



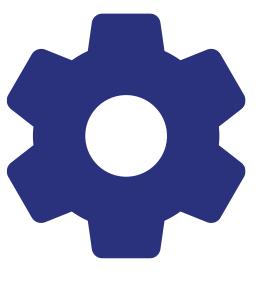
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Here's a quick overview of your settings.

This is a webinar, so you're joining on listenonly mode.





switchboard connecting resettlement experts

Connect phone or computer audio under **Audio Settings**

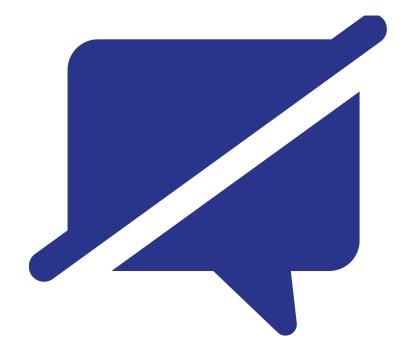








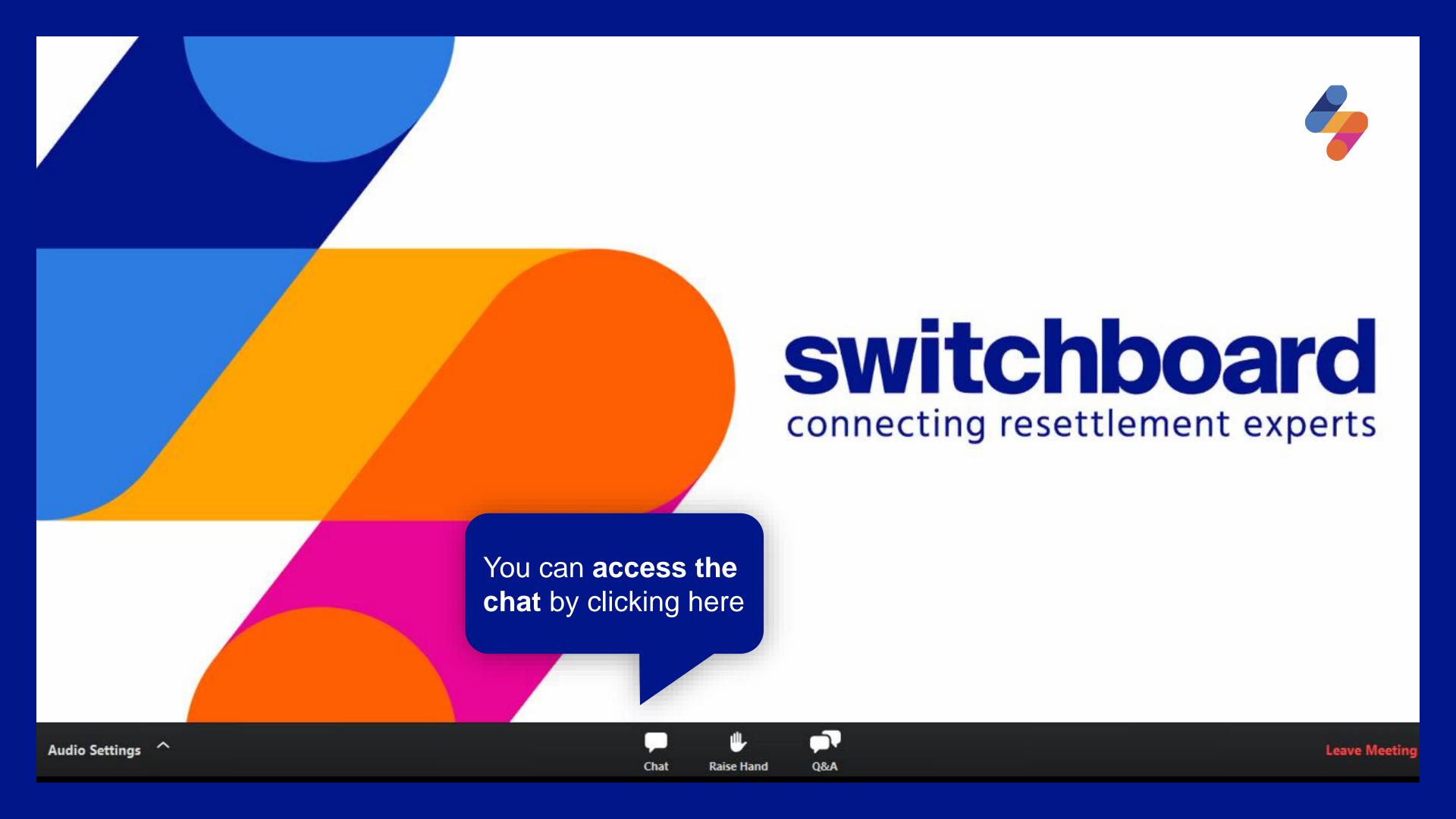
Due to the large number of learners on today's webinar, we've disabled the chat box.





Though disabled for learners, keep an eye on the chat for messages from Switchboard and links to various resources we'll be mentioning throughout.







You do have the option to send messages to the speakers and co-facilitators via the Q&A.





by clicking **Q&A** here

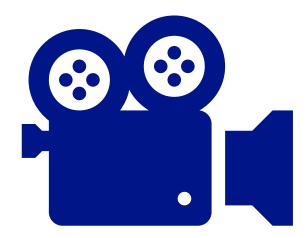








Today's webinar will run for 90 minutes and is being recorded.





You'll receive an email with the recording, slides, and recommended resources within 24 hours.

The webinar transcript, along with the recording, will also be posted on the Switchboard website.





Last, we ask that you kindly complete our webinar satisfaction survey at the conclusion of our session.





This short, 5-question survey helps us here at Switchboard continuously improve our training and technical assistance offerings to you all.





