Integration under Conditions of Ongoing Trauma: Toward a Model of Net Healing Gain

Jannick Bauer

Private Practice Psychotherapy, Osnabrück, Germany

Email: psychotherapiepraxis.bauer@gmail.com

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Introduction

Over the past decades, trauma research has significantly advanced the understanding of how severe and chronic adversity affects psychological development. A central assumption within many contemporary approaches to trauma therapy is that the establishment of inner and outer safety constitutes a necessary prerequisite for processes of trauma integration. Therapeutic models commonly emphasize stabilization and the reduction of ongoing threat before deeper trauma processing can occur (Herman, 1992; van der Kolk, 2014; van der Hart et al., 2006). These perspectives reflect robust empirical findings demonstrating the harmful effects of chronic stress and repeated re-traumatization on psychological functioning. Recent trauma-informed approaches have further reinforced the view that the establishment of a sense of safety constitutes a core prerequisite for psychological healing and regulatory stability (Lynch et al., 2025).

However, many individuals and communities worldwide live under conditions in which such safety cannot be fully established. Situations of war, structural violence, poverty, cultural disruption, or prolonged social marginalization often expose individuals to persistent chronic adverse conditions. In this context, the concept of continuous traumatic stress has been introduced to describe conditions in which individuals are exposed to ongoing threat rather than discrete traumatic events (Straker, 1987; Suffla et al., 2015). These realities raise an important theoretical question: how can processes of psychological integration and development occur when traumatic conditions persist rather than resolve?

Empirical observations from several fields suggest that the relationship between adversity and psychological development may be more complex than a strictly linear trauma–damage model implies. Longitudinal studies of children exposed to war and chronic stress have documented that developmental trajectories may continue despite persistent adversity, with some individuals showing increasing psychological organization over time (Masten &

Narayan, 2012). Research on Indigenous communities by Chandler and Lalonde (1998) has further demonstrated that collective cultural structures—such as shared narratives, institutional continuity, and symbolic practices—can play a crucial role in maintaining identity coherence across generations even under conditions of severe historical and ongoing trauma. Similarly, the well-documented immigrant health paradox describes the counterintuitive observation that first-generation immigrants often show relatively favorable health outcomes despite significant stressors, while these advantages frequently decline across subsequent generations (Abraído-Lanza et al., 1999). Together, these findings suggest that psychological and cultural integration processes may play a central role in shaping developmental trajectories under conditions of adversity.

Traumatic experiences may challenge fundamental assumptions about the self and the world, requiring processes of meaning-making to restore coherence (Janoff-Bulman, 1992). In parallel, recent resilience research has increasingly emphasized underlying mechanisms, such as appraisal and regulatory processes, that mediate adaptive responses to adversity (Kalisch et al., 2015). Research on narrative identity further suggests that processes of symbolization and autobiographical coherence play a crucial role in integrating emotionally significant experiences across time (McAdams, 2001).

Beyond individual-level processes, studies on cultural memory and collective resilience have highlighted the importance of shared narratives, identity continuity, and socially embedded practices in shaping adaptive responses under conditions of prolonged adversity (Assmann, 2011; Norris et al., 2008; Ungar, 2011). While these perspectives identify important psychological, relational, and cultural factors, they provide only limited accounts of how integrative processes themselves may develop cumulatively.

While resilience research has increasingly emphasized cognitive and regulatory mechanisms underlying adaptive responses to stress, particularly processes of appraisal (Kalisch et al., 2015), these accounts primarily focus on how individuals maintain or regain

adaptive functioning. At the same time, they imply learning processes through which prior experiences shape future appraisal and regulation. However, they offer more limited accounts of how integrative processes themselves may develop cumulatively over time, particularly under conditions of ongoing adversity.

The present paper seeks to extend this line of research by introducing a process-oriented model of integration under conditions of ongoing trauma, specifying a cumulative mechanism through which repeated integrative processes contribute to increasing coherence, regulatory reorganization, and the shaping of future responses to adversity. By conceptualizing integration as a temporally extended and accumulative process, the model offers a novel perspective on how psychological and cultural organization may evolve even in the continued presence of adverse conditions.

Theoretical Background

Integration as a Process of Psychological Organization

A central concept underlying the present model is psychological integration. Within psychological and trauma-related literature, integration refers to the gradual organization of emotionally significant experiences into coherent psychological structures that link past, present, and anticipated future. Rather than merely involving the recollection of events, integration describes how experiences become incorporated into stable systems of meaning and regulation.

