



**TRACING THE IMPACT:
A BIBLIOMETRIC ANALYSIS OF HISTORICAL TRAUMA
IN SOCIAL WORK RESEARCH**

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Abstract

In social work research, historical trauma is becoming a major focus of study addressing the intergenerational repercussions of oppression, systematic inequality, and community-wide suffering among underprivileged groups. Using data from the Web of Science Core Collection, this paper does a bibliometric analysis to investigate the evolution and research patterns associated with historical trauma in social work. Using VOSviewer, 424 records in all were examined with an eye toward co-occurrence trends of terms. From an initial 1,612 keywords, 122 satisfied the minimum occurrence requirement of five, and clusters were found depending on a minimum cluster size of 15. The results draw attention to important areas of research including trauma passed down throughout generations, indigenous cultures, mental health inequities, and treatment approaches. The study also exposes developing themes, significant works, and citation patterns, therefore providing insightful analysis of the intellectual framework of social work-based historical trauma research. By mapping scholarly debate, pointing up gaps, and offering recommendations for future trauma-informed social work practice research approaches, this study advances the field.

Keywords: *historical trauma, social work research, bibliometric analysis, VOSviewer, intergenerational trauma, intervention strategies, systemic inequalities.*

Introduction

Offering a prism through which academics and practitioners examine the long-term and intergenerational effects of systematic oppression, colonization, and social injustices on underprivileged communities, historical trauma has become a critical conceptual framework in social work research (Heart, Chase, Elkins, & Altschul, 2011; Nagata, Kim, & Gone, 2024; Walters, Mohammed, Evans-Campbell, et al., 2011). Originally used to characterize the long-lasting psychological and social effects of colonization, forced assimilation, and cultural genocide, the term historical trauma first applied to Indigenous populations in North America (EVans-Campbell, 2008). This idea has evolved over time to include African Americans, Holocaust survivors, Native Hawaiians, and other communities that have endured collective suffering across generations (Fast & Collin-Vézina, 2019; Montgomery, 2019; Riley, Suesue, Hulama, Neumann, & Chung-Do, 2022). Social work, psychology, public health, and policy-making (Henderson, Stephens, Ortega-Williams, & Walton, 2021; Rosenwald, Baird, & Williams, 2023) among other fields have found increasing importance in the acknowledgement of historical trauma as a driver of social and health inequalities.

Long after the first horrific events have passed, historical trauma is defined by its cumulative effects on individuals, families, and whole communities (Mohatt, Thompson, Thai, & Tebes, 2014; Nagata et al., 2024). Research shows that historical trauma shows not only in psychological pain and emotional suffering but also in physiological and social effects leading to ongoing inequality (Rogers-LaVanne, Bader, de Flamingh, et al., 2023). Disrupted family dynamics, socio-economic deprivation, systematic discrimination, and biological mechanisms including epigenetic changes (Borell, Barnes, & McCreanor, 2018; Waite & Nardi, 2021) are among the several routes this transmission passes via. Trauma, for example, has been demonstrated to change stress response systems, hence increasing sensitivity to post-traumatic stress disorder (PTSD), depression, and substance abuse (Wiechelt, Gryczinski, Johnson, & Caldwell, 2012; Stern & Hulko, 2016).

With increasing emphasis to its junction with mental health inequalities, resilience techniques, and social work interventions (Sevillano, Wood, & Franklin, 2022), scholarly debate on historical trauma has changed drastically. Research emphasizes the part communal healing techniques, cultural identity, and collective memory play in both the continuation and lessening of trauma (Burnette & Figley, 2017; Orozco-Figueroa, 2021). Scholars have recorded how past trauma shapes modern social systems, therefore influencing access to healthcare, educational attainment, career possibilities, and general well-being (Billiot & Beltrán, 2023; Jones,

Mountz, & Trant, 2020). Moreover, a growing field of research investigates the function of epigenetics in determining how trauma is physiologically passed on throughout generations, so offering empirical evidence for the continuation of its consequences past direct lived events (Rogers-LaVanne et al., 2023).

Linking historical trauma to social justice frameworks, trauma-informed treatment, and policy formulation has helped social work research to significantly advance the study of this trauma-induced condition (Androff, 2022; Masotti, Dennem, Hadani, et al., 2020). Historical trauma is often studied in this field in relation to differences in mental health outcomes, drug use disorders, and institutionalized barriers to social service access (Bowen & Walton, 2015; Munyoro & Mavhungu, 2022). Especially in Indigenous communities where colonial violence and forced assimilation policies have upended traditional family structures and coping mechanisms; a particularly important area of research looks at the junction between historical trauma and intimate partner violence (IPV). Emphasizing the requirement of culturally competent social work interventions that recognize historical context and community agency, further research look at the effects of historical trauma on social cohesiveness, community resilience, and cultural continuity (Borell et al., 2018; Hong, 2023).

Though studies on historical trauma abound, comprehensive analysis of its scholarly path, thematic evolution, and research influence is still much needed. In social work, a bibliometric analysis of historical trauma research offers a means to map the intellectual terrain of the profession, pinpoint important research areas, and emphasize seminal publications (Mohatt et al., 2014; Montgomery, 2019). This paper advances knowledge of how historical trauma is conceived and used in social work by analyzing citation patterns, keyword co-occurrences, and developing themes. This work provides insights into the intellectual structure of historical trauma research, evaluates its development throughout time, and recommends directions for next study by means of a bibliometric approach.

A thorough literature overview covering fundamental ideas, empirical results, and methodological advances influencing the area is presented in the following sections. The section on the methodology describes the bibliometric technique applied to examine the research terrain and then goes into great length regarding the main conclusions. This paper ends with comments on the ramifications of these results for social work practice, policy formation, and next research paths.

Literature review

Historical trauma research has developed into a multidisciplinary area including social work, psychology, public health, and Indigenous studies (Evans-Campbell, 2008; Fast & Collin-Vézina, 2019). Scholars and practitioners in many fields understand that historical trauma is an ongoing, embodied experience that still shapes the social, psychological, and physiological well-being of societies now rather than only a record of past injustices (Heart, Chase, Myers, et al., 2020). This corpus of research emphasizes the cumulative effect of trauma across generations, therefore influencing mental health outcomes, social cohesiveness, and resilience mechanisms (Mohatt, Thompson, Thai, & Tebes, 2014; Rogers-LaVanne, Bader, de Flamingh, et al., 2023). The literature on historical trauma can be arranged into several main themes: its conceptualization, its psychological and social expressions, the part structural inequalities play in aggravating its effects, and the resilience strategies communities create to offset its effects. Research on Indigenous people in North America, especially studies looking at the long-lasting consequences of colonization, forced displacement, and cultural suppression among Native American and Alaska Native communities, first brought the idea of historical trauma front and center (Walters, Mohammed, Evans-Campbell, et al., 2011). Academics define historical trauma as the whole psychological and emotional damage groups endure from systematic oppression, genocide, and protracted sociopolitical violence (Montgomery, 2019; Mohatt et al., 2014). Unlike personal trauma, this idea is shared generally and passed on through family, cultural, and social systems (Heart et al., 2011).

