columbia University, and a PhD in Clinical Psychology from Adelphi University.

## Key Partners

By integrating our research with our practice, we bring together stakeholders that often work separately. We bridge the gap between academia, survivors, and communities toward a common goal of more effective programs and services.



# Survivor Leader Spotlight

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D.O.  
Peer Facilitator



D.O. is a graduate of Eleison’s Barug program and was previously a leadership team member in Eleison’s photovoice research, where she co-lead data analysis with other survivors and the Eleison research team. As a Peer Facilitator, she assists part-time in the facilitation of program activities with Eleison clients, serving as a role model and resource for incoming clients. She aims to support Eleison’s clients in achieving their goals and overcoming similar challenges to those she previously experienced. D.O. aspires to become a social worker in the future and has begun studying for college credits in social work. Believing in the power of prevention, she hopes to practice social work with vulnerable children in her community in the future. When asked about her experiences as a Peer Facilitator at Eleison, she said:

## **How and why did you become a Peer Facilitator at Eleison?**

“I have known Eleison Foundation for many years, and I have witnessed how good their programs are and how these have benefited their clients. When an Eleison staff invited me to be a Peer Facilitator, I was interested because I wanted to share my experiences in applying what I’ve learned in the Barug program.”

## **What motivated you to take on this role?**

“I was also a victim of human trafficking before. It feels good when someone is there to support you, to feel that you are not alone, and that someone is there to see you through. Programs for survivors encourage them to move on and help them in the next chapters in their lives. A good support system is important for survivors of human trafficking.”

## **What does it mean to you to support human trafficking survivors in your community?**

“It is important for me to support human trafficking survivors because I see how it affects people, especially those who are away from their families. Others take a long time to recover from their traumatic experiences, but we can’t blame them because we haven’t witnessed the fear and danger they experienced in the presence of a perpetrator. I would like to encourage them not to give up because there is always hope.”






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