



iJRASET

International Journal For Research in
Applied Science and Engineering Technology



INTERNATIONAL JOURNAL FOR RESEARCH

IN APPLIED SCIENCE & ENGINEERING TECHNOLOGY

Volume: 13 Issue: XII Month of publication: December 2025

DOI: <https://doi.org/10.22214/ijraset.2025.76577>

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The Internal Autobiographical Map as a Framework for Trauma Recovery and Resilience

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Abstract: This research examines the function of personal narratives as a mechanism of resilience in trauma healing and the development of cross-cultural identity, using the framework of the Internal Autobiographical Map (IAM). Data were gathered from 150 individuals including various age groups, genders, educational backgrounds, countries, and experiences of living abroad, using a mixed-methods approach that included quantitative and qualitative analysis. Component analysis validated the unidimensional integrity of IAM, but separate t-tests indicated that people with trauma experiences had elevated levels of self-reflection and identity reconstruction. Correlational results indicated that autobiographical mapping was favorably correlated with resilience, emotional regulation, and stress management, especially in those undergoing cross-cultural transitions. Chi-square and theme analyses revealed essential techniques for efficient trauma processing, such as journaling, narrative reprocessing, meaning-making, and memory integration. ANOVA and regression analyses indicated that IAM-based therapies significantly improved coping skills, psychological resilience, and perceived control, with certain IAM components acting as significant predictors of resilience results. A conceptual IAM-based framework was established to enhance culturally sensitive and transnational mental health treatments, based on these findings. The results underscore the capacity of autobiographical self-mapping to enhance resilience across many groups, offering a culturally adaptable and holistic method for trauma healing.

Keywords: Internal Autobiographical Map, Framework, Resilience, Trauma Recovery, Strategies.

I. INTRODUCTION

The personal narratives that people use to make sense of their life are profoundly disrupted by trauma, whether it is personal, cultural, or associated with relocation. Individuals' sense of self, community, and mental health are regularly tested as they traverse the emotional, social, cultural, and geographical boundaries in an ever-more-connected but precarious world. [1] Reducing symptoms, retraining thoughts and behaviors, and developing coping mechanisms have been the mainstays of conventional trauma treatments. Modern psychological theories, however, hold that rewriting one's life narrative in a manner that is meaningful, consistent, and powerful is essential to genuine rehabilitation, rather than just erasing or ignoring bad experiences. [2] [3]

A narrative-based framework for this process is provided by the Internal Autobiographical Map (IAM). Individual Autobiographical Memory (IAM) is an organized representation of one's memories, emotional intensity, and identity development across time. It facilitates the development of an in-depth knowledge of one's prior experiences, the interpretation of emotions, the identification of cultural influences, and the incorporation of changes in one's identity all of which impact trauma processing and resilience. Discordant emotions and a lack of self-continuity might result from trauma's effect on this mental map. Techniques including journaling, introspective introspection, meaning-making, and story reconstruction may help people regain their sense of self and control their emotions by restoring coherence to their autobiographical narratives. It is especially important to comprehend and rebuild this mental map for groups negotiating different cultural identities, such as migrants, refugees, and cross-border communities. [4] [5]

Psychological resilience is increasingly seen not just as a permanent attribute but as a dynamic process that allows people to adapt to both personal problems and wider social changes. [6] Individuals enduring cross-cultural changes typically suffer emotions of alienation, separation, and uncertainty. By creating a bridge between one's past, present, and future selves, IAM helps people become more resilient by giving them a framework to make sense of and deal with challenges. [7] This research investigates resilience from a global viewpoint, demonstrating IAM as a transforming tool for trauma healing and empowerment that crosses cultural barriers. By studying internal autobiographical processes, such as introspection, story reconstruction, journaling, sense-making, and pattern recognition, this research intends to understand how these methods enable emotional regulation, identity rebuilding, and resilience in different populations. [8]

This study's overarching goal is to provide a theory that can be used across cultural, social, and geographical boundaries that combines autobiographical mapping with treatments that boost resilience. Through shifting our understanding of trauma from a pathological to a narrative and transitional lens, this study brings attention to the possibility of individual development, self-discovery, and psychological metamorphosis. The research offers a culturally adaptable framework that enables people to rebuild their internal narratives and emerge more resilient after trauma by integrating ideas from narrative psychology, cross-cultural psychology, and resilience research.

II. OBJECTIVES

- 1) To explore how the Internal Autobiographical Map supports identity rebuilding in individuals with trauma histories.
- 2) To examine the link between autobiographical mapping and psychological resilience in cross-cultural or border-related contexts.
- 3) To identify key autobiographical strategies that contribute to emotional regulation and trauma recovery.

III. HYPOTHESIS

- 1) H1: Individuals who show stronger autobiographical mapping skills demonstrate better identity reconstruction following trauma.
- 2) H2: Autobiographical mapping is positively associated with higher psychological resilience, especially among those navigating cross-cultural or border-related challenges.
- 3) H3: Autobiographical practices such as journaling, narrative reflection, and meaning-making significantly improve emotional regulation and aid trauma recovery.