Thank you for joining today's training!

We will begin momentarily.



Today's Facilitator



Eugenia Gusev

Assistant Director,
Summer EBT/ SUN
Bucks, Maryland
Department of Human
Services.

Today's Speakers









Monica Bhagwan

Director of Curriculum, Leah's Pantry

Diana Cardenas

Training Specialist, Leah's Pantry

Eunice Rivera

Senior Program Coordinator, Leah's Pantry





The Leading Voice For Trauma-Informed Nutrition Education

Envision communities where everyone can cultivate a healthy relationship with food and their bodies.

Leah's Pantry





Implements and creates innovative programs that explore our relationship with food, support health, and build resilience.



Builds capacity of

partner organizations
to align nutrition
security efforts with
trauma-informed
principles.



Starts conversations to expand the frame and include impacts of trauma on our nutritional health.

Learning Objectives



By the end of this session, you will be able to:



DESCRIBE

ways that newcomers have multifaceted and complex experiences with food

EXPLAIN

the relationship between positive and adverse experiences and nourishment

DESIGN

trauma-informed nutrition education programs that respond to positive and adverse experiences and that incorporate the different ways we relate to food

APPLY

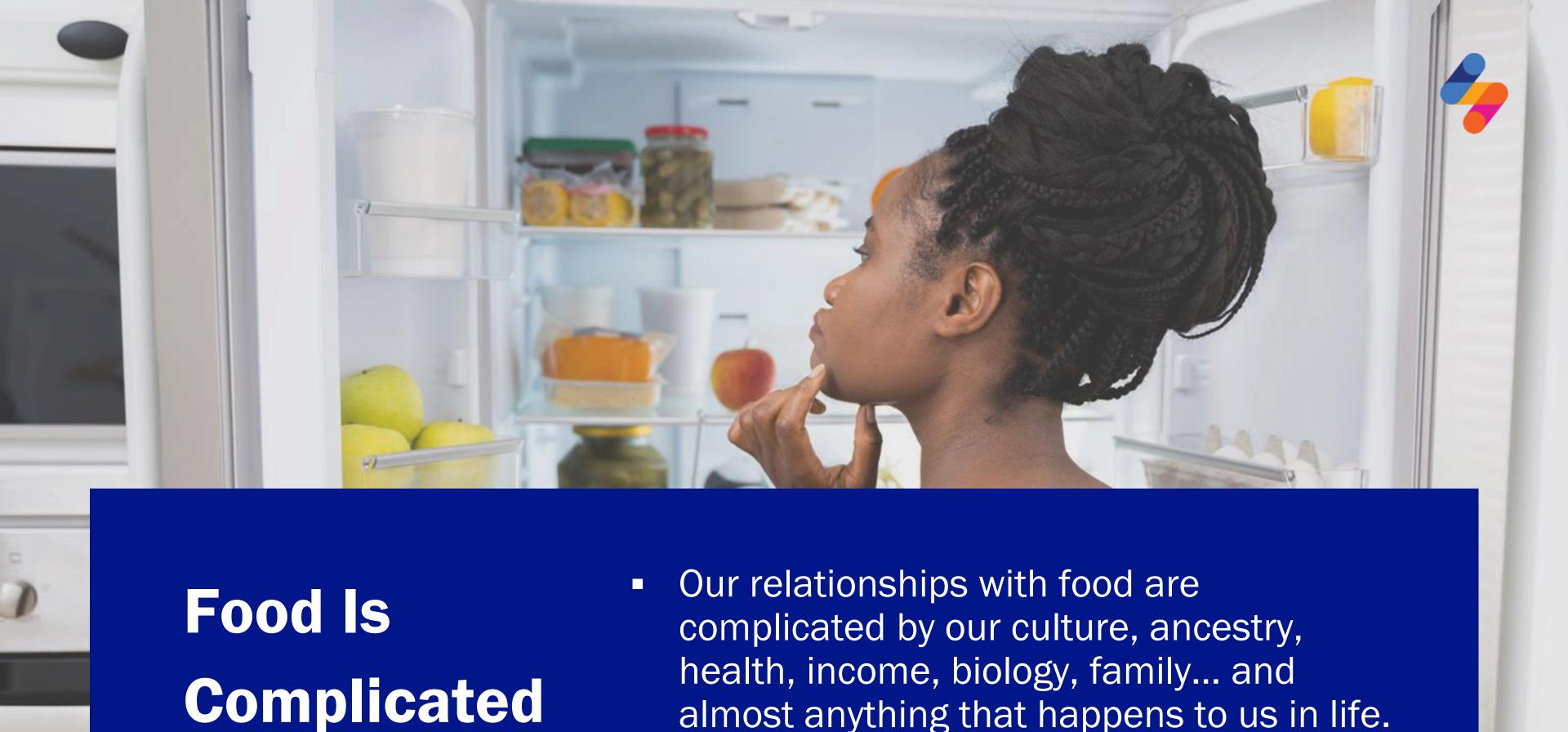
practical approaches for delivering trauma-informed nutrition education to newcomers with compassion and connection





Newcomers' Experiences with Food

A Complex and Multifaceted Relationship



HEALTH: Nourishing my body and my mind matters

SOCIAL: Food connects me with my culture and community

AESTHETIC: A meal can be a work of art

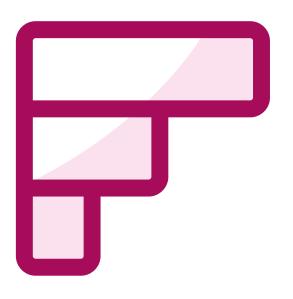
SACRED: Food is part of my spiritual beliefs and practice

MORAL: Eating should be a morally and ethically responsible act

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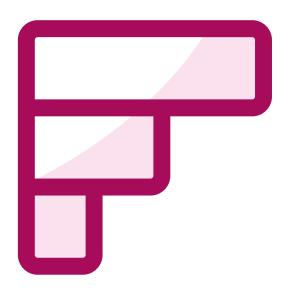
Meaning of Food in Life-Moral Which statement most resonates with you? Please choose one.

