

# Trauma-Informed Social Work for Sustainable Well-Being: Practices, Challenges, and Future Directions

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## ABSTRACT:

This study aims to identify the professional competencies required of student mentors when utilizing evidence-based practices to address adolescent trauma. Additionally, it evaluates the effectiveness of a targeted intervention program designed to enhance these competencies. A mixed-methods research approach was employed, incorporating both quantitative and qualitative data collection tools. The quantitative component utilized a professional competency dimensions scale, while the qualitative aspect involved semi-structured interviews. The study population consisted of student mentors working at the middle and secondary school levels in Jeddah, with a sample of 30 mentors participating. Quantitative findings revealed statistically significant differences in the participants' mean scores on the evidence-based practice scale (covering knowledge, values, and skills) before and after the intervention, with a significance level of  $p = .00$ , indicating improvements across all measured dimensions.

Qualitative data further highlighted enhancements in mentors' knowledge and self-confidence, shifts in practice through the adoption of new strategies, and a greater appreciation for the professional values associated with evidence-based practice. Participants also emphasized the importance of involving practitioners in the design of future training initiatives. Based on these findings, the study recommends the ongoing professional development of mentors in evidence-based practices and the creation of specialized training programs—particularly targeting younger and newly graduated mentors—to build a strong foundation of knowledge and practical skills. It also underscores the need to develop mentors' research and evaluation capabilities.

*Keywords: trauma-informed practice, social work, adolescent well-being, sustainability, vocational training, evidence-based practice*

## 1. Introduction

Mental health and trauma issues have become increasingly debated topics in the educational community in recent periods, driven by the growing need for support and care services. Many tragic incidents, such as school shootings and suicide cases, have been linked to undiagnosed or untreated mental health issues among today's youth (Bellamy et al., 2022). It is well-known that trauma experienced by adolescents and children leads to mental and physical changes that significantly affect their ability to socialize, build healthy relationships, and achieve academic success (Howick, 2022).

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## 2. Search problem

Psychological trauma represents one of the most intricate issues affecting individuals, particularly children and adolescents, with enduring consequences for their mental, physical, and social well-being (Howick, 2022). According to the Substance Abuse and Mental Health Services Administration (SAMHSA, 2023), individual trauma arises from events or conditions perceived as harmful or life-threatening, resulting in lasting changes in cognition, emotion, and behavior. Addressing this issue within the social work profession is increasingly critical, as effective support for trauma-affected individuals necessitates a trauma-informed approach that transcends traditional frameworks to uncover underlying causes and appropriate interventions (Levenson, 2017).

Despite its importance, trauma-informed practice faces significant obstacles, including the under recognition of trauma effects, inadequate systematic training for social workers, and the adverse impact of secondary trauma on caregivers (Huo et al., 2023). Additionally, research underscores the need for intensive training in mental health and trauma care for teachers and student counselors, as such knowledge can positively influence students' well-being and reduce the necessity for more complex interventions in the future (Honsinger & Brown, 2019). Consequently, there is a pressing need for comprehensive research into trauma-informed social work practices, the challenges associated with their implementation, and strategies for their development to ensure sustainable and effective service delivery for trauma-affected individuals and groups.

## 3. Research Objectives

The study aims to achieve the following objectives:

1. Examine the impact of trauma on adolescents' mental health, social behavior, and emotional functioning.
2. Identify key trauma-informed practices within social work.
3. Analyze the challenges hindering the implementation of trauma-informed practices.
4. Provide recommendations to enhance trauma-informed social work practice.

## 4. Research Questions

1. What is the impact of multiple psychological traumas on adolescents' mental health and socio-emotional well-being?
2. What are the essential trauma-informed practices in social work?
3. What challenges impede the implementation of trauma-informed practices in social work?

## 5. Theoretical and practical significance

### 5.1. Theoretical significance

This study enriches scientific knowledge about trauma-informed social work by synthesizing recent research and practices in the field. It provides a comprehensive

framework for understanding trauma and its impact on individuals and communities. Additionally, it addresses a gap in Arabic literature, where discussions of trauma-informed social applications remain limited.

## 5.2. Practical importance

From a practical perspective, the study offers actionable recommendations for social workers and practitioners to adopt trauma-informed approaches in their daily practice and enhance their skills in working with trauma-affected individuals. It also emphasizes the importance of training social workers, educators, and school counselors in trauma management strategies, which can improve service quality and mitigate the long-term negative effects of trauma on individuals' lives.

## 6. Research Limitations

A key limitation of this study is its reliance on theoretical frameworks and existing literature, without incorporating primary data from fieldwork or direct observation. This approach limits the depth and contextual richness that firsthand accounts from professionals, trainers, or adolescents could provide. While the study offers valuable insights into trauma-informed practices and their implementation challenges, the absence of empirical data restricts the applicability of findings to real-world settings and reduces their generalizability across diverse contexts. As highlighted by previous research (e.g., Inscoc et al., 2022; Suh Moh, 2019), future studies should adopt empirical methodologies—such as qualitative interviews, surveys, or observational studies—to gather data directly from social workers, educators, and adolescent clients. Such efforts will enhance the practical relevance and validity of trauma-informed approaches, particularly within varying educational and cultural environments.