From this perspective, integration can be understood as a multi-level process involving several interconnected psychological mechanisms (Figure 1). First, experiences must become mentally represented, meaning that they become accessible to conscious awareness and psychological organization. Second, these representations may become symbolized, allowing experiences to be expressed and communicated through language, narrative, artistic expression, ritual, or other culturally mediated symbolic forms. Third, processes of meaning-

making enable experiences to be placed within broader interpretive frameworks that connect past, present, and anticipated future. Finally, the affective and physiological responses associated with these experiences may become increasingly regulated, while processes of psychological organization may simultaneously contribute to greater coherence and stability. These processes are consistent with a broad body of research suggesting that the representation, symbolization, and narrative organization of experience facilitate meaning-making and psychological integration (Janoff-Bulman, 1992; Pennebaker & Chung, 2011; McAdams, 2001).

In the present model, regulatory reorganization refers to the gradual restructuring of affective, cognitive, and physiological response patterns as experiences become increasingly integrated into coherent systems of meaning. As experiences are represented, symbolized, and organized within broader interpretive frameworks, processes of meaning-making may facilitate more adaptive forms of psychological adjustment under conditions of stress and adversity (Park, 2010). These meaning-making processes may shape the appraisal of experiences, which in turn influences emotional and physiological responses, consistent with appraisal-based models of stress, particularly in contexts of significant or prolonged stress exposure (Lazarus & Folkman, 1984). In line with this, models of emotion regulation suggest that such changes in interpretation can directly modulate affective responses and regulatory processes, including in response to stress-related or emotionally challenging experiences (Gross, 1998). Together, these perspectives suggest that processes of meaning-making may contribute to increases in coherence and more adaptive patterns of regulation over time, even under conditions of ongoing stress or trauma.

However, these integrative processes do not unfold uniformly and may be significantly challenged or disrupted under conditions of overwhelming or traumatic stress. In such contexts, traumatic experiences can exceed existing frameworks of meaning, fragment autobiographical memory, and compromise regulatory capacities. As a result, experiences

may remain insufficiently integrated. In some cases, experiences may be only weakly represented, persisting primarily as diffuse affective states, bodily sensations, or implicit memory traces. In other cases, experiences may be mentally represented but remain insufficiently symbolized, limiting their integration into narrative and autobiographical memory structures.

Against this background, the question arises under which conditions integration may nevertheless be maintained or gradually restored. A central construct relevant to adaptive responses to traumatic experiences is Antonovsky's concept of sense of coherence (SOC). SOC describes a global orientation reflecting the degree to which individuals perceive their internal and external environments as comprehensible, manageable, and meaningful. A meta-analysis including 47 samples (N = 10,883) found a substantial negative association between sense of coherence and PTSD symptom severity, indicating that higher levels of coherence are associated with lower post-traumatic stress symptoms (Schäfer et al., 2019). From this perspective, coherence may be understood as a form of psychological organization that enables individuals to perceive experiences as predictable, structured, and embedded within a broader context of meaning. Even in the absence of external safety, increasing coherence may reduce subjective unpredictability and fragmentation by providing internal frameworks through which experiences can be anticipated, interpreted, and regulated. In this sense, coherence itself may be associated with regulatory functions by transforming unstructured or overwhelming experiences into more organized and manageable forms.

In the present model, traumatic events are understood as aversive experiences that occur at the level of an individual person, and initially exceed an individual's existing capacity for psychological integration. Accordingly, the immediate psychological processing and integration of traumatic experiences take place primarily at the individual level. However, the pathways through which such integration unfolds involve both individual and collective

forms of processing and may result in the accumulation of a likewise collective resilience memory.

