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The Casework Approach in Handling Children Experiencing Psychosocial Trauma

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Abstract

This article examines the casework approach in handling children experiencing psychosocial trauma. The topic is significant because psychosocial trauma affects not only children's psychological well-being but also their behavior, social relationships, educational participation, sense of security, and overall social functioning. Children exposed to physical, emotional, or sexual abuse, neglect, bullying, family conflict, or the loss of caregivers require comprehensive and child-centered interventions. This study aims to explain the characteristics of psychosocial trauma in children, analyze the stages of the casework approach, and describe the roles of social workers in facilitating children's recovery. A qualitative descriptive design employing a literature review was adopted. Data were obtained from scholarly books, peer-reviewed journal articles, official reports, and policy documents related to social work, child protection, psychosocial trauma, and clinical social work interventions. The findings indicate that the casework approach provides a systematic framework encompassing engagement, assessment, intervention planning, implementation, evaluation, termination, and follow-up. Social workers perform multiple professional roles, including assessor, counselor, advocate, broker, mediator, case manager, and service coordinator. Effective implementation of casework requires trauma-informed, ethical, child-friendly, and multidisciplinary practices to promote sustainable psychosocial recovery and strengthen children's resilience.

Keywords: *Casework, Children, Psychosocial Trauma, Social Workers, Trauma-Informed Care.*

INTRODUCTION

Children represent one of the most vulnerable populations because their physical, cognitive, emotional, and social capacities are still developing, making them highly dependent on supportive environments to achieve healthy developmental outcomes (World Health Organization [WHO], 2026). Exposure to violence, neglect, exploitation, family conflict, bullying, or other adverse childhood experiences can disrupt developmental trajectories and significantly increase the likelihood of psychosocial trauma that persists into adolescence and adulthood (Tzouvara et al., 2023). Recent global evidence further demonstrates that childhood trauma is associated with long-term impairments in mental health, educational achievement, interpersonal functioning, and overall quality of life, highlighting the multidimensional consequences of unresolved traumatic experiences (SAMHSA, 2026). International organizations increasingly advocate trauma-informed and child-centered interventions that recognize psychosocial recovery as an integrated process involving psychological, familial, educational, and community dimensions rather than isolated therapeutic treatment (UNICEF Indonesia, 2025). This perspective has shifted contemporary social work practice from crisis-oriented responses toward comprehensive intervention models that prioritize resilience, participation, and ecological support systems for children affected by traumatic experiences (Rianda et al., 2023). Consequently, psychosocial trauma among children has emerged as a strategic concern within global child protection agendas because effective recovery depends not only on addressing psychological symptoms but also on restoring children's capacity to function safely within their social environments.

Indonesia reflects this global concern through persistently high levels of violence against children despite continuous improvements in child protection policies and institutional frameworks (Kementerian PPPA, 2024). The National Survey on Children's Life Experiences (SNPHAR) reported

that more than half of Indonesian adolescents aged 13–17 years have experienced at least one form of violence during their lifetime, while repeated victimization remains a common occurrence that substantially increases psychosocial vulnerability (Kementerian PPPA, 2024). Government records also indicate that thousands of children continue to require multidisciplinary protection services each year, illustrating that existing intervention mechanisms remain challenged by the complexity and recurrence of violence cases (Kementerian PPPA, 2025). Previous studies consistently demonstrate that psychosocial interventions contribute positively to reducing trauma symptoms, strengthening emotional regulation, and facilitating social reintegration among child survivors of violence and disasters (Astuti et al., 2022). Systematic evidence further confirms that mental health and psychosocial support programmes generate significant improvements in children's psychological well-being when interventions are adapted to individual developmental needs and contextual circumstances rather than implemented through standardized approaches (Bangpan et al., 2024). Nevertheless, the increasing complexity of psychosocial trauma indicates that intervention effectiveness depends not only on the availability of services but also on the ability of practitioners to develop individualized, continuous, and context-sensitive helping processes that address each child's unique experiences.

Scholarly attention has increasingly emphasized the strategic role of social work casework as an individualized intervention framework capable of integrating psychosocial assessment, therapeutic relationships, family engagement, advocacy, and coordinated service delivery for vulnerable children (National Association of Social Workers, 2021). Recent empirical studies have shown that casework facilitates children's psychological recovery by strengthening helping relationships, improving individualized intervention planning, and promoting active participation throughout the rehabilitation process (Febrianne & Ritonga, 2026). Similar findings indicate that assessment-based casework enables social workers to formulate interventions that are more responsive to clients' psychosocial conditions while simultaneously enhancing collaboration among families, communities, and formal support institutions (Khairunnas et al., 2026). Research conducted within child protection settings also demonstrates that reflective casework practice improves decision-making quality and supports more sustainable child-centered outcomes by balancing professional judgment with children's lived experiences (Harrison et al., 2025). Additional evidence from Indonesian rehabilitation services confirms that psychosocial interventions become more effective when integrated with individualized case management processes that acknowledge children's diverse trauma histories and social contexts (Jevania & Thamrin, 2026). Despite these important advances, existing literature continues to concentrate primarily on intervention outcomes or institutional service delivery, while comparatively limited attention has been devoted to comprehensively examining how the casework approach itself functions as a systematic framework for addressing psychosocial trauma among children across the entire continuum of social work practice.