## 7. Research Concepts:

### 7.1 The concept of trauma

There is growing interest in childhood trauma and its recognition as a major public health concern (Maynard et al., 2019). However, defining trauma precisely can be challenging. The term "trauma" is often used to refer to both harmful events and their outcomes. The effects of traumatic experiences vary widely from person to person, depending on a range of factors, including genetic, biological, psychological, environmental, familial, societal, historical, and other influences (Kimberg & Wheeler, 2019).

As the need for a comprehensive understanding of trauma increases, particularly among researchers exploring trauma awareness techniques, the Substance Abuse and Mental Health Services Administration (SAMHSA) has developed a definition that incorporates insights from various fields: "Individual trauma results from an event, series of events, or set of circumstances that an individual experiences as physically or emotionally harmful or life-threatening and has lasting adverse effects on the individual's mental, physical, social, emotional, or spiritual well-being" (SAMHSA, 2023).

Several terms are associated with trauma, such as suffering and Adverse Childhood Experiences (ACEs), which are important aspects to consider in this context.

**7.2 Adverse Childhood Experiences (ACEs):** These are traumatic events that occur before the age of 18, including all forms of abuse, neglect, parental mental illness, substance abuse, divorce, incarceration, and domestic violence. A landmark study in the 1990s found a strong correlation between the number of ACEs a person experiences and a variety of negative outcomes in adulthood, including poor physical and mental health, substance abuse, and risky behaviors. The more ACEs a person has, the greater the risk of these outcomes (Child Welfare Information Gateway, 2020).

### **The Implications of Labeling Individuals as “At-Risk”: A Critical Reflection**

Throughout this study, the term “*at-risk*” has been used to describe adolescents who have experienced or are vulnerable to trauma due to environmental, familial, or personal circumstances. However, as noted by the reviewer, this classification remains vague and potentially problematic (Line 94), warranting further exploration—particularly in terms of its impact on identity formation, stigmatization, and intervention outcomes within culturally diverse settings.

### **7.3 Defining and Questioning the Term “At-Risk”**

The label “*at-risk*” is commonly employed in educational, psychological, and social work literature to identify individuals who are perceived to be more likely than others to experience negative life outcomes, such as academic failure, behavioral issues, mental health disorders, or involvement with the juvenile justice system (Hill & Mann, 2021). While intended to signal the need for support, this terminology can unintentionally reinforce a deficit-based perspective, focusing on vulnerability rather than resilience (Osgood et al., 2019).

In many cases, being labeled as “*at-risk*” can lead to implicit bias among educators, service providers, and even peers, which may result in lower expectations, reduced access to opportunities, and internalized stigma (Osgood et al., 2019). This is particularly concerning during adolescence—a critical developmental stage where self-perception and identity formation are highly influenced by external validation and societal labels (Hill & Mann, 2021).

### **7.4 Identity Formation and Stigmatization**

Adolescence is a time when individuals actively construct their sense of self in relation to others and society. When young people are repeatedly identified as “*at-risk*,” they may begin to internalize this label, perceiving themselves as inherently flawed, troubled, or destined for failure (Hill & Mann, 2021). This process, known as labeling theory, suggests that such classifications can become *self-fulfilling prophecies*, where individuals behave in ways consistent with how they believe they are seen by others (Osgood et al., 2019).

Moreover, in multicultural and socioeconomically diverse environments, the use of this label can intersect with race, gender, class, and language, amplifying disparities (Gregory et al., 2016). For example, research has shown that students from marginalized communities—particularly Black, Latino, and Indigenous youth—are disproportionately labeled as “*at-risk*” and subjected to harsher disciplinary actions, fewer academic supports,

and overrepresentation in special education or juvenile justice systems (Gregory et al., 2016).

### **Impact on Social Work Interventions**

While the intent behind identifying at-risk individuals is often to target resources and interventions, the unintended consequences of this labeling can hinder effective engagement and outcomes (Hill & Mann, 2021). In trauma-informed practice, the emphasis should be on understanding what has happened to a person—not on defining them by risk categories (Levenson, 2017). Adopting a strengths-based, trauma-sensitive approach can help practitioners avoid reinforcing harmful narratives and instead promote empowerment, agency, and resilience (Mersky et al., 2019).

Social workers must critically reflect on the language they use and the systems they operate within, ensuring that intervention strategies do not inadvertently perpetuate stigma or marginalization (Levenson, 2017). Alternative frameworks, such as trauma-informed resilience building, cultural humility, and person-first language, offer more inclusive and supportive ways to engage with youth without reducing them to a label (Mersky et al., 2019).

## **7.5 Recommendations for Culturally Responsive Practice**

To address these concerns, the following recommendations are proposed:

1. **Avoid static labeling:** Replace categorical terms like “*at-risk*” with more dynamic, descriptive language that reflects individual experiences and strengths.
2. **Promote participatory approaches:** Involve youth in the identification of needs and goals, empowering them to define their own trajectories.
3. **Integrate cultural competence:** Recognize how cultural context influences both trauma exposure and responses to support services.
4. **Use trauma-informed language:** Shift from deficit-focused language to one that emphasizes healing, potential, and recovery.

