

PSYCHOSOCIAL WELL-BEING FOR HUMAN RIGHTS DEFENDERS IN THE PHILIPPINES



FORUM-ASIA

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Background

ABOUT THE BOOKLET

This booklet is an output document from the Psychosocial Well-being Workshop for HRDs held in the Philippines in 2019. The event was organised based on the recognition of the mounting threats and harassment HRDs endure and that take a toll on their psychosocial well-being. The workshop’s objective was to strengthen the knowledge and capacity of HRDs in the Philippines on well-being in relation to three key areas:

Individual well-being

How can HRDs ensure they have the capacity to care for their own well-being?

Institutionalisation of well-being

How can well-being be institutionalised within the organisations in which HRDs work?

Well-being within the human rights movement

How can HRDs learn from the best practices on well-being from others in the human rights movement, and how can this movement be strengthened so that the issue of well-being can be addressed collectively?

The purpose of this booklet is to consolidate the key lessons learnt during the workshop and make it accessible to HRDs, in hopes that it can: (a) provide them with the basic knowledge to address their well-being individually, organisationally and as a movement, and (b) use it as an advocacy tool to demonstrate the importance of well-being to decision makers – whether it be the heads of their organisations or donors – and call for well-being to be prioritised. Safeguarding the psychosocial well-being of HRDs is critical for their health, and is essential for ensuring they are able to continue their work in the long term and build their resilience against the threats they face.

The content of this booklet draws from the information shared by the facilitators and trainers from the Medical Action Group (MAG) and the Philippine Alliance for Human Rights Advocates (PAHRA) in the workshop co-organised with and supported by the Asian Forum for Human Rights and Development (FORUM-ASIA), as well as from the discussions of the HRDs who participated in this workshop.

ABOUT THE ORGANISERS OF THE WORKSHOP



Asian Forum for Human Rights and Development (FORUM-ASIA) is a network of 81 members in 21 countries, across Asia. It works to promote and protect human rights in Asia and beyond.



Medical Action Group (MAG) is a non-profit organisation of physicians, nurses, dentists, psychologists, health students, and health workers. MAG promotes and defends the human rights of all peoples.



Philippine Alliance for Human Rights Advocates (PAHRA) is an NGO formed as an alliance of individuals, institutions and organisations committed to the promotion, protection and realisation of human rights in the Philippines.

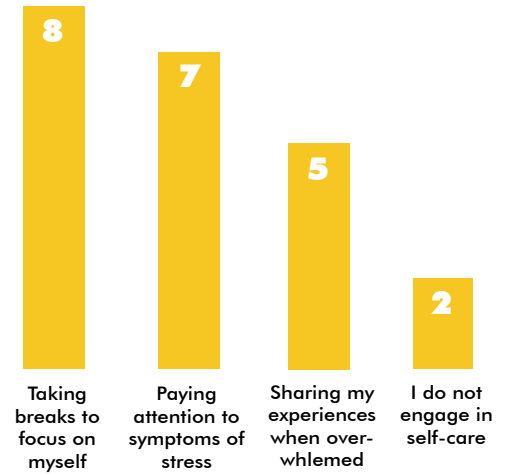
ABOUT THE PARTICIPANTS OF THE WORKSHOP

Prior to the workshop, participants were asked to fill in a survey about their own psychosocial well-being. Below are the results of this survey, which provides some indication of the level of importance the HRDs place on well-being, the factors that influence it, as well as steps the HRDs and their organisations have been taking to maintain their well-being.

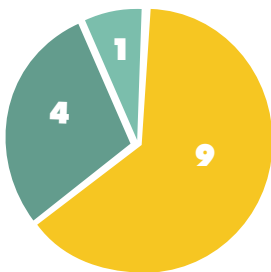
Which aspect of your work affects your emotional well-being?



What steps do you take to exercise self-care?

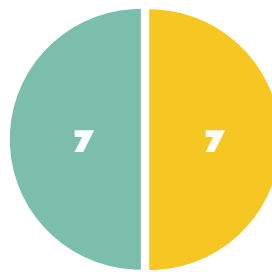


How important do you think it is to maintain your well-being?



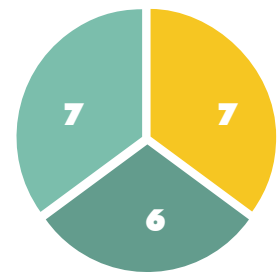
■ Unimportant
■ Important
■ Very Important

In the past 12 months, have you experienced a traumatic incident as a result of your activities as a HRD?



■ Yes
■ No

What does your community/organisation do to support people's well-being?