Despite the growing body of literature on child psychosocial recovery, several conceptual and empirical limitations remain evident. Existing systematic reviews predominantly evaluate the effectiveness of psychosocial support programmes without adequately explaining how individualized social work processes translate evidence-based interventions into sustainable recovery outcomes for children with diverse trauma experiences (Bangpan et al., 2024). Studies conducted in Indonesian child protection settings mainly emphasize the implementation of psychosocial interventions or rehabilitation services, while providing limited discussion regarding the comprehensive application of casework principles throughout assessment, intervention, monitoring, evaluation, and case termination (Jevania & Thamrin, 2026). Likewise, recent publications on casework generally focus on specific client groups or institutional practices, making it difficult to establish a broader conceptual understanding of casework as an integrated framework for addressing psychosocial trauma among vulnerable children (Nugraha, 2025). Professional standards clearly recommend that clinical social workers employ holistic biopsychosocial assessments, ethical helping relationships, and multidisciplinary collaboration; however, the translation of these standards into child trauma practice remains insufficiently articulated within contemporary literature (National Association of Social Workers, n.d.). This gap suggests the need for a more comprehensive scholarly discussion that positions casework not merely as a sequence of professional procedures but as a child-centered intervention framework capable of integrating psychosocial assessment, individualized planning, family participation, and coordinated service delivery within child protection systems.

Addressing these limitations has become increasingly important because unresolved psychosocial trauma affects not only children's emotional well-being but also their educational participation, social functioning, resilience, and long-term developmental outcomes (WHO, 2026). Contemporary child protection policies emphasize rapid, integrated, and multidisciplinary responses that require coordinated collaboration among social workers, psychologists, health professionals, educators, legal institutions, and families to safeguard children's best interests (Kementerian PPPA, 2022). Evidence from social work practice further demonstrates that successful child recovery depends on the ability of professionals to establish trusting relationships, conduct comprehensive assessments, advocate for children's rights, and coordinate appropriate services throughout the intervention process (UNICEF Indonesia, 2025). Recent experiences within Indonesia also illustrate that social workers occupy a strategic position in restoring children's hope by bridging fragmented support systems and ensuring continuity of psychosocial assistance beyond the initial crisis stage (UNICEF Indonesia, 2025). Furthermore, social work programmes targeting child welfare have consistently highlighted that individualized case management strengthens service responsiveness by aligning intervention strategies with children's developmental needs and environmental conditions (Susilowati, 2023). Collectively, these findings indicate that strengthening the theoretical and practical understanding of the casework approach is essential for improving evidence-informed child protection practices capable of responding to increasingly complex psychosocial challenges.

This article positions the casework approach as a comprehensive framework for understanding and addressing psychosocial trauma among children through individualized, ethical, and child-centered social work practice. Rather than merely describing intervention procedures, this study synthesizes contemporary theoretical perspectives and recent empirical evidence to explain how assessment, helping relationships, intervention planning, implementation, evaluation, and termination collectively contribute to children's psychosocial recovery. The discussion also emphasizes the interconnected roles of families, communities, educational institutions, and multidisciplinary service providers in supporting sustainable recovery outcomes. By integrating current developments in child protection, trauma-informed care, and clinical social work practice, this article seeks to provide a broader conceptual understanding of casework within contemporary social welfare systems. The findings are expected to enrich academic discourse on clinical social work while offering practical insights for professionals involved in child protection services. Ultimately, this study contributes to strengthening evidence-informed social work practice by highlighting the strategic value of individualized casework in promoting children's resilience, social functioning, and long-term well-being.

RESEARCH METHODS

This study employed a qualitative non-empirical design using a literature review approach to develop a comprehensive understanding of the casework approach in addressing psychosocial trauma among children. Rather than collecting primary data from participants, the study synthesized secondary sources comprising peer-reviewed journal articles, scholarly books, official reports, and child protection policy documents. The literature was identified through systematic searches of academic databases and institutional publications, including Scopus-indexed journals, Google Scholar, WHO, UNICEF, the Indonesian Ministry of Women's Empowerment and Child Protection (KemenPPPA), and other authoritative organizations. Source selection followed predefined inclusion criteria, including relevance to social casework, psychosocial trauma, child protection, clinical social work, and mental health and psychosocial support (MHPSS), with priority given to publications issued between 2021 and 2026. Seminal works were incorporated selectively when they provided foundational theoretical perspectives essential for explaining the principles and development of the casework approach. The analytical framework was guided by qualitative thematic synthesis, enabling the integration of theoretical concepts, empirical findings, and policy perspectives into a coherent conceptual explanation aligned with the objectives of the study.

