

# ISSN EN TRÁMITE

# Trauma-Informed Social Work: Strategies for Addressing Mental Health in Communities Affected by Conflict

# Trabajo social informado en trauma: estrategias para abordar la salud mental en comunidades afectadas por conflictos

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# **ABSTRACT**

**Introduction:** Interventions in communities victimized by violence must move beyond the individual clinical model and adopt a comprehensive community-based approach. This model is built upon the recognition of the effect of trauma on the community and advocates for the reorganization of the social fabric. **Methodology:** The methodological framework of this article is based on a narrative documentary review. **Results:** Several strategies exist that promote immediate relief, such as psychological first aid. Others, like group spaces, strengthen trust and the exchange of shared experiences. Resilience is understood as the group's capacity to manage grief and reconstruct its identity based on lived events. **Conclusions:** An intervention is considered effective when it is culturally adapted and incorporates local support systems to empower the community towards its well-being. Sustainability demands a transformation of the experience associated with trauma into foundations that drive the reconstruction of the social future.

**Keywords**: Resilience, Social Work, Community Participation, Social Psychology, Community Development.

JEL Classification: I31, Z13, O15

# **RESUMEN**

**Introducción**: Las intervenciones en comunidades víctimas de violencia deben abandonar el modelo clínico personal y asumir un enfoque comunitario integrador. Este modelo se construye a partir del reconocimiento del efecto del trauma en la comunidad y aboga por la reorganización del tejido social. **Metodología**: La construcción metodológica del artículo se sostiene en una revisión documental narrativa. **Resultados**: Existen algunas estrategias que promueven la contención de forma inmediata como los primeros auxilios psicológicos. Otras como los espacios grupales, fortalecen la confianza y el intercambio de experiencias compartidas. La resiliencia se entiende como la disposición del grupo para gestionar el dolor y reconstruir su identidad en función de lo que acontece. **Conclusiones**: Una intervención efectiva se considera a aquella que se adapta culturalmente e incorpora

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los sistemas de apoyo locales para empoderar a la comunidad en aras de su bienestar. La sostenibilidad demanda una transformación de la experiencia asociada al trauma en sustentos que impulsen la reconstrucción del futuro social.

**Palabras clave**: Resiliencia, Trabajo Social, Participación Comunitaria, Psicología Social, Desarrollo Comunitario.

Clasificación JEL: I31, Z13, O15.

# INTRODUCTION

Armed conflicts have profoundly harmful effects on various areas of people's lives, damaging both physical health and psychological well-being at the individual and community levels (Bendavid et al., 2021; Carpiniello, 2023; Le & Nguyen, 2022). Armed conflicts negatively impact human development, affecting critical dimensions such as health, education, livelihoods, and psychosocial well-being (Vesco et al., 2025; Williamson & Murphy, 2025). In this sense, it is understood that serious crises or events have a negative impact on the psychological and individual well-being of living beings. Exposure to armed conflict, as Carpiniello (2023) points out, increases the prevalence rates of anxiety, depression, and PTSD, with women and children being the most vulnerable subjects. Primary and community care systems, according to Lauriola et al. (2021), play a crucial role in supporting local well-being and understanding local environmental and health risks, promoting global health and environmental resilience beyond the COVID-19 pandemic. It is frequently identified that the alternative response to these crises, as Lakis et al. (2023) and Tierney et al. (2024) point out, was to implement individual clinical care, ignoring the ailments of the community that was also affected. During the COVID-19 pandemic, community health workers, according to Stevenson et al. (2022), were crucial in advocating for communities and addressing inequalities, while confronting structural racism as a constant context. In this context, trauma-informed social work seeks, from its foundations and scope of action, to bridge this gap. This approach articulates knowledge about the effects of trauma with foundations that point toward social justice and community action. This article examines practical tools that streamline this approach in communities fragmented by violence. Community-based alternatives for emergency care, according to Logan and D'Ambrozio (2025), are possible and can be implemented, but require a more precise definition, consideration of environmental and social influences, and addressing barriers. The discussion is based on a documentary review that focuses on lessons learned from the territory. Thus, immediate interventions and long-term support processes are studied, focusing on promoting collective agency. The term resilience stands out in this field, perceived, according to Lester et al. (2023) and Olcese et al. (2024), as the capacity of communities to restructure their field of action toward a new identity with a future projection. According to Mitterlechner and Beese (2023), resilient communities are built through practices such as connecting, identifying, meditating, disputing, and relaxing, helping members adapt and transform in response to stressors such as infectious diseases, migration, and racism. Resilience as self-governance, which according to Korosteleva and Petrova (2022) involves identity, the 'good life,' local coping strategies, and supportive infrastructures, explains what makes communities adapt and transform in the face of adversity.