■ Create safe spaces for discussions
■ Encourage people to take breaks
■ Organise activities that foster trust and solidarity

Introduction to psychosocial well-being

WHAT IS WELL-BEING?

Psychosocial well-being is often defined as the experience of:

Health

Your immune system is strong; you are not sick or ill;

Happiness

You feel joy and other positive feelings; and

Prosperity

You have economic stability and wealth.

It often includes having:

Mental health

You are able to realise your abilities and potential; cope with normal stresses; are productive and able to make contribution to your community;

High life satisfaction

You are satisfied with your life and what you do; and

Meaning and purpose

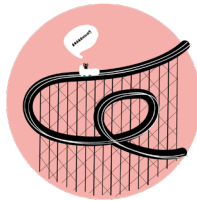
You find meaning in what you do.

WHAT IS STRESS?

It is important to start by first recognising that stress can be both positive and negative. Examples of stress can include:



proposing to your partner



riding a roller coaster



graduating



winning the lottery



economic or financial instability



experiencing security threats



facing a conflict with your colleagues

Stress is a part of life, and is inevitable. In terms of defining stress, there are two types of stresses we should be particularly mindful of: biological stress and toxic stress.

Biological stress (Eustress)

This refers to the hard-wired function of our brain to experience stress. In more primitive times, we lived in an 'eat or be eaten' state, and the function of stress was to inform us when threats were present. To keep us alive by moving us away from things that may harm us. Today, it continues to reside within us as a protective function. In this way, stress is fundamentally our response to a situation we recognise to be threatening. This stress is normal, natural and positive in the sense that it gives us energy, keeps us alive, and allows us to do our work. Our level of eustress may go up and down a few times a day, depending on what we are exposed to.

Toxic stress (Distress)

This is the type of stress that is harmful. Toxic stress is when your level of stress goes up too high and/or too many times a day for a long period of time – to the extent that it does not feel as though your level of stress goes down at all. This is toxic not only for your well-being, but also your physical health. During this time, some of your organs – such as your immune system – are unable to function properly, making you more vulnerable to physical illness.

Sources of Stress

There are various kinds of conflict we face that can be a source of stress. This includes intra-psychic conflict, which refers to our internal conflicts, or conflicts we have within; and interpersonal conflicts, which refer to conflicts that arise through our engagement with others such as with our families, friends, colleagues and communities.

Ultimately, however, what makes us stressed and how we experience stress is subjective and depends on several social, cultural, physical, mental, emotional and spiritual factors.

The feelings of stress will differ from person to person. However, stress is usually accompanied by a feeling that you are powerless – that you are unable to control what is happening.

HRDs are particularly exposed to a number of different stressors. Unlike others, HRDs such as yourself will generally have a higher exposure to stress and trauma either directly or indirectly through, for example, the narratives you hear in your work, the violations you witness regularly and your interactions with the rights holders you support.

Although experiencing stress is biological and innate, your response to stress is within your control. This is why knowing how to manage stress and care for yourself is crucial.

With that said, it is also important to note that stress affects more than you, as an individual. When you are stressed, it affects how you interact with others – including our families, friends, colleagues and the communities and defenders we work and engage with. For this reason, it is crucial we pay attention to and address our own feelings, reactions, experiences, as well as find ways of dealing with them.

THE SCIENCE OF STRESS

Having defined stress, the next section focusses on getting to know the science behind how we experience stress. There are two key systems that regulate our experience of stress: the sympathetic nervous system and the parasympathetic nervous system.

Sympathetic Nervous System

This is the system responsible for our 'flight or fight' responses. You may notice that when you are stressed, you often experience the following: a fast heart rate; sweating; shivering; difficulty breathing; and tensed muscles. All of these are activated by the sympathetic nervous system, and are aimed at preparing you to respond to the threat by either running away from it (flight response) or fighting it (fight response), as well as producing the energy to do so. It activates the organs vital for survival such as the heart, lungs and stomach, signalling that you are in 'survival mode.'