The analytical procedure consisted of four stages: literature identification, screening based on the established inclusion criteria, thematic coding, and interpretative synthesis. Selected publications were systematically classified according to major themes, including psychosocial trauma in children, the theoretical foundations of casework, stages of the casework process, the role of social workers, and multidisciplinary approaches to child recovery. Comparative analysis was then conducted to identify recurring concepts, convergent findings, and gaps within the existing literature, allowing the

development of an integrated conceptual framework for child-centered casework practice. To enhance methodological rigor, credibility was maintained through the use of authoritative and peer-reviewed sources, triangulation across multiple categories of literature, transparent application of selection criteria, and critical comparison of theoretical and empirical evidence. As this study relied exclusively on publicly available secondary data and involved no direct interaction with human participants, formal ethical approval was not required. Nevertheless, ethical research principles were upheld by accurately representing original authors' interpretations, ensuring proper citation of all sources, and maintaining academic integrity throughout the review process.

RESULTS AND DISCUSSION

Psychosocial Trauma and Child Vulnerability

Psychosocial trauma is recognized as a multidimensional condition that emerges when children experience adverse events exceeding their developmental capacity to cope effectively, thereby disrupting their emotional, cognitive, behavioral, and social functioning (World Health Organization [WHO], 2026). Unlike temporary psychological distress, psychosocial trauma often produces persistent consequences that interfere with children's developmental trajectories and compromise their ability to establish healthy interpersonal relationships throughout childhood and adolescence (Substance Abuse and Mental Health Services Administration [SAMHSA], 2026). Contemporary child development research emphasizes that traumatic experiences should be understood within ecological contexts, where interactions among family, school, community, and broader social environments collectively influence children's vulnerability and resilience (UNICEF, 2025). Exposure to violence, abuse, neglect, family disruption, disasters, armed conflict, or chronic social adversity has been consistently identified as major contributors to psychosocial trauma among children across diverse cultural settings (Tzouvara et al., 2023). Furthermore, trauma responses differ considerably according to children's developmental stages, previous life experiences, and the availability of supportive caregiving environments, indicating that identical traumatic events may generate different psychological outcomes among individual children (American Academy of Pediatrics, 2023). Therefore, understanding psychosocial trauma requires an integrated perspective that acknowledges both individual characteristics and environmental influences as determinants of children's recovery and long-term well-being (Bronfenbrenner, 1979).

The prevalence of psychosocial trauma among children has become an increasingly important concern within global child protection and public health agendas because of its substantial implications for lifelong development (WHO, 2026). UNICEF estimates that millions of children worldwide continue to experience violence, exploitation, displacement, or neglect, exposing them to cumulative traumatic experiences that frequently remain untreated (UNICEF, 2025). In Indonesia, recent national reports indicate that violence against children continues to occur across physical, emotional, and sexual domains despite continuous improvements in legal protection and institutional responses (Kementerian PPPA, 2024). Empirical evidence demonstrates that repeated adverse childhood experiences significantly increase the risks of depression, anxiety, post-traumatic stress disorder, emotional dysregulation, and impaired psychosocial functioning during adolescence and adulthood (Tzouvara et al., 2023). These consequences often extend beyond psychological symptoms by affecting educational participation, peer relationships, family interactions, and children's capacity to adapt to changing social environments (Bangpan et al., 2024). Consequently, psychosocial trauma should be regarded as both a mental health issue and a social welfare challenge requiring comprehensive and multidisciplinary intervention strategies (UNICEF, 2025).

The characteristics and impacts of psychosocial trauma vary according to the nature, duration, and severity of adverse experiences encountered by children throughout their developmental periods (SAMHSA, 2026). Younger children commonly demonstrate regression, excessive fear, sleep disturbances, emotional withdrawal, and attachment difficulties, whereas adolescents are more likely to exhibit depressive symptoms, aggressive behavior, self-harm, substance misuse, or prolonged social isolation (American Academy of Pediatrics, 2023). In addition to behavioral manifestations, prolonged exposure to traumatic stress has been associated with impaired executive functioning, reduced emotional regulation, and decreased academic performance resulting from disruptions in normal neurological development (National Child Traumatic Stress Network, 2024). Environmental conditions such as poverty, parental neglect, domestic violence, and limited access to mental health services further intensify children's vulnerability by weakening protective social factors that facilitate recovery (WHO,

2026). These findings indicate that psychosocial trauma represents a complex interaction between individual experiences and surrounding environmental conditions rather than an isolated psychological disorder (UNICEF, 2025). The diversity of traumatic experiences and their consequences is summarized in Table 1, which synthesizes the principal forms of trauma, associated risk factors, and their psychosocial implications as identified in previous studies.

Table 1. Characteristics of Psychosocial Trauma in Children

Type of Psychosocial Trauma	Common Causes	Major Psychosocial Effects	Implications for Child Development
Physical abuse	Domestic violence, corporal punishment, physical assault	Fear, anxiety, aggression, hypervigilance	Emotional instability, behavioral problems, impaired social adjustment
Emotional abuse	Verbal humiliation, rejection, intimidation, psychological violence	Low self-esteem, emotional withdrawal, depression	Poor self-concept, reduced resilience, difficulties in interpersonal relationships
Sexual abuse	Sexual exploitation, harassment, coercion	Shame, guilt, post-traumatic stress symptoms, distrust	Long-term psychological distress, impaired psychosocial functioning, relationship difficulties
Neglect	Lack of parental care, inadequate supervision, abandonment	Attachment disorders, developmental delays, emotional insecurity	Cognitive delays, poor academic achievement, limited social competence
Family conflict and domestic violence	Parental separation, chronic family conflict, intimate partner violence	Emotional distress, anxiety, behavioral dysregulation	Increased vulnerability to future mental health problems and social maladjustment
Disasters and humanitarian crises	Natural disasters, armed conflict, forced displacement	Grief, insecurity, traumatic stress, loss of social support	Interrupted development, prolonged psychosocial vulnerability, reduced educational participation

