Dear Partners,

In the past two years, we have all had to contend with a changed reality. COVID caused separation and isolation for many of us, which impacted our mental health and wellbeing. In a 2020 CDC study, 31% of adults in the US reported symptoms of anxiety or depression, nearly double the number prior to the pandemic.

Parallel to this, the number of forcibly displaced people in the world has only continued to increase. An estimated 84 million people worldwide were forcibly displaced midway through 2021. For comparison, between 40 and 60 million were forcibly displaced due to WWII.

The ongoing conflicts in countries such as Yemen and Ethiopia, and the nearly four million Ukrainians who have already fled to neighboring countries, are just some of the forces that are likely to increase the number of forcibly displaced people this year.

Changes in global climate also stand to increase the number of people forced to flee their homes. In 2015, a systematic review of climate and conflict found that a 1 degree increase in temperature increased interpersonal conflict by 2.4% and intergroup conflict by 11.3%.

While these trends have and continue to put a strain on our world, they also underscore the deep need for PTR. Thanks to a committed network of partners and supporters, PTR has been able to grow significantly in a short time. This past year, we expanded our psychosocial care offerings, developed new community partnerships, graduated our fifth clinical training cohort, and moved into a new and larger space.

With your help, we know that this growth will only further expand in years to come.

Thank you for your continued partnership, and for your belief in what is possible.

With Gratitude,

Leah Spelman
Executive Director
The Challenge

Globally, the number of forcibly displaced people has continued to increase in recent years. Due to new and ongoing conflicts, as well as factors such as climate change, this trend is only expected to continue. California plays an important role in welcoming those who have been forced to flee their homes due to violence and persecution. Of all the individuals granted affirmative asylum in the US, over one third reside in California.

To survive in the wake of interpersonal violence requires incredible strength and perseverance. The histories of trauma faced by refugees and asylum seekers are multi-layered and complex. Of the survivors who received mental health care at PTR in 2021, 84% had experienced more than one type of interpersonal violence, and 27% had experienced interpersonal violence in the United States, in addition to the trauma they experienced in their countries of origin and during flight.

Despite these histories of trauma, as well as the myriad challenges faced by newcomers in the United States, refugees and asylum seekers go on to thrive. By the time a refugee has been in the country at least 25 years, their median household income reaches $67,000—a full $14,000 more than the median income of US households overall. Refugees are also more likely than the US population as a whole to be entrepreneurs. And, often the barrier standing between a refugee or an asylum seeker and their ability to begin a life anew is mental health. A 2021 study found that worse mental health reduced refugees’ probability of employment by 14.1% and labor income by 26.8%, in addition to adversely impacting children’s mental health and education performance.

PTR addresses this gap. We work with survivors who have just arrived in the Bay Area, and those who have been in the United States for decades and may never have had the chance to tell their story. Of clients who completed a follow-up assessment in 2021, 91% reported a reduction in symptoms of PTSD, anxiety, and/or depression.

By providing mental health care and case management, PTR supports survivors in integrating histories of profound trauma, reestablishing connections with loved ones and community, and fully engaging in life.

Our Response

Partnerships for Trauma Recovery 2021 Annual Report

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In 2021, PTR... 

- Provided mental health care and case management to 182 survivors of human rights abuses.
- Established several new positions, including a Supervising Psychotherapist, two Social Workers, and a Director of Client Care.
- Graduated our fifth cohort from our Global Healing & Human Rights clinical training program.
- Conducted 12 psychoeducation workshops, and hosted five outreach events, as well as other intensive outreach efforts.
- Completed 20 psychological evaluations on behalf of clients seeking asylum.
- Strengthened and deepened our commitment to diversity, equity, and inclusion by beginning a longer-term engagement with two external consultants.
- Moved into a new and much larger space. While our long-term plans of remote and in-person care are still being finalized, we were able to gather together as a group for the first time since the beginning of COVID.

A look back at some of the year’s major causes of forced displacement

**VENEZUELA**

In the first half of the year, 92,100 Venezuelans were newly displaced. Over 4 million people have been displaced.

**ETHIOPIA**

Conflict in the Tigray region caused 1.2 million new displacements in the first half of 2021.

**SYRIA**

The civil war in Syria continued; 144,000 people were newly displaced in the first half of the year. To date, nearly 7 million people have been displaced due to the ongoing conflict.