Parasympathetic Nervous System

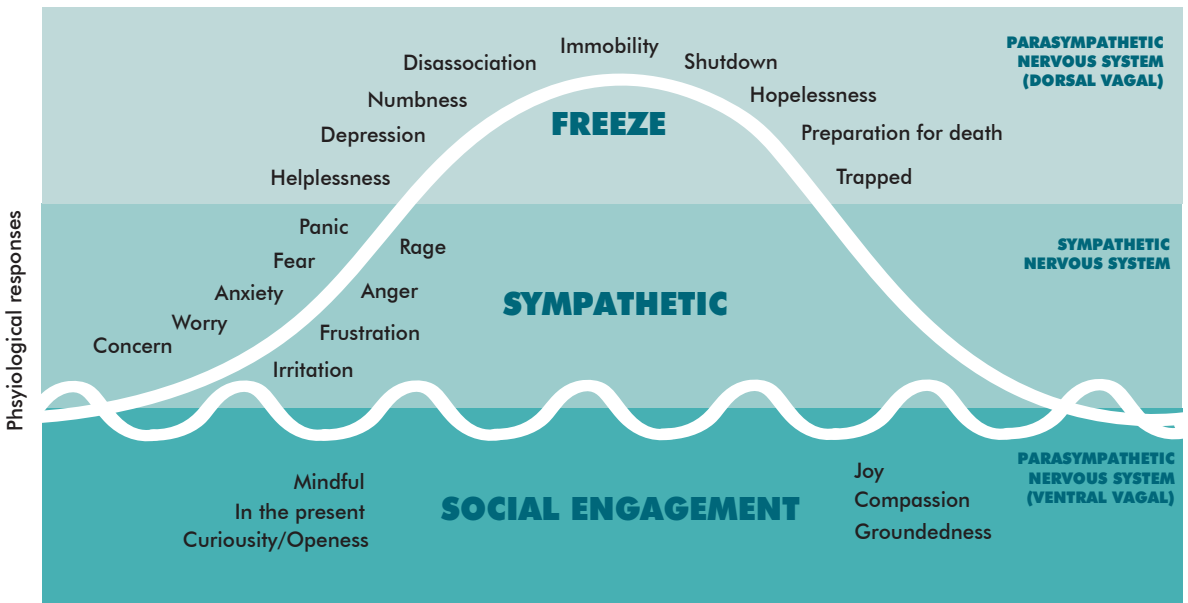
This system is responsible for our 'rest and digest' responses. When this is activated, the survival organs are inhibited and the organs that are not necessarily associated with survival are activated.

Social Engagement and the experience of stress

Please read this section in connection with the graph below (adapted from rubyjowalker.com). When we feel safe, calm and present, we are usually in a state of social engagement. Safety and connection are crucial for being able to get to this stage. The symptoms of being in a state of social engagement are feelings of mindfulness, compassion, openness and joy.

When we experience stress, our stress levels move up, and we move away from this state of social engagement and into the sympathetic stage. Here, our sympathetic nervous system kicks in to respond to the threat physiologically (e.g. fast heartbeat or sweating). It is also characterised by fear, anxiety, panic (flight response), as well as frustration, anger or rage, (fight response). If this occurs in low or medium amounts, this is normal. If it occurs at high levels it can be toxic.

If we experience very high levels of toxic stress continuously or experience very traumatic events, we enter the 'dorsal vagal' or freeze stage. This is when your parasympathetic system kicks in. Instead of fight or flight, you completely freeze up and become unrespon-



sive to stress. This can include: entering a state of depression, characterised by lack of energy and vitality, or loss of sense of being alive; feeling trapped; numbness; helplessness; disassociation; and hopelessness. This stage is visualised as the peak of the large curve in the graph above.

WHAT IS TRAUMA?

Trauma refers to our response to deeply distressing experiences that hinders our body from functioning in a healthy way. It is characterised by feelings of helplessness and the inability to experience our full range of emotions. In serious cases, it can lead to: bipolarism; psychosis; and hallucinations or delusions, among others.

Dealing with trauma requires professional help.

You may not always cognitively know the source of a trauma, but your body may remember experiencing it and therefore respond to the situation in a certain way to protect itself. It is therefore important to listen to your body and its needs.

There are different types of trauma you could experience. For example, you could be directly traumatised or experience vicarious trauma. Being **directly traumatised** means experiencing a traumatic event yourself. On the other hand, **vicarious trauma** is when you experience trauma as a result of the stories you hear or through your engagement with others who have experienced trauma themselves. This is when you absorb their trauma and manifest symptoms as a result. Vicarious trauma is common among HRDs or those who work with HRDs.

Vicarious trauma is often confused with compassion fatigue, which is also common among HRDs. However, **compassion fatigue** occurs when others – for example your colleagues,

friends, families, communities or the rights holders you work with – require an excessive amount of your energy, attention or emotional strength, and you suffer as a result. Evidently, this is different from vicarious trauma. Note that this is also different from **re-traumatisation**, which is when you are exposed to trauma in the past and are exposed again later.

WHAT IS SELF-CARE?

Self-care is an activity that we do deliberately to take care of our mental, emotional and physical health. It involves proper and effective management and requires commitment.