By critically examining the implications of labeling practices, social workers can ensure that trauma-informed care remains ethical, inclusive, and truly responsive to the lived realities of the individuals they serve.

## **7.6 The Concept of Trauma-Informed Social Work**

Trauma-informed social work is an approach that allows social workers to think differently about clients who may have experienced trauma by asking, “What happened to you?” rather than “What is wrong with you?” This approach is more engaging and respectful, especially when working with individuals who may already feel broken, unwanted, or unloved. It aligns with the profession's values and beliefs as cited by (Huckshorn & LeBel, 2013, p. 66).

This approach is one of the modern trends in social work, focusing on immediate intervention and effective response to sudden crises faced by individuals, particularly adolescents who experience psychological or social trauma. Adolescents are considered the most vulnerable to such traumas due to the critical developmental stage they are in. The approach aims to develop professional strategies based on scientific foundations, enabling social workers to provide the necessary support to enhance adolescents' ability to

cope with challenges, while considering the uniqueness of each case and ensuring comprehensive interventions for all societal groups.

8. Previous studies

Several studies highlight the profound impact of trauma on adolescent behavior and mental health. Saadi (2019) found that emotional trauma, particularly related to romantic relationships, can lead to suicide attempts among adolescent girls. Similarly, Swailah & Aboud (2021) demonstrated that exposure to domestic violence triggers trauma symptoms and contributes to deviant behaviors in youth. Modrowski et al. (2021) expanded on this by identifying indirect links between trauma exposure and delinquent behavior among 301 justice-involved adolescents, mediated by posttraumatic dissociation and reckless/self-destructive behavior—underscoring the need for trauma-informed approaches in juvenile justice systems. Arici (2022), in a qualitative study with 15 social workers, emphasized the critical role of social workers in trauma detection and support, while also pointing out systemic gaps in training and preventive services. Lastly, Griffiths (2022) explored socio-affective risk factors in adolescence, identifying negative self-perception and social biases as contributors to depression, reinforcing the importance of trauma-sensitive environments during this vulnerable developmental stage.

Table: Summary of Trauma-Informed Training Practices and Outcomes Across Selected Studies

Author(s) & Year	Study Title	Focus / Key Theme	Methodology	Sample Size	Key Findings	Implications for Trauma-Informed Practice
Saadi (2019)	<i>Emotional Trauma in Adolescence and Its Relationship with Suicide Attempts</i>	Emotional trauma and suicide risk in adolescent girls	Case study – clinical interviews and observations	N/A (Case study)	Emotional trauma, particularly from romantic failure, may lead to suicidal behaviors	Highlights the need for early identification and emotional support systems in schools and communities
Swailah & Aboud (2021)	<i>Psychological Trauma Resulting from Domestic Violence and Its Relationship with Juvenile Delinquency</i>	Link between domestic violence exposure and juvenile delinquency	Clinical case study – two adolescents (1 male, 1 female)	2 participants	Exposure to domestic violence led to trauma symptoms and deviant behaviors	Supports the integration of trauma screening and therapeutic interventions in youth justice and child protection services
Modrowski et al. (2021)	<i>Associations Among Trauma Exposure, Posttraumatic Dissociation, Reckless/Self-Destructive Behavior, and Adolescent Offending</i>	Trauma's indirect role in adolescent offending	Quantitative – survey of 301 at-risk adolescents	301 adolescents involved in legal proceedings	Trauma exposure was indirectly linked to delinquent behavior via posttraumatic dissociation and reckless/self-destructive behavior	Emphasizes the importance of trauma-informed approaches in juvenile justice settings to reduce reoffending and promote healing
Arici (2022)	<i>Investigation of Trauma Transmission Based on Social Workers' Experiences</i>	Role of social workers in trauma detection and support	Qualitative – phenomenological design, interviews with 15 social workers	15 experienced social workers	Social workers play a critical role in identifying and supporting traumatized individuals but face systemic challenges (e.g., lack of training, preventive strategies)	Calls for improved education, supervision, and institutional support for social workers in trauma-informed care

9. Theoretical Framework:

9.1 The Impact of Trauma

Numerous studies have shown the impact of trauma on students' ability to learn and engage, including their attention, memory, and executive functioning (Henry, 2023). Different types of trauma affect various components of cognitive performance, including perceptual reasoning, working memory, processing speed, and verbal comprehension.

Additionally, there is evidence that the effects of trauma are cumulative, meaning that adolescents exposed to more traumatic events are at greater risk of negative outcomes and more complex symptoms in adulthood (Maynard et al., 2019).

SAMHSA (2023) has pointed out that children and adolescents are among the most vulnerable to the effects of trauma, which significantly impact their health and well-being, especially if the trauma is ongoing and untreated. Below are some of the key effects of trauma:

1. **Impact of Trauma on the Brain:** Bryson et al. (2017) emphasize that trauma has lasting effects on the brain, including executive functioning and adaptive stress responses. Trauma reduces the volume of brain structures responsible for learning, memory, and emotional regulation. They highlight the importance of regulating stress responses to mitigate the effects of trauma. In the long term, the negative effects of trauma can lead to symptoms such as severe depression, suicide, substance abuse, and reduced ability to interact socially with peers.