**AFGHANISTAN**

The withdrawal of US troops in August and the takeover by the Taliban led to increased instability. The US evacuated over 75,000 Afghans in the months following August, bringing the total displaced to 2.6 million.

**MYANMAR**

Over 200,000 people were newly displaced in the first half of the year, bringing the total to over 1.1 million.

**DRC**

1.3 million new displacements were recorded by mid-last year in the DRC.

**SOUTH SUDAN**

Over 60,000 new people became refugees, bringing the total to over 2.3 million.

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Mental Health Care and Case Management

Since opening our Mosaic Healing Center in 2016, PTR has provided mental health care for nearly 600 clients, from 50 countries, and been able to offer care in over 25 languages. PTR maintains a treatment model that enables people with profound histories of trauma to access care for up to two years, when needed, in order to heal from the impacts of protracted interpersonal violence. Nearly 60% of individual and family therapy sessions were conducted in a language other than English. In the second half of 2021 alone, PTR contracted with 27 interpreters through our Refugee Voices Program, in order to increase language accessibility through ongoing in-person interpretation services. In 2021, 54% of clients receiving therapy and case management were from Latin America, 35% from Africa, 6% from Asia and the Pacific, and 5% from the Middle East. The most commonly represented countries were Guatemala, El Salvador, and Eritrea.

Aissata is from Niger, where she survived FGM, marriage to a much older man, assault, and persecution due to her LGBTQ identity. To save her life, Aissata was forced to flee. Upon arriving in the US, she found PTR, where she received psychosocial and psychiatric care. PTR also collaborated with medical and legal partners to provide forensic evaluations to support Aissata’s asylum application. Thankfully, Aissata was granted asylum, and was then able to petition for her daughter to join her. Aissata shared, “We come to this country and we have no family. But here is like a family for us. I don’t feel alone anymore. When I come here, I feel listened to. It is not easy to be heard. It makes us feel good. It is so meaningful for us.”

At the beginning of 2021, PTR established a Psychosocial Care Team to enhance PTR’s ability to more holistically address clients’ needs. The program is staffed by a Psychosocial Care Manager, two Clinical Social Workers, and one Social Work Intern. The goal of the Psychosocial Care Program is to increase collaborations and partnerships to offer wraparound psychosocial services to survivors. The program strives to address the needs of and build on the capacities of persons fleeing persecution, with a particular focus on asylum seekers, by providing intensive case management support, group support, workshops and connection to community partners. Areas of support include increasing access to child care, education, employment, legal assistance, housing, mental healthcare, and health and wellness services. Since its inception, the program has collaborated with a local government initiative and an organization that provides hosted housing and financial assistance to asylum-seekers and refugees, and secured over $5,000 in emergency cash rental assistance for several families facing housing crises.
Core to PTR’s work is our Global Healing & Human Rights Clinical Training Program for advanced psychology doctoral students. The training program takes place over 11 months for 20 hours/week, and includes 6 hours of in-depth weekly group and individual training and supervision. Clinical interns in the 2020-21 cohort were trained on topics such as: the asylum process and ambiguous loss; experiences and needs of LGBTQ+ refugees and asylum-seekers; experiences and psychosocial needs of refugees and asylum-seekers; psychodynamic psychotherapy; diagnostic assessment of trauma-related conditions using DSM-5; neuropsychological impacts of trauma; intergenerational transmission of trauma; and integrating case management with psychological care.

PTR conducts pre- and post-surveys to evaluate trainees’ learning, and solicits trainee feedback twice during the training year. On a 1-5 scale, the 2020-21 cohort reported an increased understanding of the varied experiences of refugees, asylees and asylum seekers who have fled their countries due to danger, (an increase from 2.6 to 4.4), greater knowledge of the mental health and psychosocial needs of refugees, asylees and asylum seekers in the US (an increase from 2.8 to 4.6), and heightened confidence in their clinical skills working with survivors of human rights abuses (an increase from 2.4 to 4.2).

“The number of community members who participated in outreach events in 2021, including through meetings, workshops, prevention visits, and other outreach efforts.