Table 1 illustrates that different forms of childhood trauma produce interconnected emotional, behavioral, cognitive, and social consequences despite originating from distinct adverse experiences. Although the manifestations differ across individuals, previous studies consistently identify emotional insecurity, impaired interpersonal relationships, and developmental disruption as common outcomes among children experiencing psychosocial trauma (SAMHSA, 2026). The literature further suggests that the severity of trauma is influenced not only by the characteristics of the traumatic event itself but also by the duration of exposure, family functioning, and the availability of supportive social networks capable of facilitating recovery (WHO, 2026). These findings reinforce ecological theories of child development, which argue that children's adaptation is shaped through continuous interactions between personal characteristics and environmental resources rather than by isolated events alone (Bronfenbrenner, 1979). Consequently, effective intervention should simultaneously address children's psychological needs, family relationships, educational participation, and community support systems instead of concentrating exclusively on symptom reduction (UNICEF, 2025). Such a comprehensive understanding provides a strong conceptual foundation for developing individualized intervention models capable of promoting sustainable psychosocial recovery among vulnerable children (Bangpan et al., 2024).

From the perspective of social work, the multidimensional nature of psychosocial trauma necessitates intervention approaches that are individualized, relationship-based, and responsive to children's developmental and environmental circumstances (National Association of Social Workers, 2021). Trauma-informed practice emphasizes that successful recovery depends on comprehensive

assessment, active child participation, family engagement, and coordinated multidisciplinary collaboration throughout the helping process (SAMHSA, 2026). Contemporary child protection frameworks similarly advocate integrated service delivery involving social workers, psychologists, healthcare professionals, educators, and community organizations to ensure continuity of psychosocial support beyond the immediate crisis period (UNICEF, 2025). These principles correspond closely with the philosophy of social casework, which focuses on individualized assessment, professional helping relationships, systematic intervention planning, and continuous evaluation to address clients' unique psychosocial needs (Kirst-Ashman & Hull, 2022). Rather than treating trauma solely as a clinical condition, the casework approach recognizes children's strengths, resilience, family resources, and environmental contexts as essential components of the recovery process (Nugraha, 2025). Accordingly, understanding the characteristics and vulnerabilities associated with psychosocial trauma provides the necessary theoretical basis for examining how the casework process can be implemented to facilitate comprehensive child recovery, which is discussed in the following section.

The Casework Process in Handling Child Trauma

The casework approach is one of the fundamental methods in professional social work practice that focuses on assisting individuals through structured, individualized, and relationship-based interventions to address psychosocial problems and improve social functioning (Kirst-Ashman & Hull, 2022). Unlike generalized social services, casework emphasizes comprehensive assessment of each client's unique experiences, strengths, needs, and environmental circumstances before determining appropriate intervention strategies (National Association of Social Workers [NASW], 2021). Within child protection services, the casework approach has gained increasing recognition because children experiencing psychosocial trauma require interventions tailored to their developmental characteristics and personal experiences rather than standardized treatment models (UNICEF, 2025). Trauma-informed social work further highlights that effective casework should recognize children's rights, participation, safety, and resilience as integral components of the helping process (Substance Abuse and Mental Health Services Administration [SAMHSA], 2026). Recent literature suggests that individualized casework contributes significantly to children's psychosocial recovery by strengthening helping relationships, promoting emotional security, and facilitating coordinated access to multidisciplinary support services (Jevania & Thamrin, 2026). Consequently, the casework process provides a systematic framework through which social workers can translate theoretical knowledge into practical interventions that support sustainable child recovery.

The implementation of casework follows a systematic sequence of professional activities beginning with engagement and continuing through assessment, intervention planning, implementation, evaluation, termination, and follow-up (Kirst-Ashman & Hull, 2022). During the engagement stage, social workers establish trust and create a safe environment that encourages children and their families to participate actively in the helping process while minimizing anxiety associated with previous traumatic experiences (NASW, 2021). Comprehensive assessment is subsequently conducted to identify children's psychosocial conditions, developmental needs, family dynamics, available support systems, and risk as well as protective factors that may influence intervention outcomes (SAMHSA, 2026). Based on assessment findings, individualized intervention plans are collaboratively developed by considering children's strengths, priorities, and available community resources to ensure that services remain relevant and achievable (UNICEF, 2025). Intervention implementation involves psychosocial support, counseling, advocacy, family strengthening, referral coordination, and collaboration with multidisciplinary professionals according to children's identified needs (Jevania & Thamrin, 2026). Continuous evaluation, followed by case termination and follow-up monitoring, enables social workers to assess intervention effectiveness while ensuring that children maintain adequate support after formal services have concluded (Kirst-Ashman & Hull, 2022).