Mohatt et al. (2014) expand on this point of view by seeing historical trauma as a public narrative—a socially created reality that shapes social behavior, coping strategies, and collective identity—that shapes this perspective holds that historical trauma is ingrained in structural inequities, systematic discrimination, and cultural memory of past injustices rather than existing only as a human psychological burden (Sevillano, Wood, & Franklin, 2022). This knowledge emphasizes the importance of trauma-informed policies and social work treatments addressing both the psychological and structural elements of historical trauma (Androff, 2022; Henderson, Stephens, Ortega-Williams, & Walton, 2021).

Originally developed to explain the experiences of Indigenous people, the idea of historical trauma has been extended to include other historically oppressed groups including African Americans, Holocaust survivors, Native Hawaiians, and other marginalized communities impacted by colonialism, forced migration, and racial discrimination (Fast & Collin-Vézina, 2019; Riley, Suesue, Hulama, Neumann, & Chung-Do, 2022). This more general use

emphasizes that historical trauma is not limited to any one ethnic or geographical group but rather is a worldwide problem impacting many groups (Montgomery, 2019; Qureshi, Misra, & Poshni, 2023).

With studies showing strong links between historical trauma and post-traumatic stress disorder (PTSD), depression, substance abuse, and other psychological disorders (Wiechelt, Gryczynski, Johnson, & Caldwell, 2012; Stern & Hulko, 2016), one of the most thoroughly researched facets of historical trauma is its effects on mental health. Studies have shown that historically traumatized groups have more mental health problems, usually aggravated by systematic obstacles to healthcare access and treatment differences (Waite & Nardi, 2021).

Particularly within the prism of epigenetics, an increasing corpus of research looks at the molecular processes behind historical trauma. Trauma exposure has been linked, according to research, to alterations in gene expression that might then be inherited by next generations and increase their vulnerability to stress-related diseases (Borell, Barnes, & McCreanor, 2018; Rogers-LaVanne et al., 2023). These results corroborate empirically the theory that the consequences of historical trauma are not only social but also may have physiological roots that sustain intergenerational cycles of mental health differences.

Past individual mental health, historical trauma has significant social consequences. It undercuts social cohesiveness, disturbs family systems, and fuels mistrust of government agencies, healthcare providers, and social services (Billiot, Beltrán, Brown, Mitchell, & Fernandez, 2019; Henderson, Acquaye-Doyle, Waites, & Howard, 2016). Historical trauma has been connected in Indigenous and African American communities, for example, to cycles of poverty, incarceration, and limited educational and economic possibilities (Jones, Mountz, & Trant, 2020; Smith-Woods & Diggs, 2024). The collapse of family units and conventional support systems brought on by colonization, slavery, and systematic racism aggravates these problems even more and makes it challenging for impacted populations to free themselves from the continuous effects of historical trauma (Ortega-Williams, Beltrán, Schultz, & others, 2021). Another important expression of historical trauma is its junction with communal violence and intimate partner violence (IPV). Burnette (2015) emphasizes the need of trauma-informed treatments that take historical and cultural settings of survivors' experiences into account as she investigates how past persecution has led to high incidence of IPV among Indigenous women. In 2020 Hamby, Schultz, and Elm also present the idea of poly-victimization, showing how historical trauma raises the possibility of suffering several kinds of violence and victimization across one's lifespan.

Extensive historical trauma and its consequences are sustained and exacerbated in great part by structural inequities. Discriminatory policies, systematic racism, and social exclusion now support the same oppressive trends that first generated historical trauma (Lee & Johnstone, 2022; Waite & Nardi, 2021). Scholars contend that historical trauma should be addressed as a more general public health and social justice issue needing systematic treatments rather than only as a psychological one (Androff, 2022; Bowen & Walton, 2015).

Still one of the most obvious signs of historical trauma are healthcare inequalities. Often resulting from historical trauma-related mistrust in medical institutions, research has revealed that historically underprivileged groups have greater rates of chronic diseases, mental health issues, and poor access to healthcare services (Masotti, Dennem, Hadani, et al., 2020). Studies have connected, for example, the historical trauma of slavery and segregation in the United States to current racial differences in mother mortality, baby health, and chronic disease prevalence (Beltrán & Schultz, 2018).

Still another sector profoundly impacted by past trauma is education. Indigenous trauma is sometimes neglected in social work education, according to Mishna, Middleton-Moz, Martell, Williams, and Zuberi (2023), which leaves professionals unprepared to meet the needs of historically traumatized groups. Fostering trauma-informed, culturally competent practice thus depends on expanding historical trauma education in social work courses (Henderson et al., 2016). Though historical trauma is a widespread occurrence, studies also show the resiliency and coping mechanisms created by impacted populations. Studies reveal that minimizing the impacts of historical trauma depends critically on cultural identity, storytelling, community solidarity, and traditional healing practices (Burnette & Figley, 2017; Fast & Collin-Vézina, 2019).

Healing projects created by indigenous people have especially helped with historical trauma. Riley et al. (2022) look at Native Hawaiian young people's experiences and stress the need of culturally grounded treatments including traditional knowledge, spiritual practices, and land-based healing that combine with Likewise, Evans-Campbell (2008) supports a multilevel model including community-based, family, and personal healing strategies.

Effective means for tackling historical trauma at the societal level have also been shown to include community-driven projects including participatory research and truth and reconciliation commissions (Androff, 2022; Billiot & Beltrán, 2023). These strategies stress empowerment, group healing, and legislative changes meant to solve structural causes of historical trauma.

Methodology

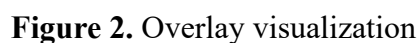
This report examines the growth and impact of historical trauma research in social work through bibliometric analysis. Bibliometric techniques provide a systematic method for charting research trends, identifying notable papers, and examining subject structures within a specific academic discipline. This paper offers a thorough picture of how historical trauma has been conceived and handled in social work research by means of analysis of citation patterns, keyword co-occurrence, and research clusters.