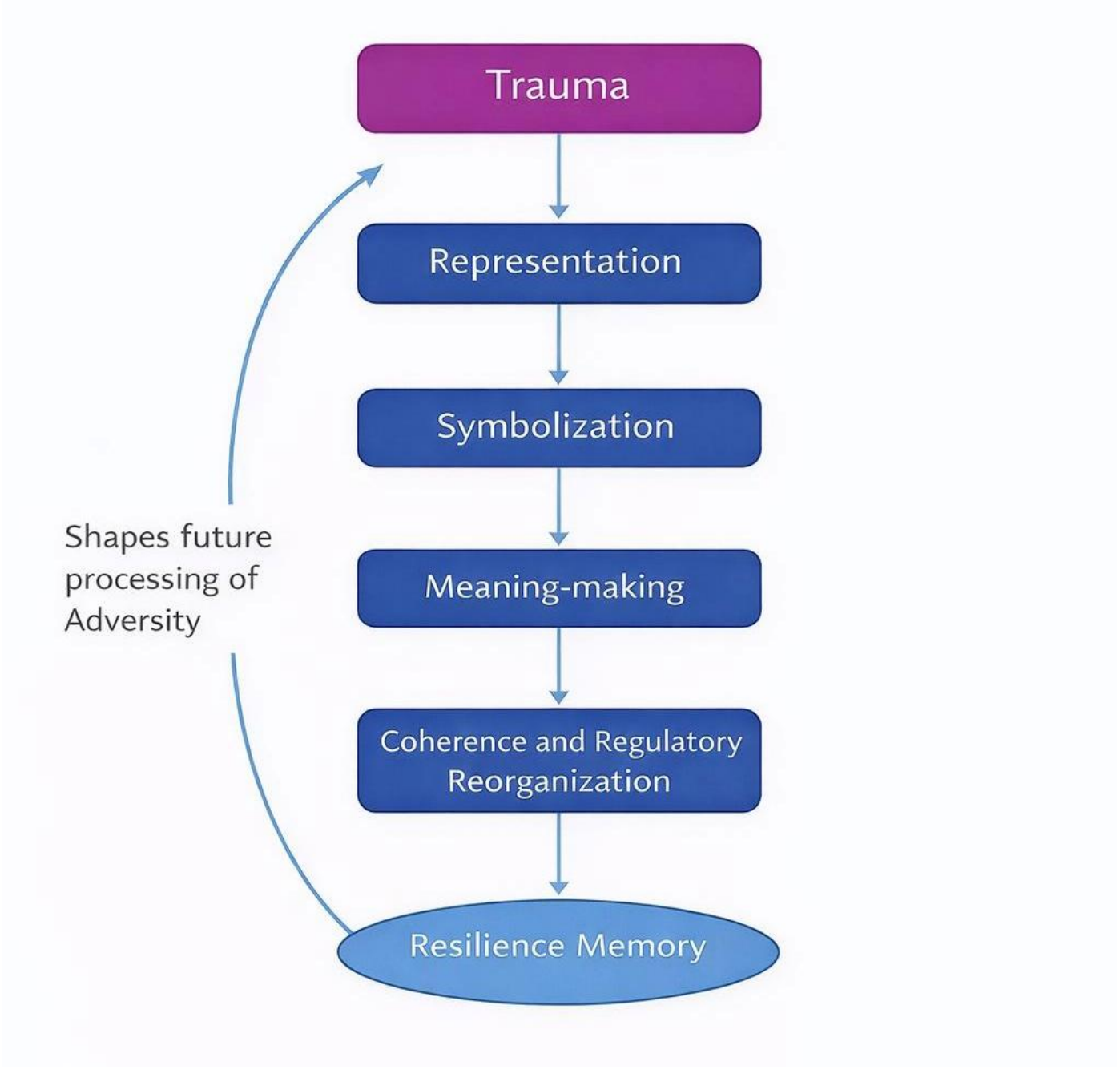

Figure 1
Conceptual model of trauma integration, illustrating sequential processes of representation, symbolization, meaning-making, and regulatory reorganization leading to the formation of resilience memory.

Extending these perspectives, the present model conceptualizes trauma integration as a gradual process in which representation, symbolization, and meaning-making contribute to increasing coherence and regulatory reorganization over time. Individual meaning-making is

strongly shaped by relational and cultural contexts. Individuals rarely interpret experiences in isolation; rather, experiences are organized within shared narratives, symbolic frameworks, and culturally transmitted systems of meaning. Anthropological and sociological research has long emphasized the importance of cultural memory in maintaining continuity of meaning across time. Cultural memory refers to collectively shared systems of narratives, symbols, rituals, and institutional practices through which societies preserve and transmit interpretations of historical experiences (Assmann, 2011).

These cultural structures can provide symbolic resources through which individuals and communities organize experiences of suffering, loss, and adversity. Through rituals, commemorative practices, artistic expression, and collective storytelling, difficult experiences may become symbolically integrated rather than remaining psychologically or socially fragmented. In this sense, integration may unfold not only within individuals but also within cultural and social systems that shape how experiences are symbolized and interpreted.