This research aims to contribute to proposals regarding mental health in contexts of violence and conflict. Therefore, this study is understood as a timely tool for professionals who frequently work in difficult settings, where collective deficiencies converge with individual pain. It is therefore proposed to address this perspective with practices that go beyond repairing damage and focus on building the structures of peaceful coexistence. According to Johnson et al. (2022), innovative models that include extended assessments, brief interventions, and diverse settings can potentially improve access to and quality of acute mental health care in low- and middle-income countries.

# **CONCEPTUAL FRAMEWORK**

The discipline of social work, as Brown et al. (2022) point out, has undergone a paradigm shift from a welfare-based approach to a construct that reveals and acknowledges the consequences of psychosocial trauma in conflict settings. History shows that original intervention actions focused on providing material resources and remedial action to each person. This, according to Kim et al. (2024), created a gap in work with communities, with the latter being overlooked when considering impacts. Training practices in trauma-informed care, according to Jackson and Jewell (2021), vary across disciplines, making it difficult to determine best practice guidelines for professionals. Despite this barrier, community development, from aspects that promote mental health, was strengthened and channeled toward more balanced social and political processes.

Intergenerational trauma, as Cerdeña et al. point out (2021), is influenced by structural vulnerability and historical and political violence. However, current paradigms focus on individual risk factors and parental behaviors without considering the cultural, structural, and historical context. The postulates of Peace Psychology, psychotraumatology, and global public health support this perspective. In this sense, the ecological theory of trauma states that violence affects the various areas of the subject's life at personal, familial, and community levels. An ecological model for understanding mental health in conflict-affected populations, according to Miller and Rasmussen (2024), considers both past and present stressors and emphasizes the need for multilevel and multimodal programming in mental health interventions and psychosocial support. Community resilience is linked to these understandings in a way that manifests the potential that communities present to face challenges, overcome them, and emerge strengthened and reorganized at the structural and functional levels. From this logic, the community has the full capacity to develop community agency and manage the implications of conflict and trauma.

From a legal perspective, International Humanitarian Law determines the protection of the population and deploys its concepts regarding respect for human rights and the right to mental health. The criminal legal system, as Slovinsky (2023) points out, perpetuates trauma, particularly affecting young people and professionals from racial minorities, highlighting the need for victim-centered, trauma-informed, and culturally

sensitive programs and services. Thus, some instruments advocate for the right to psychosocial rehabilitation for those who have suffered from certain conflicts or traumas. Therefore, the international community is obligated to promote and support recovery in this regard based on ethics and legal frameworks.

The literature shows that trauma care during periods of war and conflict focuses on those who participated in them, resulting in diagnoses such as shell shock. The high Social Vulnerability Index (SVI), according to Duncan et al. (2024), is associated with increased trauma mortality, recurrent injuries, and long-term health problems, suggesting that specific interventions and policies can improve outcomes. Recently, communities that showed rates of experienced violence have begun to be incorporated into these studies. This historical development is significant because, following this, more specific interventions began to be designed to address political and structural violence. Identity and memory, according to Mitton (2022), are connected to acts of both oppression and resistance, and education can be a site of resilience in communities facing political violence.

Trauma-informed care in social work, according to Leotti and Wahab (2024), has gained ground. However, its practical application lacks clarity and specificity, relying on the perception of trauma prevalence rather than solid research. Following this direction, the variables linked to this study are understood to contribute to the application of trauma-informed principles as an indispensable condition. Therefore, community resilience, the reconfiguration of social capital, and psychosocial well-being are the variables that show effects directly related to territorial conflict. This articulation is influenced by determinants such as community participation, informal support networks, and security.

# **METHODOLOGY**

This article is based on a narrative documentary review from a methodological perspective, which allows for a critical synthesis of the literature reviewed, highlighting criteria frequently overlooked in other studies. Thus, it was possible to delineate a terminological and practical trajectory that typifies psychosocial intervention in contexts of violence. The literature review focused on academic materials, organizational reports, and clinical practice documents published in the last ten years.

When selecting bibliographic sources, emphasis was placed on those associated with the link between social work, studies addressing trauma, and community mental health. Specialized databases were accessed, and gray literature was reviewed, thereby gathering valuable practical information from the region itself. The information was synthesized in an interpretive and contextualized manner.