⁽i) Start presenting to display the poll results on this slide.

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Meaning of Food in Life-Health Which statement most resonates with you? Please choose one.

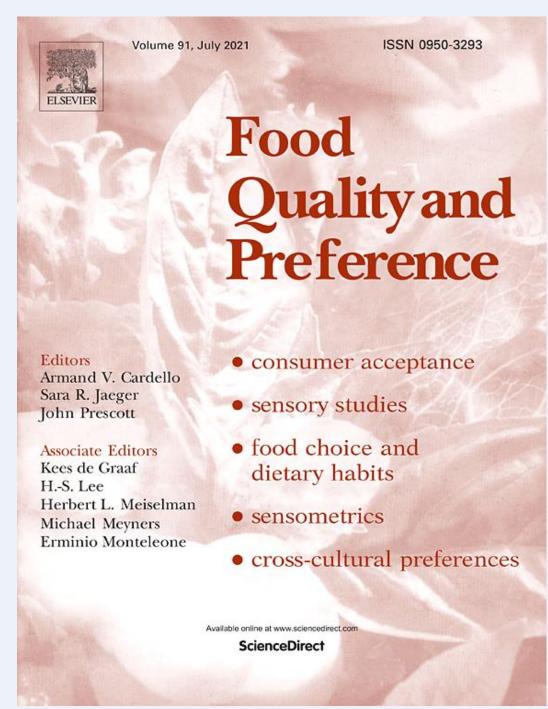
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Surprising Discoveries

About the Drivers of Dietary Habits

- Social and Moral domains drive healthy eating
- Aesthetic domain (with Health domain being less important) drives indulgent eating behaviors
- Sacred domain (with Aesthetic domain being less important) drives functional food behaviors





Awareness of the Meaning of Food in Our Lives



How do you think about and interact with others who hold a different meaning of food?

Health

Moral

Aesthetic

Social

Sacred



Afghan Women's Focus Group

In their Own Words

As a mother, my first priority is food, especially for my children, because when their stomachs are full then we can do a lot... both rent and food are equal as priority.

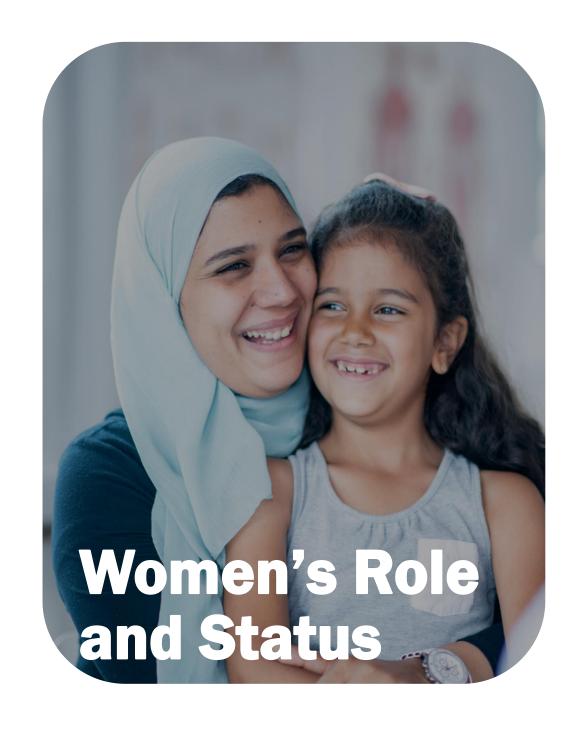
We all know how kids are once they eat something in school, and day after day, they get used to it. So, my children sometimes want pizzas. We do buy it for them; however, sometimes we get scared about what if it is not halal.

The nutrition here and in Afghanistan I believe is different. In Afghanistan, we used to eat three times a day. When we first came here, we ate three times a day, but now that has changed. My children's eating schedule is imbalanced because of work and school. We no longer eat at the table together, because we are all not home at the same time. Whoever is home eats whenever they feel hungry.

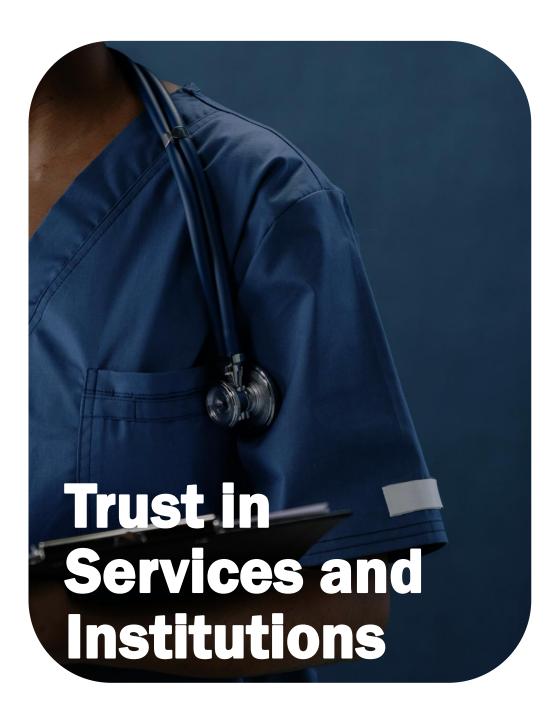
In what ways might the meaning of food in U.S. culture be different from newcomers' home cultures?

