

## **Human Security and Post-Disaster Trauma Healing: Enhancing Social Resilience Through Community Empowerment**

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### **Abstract**

*Disasters generate multidimensional impacts that extend beyond physical destruction, affecting psychological well-being, social cohesion, and community resilience. This study examines the role of trauma healing in strengthening social resilience and community empowerment within post-disaster settings through the perspective of human security. The research employs a qualitative method with a case study approach supported by a systematic literature review. Data were collected from academic journals, books, institutional reports, and previous studies related to trauma healing, psychosocial recovery, human security, community empowerment, and disaster resilience. The findings indicate that post-disaster communities commonly experience fear, anxiety, emotional instability, social withdrawal, and declining social trust, all of which weaken adaptive capacity and collective resilience. Trauma healing interventions such as counseling, psychosocial support, group activities, religious approaches, and community therapy contribute significantly to restoring emotional stability and rebuilding social interaction among affected populations. Furthermore, trauma healing strengthens community empowerment by encouraging participation, rebuilding social cohesion, and increasing collective awareness regarding shared recovery responsibilities. The study also finds that psychosocial recovery contributes to adaptive capacity, community preparedness, mutual cooperation, and long-term social resilience, which are essential elements within the broader framework of human security and non-traditional security approaches. However, several challenges remain, including limited resources, lack of trained personnel, weak institutional coordination, cultural barriers, and sustainability issues in psychosocial recovery programs. The study concludes that trauma healing should be integrated into long-term disaster management and resilience strategies because psychological recovery constitutes an essential component of sustainable community resilience and societal stability in disaster-prone areas.*



**Keywords:** *trauma healing, human security, social resilience, community empowerment, disaster recovery, psychosocial recovery*

## INTRODUCTION

Disasters have increasingly become multidimensional challenges that affect not only physical infrastructure but also social stability, economic conditions, psychological well-being, and community resilience. The growing frequency and intensity of disasters caused by climate change, environmental degradation, urban vulnerability, and population density have transformed disasters into complex non-traditional security threats affecting both individuals and societies (United Nations Office for Disaster Risk Reduction [UNDRR], 2023). In many disaster-prone areas, recovery efforts tend to focus primarily on emergency response, infrastructure rehabilitation, and humanitarian assistance, while the psychosocial dimensions of recovery often receive less attention. However, disasters commonly generate long-term psychological consequences such as fear, anxiety, emotional instability, grief, and social withdrawal that continue long after physical reconstruction has been completed (Norris et al., 2002). These conditions weaken social interaction, reduce community participation, and undermine collective resilience, thereby limiting the ability of communities to recover effectively from crises. Consequently, disaster recovery cannot be understood solely as a physical reconstruction process because emotional recovery and social rehabilitation are equally essential for sustainable resilience and societal stability.

The emergence of human security theory significantly broadened the understanding of security beyond military and state-centered approaches. Human security emphasizes the protection of individuals and communities from fear, vulnerability, and social disruption, focusing on dimensions such as personal security, community security, health security, and psychological well-being (United Nations Development Programme [UNDP], 1994). Within this framework, disasters represent major threats to human security because they directly affect human dignity, emotional stability, and social continuity. Buzan et al. (1998) further argue that contemporary security threats increasingly involve non-military dimensions capable of disrupting societal stability and weakening collective resilience. Disasters therefore should be viewed not only as environmental or humanitarian crises, but also as social and security challenges capable of affecting broader national resilience. From the perspective of societal security, disasters may weaken collective identity and social cohesion through displacement, trauma, and disruption of social structures (Wæver et al., 1993). Psychological suffering after disasters consequently becomes both a humanitarian and security concern because emotionally vulnerable communities are generally less capable of adapting to future threats and maintaining social order.