While the study addresses the psychological and behavioral effects of trauma, it can be strengthened by incorporating key insights from neuroscience, particularly the concept of neuroplasticity —the brain's ability to reorganize and form new neural connections throughout life.

In adolescent trauma cases, chronic stress and traumatic experiences can impair brain regions responsible for emotional regulation, memory, and decision-making. However, due to heightened neuroplasticity during adolescence, the brain also has a significant capacity to heal when supportive, trauma-informed interventions are applied.

This understanding supports the use of regulation-based therapies, strength-focused approaches, and safe, predictable environments in social work practice. These strategies align with trauma-informed principles and can help restore cognitive and emotional functioning in traumatized youth.

Integrating basic neuroscientific knowledge into training and intervention planning can enhance how social workers implement trauma-informed care, especially in school and community settings.

2. **Impact of Trauma in the School Environment:** Research has shown that children and adolescents who have experienced trauma tend to have lower scores on intellectual performance assessments, as well as poor performance on tests of working memory and attention, contributing to early cumulative deficits in cognitive development. There is a call for early interventions that can prevent cognitive impairment when childhood trauma occurs (Bücker et al., 2012). Trauma also affects students' ability to regulate behavior and emotions, leading to negative behaviors in the classroom, such as aggression, yelling, and a lack of academic motivation (Howick, 2022).
3. **Impact of Trauma on Social and Emotional Well-Being:** The impact of trauma on the social and emotional well-being of children and adolescents is profound and multifaceted. Trauma can lead to difficulties in identifying, expressing, and managing emotions, as well as challenges in developing language to express feelings. It can also affect their ability to trust others, regulate emotions, and interact with the world. Additionally, trauma can have negative effects on

mental, physical, and emotional health, as well as social well-being (Treatment, 2014).

## 9.2 Forms of trauma

Trauma can take many forms. Howick (2022) categorizes trauma into acute, chronic, and complex types, as follows:

- **Acute Trauma:** Limited to a specific event or time period, such as a car accident, separation, or the loss of a loved one. Symptoms of acute trauma include excessive anxiety or panic, restlessness, inability to sleep comfortably, feelings of detachment, unjustified mistrust, inability to concentrate on work or studies, neglect of self-care, and aggressive behavior.
- **Chronic Trauma:** Closely linked to sexual and physical abuse, long-term serious illness, and bullying. Symptoms of chronic trauma include emotional outbursts, anxiety, intense anger, fatigue, body aches, headaches, and nausea. Chronic trauma is ongoing and can extend over a long period. It can also be considered both chronic and acute if acute trauma is left untreated for a long time.
- **Complex Trauma:** Involves multiple elements of trauma arising from different types, ongoing exposure, or multiple contributors. This type of trauma results from interpersonal relationships and the feeling of being trapped in a particular situation. It significantly affects a person's mind and perceptions of others and situations. The impact varies based on the individual's ability to solve problems and make decisions. This type of trauma is often found in victims of childhood abuse, neglect, family conflict, instability at home, or dysfunctional family dynamics (Howick, 2022).

## 10. Theories that explain trauma

While no single theory can fully explain the causes of trauma in childhood and adolescence, several current theoretical models offer concepts and tools that help specialists and practitioners understand important processes for assessment and treatment, aiming for recovery from traumatic events (Ford & Greene, 2017). Some of the key theories include:

1. **Interpersonal/Resource Theories:** Trauma can disrupt or destroy the resources that adolescents and their families rely on for safety, health, and well-being. These resources include housing, food, transportation, clothing, and technology. Personal resources include self-esteem, self-efficacy, and physical and psychological resilience. State resources may include relationships, social networks, and social and economic status. The Conservation of Resources theory posits that the loss of resources is more salient than resource gains, hence the potentially strong and long-lasting impact of traumatic stressors that reduce people's access to resources (e.g., disasters that destroy homes and communities, abuse that leads to loss of mental trust and separation from home or caregivers). The theory suggests that preventing exposure to traumatic events and recovering from them requires increasing resource levels or access to them, even when key resources may be depleted or inaccessible.