Overview









Women's Roles and Status

- Family and kinship dynamics
- Gender norms
- Rights and equality



Messaging and Marketing

- Commercial environment
- Perceptions about health and nutrition



Trust in Services and Institutions

- Perceptions of public services, such as SNAP/EBT and WIC
- Relationship to government and institutions
- U.S. Charitable Food Network
- Previous experiences of shaming or trauma when seeking help







Trauma and Resilience

The Relationship Between Positive and Adverse Experiences and Nourishment

Sources of Trauma



Violence

and displacement



Hunger and food insecurity

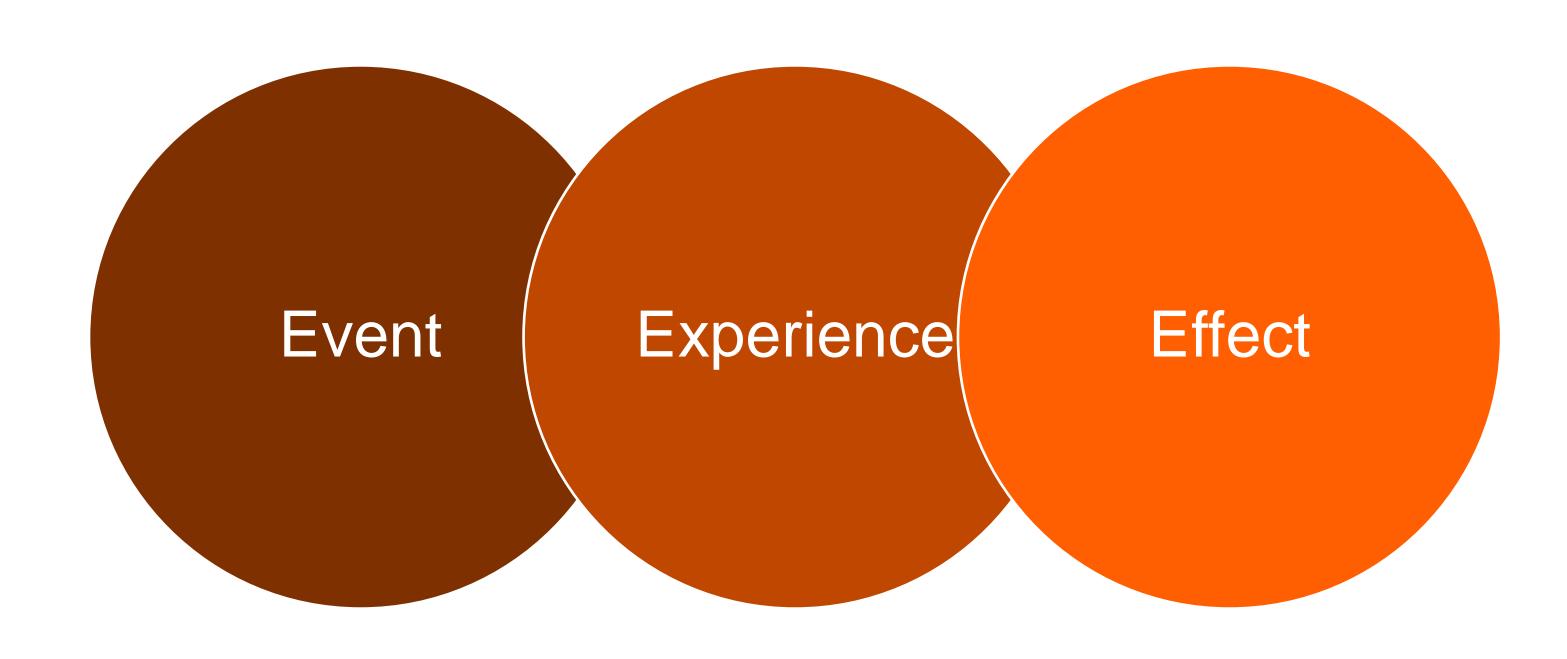
Unreliable food supply

Loss of self-determination

and livelihood; poverty

Trauma is the...