945

Psychoeducation and educational workshops focused on areas such as: suicide awareness, prevention, and interventions for safer care; bridging the gap between youth and parents/caregivers; cultural barriers to accessing mental health services; mental health 101; substance abuse and parental support through the recovery process; isolation and self-care; stress coping mechanisms; and debunking mental health stereotypes. Three support groups were also held weekly for students at Oakland International High School, LGBTQ+ identified Africans, and Rwanda 1994 genocide survivors and community members. PTR has also collaborated with African Advocacy Network, Priority Africa Network, University of San Francisco’s African Students’ Association, Rwandan Community in Northern California (TRCC), and Kenyan communities, and co-hosted events on topics including Immigration and Social Justice on African Migration, International Migration Day, Decolonizing Healing and Wellness, International Women’s Day, and Commemorating the 1994 Genocide Against the Tutsi in Rwanda.
From the outset, PTR sought to expand our impact beyond the therapy space, and to shift the larger systems and structures which cause trauma and re-traumatization. As a mental health organization, we will always seek to provide the highest level of psychological and psychosocial care for survivors who come through our doors. However, in a perfect world, we would be able to go further upstream and prevent the human rights violations that cause trauma in the first place. This is the power of advocacy. PTR engages with policy advocacy efforts as a member of the National Consortium for Torture Treatment Programs (NCTTP), the California Consortium for Torture Treatment Centers (CCTTC), and national organizations such as Oxfam and We Are All America.

In March, PTR joined with NCTTP members to advocate to national representatives in favor of increased support for survivors of torture. Throughout the year, PTR joined with national organizations to advocate for several new policies, including changes to Department of Justice immigration enforcement priorities, reducing appropriations for Immigration and Customs Enforcement (ICE) and Customs and Border Patrol (CBP), and ending US military support for Saudi Arabia’s blockade against Yemen. As well, PTR conducted advocacy on behalf of clients with family members in Ethiopia, with the aim of securing derivative asylum for children.

An estimated 44% of refugees are survivors of torture (SOTs).

PTR has served torture survivors since our inception; thanks to support from the US Office of Refugee Resettlement, we have been able to expand our support for SOTs, in partnership with the Northern California Human Rights Clinic (HRC) at Eastmont Wellness Center in Oakland.

The HRC provides medical care, including primary care and medical forensic evaluations. PTR provides psychological care, as well as psychological forensic evaluations. Both organizations provide case management.

Psychological and medical forensic evaluations can greatly strengthen an asylum seeker’s case. Without an evaluation, the average national asylum grant rate is 37%. With a medical or psychological evaluation, the grant rate can increase to 89%. Because of this, virtually all of the HRC’s referrals come from attorneys.

One client shared, “I had a very positive experience with Dr. Nelson [HRC Medical Director]. He was able to explain to me what had happened to me. I was subjected to FGM at the age of 3 and had carried the trauma all my life. Before meeting with Dr. Nelson I didn’t know or understand what exactly had been done to me. Meeting with Dr. Nelson and the information and understanding he showed me, gave me hope.”
**Financials**

Our largest source of 2021 funding was government grants. Part of this was due to the fact that PTR received a large donation from the Hewlett Foundation in 2020. While this donation was marked as 2020 revenue, it has continued to support 2021 expenditures. Growth in funding has supported a staff increase from five to 24 staff members since 2017. PTR aims to continue to diversify funding from corporate and private foundations, as well as individual donors, in years to come.

**2021 Funding Sources**

- Individual Contributors: 91%
- Program Income and Other Revenue: 6%
- Corporate and Private Foundation Grants: 2%
- Government Grants (Federal, State, and County): 1%

**2021 Expenditures**

- Admin: 13.5%
- Program: 85%
- Fundraising: 1.5%

**Thank You to Our Generous Supporters**

**GRANTS:** Alameda County Behavioral Health Care Services • Bigglesworth Family Foundation • California Office of Emergency Services • California Victims Compensation Board • Friedoll Foundation • Full Circle Fund • Genetech • George Sarlo Foundation • Gilead Health Sciences • Global Whole Being Fund • The William & Flora Hewlett Foundation • Kaiser Permanente • US Office of Refugee Resettlement • San Francisco Foundation • Seattle Foundation • Sills Family Foundation • Zellerbach Family Foundation

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Photos courtesy of Unsplash and PTR.

Some identifying details for clients have been changed in this report, for privacy and security reasons.

Special thanks to Huck Yeah.