The effectiveness of the casework process depends not only on adherence to procedural stages but also on the quality of professional judgment exercised throughout each phase of intervention (NASW, 2021). Trauma-informed practice requires social workers to adapt intervention strategies according to children's developmental capacities, cultural backgrounds, communication abilities, and emotional readiness rather than relying exclusively on standardized protocols (SAMHSA, 2026). Furthermore, children's active participation in decision-making strengthens their sense of autonomy, enhances trust in helping relationships, and promotes greater engagement during the recovery process

(UNICEF, 2025). Family members likewise represent essential partners because stable caregiving environments reinforce therapeutic gains achieved through professional interventions and contribute to children's long-term resilience (Bangpan et al., 2024). Multidisciplinary collaboration among social workers, psychologists, educators, healthcare providers, and legal authorities further improves service continuity by addressing children's complex psychosocial needs from multiple professional perspectives (WHO, 2026). The major stages of the social casework process applied in handling children experiencing psychosocial trauma are summarized in Table 2.

Table 2. Stages of the Social Casework Process in Handling Children Experiencing Psychosocial Trauma

Stage	Primary Objective	Main Activities	Expected Outcomes
Engagement	Build trust and establish a professional helping relationship	Initial contact, rapport building, informed consent, identification of immediate concerns	Child and family actively participate in the helping process
Assessment	Identify psychosocial needs, strengths, and risks	Psychosocial assessment, family assessment, identification of protective and risk factors	Comprehensive understanding of the child's condition
Intervention Planning	Develop individualized service plans	Goal setting, case planning, resource identification, multidisciplinary coordination	Individualized intervention plan tailored to the child's needs
Intervention	Address psychosocial trauma and strengthen functioning	Counseling, psychosocial support, family intervention, advocacy, referrals, crisis intervention	Improved emotional well-being, coping capacity, and social functioning
Evaluation	Measure intervention effectiveness	Progress monitoring, outcome assessment, review of intervention goals	Evidence of progress and recommendations for further services
Termination	Conclude professional services appropriately	Preparation for case closure, review of achievements, transition planning	Safe completion of the helping relationship
Follow-up	Maintain long-term recovery and prevent relapse	Periodic monitoring, coordination with community services, additional referrals if necessary	Sustainable recovery and continued psychosocial support

Table 2 demonstrates that the casework approach is not a single intervention but a continuous and interconnected process in which each stage contributes to children's psychosocial recovery. The literature consistently indicates that successful outcomes depend upon comprehensive assessment because accurate identification of children's needs forms the basis for individualized intervention planning and appropriate service coordination (SAMHSA, 2026). Similarly, engagement and therapeutic relationship-building remain fundamental throughout the helping process because children who have experienced trauma often demonstrate fear, distrust, and emotional withdrawal that may hinder active participation if professional rapport is not established effectively (UNICEF, 2025). Evaluation and follow-up are equally critical because psychosocial recovery is dynamic and may require additional interventions when new developmental or environmental challenges emerge after case closure (WHO, 2026). Therefore, the sequential structure presented in Table 2 should be understood as a flexible framework that allows social workers to adapt interventions according to children's evolving psychosocial conditions while maintaining professional accountability and service continuity (NASW, 2021). This flexibility distinguishes the casework approach from standardized intervention models by emphasizing individualized, evidence-informed, and child-centered decision-making throughout the helping process.

Overall, the casework process reflects the fundamental principles of professional social work by integrating assessment, intervention, collaboration, and evaluation within a coherent framework that prioritizes the best interests of children experiencing psychosocial trauma (Kirst-Ashman & Hull, 2022). Rather than concentrating solely on symptom reduction, contemporary casework seeks to strengthen children's resilience, restore family functioning, facilitate social reintegration, and promote long-term psychosocial well-being through coordinated multidisciplinary efforts (Bangpan et al., 2024). Recent empirical evidence further suggests that individualized case management improves service responsiveness because interventions are continuously adjusted to children's developmental progress and changing environmental circumstances (Jevania & Thamrin, 2026). These findings demonstrate that successful child recovery requires sustained professional engagement supported by systematic planning, ethical practice, and collaborative partnerships across multiple sectors (WHO, 2026). Accordingly, understanding the stages of the casework process provides an essential foundation for examining the specific professional roles assumed by social workers throughout children's recovery journeys. The following section therefore discusses how social workers facilitate psychosocial recovery through direct practice, advocacy, coordination, and multidisciplinary collaboration.