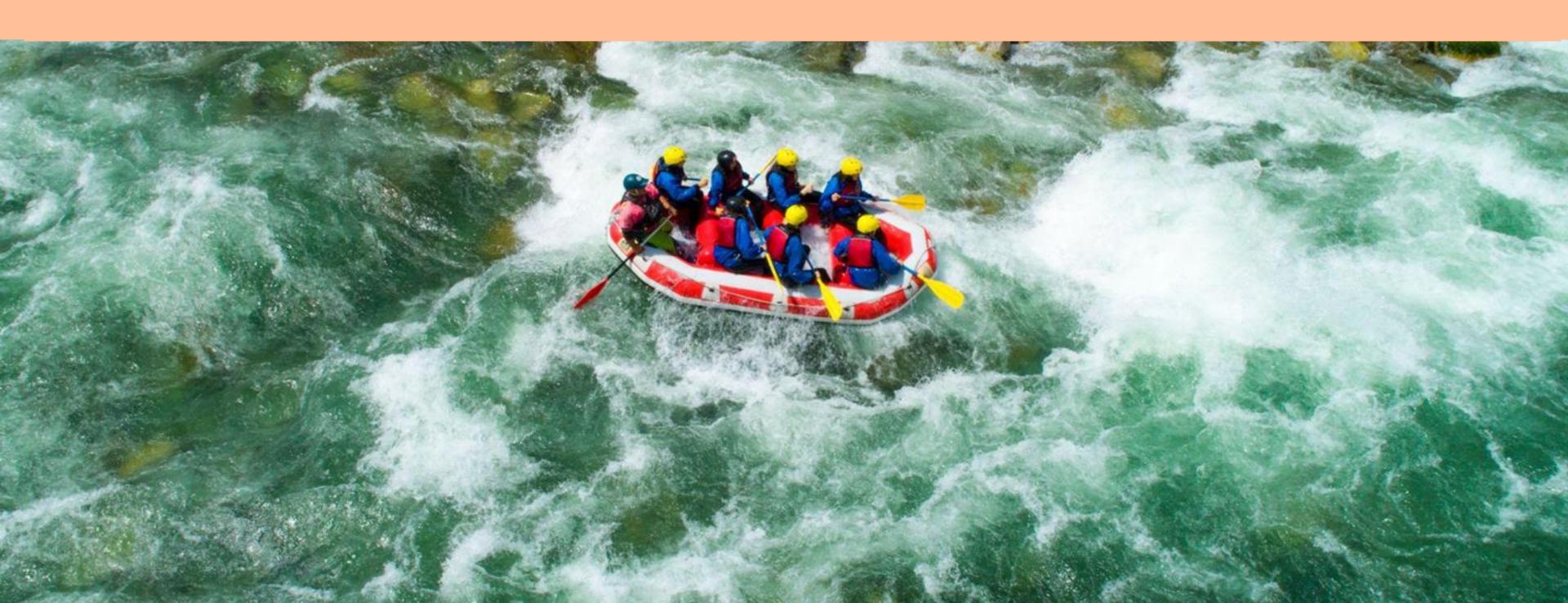




Resilience



The process of the body and mind "adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress." (Source: American Psychological Association)



Communal Values as Protective Factors

- Agency, self-determination, and hardiness
- Collective responsibility and interconnectedness
- Supportive, caring, cohesive communities
- Traditional knowledge, values, and rituals
- Being treated as special, as valued
- Positive cultural and ethnic identity





Reflection Questions



What protective and healing factors do I have in my life?

Which ones do I need support around?

A Regulated Stress Response



Hyperarousal ("Fight/Flight" = attack or run away)

Be flexible Self-regulate

Be curious Make decisions

Be creative Absorb nutrients

Relate Heal physically

Hypoarousal ("Fawn/Freeze" = appease or shut down)

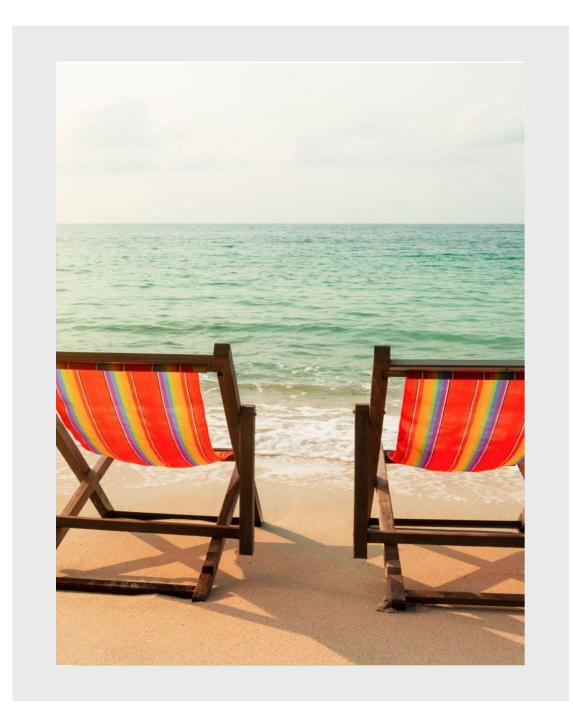
Window of Tolerance

Dr. Dan Siegel



Acute or frequent adversity and stress shrink our window of tolerance.







Support and care widen our window of tolerance so we can cope with challenges and resist illness and disease.



Survival Response: Emotional Symptoms



Hyperarousal ("Fight/Flight")

Anger Anxiety Chaotic Hypervigilance Hyperactive

Stuck "On"

Stuck "Off"

Hypoarousal ("Fawn/Freeze")

Depression Numbness Withdrawal

Shame Disconnection

Lack of Motivation

Survival Response: Health Impacts



Hyperarousal ("Fight/Flight")

High blood pressure Chronic pain Sleeplessness Digestive problems Appetite changes

Stuck "On"

Stuck "Off"

Hypoarousal ("Fawn/Freeze")

Chronic fatigue Low blood pressure Poor digestion Appetite changes



Where do food and nourishment fit into the picture of trauma and resilience?

Nourishment and Resilience

- A healthy body and brain support resilience
- Good nutrition is essential for good physical, mental, and emotional functioning
- Health is more than weight
- Immigrants have better health outcomes than native-born citizens (Immigrant Paradox)