Trauma healing emerges as an important approach for addressing these psychosocial consequences. Trauma healing refers to psychosocial interventions aimed at restoring emotional stability, social functioning, and psychological well-being among disaster survivors. Common trauma healing approaches include counseling, psychosocial support, group therapy, religious activities, recreational programs, peer support, and community-based healing initiatives (World Health Organization [WHO], 2013). These interventions are intended not only to reduce emotional distress but also to rebuild social trust, solidarity, and collective participation within affected communities. Previous studies demonstrate that psychosocial recovery contributes significantly to restoring coping capacity and reducing emotional vulnerability after disasters (Hobfoll et al., 2007). Emotional recovery also affects broader social dynamics because communities experiencing unresolved trauma frequently suffer from weakened trust, declining participation, and social fragmentation (Bonanno et al., 2010). In contrast, communities receiving adequate psychosocial support tend to display stronger social cohesion and adaptive capacity during recovery processes.

The relationship between trauma healing and social resilience becomes increasingly important within disaster governance discussions. Social resilience refers to the capacity of communities to adapt, survive, and recover from crises through collective action, social cohesion, and adaptive mechanisms (Adger, 2000). Communities possessing strong resilience are generally more capable of mobilizing resources, maintaining social stability, and responding collectively to future threats. Trauma healing contributes to this process by restoring emotional security and strengthening social interaction among survivors. Aldrich and Meyer (2015) explain that social capital and communal relationships play critical roles in determining the effectiveness of post-disaster recovery. Community-based trauma healing activities encourage participation, mutual cooperation, and collective awareness regarding shared recovery responsibilities. Through these processes, psychosocial recovery becomes closely connected to community empowerment because survivors gradually regain confidence, social agency, and collective capacity to participate actively in resilience-building efforts.

Despite increasing recognition of psychosocial recovery within disaster studies, several gaps remain within existing literature. Many studies continue to focus primarily on physical reconstruction, emergency response, and humanitarian logistics while paying less attention to the relationship between trauma healing, community empowerment, and social resilience. Research discussing trauma healing often emphasizes psychological outcomes at the individual level without sufficiently analyzing its broader implications for societal resilience and human security. Likewise, studies on resilience frequently prioritize institutional preparedness and infrastructure capacity rather than examining psychosocial

dimensions and emotional recovery processes. Consequently, limited interdisciplinary discussion exists regarding how trauma healing contributes to strengthening social resilience within the broader framework of human security and non-traditional security approaches.

This article seeks to address these gaps by examining the relationship between trauma healing, community empowerment, and social resilience in post-disaster settings through the perspective of human security. The study argues that trauma healing should not merely be understood as a temporary humanitarian intervention, but as an essential component of sustainable resilience-building and societal stability. By restoring emotional well-being, rebuilding social trust, and encouraging collective participation, psychosocial recovery contributes significantly to strengthening adaptive capacity and long-term community resilience. Accordingly, the central research question guiding this study is: how does trauma healing contribute to strengthening social resilience and community empowerment in post-disaster settings from a human security perspective?

## **LITERATURE REVIEW**

### **Human Security Theory**

Human security theory emerged as a response to the limitations of traditional security paradigms that primarily emphasized military threats, territorial sovereignty, and state survival. During the Cold War period, security studies were largely dominated by realist perspectives that positioned the state as the main object of protection (Waltz, 1979). However, the changing nature of global threats after the Cold War encouraged broader understandings of security that included non-military dimensions such as environmental crises, poverty, epidemics, terrorism, and natural disasters (Buzan et al., 1998). The United Nations Development Programme (1994) introduced the concept of human security through the Human Development Report, emphasizing that security should focus on protecting individuals and communities from fear, vulnerability, and social disruption. Human security therefore extends beyond physical protection to include economic, environmental, health, personal, and community security. Within disaster contexts, this perspective becomes highly relevant because disasters directly affect psychological well-being, social stability, and community continuity. Human security theory also recognizes that psychological insecurity and social fragmentation can weaken societal resilience and reduce the ability of communities to respond to future crises. The Copenhagen School further expanded this discussion through the concept of societal security, which emphasizes the protection of collective identity and social cohesion from threats capable of disrupting social order (Wæver et al., 1993). Consequently, disasters can be understood not only as humanitarian

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emergencies but also as non-traditional security threats affecting social resilience and long-term societal stability.