The Role of Social Workers in Child Recovery

Social workers occupy a central position in supporting children experiencing psychosocial trauma by facilitating comprehensive interventions that address psychological, social, familial, and environmental factors affecting child well-being (National Association of Social Workers [NASW], 2021). Unlike professionals whose responsibilities primarily focus on clinical treatment, social workers integrate psychosocial assessment, resource mobilization, advocacy, family support, and multidisciplinary coordination to promote children's overall functioning and long-term recovery (Kirst-Ashman & Hull, 2022). Contemporary child protection frameworks recognize that trauma recovery requires continuous professional engagement extending beyond crisis intervention to include prevention, rehabilitation, reintegration, and long-term monitoring of children's developmental progress (UNICEF, 2025). Trauma-informed social work further emphasizes respect for children's rights, strengths, resilience, and active participation throughout the helping process, ensuring that interventions remain responsive to each child's individual circumstances (Substance Abuse and Mental Health Services Administration [SAMHSA], 2026). Recent studies have shown that effective social work practice contributes significantly to improving children's emotional regulation, coping capacity, and social adaptation through individualized and relationship-based interventions (Jevania & Thamrin, 2026). Consequently, social workers serve not only as service providers but also as facilitators who strengthen children's capacity to recover within supportive family and community environments.

One of the primary responsibilities of social workers is conducting comprehensive psychosocial assessments that identify children's strengths, vulnerabilities, family dynamics, developmental needs, and environmental conditions influencing recovery (Kirst-Ashman & Hull, 2022). Assessment findings provide the foundation for individualized intervention planning by enabling social workers to prioritize children's immediate safety while addressing longer-term psychosocial needs through evidence-informed decision-making (SAMHSA, 2026). In addition to assessment, social workers establish therapeutic helping relationships that foster trust, emotional security, and meaningful participation among children who frequently experience fear, anxiety, or distrust following traumatic events (NASW, 2021). Effective communication, empathy, and culturally responsive practice are essential competencies because children often express traumatic experiences through behavior, play, or emotional responses rather than direct verbal disclosure (UNICEF, 2025). Social workers also assist families in understanding children's trauma reactions and strengthening caregiving capacities that support emotional recovery and healthy development (Bangpan et al., 2024). Through these integrated responsibilities, social workers create conditions that enable children to regain confidence, resilience, and adaptive functioning throughout the recovery process.

Recovery from psychosocial trauma requires close collaboration among multiple professionals because children's needs extend beyond the scope of any single discipline (WHO, 2026). Social workers therefore function as coordinators who connect children and families with psychologists, psychiatrists, healthcare providers, educators, legal authorities, and community organizations according to identified needs (UNICEF, 2025). This multidisciplinary collaboration facilitates comprehensive service delivery by integrating mental health interventions, educational support, legal protection, family strengthening,

and community-based rehabilitation within a unified child protection framework (SAMHSA, 2026). Furthermore, social workers advocate for children's rights by ensuring access to appropriate services, reducing barriers to care, and promoting decisions that prioritize children's best interests in accordance with national and international child protection standards (NASW, 2021). Collaborative practice also improves service continuity because communication among professionals reduces duplication of interventions while enabling consistent monitoring of children's developmental progress (WHO, 2026). The principal professional roles performed by social workers throughout the child recovery process are summarized in Table 3.

Table 3. Roles of Social Workers in Supporting Children Experiencing Psychosocial Trauma

Professional Role	Main Responsibilities	Contribution to Child Recovery
Assessor	Conduct psychosocial assessments, identify strengths, risks, and needs	Establishes an evidence-based foundation for individualized intervention planning
Counselor/Therapeutic Facilitator	Provide psychosocial support, emotional assistance, and therapeutic communication	Enhances emotional regulation, resilience, and coping capacity
Case Manager	Coordinate services, referrals, and multidisciplinary collaboration	Ensures continuity and integration of child protection services
Advocate	Protect children's rights, facilitate access to services, and represent children's best interests	Promotes equitable access to protection, healthcare, education, and social services
Family Facilitator	Strengthen parenting capacity, family communication, and caregiving environments	Improves family functioning and supports sustainable child recovery
Community Liaison	Mobilize community resources and collaborate with local institutions	Expands social support networks and promotes long-term reintegration

Table 3 demonstrates that the responsibilities of social workers extend beyond direct counseling to encompass multiple professional functions that collectively support children's psychosocial recovery. The literature consistently indicates that comprehensive recovery is more likely when assessment, advocacy, family engagement, case management, and multidisciplinary coordination are implemented as complementary rather than isolated activities (UNICEF, 2025). These professional roles reinforce one another because effective assessment informs intervention planning, coordinated service delivery improves access to appropriate resources, and sustained advocacy safeguards children's rights throughout the helping process (SAMHSA, 2026). Likewise, strengthening family functioning and community support increases the likelihood that therapeutic gains achieved during formal intervention will be maintained over time (Bangpan et al., 2024). Consequently, the effectiveness of social work practice should be evaluated not only by immediate psychological improvements but also by children's successful reintegration into supportive family, educational, and community environments (WHO, 2026). Such an integrated perspective reflects the holistic philosophy of professional social work in promoting children's long-term well-being and social functioning.