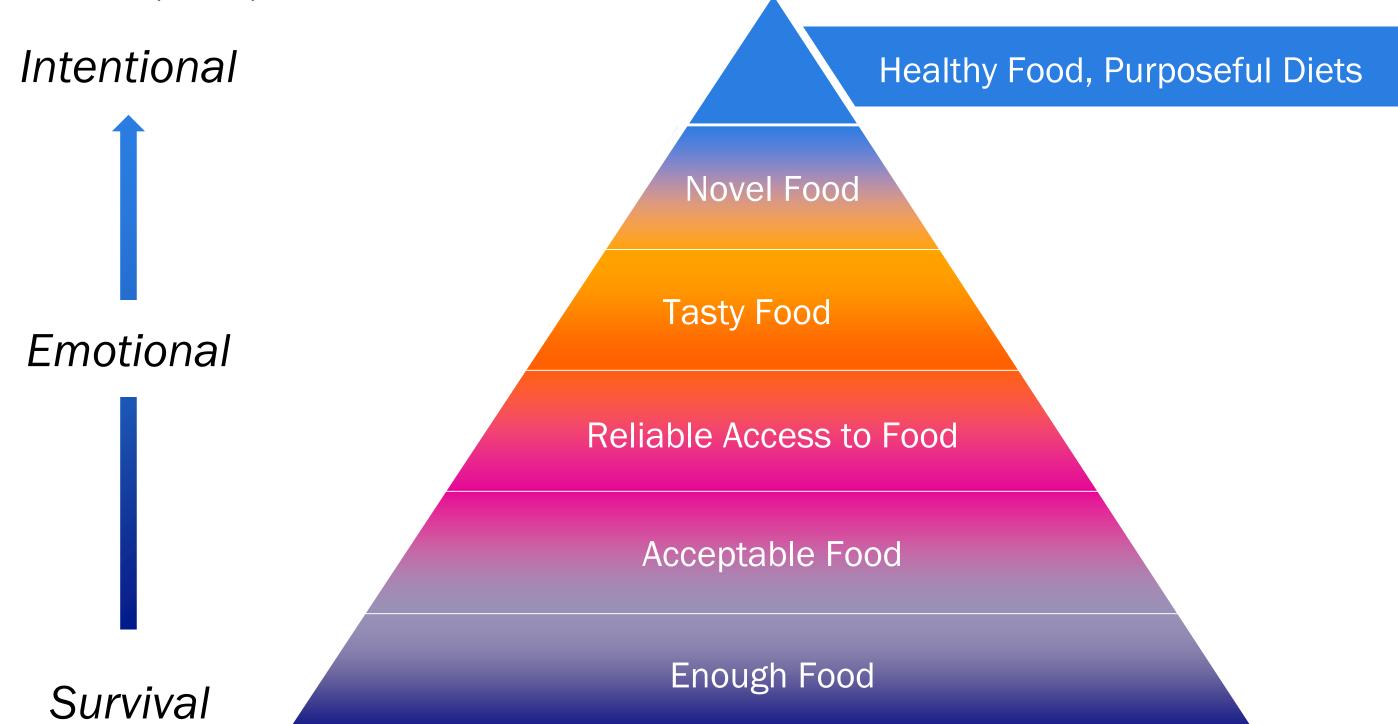




Does the food environment support resilience?

Hierarchy of Food Needs

Ellyn Satter, RD, LCSW







Reflection Question

What food needs do you usually spend time talking about with clients or others?

Focus Group Quotes





In Afghanistan, we were thinking about food, but gratefully we have that here; we are not worried about being left hungry or starving."

Our first priority here is rent. In Afghanistan, our first priority was food because here our apartments are rental, so we first think about rent and then food.

To tell you the truth, rent comes first for my family, because if we don't pay the rent we are fined, so we lose more money. So even if the EBT card doesn't last until the end of the month, then we won't have money to use to buy food for the days we don't have our EBT.







Designing Trauma-Informed Programs

that Respond to Newcomers' Positive and Adverse Experiences with Food

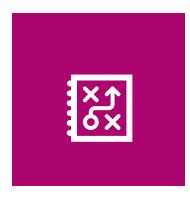
Trauma-Informed Programs

Overview

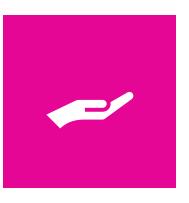




Programmatic challenges



Programmatic approaches to addressing challenges



Incorporating a trauma-informed approach to current work

Common Nutrition Support Strategies







Provide resources on finding free or affordable food in the community



2

Facilitate client access to government nutrition and food security programs



3

Support learning around recognizing healthier food options



4

Connect clients to sources of culturally appropriate foods

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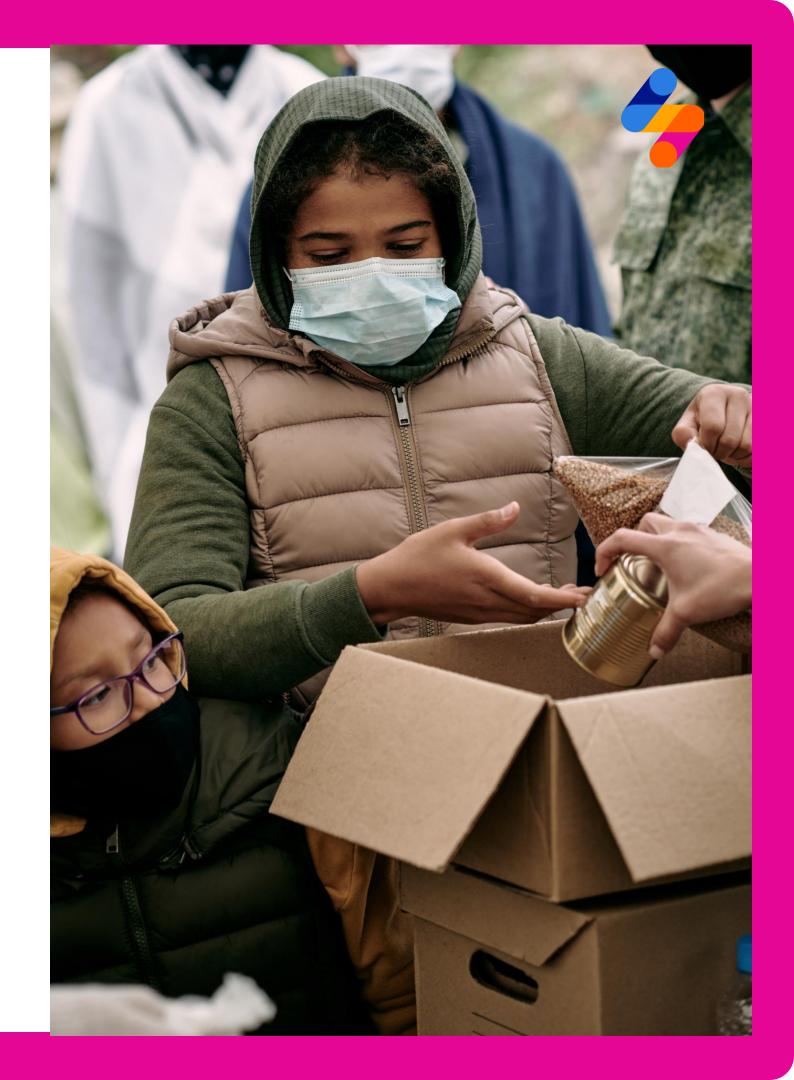


What are some common challenges that you face when engaging newcomers around food and nutrition issues? [not the challenges newcomers face)

⁽i) Start presenting to display the poll results on this slide.