This study's data came from the well-known and reputable Web of Science Core Collection, an academic literature collection available online. The search term was "historical trauma" AND social work, therefore guaranteeing that only articles clearly addressing historical trauma in the framework of social work were included. 324 entries in all—journal articles, conference proceedings, review papers written in many fields connected to social work—were found.

The search included papers from many sources inside the Web of Science Core Collection to guarantee a strong dataset. To enable bibliometric study, the complete dataset was downloaded and normalized. Later analysis revealed prominent research subjects and new trends by means of data extraction concentrated on important bibliographic elements including authors, publication year, journal titles, citation counts, and keywords. Thematic structure of historical trauma research in social work was mapped using a bibliometric approach. VOSviewer, a generally used tool for visualizing bibliometric networks, was employed for the investigation. Among the gathered records, this tool helped much discover trends in keyword co-occurrence, study clusters, and citation linkages.

Co-occurrence analysis—which looks at the frequency with which terms appear together inside the same publication—was one of the fundamental bibliometric methods applied. Originally examined was the complete set of 1,612 keywords from the dataset; 122 of them satisfied the minimum occurrence criterion of five. This criterion guaranteed analytical depth by ensuring that only the most important and repeated terms in historical trauma research were taken into account, therefore lowering noise. VOSviewer's minimum cluster size of 15 was used in order to further hone the study. This phase helped to expose important research themes including intergenerational trauma, Indigenous resilience, social work interventions, and mental health inequalities, thereby facilitating the identification of main thematic groups inside historical trauma studies. By means of in-depth investigation of keyword associations made possible by the network visualization produced by VOSviewer, new subfields and multidisciplinary links could be found.

A bibliometric analysis of 324 records from the Web of Science Core Collection identifies notable patterns in historical trauma research in social work. A study of 1,612 keywords revealed 122 that surpassed the minimal occurrence threshold of five, creating several thematic clusters indicative of principal research domains. The network visualization produced by VOSviewer emphasizes historical trauma, intergenerational transmission, mental health disparities, Indigenous resilience, and intervention strategies as the principal topics in this domain (Figure 1 and Figure 2).



The bibliometric study revealed four predominant research clusters in historical trauma research within social work, illustrating the principal thematic trends and intellectual advancements in the discipline. These clusters—intergenerational trauma transmission, Indigenous community resilience, mental health inequities, and social work intervention strategies—offer a comprehensive overview of the research environment. The analysis emphasizes current scholarship while also uncovering new avenues, theoretical progress, and interdisciplinary connections that influence the discourse on historical trauma in social work practice, policy, and education.

Intergenerational transmission of trauma

The primary cluster in historical trauma within social work centers on intergenerational transmission, a notion that elucidates the transfer of trauma across generations via psychological, social, and biological factors. Walters, Mohammed, Evans-Campbell, et al. (2011) contend that historical trauma transcends individual experiences, manifesting at the community level and influencing collective identity and intergenerational mental health effects. Their research highlights that trauma is conveyed through familial frameworks, cultural narratives, and socio-economic inequalities, perpetuating cycles of marginalization.

Mohatt, Thompson, Thai, and Tebes (2014) advance this viewpoint by presenting historical trauma as a public narrative—a socially produced reality that affects health behaviors, social relationships, and patterns of resilience (Marici, 2015; Marici et al., 2023). They assert that intergenerational trauma functions not just through direct personal experiences but also via structural disparities, legislative decisions, and communal memory, influencing community responses to stress and adversity. This viewpoint is corroborated by Montgomery (2019), who analyzes the spatial aspects of historical trauma, demonstrating how forced removals and land dispossession among Indigenous groups lead to enduring psychological suffering and community disempowerment.

A notable advancement in this domain is the biological transmission of trauma via epigenetic alterations. Rogers-LaVanne et al. (2023) examine gene methylation in Alaska Native tribes, discovering that community-level trauma experience may modify biological responses in future generations. This discovery corresponds with extensive studies in neuroscience and public health, indicating that historical trauma imprints molecular markers that affect stress regulation, immunological function, and mental health susceptibilities (Fast & Collin-Vézina, 2019).

The influence of forced migration and displacement on intergenerational trauma is an emerging issue (Saghin et al., 2016; Marici & Runcan, 2023). Qureshi, Misra, and Poshni (2023) examine the Partition of India from the perspective of historical trauma, illustrating the intergenerational transmission of refugee trauma, war exposure, and colonial brutality via psychological anguish, cultural dislocation, and health disparities. Orozco-Figueroa (2021) analyzes Mexican American families, demonstrating how narratives of historical oppression, familial storytelling, and cultural identity perpetuate both pain and resilience tactics throughout generations.

This research highlights the intricate and multifaceted characteristics of intergenerational trauma, indicating that it cannot be resolved solely through individual interventions but necessitates systemic, community-oriented, and policy-driven approaches that take into account the biopsychosocial and historical aspects of trauma transmission.

Indigenous communities and resilience

The second cluster examines historical trauma within Indigenous communities, emphasizing resilience, cultural healing, and community-led treatments. This cluster indicates a transition in the literature from deficit-oriented theories of trauma to strength-based paradigms that emphasize Indigenous knowledge systems, traditional healing methodologies, and cultural continuity as essential elements in alleviating the impacts of trauma.

Montgomery (2019) examines how land dispossession, settler colonialism, and enforced assimilation policies have interrupted Indigenous cultural continuity, resulting in profound pain within Native American communities. Fast and Collin-Vézina (2019) emphasize the protective function of cultural identity, asserting that community cohesion, language preservation, and traditional healing practices operate as resilience elements against the persistent effects of historical trauma. Their findings correspond with Burnette and Figley (2017), who advocate for a comprehensive resilience paradigm, highlighting that spirituality, kinship networks, and Indigenous perspectives are fundamental to trauma healing.

A prominent theme in this cluster is the significance of community-driven healing methodologies. Riley, Suesue, Hulama, Neumann, and Chung-Do (2022) investigate the experiences of Native Hawaiian youth about historical trauma, promoting culturally attuned social work solutions that prioritize Indigenous leadership and self-determination. Evans-Campbell (2008) presents a multilevel framework for Indigenous trauma therapies, asserting that healing must transpire concurrently at the individual, familial, and community levels.

The convergence of historical trauma and modern violence is another significant issue. Burnette (2015) examines the impact of colonial oppression and institutional violence on elevated incidence of intimate partner violence (IPV) among Indigenous women, proposing that social work interventions should recognize historical trauma as a contributing component in domestic violence cases. Hamby, Schultz, and Elm (2020) present the notion of poly-victimization, illustrating how historical trauma exacerbates experiences of violence, victimization, and structural marginalization within Indigenous communities.