Note:

Self-care is crucial for ensuring that our level of stress does not go up too high and stay high for long;

Self-care needs to be practiced as a skill. As with any skill, if you do not use it, you will lose it;

Self-care strategies are different for each person and are influenced by one's gender, age, nationality, ethnicity, religion and other social factors. However, all self-care strategies are valid and legitimate. What is important is that we choose ones that are healthy, and not something that may harm us or cause dependencies that are damaging in the long term (whether it is substances, processed food, sugar, caffeine or other addictions). To know what strategy is best, it is important to know your strengths, weaknesses and boundaries;

It is important you have multiple strategies you can rely on. What might work for one situation might not work for others; and finally

Caring for yourself and making your well-being a priority is crucial. However, fostering well-being collectively is also important. Acts of collective care can include checking in on

one another, spending quality time together, being aware and mindful of one another's feelings, needs and experiences, and supporting one another.

Examples of self-care strategies

- ✓ Connect with others and nature;
- ✓ Ensure you eat a healthy diet;
- ✓ Get adequate sleep and exercise;
- ✓ Constantly check-in yourself: How are you feeling? Why are you feeling this way?;
- ✓ Practice self-compassion and gratitude;
- ✓ Go on a trip and make time for leisure activities. This might especially be useful for men who, due to social stigma, tend not to practice self-care and might feel more comfortable in engaging in informal activities of self-care such as a trip;
- ✓ Cut things out that add to your stress and set your boundaries;
- ✓ Talk things out and ask for help from your friends, family, community, or colleagues; and
- ✓ Get professional help - Although there is a lot of stigma around people who get help, it is important we seek professional assistance when we need it.

STRESS MANAGEMENT AND COPING STRATEGIES

Stress management is a range of techniques and psychotherapies to manage toxic stress. It is specifically focused on bringing us down from a state of high stress, where the sympathetic nervous is activated, to get us to a state

of calm. So it is not the general maintenance of well-being – this would be self-care – but is about getting us back to a state of calm when we are at a high state of stress.

This can include mindfulness-based activities such as yoga and meditation. It can also include diaphragmatic breathing (deep breathing) or somatic experiencing. Participants in the workshop were taught the step-by-step process of the following exercises: deep breathing, gradual muscle relaxation, smiling Buddha, self-hug and self-tapping, chanting, stretching and grounding. Key information about how to conduct some of these exercises is available in [MAG's handbook](#).

Working with rights holders that have experienced trauma

PSYCHOLOGICAL FIRST AID (PFA)

PFA came out of a need to assist people who experienced a crisis. There are different forms of crises:

- Accident** Crises that occur unintentionally;
- Incident** Crises that occur intentionally;
- Calamity** Large scale crises such as natural disasters or wars; and
- Other** Other crises experienced, not only by us but also by others.

According to Maslow’s Hierarchy of Needs, when a crisis occurs, there are basic needs we need to fulfil in order to recover a sense of normalcy: Physiological needs; safety needs (basic shelter and food); love and belongingness; and esteem. In PFA, we try to understand where the gap is in terms of a person’s basic needs after they have experienced a crisis, and try to provide some assistance to address it.

What does PFA involve?

It involves giving support to a person going through a crisis. This requires us to operationalise common sense. It is not a technical job, but it is still a difficult one.

PFA does not require us to act like psychologists. It is focused on just being there and offering what you can. It is about connection, love, trust and empathy towards what

a person went through. PFA cannot provide solutions to the problems people face; its aim is to provide immediate assistance to people experiencing a crisis by giving them support to address their needs. In this sense, PFA is a tool used to empower people in need, to help themselves.

Who can provide PFA?

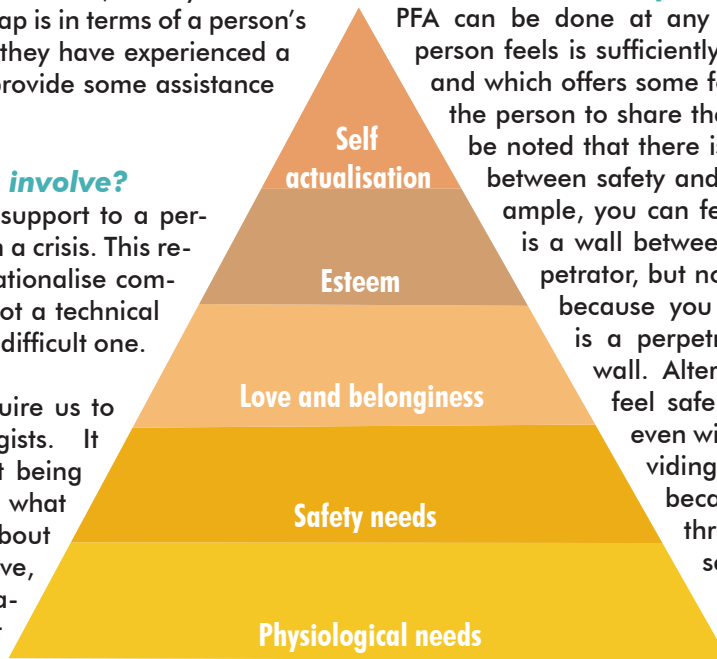
Anyone can do this. All you need is empathy, awareness and your body.