Research on community resilience further highlights the importance of social and cultural structures in shaping responses to adversity. Community resilience frameworks emphasize that adaptive responses to crises are often supported by shared social resources, collective narratives, and institutional continuity that enable communities to maintain coherence and meaning in the face of disruption. Even partial remnants of these resources may be sufficient to exert beneficial effects (Norris et al., 2008; Ungar, 2011). Similarly, sociological approaches to collective trauma describe processes of cultural repair, through which societies symbolically process traumatic events in order to restore social cohesion and interpretive continuity (Alexander, 2004).

Building on these perspectives, recent work by Ragandang (2026) conceptualizing resilience as a process of remembering emphasizes the temporal and processual dimensions of these dynamics, portraying resilience not as a stable capacity but as an ongoing reconstruction of meaning grounded in collective memory. Past adversities are actively reinterpreted to

address present challenges, while culturally embedded narratives are continuously re-enacted and transformed. In line with Cohen et al. (2010), even traumatic memories can serve as resources for meaning-making, identity reconstruction, and the transmission of values across generations.

Recent evidence suggests that transgenerational processes may involve the transmission of resilience-related resources in addition to the transmission of vulnerability. In a study examining three generations of families affected by World War II-related trauma, researchers identified patterns indicating that adaptive coping strategies, resilience-supporting family narratives, and constructive communication styles can persist across generations (Müller et al., 2026). Importantly, the authors found that descendants were not only influenced by unresolved traumatic experiences but also by familial processes that appeared to promote adaptation and resilience. While these findings do not demonstrate the biological inheritance of resilience, they provide empirical support for the notion that successful adaptive and integrative processes may generate enduring resources that extend beyond the individual. From the perspective of the present model, such findings are consistent with the hypothesis that integration-related gains can accumulate over time and contribute to a form of resilience memory operating across familial and cultural systems.

Building on these insights, the present concept of resilience memory frames a cumulative integrative reservoir that extends beyond meaning-making and may support coherence, regulatory reorganization, and adaptive reshaping of cognitive, emotional, and behavioral responses, whereby successful integration experiences enhance the handling of future adversities. Importantly, resilience memory is not limited to explicit historical knowledge. It may also be embedded in ritual practices, moral narratives, artistic traditions, and culturally transmitted ways of responding to adversity. In this way, resilience memory functions both as a record of past adaptation and as an active mechanism fostering ongoing and future resilience. This approach thus extends frameworks of cultural memory (Assmann,

2011) and community resilience (Norris et al., 2008; Ungar, 2011) toward a more explicitly processual, historically dynamic, and multidimensional account.

From this perspective, integrative capacities may not only develop within individuals but may also accumulate within cultural systems across time. Cultural narratives, rituals, and collective practices can support the transmission of symbolic frameworks that enable individuals of subsequent generations to interpret and integrate experiences of adversity. These dynamics suggest that integrative capacities may develop cumulatively within cultural systems, providing a foundation for understanding how processes of psychological organization may continue to evolve even under conditions of persistent adversity.

The Net Healing Gain Model

The theoretical considerations outlined above suggest that processes of psychological integration may unfold not only within individuals but are also shaped by cultural structures and resources. Building on these insights, the present paper proposes a conceptual framework describing how integrative capacities may gradually expand even under conditions of persistent adversity. This process is referred to as net healing gain under conditions of ongoing trauma.

In contrast to models that primarily conceptualize resilience as protection against the harmful effects of adversity, the present framework focuses on the developmental dynamics of integration itself. The central assumption is that processes of representation, symbolization, meaning-making, and regulation may continue to evolve even when adverse conditions remain present. Rather than requiring the complete removal of adversity as a prerequisite for psychological development, integration may emerge gradually through ongoing processes of interpretation, symbolic expression, and relational regulation.