2. **Developmental Trauma Theory:** The impact of exposure to traumatic stressors is inextricably intertwined with the biological, psychological, and social development of adolescents. Thus, adolescents exposed to traumatic stressors may experience profound changes in the development of their bodies, minds, and relationships. The negative impact of exposure to traumatic stressors on development has been well-documented in many key psychological and social domains, including emotion regulation, executive functioning (e.g., attention, learning, problem-solving, and working memory), declarative (verbal) memory, narrative (autobiographical) memory, personality formation and integration, and relationships. Dysregulated emotion has been identified as a core developmental impairment associated with middle childhood and adolescence. Dysregulated emotions and impulses following trauma can cause or exacerbate a wide range of internalizing (e.g., depression, agoraphobia, panic, obsessive-compulsive disorder, social anxiety, phobias, dissociative disorders) and externalizing (e.g., oppositional defiant disorder, conduct disorder, attention or impulse control disorders, bipolar disorder) problems, as well as psychosomatic issues (e.g., eating disorders, sexual disorders, sleep disorders). These problems, in turn, hinder successful development and performance in school, activities, and interactions with peers and family. Emotion dysregulation in adolescence can become more complex, including substance abuse or personality disorders and serious problems in legal, school, family, and community domains (e.g., incarceration, school dropout, teen pregnancy, gang involvement, suicide). Thus, trauma-related stress disorders can not only cause severe immediate symptoms but can also alter the entire course of life by disrupting the development of core capacities such as emotion regulation (Ford & Greene, 2017).
3. **Biological Theory:** Neuroscientific and psychological studies have shown that exposure to trauma affects the structure and function of the brain, particularly in children and adolescents. These changes differ from those observed in adults. The results of these studies indicate that exposure to trauma leads to disruptions in brain regions responsible for emotional regulation, executive functioning, and stress responses. Additionally, there are changes in brain chemistry and internal neural connectivity, including increased levels of catecholamines and acetylcholine and decreased levels of norepinephrine, serotonin, and dopamine. These changes play a role in shaping brain structure and function, especially if traumatic experiences occur at an early age (Ford & Greene, 2017), thereby affecting adolescents' academic, social, and psychological development.

## 11. The importance of trauma-informed social work

1. Trauma-informed social work shifts the focus from asking "What is wrong with this person?" to "What happened to this person?"
2. It provides care and support to individuals with a history of trauma.
3. It addresses the needs of survivors to connect with others, be respected, and become optimistic.
4. It removes significant barriers to research and practice.

5. It deals with various types of trauma, such as the loss of a parent, abuse, and domestic violence, particularly among marginalized clients (Hammam, 2023). Trauma-informed practice in social work aims to provide a safe and supportive environment that promotes healing while avoiding the unintentional reproduction of unhealthy personal dynamics within the helping relationship.

## 12. Definitions and Implications for Social Work Practice

### 1. Trauma-Informed Practice (TIP):

Trauma-informed practice is an organizational and clinical approach that recognizes the widespread impact of trauma, understands potential paths for recovery, and integrates this knowledge into policies, procedures, and practices (Levenson, 2017).

In social work, this approach is essential for preventing re-traumatization and fostering healing environments.

Implication: Social workers must be trained to recognize trauma symptoms and respond with empathy and appropriate interventions, especially when working with vulnerable populations such as children, refugees, survivors of domestic violence, or individuals involved in the child welfare system.

## 13. Core Principles of Trauma-Informed Practice in Social Work:

- **Safety** : Ensuring physical, psychological, and emotional safety for both clients and practitioners.
- **Trust** : Building transparency and consistency in relationships and procedures to foster trust.
- **Collaboration**: Promoting shared power and decision-making between clients and service providers.
- **Choice** : Supporting client autonomy by offering meaningful options throughout the intervention process.
- **Empowerment** : Recognizing and reinforcing individual strengths and resilience as central to recovery.

Implication: These principles guide ethical and effective social work practice by shifting the focus from “What is wrong with you?” to “What has happened to you?” This shift promotes dignity, reduces stigma, and improves engagement and outcomes in helping relationships.

**Table 1: Core Principles of Trauma-Informed Social Work Practice.**

Principle	Definition	Practical Implication
Safety	Creating a physically and emotionally safe environment for both clients and staff.	Reduces re-traumatization and builds trust during sessions.
Trust	Transparent communication and consistent actions to build confidence between practitioners and clients.	Enhances long-term therapeutic relationships and cooperation.
Collaboration	Equal partnership and shared decision-making between practitioner and client.	Encourages mutual respect and empowers clients in their recovery.

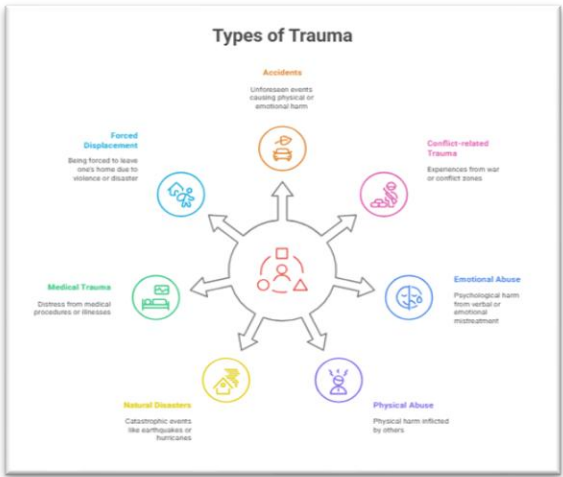
Choice	Empowering clients by providing options and involving them in their treatment process.	Increases sense of autonomy and control over one’s healing journey.
Empowerment	Recognizing strengths and promoting resilience in individuals affected by trauma.	Facilitates self-efficacy and supports sustainable recovery.

14. Trauma in Human Rights and Social Justice

Trauma—especially human-made trauma such as abuse, neglect, violence, forced migration, and systemic oppression—is not only a mental health concern but also a violation of fundamental human rights (Mersky et al., 2019). As stated in the Universal Declaration of Human Rights (Articles 3 & 5), every person has the right to safety and freedom from harm.