### **Post-Disaster Trauma and Psychosocial Recovery**

Disasters frequently produce severe psychological and emotional consequences that continue long after emergency response and physical reconstruction efforts have ended. Survivors commonly experience fear, grief, anxiety, depression, emotional instability, and post-traumatic stress disorder (PTSD) resulting from loss, displacement, uncertainty, and exposure to traumatic events (American Psychiatric Association, 2013). According to Norris et al. (2002), disasters often create long-term emotional vulnerability because survivors face disrupted social systems, economic insecurity, and prolonged uncertainty regarding safety and recovery. Psychological distress may reduce social participation, weaken trust, and affect collective functioning within communities. In many cases, unresolved trauma contributes to social withdrawal and declining adaptive capacity, limiting community resilience in post-disaster environments.

Psychosocial recovery refers to interventions designed to restore emotional stability, social functioning, and coping capacity among affected populations. Trauma healing programs generally include counseling, psychosocial support, group therapy, recreational activities, peer support, and religious or community-based approaches aimed at reducing emotional distress and rebuilding social relationships (World Health Organization, 2013). Hobfoll et al. (2007) explain that effective post-trauma interventions should promote safety, social connectedness, self-efficacy, and hope among survivors. Community-based trauma healing approaches are particularly important because they encourage participation and collective recovery processes rather than focusing solely on individual treatment. In addition, culturally sensitive interventions integrating local traditions and religious values tend to be more effective in increasing acceptance and emotional recovery within affected communities (Silove & Steel, 2006). Trauma healing therefore functions not only as psychological assistance but also as a social mechanism for rebuilding communal interaction and strengthening broader recovery processes.

### **Social Resilience Concept**

Social resilience refers to the capacity of communities to adapt, survive, and recover from crises while maintaining social cohesion, collective identity, and essential social functions. The concept emphasizes the importance of adaptive capacity, social capital, collective action, and communal support systems in responding to disturbances and uncertainty (Adger, 2000). Communities with strong social resilience are generally more

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capable of mobilizing resources, maintaining cooperation, and reorganizing social structures after disasters. Norris et al. (2008) argue that resilient communities possess interconnected capacities involving communication, social trust, economic resources, and collective competence that enable effective recovery and preparedness.

Social cohesion plays a central role within resilience because trust, solidarity, and social networks facilitate cooperation during crises. Aldrich and Meyer (2015) emphasize that social capital significantly influences recovery outcomes because communities with stronger interpersonal relationships and civic participation recover more effectively from disasters. Collective action also strengthens resilience by encouraging communities to participate actively in recovery and preparedness activities. Furthermore, resilience is not only reactive but also preventive because resilient communities develop adaptive mechanisms and preparedness strategies for future threats (Cutter et al., 2008). Psychological well-being is closely connected to this process because emotional instability and unresolved trauma may weaken social interaction, reduce participation, and limit collective adaptation. Consequently, trauma healing contributes to social resilience by restoring emotional security, rebuilding trust, and strengthening social cohesion among affected populations.

### **Community Empowerment in Disaster Recovery**

Community empowerment has become an important principle within disaster recovery because sustainable resilience depends heavily on local participation and collective capacity-building. Empowerment refers to processes that increase the ability of individuals and communities to participate actively in decision-making, access resources, and control aspects of their social environment (Zimmerman, 2000). Traditional disaster recovery approaches often positioned affected populations as passive recipients of aid, whereas contemporary approaches increasingly emphasize participatory and community-centered recovery mechanisms (Twigg, 2009). Community involvement enables survivors to regain confidence, strengthen social interaction, and rebuild collective agency after experiencing disruption and uncertainty.

Local participation contributes significantly to recovery because communities possess local knowledge, social networks, and coping mechanisms essential for effective adaptation. Civil society organizations, volunteers, religious institutions, and community leaders frequently play important roles in mobilizing collective support and organizing recovery initiatives. Mathbor (2007) explains that empowerment-oriented recovery programs strengthen social capital and encourage greater self-reliance among affected populations. Trauma healing activities integrated with community empowerment processes

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can further rebuild trust, solidarity, and participation within communities. As survivors become emotionally stable and socially engaged, they are generally more capable of participating in disaster preparedness, collective decision-making, and resilience-building activities. Community empowerment therefore contributes not only to short-term recovery but also to strengthening long-term adaptive capacity and social resilience within disaster-prone environments.