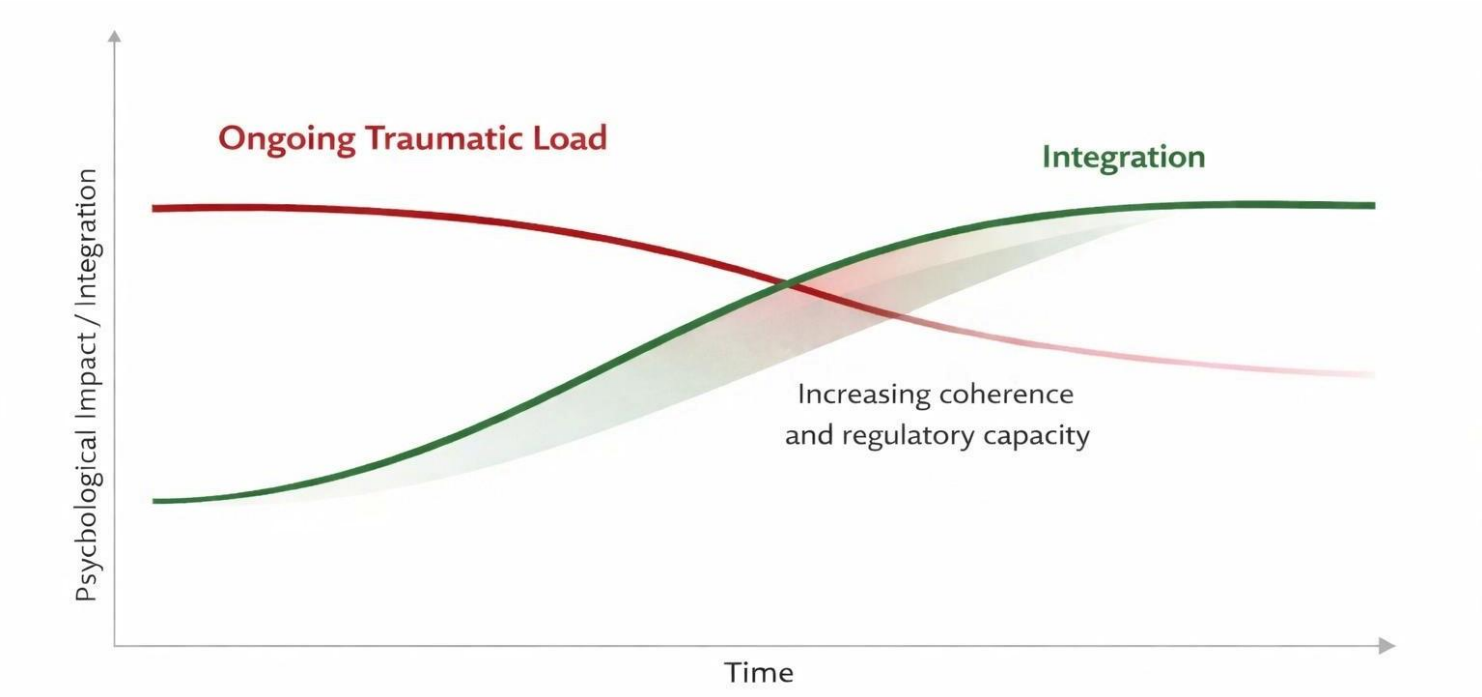

Figure 2
Conceptual illustration of integrative development under persistent adversity illustrating the dynamic relationship between ongoing traumatic load and increasing integrative capacity.

Within this framework, experiences of adversity initially enter an individual's awareness in the form of affective and sensory states. Through processes of representation and symbolization, these experiences may gradually become accessible to narrative, symbolic, or culturally mediated forms of expression. As experiences become increasingly symbolized, they may be organized within broader frameworks of meaning that connect personal experience with collective narratives and cultural interpretations. As illustrated in Figure 2, these integrative processes may gradually increase coherence and regulatory capacity, which

may in turn be associated with a gradual reduction of traumatic load itself, for example by decreasing the likelihood of repeated re-traumatization. At the same time, successful processes of integration may become embedded within shared narratives, rituals, and social practices, contributing to the accumulation of resilience memory within cultural systems.

From this perspective, resilience memory may function as a cumulative repository of prior integrative processes, shaping how subsequent experiences of adversity are integrated and regulated over time. Importantly, this dynamic introduces a feedback process between experience and processes of integration. As resilience memory accumulates over time, it may influence how subsequent experiences of adversity are represented, symbolized, and interpreted. In this way, cultural systems may gradually develop capacities that support integration and shape collective responses to adversity across generations.

This perspective allows for the possibility that, under certain conditions, processes of integration may expand over time even when adverse conditions persist. The concept of net healing gain therefore refers to a developmental trajectory in which integrative capacities increase despite ongoing exposure to adversity. Rather than implying the absence of suffering or distress, this concept describes situations in which psychological and cultural processes of organization gradually strengthen over time.

