

## **The Impacts of Cumulative, Multiple & Ongoing Distressing Events**

We live in a time where we have access to an unprecedented amount of information. While this has many benefits, it also means that we are aware – almost instantly – of disaster, conflict, and violence. Sometimes, it can feel endless. This is a type of witnessing – if even from a distance. Witnessing numerous, cumulative protracted crises impacts our sense of safety and erodes our wellbeing. For families who have experienced forced displacement, current events are often painful reminders of past difficult events and experiences, and the reality that many loved ones, including themselves, are not out of harm's way. Wars in places such as Gaza, Sudan, Ukraine; and crises in the U.S. including school shootings, political violence, and targeting of immigrant communities, increases the stress and distress of many of the families we serve. Below, we reflect on the toll of observing many ongoing local and global crises, and ways we can best support.

### **Crises Overview: Gaza, Sudan, Ukraine and U.S.**

In Gaza, families continue to face bombardment, displacement, starvation and critical aid blockades at unimaginable levels. The situation has only become more harrowing for children and families. According to [UNICEF](#), “The last refuge for families in the northern Gaza Strip is fast becoming a place where childhood cannot survive.” Confirmed famine is also notably visible, children examined for disease and malnutrition. According to the [IRC](#) even prior to recent escalations, “...more than one million Palestinian children needed mental health and psychosocial support. Today, every child in Gaza has been exposed to deeply distressing events– losing loved ones, witnessing violence and enduring constant fear.”

The “forgotten war” in Sudan has led to around 150,000 deaths, with almost a quarter of a population of 50 million forced to flee their homes ([TIME](#)), with no end in sight. Noted as “invisible anguish,” marking this civil war catastrophically unique due to the perception that it is “...in the shadows” despite immense humanitarian implications. Lack of water, food shortages and sustainable health services and institutions deepen the emotional and physical wounds of displacement.

In Ukraine, the three-and-a-half-year tragic invasion is still ongoing with overwhelming uncertainty continuing to loom for those displaced and when/if there is an end to the war. Between February 2022–July 2025, there is an estimate of 12.7 million people in need of humanitarian assistance, millions internally displaced ([UK Parliament](#)). Externally, over 6 million have fled Ukraine ([IRC](#)). Factors of importance

if/when a return is possible: Safety, housing and economic prosperity ([CEPA](#)). Due to the continuous war, preparedness and planning for the future remains difficult.

In the U.S., the psychological toll of detainment, deportation, and family separation, alongside daily stressors and challenges, only intensifies immigrant and refugee community trauma ([Society of Refugee Healthcare Providers](#)). No matter the path taken to reach safety, security and prosperity (the migration journey often having longstanding impacts), "...all of this as well as fear for personal safety, loss of control over circumstances, and uncertainty about the future can contribute to anxiety, depression, post-traumatic stress disorder (PTSD), and other mental health symptoms" ([APA](#)). The fear of deportation and detention can lead to feelings of anxiety, depression, poor self-esteem, self-blame and various behavioral concerns. The latest immigration policies will continue to compound detrimental mental health outcomes for communities for the foreseeable future.

### **Mental Health Impacts:**

Whether directly (or indirectly) impacted, observing multiple, ongoing distressing events such as the above crises places enormous strains on providers and the communities we serve. Traumatic reminders add to existing feelings of uncertainty, helplessness/powerlessness, anxiousness, sadness and loneliness, as well as fear. It is common for affected individuals to have feelings of anger, frustration, shame and even guilt. People may think, "What does this mean for me/loved ones?" "Could I have done something differently?" "No one around me understands" "Can I be doing more?" This can greatly impact people's worldview, leading to thoughts of "How can the world be so cruel? Where is justice?" Some affected may choose to withdraw. Others may see a decrease in functioning with inability to focus, process and/or concentrate. Additionally, parental fear, stress and distress can contribute to children's worry and erode their sense of safety. Young children may see developmental regression, increased separation anxiety, and trouble eating or sleeping. Children and youth may see behavioral changes, changes in mood, increased withdrawal, conflict with peers, or changes in academic performance.

### **Ways Providers Can Best Support:**

As we continue to witness distressing events, providers can:

1. Ensure we validate all feelings and emotions shared with us.
2. Be transparent and check in with clients on their priorities as these may have shifted as the context changes.

3. Map community-based resources knowing that a sense of belonging and solidarity is important to resilience.
4. Refresh resources checking to ensure that they are up to date and relevant for the current context.
5. Reground yourself in trauma Informed care making sure that your practices are adapted and focused on current realities.
6. Support one another and support staff with personal/lived experience. What are we doing to support one another in times of continuous crises of these scales, how are we checking in?
7. Provide respite from news and current events. Reminding support staff and clients to create breaks from news cycles; be mindful of news content in common spaces such as waiting areas and break rooms.