This research cluster underscores the significance of Indigenous-led, culturally rooted methodologies for trauma recovery, asserting that historical trauma cannot be effectively addressed solely through Western clinical paradigms but necessitates community-driven solutions that emphasize cultural revitalization, storytelling, and self-determination.

Mental health disparities

The thirs cluster examines the convergence of historical trauma and mental health disparities, specifically the influence of systemic racism, generational trauma, and structural inequality on mental health outcomes. This research emphasizes that historical trauma constitutes not merely a psychological concern but a public health crisis that disproportionately impacts underprivileged communities.

Wiechelt, Gryczynski, Johnson, and Caldwell (2012) establish a robust correlation between historical trauma and substance use problems, especially within urban American Indian communities. Stern and Hulko (2016) elucidate that historical trauma exacerbates PTSD, sadness, and cognitive deterioration in elderly populations. Waite and Nardi (2021) conceptualize racism as a manifestation of historical trauma, contending that the healthcare system serves as a locus for the perpetuation of intergenerational trauma. Their findings correspond with Jones, Mountz, and Trant (2020), who advocate for a Black feminist perspective in social work treatments, underscoring the necessity for trauma-informed mental health care to include racial justice frameworks.

This cluster signifies an expanding convergence between historical trauma research and public health, underscoring the necessity for systemic interventions that transcend individual therapy to tackle social determinants of health, policy reform, and community-driven mental health initiatives.

Intervention strategies in social work

The fourth cluster is on social work interventions addressing historical trauma, highlighting trauma-informed practices, culturally responsive care, and systemic policy reforms.

Burnette (2015) examines the relationship between historical oppression and intimate partner violence (IPV), emphasizing the necessity for historically informed responses in domestic violence situations. Maschi, Viola, and Morgen (2014) promote trauma-informed social work inside prison systems, highlighting that numerous incarcerated individuals have endured past trauma that affects their coping strategies and behavioral results.

Henderson, Acquaye-Doyle, Waites, and Howard (2016) examine the impact of mistrust stemming from historical trauma on participation in social services, proposing that social work courses should incorporate trauma history to promote ethical and culturally competent practice. Riley et al. (2022) similarly underscore the efficacy of Indigenous-led healing initiatives, emphasizing the significance of community-driven, culturally pertinent approaches.

These four clusters offer an extensive overview of historical trauma research in social work, emphasizing both established and nascent research trajectories. The findings underscore the necessity for interdisciplinary collaboration, culturally attuned therapies, and systemic reforms to tackle the intricate, multigenerational effects of historical trauma.

The bibliometric examination of historical trauma research in social work offers essential insights into the progression of academic discourse, citation patterns, and research influence throughout time. This section analyzes citation counts, average publication year, and normalized citation scores to delineate the intellectual trajectory of historical trauma research, pinpointing significant turning moments, developing topics, and pivotal publications.

The dataset reveals a consistent growth in articles regarding historical trauma in social work, especially post-2015, with a significant surge in citations from 2018 to 2022. This trend indicates an increasing scholarly and policy interest in the long-term impacts of trauma, especially with mental health inequalities, Indigenous resilience, and the transmission of intergenerational trauma.

The mean publication year of highly referenced publications is 2019.8, showing that historical trauma has emerged as a significant area of research in recent years. The predominant keywords, including “historical trauma” (196 occurrences), “indigenous peoples” (23 occurrences), “intervention” (12 occurrences), and “mental health” (21 occurrences), signify essential topics in the literature. The rising citations since 2020 indicate that historical trauma

research is transitioning from theoretical discourse to practical implementations in social work interventions, policy frameworks, and community-based healing strategies.

Numerous research are distinguished by their elevated citation frequencies and impact on the development of the discipline. Mohatt, Thompson, Thai, and Tebes (2014) have received 69 citations for their research on historical trauma as a public narrative, a conceptual framework that investigates the impact of history on contemporary health and social situations. Their research has been crucial in conceptualizing historical trauma as a collective memory and cultural transmission process, rather than only an individual psychiatric occurrence.

Evans-Campbell (2008), cited 63 times, formulated a multilevel model of historical trauma, highlighting treatments at the individual, familial, and communal levels among Native American and Alaska Native populations. Walters, Mohammed, and Evans-Campbell (2011) enhanced the discourse with 58 citations by adding the concept of the embodiment of historical trauma, correlating trauma exposure with physical health consequences and stress reactions.

Fast and Collin-Vézina (2019), cited 40 times, conducted an extensive literature analysis on Indigenous resilience, promoting culturally pertinent therapies that integrate protective elements such as cultural identity, storytelling, and land-based healing practices. Wiechelt, Gryczynski, Johnson, and Caldwell (2012) demonstrated a significant association between historical trauma and substance misuse, especially within urban American Indian communities, garnering 39 citations. Their research emphasizes the necessity of trauma-informed methodologies in addiction rehabilitation within social work practice.

These significant studies highlight the many aspects of historical trauma, encompassing mental health, substance misuse, cultural resilience, and intervention efforts, and offer essential insights that influence ongoing study.

The thematic analysis of citation trends identifies three key phases of evolution in historical trauma research in social work. The initial phase (Pre-2010) was characterized by conceptual underpinnings and theoretical frameworks. Researchers concentrated on delineating historical trauma, constructing frameworks, and analyzing the intergenerational manifestations of trauma. Evans-Campbell (2008), Walters et al. (2011), and Mohatt et al. (2014) made significant contributions that established the foundations for theories of intergenerational trauma, embodiment perspectives, and the community-level effects of trauma.

The second phase (2010–2018) experienced a proliferation of empirical research, as scholars commenced the validation of historical trauma impacts through qualitative and quantitative investigations. This time concentrated on mental health disparities, post-traumatic stress

disorder, and resilience techniques. Studies by Wiechelt et al. (2012), Fast & Collin-Vézina (2019), and Burnette & Figley (2017) have made substantial contributions to the research on substance misuse, protective factors, and culturally relevant therapies.

The third phase (2018–Present) signifies a transition towards practical research and the integration of policy. Recent studies underscore the pragmatic applicability of historical trauma research in social work, public health, and community-based treatments. Rogers-LaVanne et al. (2023) investigate epigenetics by analyzing gene methylation patterns linked to trauma in Indigenous populations, whereas Qureshi et al. (2023) broaden the focus of historical trauma research to include refugee populations. Riley et al. (2022) examine Indigenous-led healing initiatives, indicating a transition towards decolonized, community-oriented social work methodologies.