Such dynamics may be particularly visible in contexts of collective adversity, where cultural narratives, rituals, and community practices provide symbolic frameworks that support processes of meaning-making and emotional regulation. These structures can contribute to the preservation and transmission of integrative capacities across generations, allowing communities to maintain coherence even under conditions of prolonged stress.

Empirical Indications

Although the model proposed in this paper is primarily theoretical, several empirical observations from different research domains suggest that processes of psychological

organization and development may occur even under conditions of persistent adversity. These observations do not constitute direct empirical confirmation of the present framework. However, they indicate that the relationship between adversity and psychological development may be more complex than a strictly linear model of trauma-induced deterioration would imply.

One relevant body of research concerns longitudinal studies of children growing up under conditions of war and chronic stress. Several investigations, for example by Masten & Narayan (2012) have documented that developmental trajectories may continue despite ongoing exposure to severe adversity. Children exposed to armed conflict, displacement, and prolonged instability have in a substantial number of cases been shown to maintain developmental progress across multiple domains, even when external conditions remain highly challenging. Within developmental psychology, such findings are often interpreted within the framework of resilience research. Masten (2001), for example, has described resilience as the operation of "ordinary adaptive systems" that allow development to proceed despite exposure to significant adversity. From this perspective, protective relational, cognitive, and social systems may buffer individuals from the most severe developmental disruptions.

While resilience frameworks provide an important explanation for adaptive functioning and partly normal development under adversity, often referred to as "ordinary magic" (Masten, 2001), they do not necessarily specify the mechanisms through which experiences of adversity become symbolically organized and integrated into coherent systems of meaning. In other words, resilience research often describes the conditions under which development can continue, but less frequently addresses how processes of integration themselves may evolve under persistent adversity.

Research on cultural continuity within Indigenous communities provides important insights into this question. In a widely cited study, Chandler and Lalonde (1998) examined

youth suicide rates across Indigenous communities in British Columbia and found striking variation between communities exposed to broadly similar historical and socioeconomic conditions. Communities that maintained higher levels of cultural continuity—including self-governance, preservation of language, cultural institutions, and community-controlled education—showed dramatically lower suicide rates among youth. Chandler and Lalonde interpreted these findings as evidence that structures supporting continuity of collective identity help individuals sustain a coherent sense of self over time. While the underlying processes remain unspecified the model presented in this paper suggests that culturally embedded systems of meaning, narrative continuity, and institutional stability may function as resources that support integrative processes even within contexts marked by historical trauma and ongoing structural adversity.

While these findings do not directly demonstrate the proposed mechanisms, they are consistent with the assumption that stable structures of meaning and identity may support such processes. This, in turn, aligns with Chandler and Lalonde's observation that cultural continuity supports the maintenance of individual self-continuity, here understood as emerging from ongoing integrative processes.

A third relevant empirical phenomenon is the well-documented Immigrant Health Paradox. Numerous studies have shown that first-generation immigrants often display relatively favorable physical and mental health outcomes despite significant socioeconomic challenges, migration-related stressors, and exposure to social disadvantage. Interestingly, these advantages frequently decline in subsequent generations, a pattern commonly attributed to processes of acculturation and the erosion of social and cultural protective factors (Abraído-Lanza et al., 1999; Ferrara et al., 2024).

From the perspective proposed in this paper, this pattern may represent an inverse dynamic of the mechanisms described in the net healing gain model: Figure 3 illustrates this inverse dynamic. The accumulation of cultural coherence and integrative structures may

support psychological organization under adversity; their erosion may contribute to declining health trajectories across generations.

Furthermore, a growing body of research has begun to examine the effectiveness of trauma-focused interventions under conditions of ongoing adversity and incomplete safety. While most classical models of trauma processing implicitly assume that exposure to the stressor has ceased, emerging evidence suggests that therapeutic change may nevertheless occur even when external threat, instability, or chronic stressors persist.

For instance, a randomized controlled trial by Neuner et al. (2004) demonstrated that Narrative Exposure Therapy (NET) led to significant reductions in posttraumatic stress symptoms among refugees living in unstable conditions, where exposure to stressors had not fully ceased. Participants showed clinically meaningful improvements despite ongoing insecurity, suggesting that therapeutic integration processes can occur even when external safety remains limited.