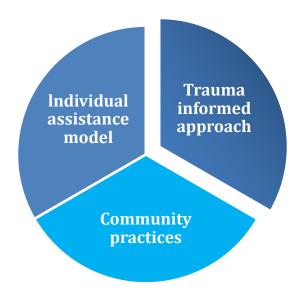
Following this approach, the materials were analyzed in stages. Initially, a critical reading was conducted to identify core terms and predominant tools. The links between the theoretical postulates were then delineated based on the evidence and practical implications recorded in conflict-affected settings. Through this phase, the authors identified trends in the performance and scope of intervention paradigms, and local adaptations necessary for a successful and feasible local strategy were highlighted.

Finally, the integrated results allowed for a more complete understanding of the problem. In other words, the methodology revealed the need for more complex interventions in terms of science and human sensitivity. Therefore, a framework for action is needed that understands that, in addressing the nature of collective trauma, dynamic and sustainable alternatives must be proposed.

#### **RESULTS**

Research demonstrates that a trauma-informed approach goes beyond the traditional clinical paradigm and advocates for community support and inclusion. This approach has demonstrated its importance in settings where victims of violence are affected. Trauma, according to Keefe et al. (2024), operates at the individual, family, and community levels, and individuals and families living in high-risk neighborhoods experience more negative health outcomes. Significant conditions, such as physical and emotional safety, are identified for future interventions. From this perspective, strategies must address these requirements to be more effective. This review, according to Zoromba et al. (2024), advocates for more inclusive and culturally sensitive frameworks to better understand and address trauma, critiquing traditional biomedical and psychological models (Figure 1).

**Figure 1.**Comprehensive approach to addressing trauma in the community



**Source:** Own elaboration.

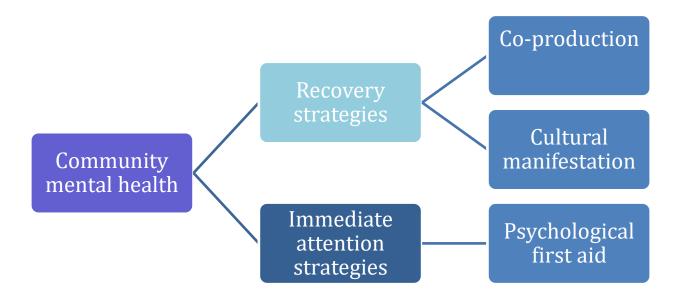
Furthermore, the results indicate that individual interventions do not foster community resilience to the same extent as community-centered practices. Group dynamics constitute a safe space that promotes the reconfiguration of collective trust,

an aspect negatively influenced by armed conflict. According to Lauridsen and Munkejord (2022), a trauma-informed and restorative practice can lead to increased self-awareness, compassion, emotional safety, and personal growth for professionals, leading to improved interpersonal competence and client well-being. Such spaces represent an opportunity for trauma-related discourse to be managed and shared collectively, so that individual pain is understood and assimilated as a shared experience with others.

In this sense, psychological first aid proved to be the most widely implemented tool in immediate care. It allows victims to be emotionally stabilized and connects them to their community support networks. The Trauma Resilience and Recovery Program (TRRP), according to Bernard et al. (2022), is a feasible and acceptable program that engages patients equitably in mental health follow-up, regardless of race or mechanism of injury. Trauma, according to Holton and Snodgrass (2023), can be viewed as part of a stress-trauma continuum, fostering hope, growth, and resilience, while acknowledging the real suffering and despair experienced by individuals and communities. Community participation, engagement, and empowerment, factors that Russell et al. (2023) believe are essential, can improve community mental health. This approach makes the reactions of those who suffer from conflict visible, normalizing responses in non-normative contexts and diminishing the stigmas that arise in subsequent searches for support.

This article reveals that community mental health practices utilize recovery strategies such as productive projects or cultural expressions (Figure 2). These practices bring new meaning and purpose to concepts of agency and utility that have previously been fragmented by conflict. Co-production within mental health organizations promotes empowerment, social connection, inclusion, and personal competencies, elements that Guarino et al. (2024) suggest are fundamental to fostering a sense of safety and freedom in recovery. A state of recovery involves establishing a new normal by assuming a renewed identity after the traumatic event. Community-based, recovery-oriented practices can, as Mousavizadeh and Bidgoli's (2023) systematic review points out, help patients with serious mental illness find suitable employment, avoid isolation and stigma, improve communication skills, and foster independence.