The citation network analysis underscores various developing research issues that have acquired significance in recent years. A notable advancement is the increasing convergence of historical trauma and epigenetics. Rogers-LaVanne et al. (2023) present biological evidence of trauma transmission, indicating that genetic markers may convey the impacts of stress across generations. This research establishes new multidisciplinary avenues, linking social work, genetics, and neuroscience to comprehend the enduring effects of historical trauma.

The convergence of historical trauma with racism, gender, and systemic violence is an emerging field of study. Researchers include Jones, Mountz, and Trant (2020) promote a Black feminist perspective in social work interventions, highlighting the inseparability of past trauma from systematic oppression and current racial disparities. Waite and Nardi (2021) characterize racism as a manifestation of historical trauma, emphasizing how healthcare and social services replicate generational disparities that sustain cycles of trauma.

Moreover, there is an increasing interest in community-driven initiatives and decolonization efforts within the area. Riley et al. (2022) advocate for Indigenous-led trauma healing models, emphasizing that Western treatment methodologies are inadequate for treating historical trauma. This corresponds with Henderson, Acquaye-Doyle, Waites, and Howard (2016), who promote the inclusion of historical trauma education in social work training, so guaranteeing that practitioners possess culturally competent and historically informed intervention strategies (Vişcu & Marici, 2024).

The citation and evolution study verifies that historical trauma research in social work has shifted from theoretical frameworks to empirical investigations and practical solutions. The area has expanded considerably over the last ten years, indicating a broader acknowledgment

of historical trauma as a systemic concern necessitating interdisciplinary, policy-oriented, and community-focused remedies.

Discussions

This bibliometric analysis uncovers significant insights regarding the evolution, themes, and implications of historical trauma research within social work. This study enhances comprehension of the conceptualization, examination, and application of historical trauma in social work research by mapping the academic landscape, identifying significant research clusters, and examining citation patterns. The discussion section examines these findings within the framework of existing literature, underscores the theoretical and practical ramifications, and delineates prospective areas for further research.

The understanding of historical trauma as a social and intergenerational occurrence has markedly progressed throughout time. The foundational works of Walters, Mohammed, and Evans-Campbell (2011) and Mohatt, Thompson, Thai, and Tebes (2014) elucidated historical trauma as a psychosocial and structural phenomenon, highlighting the impact of colonial violence, forced displacement, and systemic oppression on current health and social outcomes. Recent research has broadened this perspective by integrating epigenetics, cultural resilience, and intersectionality, illustrating that historical trauma functions on various levels—biological, psychological, and sociopolitical (Rogers-LaVanne et al., 2023; Fast & Collin-Vézina, 2019). A significant theoretical advancement in historical trauma research within social work is the amalgamation of public health and social determinants of health frameworks. Researchers such Waite and Nardi (2021) and Bowen and Walton (2015) contend that racism, systemic inequality, and historical injustices should be recognized as trauma-inducing factors that exacerbate enduring mental health disparities and socio-economic disadvantage. This corresponds with the research of Jones, Mountz, and Trant (2020), who promote a Black feminist perspective in social work interventions, asserting that historical trauma cannot be resolved without deconstructing current systems of racial and gender oppression.

The research emphasizes the significance of community-oriented, culturally rooted healing methods in trauma recovery. Riley et al. (2022) and Burnette and Figley (2017) underscore the significance of traditional healing methods, Indigenous knowledge, and group storytelling as protective factors that alleviate the enduring consequences of trauma. These viewpoints contest Western, individual-focused paradigms of mental health care, promoting decolonized and community-driven methodologies that reinstate cultural identity and autonomy.

The results underscore several practical consequences for social work interventions, policy formulation, and professional education. The extensive influence of historical trauma on mental health, substance misuse, and social inequalities demands trauma-informed social work techniques that acknowledge the profound nature of collective trauma. Numerous research (Wiechelt et al., 2012; Stern & Hulko, 2016) indicate that historical trauma significantly contributes to the likelihood of PTSD, depression, and substance use disorders, especially within urban American Indian and Alaska Native populations.

This research underscores the imperative for culturally competent interventions. Riley et al. (2022) and Evans-Campbell (2008) promote culturally responsive mental health interventions that incorporate Indigenous knowledge, land-based healing, and spiritual practices into therapeutic frameworks. Henderson, Acquaye-Doyle, Waites, and Howard (2016) contend that social work education and training must integrate historical trauma, ensuring practitioners possess the requisite knowledge and skills to engage ethically and effectively with historically marginalized communities.

The connection between historical trauma and intimate partner violence (IPV) is an additional area of concern. Burnette (2015) and Hamby, Schultz, and Elm (2020) examine the impact of colonial violence, coerced assimilation, and institutional oppression on elevated incidences of intimate partner violence, domestic violence, and poly-victimization among Indigenous women. Their findings indicate that social work interventions in these circumstances must extend beyond individual therapy models to encompass community-wide healing, economic empowerment, and policy reforms that safeguard survivors and confront systemic violence.

This research emphasizes the necessity of incorporating historical trauma awareness into the formulation of social work policies. Androff (2022) contends that a Truth and Reconciliation Commission in the U.S. might function as an essential instrument for recognizing and confronting the enduring impacts of racial and colonial trauma. McKinley, Boel-Studt, Renner, et al. (2020) assert that policy interventions must acknowledge historical trauma as a systemic concern necessitating multi-faceted remedies, including reparative justice, community investment, and legal safeguards for disenfranchised populations.

The bibliometric analysis identifies multiple nascent research domains that require additional investigation. A notable trend is the increasing convergence of historical trauma and epigenetics. Rogers-LaVanne et al. (2023) present biological evidence indicating that trauma can modify gene expression via DNA methylation, implying that historical trauma constitutes both a psychosocial occurrence and a biological inheritance. Future study ought to broaden

this interdisciplinary methodology by including insights from social work, neurology, and genetics to enhance comprehension of the enduring health consequences of trauma.

The expansion of historical trauma study is now extending beyond Indigenous and African American populations. Although the predominant literature has concentrated on Native American, African American, and Holocaust survivor demographics, research by Qureshi, Misra, and Poshni (2023) and Orozco-Figueroa (2021) underscores the intergenerational ramifications of trauma within South Asian and Latin American communities. Future study ought to expand its focus to encompass refugee populations, war survivors, and displaced communities, investigating the impact of global histories of violence, forced migration, and political oppression on intergenerational trauma.