What Makes This Difficult?

- Insecurity and lack of trust
- Fear, judgement, and shame
- Institutional challenges
- Staff burnout and vicarious trauma







Trauma-Informed Programs



Address practical and emotional needs for security and dignity



Reinforce agency and selfdetermination



Recognize and support protective factors and resilience for sustained well-being

Provide resources on finding free or affordable food in the community



+

Facilitate client access to government nutrition and food security programs





Support learning around recognizing healthier and desirable food options



Nutrition Facts

8 servings per container

Serving size 2/3 cup (55g)

Amount per serving

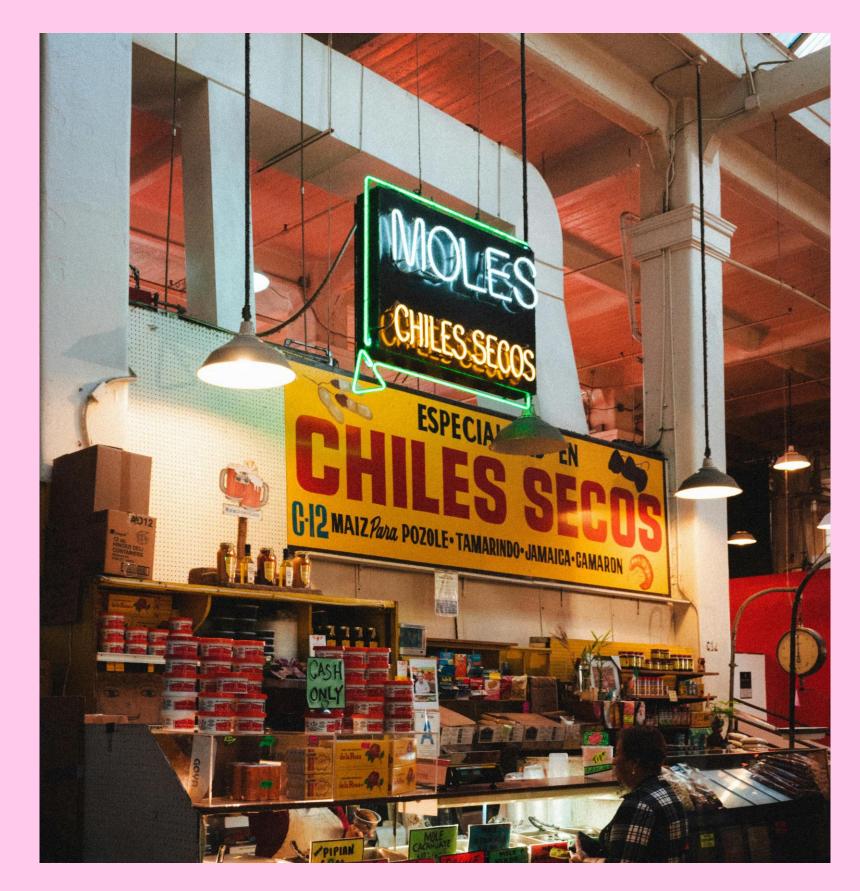
Calories

230

% Daily	Value*
Total Fat 8g	10%
Saturated Fat 1g	5%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 160mg	7%
Total Carbohydrate 37g	13%
Dietary Fiber 4g	14%
Total Sugars 12g	
Includes 10g Added Sugars	20%
Protein 3g	
Vitamin D 2mcg	10%
Calcium 260mg	20%
Iron 8mg	45%
Potassium 240mg	6%

^{*} The % Daily Value (DIV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.

Connect clients to sources of culturally appropriate foods and cooking <u>supplies</u>



Empowering Experiences



"It was hard in the beginning, but once we found our needed things, it was easy to go back to our own traditional ways."

Focus Group Participant





Practical Approaches for Delivering

Trauma-Informed Nutrition Education to Newcomers





1

Overview

Foundation

Regulation and resilience

2

Skills

Compassionate and strengths-based conversations

3

Application

Healthy food choices and weight discussions

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What is one word that describes how you feel about having nutrition conversations with your clients?

⁽i) Start presenting to display the poll results on this slide.



Support a Regulated Stress Response

- Are you in your window of tolerance?
- Are they in their window of tolerance?





- Acknowledge vulnerability
- Show curiosity, openmindedness, and possibility
- Have a relaxed attitude toward food
- Recognize the capacity to be wise, creative, and resourceful
- Encourage self-advocacy













Remember the meaning of food

Let go of assumptions and outcomes

Remember kinship and social context



Have Strengths-Based Conversations

- What skills and strengths has the client used in the past?
- What is one meaningful idea to meet their unique wants and needs right now?