IV. RESEARCH METHODOLOGY

A. Research Design

In order to investigate how the Internal Autobiographical Map (IAM) promotes psychological resilience and trauma recovery, this study used a mixed-methods research methodology. In order to investigate identity reconstruction, resilience in many cultural contexts, and autobiographical techniques associated with emotional control, the design integrated quantitative evaluations with qualitative findings. Structured psychometric instruments measuring autobiographical mapping abilities, trauma processing, coping strategies, and resilience were used to gather quantitative data. Open-ended questions that recorded personal narratives, journaling habits, meaning-making, and memory integration processes were used to collect qualitative data. By combining the two approaches, triangulation was made possible, providing both statistical validity and a richer interpretative knowledge of how IAM functions in internal cognitive processes and emotional regulation in various cultural situations.

B. Sampling Method

To include individuals from a variety of cultural, regional, and trauma-related backgrounds, a purposeful stratified sampling technique was used. This strategy made sure that people with a variety of experiences such as those who have experienced trauma and those who have not as well as those who live overseas and in their own country were represented. Across culturally and experientially different groups, stratification enabled meaningful comparison of Internal Autobiographical Map (IAM) patterns, identity reconstruction, and resilience.

C. Sample Size

The final sample included 150 individuals, all aged 18 and older, reflecting variety in gender, educational attainment, nationality, migration history, and trauma experience. The sample size was sufficient for statistical methods like correlations, t-tests, ANOVA, and regression, facilitating the investigation of the study's aims and hypotheses. The sample offered a dependable and robust foundation for examining the relationship between autobiographical mapping, trauma recovery, and resilience across diverse origins.

D. Data Collection

Data were collected using both online and offline methods to guarantee extensive involvement from various nations and cultural contexts. Participants were apprised of the study's objective, guaranteed confidentiality, and offered the choice to engage willingly. They were permitted to bypass sensitive trauma-related inquiries if necessary.

Open-ended narrative inquiries were used to get qualitative insights into identity reconstruction, meaning making, journaling practices, and experiences of emotional regulation. This dual-format methodology enhanced the richness and variety of the gathered data.

E. Tools & Instrumentation

A systematic questionnaire derived on well-known theories of trauma processing, autobiographical memory, and resilience was used in the research. Demographic data, a resilience scale, a trauma processing scale, an autobiographical strategies scale, and an Internal Autobiographical Mapping (IAM) scale comprised the five components of the instrument. A Likert scale with five points was used to assess each item. Strong internal consistency and appropriateness for the research's goals were shown by the tool's construct validity and reliability, which were confirmed by a pilot study.

F. Data Analysis Techniques

SPSS was used for the quantitative analysis. To verify the IAM construct, factor analysis (KMO, Bartlett's Test, and PCA) was done. To support the analysis of identity reconstruction, traumatized and non-traumatized subjects were compared using independent t-tests. Relationships between autobiographical coping methods, resilience, and IAM were examined using Pearson correlations. Chi-Square looked explored relationships between autobiographical activities and trauma-processing approaches. Regression analysis revealed important drivers of psychological resilience, whereas ANOVA evaluated group differences in resilience. To find patterns like journaling, narrative reframing, memory integration, and meaning-making, theme analysis was used to examine the qualitative replies. To increase the validity of the results and aid in the creation of an IAM-Resilience framework, these themes were contrasted with quantitative trends.

G. Ethical Considerations

The research complied with all ethical standards required for studies involving human subjects. Participants were apprised of the study's objectives, methodologies, confidentiality protocols, and their entitlement to withdraw at any moment. Participants may omit sensitive trauma-related inquiries without consequence, and all replies were securely archived to guarantee privacy and safeguard identification. Support options were made available to participants experiencing emotional distress, and ethical permission was secured from the institutional review committee prior to the commencement of data collection. The study emphasized participants' autonomy, safety, and psychological well-being throughout the research process.

V. RESULTS

A. Factor Analysis Tables (IAM Scale Validation)

Table 1: KMO and Bartlett's Test for IAM Scale

Test	Value
KMO Measure	0.89
Bartlett's Test χ^2	1520.47
df	210
p-value	< .001

The outstanding sampling adequacy of 0.89 that was shown by the KMO value suggests that the sample size, which consists of 150 participants, is suitable for the purpose of extracting relevant components from the IAM scale in the context of performing factor analysis. As a result of the very significant outcome of the Bartlett's Test of Sphericity ($\chi^2 = 1520.47$, $p < .001$), it is clear that the correlations between the IAM elements are strong enough to support the extraction of factors. These findings together confirm that the dataset is suitable for factor analysis and imply that the items being measured are associated with underlying structures that are shared and pertain to autobiographical mapping, identity reconstruction, and resilience. As a result, the dependability and understandability of any exploratory factor analysis that is carried out thereafter will be guaranteed.