More recent findings from group-based EMDR interventions in displaced populations further support this perspective, indicating that clinically meaningful improvements can be achieved under conditions of ongoing adversity and instability (Acarturk et al., 2021). Importantly, these findings emerge from contexts characterized by persistent stressors and incomplete stabilization of external conditions.

The mechanisms underlying such effects remain a subject of ongoing investigation. Proposed processes include enhanced emotional processing, the reorganization of traumatic memory networks, and the integration of previously fragmented experiences into more coherent autobiographical representations. In addition, the therapeutic context itself may provide localized and temporally bounded experiences of safety, which appear sufficient to enable incremental integration and regulation even when broader environmental safety is not established.

Taken together, these findings suggest that therapeutic integration does not strictly depend on the complete cessation of threat, but may occur under conditions in which adversity persists. From the perspective of the present framework, such findings may reflect micro-processes of integration that unfold under constrained conditions and, if repeated over time, may accumulate and contribute to what is conceptualized here as a net healing gain.

From the perspective of the present framework, these findings can be interpreted as indirect support for the possibility that integrative processes may unfold under conditions of ongoing stress. Rather than requiring the complete cessation of threat, therapeutic change may depend on the persistence of minimal coherence and regulatory capacity, which can serve as a foundation for further reorganization. Repeated instances of such integration may, over time, accumulate and contribute to what is conceptualized here as a net healing gain.

Taken together, these empirical observations suggest that processes of development, integration, and psychological organization may continue to evolve even in contexts where adversity persists. While these findings arise from distinct research traditions and address different phenomena, they converge in indicating that adaptive processes may unfold through mechanisms that involve symbolic organization, cultural meaning-making, and the maintenance of coherent interpretive frameworks over time.