Who can receive PFA?

It can be provided to any person irrespective of age, gender, occupation, or any other social factors, who are experiencing a crisis. It is, however, important to note that every person responds differently to different crises. Not everyone wants or needs PFA, and no one should ever be forced into receiving PFA.

Where can PFA be provided?

PFA can be done at any place where the person feels is sufficiently safe and secure, and which offers some form of privacy for the person to share their story. It should be noted that there is a key difference between safety and security. For example, you can feel secure if there is a wall between you and a perpetrator, but not necessarily safe because you know that there is a perpetrator behind that wall. Alternatively, you can feel safe in an open field even without objects providing you with security because of absence of threat. In this sense, security is the means to gaining a sense of safety.



Maslow’s Hierarchy of Needs

Four key principles of PFA

1.

PREPARE

Be prepared before you face the person you seek to assist. You should have a background of: who they are; what happened to them; what support they may need; where you will meet; how secure the location is; and other relevant information for context. It is also important to prepare a list of references you could recommend to them for further support. If you do not have sufficient knowledge, you cannot provide informed suggestions.

2.

LOOK

This involves looking to see what is around you. If you are in a place where a crisis just occurred, look at who needs the most help and what type of help is required. When speaking with a person, look at their reactions: are there tears or tremors? Do they show signs of tiredness or perhaps pain? Are they quiet, disoriented, or numb? Look for their physiological reactions, pay attention and respond accordingly. The most important thing to remember is that situations can change rapidly. Be vigilant and aware.

3.

LISTEN

Listening is not just about using your ears. When you listen you need to involve your eyes, by sharing eye contact; involve your ears, by listening intently and giving reassurance that you hear them through words (e.g. by saying 'yes', 'go on' or repeating how you understand what they are saying); and the heart, by showing empathy and understanding. Truly listening is listening with your eyes, ears, and heart.

4.

CONNECT

This involves connecting the person in crisis to whatever they may need, whether it is financial aid, food, shelter, or a connection with others who have experienced the same crisis. Have a list of options for them, if possible, and make sure they have the capacity and resources to access the need they are looking for. At the minimum, you should provide basic suggestions about well-being like the ones initially shared in this booklet: the importance of drinking water; continuing their hobbies; connecting with friends; and getting adequate sleep.

Tips for PFA

What are some of the do's and don'ts of conducting PFA in practice?

DO:

- ✓ Ensure the place where you are meeting is quiet and maintain a comfortable distance between you and the person you are assisting;
- ✓ When speaking, you should lower your voice and keep calm. If their voice gets higher, lower yours so that it can influence the person you are speaking and calm them down;
- ✓ Ensure both you and the person you are speaking to feel as safe and secure as possible. Check and occasionally ask if they are comfortable during the process;
- ✓ When the person you are assisting feels stressed because they are re-living their trauma, encourage them to engage in some kind of grounding exercise and ask them how they feel after;
- ✓ Ensure you only give information that is accurate;
- ✓ Keep all information confidential;
- ✓ Be considerate when asking what they need and connecting them to that need. Be particularly mindful of the specific needs of certain people and accommodate for them as much as possible – e.g. if they have trouble remembering things, write it down for them or send them reminders.

DO NOT:

- ✗ Give information that you are unsure of or is not backed by references as it may cause further damage. Similarly, never lie about information. This risks causing more harm to the person;
- ✗ Judge or belittle people (e.g. by telling them they should not feel a certain way or that they are lucky because in comparison their situation is not as bad);
- ✗ Force people to share their story;
- ✗ Rush people when they are telling their stories – at best we may guide them;
- ✗ Give opinion or advice, only suggestions. By giving your opinions or advice, you risk projecting your own feelings and experiences onto someone else. Remember that the goal of PFA is to empower the person in need to help themselves - not to help them by providing your input on how you think they can address their situation;
- ✗ Touch the person unless you have their consent;
- ✗ Make promises you cannot keep;
- ✗ Feel like you can 'solve' all issues a person has – know your limits.