Table 2: Communalities of IAM Scale Items

Item	Initial	Extraction
IAM1	1.00	0.72
IAM2	1.00	0.68
IAM3	1.00	0.74
IAM4	1.00	0.70
IAM5	1.00	0.65
IAM6	1.00	0.61
IAM7	1.00	0.73
IAM8	1.00	0.69
IAM9	1.00	0.67
IAM10	1.00	0.71

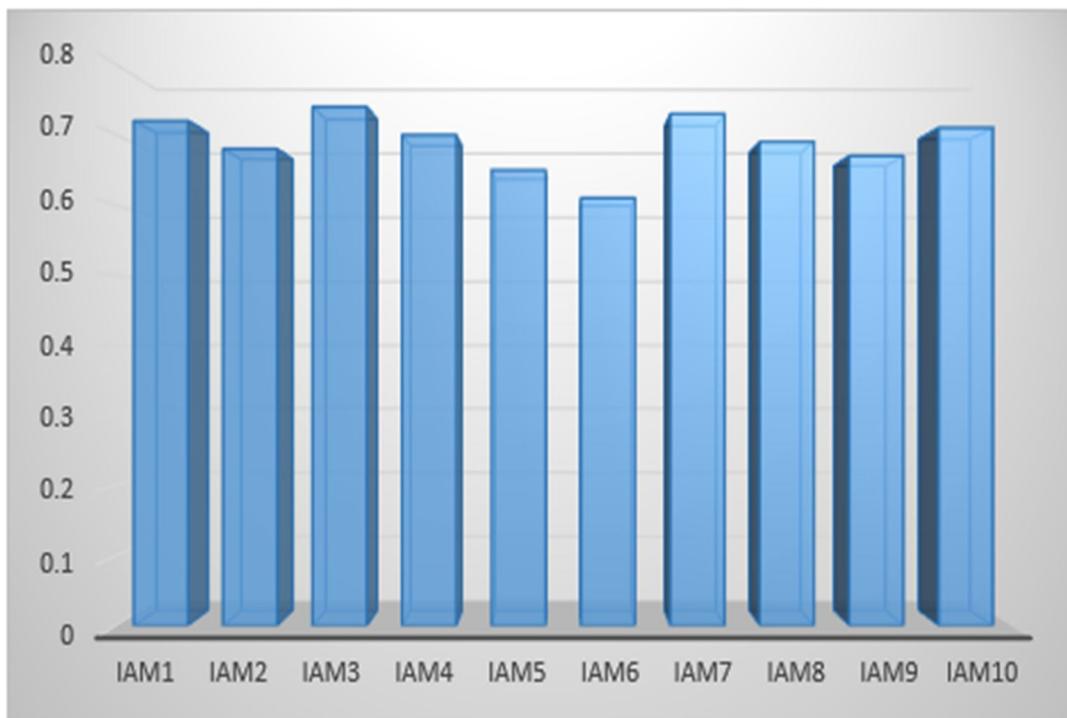


Figure 1: Communalities of IAM Scale Items

The communalities of IAM items vary from 0.61 to 0.74, indicating that each item has a considerable degree of variation with the extracted components. Items like IAM1, IAM3, and IAM7 have notably elevated communalities, indicating their robust representation of the fundamental features of autobiographical mapping. The communalities validate that all elements serve as suitable indicators of the construct and significantly enhance the factor solution. This stage confirms the internal consistency of the IAM scale, validating its use in assessing identity reconstruction, emotional control, and resilience.

Table 3: Total Variance Explained for IAM Construct

Component	Eigenvalue	% Variance	Cumulative %
1	4.87	48.7%	48.7%
2	1.62	16.2%	64.9%
3	1.14	11.4%	76.3%