### **Previous Studies**

Previous studies on trauma healing, disaster recovery, resilience, and human security demonstrate the growing recognition of psychosocial recovery as an important aspect of post-disaster governance. Norris et al. (2008) highlighted the importance of community resilience capacities such as social cohesion, communication systems, and collective competence in supporting recovery processes. Aldrich and Meyer (2015) further emphasized the role of social capital and civic participation in accelerating post-disaster adaptation. Research on trauma healing also shows that psychosocial interventions contribute significantly to emotional recovery and social functioning among survivors (Hobfoll et al., 2007). Other studies discussing human security explain that disasters affect multiple dimensions of human well-being beyond physical safety, including psychological security and community stability (Tadjbakhsh & Chenoy, 2007).

Despite these contributions, several gaps remain within the literature. Many studies focus primarily on physical reconstruction, emergency management, or individual psychological outcomes without sufficiently analyzing the broader relationship between trauma healing, social resilience, and community empowerment. Resilience studies also tend to prioritize institutional preparedness and infrastructure capacity while paying less attention to psychosocial dimensions and emotional recovery processes. In addition, limited interdisciplinary discussion exists regarding trauma healing within the framework of human security and non-traditional security approaches. This article seeks to address these gaps by integrating trauma healing, community empowerment, and social resilience within a human security perspective. The study therefore contributes to broader discussions on disaster governance, psychosocial resilience, and sustainable community recovery in disaster-prone areas.

### **METHODOLOGY**

This study employs a qualitative research method with a case study approach to analyze the relationship between trauma healing, community empowerment, and social resilience within post-disaster settings. Qualitative research is considered appropriate

because the study seeks to understand psychological experiences, social interaction, and recovery processes that cannot be fully measured through quantitative methods. According to Creswell and Poth (2018), qualitative approaches enable researchers to explore meanings, perceptions, and social realities in greater depth. The case study approach is used because it allows comprehensive examination of complex social phenomena within real-life contexts (Yin, 2018). In the context of this study, the approach facilitates deeper analysis regarding how psychosocial recovery contributes to strengthening community resilience and human security after disasters. Furthermore, qualitative methods support interpretative analysis by focusing on how individuals and communities experience trauma, rebuild social relationships, and participate in collective recovery efforts.

The study primarily utilizes a systematic literature review as the main data collection technique. The literature review was conducted by examining academic journals, books, institutional reports, government publications, and previous studies related to trauma healing, psychosocial recovery, human security, community empowerment, and disaster resilience. A systematic literature review enables the researcher to identify, evaluate, and synthesize relevant findings in a structured manner (Snyder, 2019). The selected sources were chosen based on relevance, credibility, and their contribution to the conceptual understanding of psychosocial recovery and social resilience. In addition, the study conceptually identifies several actors frequently involved in post-disaster recovery processes, including disaster survivors, community leaders, volunteers, government officials, and non-governmental organizations (NGOs). Disaster survivors represent the primary group experiencing psychological vulnerability and recovery processes, while community leaders and local organizations often play important roles in rebuilding social cohesion and collective participation. Volunteers, NGOs, and government institutions also contribute significantly to psychosocial support programs, humanitarian assistance, and resilience-building initiatives within affected communities.

The analysis process applies qualitative descriptive analysis combined with thematic analysis to identify patterns, concepts, and relationships within the reviewed literature. According to Miles et al. (2014), qualitative analysis involves several interconnected stages, including data reduction, data categorization, interpretation, and conclusion drawing. In this study, data reduction was conducted by selecting literature directly relevant to trauma healing, human security, and social resilience. The selected data were subsequently categorized into major themes such as psychological vulnerability, psychosocial recovery, community empowerment, adaptive capacity, and resilience-building. Thematic analysis was then used to examine recurring patterns and conceptual relationships among the identified themes. Through this process, the study interprets how trauma healing

contributes to restoring emotional stability, rebuilding social cohesion, and strengthening community resilience within post-disaster settings.