Moreover, longitudinal studies are required to monitor the multi-generational effects of historical trauma. A significant portion of the current research depends on cross-sectional data, which offers essential insights but fails to comprehensively depict the long-term trajectories of trauma, resilience, and healing. Longitudinal study may provide a more detailed comprehension of the transmission and alleviation of historical trauma over time, hence guiding the development of more effective therapeutic measures.

The research advocates for enhanced incorporation of historical trauma into public health and policy frameworks. Waite and Nardi (2021) contend that historical trauma must be acknowledged as a public health issue, requiring systemic interventions in mental health services, social work education, and policy formulation. Bowen and Walton (2015) emphasize the significance of social determinants of health in relation to trauma exposure and resilience, proposing that interventions should tackle poverty, housing instability, and educational inequities in conjunction with mental health care.

This discourse emphasizes the theoretical contributions, practical ramifications, and nascent research trajectories in the study of historical trauma within the field of social work. The increasing acknowledgment of historical trauma as a systemic, intergenerational concern has resulted in notable progress in theory, practice, and policy advocacy. Research highlights the necessity for culturally attuned, community-oriented interventions, promoting decolonized methodologies for trauma recovery that emphasize Indigenous knowledge, intersectional frameworks, and structural transformation.

Conclusions

This bibliometric examination of historical trauma research in social work offers essential insights into the intellectual progression, thematic advancements, and practical implementations within the discipline. The study methodically maps the literature and identifies major research clusters, illustrating how historical trauma has emerged as a pivotal concern in social work, affecting mental health interventions, policy frameworks, and culturally responsive practices. The results highlight the intergenerational transmission of trauma, Indigenous resilience, mental health inequities, and intervention techniques, demonstrating the intricate and multifaceted character of historical trauma in social work research.

This study significantly identifies four predominant research clusters that have influenced the field. These clusters underscore significant issues in historical trauma research within social work and offer insights into the field's evolution throughout time.

The intergenerational transmission of trauma highlights the ways in which historical trauma is conveyed between generations via biological, psychological, and social systems. This study highlights the significance of epigenetics, familial narratives, and collective memory in perpetuating the enduring impacts of trauma. Studies increasingly give scientific evidence that trauma produces biological markers, affecting mental health consequences in later generations. This viewpoint contests conventional understandings of trauma as a personal experience, instead presenting it as a collective, transgenerational issue that necessitates institutional remedies.

The subject of indigenous communities and resilience underscores the significance of cultural healing practices, traditional knowledge, and community-led initiatives in alleviating the effects of historical trauma. Research in this domain contests Western-centric conceptions of trauma rehabilitation, promoting decolonized, culturally integrated methodologies in social work. Research highlights that resilience within Indigenous communities is fundamentally anchored in cultural identity, spiritual traditions, and family connections. These protective elements are essential for recovery from historical trauma and promoting communal well-being.

The topic of mental health disparities illustrates a significant correlation between historical trauma and PTSD, substance use disorders, and racial inequities in healthcare access. Structural determinants of health significantly contribute to the perpetuation of trauma cycles, sustaining systemic disparities that disproportionately affect marginalized communities.

Rectifying these discrepancies necessitates a transition from an individual-centric paradigm of care to a more comprehensive approach that acknowledges historical injustices, institutional oppression, and the persistent impacts of racial trauma.

The topic of intervention strategies in social work underscores the necessity for trauma-informed, culturally competent, and policy-driven treatments. The results demonstrate that community-driven, participatory frameworks are the most efficacious in mitigating both past and current trauma in underrepresented groups. Social work strategies that integrate historical trauma awareness and culturally pertinent healing methods demonstrate enhanced efficacy in promoting long-term recovery and resilience.

The increasing citation effect of historical trauma research, especially post-2015, indicates a transition towards applied research and policy integration. The growing application of bibliometric and transdisciplinary approaches, including epigenetics and public health frameworks, signifies a significant advancement in the study and management of historical trauma. This trend indicates that research on historical trauma is receiving increased acknowledgment not only in social work but also in disciplines such as public health, psychology, and genetics.

This work offers significant insights, although certain limitations must be recognized. The data collection is restricted to papers indexed in the Web of Science Core Collection. This database, albeit extensive, may omit pertinent works from alternative sources like Scopus, PubMed, or regional academic repositories. Future study may amalgamate several databases to offer a comprehensive analysis of historical trauma scholarship. Augmenting the data sources would guarantee a more comprehensive portrayal of global viewpoints and nascent research.

The concentration on high-frequency keywords prioritizes prevalent themes while potentially neglecting developing, less often addressed issues. Aspects such as LGBTQ+ viewpoints on historical trauma, trauma generated by climate change, and historical trauma in conflict-affected areas may not have been comprehensively documented. A comprehensive qualitative content analysis of infrequent terms may provide further insights into overlooked dimensions of historical trauma study.

While quantitative bibliometric tools adeptly delineate research trends and citation networks, they fail to encapsulate the intricacies of theoretical and methodological discourses inside the literature. Although co-occurrence and citation analysis reveal significant studies, they lack detailed examinations of theoretical frameworks or methodological strategies. Future research

should integrate bibliometric analysis with qualitative literature assessments to provide a more comprehensive picture of the theoretical development of historical trauma studies.

A discernible geographical and demographic bias is present in the current research landscape. A significant portion of the literature concentrates on Indigenous groups in North America, African Americans, and Holocaust survivors. Historically traumatized groups, including refugees, war survivors, and displaced communities from Latin America, Asia, and Africa, are inadequately represented in bibliometric trends. Future study should extend to many global contexts to offer a more thorough comprehension of historical trauma as a universal phenomenon.

The progression of historical trauma research indicates multiple intriguing avenues for further investigation. Further exploration of interdisciplinary techniques is warranted, specifically the incorporation of epigenetics, neurology, and public health paradigms into the study of historical trauma. Future research should promote collaborations among social work, genetics, neuroscience, and mental health fields to enhance the understanding of the biological and psychosocial transmission of trauma. A multidisciplinary approach can improve the creation of comprehensive remedies that tackle both the physiological and psychological impacts of historical trauma.

Comparative and global studies are essential for analyzing historical trauma across many cultural and historical contexts. Although historical trauma is well documented in Indigenous, African American, and Jewish communities, comparative analyses are scarce. Future study should investigate the similarities and distinctions in the manifestation of historical trauma across many populations, including colonization in Latin America, post-apartheid South Africa, and intergenerational trauma among Syrian refugees. A global approach would enhance theoretical discourse and offer culturally diversified intervention options.