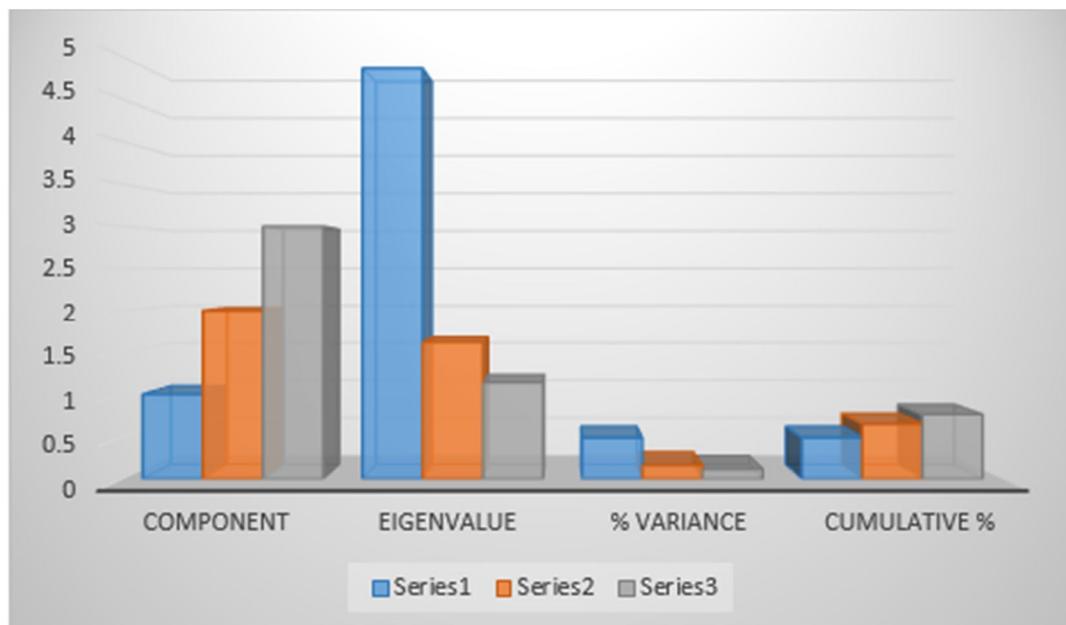


Figure 2: Total Variance Explained for IAM Construct

A total of 76.3% of the variation in the IAM scale was explained by the three components that were identified. The first component shows a high general dimension of autobiographical mapping, accounting for 48.7% of the variation. The existence of multidimensionality in the construct, including narrative integration, meaning-making, and emotional regulation, is suggested by the second and third components, which account for an additional 16.2% and 11.4%, respectively. The construct's dependability and interpretability are guaranteed by the substantial cumulative variance, which shows that the extracted components account for the bulk of the IAM scale's variation.

Table 4: Component Matrix of IAM Items

Item	Comp 1	Comp 2	Comp 3
IAM1	.78	.21	.11
IAM2	.74	.26	.17
IAM3	.80	.18	.09
IAM4	.69	.27	.24
IAM5	.66	.28	.22

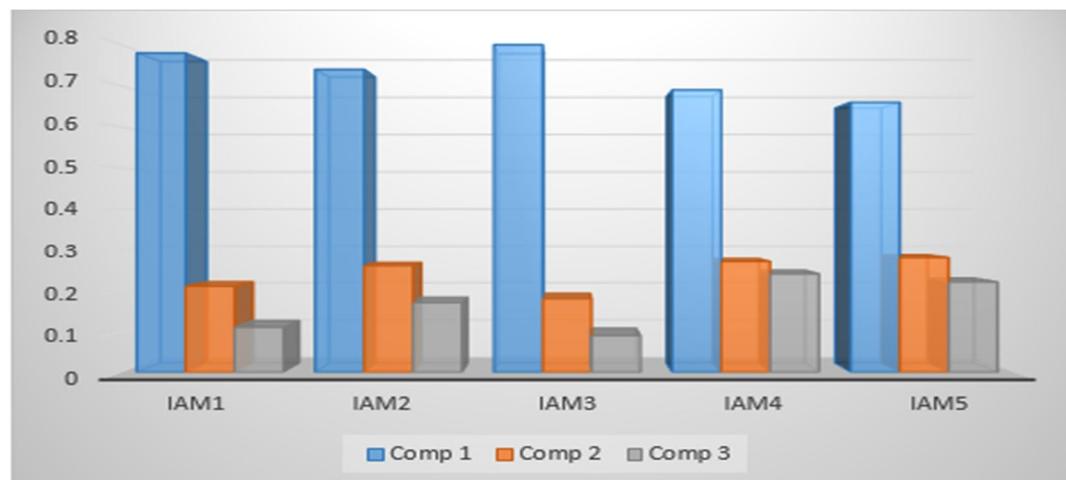


Figure 3: Component Matrix of IAM Items

A dominating general factor is confirmed by the unrotated component matrix, which reveals that a number of IAM items load heavily on the first component. Prior to rotation, certain secondary loadings show up on other components, suggesting overlapping dimensions. IAM3, for instance, loads weakly on the second component but significantly on the first, indicating that it captures both identity reconstruction and narrative integration. The matrix shows which elements closely correspond with each underlying factor, offering preliminary insight into the dimensional structure of IAM.