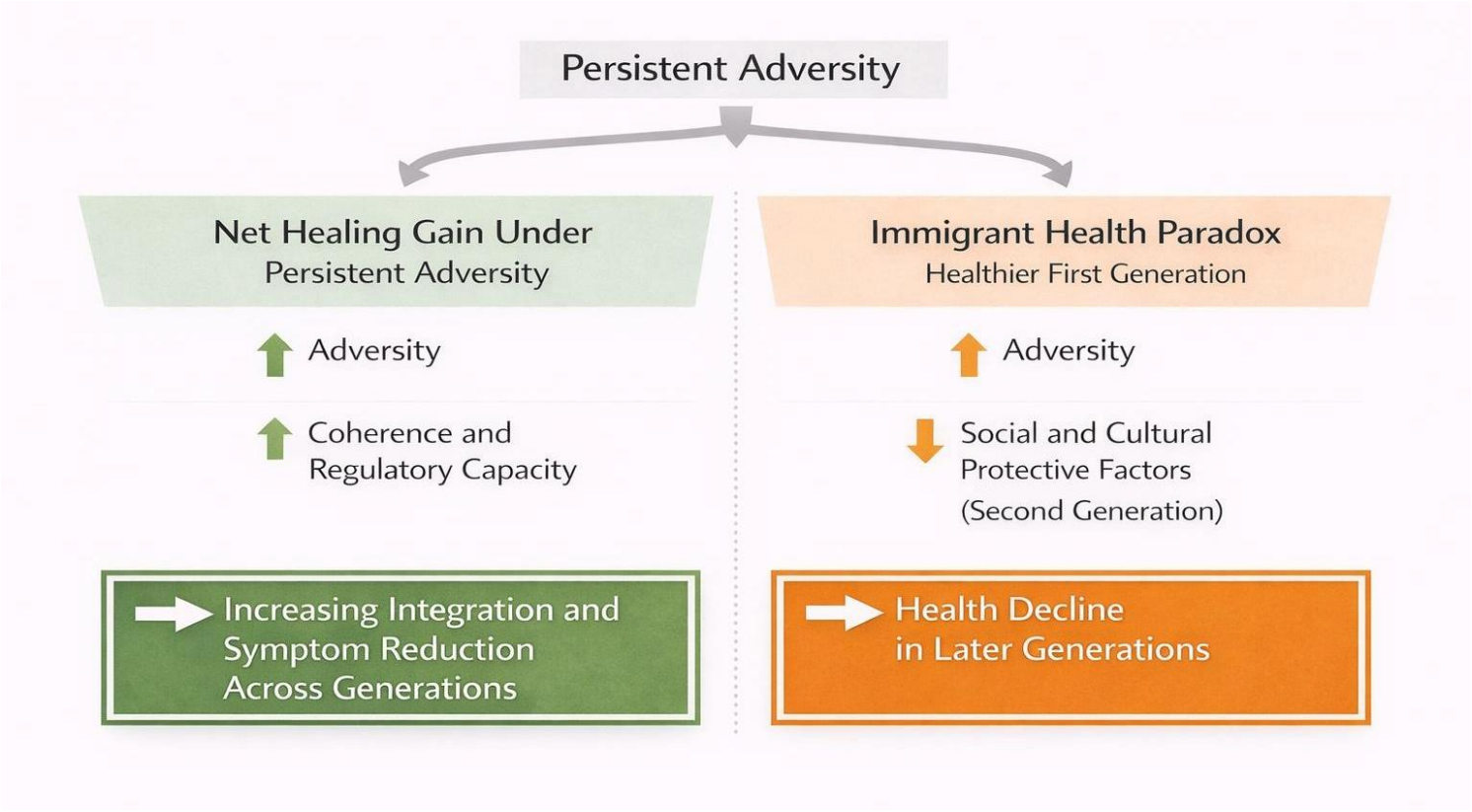

Figure 3
Conceptual comparison of net healing gain under persistent adversity and the immigrant health paradox across generations.

Implications for Trauma Theory and Clinical Practice

The present model has several implications for both trauma theory and clinical practice. Contemporary trauma frameworks have largely emphasized the necessity of establishing safety as a prerequisite for integration. While this perspective is well supported by empirical findings on the detrimental effects of chronic stress, it may not fully account for the conditions under which many individuals and communities actually live. In contexts characterized by persistent adversity, complete stabilization is often not achievable in the short term.

The model proposed here suggests that processes of integration may not be entirely contingent on the prior removal of adverse conditions. Instead, integrative processes may unfold gradually within ongoing contexts of adversity through mechanisms of representation, symbolization, meaning-making, and regulation. This perspective shifts the focus from the

dichotomy of safety versus pathology toward a more process-oriented understanding of how psychological organization may evolve under non-ideal conditions.

From a theoretical perspective, the model contributes to existing research by specifying a cumulative mechanism of integration. While resilience frameworks have identified protective factors and adaptive outcomes, they have often left the underlying mechanisms of transformation insufficiently defined. The present framework addresses this gap by conceptualizing integration as an accumulating process through which coherence and regulatory organization increase over time. Importantly, these processes are understood as shaping not only current functioning but also future responses to adversity.

From a clinical perspective, this framework suggests that therapeutic work may benefit from focusing not only on the reduction of external stressors but also on the facilitation of integrative processes within ongoing conditions of adversity. Symbolic expression, meaning-making, relational regulation, and culturally embedded practices may support the gradual development of coherence even when external circumstances remain unstable.

This perspective may be particularly relevant in clinical contexts in which patients continue to face adverse conditions, such as in addiction treatment, migration-related stress, or chronic social marginalization. In such cases, behaviors that appear maladaptive may, in part, reflect attempts at self-organization or regulation. Recognizing these processes may allow clinicians to adopt a stance that supports emerging integration rather than focusing exclusively on symptom reduction.

At the same time, the model does not imply that adversity is beneficial or that exposure to trauma promotes development. Rather, it highlights the possibility that integrative processes may continue to evolve despite ongoing adversity under certain conditions. Several limitations of the present framework should be acknowledged. The model is theoretical and does not yet constitute a direct empirical account of the mechanisms

described. While several empirical phenomena are consistent with its assumptions, systematic empirical validation is required. Future research may focus on operationalizing key constructs such as resilience memory, coherence, and regulatory reorganization, and on examining their development over time in contexts of ongoing adversity. In addition, the present framework does not yet fully specify the boundary conditions under which integrative processes are more or less likely to unfold under conditions of ongoing adversity.

Conclusion

This paper proposed a process-oriented model of integration under conditions of ongoing trauma, suggesting that integrative capacities may develop even when adverse conditions persist. Central to this framework is the idea that repeated integrative processes may cumulatively shape coherence, regulation, and the handling of future adversity. In this context, resilience memory describes the accumulation of such integrative experiences across time.

While the model remains theoretical, it provides a foundation for future empirical research and contributes to a more differentiated understanding of how psychological and cultural organization may evolve under conditions of persistent adversity. Rather than challenging the centrality of safety, the present framework seeks to extend existing trauma theory by specifying conditions under which integrative processes may still unfold when safety cannot be fully established.

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