To ensure credibility and reliability, this study applies triangulation techniques throughout the research process. Source triangulation was conducted by comparing information from multiple academic sources, institutional publications, and interdisciplinary studies related to disaster recovery and psychosocial resilience. The study also utilizes theoretical triangulation by integrating perspectives from human security theory, psychosocial recovery, and social resilience frameworks. This approach strengthens analytical consistency and minimizes subjective interpretation in explaining the relationship between trauma healing and community resilience.

## **FINDINGS AND DISCUSSION**

### **Post-Disaster Psychological Conditions**

The findings show that disasters create not only physical destruction but also long-term psychological and social consequences affecting community resilience. Disaster survivors commonly experience fear, anxiety, grief, emotional instability, and uncertainty caused by loss, displacement, and disrupted social environments (Norris et al., 2002). Continuous exposure to risk and uncertainty often generates prolonged emotional distress, reducing survivors' sense of safety and stability (Bonanno et al., 2010). Many affected individuals also experience social withdrawal, declining participation, and weakened interpersonal trust, which collectively undermine community cohesion and adaptive capacity.

The literature further indicates that post-disaster trauma may lead to psychological disorders such as depression, chronic anxiety, and post-traumatic stress disorder (PTSD) if recovery support is inadequate (American Psychiatric Association, 2013). Hobfoll et al. (2007) explain that traumatic experiences reduce self-efficacy and emotional security, limiting individuals' ability to function socially and participate in recovery processes. Socially, disasters disrupt communal interaction and weaken social capital due to displacement, economic hardship, and damaged social structures (Aldrich, 2012). Reduced trust toward institutions may also emerge when aid distribution and recovery efforts are perceived as ineffective or unequal.

From a human security perspective, these conditions reflect broader insecurity because psychological vulnerability directly affects personal and community security (United Nations Development Programme [UNDP], 1994). Wæver et al. (1993) further argue that threats to social cohesion and collective identity can weaken societal stability. Consequently, post-disaster psychological conditions should be understood not only as

health concerns but also as social and security challenges influencing long-term resilience and recovery.

### **Trauma Healing Implementation**

The findings demonstrate that trauma healing programs play an important role in restoring emotional stability and rebuilding social interaction within post-disaster communities. Trauma healing commonly includes counseling, psychosocial support, group therapy, religious activities, recreational programs, and community-based healing initiatives aimed at reducing emotional distress and strengthening coping mechanisms (World Health Organization, 2013). These interventions help survivors process traumatic experiences while encouraging social interaction and collective recovery.

Counseling and group therapy are among the most frequently used approaches because they provide safe spaces for emotional expression and shared experiences (Pfefferbaum et al., 2014). Group-based approaches are particularly effective in reducing isolation and rebuilding social trust among survivors. Religious and spiritual activities also contribute significantly to emotional recovery, especially in communities where religion functions as a central social value. Faith-based approaches provide emotional reassurance, collective solidarity, and psychological comfort during periods of uncertainty (Ager et al., 2015).

The findings also show that social support mechanisms strongly influence the effectiveness of trauma healing programs. Community gatherings, peer support, and collective activities strengthen social cohesion and encourage participation among affected populations (Norris et al., 2008). Furthermore, trauma healing programs increasingly involve local communities, volunteers, NGOs, and community leaders in implementation processes to ensure cultural relevance and broader participation (Mathbor, 2007). Within the human security framework, trauma healing contributes to restoring dignity, emotional security, and community stability, making psychosocial recovery an essential element of sustainable disaster recovery.

### **Community Empowerment Process**

The findings indicate that trauma healing contributes significantly to community empowerment by rebuilding participation, social interaction, and collective awareness after disasters. Emotional recovery enables survivors to overcome fear and social withdrawal, allowing them to reconnect with communal activities and recovery initiatives. Trauma healing activities such as group discussions, peer support, and community therapy

strengthen interpersonal trust and solidarity among community members (Pfefferbaum et al., 2014).