Longitudinal studies must be prioritized to enhance comprehension of the enduring effects of past trauma. The majority of current research is cross-sectional, assessing the impact of trauma at a singular moment in time. Longitudinal research examining intergenerational trauma transmission, resilience, and healing across several decades would yield essential information regarding the enduring effectiveness of therapies. Such studies could evaluate the impact of various social policies, community initiatives, and cultural practices on trauma recovery over time.

Incorporating historical trauma frameworks into social work education and policy is crucial for guiding professional practice. Research increasingly underscores the significance of including

historical trauma awareness into social work programs. Subsequent research should assess the influence of educational interventions on social work students' readiness to interact with previously traumatized groups. Furthermore, policy research ought to investigate the integration of historical trauma frameworks inside legal, healthcare, and social service organizations to develop more efficacious trauma-informed policies and services.

Prioritizing community-led and decolonized research methodologies is essential to empower marginalized populations in influencing trauma research and interventions. A significant portion of historical trauma research continues to depend on Western academic paradigms, which may not adequately correspond with the needs and viewpoints of impacted populations. Future endeavors must emphasize participatory action research (PAR) and Indigenous-led approaches to enable communities to influence research goals, devise interventions, and execute culturally pertinent healing practices.

This study highlights the increasing importance of historical trauma in social work research, demonstrating how mental health disparities, structural inequalities, and resilience strategies influence modern social work interventions. The discipline has significantly advanced in elucidating processes of intergenerational trauma, formulating culturally acceptable therapies, and shaping policy dialogues. Nonetheless, significant deficiencies persist in broadening the international scope of historical trauma research, including multidisciplinary methodologies, and promoting systemic policy reforms.

Future historical trauma research should adopt a comprehensive, intersectional, and decolonized methodology that emphasizes community empowerment, reparative justice, and trauma-informed policy development. By promoting these research objectives, social work can maintain a transformative role in confronting the enduring legacies of colonialism, racism, forced relocation, and structural oppression. The future of historical trauma research must memorialize past atrocities while also facilitating concrete solutions that foster healing, resilience, and social justice.

References

- Androff, D. (2022). A US Truth and Reconciliation Commission: Social work's role in racial healing. *Social Work*, 67(3), 239-248.
- Beltrán, R., & Schultz, K. (2018). From ambivalence to revitalization: Negotiating cardiovascular health behaviors related to environmental and historical trauma in a Northwest American Indian community. *American Indian and Alaska Native Mental Health Research*, 25(2), 103-128.

- Bilewicz, M. (2022). Conspiracy beliefs as an adaptation to historical trauma. *Current Opinion in Psychology*, 47, 101359.
- Billiot, S., & Beltrán, R. (2023). Indigenous IPV advocates' advice when working with Indigenous survivors: Experience and culture play an important role. *Journal of Family Violence*.
- Billiot, S., Beltrán, R., Brown, D., Mitchell, F. M., & Fernandez, A. (2019). Indigenous perspectives for strengthening social responses to global environmental changes: A response to the social work grand challenge on environmental change. *Journal of Community Practice*, 27(3-4), 296-316.
- Borell, B., Barnes, H. M., & McCreanor, T. (2018). Conceptualising historical privilege: The flip side of historical trauma, a brief examination. *Alternative - An International Journal of Indigenous Peoples*, 14(1), 25-34.
- Bowen, E. A., & Walton, Q. L. (2015). Disparities and the social determinants of mental health and addictions: Opportunities for a multifaceted social work response. *Health & Social Work*, 40(3), E59-E65.
- Burnette, C. E., & Figley, C. R. (2017). Historical oppression, resilience, and transcendence: Can a holistic framework help explain violence experienced by Indigenous people? *Social Work*, 62(1), 37-44.
- Burnette, C. H. (2015). Historical oppression and intimate partner violence experienced by Indigenous women in the United States: Understanding connections. *Social Service Review*, 89(3), 531-563.
- Crutchfield, J., Hall, J. C., Ortega-Williams, A., & Webb, S. L. (2020). Colorism and the poetics of resistance among Black youth: An application of the colorist-historical trauma framework. *Journal of Black Studies*, 51(8), 813-831.
- Evans-Campbell, T. (2008). Historical trauma in American Indian/Native Alaska communities - A multilevel framework for exploring impacts on individuals, families, and communities. *Journal of Interpersonal Violence*, 23(3), 316-338.
- Fast, E., & Collin-Vézina, D. (2019). Historical trauma, race-based trauma, and resilience of Indigenous peoples: A literature review. *First Peoples Child & Family Review*, 14(1), 166+.
- Gardella, L. G. (2022). The past and future of social group work in Germany: Contributions of Louis Lowy. *Social Work with Groups*, 45(3-4), 309-318.
- Hamby, S., Schultz, K., & Elm, J. (2020). Understanding the burden of trauma and victimization among American Indian and Alaska native elders: Historical trauma as an element of poly-victimization. *Journal of Trauma & Dissociation*, 21(2), 172-186.
- Heart, M. Y. H. B. (2003). The historical trauma response among natives and its relationship with substance abuse: A Lakota illustration. *Journal of Psychoactive Drugs*, 35(1), 7-13.
- Heart, M. Y. H. B., Chase, J., Elkins, J., & Altschul, D. B. (2011). Historical trauma among Indigenous Peoples of the Americas: Concepts, research, and clinical considerations. *Journal of Psychoactive Drugs*, 43(4), 282-290.