The expanding complexity of psychosocial trauma requires social workers to continuously develop professional competencies in trauma-informed care, interdisciplinary collaboration, ethical decision-making, and evidence-based intervention (NASW, 2021). Advances in child protection policies and mental health services have further increased expectations that social workers function as leaders in coordinating integrated support systems capable of responding to children's diverse developmental needs (UNICEF, 2025). Contemporary literature also emphasizes that effective practice depends on continuous professional training, reflective supervision, and organizational support that enable social workers to respond appropriately to increasingly complex child protection cases (WHO, 2026). These developments highlight that professional competence is not limited to technical

knowledge but also encompasses empathy, cultural sensitivity, communication skills, and ethical responsibility in working with vulnerable children and their families (Kirst-Ashman & Hull, 2022). Therefore, strengthening the capacity of social workers remains essential for improving the effectiveness and sustainability of psychosocial interventions delivered through the casework approach. Despite these professional strengths, practical implementation continues to encounter various institutional and operational challenges, which are discussed in the following section.

Challenges and Strengthening Strategies of Casework

Although the casework approach has been widely recognized as an effective framework for supporting children experiencing psychosocial trauma, its implementation remains constrained by various institutional, professional, and contextual challenges (World Health Organization [WHO], 2026). Child protection cases frequently involve complex psychosocial conditions that require long-term intervention, multidisciplinary coordination, and continuous monitoring, making the helping process considerably more demanding than conventional social service delivery (UNICEF, 2025). The increasing prevalence of violence, neglect, family conflict, and other adverse childhood experiences has further intensified the workload of social workers while simultaneously increasing the demand for specialized trauma-informed services (Substance Abuse and Mental Health Services Administration [SAMHSA], 2026). Previous studies indicate that many child protection agencies continue to experience limitations in human resources, financial capacity, organizational infrastructure, and access to integrated support systems, thereby affecting the quality and continuity of interventions (Jevania & Thamrin, 2026). In addition, differences in institutional procedures and service standards often hinder effective collaboration among professionals responsible for addressing children's complex psychosocial needs (National Association of Social Workers [NASW], 2021). These challenges demonstrate that successful casework implementation depends not only on professional competence but also on the capacity of organizations and child protection systems to provide coordinated and sustainable support.

At the professional level, social workers frequently encounter difficulties in balancing ethical responsibilities, heavy caseloads, and the diverse psychosocial needs of children and their families (NASW, 2021). Establishing trusting relationships with traumatized children often requires considerable time because many children demonstrate fear, emotional withdrawal, or reluctance to disclose traumatic experiences following prolonged exposure to violence or neglect (SAMHSA, 2026). Family-related challenges, including inadequate parental involvement, domestic conflict, poverty, and limited awareness of children's mental health needs, may further reduce the effectiveness of intervention plans developed through the casework process (Bangpan et al., 2024). Moreover, limited availability of psychologists, psychiatrists, specialized child protection services, and community-based mental health resources frequently delays referral processes and weakens service integration, particularly in resource-constrained settings (WHO, 2026). Recent literature also highlights that secondary traumatic stress and professional burnout among social workers may adversely affect decision-making quality, emotional resilience, and long-term service effectiveness if appropriate supervision and organizational support are unavailable (UNICEF, 2025). Consequently, strengthening workforce capacity and organizational resilience has become an essential prerequisite for improving trauma-informed casework practice.

Recognizing these challenges, recent child protection literature emphasizes the importance of strengthening casework through integrated, evidence-informed, and multidisciplinary strategies that improve both professional practice and institutional capacity (WHO, 2026). Continuous professional education on trauma-informed care, child development, psychosocial assessment, and ethical decision-making enables social workers to respond more effectively to increasingly complex child protection cases (NASW, 2021). Organizational support, including reflective supervision, manageable caseloads, standardized case management procedures, and accessible professional consultation, has also been identified as a key factor in maintaining service quality and preventing professional burnout (SAMHSA, 2026). Furthermore, strengthening collaboration among social workers, healthcare professionals, educators, legal institutions, community organizations, and families enhances service coordination and ensures that children receive comprehensive support throughout the recovery process (UNICEF, 2025). Policy development that prioritizes integrated child protection systems, adequate resource allocation, and expanded access to mental health and psychosocial services further contributes to the sustainability of individualized casework interventions (Bangpan et al., 2024). The principal implementation

challenges and recommended strengthening strategies identified in the literature are summarized in Table 4.

Table 4. Challenges and Strategies for Strengthening the Casework Approach in Handling Children Experiencing Psychosocial Trauma

Major Challenges	Implications for Casework Practice	Recommended Strengthening Strategies
Limited number of qualified social workers	High caseloads and reduced quality of individualized interventions	Increase recruitment, competency-based training, and professional certification
Limited multidisciplinary coordination	Fragmented service delivery and delayed interventions	Establish integrated referral systems and interagency collaboration mechanisms
Insufficient organizational resources	Reduced continuity of psychosocial support and follow-up	Strengthen institutional capacity, funding, and case management infrastructure
Family disengagement and socioeconomic barriers	Limited implementation of intervention plans and reduced child recovery outcomes	Enhance family empowerment, parenting education, and community participation
Limited trauma-informed competencies	Inconsistent assessment and intervention quality	Provide continuous professional development and reflective supervision
Inadequate child mental health services	Restricted access to specialized psychosocial care	Expand community-based mental health and psychosocial support (MHPSS) services