**Figure 2.** Foundations that comprise community mental health



Source: Own elaboration

Finally, the study highlights that a sustainable intervention depends on its degree of cultural adaptation and strengthening of the territory's support systems, a principle supported by research in diverse fields such as territorial development (Scaramuzzi et al., 2023), digital health (Naderbagi et al., 2024), and global health (Poku et al., 2022). An integrated, incremental, and adaptive approach to decision-making can, as proposed by Della Spina et al. (2023), develop sustainable strategies by addressing the specific values and resources of each landscape. Trauma, according to Banushi et al. (2025), affects individuals within and across generations through epigenetic mechanisms, highlighting the need for interdisciplinary approaches to break cycles and promote healing.

Therefore, interventions focused solely on mitigating individual harm without considering context are often insufficient. Trauma-informed care in healthcare settings, according to Grossman et al. (2021), can help resist retraumatization and promote patient-centered care, benefiting both individuals and communities. Thus, the reviewed literature indicates that professional practices should avoid revictimization and understand the healing process as a flexible and changing curve, not as a linear upward trajectory. This approach is supported both in interventions with people with serious mental illness (Albers et al., 2021) and in highly vulnerable transgender populations (Yang et al., 2024).

# **DISCUSSION**

According to Zoromba et al. (2024), the results of this research demonstrate a tension between the theoretical foundations and their scope of application in communities. In this sense, implementing the trauma-informed approach is a difficult

task in terms of its practical scope. Individual and collective diagnoses show a prevalence of fatigue among professionals, as well as precarious conditions associated with scarce resources and low job stability in contexts that have experienced conflict (Stevenson et al., 2022; Tierney et al., 2024; Vesco et al., 2025).

The review shows that interventions that incorporate the community's cultural component into their models are more successful (Jaydarifard et al., 2023; Jones, 2025). The literature indicated that bureaucratic procedures slow down the implementation of standardized protocols that seek to achieve higher quality experiences. Therefore, there is an unsynchronized relationship between organizing and planning an intervention and then carrying it out. As a result, many communities remain in their daily state of chaos and misinformation without receiving specialized care.

This study indicates that recovery is not a linear process. Thus, intervention models must design their actions without establishing predictable stages that can minimize the effects of trauma on the community or produce unrealistic expectations (Lakis et al., 2023; Lauridsen & Munkejord, 2022). In this way, communities experience relapse phases that do not represent a setback. It is important to understand that progress is also linked to moments of uncertainty for the stakeholders involved. Social work professionals must adapt to the immediate situation facing communities and make their work more flexible. Following this line, it is established that a sustainable intervention goes beyond the traditional welfare model (Della Spina et al., 2023; Duncan et al., 2024; Fischer et al., 2024). At the same time, it is understood that the most effective alternatives are those that include a community development dimension and advocate for strengthening community capacities. From this perspective, it is pointed out that an excessive relationship between professionals and the community in terms of work can foster people's dependence on them, diminishing the implementation of the coping mechanisms available in the territory. Consequently, what is truly important is promoting the renewal of community agency to resolve conflicts and manage trauma.

# **CONCLUSIONS**

Research shows that trauma-informed social work is a necessary approach when addressing conflicts in community contexts. Thus, its main advantage lies in identifying the inadequacy of the traditional welfare paradigm and embracing its actions aimed at repairing the social fabric. In turn, this perspective views communities as living subjects who experience trauma and must manage it collectively.

The results also indicate that the most successful strategies are those that focus on promoting safety, collective agency, and social contact. Thus, although tools such as psychological first aid exist, which offer immediate care, it is emphasized that group processes strengthen sustainable resilience. Thus, authentic recovery is seen when people are willing to become protagonists of their own healing.

This study reveals that culturally adapted interventions are highly effective and comprehensive. Therefore, approaches from other disciplines that do not address the

community are insufficient. Likewise, success emerges from articulating knowledge of the territory and adhering to the community's timeline, both in immediate support and in social service programs.

Finally, the article states that sustainability is a key factor in social interventions that incorporate community support networks into their actions. Consistent with this, social work professionals must simplify the recovery process and promote collective agency. In this way, communities will be able to self-manage their psychosocial well-being. Trauma-informed interventions provide a significant lesson: trauma should not be understood as the absence of discomfort. On the contrary, trauma represents the collective possibility of living with it healthily and collaboratively, with prospects.

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# **FINANCING**

The authors received no funding for this research.

# **CONFLICT OF INTEREST STATEMENT**

The authors declare that there is no conflict of interest.

# **AUTHORSHIP CONTRIBUTION:**

Conceptualization: Ranta Butarbutar Formal analysis: Ranta Butarbutar Methodology: Ranta Butarbutar

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