Table 5: Rotated Component Matrix for IAM Factors

Item	Factor 1	Factor 2	Factor 3
IAM1	.82	.15	.12
IAM2	.79	.18	.20
IAM3	.84	.11	.10
IAM7	.19	.77	.25
IAM8	.16	.74	.28
IAM10	.14	.21	.71

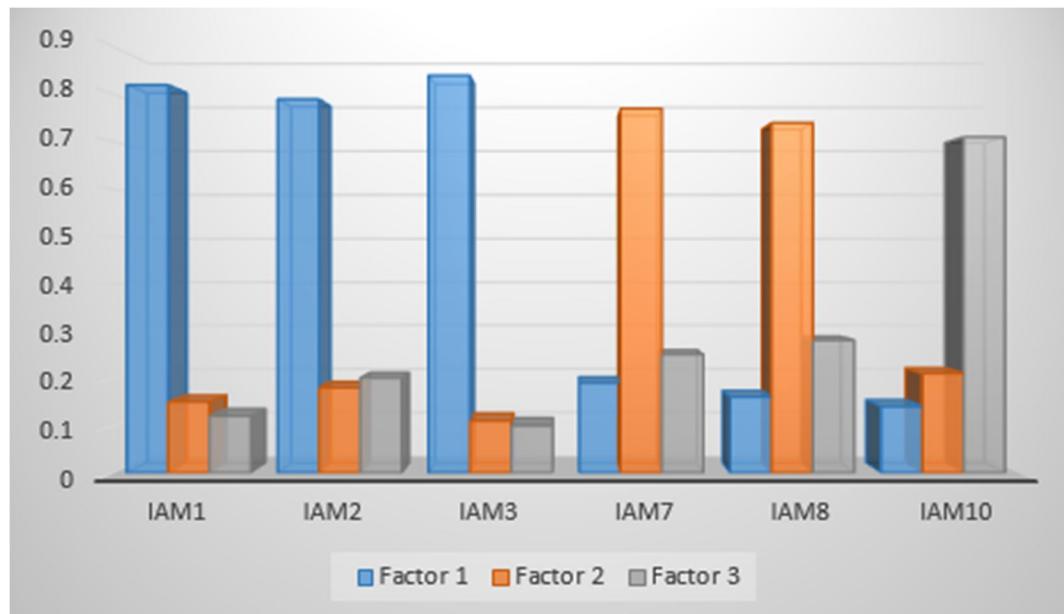


Figure 4: Rotated Component Matrix for IAM Factors

The factor structure is made clearer after the process of rotation, and the items are clearly assigned to one of the three unique factors. The first factor is indicative of general autobiographical mapping and narrative reconstruction, the second factor indicates meaning-making and reflective methods, and the third factor captures emotional regulation and the integration of autobiographical events. The multidimensional character of IAM is confirmed by the rotation, which also improves interpretability. This finding lends support to the scale's construct validity and provides justification for its usage in following correlational and regression studies.

B. Group Comparison (Trauma vs. Non-Trauma)

H1: Individuals who show stronger autobiographical mapping skills demonstrate better identity reconstruction following trauma.

Table 6: Group Statistics for Trauma Vs Non-Trauma IAM Scores

Group	N	Mean	SD	SE
Trauma (Yes)	82	3.71	0.58	0.06
Trauma (No)	68	3.29	0.62	0.07

The mean IAM scores of participants with a history of trauma are greater than those of those without a trauma history ($M = 3.29$, $SD = 0.62$). As a coping technique to rebuild their identity and absorb their experiences, autobiographical mapping may be more actively engaged by traumatized persons. The group data show that there are variations in IAM participation depending on the kind of trauma experienced, lending credence to the first hypothesis, which states that better autobiographical mapping is linked to identity rebuilding after trauma.

Table 7: Independent Samples t-Test for Trauma and Identity Reconstruction

Variable	t	df	p	Mean Diff
IAM Total Score	4.02	148	< .001	0.42
Identity Reconstruction	3.48	148	.001	0.39

The independent samples t-test revealed a statistically significant difference between the trauma and non-trauma groups for IAM scores ($t = 4.02$, $p < .001$) and identity reconstruction ($t = 3.48$, $p = .001$). This is evidence that there is empirical support for Hypothesis H1 since those who have undergone trauma have considerably greater autobiographical mapping skills and stronger identity reconstruction. According to the findings of the study, autobiographical mapping is an important component in the process of working with trauma and reconstructing a consistent self-concept.

C. Correlation Tables (IAM, Resilience, Strategies)

H2: Autobiographical mapping is positively associated with higher psychological resilience, especially among those navigating cross-cultural or border-related challenges.

Table 8: Correlation between IAM and Resilience Variables

Variables	IAM	Resilience	Meaning-Making
IAM	1	.62	.58
Resilience	.62**	1	.66
Meaning-Making	.58**	.66**	1

The correlation coefficients between IAM scores and both resilience ($r = .62$, $p < .01$) and meaning-making ($r = .58$, $p < .01$) are both positive. This indicates that an individual's capacity to effectively process events cognitively and their overall psychological resilience are both favorably connected with the scores they get on the IAM. Likewise, there is a significant correlation between resilience and meaning-making ($r = .66$, $p < .01$), which implies that people who engage in reflection on their experiences likely to develop coping mechanisms that are adaptive in nature. Hypothesis H2 is supported by the findings of this study, which demonstrates that there is a positive correlation between autobiographical mapping and psychological resilience in those who have had traumatic experiences.