How do you deal with someone unwilling to share their story?

If someone is reluctant to share their story with you, try to gently ask them again and reassure them that you want to speak to them not for your own self-interest, but to try to assist them in any way you can. If they still say no, leave your contact information with them and let them know that they can reach out to you when they are ready. Never force a person to share their stories or speak with you if they do not want to.

How can we build trust with the person we want to assist?

Try to set up a meeting in a place where they are most comfortable, and make sure the tone you use when speaking with them is suited. Be mindful of what words you use, and be attentive to how they respond to it. Try to have open-ended and informal discussions, and to make them feel that they are not being analysed through PFA. Otherwise, they may feel like you think they are 'ill' or 'crazy', given the social stigma around people who seek assistance for their mental health or psychosocial well-being.

How to respond to someone crying?

If they start crying, ask them if they are alright and if they are, ask for their consent to continue with the session. If not, try to provide something that can assist them (refer to Hierarchy of Needs, see pg 8).

Is it okay for me to cry as well?

It is alright to cry. Sometimes you cannot help it, and it may make you feel more relatable to the person you are speaking to. It can humanise you. Just be sure to tell them how their story makes you feel, and make sure that you do not cry too often or too hard that it takes away the focus from them.

How can you reduce tension during discussions?

If ever the topics get too heavy, you can do a short activity to change the topic. For example,

you could try to do a series of trivia that allows you to get to know the person and make sure they are aware (e.g. drawing activities often shows the person's level of attention to detail; you can also ask: what comes to mind when I say the word 'grief' or another word, and see what they say). Depending on context, you can also use humour to reduce tension.

Coping vs defense mechanisms

There are two types of mechanisms that people often have when dealing with an issue. One is called coping mechanism and is active in nature. It refers to the act of coping by intentionally engaging with different ways to address with the issue, such as through humour or by seeking support. The other is called defence mechanism and is passive in nature. It refers to the unintentional ways of dealing with an issue. These include denial, acting out or disassociating, for example.

Importance of Consent

Consent is crucial when providing well-being support. We should not subject a person to a situation which might make them feel uncomfortable or re-traumatise them. Asking someone to continuously repeat their experience of stress or trauma to different people when you refer them to other service providers, for example, could re-traumatise them.

It is important to fully inform them of the process of how you aim to support them, so they are aware and can make informed decisions on whether they want to go through with the process. Asking for their consent at each step of the process is crucial.

Make sure you have a relationship that is based on partnership, and remember that consent should not just be asked for once, but needs to be re-assessed over time.

OTHER ISSUES RELATED TO PSYCHO-SOCIAL WELL-BEING RIGHTS HOLDERS MAY ENCOUNTER

There are several ways the psychosocial well-being of rights holders who have experienced traumatic or highly stressful incidents is affected. These include, but is not limited to, experiencing depression, panic disorder, anxiety disorder, as well as:

Post-Traumatic Stress Disorder (PTSD)

PTSD develops when you experience a traumatic event. It occurs long after the event itself has occurred. You could experience PTSD even if you did not directly experience the trauma but through vicarious traumatisation. Some symptoms of PTSD include:

Remembering what happened

For example, through nightmares, or through a trigger that brings you flashbacks. It can be a visual flashback or through the feeling of re-living that trauma directly;

Avoidance

You avoid any situations or events that may lead to re-living this trauma, often leading you to live constricted life; and

Hyperarousal and hypervigilance

The feeling of paranoia. Fearing that what has happened will happen again.

Grief

Grief normally has 5 stages, in no specific order:

Denial

Anger

Bargaining

Depression

Acceptance

But there is also complicated grief – it is when you experience grief at an excessive level. The appropriate amount of grief varies across time and space. As such, complicated grief might look differently for each person. Sometimes complicated grief can look like a prolonged state of grief, but in others it can mean experiencing grief for a small amount of time but in extreme intensity, such as through psychosis or a deep depression.

Substance use disorder

This does not only involve addiction to drugs. This includes all things you abuse – whether it is sugar, nicotine, alcohol, caffeine or another substance – to the extent that it affects your everyday life and you become dependent on it.

Psychosomatic disorder

This occurs when we feel something physically, but is only brought into existence through our mind – e.g. you feel pain in your arm but there is no physical source of strain, it is only brought on by stress.

Psychosocial well-being within the organisation

Psychosocial well-being is an important part of what organisations should provide for all staff. If, you, as a HRD, experience trauma due to your work, then the organisations that employ you to conduct that work have a responsibility to support you in addressing that trauma. Similarly, if your well-being affects the work you do – for example, if you do not feel capable to do your job well due to your mental or emotional state – then employers should address this by providing you with support to improve your performance.