Table 4 demonstrates that challenges encountered in casework practice originate from multiple levels, including individual, organizational, and systemic factors that collectively influence the effectiveness of psychosocial interventions. While professional competence remains fundamental, the literature consistently suggests that sustainable child recovery also depends on institutional support, multidisciplinary collaboration, and accessible community resources capable of addressing children's diverse developmental needs (WHO, 2026). Similarly, organizational investments in workforce development, reflective supervision, and integrated service coordination contribute substantially to improving intervention quality while reducing professional burnout among social workers (SAMHSA, 2026). Strengthening family engagement and expanding community-based psychosocial services further enhance children's resilience by reinforcing protective environments beyond formal intervention settings (UNICEF, 2025). These findings indicate that improving casework effectiveness requires simultaneous enhancement of professional practice, organizational capacity, and child protection governance rather than isolated improvements within a single component (NASW, 2021). Therefore, comprehensive strengthening strategies should be viewed as complementary mechanisms that collectively promote sustainable, child-centered, and trauma-informed social work practice.

Overall, the literature confirms that the casework approach remains one of the most comprehensive professional frameworks for addressing psychosocial trauma among children because it integrates individualized assessment, therapeutic relationships, multidisciplinary collaboration, and continuous evaluation within a single helping process (Kirst-Ashman & Hull, 2022). Nevertheless, the increasing complexity of child protection cases requires continuous adaptation of casework practices to evolving social conditions, institutional demands, and emerging evidence on trauma-informed care (WHO, 2026). Future development of casework should therefore emphasize innovation in professional education, digital case management, integrated child protection systems, and evidence-based intervention models capable of improving service accessibility and effectiveness (UNICEF, 2025). Greater investment in organizational capacity and cross-sector collaboration will further strengthen the ability of social workers to provide timely, coordinated, and sustainable psychosocial support for vulnerable children (Bangpan et al., 2024). These improvements are expected to enhance not only children's psychological recovery but also their long-term resilience, social functioning, and overall

quality of life through comprehensive child protection systems (SAMHSA, 2026). Accordingly, strengthening the casework approach should remain a strategic priority for researchers, practitioners, and policymakers committed to advancing child welfare and psychosocial well-being.

CONCLUSION

This study concludes that children experiencing psychosocial trauma require comprehensive, individualized, and trauma-informed interventions that extend beyond immediate psychological support to address their broader developmental, social, and environmental needs. Psychosocial trauma influences multiple dimensions of children's well-being, including emotional regulation, behavioral adjustment, interpersonal relationships, educational participation, and overall social functioning, making holistic intervention essential for sustainable recovery. The literature further demonstrates that children's responses to trauma are shaped by the interaction between individual characteristics, family environments, and community support systems, emphasizing the importance of adopting an ecological perspective in child protection practice. Within this context, the casework approach provides a systematic and child-centered framework that enables social workers to assess children's unique circumstances and deliver interventions tailored to their specific strengths, risks, and recovery needs. By integrating individualized assessment, professional helping relationships, coordinated service planning, implementation, evaluation, and follow-up, casework supports not only symptom reduction but also the restoration of children's resilience, safety, and long-term psychosocial well-being. Consequently, strengthening the application of casework remains essential for improving the quality and effectiveness of services provided to children affected by psychosocial trauma.

The review also highlights the indispensable role of social workers in facilitating children's recovery through comprehensive assessment, psychosocial support, family engagement, advocacy, case management, and multidisciplinary collaboration. Nevertheless, successful implementation of the casework approach continues to be challenged by limited professional resources, unequal access to psychosocial services, fragmented interagency coordination, family-related barriers, and the increasing complexity of child protection cases. Addressing these challenges requires continuous professional development in trauma-informed practice, strengthened organizational capacity, integrated referral systems, and closer collaboration among social workers, healthcare professionals, educators, legal institutions, community organizations, and families. Equally important is the development of child-friendly services that uphold confidentiality, prioritize the best interests of the child, encourage meaningful participation, and minimize the risk of retraumatization throughout the helping process. Policymakers should therefore prioritize investment in professional social work capacity, accessible mental health and psychosocial support services, and integrated child protection systems capable of providing timely, coordinated, and sustainable interventions for vulnerable children. These improvements are expected to strengthen the effectiveness of casework while promoting equitable access to high-quality psychosocial support across diverse service settings.

Although this study provides a comprehensive conceptual synthesis of the casework approach in handling children experiencing psychosocial trauma, its findings are limited by the non-empirical nature of the literature review and the absence of direct evidence from field practice. Future research is therefore encouraged to examine the implementation and effectiveness of casework within diverse child protection contexts through qualitative, quantitative, or mixed-methods designs involving children, families, and social work practitioners. Comparative studies across institutional settings and countries would also contribute to a broader understanding of how organizational, cultural, and policy factors influence trauma-informed casework practice. In addition, further investigation is needed to evaluate the long-term outcomes of casework interventions in strengthening children's resilience, social functioning, emotional well-being, and reintegration into supportive family and community environments. The integration of digital case management systems, multidisciplinary service models, and community-based psychosocial interventions also represents promising directions for future scholarship and professional innovation. Advancing evidence-based knowledge in these areas will support the continuous refinement of child-centered casework and contribute to more responsive, ethical, and sustainable child protection practices.

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