Community participation also increases when local actors such as religious leaders, volunteers, youth groups, and civil society organizations become involved in psychosocial recovery activities. Their participation strengthens local ownership and encourages culturally relevant recovery approaches (Twigg, 2009). According to Aldrich and Meyer (2015), strong social participation and social capital are essential for effective post-disaster adaptation because they encourage collective cooperation and mutual support.

The findings further reveal that trauma healing strengthens collective awareness regarding disaster preparedness and communal responsibility. As emotional conditions improve, communities become more capable of participating in preparedness activities, communication systems, and resilience-building programs (Cutter et al., 2008). From a human security perspective, empowerment is essential because communities cannot achieve sustainable resilience without active participation and social cohesion (UNDP, 1994). Trauma healing therefore functions not only as psychological assistance but also as a mechanism for rebuilding social agency and collective resilience within disaster-prone communities.

### **Strengthening Social Resilience**

The findings demonstrate that psychosocial recovery contributes directly to strengthening social resilience within post-disaster communities. Social resilience refers to the collective capacity of communities to adapt, recover, and maintain social stability during crises (Adger, 2000). Trauma healing strengthens resilience by restoring emotional stability, rebuilding trust, and encouraging collective participation among survivors. Communities experiencing unresolved trauma often suffer from weakened social cohesion and reduced adaptive capacity, limiting recovery effectiveness (Bonanno et al., 2010).

Trauma healing also contributes to rebuilding social cohesion through communal activities, group counseling, and participatory recovery programs that reconnect survivors socially. Aldrich and Meyer (2015) emphasize that social cohesion and social capital significantly influence recovery outcomes because communities with stronger interpersonal trust are generally more capable of collective adaptation. Furthermore, psychosocial recovery strengthens preparedness and mutual cooperation by encouraging collective awareness regarding shared responsibilities and future risks (Twigg, 2009).

These findings align with human security theory, which emphasizes psychological well-being and social stability as important dimensions of security (UNDP, 1994). Wæver et al. (1993) further argue that maintaining social cohesion is essential for societal security.

Consequently, trauma healing contributes not only to emotional recovery but also to broader resilience-building and community preparedness processes.

### **Challenges and Limitations**

Despite its importance, trauma healing implementation faces several significant challenges. One major obstacle involves limited resources and funding because disaster recovery policies often prioritize infrastructure reconstruction over psychosocial recovery (Inter-Agency Standing Committee [IASC], 2007). As a result, many trauma healing programs operate with insufficient facilities, short implementation periods, and inadequate institutional support.

Another challenge concerns the shortage of trained personnel such as psychologists, counselors, and social workers capable of delivering effective psychosocial interventions (World Health Organization, 2013). In many disaster-prone areas, volunteers and local organizations attempt to fill these gaps despite limited professional training. Weak institutional coordination among governments, NGOs, and humanitarian organizations also creates overlapping programs and inconsistent recovery support (Tierney, 2014).

Cultural barriers further affect implementation because mental health issues remain stigmatized within some communities, reducing participation in trauma healing activities (Silove & Steel, 2006). Additionally, many psychosocial recovery programs lack sustainability because interventions frequently decline after emergency phases despite long-term emotional recovery needs. These limitations demonstrate that psychosocial recovery remains underintegrated within disaster governance and resilience planning systems.

### **Strategic Implications**

The findings suggest that psychosocial recovery should be integrated into disaster management and long-term resilience strategies. Disaster recovery policies often emphasize emergency response and physical reconstruction while neglecting emotional recovery and social resilience dimensions (Tierney, 2014). However, unresolved trauma weakens social cohesion, participation, and adaptive capacity, increasing long-term vulnerability within affected communities.

The study also highlights the strategic importance of trauma healing for community preparedness and non-military defense approaches. Communities with stronger psychosocial resilience are generally more capable of collective adaptation and disaster preparedness because emotional stability supports participation and cooperation (Norris et

al., 2008). Within the human security framework, trauma healing contributes to protecting communities from fear, instability, and social fragmentation (UNDP, 1994).