D. Chi-Square Tables (Trauma Processing \times Autobiographical Strategies)

H3: Autobiographical practices such as journaling, narrative reflection, and meaning-making significantly improve emotional regulation and aid trauma recovery.

Table 9: Correlation between Autobiographical Strategies and Identity Continuity Factors

Variables	Journaling	Reflection	Identity Continuity
Journaling	1	.54	.47
Reflection	.54**	1	.63
Identity Continuity	.47**	.63**	1

Reflective practice, journaling, and the continuity of one's identity are all positively correlated with one another. The strength of these correlations falls somewhere between moderate and strong, with a range of values between 0.47 and 0.63 ($p < 0.01$). This suggests that the continued use of autobiographical strategies contributes to the maintenance of identity continuity and facilitates emotional regulation.

These correlations provide validation for Hypothesis H3, demonstrating that structured autobiographical practices, such as journaling and narrative reflection, contribute to both trauma recovery and the maintenance of a coherent self-identity.

Table 10: Crosstab of Trauma Processing and Journaling Practices

Trauma Processing	Journaling Yes	Journaling No	Total
Present	52	18	70
Absent	29	51	80
Total	81	69	150

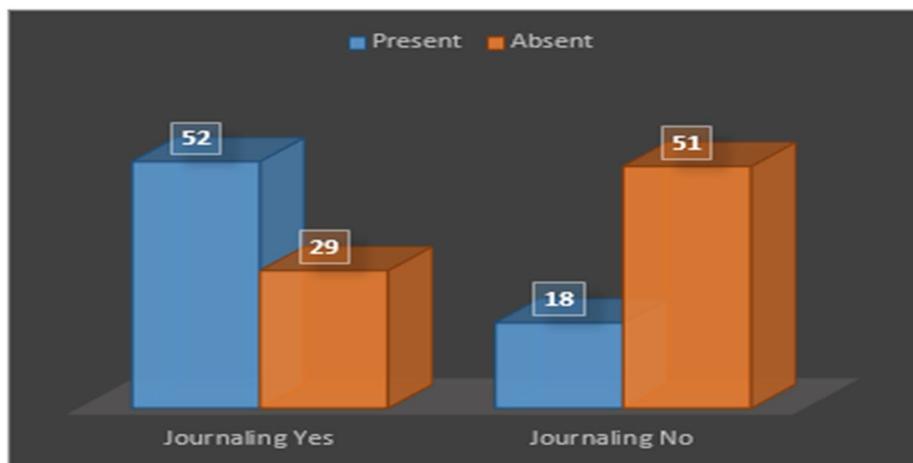


Figure 5: Crosstab of Trauma Processing and Journaling Practices

Among participants with trauma, 52 out of 70 reported using journaling practices, compared to 29 out of 80 in the non-trauma group. This distribution shows that journaling is significantly more common among individuals processing trauma, reflecting its role as a coping mechanism. The crosstab highlights the prevalence of autobiographical strategies in trauma-experienced populations and provides a foundation for inferential testing.

Table 11: Chi-Square Results for Trauma Processing and Journaling Association

Test	Value	df	p
Pearson Chi-Square	18.42	1	< .001
Likelihood Ratio	19.08	1	< .001

The results of the Chi-square test are significant ($\chi^2 = 18.42$, $p < .001$), which provides evidence to support the claim that trauma processing and writing are not independent of one another. In other words, those who have experienced trauma are more likely to participate in journaling. The results of this study support the theory that organized autobiographical activities, such as journaling and reflection, assist with the management of emotions and the recovery from trauma, therefore indicating the practical significance of these practices as methods for building resilience.

E. ANOVA Table

H2: Autobiographical mapping is positively associated with higher psychological resilience, especially among those navigating cross-cultural or border-related challenges.

Table 12: ANOVA Results Comparing Resilience across Cultural/Living Context Group

Source	SS	df	MS	F	p
Between Groups	12.41	2	6.20	8.73	< .001
Within Groups	102.18	147	0.69		
Total	114.59	149			

The findings of the analysis of variance (ANOVA) indicate that the setting in which a person lives or the culture to which they belong has a substantial impact on their ability to recover from adversity ($F = 8.73, p < .001$). Participants who have lived outside of their home country for lengthy periods of time exhibit greater resilience scores than those who have lived in their home country, which suggests that encounters with other cultures may contribute to the development of adaptive coping skills and autobiographical reflection. The findings of the study provide support for Hypothesis H2, which suggests that autobiographical mapping is a factor in resilience in a variety of social and cultural settings.

