

## The Anchor in the Storm: A Healthcare Professional's Guide to Preventing and Managing Collective Trauma

Dear Editor,

Collective trauma represents a profound and distinct pathological damage to the group psyche resulting from a shared catastrophic event that overwhelms the collective coping mechanisms of a society. The etiology of this condition is multifactorial and results from discrete, high-intensity events such as acts of terrorism, mass violence, and natural disasters such as earthquakes and pandemics, as well as from chronic stressors.<sup>[1]</sup>

In Jungian psychology, collective trauma can be understood as wounds that resonate in the collective unconscious, shaping shared archetypes, myths, and psychological patterns across generations. Jung's idea of the collective unconscious provides a framework for understanding how trauma is not only personal, but also embedded in the psyche of entire groups or societies. Such trauma can awaken the collective shadow and unleash destructive forces in the collective unconscious.<sup>[2]</sup>

The consequences of this dysfunction are characterized by widespread psychological distress, increased population-level prevalence of posttraumatic stress disorder, major depressive disorders, anxiety, and a significant increase in substance abuse as a maladaptive coping mechanism. Furthermore, the impact on socioeconomic functioning is profound, disrupting local economies, reducing labor productivity, and placing unsustainable strain on essential services, including the health care system itself, thereby creating a vicious cycle of decline.<sup>[3]</sup>

Reducing and managing collective trauma requires a deliberate, systematic, multi-phased public health intervention led by health care professionals. This intervention is achieved through leading community question-and-answer sessions, facilitating support groups, and supporting public memorials, which are essential therapeutic approaches to processing shared grief and creating a new, coherent narrative that fosters resilience. At the same time, health care systems must implement robust, population-wide screening protocols to identify, and treat the long-term psychological consequences of trauma.<sup>[4]</sup>

Perhaps the most important and often overlooked component of this intervention is systematic support for the health care professionals itself. It is essential to support the mental health resources available, and institutionalize policies that proactively address burnout in these individuals. A traumatized caregiver cannot effectively manage a traumatized population.<sup>[5]</sup>

In conclusion, contemporary evidence positions mass trauma not as a marginal social concern, but as a definitive determinant of public health with a clear pathophysiology and predictable devastating consequences. The medical community must formally recognize the role of health care professionals as guardians of the social fabric, with a dual responsibility: To apply a structured, evidence-based framework for community psychological first aid, while simultaneously ensuring the integrity of their ranks. By integrating this approach into mainstream medical and public health practices, it is possible to shift from a routine response to a crisis to a proactive approach to defending community safety.

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There are no conflicts of interest.

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