Implication: Social workers are ethically bound to advocate for structural change, policy reform, and community-based prevention strategies to reduce trauma exposure and support equitable access to healing resources. Addressing trauma through a social justice lens aligns with the profession’s commitment to human rights and systemic advocacy.

- Accidents
- Conflict-related trauma
- Emotional abuse and mistreatment
- Emotional and physical neglect
- Domestic violence
- Forced displacement or migration
- Injury or illness
- Medical trauma
- Natural disasters
- Physical abuse
- School and community violence
- Sexual assault and rape
- Terrorism and genocide
- Torture
- Traumatic grief
- Indirect trauma



Viewing trauma as a global human rights and social justice issue suggests that societies are obligated to take action to prevent or mitigate the effects of trauma. By doing so, we can achieve greater equality in health and well-being. This is an inspiring message for the field of social work (Mersky et al., 2019).

15. Challenges in Trauma-Informed Practice

There are several challenges to implementing trauma-informed practices in social work, including:

1. Underreporting trauma due to shame or guilt.
2. Practicing with clients who have experienced trauma can lead to secondary trauma, affecting professionals.

3. Some environments do not recognize the impact of trauma.
4. Inadequate training and resources hinder implementation (Huo et al., 2023).
5. The researcher adds that there is a lack of research and studies supporting the implementation of trauma-informed practices in the Arab world.

To overcome these challenges, several measures are required, including:

1. Changes in policies and procedures.
2. A supportive organizational culture that encourages practitioners to discuss and manage their experiences with trauma, including secondary trauma.
3. Ongoing training specifically designed for practitioners working with adolescent trauma.
4. Data collection and monitoring, particularly in schools and regarding adolescent trauma (Huo et al., 2023).

Thus, a comprehensive and intensive vision is needed to address these challenges in implementing trauma-informed practices in social work.

## **16. Ethical Considerations in Trauma-Informed Practice**

Ethical considerations and principles are a fundamental part of any professional practice, but they take on special importance when dealing with trauma. Understanding and applying these ethical principles contributes to achieving therapeutic goals. Below are some key ethical considerations in trauma-informed practice:

1. Recognizing the impact of trauma on psychological and social development.
2. Demonstrating empathy and respect toward clients and acknowledging the vulnerability of trauma survivors.
3. Preventing re-traumatization by avoiding the unintentional reproduction of unhealthy personal dynamics in the therapeutic relationship.
4. Involving clients in planning and evaluating services and decision-making.
5. Maintaining confidentiality, especially when dealing with sensitive information.
6. Continuous learning and improvement for practitioners regarding the latest research and best practices in trauma (Rudolph, 2021). Adhering to ethical considerations enhances trust with clients and ensures the delivery of effective and safe services to achieve their safety and well-being.

## **17. Professional Development in Trauma-Specific Practices**

According to the 2019 International Scientific Journal Rankings (SJ), three of the top five social work journals focused on topics related to trauma, violence, abuse, child abuse, and neglect. Advances in this field have also led to efforts by many professional organizations dedicated to preventing trauma and alleviating suffering. The National Child Traumatic Stress Network (NCTSN) is at the forefront of efforts to raise public awareness of trauma, develop trauma-informed care systems, and promote and implement evidence-based, trauma-focused interventions (Mersky et al., 2019).

In contrast, Inscoe et al. (2022) pointed out that there is a lack of knowledge among service providers about trauma, with 54% of participants (38 participants) reporting negative experiences with service providers who did not demonstrate professional competence in

recognizing traumatic stressors in childhood or considering the role of trauma in assessing and treating suicide risk.

Similarly, Honsinger and Brown (2019) noted that teachers and school counselors need a better understanding of mental health practices and trauma-informed care to apply them within the school environment. This can impact students' social and emotional well-being and prevent the need for more intensive services in the future.

From this perspective, attention should be directed to the necessity of professional training and education about trauma and its impact on the health of children and adolescents, ensuring their psychological safety.

## 18. The Importance of Trauma Training in Social Work

Integrating trauma content into social work curricula significantly enhances the profession's educational and training requirements. Social work programs in universities and social institutions will better prepare students and social workers to develop core competencies suitable for effective and ethical practice with trauma-exposed clients. Although Trauma-Informed Care (TIC) is a relatively new framework, many of its principles (e.g., trustworthiness, transparency, collaboration, empowerment) are integral to the fabric of social work, education and training. Students who receive TIC training will be better prepared and more competent if they receive specialized training in evidence-based, trauma-focused treatment while meeting professional requirements and promoting better and more equitable outcomes for individuals, groups, and communities (Mersky et al., 2019).

Paige (2015) noted that there is still a lack of trauma training in higher education and counseling professions. He added that therapists seeking to develop competence in trauma treatment should pursue education outside their higher education institutions. Intervention and professional development programs should include foundational knowledge about trauma and the development of clinical reasoning skills to address trauma-related issues.

The Council on Social Work Education has published guidelines for advanced trauma-informed social work practice, aiming to educate social work practitioners in trauma-informed care. The guidelines emphasize that social work curricula should effectively recognize the impact of trauma symptoms and disorders and equip students with the informed, evidence-based skills necessary for effective trauma intervention (Wellington, 2017).

