The COVID-19 pandemic is a traumatic event, impacting all people and communities.

**What is Trauma?**
Trauma results from any event or set of circumstances an individual experiences as physically or emotionally harmful or life threatening. Trauma can have lasting negative effects on a person's mental, physical, social, emotional, or spiritual well-being and overall functioning.

There is a direct correlation between trauma and health conditions such as diabetes, COPD, heart disease, cancer, and high blood pressure. Trauma can stem from childhood abuse or neglect, violence, natural disasters, physical, emotional, or sexual abuse, grief or loss, medical interventions, and cultural intergenerational and historical trauma.

The current crisis may compound the previous traumas of individuals, which may result in retraumatization (reliving stress reactions experienced as a result of a traumatic event when faced with a new incident).

This is particularly relevant in these times, with common feelings of uncertainty, disconnection, change, powerlessness, anxiety, or irritability. A person's past and current experiences of trauma may result in various responses to these stressors.

**What is Vicarious Trauma?**
Vicarious trauma, also known as secondary trauma or compassion fatigue, is emotional duress caused by the consistent exposure to hearing about another person’s firsthand traumatic experiences.

It is much more serious than general burnout, with symptoms that closely mirror those of trauma and may impact one’s ability to function in their day-to-day routines.

With the crisis response and changes to distribution models, your food bank staff is having more direct contact with the communities you serve and may be at greater risk of experiencing vicarious trauma.

**RECOGNIZING THE SIGNS OF TRAUMA**
- **Physical:** nausea, feeling uncoordinated, diarrhea, dizziness, tremors, chest pain, rapid heart rate, headaches, sleep disturbances, chills
- **Cognitive:** slow thinking, difficulty making decisions or problem solving, confusion, disorientation, challenges calculating or concentrating, difficulty remembering or naming common objects, hyper-vigilance
- **Emotional:** anxiety, guilt, grief, depression, feeling lost or overwhelmed, feeling abandoned or isolated, worry about others, anger or irritability, feeling numb, startled, or shocked

Sources: CDC, NAMI, SAMHSA, Center for Health Care Strategies
Trauma-Informed Care and Vicarious Trauma

What is Trauma-Informed Care?
Trauma-informed care is the adoption of principles and practices that promote a culture of safety, empowerment, and healing. Based on what we know about the prevalence and impact of trauma, it is necessary to ensure widespread adoption of trauma-informed care.

A trauma-informed approach is a program, organization, or system that realizes the widespread impact of trauma and understands potential paths for supporting resilience. A trauma-informed organization recognizes the signs and symptoms of trauma in their staff and the people that they serve, and fully integrates knowledge about trauma into policies, procedures, and practices to actively resist retraumatization.

Trauma-informed care has the potential to improve service outcomes as well as the well-being of staff.

While becoming a trauma-informed organization can be time consuming and resource intensive, there are relatively simple, foundational steps that providers can take to move toward fully adopting a trauma-informed approach to care.

How to effectively address the effects of trauma.
Everyone is likely to experience a traumatic event in their life, it is almost unavoidable, and how people are affected, cope and recover varies greatly. However, the key to addressing the effects of trauma is resilience, which refers to a person’s ability to overcome adversity and continue his or her normal development.

For all of us as individuals and communities, resilience is more likely to be cultivated when we provide the services, supports and health resources that make it more likely for everyone to do well in ways that are meaningful to themselves and their communities.

“The team is grieving what was and will likely never be again. They are lonely. They are tired. They are uncertain about the future. I am reminding people of mental health support services, but I know that many will not reach out. I too am experiencing all of those things and remain grateful for a strong leadership team and supportive board.”

— Michelle Book, President & CEO
Food Bank of Iowa

Sources: CDC, NAMI, SAMHSA, Center for Health Care Strategies

NEXT STEPS
To learn more about actions you and your food bank can take to address the effects of trauma within your teams and to become a more trauma-informed organization, check out the Next Steps module HERE.