- Heart, M. Y. H. B., Chase, J., Myers, O., & others. (2020). Iwankapiya American Indian pilot clinical trial: Historical trauma and group interpersonal psychotherapy. *Psychotherapy*, 57(2), 184-196.
- Henderson, Z. R., Stephens, T. N., Ortega-Williams, A., & Walton, Q. L. (2021). Conceptualizing healing through the African American experience of historical trauma. *American Journal of Orthopsychiatry*, 91(6), 763-775.
- Henderson, Z., Acquaye-Doyle, L. A., Waites, S., & Howard, T. (2016). Putting principles into practice: Addressing historical trauma, mistrust, and apprehension in research methods courses. *Journal of Social Work Education*, 52(1), 69-78.
- Holder, M. M. (2024). Historical trauma and the impact on IPV among Indigenous women. *Journal of Ethnic & Cultural Diversity in Social Work*, 33(4), 241-251.
- Hong, S. H. Y. (2023). Trauma-informed cultural humility mental health practice: Centering history among African American women. *Social Work*, 69(1), 64-72.
- Jones, L. V., Mountz, S. E., & Trant, J. (2020). A Black feminist approach for caseworkers intervening with Black female caregivers. *Journal of Public Child Welfare*, 14(4), 395-411.
- Lee, E., & Johnstone, M. (2022). Resisting a postcolonial construction of historical trauma and healing: Critical discourse analysis of public apologies in Canada. *Critical Sociology*, 48(7-8), 1253-1274.
- Marici, M. (2015). A holistic perspective of the conceptual framework of resilience. *Journal of Psychological and Educational Research (JPER)*, 23(1), 100-115.
- Marici, M., & Runcan, R. (2023). Cultural competence in transnational migration: A social work perspective. *Multiculturalism and Social Assistance, Presa Universitara Clujeana*, 9-22.
- Marici, M., Clipa, O., Runcan, R., & Pîrghie, L. (2023, June). Is rejection, parental abandonment or neglect a trigger for higher perceived shame and guilt in adolescents?. In *Healthcare* (Vol. 11, No. 12, p. 1724). MDPI.
- Maschi, T., Viola, D., & Morgen, K. (2014). Unraveling trauma and stress, coping resources, and mental well-being among older adults in prison: Empirical evidence linking theory and practice. *Gerontologist*, 54(5), 857-867.
- Masotti, P., Dennem, J., Hadani, S., & others. (2020). The Culture is Prevention Project: Measuring culture as a social determinant of mental health for Native/Indigenous peoples. *American Indian and Alaska Native Mental Health Research*, 27(1), 86-111.
- McKinley, C. E., Boel-Studt, S., Renner, L. M., & others. (2020). The Historical Oppression Scale: Preliminary conceptualization and measurement of historical oppression among Indigenous peoples of the United States. *Transcultural Psychiatry*, 57(2), 288-303.
- Mishna, F., Middleton-Moz, J., Martell, R., Williams, C., & Zuberi, S. (2023). Indigenous trauma and resilience: Pathways to 'bridging the river' in social work education. *Social Work Education*, 42(7), 968-985.
- Mohatt, N. V., Thompson, A. B., Thai, N. D., & Tebes, J. K. (2014). Historical trauma as public narrative: A conceptual review of how history impacts present-day health. *Social Science & Medicine*, 106, 128-136.

- Montgomery, L. M. (2019). Memories that haunt: Layered landscapes of historical trauma on the American plains. *International Journal of Heritage Studies*, 25(7), 736-749.
- Munyoro, A., & Mavhungu, C. (2022). Mental health and historical trauma among social workers working with victims of violent crime in South Africa. *Journal of Human Behavior in the Social Environment*, 32(3), 308-324.
- Nagata, D. K., Kim, J. H. J., & Gone, J. P. (2024). Intergenerational transmission of ethnoracial historical trauma in the United States. *Annual Review of Clinical Psychology*, 20, 175-200.
- Orozco-Figueroa, A. (2021). The historical trauma and resilience of individuals of Mexican ancestry in the United States: A scoping literature review and emerging conceptual framework. *Genealogy*, 5(2), 32.
- Ortega-Williams, A., Beltrán, R., Schultz, K., & others. (2021). An integrated historical trauma and posttraumatic growth framework: A cross-cultural exploration. *Journal of Trauma & Dissociation*, 22(2), 220-240.
- Ortega-Williams, A., Crutchfield, J., Hall, J. C., & White, A. (2023). Colorism and historical trauma: Barriers and stepping stones for healing within clinical social work education. *Smith College Studies in Social Work*, 93(2-4), 160-182.
- Qureshi, F., Misra, S., & Poshni, A. (2023). The partition of India through the lens of historical trauma: Intergenerational effects on immigrant health in the South Asian diaspora. *SSM-Mental Health*, 4, 100246.
- Riazanova, S. V. (2021). Experiencing historical trauma: Religious models of sublimation. *Vestnik Permskogo Universiteta - Istoriya*, 54(3), 167-177.
- Riley, L., Suesue, A., Hulama, K., Neumann, S. K., & Chung-Do, J. (2022). Ke ala i ka Mauiola: Native Hawaiian youth experiences with historical trauma. *International Journal of Environmental Research and Public Health*, 19(19), 12564.
- Riley, L., Suesue, A., Hulama, K., Neumann, S. K., & Chung-Do, J. (2022). Ke ala i ka Mauiola: Native Hawaiian youth experiences with historical trauma. *International Journal of Environmental Research and Public Health*, 19(19), 12564.
- Rogers-LaVanne, M. P., Bader, A. C., de Flamingh, A., & others. (2023). Association between gene methylation and experiences of historical trauma in Alaska Native peoples. *International Journal for Equity in Health*, 22(1), 182.
- Rosenwald, M. J., Baird, J., & Williams, J. A. (2023). Social work model of historical trauma. *British Journal of Social Work*, 53(1), 621-636.
- Saghin, D., LUCHEȘ, D., & Marici, M. (2016). The influence of personal and professional variables upon the nature of immigration of romanian doctors to france: the moderating effect of gender. *Transylvanian Review of Administrative Sciences*, 12(49), 132-149.
- Sevillano, L., Wood, B., & Franklin, C. (2022). Mental health interventions that address historical trauma among Indigenous peoples: A systematic review. *Social Work Research*, 46(2), 127-140.
- Smith-Woods, T., & Diggs, W. F. II. (2024). Nurturing Black male mental health through the Black church: A conceptual approach from a social work perspective. *Social Work in Public Health*, 39(7), 785-793.

- Stern, L., & Hulko, W. (2016). Historical trauma, PTSD, and dementia: Implications for trauma-informed social work. *Gerontologist*, 56, 311-311.
- Swanson, S., Nygård, R. H., & Saus, M. (2022). Native American social work - Including family and community. *Journal of Social Work*, 22(3), 615-636.
- Vişcu, L. I., & Marici, M. (2024). Challenges in supervising social workers. *International Journal of Social and Educational Innovation (IJSEIro)*, 81-94.
- Waite, R., & Nardi, D. (2021). Understanding racism as a historical trauma that remains today: Implications for the nursing profession. *Creative Nursing*, 27(1), 19-24.
- Walters, K. L., Mohammed, S. A., Evans-Campbell, T., & others. (2011). Bodies don't just tell stories, they tell histories: Embodiment of historical trauma among American Indians and Alaska Natives. *Du Bois Review - Social Science Research on Race*, 8(1), 179-189.
- Wiechelt, S. A., Gryczynski, J., Johnson, J. L., & Caldwell, D. (2012). Historical trauma among urban American Indians: Impact on substance abuse and family cohesion. *Journal of Loss & Trauma*, 17(4), 319-336.