Minnesota Psychiatric Society
Improving Minnesota's mental health care through education, advocacy, and sound psychiatric practice, and achieving health equity.

January 20, 2026

Ongoing Collective Trauma in Minnesota
- The Minnesota Psychiatric Society

The fatal shooting of a Minnesota resident by an Immigration and Customs Enforcement (ICE) agent, combined with an expanded federal enforcement presence across the Twin Cities, has left our community reeling. As psychiatrists, we are trained to recognize trauma not only in individuals, but in communities. What we are witnessing now is collective trauma. Collective trauma occurs when a population experiences or witnesses an event that overwhelms its sense of safety and trust. Unlike isolated acts of violence, these events ripple outward, shaping how people think, behave, and relate with one another as well as the larger systems around them. Minnesota has confronted collective trauma before. These current events reactivate those wounds, not just for- and, still, particularly among, immigrant communities and communities of color, while also affecting the broader civic fabric of our state.

The Mental Health Impact
In clinical settings and community spaces, patterns emerge after high-profile, unresolved uses of lethal force:

- Heightened fear and hypervigilance, even among those not directly involved
- Collective grief intertwined with anger, when loss is sudden, public, and contested
- Erosion of trust in institutions tasked with public safety and justice
- Depressive symptoms, especially in children and adolescents

Grief at the loss of life does not occur in isolation. It is shared- in families, in schools, and across neighborhoods. Anger, too, is a common and understandable response when communities perceive harm without accountability. When these emotions have no safe outlet, they may harden into despair and division. When harm has been acknowledged and addressed, these same emotions can transform to strengthen connection and mutual support.

When lethal force is used by government agents- especially without a clear, independent investigation- it can amplify fear of authority and distrust in institutions tasked with public safety. This is particularly poignant in immigrant communities and communities of color, many of whom already report anxiety about policing and enforcement. When armed enforcement activity is visible and unpredictable, daily routines- going to work, attending school, seeking medical care, buying groceries- become sources of stress. For individuals with prior trauma histories, including refugees and asylum seekers, such conditions can retraumatize and destabilize mental health that may have taken years to rebuild.

However, collective trauma does not stay confined to one neighborhood or one population. It affects all of us. Even for citizens and those who are not people of color, witnessing neighbors and members of the community assaulted and stripped of their human dignities, and witnessing the impact of this on loved ones, can significantly impact psychological safety, wellbeing, productivity, and physical health. This sort of ongoing collective trauma contributes to political

and social polarization, disengagement from civic life, and widening health disparities. These outcomes are not inevitable, but they are well documented when any trauma is ignored or minimized.

How Do We Heal?

From a psychiatric and public health perspective, healing after collective trauma is a multifaceted endeavor.

- *First, acknowledgment matters.* When harm occurs, transparent and credible processes of investigation are essential- not only for justice, but for psychological repair. Communities cannot heal in the absence of truth, accountability, and clear communication.
- *Second, access to trauma-informed mental health care must expand.* This includes services that are affordable, culturally responsive, and available in the languages spoken by those most affected. This care is not limited to psychiatric mental health care. Psychiatrists (who are medical doctors) work in collaboration with colleagues across the mental health field- social workers, psychologists, counselors, as well as advanced practice providers. Community-based care initiatives through schools, faith institutions, and trusted organizations are also particularly effective in times of widespread distress.
- *Third, mutual support is protective.* Healing spaces such as vigils, dialogues, cultural rituals, and peer support groups allow people to grieve, express anger, and make meaning together rather than in isolation. These are not symbolic gestures; they are evidence-based interventions that reduce long-term psychological harm and strengthen community resilience.
- *Finally, systemic change- policies and practices must consider mental health impact.* Enforcement strategies, public communication, and crisis response decisions all shape psychological outcomes. Trauma-informed governance- planning that anticipates fear, uncertainty, and historical context- can prevent further harm while maintaining public safety. Law enforcement and federal agencies should engage with community leaders to co-create safety practices, rather than acting unilaterally in ways that make neighbors feel targeted.

A Call to Action

We urge policymakers to treat collective trauma with the same seriousness as any other public health emergency: invest in accessible mental health services, support community-based healing efforts, and ensure transparency and accountability in moments of crisis. These steps are not peripheral to safety—they are foundational to it.

We also encourage readers to recognize the power of collective care. Checking on neighbors, supporting local organizations, creating space for grief and dialogue, and resisting dehumanizing narratives all contribute to healing. Collective trauma is sustained by silence and isolation; recovery is sustained by connection.

As psychiatrists, we take responsibility for naming when conditions place mental health at risk. The current climate in Minnesota meets that threshold. We are here beside our communities, grieving with them, and supporting them through our work. Collective trauma, if unaddressed, does not fade on its own. Addressed honestly and early, it can give way to resilience, trust, and renewed civic strength. Healing is not only a personal process—it is a shared civic responsibility.