Priyanto emphasizes that Indonesia's defense doctrine has evolved in response to increasingly complex military, non-military, and hybrid threats, requiring adaptive defense strategies that involve broader societal participation and resilience-building mechanisms (Priyanto et al., 2024). Furthermore, research by Priyanto and Ferry Ismail regarding the development of reserve components within the total defense system highlights that community participation, social preparedness, and collective resilience are crucial elements in strengthening national resilience against multidimensional threats. Similarly, studies on territorial defense management conducted within the Indonesian defense academic environment underline that community resilience and civil-military synergy are increasingly important in addressing contemporary crises that extend beyond conventional military threats. These perspectives align with the findings of this article, which demonstrate that trauma healing and psychosocial recovery contribute not only to humanitarian recovery but also to strengthening social cohesion, adaptive capacity, and societal resilience as part of broader non-traditional defense and human security strategies.

Furthermore, the findings indicate that psychosocial resilience constitutes an important element of national resilience because socially cohesive and emotionally resilient communities are better prepared to respond to future crises. Therefore, governments, disaster agencies, NGOs, and community organizations should integrate trauma healing and psychosocial support into sustainable resilience-building and disaster governance frameworks.

## CONCLUSION

The findings of this study demonstrate that trauma healing plays an important role in strengthening community empowerment and social resilience within post-disaster settings. Disasters generate not only physical destruction but also psychological and social consequences such as fear, anxiety, emotional instability, and weakened social cohesion. These conditions reduce adaptive capacity and limit community recovery processes. Trauma healing interventions including counseling, psychosocial support, religious approaches, and community-based activities contribute significantly to restoring emotional stability, rebuilding social interaction, and strengthening collective participation. The study also finds that psychosocial recovery supports adaptive capacity, mutual cooperation, and preparedness, making trauma healing an essential component of sustainable resilience-building and human security.

Theoretically, this article contributes to human security and disaster studies by emphasizing that security extends beyond physical protection to include psychological well-being, social cohesion, and community resilience. The study strengthens the understanding that psychosocial recovery is closely connected to broader resilience and non-traditional security frameworks. By integrating trauma healing, community empowerment, and social resilience within a human security perspective, the article highlights the importance of people-centered recovery approaches in disaster governance.

Practically, governments and disaster management agencies should integrate psychosocial recovery into long-term disaster management and resilience policies rather than limiting trauma healing to temporary emergency responses. NGOs, community organizations, and local leaders should strengthen participatory and culturally sensitive trauma healing programs that encourage community involvement and social cohesion. Sustainable resilience planning should incorporate emotional recovery, community participation, and psychosocial preparedness alongside physical mitigation strategies.

Future studies should further examine the long-term impact of trauma healing on societal resilience and community preparedness in disaster-prone areas. Comparative and field-based research involving different cultural and geographical contexts would provide broader understanding regarding the role of psychosocial recovery within non-traditional security and resilience-building frameworks.

## REFERENCES

- Adger, W. N. (2000). Social and ecological resilience: Are they related? *Progress in Human Geography*, 24(3), 347–364.
- Ager, A., Fiddian-Qasmiyeh, E., & Ager, J. (2015). Local faith communities and the promotion of resilience in humanitarian situations. *Journal of Refugee Studies*, 28(2), 202–221.
- Aldrich, D. P. (2012). *Building resilience: Social capital in post-disaster recovery*. University of Chicago Press.
- Aldrich, D. P., & Meyer, M. A. (2015). Social capital and community resilience. *American Behavioral Scientist*, 59(2), 254–269.
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). American Psychiatric Publishing.
- Bonanno, G. A., Brewin, C. R., Kaniasty, K., & Greca, A. M. L. (2010). Weighing the costs of disaster: Consequences, risks, and resilience in individuals, families, and communities. *Psychological Science in the Public Interest*, 11(1), 1–49.