Recognising this, it is crucial that organisations establish the necessary systems to support the well-being of their employees. As MAG emphasises: “We have to invest in the people working for us, whether it be through insurance, the development of a policy allowing people to work flexibly, referral systems or otherwise. Security and safety is crucial for well-being. If you do not feel safe and secure in your workplace, you cannot conduct your work.”

One step we can take towards institutionalising well-being is by starting a conversation around it. We can begin by reflecting on: What are some of the psychosocial needs that you, as a HRD, need to continue your work and how do you address them? What psychosocial support do you receive from your organisation, peers and families? Considering the capacities of your organisation, what other things do you expect from your organisation?



Below are some of the reflections of the participants from the workshop in the Philippines in relation to these questions.

PSYCHOSOCIAL NEEDS/CONCERNS

- Overworked;
- No time for recreation;
- Emotional baggage from my work;
- Financial instability;
- General insecurity and danger;
- Nature of work that requires me to be aware and present and at all times; and
- Physical, emotional and intellectual exhaustion.

EXISTING SUPPORT I HAVE

- Peer-to-peer discussions;
- Informal debriefing sessions;
- Accommodating superiors;
- Informal mentoring;
- Weekly staff and case meetings;
- Good family support;
- Encouragement of staff to take breaks;
- Flexible working hours;
- Working from home options; and
- Ad-hoc healing programmes.

HOW I ADDRESS THESE NEEDS

- Therapy;
- 'Me' time, reflection, journaling;
- Sports and exercise;
- Traveling;
- Deep breathing, mindfulness exercises and meditation;
- Taking breaks/leave, resting, sleeping;
- Recreation and hobbies - dancing, singing, massage, laughter, spending time with friends or in nature;
- Paying attention to physical symptoms;
- Safe and pleasurable sex;
- Shouting; and
- Regulating diet: Intermittent fasting, eating more healthy food or indulging in comfort food.

EXPECTED SUPPORT I WANT

- Professional help and consultations;
- Mandatory debriefing sessions;
- Mandatory leave for well-being;
- Systematic efforts to raise awareness on importance of well-being and mental health;
- Provision of training on different ways to care for well-being;
- Create an office space conducive for well-being (e.g. putting plants);
- Sustained access to healing programmes;
- Provision of health/life insurance; and
- Have a livelihood security programme.

Challenges

The lack of resource is one of the key limitations most organisations encounter in being able to provide support their staff's well-being. This challenge could be addressed in several ways, as mentioned by participants during the workshop. Organisations, could for example, consider:

(a) Partnering with other organisations that have the capacity to provide services, such as MAG; and/or

(b) Including well-being in every project organisations apply for with donors. It should be incorporated during the proposal stage to ensure people being hired to perform a certain project will have support.

There are also things that can be done immediately at little to no cost. One simple step is to create safe and supportive spaces in the organisation by normalising informal discussions on how we feel, doing breathing exercises together, and developing policies that encourage people to rest.

Common questions on institutionalising well-being

Should we hold off from hiring staff that may have mental health issues or who show symptoms of being unwell, until we have a better capacity to address these issues?

Not necessarily. It may be necessary to have some kind of mental health evaluation prior, so both you and the person you would like to hire are aware of their situation and what support they may need. But the wounded heal, and when healed, are assets. As long as they process their situation and are willing to get better, they can be an important part of the organisation.

What examples can you give to illustrate how our well-being affects our work?

One way our well-being can affect our work is

that we might take out the anger or sadness we feel – but have not properly processed – onto the people we work with, potentially causing more harm to them. During the workshop, for example, one participant shared that in learning more about psychosocial well-being, she realised how many mistakes she was making along the way, including taking her pain out on the victims of rights violations she worked with because she did not have time to process her own pain and was unaware of how stress and trauma could be transferred to others.

Limitations of only providing debriefing

Many of the participants in the training mentioned that informal debriefing were one of the most common strategy their organisation used to address their well-being. Usually this involved meeting together after a particular activity, mission or event, to discuss and reflect on what happened, including what went well, what did not, what they felt about it and how the concerns of those participating could be addressed.

Although this is a useful form of support that can be provided to HRDs working in organisations, it is limited in that it does not really help those who are already showing symptoms of trauma or other issues related to their well-being, and who may need access to professional help. In this way, having a referral system to complement debriefing is beneficial.

Building resilient HRD communities

What is needed?