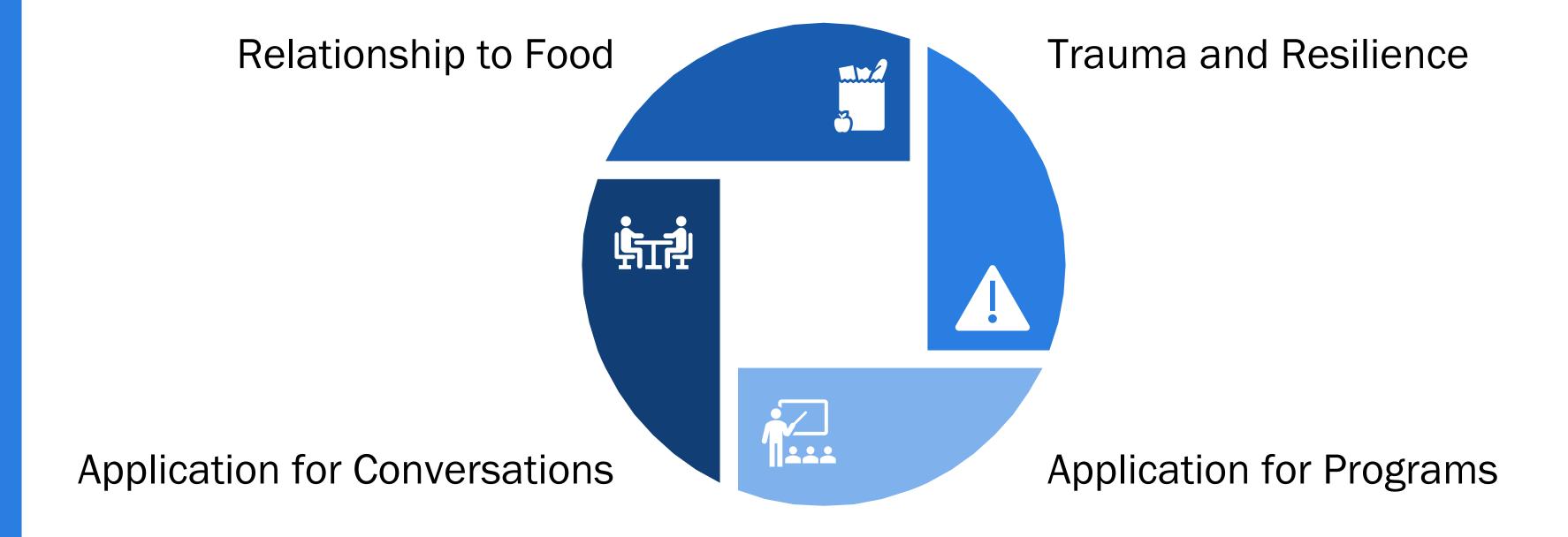
Case Study: Reading a Food Label

Nutritio	n Facts
8 servings per cor Serving size	ntainer 2/3 cup (55g)
Amount per serving Calories	⁹ 230
	% Daily Value*
Total Fat 8g	10%
Saturated Fat 1g	5%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 160mg	7%
Total Carbohydrat	e 37g 13%
Dietary Fiber 4g	14%
Total Sugars 12g	
Includes 10g Ad	ded Sugars 20%
Protein 3g	
Vitamin D 2mcg	10%
Calcium 260mg	20%
Iron 8mg	45%
Potassium 240mg	6%

- Are food labels important to you?
- What is important to you when you read a food label?
- How do you go about identifying healthy options from a package?
- What do you wish you could do with a food label?
- Of all the things we discussed, which one will be the most helpful this week?

Summary





Your Action Items





What do we need to keep in mind when supporting newcomers who may have different experiences, values, or priorities around food and life?

What is the experience of obtaining services and resources in my county?

How do I expand and nurture my relationship to food, nutrition, and well-being?



Learning Objectives



Now you are able to:



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ways that newcomers have multifaceted and complex experiences with food

EXPLAIN

the relationship between positive and adverse experiences and nourishment

DESIGN

trauma-informed nutrition education programs that respond to positive and adverse experiences and that incorporate the different ways we relate to food

APPLY

practical approaches for delivering trauma-informed nutrition education to newcomers with compassion and connection



Help us help you!

Scan the QR code or click the link in the chat to access our feedback survey!

- Five questions
- 60 seconds
- Helps us improve future training and technical assistance

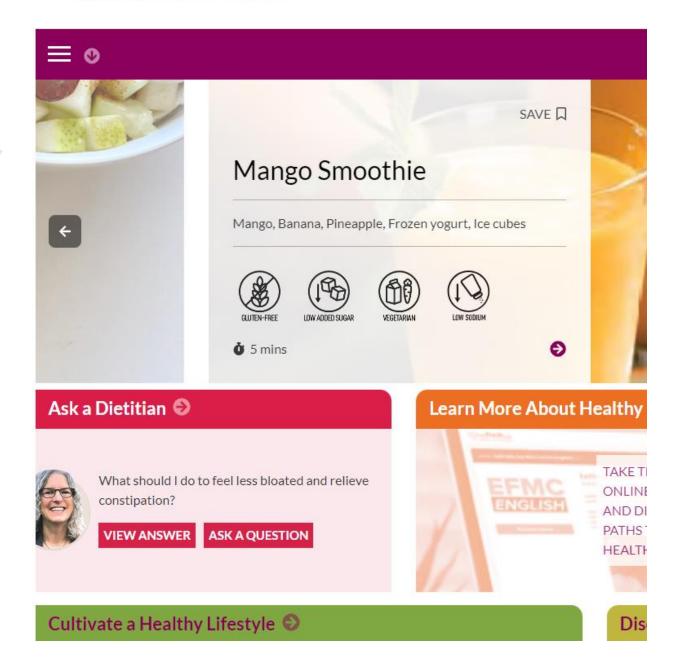




Recommended Resources

- <u>EatFresh Mini-Course:</u> This self-paced minicourse will teach you more about basic nutrition.
- <u>EatFresh.org</u>: This website is a great resource for finding recipes for food that newcomers may be unfamiliar with.
- Arbit, Ruby, & Rozin. (2017). Development and validation of the meaning of food in life questionnaire (MFLQ)
- Kokkoris & Stavrova. (2021). Meaning of food and consumer eating behaviors.







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