- Buzan, B., Wæver, O., & de Wilde, J. (1998). *Security: A new framework for analysis*. Lynne Rienner Publishers.
- Chan, J., To, H. P., & Chan, E. (2006). Reconsidering social cohesion: Developing a definition and analytical framework for empirical research. *Social Indicators Research*, 75(2), 273–302
- Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry and research design: Choosing among five approaches* (4th ed.). Sage Publications.
- Cutter, S. L., Barnes, L., Berry, M., Burton, C., Evans, E., Tate, E., & Webb, J. (2008). A place-based model for understanding community resilience to natural disasters. *Global Environmental Change*, 18(4), 598–606.
- Hobfoll, S. E., et.al. (2007). Five essential elements of immediate and mid-term mass trauma intervention. *Psychiatry*, 70(4), 283–315.
- Inter-Agency Standing Committee. (2007). *IASC guidelines on mental health and psychosocial support in emergency settings*. IASC.
- Ismail, F., & Priyanto, P. (2024). Strategi pengembangan kemampuan tempur komponen cadangan guna memantapkan ketahanan nasional. *NUSANTARA: Jurnal Ilmu Pengetahuan Sosial*, 11(3). <https://jurnal.um-tapsel.ac.id/index.php/nusantara/article/view/15790/0>
- Mathbor, G. M. (2007). Enhancement of community preparedness for natural disasters. *International Social Work*, 50(3), 357–369.
- Miles, M. B., Huberman, A. M., & Saldaña, J. (2014). *Qualitative data analysis: A methods sourcebook* (3rd ed.). Sage Publications.
- Norris, F. H., Friedman, M. J., Watson, P. J., Byrne, C. M., Diaz, E., & Kaniasty, K. (2002). 60,000 disaster victims speak: Part I. *Psychiatry*, 65(3), 207–239.
- Norris, F. H., Stevens, S. P., Pfefferbaum, B., Wyche, K. F., & Pfefferbaum, R. L. (2008). Community resilience as a metaphor, theory, set of capacities, and strategy for disaster readiness. *American Journal of Community Psychology*, 41(1–2), 127–150.
- Pfefferbaum, B., Jacobs, A. K., Griffin, N., & Houston, J. B. (2014). Children's disaster reactions: The influence of family and social factors. *Current Psychiatry Reports*, 17(7), 1–6.
- Priyanto, P., Akbar, M., & Timur, F. G. C. (2024). Threat perception in Indonesia: Time series analysis of defense doctrines between 1991–2023. *Journal of Governance*, 9(4). <https://jurnal.untirta.ac.id/index.php/jog/article/view/29873>
- Priyanto, P., & Kusmiati, M. (2025). Territorial defense management: An effective military strategy in the contemporary era. *Management Dynamics: International Journal of Management and Digital Sciences*, 2(4). Retrieved from : <https://management.ifrel.org/index.php/ManagementDynamics/article/view/424>



- Silove, D., & Steel, Z. (2006). Understanding community psychosocial needs after disasters: Implications for mental health services. *The Journal of Postgraduate Medicine*, 52(2), 121–125.
- Snyder, H. (2019). Literature review as a research methodology: An overview and guidelines. *Journal of Business Research*, 104, 333–339.
- Tadjbakhsh, S., & Chenoy, A. (2007). *Human security: Concepts and implications*. Routledge.
- Tierney, K. (2014). *The social roots of risk: Producing disasters, promoting resilience*. Stanford University Press.
- Twigg, J. (2009). *Characteristics of a disaster-resilient community*. University College London.
- United Nations Development Programme. (1994). *Human development report 1994: New dimensions of human security*. Oxford University Press.
- United Nations Office for Disaster Risk Reduction. (2023). *Global assessment report on disaster risk reduction 2023*. United Nations.
- Wæver, O., Buzan, B., Kelstrup, M., & Lemaitre, P. (1993). *Identity, migration and the new security agenda in Europe*. Pinter Publishers.
- Waltz, K. N. (1979). *Theory of international politics*. Addison-Wesley.
- World Health Organization. (2013). *Building back better: Sustainable mental health care after emergencies*. World Health Organization.
- Yin, R. K. (2018). *Case study research and applications: Design and methods* (6th ed.). Sage Publications.
- Zimmerman, M. A. (2000). Empowerment theory: Psychological, organizational, and community levels of analysis. In J. Rappaport & E. Seidman (Eds.), *Handbook of community psychology* (pp. 43–63). Springer.