## 19. Future Directions for Trauma-Informed Social Work

As the understanding of trauma and its effects continues to evolve, it is important for social workers and school counselors to adapt their practices accordingly. Below are some key future directions for trauma-informed social work:

1. **Developing Trauma-Informed Policy Advocacy:** Another future direction for trauma-informed social work is advancing trauma-informed policies and advocacy efforts. While trauma-informed care principles have been integrated into clinical practice, there is still a need for broader systemic change. Social workers have a

unique opportunity to advocate for policy changes that address the root causes of trauma and promote trauma-informed approaches across various sectors.

2. **Integrating Technology into Trauma-Informed Practice:** As technology advances, social workers have the opportunity to integrate innovative tools and techniques into trauma-informed practice. Telehealth and online platforms have become increasingly important in delivering mental health services, especially in times of limited access or crisis. Leveraging technology can help bridge gaps in care, improve accessibility, and enhance the delivery of trauma-informed interventions.
3. **Enhancing Trauma-Informed Research and Evaluation:** Research and evaluation play a critical role in the development of trauma-informed social work practice. Future directions should include promoting rigorous research that examines the effectiveness of trauma-informed interventions and identifies best practices. This includes conducting studies that explore the long-term outcomes of trauma-informed care, the impact of different interventions across diverse populations, and the implementation of trauma-informed policies within organizations and communities.
4. **Creating and Implementing a Comprehensive Trauma Education and Training Platform:** A trauma education and training platform should be comprehensive, covering all types of trauma and their short- and long-term adverse consequences (Suh Moh, 2019).

## 20. Type and Methodology

This is a descriptive study employing a deductive analytical approach through content analysis and a review of relevant literature and previous studies.

## 21. Data Analysis and Discussion

### Findings of Research Question 1 – Impact of Trauma on Adolescents

The study revealed that trauma significantly influences adolescents' cognitive, social, and emotional capacities. These findings align with prior research linking trauma to adverse developmental outcomes, such as reduced academic performance, increased behavioral problems, and difficulties in forming healthy relationships (Howick, 2022). Adolescents exposed to chronic and complex trauma exhibit heightened levels of anxiety, depression, and social tension. Both acute and chronic trauma impact brain regions responsible for memory, emotion, and behavioral regulation, elevating stress hormones like cortisol and disrupting learning and behavioral systems. Early trauma exposure can lead to long-term alterations in cognitive and emotional abilities, affecting academic and social functioning.

### Findings of Research Question 2 – Trauma-Informed Practices

The study concluded that trauma-informed social work is grounded in principles such as safety, trust, collaboration, choice, and empowerment (Levenson, 2017). These practices shift the focus from "What's wrong with this person?" to "What happened to this person?", fostering healing relationships rooted in empathy. Research demonstrates that

applying these principles enhances the well-being and recovery of trauma-affected individuals (Mersky et al., 2019).

**Findings of Research Question 3 – Challenges in Implementation**

The study identified key challenges to implementing trauma-informed practices, including underreporting trauma due to shame or guilt, the impact of secondary trauma on social workers, and insufficient training and resources (Huo et al., 2023). One study reported that 54% of participants had negative experiences with service providers lacking trauma competency (Inscoe et al., 2022). To address these issues, researchers recommend supportive policies, specialized training programs, and data collection for trauma tracking in schools and social centers (Suh Moh, 2019).

**Table 2:** Implementation Challenges in Trauma-Informed Social Work (Literature-Based)

Challenge	Reported in Literature
Deficiency of Training	Saadi (2019), Modrowski et al. (2021), Hale & Wendler (2020)
Secondary Trauma in Workers	Modrowski et al. (2021), Gray et al. (2023)
Underreporting of Trauma	Tufford & Dylan (2025), Springer (2024)
Cultural Barriers to Implementation	Erlank & Bopape (2024), Luijk et al. (2025)

**22. Training Models and Regional Approaches in Trauma-Informed Social Work**

The implementation of trauma-informed practices (TIP) in social work is heavily influenced by the quality and consistency of professional training. While there is growing recognition of the need for trauma education, current training models vary widely in structure, content, and delivery. Research highlights several promising frameworks that emphasize core competencies such as trauma screening, cultural sensitivity, self-care strategies, and interagency collaboration (Baker et al., 2020; Kress et al., 2021). For example, competency-based training programs—such as those developed by the National Child Traumatic Stress Network (NCTSN)—integrate both theoretical knowledge and experiential learning to build practical skills among social workers.

Regional differences also play a significant role in shaping training outcomes. In the United States, trauma-informed education is increasingly embedded in graduate-level social work curricula, supported by federal funding and state-level policy mandates (National Association of Social Workers [NASW], 2022). In contrast, many low- and middle-income countries face systemic barriers, including limited access to specialized training resources, lack of institutional support, and insufficient integration of trauma content into existing educational frameworks (Arici, 2022; Alisic et al., 2023).

To scale trauma-informed training effectively, three key strategies are recommended:

**Standardization of Core Competencies :** Developing universally recognized standards for trauma-informed training ensures consistency across regions and professions.