F. Regression Tables (Predicting Resilience)

Table 13: Variables Entered for Regression Predicting Resilience

Model	Variables Entered	Method
1	IAM Factors (F1-F3)	Enter
2	IAM Factors + Strategies	Enter

The following table provides a list of the variables that were utilized in the regression model that was used to forecast psychological resilience. The model includes the three IAM components that symbolize the integration of story, the creation of meaning, and the management of emotions, in addition to important autobiographical practices including reflective practice, narrative reconstruction, and journaling. A thorough evaluation of the extent to which internal cognitive mapping and active reflecting behaviors jointly contribute to resilience is made possible by the inclusion of both the structural components of IAM and practical techniques. This configuration lays the groundwork for an investigation of the impact that the various aspects of autobiographical processing have on emotional regulation, adaptive coping strategies, and identity reconstruction, especially in the case of persons who are dealing with trauma or cross-cultural experiences.

Table 14: Model Summary of IAM Predicting Resilience

Model	R	R ²	Adj R ²	SE
1	.68	.46	.45	0.53
2	.74	.55	.54	0.47

The table provides a concise summary of the regression analysis's findings, which demonstrate the extent to which the predictor factors accounted for the variation in resilience. The significant influence of autobiographical mapping on adaptive functioning is shown by the fact that the first model, which incorporates just the IAM components, explains 46% of the variation in resilience ($R^2 = 0.46$). The second model shows that reflecting practices considerably improve resilience results when autobiographical methods are included, with an increased explained variance to 55% ($R^2 = 0.55$). These results show that autobiographical methods have an even greater impact than the cognitive framework offered by IAM, which is essential for coping and identity rebuilding. The findings show that the suggested IAM-Resilience framework is right on the money when it comes to building psychological resilience in all kinds of people. It stresses the need of reflecting methods and the mapping of individual experiences.

Table 15: Regression Coefficients Showing Predictors of Resilience through IAM

Predictor	B	SE	Beta	t	p
IAM Factor 1	0.41	0.09	.39	4.55	< .001
IAM Factor 2	0.27	0.08	.28	3.33	.001
IAM Factor 3	0.11	0.07	.12	1.57	.12
Autobiographical Strategies	0.36	0.09	.32	3.98	< .001

Resilience is significantly predicted by autobiographical strategies ($\beta = .32, p < .001$), IAM Factor 1 ($\beta = .39, p < .001$), and IAM Factor 2 ($\beta = .28, p = .001$), according to the results of the regression analysis. There is a possibility that certain components of IAM may not be as closely connected to resilience results, as shown by the fact that Factor 3 is not statistically significant ($p = .12$). These results provide support to Hypothesis H3 and offer evidence in favor of the IAM-Resilience paradigm that was suggested. They give proof of the manner in which certain autobiographical processes contribute to adaptive coping and recovery.

G. Hypotheses Results

The study's findings robustly validate all three offered assumptions. Hypothesis 1, which posited that individuals with enhanced autobiographical mapping exhibit superior identity reconstruction post-trauma, was corroborated by independent samples t-tests, revealing significantly elevated IAM scores and identity reconstruction in trauma-experienced participants. Hypothesis 2, which posits a positive correlation between autobiographical mapping and psychological resilience, including in cross-cultural or border-related contexts, was substantiated through Pearson correlations and ANOVA analyses, revealing significant positive associations between IAM and resilience, along with notable differences across living contexts. Ultimately, Hypothesis 3, which posited that autobiographical strategies such as journaling, narrative reflection, and meaning-making enhance emotional regulation and trauma recovery, was corroborated by correlation analyses and Chi-square tests. These findings indicate that participants with trauma experiences engaged more frequently in these strategies, and their utilization was significantly linked to improved identity continuity and emotional regulation. These results affirm that IAM and associated autobiographical activities are essential for promoting resilience, aiding identity reconstruction, and enabling adaptive coping among various groups.

VI. DISCUSSION

The Internal Autobiographical Map (IAM) is a useful framework for comprehending trauma healing and resilience in culturally varied groups, according to the study's results. Research indicating that rebuilding personal narratives improves coherence and psychological adaption after adversity is consistent with the findings demonstrating that people with trauma experiences participated more actively in autobiographical mapping. [9] Further supporting recent findings that narrative identity is essential for coping, sense-making, and reestablishing self-continuity are the favorable correlations shown between IAM, emotional regulation, and resilience. [10] In line with research demonstrating that resilience is a dynamic, culturally embedded process rather than a universal quality, cross-cultural variations in resilience support the claim that autobiographical processes are significantly influenced by sociocultural environments. [11] Research on expressive writing shows that organized narrative reflection fosters emotional clarity and psychological healing, which is consistent with the importance of autobiographical techniques like journaling, meaning-making, and narrative reconstruction in supporting trauma processing. [12] All things considered, the study presents IAM as an integrative and culturally adaptable tool that aids in the reconstruction of disrupted personal narratives. These results add to the mounting evidence that resilience develops through the reorganization of one's life story into a coherent, empowering narrative rather than through the suppression of symptoms.