Many HRDs are already engaging in several practices that enhance their well-being, whether individually or as an organisation. To build more resilient HRD communities, however, we need to work together by strengthening our networks. As MAG emphasised: “We all have our own capacities. You as CSOs are dealing with the HRDs directly, and we have psychologists. We should work together to find ways to refer the HRDs we know to get the help they need.” To do this, better partnerships should be established among non-governmental organisations (NGOs) and civil society organisations (CSOs) in the country. By putting our collective resources together and collaborating with one another, we can ensure every HRD has access to the resources they need to ensure their well-being.

We can start by brainstorming: What system, mechanism or structure can provide a network of support to HRDs? How do you think it will work? In the workshop, participants suggested having a system that:

Works with victims of violations to process their pain, and then provide them with capacity building so they can also be defenders;

Works with allies such as churches, friendly barangay (district) officials, universities, counsellors, psychologists;

Maps out available services (medical, psychosocial, legal, faith based services, sanctuaries);

Makes all services accessible to HRDs through a strong and reliable referral system, drawing on the different capacities of NGOs and CSOs; and

Draws on different NGO and CSO’s best practices and lessons learnt regarding HRDs and well-being.

Steps forward

In order to build a strong and resilient HRD community, we must start by finding ways to take action in our own capacities today. Below are a few examples of what participants mentioned they would do after the workshop to play their role in strengthening the resilience of: themselves as HRDs, their organisations and the human rights community at large.

APPLY SKILLS

Participants agreed they would apply the skills they learnt from this workshop personally and in their work place. This can mean taking small steps, such as starting meetings by doing a few breathing exercises together, rather than delving into heavy discussions during the meeting right away. By doing so, they hope to normalise a culture of well-being for themselves and their organisations.

SHARE LEARNINGS

Participants committed to sharing what they learnt from the workshop with their colleagues, especially the practical exercises, so that others can have the opportunity to practice it themselves and address with their well-being.

ADVOCATE

Participants said they would advocate for their organisations to take well-being more seriously and to develop the necessary supporting mechanisms for their well-being. Participants also mentioned advocating about the importance well-being to donors to ensure all projects have a component on well-being.

CONNECT AND COLLABORATE

Participants mentioned they would make more efforts to connect with one another and potential allies in the human rights movement to ensure they learn from one another's best practices and explore potential opportunities for collaboration.

Apart from the participants, the organisers of the workshop also outlined steps they can take in their organisation's capacity to strengthen the resilience of the human rights community:

On MAG's side, representatives mentioned that in the Philippines, what was missing was a network of service providers that were ready, willing and capable of assisting HRDs and who had an understanding of the context of their work. To this end, they are seeking to launch an initiative called the Psychosocial Upliftment Support for HRDs (PUSH). This initiative aims to develop a network of health-care professionals that will provide services specifically for HRDs. Additionally, MAG is looking to update their [self-care handbook](#) and translate it into different formats such as a videos, infographics or posters to make this information more accessible for others to use.

On FORUM-ASIA's side, representatives mentioned that they are initiating a project in 2020 that aims to develop a pool of local holistic security trainers in the Philippines, as well as other Asian countries. Through this project, FORUM-ASIA hopes to contribute to developing a strong network of HRDs with the capacity to provide physical and digital security, as well as well-being training for HRDs at risk in the Asian region. Similar to PUSH, this will serve to ensure that HRDs have better access to the services they need to safeguard their well-being and safety.

On PAHRA's side, representatives welcomed participants to share any recommendations they had both to PAHRA and the human rights community in the Philippines more broadly, about the support they require most.

Below are some of the recommendations:

- 1 To provide a platform for organisations to share best practices on well-being;
To develop a template for an organisational policy on well-being specialised for HRDs or assist in disseminating existing policies on well-being so HRDs and their organisations can have guidance on key points to include when they are developing their own;
- 2 To provide access or referral systems to service providers willing to assist HRDs;
To continue to organise awareness raising activities and practical workshops on well-being, self-care and mental health, especially for higher level staff to encourage them to make the necessary organisational changes;
- 3 To potentially develop a website where participants can have a refresher on what they learnt, and HRDs more broadly can have access to resources on well-being.
- 4 FORUM-ASIA suggested that until such a website is established, they could develop a resource booklet about the key lessons from the workshop that participants may share to others. It is in response to this that this booklet has been developed; and
- 5 For membership-based organisations to incorporate clauses on well-being in their policies and documents, so their members will be urged to adopt these principles.

These are only some examples, which we hope can inspire more ideas and mobilise others into taking action. Ensuring the well-being of HRDs is critical for their health and safety, and for enabling them to continue to pursue their human rights work sustainably.



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