**Blended Learning Formats :** Combining online modules with in-person supervision or peer consultation can increase accessibility, especially in resource-limited settings.

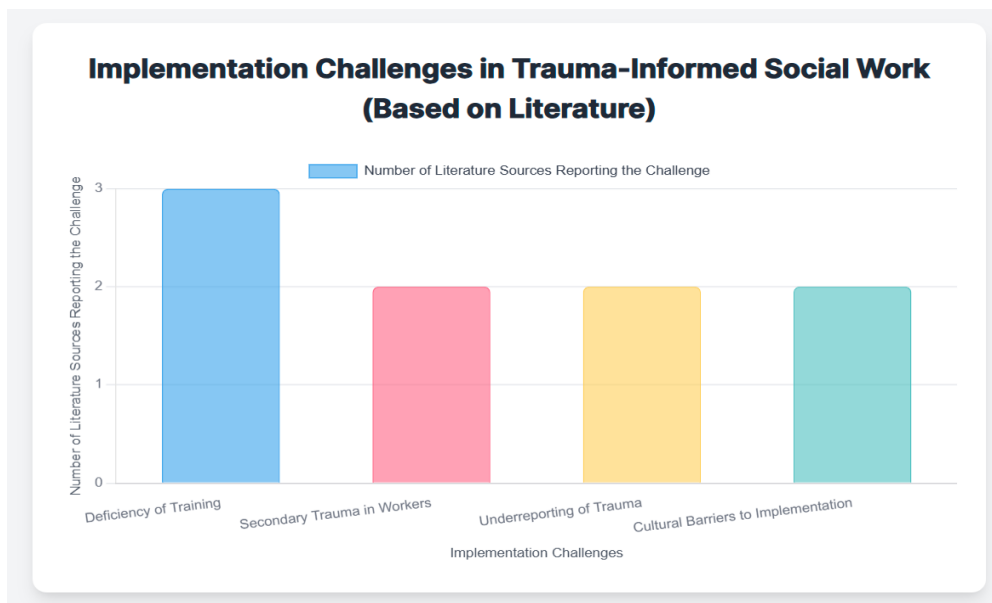
**Interdisciplinary Collaboration :** Partnering with educators, healthcare providers, and legal professionals enhances the reach and impact of trauma-informed initiatives.

These findings suggest that while progress has been made, more research is needed to evaluate which training components yield the most sustainable improvements in practice, and how these can be adapted to meet the needs of diverse populations and institutional contexts.

## 23. Conclusion

This paper has provided an overview of the concept of trauma-informed social work, the concept of trauma and its various forms, and its comprehensive impact on adolescents. It has focused on the impact of trauma on the brain, education, health, social and emotional well-being, and behaviors. It has also highlighted the importance of professional development and training in this field, as well as the importance of trauma-informed social work and its relationship to human rights and social justice. The challenges that practitioners in this field may face have been noted, along with the necessity of practicing trauma-informed care based on knowledge and ethical principles. Several future directions for trauma-informed social work have also been outlined.

In conclusion, Sanders (2021) points out that the pervasive impact of adversity across sectors requires enhancing trauma-informed skills, knowledge, and care. The social work profession has the potential to increase diversity within the field and enhance the skills and knowledge of social workers in this area. In the next section, we will discuss the stage of adolescence.



With the growing importance of trauma-informed practices, there is an urgent need to integrate trauma awareness into the core qualifications of social workers. A unified system of trauma education ensures that all professionals are equipped with the skills necessary to support people who have experienced trauma. This will not only improve the quality of service but also promote consistency and accountability within the profession.



## 24. Institutionalizing Trauma-Informed Competencies in Social Work Certification

The conclusion rightly emphasizes the importance of strengthening trauma-informed skills within social work practice. Building on this, it is worth considering whether trauma-informed competencies should be integrated as a core component of social work certification.

Currently, trauma training varies across educational programs and professional licensing requirements. However, given the widespread impact of trauma—particularly on vulnerable populations such as children and adolescents—there is a strong case for standardizing trauma literacy as part of professional qualifications.

Incorporating trauma-informed content into certification standards would ensure that all social workers receive foundational training in recognizing trauma symptoms, applying trauma-sensitive interventions, and practicing self-care to manage secondary trauma. This step would not only enhance service quality but also promote consistency, accountability, and equity in client care.

Such institutionalization would require collaboration between accreditation bodies, professional associations, and policymakers to update curricula, develop competency frameworks, and support continuing education in trauma-informed care.

By embedding trauma literacy into formal training and certification, the profession can better respond to the growing demand for trauma-informed services and strengthen systemic support for individuals affected by trauma.

## 25. Recommendations

The study underscores the importance of adopting trauma-informed social work approaches to improve the quality of life for trauma-affected individuals, particularly adolescents, and to enhance the effectiveness of professional social work interventions. The following recommendations are proposed:

1. Incorporate trauma-related content into social work curricula to equip social workers to address these issues effectively.
2. Strengthen professional training programs on trauma-informed practices, particularly for professionals in schools and care centers.
3. Develop supportive policies to ensure the sustainability of trauma-informed practices within social and educational institutions.
4. Provide psychological support for social workers to help them manage secondary trauma.

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