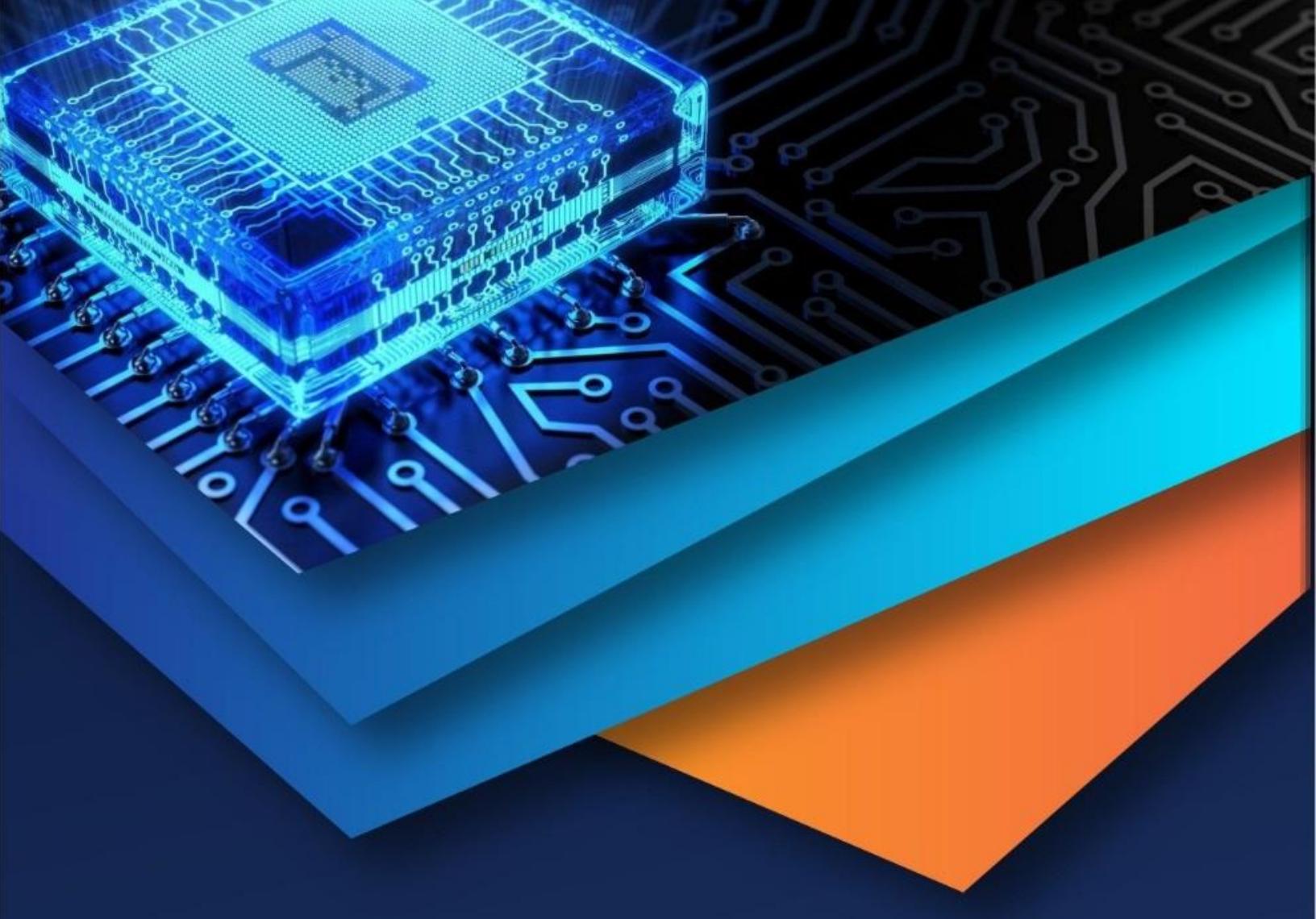
VII. CONCLUSION

The Internal Autobiographical Map (IAM) provides a potent and culturally sensitive framework for comprehending trauma, identity reconstruction, and resilience, according to this research. The results, which include quantitative and qualitative analysis, show that autobiographical mapping greatly improves personal identity coherence, especially for those who have experienced trauma. Journaling, meaning-making, narrative reconstruction, and pattern detection are examples of reflective autobiographical techniques that have been shown to improve emotional control, speed up healing, and increase resilience in the face of hardship. The significance of sharing one's own experiences as a means of achieving psychological well-being is highlighted by the close relationships found between IAM, resilience, and stress-coping skills. Its promise as a globally applicable paradigm for resilience is further supported by the sample's heterogeneity, which indicates that IAM-based treatments function well in a variety of demographic, cultural, and international situations. The research offers a methodical, comprehensive, and individualized approach to mental health treatment by conceptually bridging narrative psychology and resilience science. IAM essentially helps people to meaningfully recreate their inner narratives by reorienting the emphasis from symptom relief to the empowerment of personal storytelling. This promotes emotional empowerment, progress, and healing in spite of prior hardships.

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